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# HOMŒOPATHY

AND ITS

Requirements of the Physician;

AN

ADDRESS

DELIVERED BEFORE THE

HOMŒOPATHIC MEDICAL SOCIETY

OF THE STATE OF NEW-YORK,

AT ITS SEMI-ANNUAL MEETING HELD AT SYRACUSE,

June 1, 1852.

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OF NEW-YORK.

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# ADDRESS.

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GENTLEMEN OF THE STATE MEDICAL SOCIETY!

LADIES AND GENTLEMEN!

The age in which we live has been so often styled the "Age of Wonders" that it is beginning to tire a little of the appellation. Speeches, discourses, addresses and sermons without number have found "the progress of the age" the most fruitful as well as the most acceptable topic, and have viewed it in its present, its retrospective and its prospective relations. The past has been summoned as a witness, that its paltry achievements might serve as a foil for the dazzling splendors of our own day, and the prophetic imagination has found no difficulty in creating a future which in turn should pale the ineffectual fires of the present.

We have been told, *ad nauseam*, of the wondrous, giant force of steam; have been shown its prodigies of labor performed from the draining of a sea to the manufacture of a pin; have been transported with the speed of the wind upon its arms, and have listened to a whisper no longer faint, which intimates that its reign is over and demands that its inconvenient fires and its cumbrous and explosive kettles shall yield to some compacter, readier and more manageable motive power. We have, most of us, witnessed the first out-birth, the growth and perfection of the railroad, on which as on the talismanic carpet of the Eastern tale, we take a confident seat to be transported at once whithersoever we will. We have heard, and some of us can remember, the snail-like pace at which our ancestors were content to travel, and with complacent pity for the little use they were able to make of life, can demand for ourselves and our children

some still cheaper and more satisfactory mode of annihilating time and space, and of assimilating the life in the flesh to that of the spirit. The electric telegraph, that pulse of the world that laughs to scorn the feat of earth-girdling Ariel, has not failed to furnish its quota of wonderment and applause, and its expensive and unsightly wires are already loading every passing breeze with cries to the philosophers to relieve the landscape of their deformity and themselves of an office, which air, earth and water have special commission to fulfil. Skeletons of steel with never-tiring joints, surpass the miracles of the mountebank of old and furnish from exhaustless jaws whole leagues, not of ribbons only, but of woven cloth, and the wardrobe of a queen may be purchased with the dowry of a village maid. The world has been made happier, wiser, better. Its strides in all that relates to social intercourse, to a superior natural humanity, to all that is included in that most significant and untranslatable of words, *comfort*, have been enormous—the handle of Death's scythe has been shortened; he no longer takes the same expansive sweep and a few sands have been added to his remorseless glass.

These things we have heard, and, with hearts responsive to human welfare, have joined in the universal shout of joy and gladness, and of praise to Him who is the Author of All. But *we* have had a cause of rejoicing unknown to many of those about us. We who have witnessed and welcomed the first gray streaks of dawn in the medical art; who have faith that the morning has come, whose effulgent mid-day shall bless the world with a true therapeutic art, and chase the shades of suffering, disease and death to their darkest corners—we have indeed a source of joy in the present unknown to others, and an end in life worth living for. It is this common bond, the possession of this common treasure, and the desire to impart it as an inestimable boon to the whole human race, that has drawn us from our business and our homes to-day and gathered us into a social union, never, I trust, to be broken. It is this common glimpse of the future of medicine, as glorious and beneficent as its past

has been disastrous and destructive, that encourages us, in the midst of opposition, obloquy and persecution, to hold on our way in hope, looking to the end, when our labor shall receive its due reward. It is our Faith in Homœopathy as a revelation of the True in Nature, that makes us brothers, not for a day only, but for ever.

The discoveries of Hahnemann have now been half a century before the world, and so far from fading or becoming antiquated, as has been the inexorable fate of medical theories heretofore, they were never fresher nor more vigorous than they are to day. But they have been misrepresented or not understood; both malice and ignorance have been busy with them, and at the risk of relating a twice-told tale, I ask your attention, for a few moments, to a consideration of the essential point announced by Hahnemann, and which constitutes the ground-work of Homœopathy.

The great end of Practical Medicine is to furnish the physician, as he stands at the bedside of his patient, with an answer to two questions: 1. What is the matter? 2. What will help? The first is the province of *Diagnosics*; the second of *Therapeutics*. What has medicine hitherto done for the solution of these two questions? How has she enabled the physician to answer them, to what extent, and with what results?

It is not difficult to see that, practically, the second of these questions is by far the more important and that the solution of the first is only desirable, as a matter of scientific curiosity, or as it tends to assist in the elucidation of the second. Had the physician an instinct that would lead him, on sight of the patient merely, to an infallible remedy for his disorder, or were there a special revelation to the same effect, it is plain that to enquire what was the matter, would be a superfluous waste of time. On the other hand, the nicest investigation and most accurate determination of the morbid sensations of the patient and of the internal changes in his economy, might be had without advancing one step towards ascertaining what would relieve him, and would be, *practically*, so far as the relief of suffering was concerned, of not the slightest avail.

