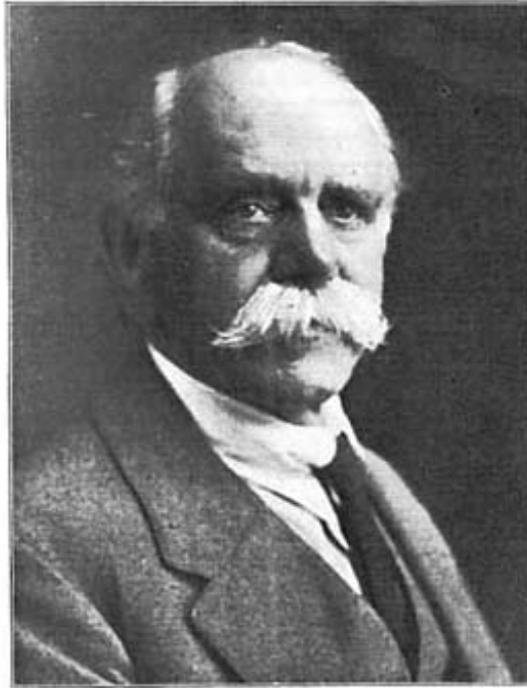


The Hadwin Documents



Walter Hadwin

1. ["The Case Against Vaccination,"](#) Verbatim Report of an address by Walter Hadwin, J.P., M.D., L.R.C.P., M.R.C.S., L.S.A., Etc (Gold Medalist in Medicine and in Surgery) at Goddard's Assembly Rooms, Gloucester, on Saturday, January 25th, 1896 (During the Gloucester Smallpox Epidemic)
2. ["The Fraud of Vaccination"](#) and two other articles by Dr. Hadwin, from *The Truth* magazine, 1923.
3. ["Dare Doctors Think?"](#) Address by Dr.Hadwin after being found innocent of manslaughter in the death of a young diphtheria patient upon whom Dr.Hadwin had refused to use anti-toxin.

The Case Against Vaccination
Verbatim Report of
AN ADDRESS
By
WALTER HADWEN
J.P., M.D., L.R.C.P., M.R.C.S., L.S.A., Etc
(Gold Medalist in Medicine and in Surgery)
At
GODDARD'S ASSEMBLY ROOMS,
GLOUCESTER
On Saturday, January 25th, 1896
(During the Gloucester Smallpox Epidemic)

Foreward to Tenth Edition

THE speech here reproduced was delivered twenty-eight years ago, before the "Conscience Clause" was known. The speaker had been nine times prosecuted for refusing to submit his own children to vaccination.

During the intervening years the cause of Anti-vaccination has made steady progress, and at the present date three-fifths of the parents in this country have followed Dr. Hadwen's example. But the passage of time has no effect upon the arguments against vaccination. Objections to an already venerable superstition remain invulnerable in 1924, though they were expressed in 1896. No apology is needed, therefore, for the reproduction of the speech as it was uttered so long ago.

The speaker looks back, through the twenty-eight years, upon a period of strenuous and painful struggle, and forward to the ultimate doom of vaccination, now imminent.

The latest statistics are given on the last page of this pamphlet.

March 1924.

The Case Against Vaccination.
ADDRESS BY DR. HADWEN, J.P.,
AT GODDARD'S ROOMS, GLOUCESTER.

JAN 25, 1896.

A large and enthusiastic meeting of citizens was held in the Northgate Assembly Rooms, Gloucester, on Saturday evening, January 25th. The hall was crowded, and many failed to gain admittance. Mr. S. BLAND, J.P., presided.

The CHAIRMAN, in opening the proceedings, said: Ladies and Gentlemen,--The issue of the Doctors' Manifesto on the present outbreak of small-pox in Gloucester has opened the floodgates of discussion and denunciation upon the vaccination question. The anti-vaccinators, firm in their convictions, remain unmoved by the stale sophistries, bogus statistics, and stupid taunts thrown at them. (Cheers.) The spectacle of a few individuals opposing the unanimous dictum of the local doctors is a fair butt for the small jokes of those superior persons who, to save themselves the trouble of study and thought, give their bodies to the doctor and their souls to the priest, relying on the necromancy of the one, and on the other, for their physical and spiritual salvation. I yield to no one in proper respect for both of those professions--(hear, hear)--but knowing as I do, and as you do, the discarded fallacies and tremendous blunders which have received their unanimous support in the past, I maintain the God-given right of liberty of conscience and the use of my reasoning powers to accept or reject any of their present dogmas. (Cheers.) We read the truism in an older Book than any of their treatises, "that whatsoever a man soweth, that shall he also reap." That eminent physician, Sir Andrew Clarke, said--"Nature never forgets and never forgives." And until it is an indisputably proven fact, which it is not present, and I do not think ever will be, that you can preserve health by the inoculation of disease, I will have none of it. (Cheers.)

