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HOMŒOPATHIC CONVENTION.



PAPERS

READ BY REPRESENTATIVES OF

THE BRITISH HOMŒOPATHIC SOCIETY.

THE WORLD'S HOMŒOPATHIC CONVENTION,

HELD AT

PHILADELPHIA IN 1876.

P A P E R S

READ BY REPRESENTATIVES OF

THE BRITISH HOMŒOPATHIC SOCIETY.



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THE
WORLD'S HOMŒOPATHIC CONVENTION.

THE HISTORY AND STATISTICS OF THE INTRODUCTION, GROWTH, AND REPRESENTATION OF HOMŒOPATHY IN GREAT BRITAIN AND IRELAND.

By C. B. KER, Esq., M.D.

THOUGH Hahnemann published his *Organon of Medicine* as far back as 1810, it was not till 1826 that any professional notice was taken of homœopathy in this country. In that year, at a meeting of the Medical Society of London, the subject was introduced and two of the members urged that it was one which should be inquired into. A large majority of the Society, however, voted otherwise and so the question dropped. Attempts have been made more than once to induce the Society to allow their minutes to be examined for the purpose of ascertaining the particulars of this first discussion of the merits of homœopathy, but unsuccessfully.

In the following year, 1827, there came to London in the suite of Prince Leopold of Saxe Cobourg, as his physician, Dr. Quin. He had studied homœopathy in Germany and had practised it in Naples, and had become convinced of its superiority to the lawless and empirical medicine of the time. He it was who introduced the practice of homœopathy into England. To him is due the distinction of having made us here, in these islands, first acquainted with Hahnemann and his great discovery of the doctrine of similars.

It has been said that Dr. Belluomini was the first to practise homœopathy in this country. It has also been claimed for Dr. Romani and Dr. Tagliani, two physicians introduced into London by the late Earl of Shrewsbury, that they were the first to do so. But an examination of dates shows that those three physicians were not in England so early as 1827. Whatever credit, therefore, is due to them for having so early practised the new system, they must not deprive Dr. Quin of the honour of being the first of the pioneers of homœopathy.

Till 1833 no public notice was taken of Dr. Quin or his practice, but then his success was so great as to attract the attention of the College of Physicians. In the mistaken belief that their power was equal to the occasion they addressed a note to him couched in the following terms:—
“We, the censors of the Royal College of Physicians, London, having received information that you are practising physic within the City of London and seven miles of the same, do hereby admonish you to desist from so doing until you have been duly examined and licensed thereto under the common seal of the said College, otherwise it will be the duty of the said College to proceed against you for the recovery of the penalties thereby incurred. The Board for examining persons who have the requisite qualification is holden at the College on the first Friday in every month.”

This note, of date January 4th, 1833, was signed by the censors. No reply being vouchsafed to it by Dr. Quin, a second was despatched to him on February 1st, and to this effect:—“Sir, I am desired by the censors of the Royal College of Physicians to express their surprise that they have received no answer to their letter of January 4th, admonishing you to desist from practising physic until you have been duly examined. The censor’s board meets for the purpose of examinations on the first Friday of every month.—I am, sir, your obedient servant,” &c.

To this second note Dr. Quin sent the following reply:—
“Feb. 3, 1833. Sir,—Your letter of the 1st current was only delivered to me yesterday, and I hasten to beg that you will lay before the censors of the Royal College of

Physicians that it was out of no disrespect to them that I did not answer their communication of January 4th ultimo, but because I did not conceive that a document of the nature sent to me required an answer. I have now the honour to acknowledge its receipt, as well as that of your letter containing a repetition of the information conveyed to me in your communication.—I have the honour to be, &c.,
FREDERIC F. QUIN."

This letter was not replied to by the College of Physicians. Dr. Quin was proceeded against for no penalties and received no more admonishments. One of the censors advised the College to let Dr. Quin alone as the term of homœopathy's existence could not be prolonged beyond two years. So ended the first attack on homœopathy. It proved the first of a series. From that day to this, with little intermission, the battle has raged between the two schools,—a battle which, considering the inequality of the forces, must have long ago terminated in favour of the larger army, had it not been that truth and fact allied themselves to the smaller one and fought as only truth and fact can do. It must be granted also that our adversaries were heavily handicapped. They had no faith to fight for and had no confidence in their own cause. Their leaders had often condemned the prevailing therapeutics in strong language, and yet it was an attempt to improve therapeutics that roused all their combativeness.

A history of the introduction and growth of homœopathy in these islands would be incomplete without something more than a passing notice of the opposition it has met with. That opposition has come from individuals, from the press, from societies, from colleges, and from coroners' courts.

The second attack made against homœopathy was in Edinburgh, and a fierce one it proved to be. It led to a contest which lasted many years, excited partly by the success in private and dispensary practice of Dr. Black and Dr. Russell, but chiefly by the conversion to the new faith of Dr. Henderson, the Professor of Pathology in the University. This conversion took place in 1844, and roused to the uttermost

the amazement and indignation of his colleagues and of the whole medical profession. An attempt was immediately made to deprive him of his chair, an attempt which happily failed. Another attempt was but too successful, and that was to deprive him of his hospital appointment and clinical professorship. The attempt to deprive him of his chair took the form of a petition from one of his colleagues, the well-known surgeon, Syme, to the patrons of the University, the Edinburgh Town Council. Homœopathy, Syme said, is opposed to and inconsistent with the principles which the medical faculty have been appointed to teach; attendance, therefore, on Dr. Henderson's lectures is a serious obstacle to medical graduation; and a homœopathic professor causes distrust of the medical teaching of the University. The prayer of this petition was refused, and chiefly because no complaint was made against Henderson's discharge of his professional duties. Syme, about the same time, at a meeting of the Medico-Chirurgical Society of Edinburgh, moved the following resolution: "That the public profession of homœopathy shall be held to disqualify for being admitted or remaining a member." The resolution was carried, and Henderson expelled from the Society. The Council of the London College of Surgeons acted with more discretion. Their resolve was to the effect, "That it is not expedient for the College to interfere in the matter of homœopathy." The Edinburgh University Faculty of Medicine passed resolutions about the same time which were of the same character as the memorial sent to the University patrons by Professor Syme. The Edinburgh College of Physicians refused its Fellowship to Dr. Black, simply on the ground of his practice being homœopathic. Much was done and much was written in the same spirit; a fuller report of which than can be given here will be found in the chapter on the history of British homœopathic literature.

The next event in the controversy between the two schools was the publication, in January, 1846, of Sir John Forbes's celebrated article in the *British and Foreign Medical Review*. It fell like a bomb-shell upon the medical body. It startled and humiliated them. It for the first time opened

their eyes to the fact that there was something to be said for the new medical heresy as well as against it, and to another fact that their own practice was so bad that it could scarcely be worse. How was this article received? By a roar of indignation which was echoed and re-echoed through England, Scotland, and Ireland. It is said, and probably with truth, that, before the issue of the next number of the *Review*, fourteen hundred subscribers withdrew their names from the list of purchasers, and yet Sir John Forbes had condemned homœopathy in strong language. What, then, was the meaning of this indignation? It was simply this, that the doctrine of similars was treated as one which deserved and demanded examination; that its advocates were treated as brethren, though mistaken ones, and their statistics considered genuine; and, chiefly, that they were asked to believe, first,—“that in a large proportion of the cases treated by allopathic physicians, the disease is cured by nature, and not by them; secondly, 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; thirdly, 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 more generally practised, if all remedies, at least all active remedies, especially drugs, were abandoned.”

Sir John Forbes suffered much for his honesty, and felt himself obliged to resign the editorship of the quarterly journal he had so long and ably conducted.

A still more decided measure was taken to check the advance of homœopathy shortly afterwards by the Edinburgh University. Mr. Pope, who was known to have been studying the new medical doctrine, presented himself for examination to the Board of Examiners. On the termination of this examination, which was allowed to be satisfactory, except on one subject, he was asked whether he intended to practise homœopathically. On replying that it was his intention to study homœopathy, the question was put to him,—Will you burn or return your diploma if you become convinced of its truth? The reply being in the

negative, Syme said that he could not see how a man could call himself a graduate of a university which repudiated him. On the next day an extraordinary meeting of the faculty took place to consider what was to be done with Mr. Pope, the issue of which was communicated to him by Professor Miller. He was told that he would be examined again a few months later if they knew how he intended prescribing *Nux vomica*—in two-grain doses, or in the decillionth of a grain. You know quite well, he was told, that we grant degrees here licensing to practise that system of medicine which is at present established, and therefore we must know whether you intend to do so before you can graduate; thus ignoring the fact that a diploma is a certificate of knowledge merely, not one showing that certain articles have been subscribed to as a confession of faith. So far from this conduct on the part of the Edinburgh University receiving the condemnation it deserved in the medical world, it was approved and applauded. The Universities of St. Andrew's and Aberdeen resolved on following the example shown them, and not long afterwards refused its diploma to students who had passed their examinations on the score of their being homœopathists. Mr. Pope, refusing to bind himself not to examine and not to practise homœopathy, was obliged to leave Edinburgh without his degree. In the following year, however, at the request of the "Association for the Protection of Homœopathic Students and Practitioners," an association which had been called into existence chiefly by the treatment he had been subjected to, Mr. Pope received, without examination, the diploma of the Homœopathic College of Pennsylvania, an act of kindness and liberality on the part of that college which was deeply felt and acknowledged in England, not only by the then small body of homœopaths but by all sticklers for and maintainers of freedom of opinion, especially on questions of science.

But the chief approvers of the short-sighted tyranny of the Edinburgh University were the members of a representative medical body in England, the Provincial Medical and Surgical Association. Its meeting at Brighton,

in August 1851, proved to be an era in the history of the conflict between the two bodies. They did that in cold blood, and after due deliberation, which at Edinburgh was done on the spur of the moment, though one of the greatest of modern philosophers, Sir William Hamilton, had expressed himself to this effect on the rejection of Mr. Pope,—“I see that the medical examiners have been publicly accused of rejecting a candidate, not for incompetence, but on the confessed ground that he was supposed favorable to a medical theory rising dangerously in opinion and not in unison with the medical theory of his examiners. On such a step, such an injustice, such an absurdity, the old sectional examiners would not have ventured. If the charge be well founded, an Edinburgh medical graduate may now be an ignorant, unable to spell his mother-tongue, but must not be a proficient, professing to think for himself. So certain also are now the opinions of a majority touching the very practice and in the very body where heretofore medical scepticism was always in proportion to medical wisdom. Our Gregorys and Thomsons, what would they now say to this ?” Though such an indignant protest had come from such a man, the association moved a vote of thanks to the Edinburgh, Aberdeen, and St. Andrew’s Universities for their “determined stand against homœopathic delusions and impostures.” But, not contented with approving of steps taken to put down the said delusions, it “passed some original resolutions having the same object in view and to the following effect : “1st. That it is the opinion of this association that homœopathy, as propounded by Hahnemann and practised by his followers, is so utterly opposed to science and common sense, as well as so completely at variance with the experience of the medical profession, that it ought to be in no way, or degree, practised or countenanced by any regularly-educated medical practitioner.” “2nd and 3rd. That as homœopaths have spoken contemptuously of medicine as regularly practised, it is derogatory to the honour of members of this association to hold any kind of professional intercourse with them.” “4th. That real homœopathic practitioners, those who practise

homœopathy in combination with other systems of treatment, and those who hold professional intercourse with homœopaths, ought not to be members of this association." Not a word in these resolutions, it will be observed, to show that the practice of homœopathy is inefficacious, not a word to show that those passing them had tested and found it wanting, not a word in proof of the statement that it is opposed to science. And yet they were passed unanimously by a body of three hundred medical men, and, still more, have influenced the conduct ever since of the great majority of the profession in this country. It is right to mention here that Dr. Conolly, the well-known Hanwell physician, protested strongly against the action of the Provincial Medical and Surgical Association in relation to homœopathy. It is not a little strange that one of the reasons given for excluding homœopaths from the Society should be, that they had spoken contemptuously of medicine as usually practised. Was this a wilful ignoring or ignorance of the fact that such men of their own body as Sir John Forbes, Sir Astley Cooper, and Dr. Baillie, had spoken more disparagingly and in more condemnatory language of their practice than homœopaths had done?