But the first question is far easier of solution than the second ; it is a matter of comparatively little difficulty to ascertain the symptoms of the patient, to palpate and percuss his body, to listen to the various signs of disease within, and from these data to infer the state of the internal organs. The proper use of the senses, the revelations of the scalpel and dissecting table, and the study of Physiology, will do much towards furnishing an answer to this question ; but, as to what will help—among all the forces of nature, to determine which will lend its beneficent aid at the impending crisis and restore order and harmony where all is disease and threatened death—this is indeed a problem of far greater and more appalling difficulty. There is no golden thread in this bewildering labyrinth—the plants and minerals that lie in such lavish profusion around us are labelled by no kind hand to indicate their use—the eye detects no visible link between the symptoms of disease and the powers of the material world. The case seems hopeless without a revelation. It is no wonder, then, if physicians, earnest, zealous seekers after truth, as many of them have been, should have abandoned, in despair, the prospect of this most desirable consummation, and should have devoted all their time and talents to the more promising field of Diagnostics. And such has been the case ; the history of Medicine for the last hundred years, with a few accidental exceptions, derives all that is brilliant in it from the lustre of discoveries in this department of practical medicine, and from the splendor of researches exclusively physiological. These have not been few nor far between ; and when we review the names and remember the contributions of Sydenham, Hunter and Haller, of Pinel, Andral and Louis, of Oken, Wagner, Bischoff, Hufeland and Schönlein, we cannot but acknowledge that they have done all that men could do, and feel a sentiment of gratitude that we, too, are members of a profession that has the privilege of claiming such illustrious ornaments.

But, alas ! these brilliant discoveries, these glowing gems fresh from Nature's laboratory, while they sparkle upon the brow of the fortunate finder and illustrate the nature of the suffering that nightly tosses the sleepless patient from side to

side, quench not his fevered thirst nor ease his aching head. They can but cast a dim and flickering light upon that question, to him, to humanity the most important of all—What will relieve?

But it must not be supposed that medicine, although despairing of a perfect solution of this important question, has not from time to time made some rude attempts to evoke an answer. When the symptoms were superficial and of such a character that they admitted of an opposite, it was the most natural thing in the world to apply the remedy on the principle of contraries. Thus, if the patient felt cold, any one who had been relieved from cold by applying warmth, would suggest the application of hot cloths or fomentations, additional covering, and the internal administration of warm drinks. On the other hand, if the patient were hot, the contrary course would be resorted to, to procure relief. But a case would soon present itself in which the remedy was not so easily pointed out; what, for instance, is contrary to a headache or a toothache, a cough or a lumbago? Here the principle of contraries is at fault in its direct application and recourse must be had to an intermediate step—thus if the headache, the toothache, the cough or the lumbago be conjectured to depend upon too heated a state of the blood, the remedy is obvious—cool it; if upon a cold state of the fluids—warm them; if the fluids are too thick—thin them; if too thin—thicken them. By virtue of this intermediate step and a little ingenuity, prescribing becomes again easy, but unfortunately, science and certainty vanish and the prescription that the same patient will receive, is determined, not, as it ought to be, by his sufferings, but by the particular theory, which the physician who sees him may adopt respecting the origin, the hidden cause or the conjectural character of his malady.

The absolute necessity for this intermediate step has been the curse and blight of all progress in the medical art. What that step would be, would depend, as it is easy to see, not upon any fixed rule, but upon the particular idiosyncrasy of the doctor, upon his favorite theories, upon the character of the last book he had read or of the last case he had seen

upon his day dreams, nay, upon the whimsey of the moment. There are indeed some men endowed by nature with sense strong enough to perceive the absurdity of this mode of prescribing, and who have steadily refused to admit the intermediate step of theory, and, calling themselves empirics, have made use of such remedies only as they had themselves known to do good in similar cases, or such as they had heard to be beneficial in the experience of others. But one man can see but a few cases in a life-time, and even could he see a thousandfold as many, time would still fail him to try even a tithe of the remedies, the relative virtue of which he might desire to test in a particular case. *His* prescription will be guided by the remembrance that in such a case which was somewhat similar to the one in hand, such a remedy did good, or that Dr. So-and-so recommends in such cases the employment of such-and-such a course, which he thinks he will try. There is no relief to the mind aching for certainty here—ten physicians will give ten prescriptions, not a single ingredient of any one of which may figure in the others.