Many years ago my attention was directed to the subject of vaccination by an extraordinary event. The Guardians of Keighley Union were sent in a body to prison for refusing to enforce the Compulsory Vaccination Acts. That led me to study the whole question, with the result that I became an anti-vaccinator by conviction. In the course of events I was forced to the front in a public discussion of the subject, in which Dr. Bond was our chief opponent. Neither of us convinced the other, but the result showed that the public were convinced, for shortly afterwards our Board of Guardians, yielding to the pleadings of our good friend Councillor Karn and others, stopped prosecutions, and very few people have voluntarily adopted vaccination for their children since. At that time only a solitary medical man here and there was found on our side. But since then we have been joined, amongst others, by two of the foremost scientists in our country--Drs. Creighton and Crookshank--in denouncing vaccination as a superstition and a fraud. (Cheers.) The disputes as to obscure scientific theories are therefore no longer in the hands of non-scientific laymen. We can leave it to the doctors to fight them out. They have never refuted Crookshank and Creighton, and until they do so we are abundantly justified in our attitude of opposition and unbelief. Into the merits or demerits of the question I am not going to enter particularly to-night.

I have by my side in the person of Dr. Hadwen--(cheers)-- a duly certified medical practitioner, who, by the examinations he has passed and the diplomas he has obtained in the medical schools, is thoroughly well qualified to deal with any subject pertaining to the laws of health and the treatment of disease. You have had a taste of his advocacy in the admirable letters which he has contributed to the "Citizen," and as I venture to think you are more anxious to hear him than me, I will not debar you from that pleasure any longer. Mr. Bland explained in conclusion that Dr. Hadwen was not a paid advocate of the Anti-Vaccination Society, which was really poor in funds, though rich in the allegiance of its supporters and in the intelligence of those who adopted its principles, but he came at the sacrifice of his time and his practice, in furtherance of the cause to which he had committed himself after studying it exhaustively in all its bearings. (Cheers.)

Dr. Hadwen's Speech

Dr. HADWEN, whose reception was most cordial, said: Mr. Chairman, Ladies and Gentlemen,--It certainly does one's heart good to see such a splendid and enthusiastic audience here to-night. It shows that one thing is very certain: that whether you are united upon the question under discussion or not you are deeply interested in the subject. (hear, hear.) Upon coming into the room I had placed in my hands a paper, written, I see, by Dr. Bond, in which he gives "Fifteen reasons why we should believe in the efficacy of vaccination as a preventive of smallpox." I do not know whether Dr. Bond is here himself, but should he be here, I will invite him to come on the platform and discuss those points with me after I have finished what I have to say. I have cast my eyes over them; I shall take up most of those arguments in the course of my address, and I have only now to say that every statement made in that paper has been smashed and pulverised thousands of times before. (Cheers.)

I had better, at the outset, state to you distinctly the position I occupy on the subject. I stand here not only as a medical man, but as a father and a citizen. As a medical man I look upon vaccination as an insult to common sense, as superstitious in its origin, unscientific in theory and practice, and useless and dangerous in its character; whilst as a father and a citizen I view the Compulsory Vaccination Acts as demoralising in their tendencies, degrading in their character, cruel and unjust in their enactments, and an unwarrantable interference with parental responsibility and liberty--(cheers)--such as ought not to be tolerated in a country like England, which has boasted of her civil and religious freedom for generations past. (Renewed cheers.)

NOT PURELY A MEDICAL QUESTION.

One is constantly told that this is purely a medical question, and that if I want to air it I should discuss it before a medical audience or by letters in the medical papers. Those who say that know what is the treatment medical anti-vaccinists receive in the journals in question. But it is not a purely medical question. It is one of observation, of history and of statistics, and any intelligent layman can understand it as well as a medical man. It is a mere superstitious creed, and needs no professional knowledge to grasp it. And what is more, I can say from what I have learned in experience that intelligent, thoughtful and studious anti-vaccinators know more about this subject than the majority of the medical men of to-day. (Cheers.) And, furthermore, I say that the very moment you take a medical prescription and you incorporate it in an Act of Parliament, and you enforce it against the wills and consciences of intelligent people by fines, distraints and imprisonments, it passes beyond the confines of a purely medical question--and becomes essentially a social and political one. (Cheers.)