Soon after Mr. Pope's rejection by the Edinburgh University, a petition was presented to the patrons, signed by 3337 advocates of homœopathy, praying that they would interfere to prevent the establishment of a test-act by which medical students would be refused or granted a diploma according as their views were, or were not, in harmony with those of their examiners. The petition showed—"That the art of medicine, inasmuch as it is progressive, and dependent to a great extent upon the advancement of the related sciences, is continually liable to change: so that the wisdom of one generation is the folly of the next; and that the endeavour to prevent its free growth in any direction is unwise, and cannot but be injurious." The result was that the patrons, feeling that they could not interfere in the matter, passed on the petition to the College committee. The committee refused also to interfere, and directed that it be "transmitted to the Principal of the

University, for the information of the *Senatus Academicus*." No official utterance proceeded from that learned body, but the patrons felt themselves authorised to declare to the petitioners that their prayer was granted; that that which caused their complaint had been done somewhat inadvertently, and that no student would henceforth find a barrier in the way of his obtaining his degree, whatever his notions regarding homœopathy might be. In this rather undignified way did the medical faculty of the University of Edinburgh get out of their difficulty. An apology was, perhaps, too much to expect from them, but it was due to themselves and to the University they represented to acknowledge that a false step had been taken, and that it would not be taken again. But a gift-horse must not be looked in the mouth. The petitioners gained their end. From that time no student has been treated as Mr. Pope was, and the Universities of Aberdeen and St. Andrew's have followed the example of Edinburgh. Besides the incidents I have mentioned of the battle between the two schools, many others might be recorded illustrative of the bitter, persecuting spirit of the stronger party, and the indomitable courage of the smaller and weaker. A passing allusion to some of them may be made. In 1843 Mr. Newman was dismissed by the Poor Law Board from his post of surgeon to the Wells Union because he treated the poor in his district homœopathically, and this notwithstanding the approbation of the guardians of his conduct and practice, and their reelection of him to the office of their surgeon, and a petition of the poor under his care to the Poor Law Commissioners for his continuance as their medical officer. This was the first time the Government came into collision with homœopathy. In 1855 a memorial was addressed to the War Office, very numerously signed by members of both houses of Parliament, praying that a hospital be established near the Crimea, where war was then raging, so that such invalids as wished it might have the advantage of homœopathic treatment. Lord Panmure, the War Minister, refused to grant the prayer of this memorial on the ground that the great principles of medical science must be proved to be

erroneous and abandoned before Government would consider itself justified in ceasing to be directed by its professors and teachers. In the same year occurred the rejection by the Board of Health, at the instigation of the College of Physicians, of the cholera returns of the London Homœopathic Hospital. The Board had requested that all the hospitals in London should send in to them a report of the cholera cases admitted, of the treatment, and of the result.

Accordingly, the Homœopathic Hospital sent in its report of thirty-three cases treated within its walls, seven of which proved fatal. On the Board of Health's Report being laid before Parliament it was discovered that the returns sent in by the Homœopathic Hospital had been omitted, and, on an explanation being demanded of this omission, the reply was to the effect that the College of Physicians, to whom all the returns had been submitted, had resolved, "That by introducing the returns of homœopathic practitioners, they would not only compromise the value and utility of their averages of cure as deduced from the operation of known remedies, but they would give an unjustifiable sanction to an empirical practice alike opposed to the maintenance of truth and to the progress of science." And this reply was considered satisfactory by the Board of Health, Parliament, and the country, and that notwithstanding the fact that Dr. MacLoughlin, one of the Board of Health's inspectors, had testified to the genuineness of the cholera cases admitted into the Homœopathic Hospital! In the recorded acts of public bodies it would be difficult to find one more grossly unjust. It should be stated here that the rejected report was, after all, laid upon the table of the House of Commons, but not as part of the reports sent in by the College of Physicians.

In 1862 the College of Surgeons of Ireland passed resolutions which must now be noticed here for the purpose of introducing Whately, Archbishop of Dublin's, remarks upon them. They were:—"That no fellow or licentiate of the Royal College shall pretend or profess to cure diseases by the deception called homœopathy, or the practice called mesmerism, or by any other form of quackery." "It is

also hereby ordained that no fellow or licentiate of the College shall consult with, meet, advise, direct, or assist any persons engaged in such deceptions or practice, or in any system or practice considered derogatory or dishonorable by physicians or surgeons." The archbishop on being asked by a London physician what he thought of these ordinances replied—"I was well aware of the detestable act of tyranny you refer to. . . . I have always protested against such conduct in all departments of life. The present is one of the trades' unions. A man has a right to refuse to work except for such wages, or under such conditions, as he himself chooses to prescribe, but he has no right to compel others to concur with him. If there is any mode of medical treatment he disapproves of, or any system of education which he thinks objectionable, he will be likely to keep clear of it of his own accord, without any need of compulsion or pledges. Those again who may think differently ought not to be coerced or bullied. Some persons seem to have a notion that there is some connection between persecution and religion, but the truth is it belongs to human nature. In all departments of life you may meet with narrow-minded bigotry and uncharitable party spirit. . . . The truth is, the majority of mankind have no real love of liberty, except that they are glad to have it themselves, and to keep it all to themselves; but they have neither spirit enough to stand up firmly for their own rights, nor sufficient sense of justice to respect the rights of others. They will submit to the domineering of a majority of their own party, and will join with them in domineering over others. In the midst of the disgust and shame which one must feel at such proceedings as you have alluded to, it is some consolation to the advocates of the system denounced to see that there is something of a testimony borne to them by their adversaries, who *dare* not trust the cause to the decision of reason and experience, but resort to such expedients as might as easily be employed for a bad cause as a good one."

In the controversy between the two schools there is no more noticeable incident than the letters of those two great men, Sir William Hamilton and Whately, and it is not a

little for homœopathy to boast of that it called forth from them such indignant and such memorable protests against the way in which its adversary carried on the fight. It struck them, as it must have struck all unbiassed and thinking onlookers, that the argument against the new medical doctrine never took the form of an appeal to experience, and yet in all times and ages experience has been allowed to be the test in medicine of any new therapeutic formula. It is in hospitals and dispensaries, not in editors' parlours and doctors' studies, that therapeutic questions can be determined. There is ample justification for Whately's charge against our opponents, that they "dare not trust the cause to the decision of reason and experience."

Enough has now been said, though very far from all that could be said about the opposition and persecution homœopathy has been exposed to since the day when Dr. Quin attracted the attention of the censors of the College of Physicians. The conflict carried on at Liverpool and Birmingham, on the floor of their respective medical institutes, resulting at the latter place in favour of homœopathy, and at Liverpool in favour of its adversary, can receive no more than this passing notice. No more also can be said here than simply to mention the fact that the medical journals are closed to us, whatever may be the attacks made in their pages against us, that certain tradesmen dare not publish or sell our books, that directories do not mention them, that even our advertisements are refused insertion in their journals, that public appointments are not open to us, that clubs and societies black-ball us if we are candidates for admission into them, coroners' inquests are held on our fatal cases (it must be allowed that this weapon against us has not been used for a long time; twenty years ago it was frequently employed; especially when the coroner happened to be a medical man), and that professional assistance is never given to our patients until we are in the first place dismissed from attendance upon them. All this is the more surprising, the more inexplicable, when we consider the admitted fact that homœopathy has not only indirectly but directly influenced the practice of medicine, and that the obligations of the old

to the young school are numerous and important. Heroic practice is forgotten. The lancet and cupping-glasses are rarely if ever used. Polypharmacy is having fewer advocates; even single medicines are sometimes prescribed. Physiological provings are recommended, and that without an allusion to the fact that we have been proving medicines on the healthy body since the first years of this century.

Medicines introduced by us are being prescribed, and for the same diseases and in small doses; *Aconite*, for instance, and *Belladonna*, *Hepar sulphuris*, *Arsenic*, *Phosphorus*, *Arnica*, *Mercury*, *Camphor*, *Ipecacuanha*, *Cantharides*, and many others. Trousseau practised homœopathy under the name of *medicine substitutive*. Dr. Harley explains the action of specifics by saying that there are two similar effects—the one of the disease upon the body, and the other of the medicine, and that they interfere with and neutralise each other—an explanation of cure by a specific medicine given by Dr. Drysdale and others of our school. Specifics are being laboriously searched for. Dr. Keith became a convert to homœopathy “by following out the teaching of some of our most eminent writers, and not by studying the system itself.” “The safest guide,” says Dr. Chambers, “to a knowledge of the effect of medicine on disease is that of their effect on health.”

It is now found out that medicines have a special affinity for certain tissues.

Notwithstanding these admitted facts, it is more than strange that the body who are under such obligations to us should continue, down to this date, so to oppose and persecute us.

It is time now to ask what effect on the rise and progress of homœopathy this determined opposition had. It has been seen that Dr. Quin introduced homœopathy into England in 1827. From that date to 1837 there practised in London about ten other physicians, one or two of them for only a short time. They were Drs. Belluomini, Unwin, Ringdove, Taglianini, Massol, Cronin, Dunsford, Simpson, Cameron, and Curie. During the next ten years, from 1837 to 1847, there was a rapid increase in the number of practitioners.