And this is not an overdrawn picture of the present state of the medical art. It has at various times made various blind, half-frantic plunges, in various directions, in search of a reliable guide in therapeutics; now struggling to establish a system of specifics for diseases of the same name, and now abandoning the attempt as hopeless; now endeavoring to discover a single panacea for all disorders, and now recommending all remedies in every disease, and from the accumulated chances of ages, the crush of systems and the wreck of theories, preserving more by blind good luck than intelligent intent, a few true indications for particular groups of symptoms. Thus, the savages of South America revealed the powers of Peruvian Bark against fever and ague, which their enlightened compeers have used about as intelligently as the savages themselves, prescribing it, as they received the lesson, indiscriminately for every case of intermittent fever, no matter how various the phenomena of the paroxysm, nor how different the character of the affection, if it only presented the appearance of intermittence. This monotony of prescription



was fortunately varied by a similar stumbling upon arsenic as another *anti-periodic*, and various others have succeeded in turn, each for the time threatening the reign of its predecessor, as a panacea for intermittents; but these successive revolutions in fashion have been followed by no attempt to ascertain whether each remedy might not be specific to a *certain form* of fever, and by no endeavor to determine this most interesting and important relation. The only practical rule that has resulted from the accumulated experience of ages and from the throes of the wisest and most accomplished brains, is—use the first remedy you think of and if that does not help, try another.

This state of things in an art where life and health are at stake—an art, in which, if in no other, certainty the highest is desirable, is appalling in thought; how much more in reality! Imagine yourself for a moment stretched upon a bed in a hospital ward. The high ceiling, the whitewashed walls, the scrupulously clean bare floors, the hushed movements of the nurses, and the quiet stillness of the place inform your bewildered senses where you are, while a bed at the distance of a yard on either side, with its clean appointments and mute tenant, imparts the unconscious comfort of a fellowship in suffering. Your skin burns with fever, your parched tongue hangs powerless within your arid mouth, your eyes feel scorched in their sockets and involuntarily close against the light, your pulse throbs as though it would burst the channels which confine it, and your brain on fire is just playing with the fast coming shadows of delirium. The quiet is suddenly broken; you hear a great shuffling of feet upon the stairway; a door is opened, the shuffle enters and gravitates around your bed into a busy rustle. You half open your languid eyes and turn your weary head to behold a crowd of eager faces, and a wilderness of eyes all gazing into yours, and the delirious shapes of fancy begin to take on a more substantial form.

“Gentlemen,” says a voice, “this is a case of fever. Fever, gentlemen, is simply an effort on the part of nature to get rid of a morbid matter which has obtruded itself upon the system; unless it can be expelled, death will ensue; our business is to

let nature alone; she knows what she is about, and if we attempt to aid her, we may foil all her plans—let us watch the case with care; when we perceive a critical evacuation, which in case of recovery will probably take place on the seventh or ninth day, we may consider the patient as convalescent. Let him have water to drink.” With a dim perception that your fevered tongue is to be bathed in the deliciousness of a cold draught, you eagerly stretch out your hand for the welcome vessel, but there is no one there—the Hippocratic group has passed on to another patient.

A quarter of an hour elapses and the phantasms of your brain grow broader, more solid, and more grotesque; you feel tempted to enter into conversation with them, when another shuffle preludes a second gathering of substantial forms about your bed. “Gentlemen,” says a somewhat spiteful voice, “all diseases belong to two classes; in one, the vital force is in excess; in the other, it is in defect. The case before us, which is one of fever, is unquestionably one of the former sort; the vital force is in excess, as is evident in the excessive action of the heart, the brain and the lungs. Our course is to reduce the vital power, and this we must accomplish speedily, or the patient may die. Bleed him until he faints, and repeat it if necessary; give him purging draughts until the fever remits—and nothing to eat.” The Brunonian and his troupe shuffle away; the phantasms begin to have blood-red faces, while some with pale and wasted visages lift feebly up their arms reduced to skin and bone, and slowly shake their heads.

But another comes; your brain reels again, but you are becoming madly indifferent to what goes on around you. This is a mild-spoken, gentlemanly voice, however, and falls soothingly upon the ear. “Fever, my friends,” it says, “arises in all cases from an irritation or inflammation in the mucous membrane of the intestinal canal. This I have shown you in many cases in the dissecting room, and we can have no reasonable doubt on the subject. The patient must be kept on low diet; let him have cooling drinks and gum water, and we will see when we come round again, if he

needs anything more." The Frenchman disappears. Poor throbbing head! no relief from all these counsellors? You think you will ask one of the phantasms for a glass of water, but are interrupted by the formation of another circle.

"This case is evidently a serious one." This time it is a round, full, confident voice that speaks. "Fevers are caused by inflammation of the brain; there is plainly here a highly inflamed state of that organ to give rise to such a grade of fever. His head must be shaved and ice constantly applied—a dozen leeches to the temples—a blister to the nape of the neck—bleed him freely from the arm and give him a smart purgative to clear the *primæ viæ* and determine to the intestines—keep this up until the fever yields." The phantoms grin ghastly smiles; a skeleton or two nods approvingly as though they would say, "Aye! aye! either the fever or the patient always yields to Clutterbuck."

