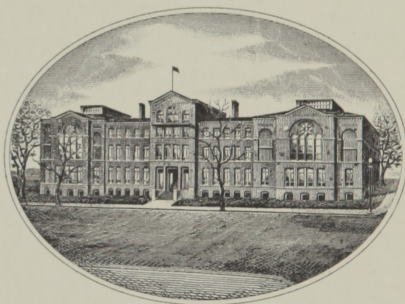


NATIONAL LIBRARY OF MEDICINE
Washington



Founded 1836

U. S. Department of Health, Education, and Welfare
Public Health Service



Dr. Warren & Co

Boston

with the respect
of the Author

New York
Jan. 1.

✓
✓
REMARKS

On the Report of the Committee of the Medical Society of this City, on the "Epidemic fever of Bancker Street and its vicinity, in the summer and autumn of 1820."

It is well enough to state, that this pamphlet comes from those who maintain the domestic origin of yellow fever. Some of these believe yellow fever to be a grade of bilious remittent, either of a putrid or synochal type; others believe it to be a distinct disease, and call it *malignant fever*, an epithet of vague import, applicable to a great variety of diseases, and one which ought not, and rarely does receive the sanction of the more judicious part of the profession. The committee who have drawn up this report, (viz. Samuel Osborn, Felix Pascalis, John Watts, jun., John Neilson, Thomas Cock, Charles Drake, and Ansel W. Ives,) call this Bancker Street fever, in their title page, an *epidemic fever*, a phrase yet more dubious, and which can convey no notion to what particular disease they allude. As we go on, however, from the title page, we are led to infer, that they apply the epithet *malignant* to this fever. Thus: "Although numerous cases of *malignant fever* occurred in the adjacent streets, yet they were most frequent and most malignant in Bancker Street," &c. (p. 4.) But what are we to understand by the following, which is quoted in corroboration of the existence of an atmospheric predisposition to fever: "One of our brethren, an eminent practitioner, declares, he has seen (during the present season) malignant symptoms, characteristic of yellow fever, in several instances of ordinary remittents," &c. (p. 10, 11.)

We are thus told, that yellow fever is a *specific* disease, characterized by malignant symptoms, but what is really wonderful, they tell us in the next breath, that it was found *lying actually enclosed in an ordinary remittent*. It was only wanting for the super-human keenness of this learned committee to peep through the mantle of one disease, and see the numerous other diseases that lie successively beneath it, and are wrapped up within its convolutions. One would suppose, that they were dreaming of the involution of germs, or that they had in their eye the coats of an onion, and that as you peel off these, so you might strip off the diseases to which "flesh is heir to," until you come down, I suppose, to the skeleton itself!

Typhus, they say, (p. 14.) has been applied, by authors, to very "*dissimilar fevers*," viz. to yellow fever, plague, and to jail, hospital, and camp fevers. Now, to know what they mean by jail, and hospital fevers, we will turn back to page 11: "The principal physician in attendance on the hospitals at Bellevue, affirms, that during the months of July, August and September, and the early part of October, there occurred at that establishment, a disease exhibiting many *characteristics* of the typhus gravior, jail, or hospital fever, accompanied with bilious symptoms, especially among the blacks, such as yellowness of the eyes and skin, epigastric distress, in some instances so great as to render the slightest pressure intolerable." By the words "*dissimilar fevers*," (p. 14.) we learn, that these jail, and hospital fevers, are different fevers from yellow fever, or from plague. This is corroborated by their note at the foot of page 14, where they say, "For the *essential character* of these fevers, (i. e. jail, hospital, and camp fevers,) and their *difference from yellow fever*, or from *ordinary bilious remittent*, vide *Observations, &c. &c.*" Now, here is an acknowledgment that *yellow fever*, the *plague*, *ordinary bilious remittent*, and *jail and hospital fevers*, are **ESSENTIALLY DIFFERENT** from one another.