At the last-named date "there were between seventy and eighty. In the interval, homœopathy was introduced into Scotland; into Edinburgh by Drs. Black and Russell; and into Glasgow by Dr. Scott. It was also introduced into Ireland by Dr. Charles and Dr. Gustavus Luther, and by Dr. W. Walter. In these years many dispensaries were established, and books published, and journals set agoing, but the report on them is given elsewhere; it is not necessary in this place, therefore, to more than mention the fact of their existence. The fact also should be given of the proving in these years of *Kali Bichromicum* by Dr. Drysdale, a proving which should have been followed up by others. Had it been so, and had every new medicine been proved as thoroughly and efficiently, our scientific status would have been higher. During the next ten years our numbers increased greatly. In 1857 there were upwards of two hundred practitioners in the three kingdoms, and eighty-three institutions and dispensaries. Two important conversions to homœopathy took place in this decade, and both of distinguished men, Dr. Horner and Dr. Conquest. The former had been President of the Provincial Medical and Surgical Association in the year that body met at Brighton and passed the celebrated resolutions against homœopathy. Dr. Conquest was well known as the author of the textbook, *Outlines of Midwifery*, and lecturer on midwifery at St. Bartholomew's. In these years, six weekly, monthly, or quarterly journals were established or continued: *The British Journal of Homœopathy*, *The Monthly Homœopathic Review*, *The Homœopathic Times*, *The Homœopathist*, *The Homœopathic Review*, and *The Provincial Homœopathic Gazette*. There were also published between sixty and seventy works relating to the history and principles and practice of homœopathy. In 1852 Dr. Sharp commenced the publication of his essays, a very notable fact in this decade, and at short intervals of time they have been continued down to the present year. In the last of the series he has given to the world his doctrines of organopathy and antipraxy, doctrines which, if he establishes, will influence more the practice of medicine than any except

Hahnemann's, that have been advanced since the days of Hippocrates. But Dr. Sharp and his works will have fuller mention in another chapter. The number of practitioners did not increase so much during the next ten years in the interval between 1857 and 1867. In the latter year there were 261 in the three kingdoms, and 72 dispensaries or hospitals. In 1858 the Medical Act was passed, an event forming an era in the history of homœopathy. Had it not been for the "Society for the Protection of Homœopathic Practitioners and Students," the legal position of homœopathy would not have been secured by this Act. But after a hard fight a clause was introduced by which licensing bodies are forbidden on pain of having their privileges taken from them "to impose upon any candidate offering himself for examination an obligation to adopt or refrain from adopting the practice of any particular theory of medicine or surgery as a test or condition of admitting him to examination or of granting a certificate."

The history of this Act is given in another chapter, so no more need be said of it here. There has been an increase from year to year in the number of practitioners during the years which have elapsed from 1867 down to the present time. The numbers then were, as I have said, 261. In this year they are close on 300 in the three kingdoms and Channel Islands. There has been an increase also in the number of institutions and dispensaries, which now number 120. During these years congresses, which, beginning with the year 1850, had been held regularly for many years, were revived. The first was held in 1870, under the presidency of Dr. Drysdale, at Birmingham; the second in 1871, under that of Dr. Madden, at Oxford; the third in 1872, at York, Dr. Black being President; the fourth, presided over by Dr. Sharp, was held at Leamington in 1873; in 1874 the congress was held in London, Dr. Dudgeon presiding; and in 1875 in Manchester, under the presidency of Dr. Bayes.

Another fact of these last years is the publication of the *British Homœopathic Pharmacopœia* under the auspices of the "British Homœopathic Society." It supplied a

want which had been long felt, and was prepared by a committee of the Society of which Dr. Madden was chairman. The demand for this work has already called for a second edition, which is now in the hands of the printer; it is also to be published under the sanction of a committee of the Society; but the chief labour in its preparation has fallen upon its able chairman, Dr. Drury. An important event in 1875 was the inauguration of a course of lectures at the London Homœopathic Hospital. Dr. Dudgeon, Dr. Richard Hughes, and Dr. R. D. Hale were the lecturers appointed by the British Homœopathic Society, Dr. Dudgeon's subject being "The History and Principles of Homœopathy and the Materia Medica;" Dr. Hughes's, the "Homœopathic Materia Medica and Therapeutics;" and Dr. Hale's, "Practical Medicine." It is to be hoped and expected that an impetus will be given by these lectures to the advancement of medicine, and that, among other good results, will be not only the indoctrinating of the audiences with the principles and practice of homœopathy, but the indication of the fact of the obligations owing to it by the medicine of the day. The last incident of the history of homœopathy worthy of mention is one which we have already alluded to, and which we may hope argues a change to the better in the attitude towards us of our rivals and opponents.

Within the last few months the Birmingham Medical Institute has been established. Dr. Evans, a late physician of that town, left his library to his brethren of the profession. The son of another Birmingham physician, Dr. Ingleby, left to the institute £5000, on the condition of suitable buildings being erected in memory of his father; £2000 more has been subscribed by the medical men of the place. The institute is to have a library of works of science and literature, the foundation of which will be the library of Dr. Evans. Its object is the advancement of professional knowledge by "the establishment and maintenance of physiological and pathological laboratories and museums and the delivery of lectures;" another of its objects is the relief of necessitous members of the profession. Among those subscribing to its funds were one or two phy-

sicians practising homœopathy. This opened the question of the admission of such to the institute. It need not here be mentioned how that question was discussed. Much was said and written on both sides, and many votes for and against were given. But the result, by large majorities, was in favour of the homœopathic practitioners being admitted if they were legally qualified. We have a right, I think, to say that this is a proof of a more reasonable and liberal feeling towards homœopathy on the part of our opponents, and it is not unlikely that it may foreshadow greater freedom of professional intercourse between the two schools, and a recognition of the fact that there should be no limits to a medical man's freedom in the choice of means to secure the end all have in view—the cure and prevention of disease. Something has thus been given in these pages of the past and present of homœopathy in these islands.

From small beginnings it has grown to what we see, an organization having 300 active members, numerous hospitals and dispensaries and societies, and a large literature. The number 300 scarcely gives a fair impression as to the size of the body of homœopathic practitioners. It is a known fact that many practise homœopathically who refuse to allow their names to appear in our directory, either because they have not the courage to identify themselves with our school, or because their practice is still largely leavened by old-school traditions. If it is asked whether we in this country are satisfied with the position of homœopathy at the present time, or with its future prospects, the answer must be in the negative. Its practice and its practitioners are forced to content themselves with a sectarian position, and it must be allowed that in these late years their rate of advancement has not been in the same proportion as formerly. At the same time there is another and more hopeful view to take of the future. In one respect the new doctrine and practice were never stronger than at present, and never before did the future look so bright. Not only do we recognise the obligations of the old to the new school, but the latter are doing the same, and more and more as the years go

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on. Though at present these obligations are not sufficiently acknowledged, the time cannot be far off when they will be so, willingly or unwillingly. When that day comes the terms nomœopathy and allopathy will, it is to be hoped, disappear, and the former relieved from its sectarian position. The doctrine of similars will be granted a place, and a high place, in medical practice—perhaps even the chief place, but this will not be soon. It will be recognised that medicine is in a transition state of progress, and that in the case of so experimental a science there must be no limits to the range of experiment, and that however startling new theory or new practice may at first sight appear, both should be welcomed as a possible advance towards greater certainty in therapeutics.

HISTORY OF HOMŒOPATHIC LITERATURE IN GREAT BRITAIN.

By Dr. RICHARD HUGHES.

IN giving an account of the literature which homœopathy has brought forth in this country, I shall best proceed in a historical manner. I will group the years over which the history extends in decades, and will sketch the productions of each.

DECADE I. 1831—1840.

It was by laymen that homœopathy was introduced into England, and it was fitting that from a layman the first English publication on the subject should come. The Rev. Thomas Everest, a clergyman who had himself benefited greatly by the new system, and was personally acquainted with Hahnemann, issued in the year 1834 a *Popular View of Homœopathy*, and a *Letter to the Medical Practitioners of Great Britain*, calling on them to examine its claims.

In the same year Dr. Quin inaugurated the professional literature of the system in this country. He reprinted

Hahnemann's *Fragmenta de viribus medicamentorum positivis*, at that time hardly accessible, and only in a shabby form, heading it with a Latin dedication to the then President of the College of Physicians, Sir Henry Halford. He also put forth in the same language a *Pharmacopœia Homœopathica*, containing Hahnemann's instructions for the preparation of drugs, as given in his *Materia Medica Pura* and *Chronic Diseases*.

After Dr. Quin, the most prominent practitioner of the new method in England at this time was a French physician, Dr. Curie. In 1837 this gentleman published a treatise on the *Principles*, and in 1838 another on the *Practice of Homœopathy*. Both were, of course, purely Hahnemannian in character; but were fairly and scientifically written. The latter contained a collection of cases treated by the author, which could hardly fail to make a favourable impression.

Another attempt to set forth the principles and working of our method was made by Dr. Simpson in a work entitled a *Practical View of Homœopathy* (1836). This physician also (it is said) about this time translated the *Organon*, but I can find no trace of his version.

The only other publications of this decade were a pamphlet entitled *Allœopathy and Homœopathy*, by Dr. Luther; and a small volume by Dr. Dunsford, containing *Pathogenetic Effects of some of the principal Homœopathic Remedies*, compiled from Jahr's *Mauual* and other sources.

DECADE II. 1841—1850.

The ten years beginning with 1841 were a very active and fruitful time for homœopathic literature in this country. We will arrange the work done in categories.

First of all must be mentioned the foundation in 1843 of the *British Journal of Homœopathy*, which has continued to appear quarterly from that time to this. The editors for the first annual volume were Drs. Drysdale, Russell, and Black. The last name then ceased to appear in the title-page, and in the fourth volume was replaced by that of Dr. Dudgeon. Under these three conductors the *Journal* remained till 1857, when Dr. Russell retired. His place,

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after a short interregnum, was filled by Dr. Atkin; and when in 1862 death robbed us of his services, after another brief interval Dr. Hughes joined the editorial staff, and it was constituted as it is to this day. From the beginning the *British Journal of Homœopathy* aimed at a high tone, a scientific character, and a liberal spirit. It has been the depository of all the more elaborate writings of British practitioners, and has by copious translation and adoption given its readers the cream of what has been written in other countries; so that its volumes, now thirty-three in number, form a storehouse of homœopathic thought and record of unique value. Among its contributors in this period we may mention, besides its editors already named, Drs. Quin, Henderson, Madden, Chapman, Ozanne, and Laurie.

The present decade was one especially of expository and apologetic works. New converts were continually being made, and each as he declared his faith gave some account of his investigations and defence of his position.

The most notable of such publications were those of Dr. Henderson, then Professor of Pathology in the University of Edinburgh and Physician to the Royal Infirmary of that city. His *Inquiry into the Homœopathic Practice of Medicine* (1845) contained the record of the treatment of 122 cases of disease, on which his comments were unanswerable; and in his letter to Sir John Forbes (1846) he showed himself a ready and forcible controversialist. Publications of the same kind were put forth by Drs. Hayle, Madden, and Ransford, and in a more substantial form by Dr. Yeldham, whose *Homœopathy in Acute Diseases* (1850) formed a companion volume to Henderson's Inquiry. Chief among the more purely expository writings must be placed Dr. Black's *Principles and Practice of Homœopathy* (1842), and the *Introduction to the Study of Homœopathy* by Drs. Drysdale and Russell (1844). After this came Dr. Dunsford's *Practical Advantages of Homœopathy* (1844); shorter settings forth of the system by Drs. Newman, Luther, Marsden and Norton; and last, but (though from a lay pen) not least, Mr. Sampson's *Homœopathy; its principles, theory, and practice* (1846).

But the progress of the doctrine of Hahnemann in England imperatively called for materials whereby the method might be worked. The provings of Hahnemann existed only in their German original and in the French version of Jourdan: it was reserved for America in the person of Dr. Hempel to give them to us in an English dress. In this country it was thought more practicable to translate the *Manual of Jahr*, which was accordingly done by Dr. Curie in 1841 and again in 1847. Dr. Laurie, at the same time, gave us Bönninghausen's *Manual*; and in 1849 Dr. Dudgeon enabled us to read the last edition of the *Organon* of the master in our own tongue.