But enough of this. Do you say this is not a picture of medicine as it is, but as it was at various periods of its history; modern improvements have entirely antiquated these old-fashioned notions and have introduced an essentially rational method of treatment? I am heartily glad to hear it; will you be so good as to point out what it is? No! Hippocrates, Brown, Broussais and Clutterbuck, and a score of others, divide among them the present race of physicians, and if their followers do not in words adopt the whole of their respective theories, the treatment is still essentially founded upon them. And can this be called a *science*? that when you send for a physician, the treatment your disorder will receive, depends entirely upon what corner your messenger turns on his errand? That the most opposite directions will be given and the most diverse drugs be prescribed for the same disease, according as he lights upon this or that doctor? *This* a science! as well call Chemistry a science, if the tests for poison were to be determined by the color of the bed-quilt under which the victim was found in death! As well call Law a science, if the construction of a contract were to be ascertained from the length of the nose of the scrivener who reduced it to writing!

Lest I should be accused of unfair exaggeration, let me give you the testimony of one who is an ardent adherent of this no-system of therapeutics. In no case are its deficiencies so glaringly and strikingly brought out as when it is compelled to treat a new and unknown disease. How many, various and opposite were the infallible remedies for cholera! Hear Dr. Bushnan on this subject:—\*

“Let us pass in review these remedies, so as to obtain, as it were, a bird’s-eye view of them. They defy classification. Omitting, for the moment, the complex methods by which Cholera was to be vanquished, what were the simple specifics that were to cure, infallibly cure, the fearful enemy?”

“Water, of every temperature. ‘Wrap the cholera patient in a cold sheet,’ says one. ‘Dash cold water repeatedly over the sheet in which he is enveloped,’ says a second. ‘Ply him well with cold water internally,’ says a third. ‘Freeze him; cool his blood to 30° below zero,’ adds a fourth. ‘Fools that ye are,’ exclaims a fifth, ‘thus to treat the half-dead with cholera—I say, wrap him in sheets soaked in boiling water; and having thus half-cooked the shivering wretch, conclude the process by placing him over the boiler of a steam engine.’

“Sage advice, learned Thebans! the blood is dark, and the surface cold. ‘My theory,’ shouts one man, ‘is that oxygen reddens the blood, and by its action on that blood, generates heat; therefore make the patient inhale oxygen.’ ‘Nay,’ rejoins another, ‘the blood in the lungs is too bright; oxygen has nothing to do with the generation of heat; stifle him with carbonic acid.’

“There are cramps present, which cause much suffering, and therefore, are they the symptoms especially to be treated. Chloroform annihilates pain—let him breathe chloroform.

“‘It is evident,’ avows one sapient doctor, ‘that there is no bile in the stools; therefore calomel should be administered.’ ‘It is plain,’ says another, ‘that diarrhœa is the great evil; therefore let him have opium’—that is—the drug which effectually prevents a free flow of bile.

“‘He is cold and depressed—what so natural as to stimulate.’—The wisdom of the proposal is proved by the numbers who recommended its adoption—the folly of the many is manifested by the proportion who died under the use of stimulants.

“‘Give him alkalies,’ vociferates one man. ‘Nay,’ says another, ‘lemon-juice and acids are the true remedies.’

“‘It is simply a stage of intermittent fever,’ maintain some; ‘therefore,’ they add, ‘the drug for its prevention and its cure is quinine.’ ‘Not half potent enough,’ whispers a supporter of the same theory, ‘give him arsenic.’

\* *Cholera and its cures; an Historical Sketch*, by J. Stevenson Bushnan, M.D., London, 1850.

“Certain fanatics refused the use of medicine, but in the course of their religious mummeries, administered to the credulous a cup of olive oil. A patient recovered and ‘Eureka!’ shout the populace. *Vox et præterea nihil*, say those who wait awhile before they decide.

Opium in one man’s mind is a specific in small doses—the twentieth of a grain frequently repeated. ‘Nonsense,’ says another, ‘opium is a specific, but let it be given in doses of from six to twelve grains.’ The latter has one advantage; if the power of absorption yet remains to the stomach, the patient will assuredly be saved all further pain, and, if he be a good man, mercifully provided for in a better world. However, as the duty of the doctor is to keep men here, and not to hurry them off there, we suppose twelve-grain doses of opium will not be very extensively recommended by the profession.

“‘Calomel is the specific that will stay every symptom of the cholera, bring back the absent pulse, restore the genial warmth of the icy skin, bid bloom again the leaden cheek; give it, then, freely, in large doses—give twenty or thirty grains and see its magical effects.’ ‘Do so,’ says an equally devoted admirer of calomel, ‘and you will give the last blow to the dying wretch. Calomel is the remedy, but it must be insinuated into the system in small doses, frequently repeated.’ ‘Bah!’ replies the first, ‘if you follow this man’s whim, the patient will slip through your fingers.’