At page 19, 20, they give out the following as the *distinguishing* symptoms of yellow fever, according to the opinion of the most esteemed writers: "Sickness, and incessant yellow bilious, or black vomiting, attended with an oppression, and pain about the precordia, particularly when the hand is placed on the pit of the stomach; laborious and painful respiration; yellow colour of the eyes and skin, though this is not a constant concomitant symptom." A little farther down they say, "Such have been the *distinguishing symptoms*, and such has been the result of autopsic examinations *generally*, in the fever which is the subject of our investigation."

By comparing these symptoms with those which they have just given as the symptoms of their typhus gravior, we perceive that they closely resemble each other, except in the absence, in the latter, of "yellow bilious, or black vomiting." Now, it appears, that although *one hundred and fifty persons* died of this Bancker Street yellow fever, (p. 30.) the committee have specified barely *eight* cases of black vomit as having occurred in all this number. (See p. 12, 13. and 26.) It is extremely doubtful whether this symptom did occur in any case. We have no authentic proof of it. For even *one* of the *doctors* who got up this *publication*, declared, that the matter which these committee-men scraped out of the intestines, and showed to him in a vial, was no more black vomit, than ink was the juice of leeks. This *black* vomiting, therefore, was, at all events, not a *distinguishing* symptom. Hence, we see, that their pretended yellow fever is brought still closer to *typhus gravior*, from which they thought they had taken so much pains to distinguish it, and which they put under the order of typhus, a very different order, they say, from that to which yellow fever belongs. (pp. 14. 16, 17.) The duration of the disease they have not taken up as an essential point among their characteristic symptoms, although it is well known that they insist upon it in their out-door conversations. The course of the disease was often as

rapid as yellow fever, but this is the case with their Typhus Gravior, which, *in truth, is the genuine disease which mostly prevailed in this Bancker Street and its vicinity*, and which the art and mystifications of these confounding and sectarian sophists have not been able to conceal. With regard now to "sickness," and "the yellow bilious vomiting" which appears to be the only points of dissimilarity between their own Typhus Gravior, at Bellevue, and their Yellow fever in Bancker Street, they are symptoms which always occur in *every* fever where there is a great redundancy of bile.

At page 15, we have "a bilious malignant, or yellow fever," and at page 16, they assign yellow fever to the following order of fevers, but consider it only occasionally a disease *sui generis*.

Thus "a very different and quite opposite series of essential and characteristic circumstances, denotes our ordinary bilious, malignant, remittent fevers, or yellow fever. Even supposing, for the sake of argument, that this should be considered a disease *sui generis*." Here you leave us in the dark, as usual, and huddling all this spurious order of your own creation together, go on to delineate their symptoms en masse. "First," say you, (p. 16.) "they have a remittent or an intermitent type." Ah, then! this fever of Bancker-street, which, at p. 17, you say belongs to this order, must have had a remittent or intermitent type; but you immediately contradict yourselves, my good logicians, and say, *fifthly*, on the same page: "They show three stages. One inflammatory, of thirty-six hours; one asthenic; and one a series of deadly symptoms, the forerunners of certain death." Here, then, these diseases, and among them, of course, this Bancker-street fever, have not only *remittent and intermitent paroxysms*, but also, at the same time, only *three distinct stages throughout their course!!* An outrage upon common sense.

But let us now carefully note the following quotation; for it gives us, at last, a clue to the disease, under which

they definitively rank this Bancker-street fever, and will set their evasions and quibblings at defiance, let them take what shape they please. "We do not hesitate to declare our conviction of the identity of Bancker-street fever, with the malignant fever of authors, from Hippocrates to the present day, and the *yellow fever of tropical climates and our own harbours.*" (P. 30.) This is corroborated by the fact, that, on the same page, they compare it with the yellow fever which occurred here in 1819.

Now let us make a summary of this trash.

First. They call this Bancker-street fever, in the title-page, an *epidemic fever.*

Secondly. We are led to infer, at page 4, that they designate it as *malignant fever.*

Thirdly. That it was a fever, having, to use their own unique and very luminous definition, "malignant symptoms, characteristic of yellow fever, in several instances of ordinary remittents." (P. 10, 11)!!