Works on practice were also called for both for domestic and professional use. The former were supplied by Curie, Laurie, Newman, Chepmell, Henriques, and Epps. The latter presented greater difficulties. Dr. Curie endeavoured to supply the need by issuing monthly *Annals* of the medical institution served by him. Dr. Hamilton published a *Guide* (1844), and Dr. Malan a *Vade-mecum* (1847). In the latter year Dr. Laurie gave us his *Elements of the Homœopathic Practice of Physic*, which though well intentioned hardly answered its purpose so well as did its domestic forerunner. Upon the treatment of special diseases we had the *brochure* of Dr. Belluomini *On Scarlatina* (1843), and those of Black, Curie, Dudgeon, Hamilton, Malan and Russell *On Cholera*. The last, however, was no *brochure*, but a substantial volume of 350 pages (1849), containing a complete discussion of the history, nature, and characters of the disease, as well as of its treatment.

The Hahnemann Publishing Society was founded in 1848, and its first publication appeared in 1850; but as its work mainly belongs to the next decade the account of it will best be reserved till then.

DECADE III. 1851—1860.

In the first year of this decade Dr. Dudgeon completed the work begun with the *Organon* by giving us in English the *Lesser Writings of Hahnemann*, forming a bulky volume of 881 pages. The work of exposition and defence was

rendered specially necessary at this time by the great assaults upon homœopathy by Sir James Simpson, Dr. Routh, and Sir John Forbes. To the "Tenets and Tendencies of Homœopathy" of the first Dr. Henderson opposed a weighty rejoinder in his *Homœopathy Fairly Represented* (1853); and Dr. Wyld met it with lighter artillery in his *Tenets and Tendencies of Sir James Simpson* (1853). Dr. Routh's *Fallacies of Homœopathy* was thoroughly dealt with in the *British Journal*, and Sir John Forbes' *Nature and Art in the Cure of Diseases* was answered by Dr. Henriques in a thoughtful volume on *Art versus Nature* and by Mr. Theobald in his *Homœopathy, Allœopathy, and Expectancy* (1859).

Besides these, professions of faith more or less argumentative were made by Dr. Cockburn, Dr. Harper, Dr. Bayes, Dr. Neville Wood, and by two notable men of the old school—Dr. Horner, a past president of the British Medical Association, and the venerable Dr. Conquest, of obstetric fame. More strictly expository were Dr. G. M. Scott's three lectures on the *Elementary Principles of Homœopathy*, and Dr. Walter Johnson's *Principles of Homœopathy* (1853). In this decade, moreover, there commenced with 1852 the series of *Tracts* in which Dr. Sharp expounded the method of Hahnemann, and met the objections to it, with such clearness and force as to obtain a very wide circulation, and to commend homœopathy to many minds. But the most important and elaborate work of this kind was the volume of *Lectures on Homœopathy* which Dr. Dudgeon published in 1854, after delivery of the same at the Hahnemann Hospital. Herein is contained the life of Hahnemann and the history of his system, with the discussion of every kind of theory and practice involved in it, in a fulness unknown elsewhere and leaving nothing to be desired. It remains a record of our origin and a treatise on our institutes, which can never become obsolete.

Two works only on practice were added to our stock in England during this time: the *Diseases of Females*, by Dr. Leadam (1851), and the *Diseases of the Heart and Lungs*, by Dr. Wyld (1860).

In the department of *Materia Medica* we received the *Flora Homœopathica* of Dr. Hamilton (1853-5), a series of beautiful illustrations of the plants used in our practice.

In periodical literature the *British Journal of Homœopathy* continued its useful course. Its most frequent contributors at this time, in addition to those already mentioned, were Drs. Scott, Yeldham, Leadam, Kidd, Ker, Sharp, Acworth, and Henriques. In the year 1856 it was reinforced in its advocacy of the new system by the *Monthly Homœopathic Review*, which has accompanied it—*vires acquirens eundo*—down to the present day. Its first editor was Dr. Ozanne; and since then it has counted on its staff at various times the names of Ryan, Pope, Bayes, Madden, and Herbert Nankivell. Mr. Pope has long been its animating soul; and under his guidance the journal has proved so trenchant in controversy, and so ready at report and notice of all that is of interest to our cause, that it has done trusty service. Its articles, at first semi-popular in tone, have of late years assumed a much higher character, and in many instances are of permanent value.

Two other periodical publications may be mentioned here, the *Homœopathic Times* and the *Notes of a New Truth*. The *Homœopathic Times* was born in 1849 and died in 1854. The *Notes of a New Truth*, conducted by Dr. John Epps, began its career in 1854, and ended it with his decease in 1869. As the *raison d'être* of either was dissatisfaction with the proceedings of the majority, much of their space was taken up with intestine controversy; and, meeting no real need, it is hardly surprising that they have not continued in existence.

There yet remains to be noted the work of the Hahnemann Publishing Society, established in 1848 on a plan like that of the Sydenham Society, viz. to supply to its members at cost price works which could not be published on ordinary calculations of profit and loss. It set before itself two special undertakings. One of these was a complete repertory of *Materia Medica*; the other a series of monographs on medicines, arranging their pathogenetic effects in such a manner as should be suitable for ready

reference, and appending their therapeutical properties. The first step towards the former desideratum was taken by Dr. Dudgeon, the most active worker of this epoch, in the volume published in 1850 as the commencement of a *Pathogenetic Cyclopædia*. It embraced the symptoms of the mind and disposition and those of the head.

His plan, however, was subsequently abandoned, and the future work was differently carried out. In 1859 appeared in succession the first four parts of a *Repertory or Systematic Arrangement and Analysis of the Homœopathic Materia Medica*, containing the symptoms of the eyes, ears, nose, face and neck, mouth and its contents, and stomach. The use of signs in this work, to enable each symptom under whatever heading found to be given in full, has caused it to be known as the "Cypher Repertory." The same feature, moreover, has hindered its coming into general favour and use; but quite needlessly, since (as has often been pointed out) it can be worked with very well without using the cypher at all, which is merely an additional advantage for those who would follow counsels of perfection in this thing. The names of the labourers in this part of the undertaking are Drs. Drysdale, Dudgeon, and Stokes.

The other scheme of the Society bore fruit in 1851, in the publication of the first part of the *Hahnemann Materia Medica*, containing *Kali bichromicum* by Dr. Drysdale, *Aconite* by Dr. Dudgeon, and *Arsenic* by Dr. Black. All were most thoroughly done; and though later knowledge would require some enlargement of the two latter, yet the three monographs remain a κτῆμα ἐς αἰεὶ, a model of what such work should be. Other medicines were announced as on hand, but no subsequent parts appeared in the present epoch.

DECADE IV. 1861—1870.

The first year of this new decade was marked by the appearance of another periodical publication.

The British Homœopathic Society had been founded in 1844. The earlier volumes of the *British Journal* frequently printed the papers and reported the discussions of its meet-

ings. After a time, however, it ceased to do so; and for some years the Society had no published records of its proceedings. These, however, with the clinical reports of the London Homœopathic Hospital associated with it, were now thought to afford sufficient material for separate publication, and began to be issued quarterly as the *Annals* of the Society and Hospital. The names of the publishing committee of the former appear at the end of the preface to the first volume, but it was understood that the real editorship lay with Dr. Russell. After his lamented death in 1866 it devolved mainly upon Dr. Yeldham.

Dr. Russell, moreover, one of the most accomplished litterateurs British homœopathy has known, having delivered some *Clinical Lectures* at the hospital, published them under this title in 1865. They embrace the subjects of rheumatism, epilepsy, asthma, and fever; and are as practical in teaching as they are pleasant in reading. The same physician had previously (in 1861) adorned medical literature with his *History and Heroes of the Art of Medicine*, a biographical history of our craft, doing full justice to all other great names, though naturally giving largest space to Hahnemann.

The same year, 1861, saw another part of the *Repertory*—the conclusion of the stomach symptoms by Drs. Drysdale and Stokes, and those of the abdomen by the same physicians, aided by Dr. Hayward. The Hahnemann Publishing Society gave no further sign of life during the present decade.

The *British Journal of Homœopathy* and the *Monthly Homœopathic Review* continued their active career during this period. Many of the older contributors to the former had become silent, but many still worked on; and fresh pens came to their aid, as those of McGilchrist, Bayes, McLimont, Nankivell, and Hughes. In the *Monthly Review* the names of Bayes, Madden, Meyhoffer (of Nice), and Sharp are of most frequent and notable appearance. In 1866 another periodical began to appear monthly in our cause—the *Homœopathic World*, edited by Dr. Ruddock. It took up the popular place which the *Monthly Review*

was gradually vacating, and has since filled it with much assiduity and profit to its readers.

Controversy had now, save in the journals, almost done its work, and only revived on special occasions. One of these was the appearance of an article on homœopathy by Sir Benjamin Brodie in *Frazer's Magazine* (1861). It called forth answers from Drs. Dudgeon, Marston, Drury, and Sharp. Similar attacks on homœopathy in Manchester and Southampton were repelled by Drs. Drummond and Rayner in the former case, by Dr. Cooper in the latter. Another occasion for discussion was the acceptance of our doctrine by physicians attached to public institutions, which gave us the pamphlets of Dr. Eubulus Williams, of Clifton (1867), and of Dr. Reith, of Aberdeen (1868). Dr. Bayes' *Homœopathy in 1869* was the only other publication of this kind. Of expositions of our doctrine we may specify Dr. Ryan's little book *On Infinitesimals* (1864), an excellent defence of their efficiency: there were also numerous *brochures* of this kind from the pens of Drs. Batchelour, Cockburn, Collins, Craig, Eadon, Epps, Henry, Flint, Hayward, Matheson, Morgau, Pope, McConnell Reed, and Wyld.

A more important work now remained to be done, viz. the investigation of homœopathy from within—the examination of the scientific basis of the method. No independent works on this subject appeared, but two series of contributions to journals went on, one of which has already become, while the other promises soon to be, a book. We refer to Dr. Sharp's essays in the *Monthly Homœopathic Review*, and Dr. Drysdale's articles, commencing from 1867, in the *British Journal of Homœopathy*. We shall have to speak of these writings again in the next period.

Of practical works we have to note two as of special worth—Dr. Yeldham's *Homœopathy in Venereal Diseases* (1862), and Dr. Chepmell's *Hints for the Practical Study of the Homœopathic Method* (1868). The former is invaluable for the practitioner and the latter for the student. Of the same kind, but of more limited scope, are Dr. Wilkinson's pamphlet on *Smallpox, Erysipelas, &c.* (1864); Dr. Cooper's on *Sulphur as a Remedy for*

Neuralgia and Intermittent Fever (1869); and Dr. Drury's volume on *Cholera, Dysentery, &c.* (1866).

In 1867 an attempt was commenced by the present writer to provide a manual of homœopathic practice for students and beginners. No introduction to the study of the materia medica, no broad statement of what homœopathy can do for the various forms of disease, and how she does it, was extant for the English professional reader. A *Manual of Pharmacodynamics*, to supply the former want, was issued in 1867, and a *Manual of Therapeutics*, to meet the latter, in 1869.