“Then come other infallible specifics—pitch, sulphur, phosphorus, and carbon; gold, silver, zinc, and lead; strychnine, salicine, morphine, and cannabine; hachshish and zhorabia; abstraction of blood and injection of blood; perfect repose and incessant motion; to the skin irritation the most severe, applications the most soothing; stimulants the most violent, sedatives the most powerful; inhalation, flagellation.

“But if these are the simple, what are the complex methods of treatment that have been proposed? A combination of all the absurdities contained in the foregoing. Let us just draw the reader’s attention to one compound method of treatment. Here are the remedies proposed by one gentleman:

“Port wine, calomel, opium, sulphate of potash, powdered ipecacuanha, spirits of nitric ether, cardamom seeds, raisins, carraway seeds, cinnamon, cochineal, camphor, aniseed, benzoic acid, benzoin, storax, balsam of tolu, aloes, rhubarb, sal-volatile, ipecacuanha wine, bitorate of soda, oxide of bismuth, spirits of wine, nitrate of silver, tartar emetic, potassa, bismuth, calumba, canella, sulphuric ether, cayenne, brandy!

“What a divine afflatus must have distended the mind of the proposer of the above remedies ere he could have conceived the idea of bringing such an assemblage of drugs into one prescription! Think of the wisdom that must have guided the choice of each and apportioned the fitting dose! And then fancy that all are to be administered to the same unfortunate stomach during the short space of forty-eight hours!”

Such is the view of *rational* medicine, as applied to the cholera, given by one of its adherents. Nothing redeems the picture from the rarest absurdity but the melancholy reflection that into this chaos of conflicting opinion and practice, our lives and that of those most dear to us on earth, are to be projected in case of sickness, whether to emerge or not only known to an Allwise Providence. And if the promises of the present seeming are to be fulfilled, and we are to witness in the course of a few years the devastations of another of God's messengers, as yet through His mercy unknown to our shores, these scenes will be repeated in still greater horror and confusion. No remedy, no course of treatment have yet been devised for The Plague; it still glares savagely upon victims despairingly abandoned to its jaws, and if an equal farrago of antidotes has not been proposed against it as against the cholera, it is only because it has been less familiar and more distant.

Such are the resources of allopathic medicine, and such the results of its earnest endeavors to resolve the great question of Therapeutics, 'what will relieve'—a confused, discordant mass, devoid of system and destitute of certainty, and a history full of rude experiments at the expense of life and health, and without result! Turn we now to another scene.

The Cholera, for the first time within the authentic records of history, has broken from its native jungles of the Ganges, and with steady stride, from day to day, approaches the confines of Eastern Europe. Terror and dismay precede it, and its course is marked by heaps of blue and ghastly corpses. The nations of Europe begin to tremble at its anticipated approach, and with puny efforts set up their sanitary cordons and quarantines, as though the pestilence travelled in a coach-and-four and upon the solid ground and not upon the viewless wings of the air. Born in the pestilential heats of the tropics, it seems to revel in the fiery temperature of India, and to rage with equal fierceness in the frosts of a Russian winter. No precautions can escape it, no travel avoid, no constitution resist, no prescription cure its fierce attack. The resources of the medical science of Europe are deployed

in anticipation, but the confused and turbulent medley of cries that arises from the theorizing phalanx gives no promise of healing virtue in its sound, and the onset of the destroyer is awaited in despair. But, unknown to the world, there is hope. In a little chamber, in a small town of central Germany, sits a gray-haired old man, unknown to fame. The cholera has not yet reached his land; he has seen no case of it, but he is intently perusing the descriptions of the disease as given by those who were eye-witnesses of its deadly march, and ever and anon comparing it with a pile of manuscript that lies before him; he works steadily on, and a gleam of quiet exultation lights up his noble features as he takes a pen and writes three words only: CAMPHOR, COPPER, HELLEBORE. Out of the realms of nature, without ever having seen the disease, he has selected these three substances as the remedies to subdue its power. And experience confirms the choice! In the presence of these three, as it were controlling powers, the pestilence has lost its sway; it yields gently, kindly and rapidly; the most opposite theorists, the most varied minds, the most prejudiced observers, in the most widely separated lands, all concur in bearing a unanimous testimony to the efficacy of the remedies of the old man's choice.

Yet once more. A warlike encampment appears in that blood-stained battle ground of Europe, Central Germany. Excess, riot, intemperance, filth and the closeness of a crowded camp have bred a pestilential fever; the hospitals are full, and yet the sick abound and the dead cannot be removed in time to make way for new candidates for a similar place and a similar removal. In the midst of the dead and dying we behold the same benevolent figure that we saw before, his back slightly stooping from age and the gray hair streaming around his venerable temples. He examines the sick with great care and minuteness, passes from one to another, gathering with earnest attention the various symptoms, and after a day spent in this toil, reaches his home in deep thought. His books and manuscripts are referred to for a moment, and his figure appears to expand, as with one

hand he seems to reach to a neighboring hedge and pluck thence a *bryony vine*, while with the other he stretches across the broad Atlantic to the forests of the New World to obtain the *poison ivy*. These he declares to be the remedies for the fever he had witnessed, and

“—as the bright sun compacts the precious stone,”

so the light from the multiplied experience of nearly half a century, far from weakening his assertion, has compacted it into the strength and solidity of adamant.