Fourthly. That it is a fever belonging to the following order of fevers—an order, bye the bye, of their own making, viz. "ordinary bilious, malignant, remittent fevers, or yellow fever." (P. 16, 17.) Now, which of these it is, they do not deign to tell us.

Fifthly. You have a "bilious malignant, or yellow fever." (P. 15.)

Sixthly. That the above order of fevers, viz. "ordinary bilious, malignant, remittent fevers, or yellow fevers," and among them, this Bancker-street fever, have, as well as many other remarkable symptoms, the following, to wit: remittent or intermittent paroxysms, and, at the same time, only three distinct stages throughout their course!! (P. 16, 17.)

Seventhly. Notwithstanding they hesitate at page 16, whether yellow fever be a distinct disease, they now acknowledge, (p. 19, 20, 30,) a disease of the tropics and of our own harbours, called yellow fever, and say it is the same as this Bancker-street fever. Then must this epidemic have been,

at the same time, a *malignant fever*, (p. 4) the *intratropical yellow fever*, (p. 30) and therefore, also, a *bilious malignant*, or *yellow fever*, (p. 15) and also having remittent or inter-mittent paroxysms and three distinct stages. (p. 16.)

We have, therefore, according to this committee, the following different sorts of fever, for the masterly elucidation of which, we are indebted to the penetration of those learned gentlemen; an elucidation, we will venture to say, which, taken in all its parts, is unequalled in many respects by the nosological labours of all who have preceded them, or who are likely to come after them, for many centuries.

1. Malignant fever, or the epidemic of Bancker-street and its vicinity, (p. 4.)
2. Yellow fever, (p. 10, 16, 17, at the last line, 19, 20, and also, p. 30.)
3. Ordinary remittent fever, with the symptoms of yellow fever, (p. 10.)
4. Bilious malignant, or yellow fever, (p. 15.)
5. Typhus fever, (p. 15.)
6. Ordinary bilious fever, (p. 16.)
7. Ordinary malignant fever, (p. 16)
8. Ordinary remittent fever, (p. 16 and 30.)
9. Ordinary bilious remittent fever, (p. 17 and 30.)

This profound analysis, "this arduous and laborious investigation," as they call it, (p. 30) will, we doubt not, constitute a new epocha in medicine, and crown the worthy discoverers with all the laurels which they so richly merit.

But to be serious. It puts us very strongly in mind of the cant of domestic-origin-men in other places. We all recollect to have heard of the confusion of names which generally succeeds an irruption of yellow fever into our southern seaports. While the subtle disputants are tearing each other's caps to pieces, and jabbering about *dangerous fevers*, and *alarming fevers*, and *light fevers*, and *stranger's fever*, the "furious conqueror" is immolating his thousands. We suspect very strongly that this committee is composed of the same sort of stuff.

We have made our quotations with great precision ; we

are not to blame therefore for the very ridiculous attitude in which the committee-men are placed, when they and their nine fevers are placed close along side of each other. It is a pity there had not been two more on the committee, and then there would have been a fever for each of them. This distribution and division of the honors of discovery, would have induced and enabled each member to have fought manfully for the disease which he had taken under his shelter, and the cavils of medical critics would have had less chance of success when directed against so powerful a battery.

The very first line, of the first page, contains an assertion which the committee knew to be false: They say, "From the commencement of *alarm*, &c." We deny that any alarm existed, and challenge them to the proof. Mention was several times made of the existence of an endemial *typhus* among the negroes of Bancker-street. But every one knew the condition of this street;—that it was the notorious haunt of obscene riot and low debaucheries; where the tumultuous wranglings of a dissolute rabble, and the most disgusting and indecent practices shocked the feelings of modesty, even under the bright and broad effulgence of noon-day. The public were aware of that fatal epidemic which had laid waste the moral energies of this populace; but they were as ignorant as the child unborn of the existence of this *dreadful Bancker-street pestilence*, which according to these gentlemen was slaying its unsuspecting victims with an unsparing hand, and spreading terror and confusion through the city! The public knew that this debased part of our population were plunged into the deepest abyss of moral turpitude and physical distress—that they were crowded together into confined and filthy apartments, and that the very air indeed sickened with the polluted vapours emitted from these foul receptacles of human misery. They saw that these misfortunes, owing in part to their own criminality and improvidence, and partly attributable to their condition of life, must necessarily, under favourable circumstances, end in disease and death. Summer, with its powerful