The only other work on materia medica produced in this decade was Mr. Buck's *Outlines of Materia Medica and Regional Symptomatology* (1865). It was well intentioned and displayed much industry; but it can hardly be said to have succeeded in winning the acceptance of our body. In this connection, however, we must note the *British Homœopathic Pharmacopœia*, which, under the auspices of the Society so named, and mainly edited by Dr. Madden, appeared in 1870. It was greatly needed, and was admirably calculated to fulfil its purposes.

We conclude by mentioning the works on veterinary homœopathy published during this time by Messrs. Moore and Lord, and the variously named provisions for domestic practice issuing from the pens of Drs. Ruddock, Morgan, Drury, Massy, Epps, F. Cameron, Wyld, and Neville Wood.

DECADE V. 1871—1875.

Our last decade is but a lustrum as yet; but, to complete this sketch, its productions must be named.

Its opening witnessed a revival of the Hahnemann Publishing Society, and the appearance—after twenty years' interval—of the second part of the *Hahnemann Materia Medica*. This was a monograph on *Uranium nitricum* by Dr. Edward Blake, containing much original experimentation. In 1873 a third part followed in the shape of an arrangement of *Belladonna* by Dr. Hughes. The *Reper-tory* of the society was also taken in hand anew, and its

sixth part appeared in 1874, consisting of the symptoms of the stools and rectum, by Dr. Herbert Nankivell.

The same year saw the first instalment of another *Repertory* from the pen of Dr. Berridge, containing the symptoms of the eyes. In this no cypher is used. Of other works in materia medica we have to mention the *Applied Homœopathy* of Dr. Bayes (1871), an interesting account of his experience with the several remedies of our stock. A new edition of the *Manual of Pharmacodynamics*, containing the lectures delivered by the author at the London Homœopathic Hospital, saw the light in 1875.

I think I may venture to claim for British homœopathy the treatise on *Chronic Diseases of the Respiratory Organs*, the first volume of which appeared in 1871. Though Dr. Meyhoffer is a German and practises at Nice, yet his work was written in English and published in England; and we should take the compliment ill if we did not claim the honour which it does to our literature.

Dr. Bayes has worked in this field of practical medicine also, giving us a short essay *On the treatment of Typhoid Fever by Baptisia* (1872); and Dr. Ruddock, hitherto known as a domestic therapist and popular expositor only, has put forth a *Text-book of Homœopathic Medicine and Surgery* (1874), of over 1000 pages, which, though in many points open to criticism, is likely to prove very useful. The domestic manuals still, by their multiplication, evidence a demand for homœopathy in British families; of this kind are—in the present period—Dr. Shuldhham's *Family Homœopathy* (1871), Dr. Gutteridge's *Woman's Guide to Health* (1871), Dr. Pope's *Medical Handbook for Mothers* (1873), and Dr. Hayward's *Taking Cold*, which in successive editions has expanded from a little pamphlet on the casualty it specifies to a complete manual of the lay treatment of acute disease.

Dr. Drysdale and Dr. Sharp have continued their work upon the Institutes of homœopathy. The latter has collected the labours of twenty years into a handsome volume of *Essays in Medicine* (1874), containing twenty-six separate publications ranging from 1852 to 1873, and treating of every point connected with our method. Dr. Drys-

dale has gone deeper still to find the basis of specific medication. In his *Life and the Equivalence of Force* (1870), and his *Protoplasmic Theory of Life* (1874), he has investigated the latest thoughts of science on that which is the subject of medicine—the living organism; and he proposes to follow these up by considering the stimuli of life, and drugs as one of them. When his work is completed, it will be a rock of firm foundation on which to stand; and homœopathy will have a philosophy harmonious with modern knowledge and of unassailable soundness.

The three journals—the *British*, the *Monthly*, and the *World*—continue to flourish. The *Annals* have since 1870 appeared in the former. The revival of the annual congress has evoked a series of presidential addresses worthy of the distinguished men—Drysdale, Madden, Black, Sharp, Dudgeon, Bayes—who have delivered them; and these with the papers and discussions of the gatherings have enriched the pages of the *Monthly Review*.

I now close this brief sketch. It seems to me that, considering the small number of men—never more than 300 at a time—who have embraced homœopathy in Great Britain, the contribution of this country to the English literature of the system has not been inconsiderable. But the future alone can determine how much of it is worthy to live.

THE DESCRIPTIVE HISTORY OF BRITISH AND
IRISH HOMŒOPATHIC SOCIETIES, IN-
CLUDING HOSPITALS, SCHOOLS, DISPEN-
SARIES, &c.

By HERBERT NANKIVELL, M.D. Edin.

WE may divide the homœopathic societies of Great Britain into local and general; in the first division come the Northern Homœopathic Medical Association, the Midland Homœopathic Medical Society, the Liverpool Homœo-

pathic Medico-Chirurgical Society, and the Northumberland and Durham Homœopathic Medical Association. In the second division we place the Hahnemann Publishing Society, the British Homœopathic Society, and the British Homœopathic Congress. Of the local associations it will be necessary to mention at length only the two first. The *Northern Homœopathic Medical Association* was founded in 1852 by six gentlemen, Drs. Cameron, Craig, Dunn, Hayle, Pearce, and Pope, but the stimulus which launched it into existence was unequal to the development of its future life, and it relapsed into a dormant condition for the rest of the decade. In 1862 we find it resuming more active functions; it added eight other members to its list, and since that date under the fostering care, first of Mr. Secretary Pope and afterwards of Mr. Secretary Fraser, it has done yeoman's service in binding together the scattered homœopathists of the north, in the mutual sharpening of mind by mind, and in the promotion of good feeling amongst its members by its semestrial meetings and the pleasant dinners which invariably follow them. The society now numbers thirty-four members and is in full activity, holding its meetings alternately in the larger towns of Yorkshire and Lancashire. The *Midland Homœopathic Medical Society* meets also half-yearly, although at first quarterly meetings were the rule. It was established in 1862, but consists of only eighteen members. Its prosperity has never equalled that of its northern neighbour, partly because it is not a migratory society, but a fixed one, meeting at Birmingham, and partly also because the good cheer which distinguishes the Northern Society has been conspicuous only by its absence from the Midland reunions.

Our general societies are three in number and need more than a passing reference. The *Hahnemann Publishing Society* was established in 1848, for the "purpose of supplying physicians practising homœopathy with works of real value, the expense of whose publication would be too great a risk for private enterprise to undertake." It is therefore a commercial society, but it is more than this. Three of its permanent committees are engaged in the works of *Materia*

Medica, of the Repertory, and of Therapeutics respectively ; and the individual members of these committees either take up themselves or allot to others the different sections of the works in hand. It falls to the lot of Dr. Hughes in his review of our literature to mention his publications of this society, and I therefore pass on to notice

The *British Homœopathic Society*, which was founded on April 10th, 1844, by Dr. Quin its president, and consisted of himself, Mr. Hugh Cameron, Dr. Partridge, and Dr. Mayne. Dr. Quin had for many previous years cherished in his heart the project of this society, and had as early as 1834 drawn up a code of laws for its management. In 1837 he called a preliminary meeting on this subject, but though it was well received by many of his colleagues, he found himself obliged to abandon it. But in 1844 a meeting took place in Dr. Quin's house to commemorate Hahnemann's birthday, the first that had occurred since our founder's death, and at that meeting "the foundation stone of the British Homœopathic Society was laid." The early meetings of the society from 1844 to 1850 were held at the president's house, but since the opening of the London Homœopathic Hospital, the society's meetings have been held in the hospital board room. Its growth has been steady and it now numbers 113 ordinary members and fellows, besides corresponding and honorary members. Meetings are held on the first Thursday of each month throughout the session, at which papers are read and discussions take place. The annual assembly occurs towards the close of June and lasts for two days. But the business of the society is not confined to those meetings ; in 1847 in conjunction with the British Homœopathic Association it determined on the foundation of the London Homœopathic Hospital ; in 1870 it published the *British Homœopathic Pharmacopœia*, a second edition of which valuable work has just passed through the press ; and during the winter session of 1874-75 it instituted a series of lectures, which were thrown open to and were attended by both medical men and students of the old school. In these lectures Drs. Dudgeon, Hale, and Richard Hughes

took part, the latter physician lecturing on homœopathic pharmacodynamics. During the present winter session Dr. Bayes delivered the introductory lecture, Dr. Hughes' lectures are being continued, and Drs. Mackechnie, Hale, Drury, James Jones, Drysdale and Matheson will take part in other courses. The audiences are fairly well attended by practitioners from the ranks of allopathic medicine, and it is hoped that these efforts will hereafter attain the solidarity of a medical school. In the meantime good and necessary work is being done.

The *British Homœopathic Congress*, in its revived form, dates from the year 1870, when it assembled at Birmingham under the presidency of DRYSDALE; in 1871 it met at Oxford, when the presidential address was read by Dr. Richard Hughes for his friend MADDEN, whom illness had prostrated three weeks previously; in 1872 the ancient city of York, dear to Americans both for its name and its venerable minster, received the Congress which met under the presidency of BLACK; in 1873 the Congress met at Leamington, and SHARP occupied the chair; in 1874 the largest Congress that has hitherto met assembled in London, and listened to DUDGEON's incisive address on the "Influence of Homœopathy on General Medicine since the Death of Hahnemann;" and in September of this year (1875) the Congress which met at Manchester heard BAYES expound the "Position of Homœopathy in the Rational Practice of Medicine," and had the pleasure of receiving an American delegation in the honoured persons of Messrs. LUDLAM and TALBOT. Our congresses hitherto have been remarkable for excellent papers and critical discussions; and they have been followed by capital dinners, whose good fellowship and cheer have crowned the labours of the day.

I now pass on to give a short account of the hospitals and dispensaries in Great Britain for the homœopathic treatment of the sick poor. Chronologically, the dispensary is the forerunner of the hospital, and, of course, the former institution exceeds the latter very much in number. The machinery of the dispensary is so simple that one may be started at an outlay of a few shillings only, and it has

rarely happened that wherever a homœopathist has commenced practice he has not very early sought to bring the benefit of his art to bear on his poorer and suffering brethren. This has been the origin of the numerous *private homœopathic dispensaries* which we possess. They are of the simplest possible character, being under the entire management of the medical officer, and they are unprovided either with patrons, committees, and often subscribers. In this latter case they are self-supporting, the regulated contributions of the patients themselves defraying the necessary expenses. About seventy-five of these dispensaries are in existence, and the number of fresh patients seen annually will vary from 150 at the smallest to between 300 and 400 at the larger institutions. No doubt they are open to some abuse—persons attending them who could pay the usual fees; but they have done good work in popularising homœopathy, in showing its power over chronic and intractable forms of disease, and in forming in many localities, the nuclei of more highly-organised and successful institutions.

Of a more pretentious character than these are the *public homœopathic* dispensaries, which number about thirty-seven. They are under the management of committees, and are provided with various lay officers, such as secretary, treasurer, &c., and also with one or more medical officers and a chemist or dispenser. The work of the medical officers is generally gratuitous. All moneys pass into the treasurer's hands. The institution is supported by subscribers, who have the privilege of nominating patients, who are supposed to be of that class which needs gratuitous medical treatment. The chief towns and districts which possess these dispensaries are—Blackheath, Brixton, Hackney, Pimlico, Southgate, Streatham, and Surbiton, within the postal district of the metropolis; while in the provinces—Croydon, Liverpool, and Manchester rejoice in the possession of two dispensaries each; and one exists respectively in Bournemouth, Brighton, Cheltenham, Cambridge, Weston-super-Mare, Plymouth, Exeter, Hull, Leamington, Newcastle, Devizes, Northampton, Reading, Scarbro', Southampton, Stroud, Taunton.