Here, indeed, is a brilliant, a glorious solution of that terrible problem of therapeutics! By what magic has this been effected? What league has this old man entered into with the secret intelligences of Nature that he stands at the bedside of the sick, and when all the powers and agencies of the universe throng around him, entreating to be used, he can with discriminating finger select that one, and that alone, that shall be serviceable in the case before him? He has dived deep into the recesses of Nature and has brought up a pearl of price—a universal principle, by the aid of which the question, “What will relieve?” is satisfactorily solved, not only for an isolated case or two, but for all possible cases in all possible forms. He has called it the *homœopathic* principle, and the secret is this: when you find a patient suffering, select that remedy which, having been previously administered to a healthy man, has produced in him a similar suffering. How simple is this rule! It is no theory—it is a *practical law*—it obviates entirely the necessity of the intermediate step which we have seen to introduce so much fallacy and falsity into practice, and brings the very sufferings of the patient face to face with the remedy without the chance of mistake or misconception. It admits of no theory, it interferes with no theorising; if the physician choose to befog himself with hypotheses of irritation, or inflammation, *sthenia* or *asthenia*, *humorism* or *solidism*, so much the worse for him, but he leaves them in his closet—at the bedside they have no place; there the sole questions are—What does the patient suffer? and—What agency has pro-



duced similar suffering in the healthy? The simple answer to these questions settles the whole difficulty, and whether the vital force be in excess or defect, whether the brain or the intestines be inflamed, the cure takes place in accordance with the unfailing law. He who asks and answers these questions at the bedside, and administers the remedy accordingly, is a homœopathic physician—he who selects a remedy on any other ground is not.

We, fellow-members of the Homœopathic Medical Society of the State of New York, believe this to be the revelation that is to become a revolution. We have tried and tested this law on our own persons, in our own families, among our friends and upon our patients. We *know* it to be true—we *believe* it to be a universal, absorbing truth. This is the tie that binds us together—this is the nucleus about which our infant association has just commenced to crystallize,—by this we are willing to live, by this were are ready to die. The trust that is put into our hands is an important one; in return for the blessings which Homœopathy has conferred upon us, she imposes upon us duties not a little arduous and highly responsible.

Let me stretch your already very charitable patience while I allude to one or two of these.

1. We are required to be Apostles of the new faith. We stand in a position in which no successors of ours can possibly stand and have duties which those who come after us cannot possibly fulfil. We are comparatively alone—we are in the midst of a mixed generation of the ignorant, the indifferent, the sceptical, the sneering, the malignantly opposed. The office of an apostle is not a luxurious one; his couch is not lined with velvet nor is his a crown of roses; it is no sinecure to enlighten the ignorant, interest the indifferent, convince the sceptical and disarm the opposer; but, not to do this in so far as in us lies, is to be recreant to the claims of truth, the dictates of gratitude, the appeals of humanity and the requirements of God. This we must do—we must endeavor by all means, by united and strenuous effort, by word of mouth, by

the pen and by the press, by societies and associations, to disseminate as widely as possible that beneficent reform, of the excellence of which we are so deeply convinced.

2. It is also our duty as well as our pleasure to lend all our energies to the development of the resources of Homœopathy. This can be done in various ways. Our common art did not spring full-grown and armed from the brain of its venerated author. It was, at first, but a skeleton principle, and before it could be made serviceable in the cause of humanity and walk, a living, healing thing among men, it must be clothed with flesh and blood. By the very terms of the capital rule, before a remedy could be selected for a disease, it must have been ascertained what effects were produced by it upon the healthy organism, and of this nothing was known or next to nothing. The terrible task of filling this hiatus did not deter Hahnemann from its inception and vigorous prosecution—its completion who shall witness? With a small but slowly increasing band of pupils and assistants, he began the work of introducing various drugs into the system and watching and noting their effects; a labor the results of which have now developed into libraries. It is needless to dwell upon the pains, the sufferings, the constant mental and bodily torment which they underwent—it is our privilege to undergo the same—the mass of matter which has now accumulated in the homœopathic *Materia Medica* has become a huge unwieldy bulk, which no industry can master and no memory retain. It is the duty of the homœopathic physician to endeavor to ascertain and discriminate the *characteristic action* of drugs, or of classes of drugs; that in which they differ from every other remedy or from every other class of remedies—to discover a principle of classification of remedies and then the characteristic action of each drug of a class. It is not too much to say that, thus far, no progress has been made towards this desirable result—the field is unoccupied and inviting, and in no other can the philosophic physician be employed to greater advantage. The classification adopted by Hahnemann into remedies from the animal, vegetable and mineral kingdoms, was one of the rudest