heats, came and verified their predictions. Toward the latter part of the season an endemial Typhus arose, which prevailed almost exclusively among this very class, and carried more than a hundred out of existence. The disease entered autumn, when it naturally assumed more of a bilious character, and in many instances became a *putrid bilious fever*, such as sometimes occurs in the tropics, and is described by Mosely under the following symptoms:—“Comes on with *sudden loss of strength*; *nausea*; clamminess in the mouth; eyes *dull* and *tinged with bile* and sunk in the head; pulse *low* and *quick*; skin *moist*, with heaviness in the head; *tension* and *uneasiness* in the abdomen, and great anxiety; *skin soon* becomes of a *deep yellow* colour, accompanied with coma, *cold thin sweats*, and *deep laborious hiccupping*. It ends on the *2d*, *3d*, or *4th day* in death.”—(Mosely on tropical diseases, p. 183-4.) This disease, says the same author, was constantly confounded by writers with the yellow fever.—(p. 185.) The disease was a higher grade of the common Bilious Remittent.

But let it be remembered, to the discomfiture of these gentlemen who are so desirous of giving a novel aspect to this Bancker-Street fever, and who pronounce it to have been the same as our yellow fever in 1819; let it be remembered that, contrary to all experience; contrary to the universal, established, and unerring law which obtains in yellow fever, this Bancker-street disease has *not been suspended* in its course by the occurrence of innumerable frosts; by constant freezing weather, and by reiterated snows! It has gone triumphantly on, in defiance of the sophistries and misrepresentations of these gentlemen, and still prevails in “Bancker-street, and its vicinity.” Let the wards of the Hospital speak; let those who have attended the clinical practice of that institution come forward with their testimony. It will be then seen, that *numerous cases* of this disease from *this same Bancker-street*, and *within the past month*, have been brought to, and may be *now seen*, in that charity. Why do not this very ingenuous and

discriminating committee, who are so eager for the propagation of facts—who have such a pertinacious and punctilious attachment to truth—why do they not incorporate *these* facts with their report? Why have they had the temerity to suppress *them*, and to palm off upon the public this undigested and imperfect account as a genuine statement! We perceive that they wish to make it be believed that the disease vanished in the latter part of October: “From this period, (Aug. 21st.) the disease continued to rage till late in October.” (p. 13.) From that date, nearly *two months* have elapsed before the pamphlet is issued from the press. It was only ten days since it came forth. In November there were repeated frosts; and on the 26th of that month, thick ice: yet, not a lisp is heard of the cases that have occurred in all this period!

Some of the more discreet members of the Society, who saw the precipice from which these gentlemen were falling, and who were sensible of the odium which would justly attach to the Society by giving sanction to so gross an imposture, sought hard to have the report re-committed and amended. But the stubborn gentlemen of the committee, and their blind adherents, furious with the zeal of theory, and boiling with rage that their machinations to excite an alarm during the past season had been exposed and blown into the air, would have it that the disease was yellow fever, and were determined to listen to no suggestions. Reason and truth were smothered—folly and madness triumphed, and the report was directed to be printed.

We shall now see whose fingers will be burnt, and whose reputation impaired by this rash proceeding: The *Board of Health*, whom they impudently accuse of having concealed these cases, and of having refused to disclose them to the public; or *themselves*, who have dared to assail with vulgar vituperations this respectable body, and who have the foolhardiness to stake their sinking reputation on the hazardous assertion that this disease was yellow fever.