Tunbridge Wells, Torquay, Winchester, Wolverhampton, and York. *Facile principes* amongst our public dispensaries stand those of Liverpool; they are both under the management of one committee, and the medical officers form a single staff. The Liverpool Dispensary was founded by Dr. Drysdale in 1841, and at first occupied a small hired room in Mount Pleasant. His first task was to catch a patient—a tough old *opprobrium medicorum*; his second to cure him, in which he was equally successful. Thus the ball was set rolling. In 1860 a large dispensary was built and opened in Hardman Street; in 1866 a second dispensary was opened in the North End during an epidemic of cholera; and by the report for 1874 we find that Dr. Drysdale's infant institution has grown into an establishment possessing four consulting physicians and surgeons, five honorary medical officers, and four stipendiary surgeons. The total number of patients coming under treatment during the year was 20,076, and the total number treated since 1841 amounted to 210,631. Such a success is a noble testimony to the founder's work, to the truth of Hahnemann's teaching, and to the practical success of its medical officers. I shall notice also the dispensaries of Brighton and Devizes as types of successful institutions. The first is carried on in a fashionable and populous town of 100,000 inhabitants, the second in a country town of 6000 people. The Brighton dispensary was founded in 1844, and carried on at first solely by the efforts of our distinguished colleague, Dr. Henry Madden. It is now under the management of a committee, possesses a staff of two consulting physicians, two honorary physicians, and a stipendiary medical officer. The total number of cases for the year 1874 amounted to 1920, of which number the large proportion of 403 cases were treated at their own homes.

The *North Wilts Dispensary* was founded at Devizes in 1861 by the late Dr. Marston, and has been carried on since his death by his successor, Dr. Bodman. The total number of cases admitted from 1861 to 1874 was 3522, of which 805 were under treatment during the last-named year.

The affairs are managed by a committee; there is no stipendiary medical officer.

The net cost of these three institutions for the year 1874 was as follows:—North Wilts £51, Brighton £303, and Liverpool £761; and the average cost of each patient at these institutions was respectively 3s. 4d., 3s. 2d., and 9d.

I cannot leave the subject of dispensaries without reference to that of Weston-super-Mare. In this town, of 15,000 inhabitants, the *Cochran Homœopathic Dispensary* has been founded in memory of our late colleague, Dr. George Blair Cochran; and a freehold property has been secured and devoted in perpetuity to this admirable purpose—an example this which we trust may be imitated by larger and wealthier towns.

Turn we now to the *Hospitals*. The large expense necessary for the maintenance of these institutions, and the fact that in a great number of towns the ground is already occupied by well-managed hospitals under old-school direction, has prevented the development amongst us of many examples of this form of charity. Yet the narrow-minded opposition of old-school practitioners might well compel us to seek every favorable opportunity for starting homœopathic hospitals. Whenever an avowed conversion to the tenets of homœopathy has taken place amongst the members of a hospital staff, the unfortunate gentleman who has had the courage of his opinions has been compelled to resign his post, and this not through the free action of committee or governors, but by means of the trades-union regulations in force amongst allopathic medical men. Henderson at Edinburgh, Reith at Aberdeen, Eubulus Williams at Clifton, are instances of the truth of this statement.

At *Southport* our colleagues, Drs. Stokes and Harvey, officer a *children's sanatorium*, which has several years flourished under the guidance of an influential committee. This sanatorium owes its foundation to Dr. Blumberg, who in 1861 raised a sum of £800 for the institution; but ill health compelled him to leave Southport before it got into working order. The scheme remained in abeyance until 1864, when the Misses Marriott nobly proposed to under-

take the whole conduct and expenses of the sanatorium, if the committee would grant them a small sum for furnishing and the annual *interest* of the funds at their disposal. This work they carried on till the close of 1867, when the management was again restored to the hands of the committee. From the reports before me I learn that in 1864 forty-six admissions took place; in 1865, forty-one; in 1866, twenty-eight; in 1867, fifty-three; in 1871, eighty-seven; in 1872, 114; in 1873, ninety; and in 1874, seventy-six. There are thirty beds, but they are seldom all full. The committee propose to purchase a piece of land, and erect a specially adapted building thereon, the house which they now occupy being very unsatisfactory for the purpose.

St. James's Hospital, Doncaster, has a history of its own. The establishment of the Great Northern Railway plant at that town forced on our gallant and far-sighted colleague, Dr. Dunn, the necessity of a hospital for surgical accidents, and in 1852 *St. James's Hospital* was opened, and from that date was kept open for twenty years by his single-handed exertions. Many an operation has he there performed unassisted; once at least he amputated the thigh with the help of the porter only; until at last the intolerance of his allopathic colleagues broke down, and it was found advisable to meet and assist the man who had such a power of self-help within him. In 1872 increasing age and failing health compelled this veteran to close his cherished work, but, fortunately, not until the town of Doncaster had realised the necessity for an infirmary on a large scale, and had at last accomplished the much-desired but long-neglected work.

The *Bath Homœopathic Hospital* is officered by Drs. Newman and Morgan. It was commenced in a small but suitable house in 1859, and in 1872 a larger and more commodious building was obtained, capable of containing thirty beds. Since the opening of the hospital 286 in-patients have been received, and the out-patients have numbered 12,000. During 1874 twenty-nine in-patients and 1000 out-patients were treated at this institution.

No town in England has witnessed a more rapid and

solid growth in our art than has *Birmingham*. In 1847 a dispensary was opened in Charles Street, at a time when only three families in the town were sufficiently convinced of the truth of homœopathy to submit to our treatment. In 1848 the dispensary was removed to Old Square, and was then officered by Drs. Fearon, Lawrence, and Parsons. In 1859 a hospital in the same square was opened, with six beds, under the medical care of Drs. Fearon, Lawrence, and Gibbs Blake. In 1864 the number of beds was increased to fifteen, and the staff consisted of four honorary medical officers and a resident house-surgeon. In 1866 the building fund for a new hospital was commenced by munificent donations of £1000 each from Mr. R. L. Chance and Sir Josiah Mason, the founder and endower of the Erdington orphanage. In 1872 a suitable site was purchased, and in the succeeding year the fund had reached the sum of £8500. The work since this date has gone on rapidly; and at the inauguration luncheon, which took place in the new building on the 23rd of November, 1875, £1600 was presented to the fund, bringing the total amount received by that date very nearly to the sum of £12,000. The hospital work is now carried on in the new building, and the names of Gibbs Blake, Wynne Thomas, Craig, and Edward Madden, are sufficient guarantees for that work being well done.

Last in the order of my paper, although chronologically the earliest hospital connected with our school in England, stands the *London Homœopathic Hospital*.

It owes its foundation to the efforts of the British Homœopathic Association, a body of laymen which was formed in 1847, in intimate connection with the British Homœopathic Society to advance the interests of homœopathy. I quote the following historical passages from Dr. Quin's presidential address in 1859 to the annual assembly of the Society:—"In less than eighteen months, by the influence and tact of Mr. Sampson, and the ability and zeal of Mr. Heurtley, assisted by this Society, upwards of 1300 friends of homœopathy were enrolled. Meanwhile your President had performed the part allotted to him—that of obtaining the sanction and support of several members of

both houses of Parliament and other gentlemen of influence, and their consent to having their names enrolled on the committee of the Association, the Duke of Beaufort consenting to act as President, and the Marquis of Anglesea as Vice-President."

The Association for two years did an active work in the dissemination of popular homœopathic literature, but the foundation of a hospital having been decided on, it merged its distinctive character and name on October 10th, 1849, into that of the Hospital Committee. In six months from this date the hospital in Golden Square was opened and ready for the reception of patients (April 10th, 1850). Here its work for seven years was carried on; here were successfully treated, under the Government inspectorship of Dr. Macloughlin, those cholera cases which the Royal College of Physicians refused to print as worthless and misleading, but which were afterwards printed by order of Parliament; and from this site, in 1857, a move was made to Great Ormond Street, to the freehold building which the hospital still occupies.

The number of patients, counting both in- and out-patients, admitted during the first septennium, amounted to 23,085, an annual average of 3298; during the second septennium (in which the move of site took place) the total number was smaller, viz. 22,905, an annual average of 3272; in the third septennium the increased resources and more numerous staff attracted 50,686, which gives an annual average of 7240; and in the triennium which closed with 1874 the annual average is found to be still increasing, and amounts to 745. The total number treated to the end of 1874 stands at 119,132.

Of the cases treated in 1874, 7129 were out-patients, and 428 in-patients; of these last 133 were "cured," 187 "much improved" and "improved," forty received "no benefit," fifteen died, and fifty-three remained "under treatment." The total expenses of the hospital for this work amounted to £3209, while its total income for the year was £4036, but £1919 of this sum was special, and due to bazaar receipts. The funded property of the hospital

consists of £8977 in the Three per Cent. Government Funds, besides the freehold building and furniture

The hospital is under the patronage of H.R.H. the Duchess of Cambridge and of His Grace the Duke of Beaufort. The Earl of Wilton is President, and associated with him are eleven Vice-Presidents. The Board of Management, under the chairmanship of Lord Ebury, is entrusted with the general management of the institution and with the appointment of the medical officers, subject to the control of the Governors.

The Medical Council acts in consultation with the Board of Management on any subject which specially touches the interest of the medical staff or the profession generally; it consists of metropolitan and provincial physicians of standing.

The active medical staff are divided into two classes: (a) those in charge of in-patients, and (b) those in charge of out-patients; there is also a resident medical officer.

The office of Consulting Physician is now vacant; it was held until last year by Dr. Quin, who by his resignation has officially severed a connection which, through a long course of years, had been beneficial to the hospital and honorable to himself.

The office of Consulting Surgeon is held by Stephen Yeldham, a name well known to and much esteemed by English homœopathists.

REPORT ON THE HISTORY AND DETAILS OF
BRITISH LEGISLATION AFFECTING PRACTI-
TIONERS OF HOMŒOPATHY, WHETHER BY
THE GOVERNMENT OR BY CORPORATIONS.

By ALFRED C. POPE, M.D., M.R.C.S. England.

FROM a strictly legal point of view the practice of homœopathy by a duly qualified member of the profession in no way affects his status or privileges. Until the year 1858 the laws of this country respecting the practice of medicine were in an anomalous condition. A person duly qualified to practise medicine or surgery in Scotland or Ireland was not legally qualified to do so in England. An English physician was only regarded as being duly qualified by possessing the degree of the University of Oxford or Cambridge or that granted by the Archbishop of Canterbury or the licence of the Royal College of Physicians of London. For general or family practice the only diploma constituting a legal qualification was that granted by the Society of Apothecaries under their act of 1815. Any person not holding one or other of these qualifications was liable to prosecution by the College of Physicians on the one hand or by the Society of Apothecaries on the other. The only occasion on which these powers have been exerted to the detriment of a homœopathic physician was in the case of Dr. Quin, in 1833. The threat of prosecution in that instance was not carried out. I believe that Mr. Clifton, of Northampton, was also threatened with prosecution by the Society of Apothecaries on the ground of his not having received their licence; but here also no legal proceedings were taken.