convenience merely, having no pretensions to scientific character. It gives us no new information about them and is of no more service to the physician in his practice, than it would be to tell him, on the other hand, that his patient was born in Virginia or California. Griesselich and others, following Rademacher, the empiric, have endeavored to classify the *Materia Medica* by means of the organs of the body upon which the different remedies produce the strongest impression—thus the lamented editor of the *Hygea* has given us chapters upon cerebral and uterine drugs; others have enlarged upon hepatic and renal remedies, and those having relation to the mind. But, however useful this mode of classification may be as a temporary and transition mode, it needs but little reflection to perceive, that it cannot be in this way that a final scientific arrangement of the *Materia Medica* will be brought about. Setting aside the considerations that many drugs like *arsenic*, *lycopodium* and *sulphur*, attack the whole organism with impartial violence, and that it would be impossible in many cases to decide what should be the criteria of effect to determine the place of a remedy, the fact that the classes thus constituted, would overlap and run into each other, is fatal to it as a scientific basis of classification. Thus, if *arsenic* were placed, as it deserves, in high rank as an agent upon the skin, it could not be rejected from among those which act upon the kidney, and must head the list of those which influence the stomach. If *phosphorus* were classed with cerebral it must also be with pulmonary remedies. Others have hinted at chemical relations as likely to determine our classification, and have pointed to the phenomena of isomorphism as a rough hint for a beginning; but this test would fail for the vegetable and animal remedies, and can therefore never be a solid foundation. It would seem indeed that as the objects to be classified are *remedies*, the principle of classification should have some relation to the morbid phenomena against which they are to be used—the symptoms. But as yet, we are destitute of a scientific arrangement, and while every one is obliged for convenience sake to make mental use of such crude shift as he

may be enabled to devise, none should forget this great desideratum of Homœopathy, nor fail to labor diligently to supply it.

It is probable that one great cause of this defect lies in the uncertain and scanty nature of our physiological knowledge. While we have many invaluable facts in physiology, we have more lamentable *lacunæ* and no physiological system. With the advance of this branch of science we shall be able to comprehend with more completeness our provings; shall behold, as it were, the mutual relations of symptoms, and witness the re-animation and activity of those *disjecta membra* which are now dead and unserviceable.

Another reason may be found in the fewness of the drugs that have been proved, and in the poverty of many of the provings in characteristic symptoms. That the *Materia Medica* is becoming unmanageable has already been hinted at, and may be understood at any time from the dolorous complaints of physicians to that effect, and the groans that arise at the addition of new treasures to our stock. We have already too much, say they; let us render certain and complete what we have, before we add anything more to our inconvenient burden. That the inconvenience is due to the too great amount of matter accumulated, is, I think, untrue; I would rather attribute it to the fact that we have as yet gathered too little. The true artist cannot work to advantage unless he have all his materials about him; who could form a system of botany if he knew no plants but roses? what was the state of that science before Linnæus and what could he have done for it, had it not been for the rich collections of Sweden, Holland, and England, to which he had access, and the constant contributions of exotics which his fame attracted from every quarter of the world? The facility with which collections of facts can be used depends upon their convenient classification; classification depends upon resemblances and differences scientifically selected, but to be selected they must first have been observed, and to do this appropriately, requires the broadest array of facts that can be collected.

To leave our *Materia Medica* unaugmented then, is the sure way to leave it always unmanageable; we must, on the other hand, use every endeavor to add fact to fact, we must pile Pelion upon Ossa, and push our investigations into every department of nature. When we shall have accumulated an appalling amount of material, and sadly beheld it lying apparently useless and cumbering the country for miles around, some worthy inheritor of the mantle of Hahnemann shall appear, at the sound of whose magic spell the scattered masses shall spontaneously arise, and with orderly haste arrange themselves upon the eternal foundation of the therapeutic law, into a magnificent structure that shall be gorgeously illuminated by the risen sun of the Medical Millennium.

The task of accumulating this material devolves upon us. Physicians have thus far, with few exceptions, been the sole provers of drugs, and such will be the case hereafter. Let each one, then, consider it a sacred duty to add something in this way, from year to year, to the common fund. The material is inexhaustible; of the 1500 plants growing within the State of New York alone, not fifty have been proved, and the animal kingdom presents scarcely less wide a range, of the richness of which the proving of the *honey-bee*, of which our State has reason to be proud, affords a tempting foretaste. It is to be remembered that it is one of the revelations of Homœopathy, that

“There is no form upon our earth  
That bears the mighty Maker’s seal,  
But has some charm—to draw this forth  
*We need but those who feel.*”

The wonderful properties that have been developed from those apparently insignificant and inert bodies, silex, charcoal, chalk and sulphur, which are now and have long been such miraculous agencies in homœopathic hands, may well forbid us to despair of the hidden curative virtue of any substance, however unpromising, and establish us firmly in the belief of the inspired saying, that “Every creature of God is good!” Let us go on until not a malady remains of which the sure and

unfailing antidote shall not have been discovered; until typhus and tetanus, cancer and consumption, shall bow submissive to all-conquering, God-like art, and until there shall be no fading, shadowy, feeble forms, to whom the heart-rending announcement must be made—

“The fields for thee have no medic’nal leaf,  
Nor the vexed ore a mineral of power,  
And they who love thee, wait in anxious grief  
’Till the slow plague shall bring the fatal hour.”