They thus rebuke the Board of Health over the back of the Resident Physician: "That these reasonable demands, [viz. to allow of the intermeddling opinions of extra-official gentlemen on the cases which the Resident Physician might be called upon to visit] were not heeded [by the Board] may be accounted for in the well known fact, that the Resident Physician has selected, and held up in derision to public view, and sneeringly branded with the epithet "*yellow fever of Bancker street*;" *the minor grades of fever, the common every day occurrences of our city*; while cases of a *decidedly malignant character have been no less artfully concealed* from so public an exhibition; and a long and lingering disease, originating from a different cause, and distinguished by a totally different train of symptoms; a fever generated in a cold, and extinguished by a hot temperature, has to the repugnance of reason and common sense, been called in to account for a mortality unprecedented, except in epidemic periods; and the epidemic fever of Bancker-street has, by these gentlemen of authority, been denominated *Typhus Fever.*" (p. 29.) Now we have it in our power to state, that this whole quotation is an unfounded calumny upon the members of the Board of Health, upon whom, it is very clear that this committee are much disposed to wreak their indignation. These "*gentlemen of authority,*" as the Committee very contemptuously call them, did seriously hearken to the reports made to them from Bancker-street and its vicinity. The Resident Physician, as was his duty by the law of the State, did carefully examine more than *fifty* of those cases, and did solemnly report to the Board his opinion thereon. The epidemic of Bancker-street as they presumptuously call it, was not, in reality, entitled to that appellation; and, in the second place was not, by "these gentlemen of authority," indiscriminately denominated *Typhus fever.* Most of the cases were undoubtedly, and correctly, called by him *typhus*, and others *bilious remittent fever*, more or less putrid in its tendency.

Moreover, the DISPENSARY PHYSICIAN WHO ATTENDED NEARLY ALL THE CASES OF BANCKER-STREET, AND WHO

REPORTED THEM TO THE BOARD OF HEALTH; THIS SAME PHYSICIAN ALSO, WHO HAS SINCE FURNISHED THE COMMITTEE NEARLY ALL THE DETAILS OF THIS REPORT, AND FIVE OUT OF EIGHT OF THEIR CASES OF BLACK VOMIT, (see pages 25, 26) DID NOT REPORT THE CASES TO THE BOARD OF HEALTH AS YELLOW FEVER; AND WHEN CONFRONTED, AND CROSS-EXAMINED BEFORE THE BOARD, POSITIVELY, AND UNCONDITIONALLY DENIED THAT THE DISEASE WAS YELLOW FEVER. This damning fact is alone sufficient to destroy the validity of the whole report; but we forbear going into the details of so humiliating a transaction, and refer the reader to the *New-York Evening Post*, of Oct. 5th, 1820, where he will find an extract from the minutes of the Board.

The Board of Health discerning the true motives which actuated the *gentlemen* who were so solicitous to trump up an alarm and excitement, concurred in the opinion of the resident physician, and disdained to take any notice of these reports, farther than to put into more rigorous execution the measures already instituted to abate the nuisances and mitigate the distressed condition of the inhabitants of that district. It will be good to remember that, among others, on this committee, and whose names are signed to it, are Dr. *John Watts*, jun. Dr. *Charles Drake*, and Dr. *Felix Pascalis*.* * * One of them has already made himself unpleasantly conspicuous by a bungling, botched-up essay, containing divers false and indecent slanders against this same board of health. It does not surprise us to hear this committee, mortified with the silent disapprobation and neglect with which the public had treated them, recommending and proposing to new model the Board of Health: so that this body might be composed of a *majority* of *physicians*. To do this, they wish to have the non-medical members excluded, *i. e.* the ten *aldermen*, the *recorder* and the *mayor* turned out, and *twelve honourable physicians* put in their seats, seven of which physicians are to resemble the very honourable and acute members of this committee, and the rest to be chosen, I suppose, by the *honourable* the me-

dical society! (See p. 37.) This would be pretty work indeed! I advise these gentlemen, however successful they may be in reorganizing medical colleges, not to be obtruding their projected schemes of amelioration and improvement into so ancient and well-regulated an institution as that of our board of health. They will find, that although they may play the traitor with, and bamboozle and humbug *medical societies*, that their daring intrusions into assemblies and places of a graver and more respectable character will meet with that chastisement which is ever the reward of low audacity.