In 1858, the Act which now regulates the practice of medicine and surgery throughout the United Kingdom of Great Britain and Ireland was obtained. By that measure the exclusive privileges of the English Universities, of the College of Physicians, and the Society of Apothecaries were abolished. At the same time the degree granted by the

Archbishop of Canterbury ceased to constitute a legal title to the privileges of the profession of medicine.

The draft of the bill presented to the House of Commons contained a clause giving power to the proposed medical council to erase from the register of legally qualified practitioners the name of any practitioner who could be charged with "irregular" practice. As it was by this phrase that homœopathy was commonly defined, and as it was left to the proposed Medical Council to determine what was and what was not "irregular" practice, those who were interested in sustaining the rights of homœopathic practitioners exerted their influence to have this clause expunged. They succeeded. Clause XXVIII of the bill authorised the Council to erase from the register the names of those who had been struck off from the lists of the college or body to which they belonged provided that such an act had been performed in the exercise of any power such college or body might possess. In order to prevent the exercise of any power of this kind unfairly to homœopathic practitioners, the following proviso was added to the clause:—"Provided that the name of no person shall be erased from the register on the ground of his having adopted any theory of medicine or surgery."

Further, in order to prevent a belief in homœopathy being a barrier to entrance into the medical profession the following clause (xxiii) was added to the act:—

"In case it shall appear to the general council that an attempt has been made by any Body, entitled under this Act to grant qualifications, to impose upon any candidate offering himself for examination an obligation to adopt or refrain from adopting the practice of any particular theory of medicine or surgery, as a test or condition of admitting him to examination, or of granting a certificate, it shall be lawful for the said council to represent the same to Her Majesty's Most Honorable Privy Council, and the said Privy Council may therefore issue an injunction to such Body so acting directing them to desist from such practice; and in the event of their not complying therewith, then to order that such Body shall cease to have the power of con-

41 *Legislation affecting Practitioners of Homœopathy,*

ferring any right to be registered under this Act so long as they continue such practice."

All persons registered under this Act as practitioners of medicine and surgery, whatever may be their therapeutic views, are equally entitled to perform all the functions pertaining to a legally qualified medical practitioner and all are in the enjoyment of the same privileges.

From this report of the Act of 1858 it will be seen that so far from British law having placed any impediments in the way of homœopathy being practised, it has been directed to the prevention of any such impediments being so placed by any College or Body which might be disposed to use its power to prevent homœopathic practice increasing.

That such is the case homœopaths will ever owe a debt of gratitude to Lord Ebury for his exertions on their behalf in the House of Lords, and to the Hon. W. Cowper (now known as the Hon. W. Cowper-Temple) for his support in the House of Commons.

The provision of medical attendance upon sick paupers constitutes a portion of the work of a department of government formerly known as the Poor Law Board, but more recently as the Local Government Board. For the appointment of parochial medical officer all registered practitioners are equally eligible. The election to such an office rests with the guardians of the poor of each union, subject to the confirmation of the Local Government Board.

Thirty years ago the Poor Law Board of the day, acting under the advice of the President of the College of Physicians, refused to confirm the election of Mr. Newman to the appointment of medical officer of one of the districts of the Glastonbury Union because he practised homœopathy.

Twelve or fourteen years later and Mr. Harmar Smith was called upon by the Guardians of the Sheffield Union to resign his appointment as one of their medical officers in consequence of his avowing his confidence in homœopathy.

More lately Dr. Wilde, of Winchester, received the appointment of medical officer to the most desirable district of the Winchester Union on the ground that he practised homœopathy.

For the same reason Dr. Archer, in 1871, was elected a medical officer to one of the districts of the Southampton Union.

While, therefore, the avowed practice of homœopathy constitutes no disqualification for the office of poor law surgeon, it is possible that in many instances a homœopathic practitioner would fail to secure such an election through the influence that would be brought to bear upon the electing body, the local board of guardians. That such influence would not always be successful has, however, been sufficiently well proved.

The appointment of medical officer of health is open to all legally qualified medical men, whether allopathic or homœopathic. The only homœopathic practitioner who has contested an election for such an appointment (Mr. Ainley, Halifax, Yorkshire) succeeded in obtaining it, although every effort was made both locally and through the medical press to prevent his success. The appointment was confirmed by the Local Government Board notwithstanding the pressure exercised upon them to refuse their sanction to it.

The poor-law medical service is wretchedly ill paid and has but small attractions for men who are fully occupied in private practice. Hence it has been seldom sought after by homœopathists, who are as a rule sufficiently well employed without it, and consequently opportunities have but rarely occurred for testing the influence which an avowal of faith in homœopathy would have over an election to such an appointment.

UNIVERSITIES, COLLEGES, AND SOCIETIES.

The Scotch Universities, with the exception of that of Glasgow, have each attempted to prevent candidates for their degree who were known to be favorably disposed to homœopathy being promoted. The University of Edinburgh and that of Aberdeen were successful each on one occasion. No effort of the period has been made of late years, and now the Medical Act of 1858 expressly forbids any such attempt being made.

The Royal College of Physicians of London some five and twenty years ago declined to accede to the application of a medical man practising homœopathy, requesting permission to present himself for examination.

The College of Physicians of Edinburgh have refused admission to their fellowship on the ground of the candidate's known faith in homœopathy.

The College of Physicians and that of Surgeons in Dublin have declared their intention to refuse their respective licences to persons known to believe in homœopathy.

These bodies framed "declarations" to be signed by all candidates prior to their receiving their licences.

The College of Surgeons ordained that "no Fellow or Licentiate of the College shall pretend or profess to cure disease by the deception called homœopathy." The resolution was rendered harmless by its very terms. There being no such thing known as "the deception called homœopathy," and as no person, even though he be an Irishman, can possibly practise the unknown, or even pretend so to do, it follows that the College "ordinance" is powerless, and so I believe it has proved to be.

The College of Physicians desirous of not being left in the rear of its surgical brotherhood either in folly or in an unblushing effort to put the drag on the chariot wheels of scientific medicine also formulated a declaration somewhat after the fashion of the oath administered to the candidate in Molière's *Malade Imaginaire*. Its first sentence is as follows: "I engage not to practise any system or method (so-called) for the cure or alleviation of disease of which the College has disapproved," &c. As this declaration was obscure, no "system or method" having been mentioned as having been placed under the ban of the College, a gentleman who was desirous of obtaining the licence of a College of Physicians wrote to the registrar of the College for an explanation, asking what these "symptoms or methods" were which had incurred the displeasure of the College and whether subscription to the declaration was compulsory. The following answer, which I give *verbatim et literatim*, was received by return of post:—

“*King’s and Queen’s College of Physicians in Ireland,*
“*Dublin, 15th October, 1861.*”

“Sir,—In reply to your queries, I have to state that the College has not disapproved of any system. Candidates have to take the declaration before being admitted.

“I am, Sir, your fai.,

“*LOMBE ATTHILL.*”

Remarking on this, the editors of the *British Journal of Homœopathy* (vol. xx, p. 160) write: “The veiled prophet removes his mask and behind it we discover nothing at all. The systems and methods of treatment disapproved of by the College, and prohibited to its licentiates under fearful penalties, have no existence! The College tries to scare its licentiates with bogie; but behind the sheet there is nothing. It makes a new decalogue, in which it threatens condign punishment to those who practise what it disapproves and all the time it disapproves of nothing; and yet it insists on candidates subscribing a declaration or ‘declaration’—as the registrar writes it—which binds them to abstain from nothing.”

It may appear singular, but I believe it is a fact, that the perpetration of such singular orthography as that contained in the choice missive I have quoted is a graduate in arts as well as in medicine of “Old Trinity!” I am not aware of any instance in which an attempt has been made to enforce the terms of these resolutions. Every few years they are republished in all their pristine absurdity to scare away young men from the investigation of homœopathy. They are, however, not regarded as worthy of notice.

The Royal College of Surgeons of England stands almost if not quite alone among the examining bodies of this country in having publicly refused to regard a belief in homœopathy a barrier to admission to its membership.

The Council of the College was repeatedly applied to to refuse the college diploma to candidates who were known to practise or who intended to practise homœopathy.

In 1852 or 1853, one Dr. Charles John Hall, of Sheffield, a member of the College, addressed the Council on this

matter, demanding the expulsion from the College of all members thereof practising homœopathy, threatening as the penalty if refused by the Council the return of the diploma he had received from them. The following resolution constituted the reply of the Council:—"The Council of the Royal College of Surgeons of England have attentively and repeatedly considered the various communications which they have received on the subject of homœopathy; and after mature deliberation have resolved that it is not expedient for the College to interfere in the matter."

Dr. John Charles Hall was duly furnished with a copy of this resolution, but not only did he retain the diploma he had threatened to return in the event of his wishes not being satisfied, but he subsequently applied to the College for the higher diploma of Fellow, and was admitted a Fellow in 1866, some ten or twelve years after the date of his letter on homœopathy!

The Worshipful Society of Apothecaries some years back announced their intention of refusing their certificates to any person who should express his faith in homœopathy.

This perhaps is hardly surprising when it is remembered that this Society derives a considerable income from a wholesale and retail drug shop. There is, I think, very little doubt that now these resolutions would not be enforced in any of the colleges that passed them except, perhaps, in those of Ireland.

Societies.—Of the established medical societies it may be said that nearly every one has on its minutes a resolution not to admit or retain on its lists of members any member of the profession known to be practising homœopathy. Several societies termed medico-ethical were established in different parts of the country many years ago, the chief end of which was to bind the members not to practise homœopathy, and not to meet in consultation any medical man who did so.

A STATEMENT OF EXISTING MEANS IN GREAT
BRITAIN AND IRELAND, FOR THE EDUCA-
TION OF YOUNG PHYSICIANS IN THE
SCIENCE AND PRACTICE OF HOMŒOPATHY.

By WILLIAM BAYES, M.D.

WERE I to restrict myself, stringently, to the enumeration of the existing means for the education of young physicians in the science and practice of homœopathy, my whole paper would occupy but very few lines, but I hope I may be pardoned if I venture to trace, very briefly, some of the means to which the present practitioners of homœopathy in Great Britain and Ireland are indebted for their practical knowledge of homœopathy.

“As early as the years 1852-3, whilst the Homœopathic Hospital was in Golden Square, Dr. Quin gave six lectures “On Some of the most important Diseases of the Human Frame,” illustrating them with cases selected from the wards of the hospital. During the succeeding year, 1853-4, Dr. Leadam gave a course of lectures “On the Diseases of Women.”