3. The great remaining question in therapeutics, and one, toward the settlement of which it is the duty of the homœopathic physician to labor, is the question of the dose. The various considerations that cluster about this single point, the size of the dose, the extent of the dilution, the mode of preparation, the time of administration and frequency of repetition; all these will inevitably be at last determined, but cannot be safely settled without an immense induction. Our lives will probably be too short to witness the successful resolution of these controverted points; it is our business to contribute the data upon which the settlement shall be based; it will be the office of another generation to adjudicate upon them.

These, gentlemen, as it seems to me, are some of the principal duties that medicine imposes upon the practitioner, as an acolyte of the new and only scientific system of therapeutics. As a physician, she has higher and holier claims upon him. She requires him, as he is to minister to the infirmities of a diseased and disordered body, to be thoroughly master of its organisation; to be familiar with the abstrusest points of its anatomy and physiology, both in health and in disease. As his ministrations are to be conveyed through the material forces of the world about him, she requires him to be conversant with Chemistry, to be at home in Botany, and to make Geology and Mineralogy his frequent study. He must be well acquainted with the laws of physics; the phenomena of light, heat, electricity and magnetism, the forces of the sea, the air and the land will be constantly meeting him, and

must be familiar in their workings. The progress of modern improvements must not be a sealed book to him, and he should know not only the discoveries, but the theories of the learned men who form the reigning aristocracy of science. Above all, he must be, as it were, penetrated by the *Materia Medica*, having its important facts so systematised and reduced to order that he can command them at a moment's warning, as though they were parts of himself. I know that this is no easy task; I know that the time sufficient to acquire a complete acquaintance with the *Materia Medica* of the old school will not inform him of a thousandth part of what he must know in the same department of the New; I know that all his other acquirements are but the amusements of a leisure hour to the steady, toilsome acquisition of this indispensable knowledge. But without it, he is nothing. In the chambers of his memory must be suspended, side by side, in some true, convenient order, the historical pictures descriptive of the character of his drugs, and here he must bring his tablets of disease for comparison. The great law of cure must not be paraded there; it must have been engrafted into his inmost soul and have become an unconscious element in his being.

But his occupation deals not alone with the material; he is unceasingly brought into the closest contact with the immaterial part of the universe. The hearts of his patients cling to him with affection, while they look to him with reverence as the channel of knowledge and healing virtue. His truthfulness must know no stain; no circumstances whatever, I care not how threatening nor how intricate, can justify him for an instant in departing from the sternest line of integrity and truth; any seeming present advantage to be obtained by falsehood is destined, by the unfailing law of the Infinite Author of Truth, to bear fruits of disaster that shall cause bitter regret. He enters every sick room with a single feeling of love to the sufferer and a prayer for his relief; he knows no distinctions among men but those of the sick and the well; the poor, equally with the rich, receive his tenderest care, and when he accepts a fee, he does it without degrada-

tion, for he knows that he has labored without reference to it, and has discharged his duty from a nobler and more exalted motive. His manner is gentle, affectionate and kind; he is not angered by the caprices, the obstinacy, the wilfulness of the sick, but overcomes them by the kindness of his attentions and the gentle persuasions of an evident sincere desire for their good. Towards his fellow-physicians he is courteous, kind and affable; respectful to age and experience, encouraging the young, and enlightening, to the best of his ability, the inexperienced. He is no tale-bearer; as his profession leads him into the most intimate retreats and the most sacred secrets of every household, he feels himself bound by a thousand ties to the most absolute silence in regard to whatever he sees and hears. He makes no comments upon the practice of his professional brethren; his object being to do good and not to obtain practice, he is freed from all temptation to increase his business by defaming their characters or condemning their proceedings. He lives, as far as in him lies, at peace with all men, and when he dies, his grave blossoms with the love and affection of all who knew him.

Such, my brethren in the profession of medicine, is the faintest sketch of the character of the physician demanded by the Homœopathic Healing Art. Its gentle means need gentle ministers. Let us devote ourselves to the perfection of our beloved profession, to the constant diffusion of its blessings, and to the well-being of the sick; esteeming it as the highest privilege of our lives that we are permitted to be the humble followers of Him who opened the eyes of the blind, caused the dumb to speak, and healed all manner of diseases,—whose wonderful existence has been summed up by an inspired penman in the simple phrase—

“HE WENT ABOUT DOING GOOD!”