It is plain, that these gentlemen wish to make the world believe that our city, during the past summer and autumn, has been the prey to a fatal and alarming *yellow fever*, hatched within its own walls. We will not stay to deprecate that moral debasement which could engender and put forth so foul a falsehood; nor will we stop to discuss whether this abandoned and systematic attempt to deceive those who are abroad, and do not know the lengths to which these men go, nor how *traitor-like* they have slandered our metropolis, does not merit the severest and most exemplary punishment of the law. But leaving the character of the Bancker-street fever out of the question, we would ask these gentlemen who will believe their declaration? Can it be possible it will be said, that yellow fever has been silently and surreptitiously desolating a large and central portion of our city, that its malignity and fatality were greater than that of Old-slip in 1819, that *one hundred and fifty persons*, that is, three times as many persons perished with this disease as in that of 1819, (see p. 30)!!! and yet that during this awful pestilence, not a citizen knew of its existence, not a soul fled before its noiseless, devouring jaws!* not a single inhabitant became terrified with the appalling maldy, nor removed from this very Bancker-street or its vicinity! While in the yellow fever of 1819, to which they liken it, and which they say was comparatively harmless in its effects, 20,000 persons, nearly *one fourth* the population of

* The committee with great elegance of diction call yellow fever, metaphorically, "A dog that never barks."

this city, fled with horror and dismay from their homes, They aver merely, without a single other remark on this point, that "many fled from fear of the fever." (p. 8.) This we pronounce to be a fabrication. Why not say more of this flight? How *many* fled? Is there any record of this event in any public print, or in the archives of the board of health? No. And will it be believed that this disease was making such frightful progress during the past summer and autumn, and yet unknown and unobserved by our board of health! This board of health too who have been so justly praised for their scrutinizing vigilance over the public health, and who have, unlike some neighbouring boards of health gained such signal applause for their open, fair and ungarbled statements! Can any man in his senses believe that such a board of health *would* have concealed, or is it possible for other than a madman to conceive, that this board of health *could* have *possibly* concealed this pestilence from the public eye! That more than *two hundred persons* should have taken this disease, and more than one half of these fallen victims to it, and yet kept a secret from every one! And what is stranger and more unaccountable still, that this secret should have been *hushed up* for more than *three months*, and now just made known to our citizens by this *paltry pamphlet*.

The infamy of this desperate slander, this ignoble method of gratifying vindictive spleen and of upholding an exploded hypothesis, will recoil on their own heads.

It is somewhat strange, that at the very time when this committee say this pseudo-yellow fever was making such havoc here, our governor proclaimed his proclamation through the state, recommending and setting apart the sixth of December, as a day of public thanksgiving and prayer for the manifold blessings we had received, and among other signal interpositions of divine providence in our favour, that this metropolis had been exempted from the ravages of *pestilential diseases*. But let us compare in a few words the circumstances attending this Bancker-street fever with those which accompany yellow fever.

1. The fever of Bancker-street commenced with, and was almost exclusively confined to the black population of that street, though this population are, according to their own topographical description, "mingled promiscuously in the same apartments with whites, and both sexes, of all ages." (p. 7.) Where yellow fever prevails to great extent, all fall victims to it, black and white; but whoever heard before of its commencing its attacks upon negroes, and confining its depredations to that particular class? On the contrary, the blacks are notoriously less subject to it; but in this fever, say the committee, "three-fourths of the patients" were of this class. (p. 17.) They take care not to tell what proportion the white bore to the black inhabitants, but we state from our own knowledge, that in no given section of the district where this disease prevailed, did the negro population ever amount to more than one third of the whites. They assert, (p. 17,) that the blacks were far more numerous than the whites; this we know to be a direct falsehood. Moreover, the description of blacks whom it seized were of the most profligate sort, with constitutions vitiated and broken down by drunkenness and other beastly sensualities, for it is such persons chiefly who inhabit this tainted district, and who annually become the victims to the disease which still prevails there. But yellow fever not only first attacks the whites, but those of them who are most plethoric and robust, of rigid fibre, and to whom the common wants of life are easily accessible. This the committee themselves admit, saying that "the most robust, and seldom the infirm," (p. 16,) are liable to it.