In the year 1859 the hospital was removed to the more extensive building in Great Ormond Street, and clinical lectures were subsequently delivered during two sessions, 1862-3 and 1863-4, by Drs. Hamilton, Leadam, and Russell, and by Dr. (then Mr.) Yeldham, surgeon to the hospital. “They were discontinued from causes connected with the private practice of the physicians (viz. inability to find time) and from there being insufficient interest among medical men, who, it must be remembered, were much more antagonistic to homœopathy than now.”*

Concurrently with the first of these efforts on the part of the physicians to the London Homœopathic Hospital, the officers of its rival hospital, the Hahnemann (since closed), instituted a still more complete series of lectures. Dr. Dudgeon delivered a course of lectures “On the Theory and Practice of Homœopathy,” Dr. John Epps “On Homœ-

* Communicated by Dr. Hamilton.

opathic Therapeutics," and Dr. Curie "On Clinical Medicine." These lectures were delivered during one session, 1852-3, but unfortunately were not resumed in the following year.* Some of the lectures delivered at the London Homœopathic Hospital were reported in the *Annals of the British Homœopathic Society*, scattered through its first four volumes. Dr. Rutherford Russell's were reprinted in a volume entitled, *The Treatment of Rheumatism, Asthma, Epilepsy, and Fever*. Dr. Dudgeon's lectures were also reprinted under the title of *Lectures on the Theory and Practice of Homœopathy*.

As an interesting episode in the history of homœopathic teaching in Great Britain, I subjoin a short communication from Dr. Black. It shows how much may be done by the self-sacrificing efforts of a few noble, public-spirited minds.

"A dispensary was opened at Edinburgh in 1843 by Drs. Russell and Black, with the view of not only allowing the poor to experience the benefits of homœopathy but also affording a field for demonstrating to the profession the practice of this new system of therapeutics. From the very first the attendance of indoor patients was large, and as much time was devoted to the treatment of acute cases at the houses of the poor there was good material for clinical teaching. This was never carried out systematically, but limited to conversations. During the early years of this dispensary it was attended by various medical men and students, many of whom became distinguished advocates of homœopathy. The publication of the first report was the signal for a violent and abusive attack by the *Edinburgh Medical Press*; this was steadily persevered in so, that at last medical students became afraid to attend.

"In 1848 the marked success attending the treatment of a prevailing epidemic of fever led the committee of management of the dispensary to petition the Edinburgh Parochial Boards for hospital space in which the treatment of this disease as well as of cholera which was impending might be publicly tested. This appeal met with no favorable reply. When the cholera broke out, the medical staff,

* Communicated by Dr. Dudgeon.

consisting of Drs. Russell, Wielobycki, Lynchinski, and Sutherland, aided by Dr. Cockburn and Dr. Atkin, resolved to keep the dispensary open day and night, with one of them in constant attendance. Acting in this devoted manner a large number of cases was treated and the report of this epidemic is the last contribution which this dispensary has given to clinical teaching."

In a letter from Dr. Black inclosing the above, he says, "There was no systematic teaching; but Russell and I were young, full of enthusiasm, and so galled by the profession that we threw all our energies into what might advance homœopathy through our dispensary, and we heeded little for private practice."

Before entering upon the body of my subject, I deem it well to chronicle the following short notice of the arrest of homœopathic teaching in Aberdeen, where for several years our talented *confrère*, Dr. Dyce Brown, had given practical instruction to not a few medical students. In answer to my question as to the means which existed in Aberdeen for homœopathic instruction, I received the following letter from Dr. Dyce Brown: "I am sorry to say that since last April I have not been able to do as I used to do, no longer having my dispensary appointment. When there I always had about six pupils with me, who came for six months each, and to whom I first gave a lecture explanatory of what homœopathy really is, and as we examined each case, I explained the principles of the treatment and the action of each medicine prescribed, with its indications. I have had, however, some enemies among the Board of Directors, who have for some time back been trying various means to get me out. Last year they succeeded in getting a rule passed by which one of the six medical officers should go out annually—not by rotation, which would have been intelligible, but by *ballot*! The local papers, at the time, noticed this, only to condemn the principle, and the Medical Society took it up, but decided on not taking any action or steps, as they believed such a rule would never be put into operation. At the meeting in April, however, they were told that the rule was to be acted on, and I was balloted out!

The Provost, who is chairman, told me afterwards that he was much surprised when he found that it was I who was to go out, and if he could have overturned it he would. The work was beginning to be cumbersome on my time, but I do regret it, mainly on account of my thus being deprived of the opportunity of sowing the good seed among the students I half think, in the meantime, of giving a course of lectures on homœopathy and homœothic therapeutics, perhaps during the summer season, and as I am well known among the students, I think I could get a class. However, this is only in the future.'

It will thus be seen that the only means really existing in Great Britain and Ireland up to the year 1874 for the education of young physicians in the science and art of homœopathy have been such as they could attain by self exertion, patient study from our books and literature, or obtain by attending at our hospitals and dispensaries, aided by such private teachings as they could reach through their knowledge of some practitioner of homœopathy. The want of regular, systematic teaching had long been felt, and had been insisted on in many articles in our periodical literature, but no action was taken till the year 1874. In his address at the close of his term of vice-presidency of the British Homœopathic Society in this year, Dr. Bayes impressed upon the Society that one of its duties was to provide means for the systematic instruction of young physicians in the science of homœopathy. In response to this suggestion, Dr. Richard Hughes wrote to Dr. Bayes, expressing his willingness to deliver a course of lectures on the Homœopathic *Materia Medica* and Therapeutics, if the Hospital Board of Management would permit him to do so at the hospital. The Board of Management referred Dr. Hughes' offer to the Medical Council. Unfortunately the council was divided in opinion, and the majority decided against the advisability of attempting the public teaching of homœopathy, on the assumption that there was not sufficient public interest felt in the subject to ensure its success.

This rejection did not, however, discourage the promoters of the movement, and Drs. Bayes and Dudgeon brought the

matter forward at the next meeting of the British Homœopathic Society. The following resolution was the result: "At a meeting of the British Homœopathic Society, held on Thursday, November 5th, 1874, the following resolution was passed. Proposed by Dr. Bayes, seconded by Dr. Dudgeon, and carried.

"That in consideration of the feeling expressed by many members of the British Homœopathic Society, that the time has come when courses of lectures shall be delivered in Great Britain, in which the science and practice of homœopathy should be taught, the Society appoints a committee composed of the following gentlemen to examine into the question, and report thereon:"

Drs. Hamilton, Yeldham, Dudgeon, Black, Drysdale, Drury, Leadam, and Bayes, with power to add to their number, Dr. Bayes to act as honorary secretary and convener.

The committee exercised the power to add to their number by electing the lecturers and the internal officers of the hospital staff as *ex officio* members, and at the first meeting of the committee on December 29th, 1874, the following met:—Drs. Yeldham, Leadam, Drury, Dudgeon, Hale, Mackechnie, and Bayes.

The committee recommended that courses of lectures should be delivered at the hospital—one lecture in each week—on the following subjects:—

1st.—On the Theory and Practice of Homœopathy, by Dr. Dudgeon.

2nd.—On Homœopathic Materia Medica and Therapeutics, by Dr. Richard Hughes.

3rd.—On Clinical Medicine, by the officers of the Hospital Staff.

They further recommended that Drs. Dudgeon and Bayes should be appointed to carry out the details.

In accordance with these recommendations, which were unanimously adopted, the British Homœopathic Society appointed Dr. Richard Hughes to deliver a course of lectures on Homœopathic Materia Medica and Therapeutics.

Dr. Dudgeon was deputed to give two introductory lectures on the Theory and Practice of Homœopathy; and Dr. R. Douglas Hale was requested to deliver a course of lectures on practical medicine. The subject chosen by him was "On some Acute Diseases of the Chest—Laryngitis, Bronchitis, Pleurisy, and Pneumonia."

The lectures were delivered weekly at the London Homœopathic Hospital, and were attended by a small but attentive class of medical students and young physicians.

The success of the first session of these lectures (1874-5) was such as to induce the Society to determine their continuance during the present session (1875-6), Dr. Bayes being requested to deliver the introductory lecture, on October 7th, 1875. Dr. Richard Hughes was again appointed to deliver a course on Homœopathic Materia Medica and Therapeutics, on each succeeding Thursday, while at the conclusion of his course the following courses on homœopathic medicine are to be delivered by the medical officers to the Hospital, and by Dr. Drysdale:

1. Lectures on Diseases of the Digestive Organs, by Dr. Mackechnie, one of the physicians to the London Homœopathic Hospital.

2. Lectures on Diseases of Children, by Dr. Drury, Physician to Diseases of Children at the London Homœopathic Hospital.

3. Lectures on Diseases of the Chest, by Dr. R. Douglas Hale, one of the physicians to the London Homœopathic Hospital.

4. Lectures on Diseases of Women, by Dr. Duncan Matheson, Physician to the Diseases of Women at the London Homœopathic Hospital.

5. Lectures on the Theory of the Homœopathic Principle, by Dr. J. Drysdale.

The organization of these lectures is very simple. The British Homœopathic Society pays the expenses incurred for printing and advertising. A lectures committee consisting of Drs. Black, Drysdale, Yeldham, Leadam, Hamilton, Dudgeon, Mackechnie, Drury, R. Douglas Hale, Richard

Hughes, Matheson, James Jones, and Bayes, has the control of the general management. This committee is only called together on special occasions. It has appointed Drs. Dudgeon and Bayes, a sub-committee, to make arrangements and to conduct details, and Dr. Bayes is appointed the honorary secretary. There is a further intention to organize regular clinical instruction at the hospital on one or two days in each week. The hospital is capable of accommodating seventy patients, but the funds only permit of its receiving about fifty. This number is but small for the purposes of clinical instruction, but it is to be hoped that the present movement will show both professional and lay homœopaths the need of greater exertion and that we may soon see the seventy beds all filled. Our present session, 1875-6, has commenced most encouragingly; the introductory lecture was fully attended and the secretary has registered twenty students, many of whom are physicians of the old school, desiring to study the system of homœopathic therapeutics.

There is no other attempt at a systematic teaching of homœopathy in Great Britain or Ireland. There are hospitals at Birmingham and Bath (the latter is very small). There are many excellent dispensaries in different towns and cities—foremost among which that of Liverpool holds its pre-eminent position. Physicians desiring to see the practical working of the homœopathic system can learn much at these institutions. At Liverpool, for example, Dr. Drysdale remarks, in a response to our inquiry: "I am sorry I cannot say there is any clinic or systematic means of instruction at our dispensary, nor would it be of any use if there were, as far as I can see, for nobody would come to it—the students of the medical school certainly not, and the younger medical men may come now if they choose. There are plenty of opportunities for any one to learn our practice at the dispensary if he is willing, but we can hardly say we have any persons who can be reported as students. It is true some medical men have, at times, taken advantage of the opportunity, but these are very few and generally their conversion has been made in some other way

before they came. The chief advantage of this dispensary, as a school, is the house-surgeoncy (which gives a man a house and £100 per annum), which has given experience to many young men—on an average one per annum; but of course they were converts before they took the place. We have also two or three posts as stipendiary medical officers (salary from £50 to £70 per annum) who are allowed private practice. This has been found useful and has encouraged some medical men to settle here in practice.”

Although it will be seen that our “existing means” for the public instruction of young physicians in the science and art of homœopathy are at present crude and small in their beginnings, yet it is to be hoped that the question is now fairly placed before us and the foundation having been prosperously begun, that we may in each succeeding year see an increment of superstructure that may result in the firm institution of a school of homœopathic therapeutics.