2. Out of *one hundred and fifty deaths* of this disease, (p. 30) they recount less than *ten cases of black vomit!* (pp. 12, 13 26.) The public may be well assured, that had this almost pathognomonic symptom been of frequent occurrence, the committee would have very eagerly caught at it. They would not have had to go to the trouble of raking up on this point the accounts of persons who pretend to have made examinations of the dead body, and to have detected the matter of black vomit. Had it been yellow fever, this deplor-

able symptom would have soon made itself palpable to every one, and long before one hundred and fifty beings had fallen a prey to it. It is incredible and preposterous after this to say that the disease could possibly have been yellow fever. In yellow fever *one half*, even of those who *have* the disease, have this symptom. Here *ten* had the symptom out of one hundred and fifty *deaths*. What reliance can be placed upon other parts of the pamphlet, when it discourses of such miracles as this?

3. This Bancker-street fever was treated most powerfully and successfully by *emetics*. Here is another unheard-of anomaly, which no doubt the ingenuity of the committee can very satisfactorily unravel. Emetics, as far as experience has gone, are precisely the very things that we are most cautiously to avoid. They produce the most disastrous consequences, aggravate the irritation and retching at the stomach, bring on the dreadful black vomiting, and soon hurry the unhappy sufferer out of existence. On the other hand, in fevers of a bilious character, the very reverse is the truth. Emetics are the surest and the most rapid means of cure.

4. One of the facts, however, which revolts most at the asseverations of these gentlemen, is that which we have already descanted upon, viz. that the march of this disease went steadily and uninterruptedly on, notwithstanding the recurrence of repeated frosts and snows. This fact is established beyond all question, and dissipates at once, as it were by a magic wand, all those grotesque illusions which like the ignis fatuus of their favourite miasmata flit for a while before their distempered vision, and then betray them into quagmires and swamps.

Now let us groupe all these incongruities together, and see what sort of a compound it makes. *The epidemic, or yellow fever of Bancker-street*, is then thus characterized: it is a malignant fever, not typhus fever, but belonging to the following order of fevers, viz.: "ordinary bilious, malignant, remittent fevers, or yellow fever." Synonymous at the same time with the yellow fever of our seaports and of

the tropics, and having at one and the same time a *remittent or intermittent type* and *three distinct stages*! This fever most usually attacks and is confined to negroes, and those particularly who have constitutions shattered and worn out by a general course of debauchery and intemperance! The proportion of those who have black vomit, to those who die of the disease is very small: being only as ten to one hundred and fifty!!! Emetics may be given in this disease with perfect safety, and indeed the cure is generally effected by this remedy! Practitioners must not be surprised to find this yellow fever continue to spread even after the ground has been repeatedly frozen, and though a heavy coating of snow cover it at the very time!

We have thus endeavoured to dissect away the extraneous matter that envelopes these pages, until we could come down to the naked meaning. The substance of this account of the pretended yellow fever of Bancker-street, being thus laid bare, the discrepancy of its parts break upon our senses in palpable and disgusting deformity. We feel convinced, that such a creation as this committee have here conjured up, is at war with common sense, and never could have had existence but in their own imagination. It furnishes, at the same time, one of the most happy and forcible illustrations of the *demonstratio ad absurdum* that we have ever met with.

We must not be surprised to find those who write reports on this fever, deny in conversation that they believe it to be yellow fever, notwithstanding the reports themselves declare it to have been yellow fever, and that they have signed their names to such reports, or voted for their publication. *Four of the committee* itself are in this singular predicament, and have declared, in public, that the disease was not yellow fever!!! But I will not tire the patience of the reader by saying any thing farther on this point, than that it is all of a piece with their crude medical opinions, and their high regard for veracity, manifested throughout every page of this poor, pitiful, and truly disgraceful performance.

Med. Hist.

WZ

270

R384

1820

c.1