The medical profession of to-day is divided into two great sections. On the one hand we have a section, who form, I am bound to say, the majority, who believe that the only remedy for small-pox is vaccination with all its risks. On the other hand there is another section, the minority to which I have the honour to belong, which believes that the remedy for small-pox is not vaccination but sanitation--(cheers)--which is accompanied by no risk at all. We protest against the diseasing of children by Act of Parliament. We say that small-pox is a filth disease, and that if we get rid of the filth we shall get rid of the disease. We also declare that when a person is ill the doctor is justified in doing all he possibly can for his patient; but when a person is well he has no right whatever to interfere with the normal functions of the human body as he does when he introduces disease, especially the disease of an inferior animal, unless he can give a distinct and absolute guarantee, not only that the operation will effect the purpose avowed, but also that it will produce no injurious results. (Cheers.) And with all the fifteen reasons Dr. Bond can produce I will defy him to give such a guarantee. It is a serious blot upon the medical profession that it has encouraged and that it has helped to enforce a measure and that the Gloucester doctors even to-day are urging the Guardians to prosecute in order to enforce it, when they cannot guarantee that it will effect the purpose professed, nor yet that it will produce no injurious results. The public vaccinators are told in their Orders

that they must hold themselves responsible for the quality of the lymph they use. But where is there one who would think of doing so when he can but know that the operation is accompanied with risk? Therefore what right have they to interfere with healthy children? (Cheers.) Remember, the Order is most distinct to public vaccinators that it is only healthy children that are to be diseased. ("Shame.")

HISTORY OF THE MOVEMENT.

Thomas Carlyle has told us "that no error is fully confuted until you have seen not only that it is an error, but also how it became one." It will, therefore, be as well for me to take you over something of the history of the movement, and give an idea how this gigantic superstition and this monstrous fraud of vaccination came to be enforced, and came to be adopted by the profession and the public. The "discoverer" so-called was, as you all know, a man by the name of Edward Jenner, who lived at Berkeley, in your own county. He was not, however, the discoverer. The whole thing was a superstition of the Gloucestershire dairymaids years before Jenner was born--(laughter)--and the very experiment, so-called, that he performed had been performed by an old farmer named Benjamin Jesty twenty years previously. Now this man Jenner had never passed a medical examination in his life. He belonged to the good old times when George III. was King--(laughter)--when medical examinations were not compulsory. Jenner looked upon the whole thing as a superfluity, and he hung up "Surgeon, apothecary," over his door without any of the qualifications that warranted the assumption. It was not until twenty years after he was in practice that he thought it advisable to get a few letters after his name. Consequently he then communicated with a Scotch University and obtained the degree of Doctor of Medicine for the sum of £15 and nothing more. (Laughter.) It is true that a little while before, he had obtained a Fellowship of the Royal Society. but his latest biographer and apologist, Dr. Norman Moore, had to confess that it was obtained by little less than a fraud. It was obtained by writing a most extraordinary paper about a fabulous cuckoo, for the most part composed of arrant absurdities and imaginative freaks such as no ornithologist of the present day would pay the slightest heed to. A few years after this, rather dissatisfied with the only medical qualification he had obtained, Jenner communicated with the University of Oxford and asked them to grant him their honorary degree of M.D., and after a good many fruitless attempts he got it. Then he sent to the Royal College of Physicians in London to get their diploma, and even presented his Oxford degree as an argument in his favour. But they considered he had had quite enough on the cheap already, and told him distinctly that until he passed the usual examinations they were not going to give him any more. This was a sufficient check in Jenner's case, and he settled down quietly without any diploma of physician.

The period in which he lived was undoubtedly a very filthy period. It was a time when, to take London for instance, the streets were nothing but a mass of cobble stones, the roads were so narrow that the people could almost shake hands across the street, and as for fresh air they scarcely knew anything about it, for locomotion such as we have to-day was unknown. Sanitary arrangements were altogether absent. They obtained their water from conduits and wells in the neighbourhood, Water closets there were none, and no drainage system existed. It was in London especially that small-pox abounded, where bodies were buried in Old St. Paul's Churchyard in Covent Garden only a foot below the soil, and people had to get up in the middle of the night and burn frankincense to keep off the stench; and where those who could afford it had houses on each side of the Fleet river, so that when the wind blew towards the east they lived in the west, and when it blew towards the west they lived in the east. This was the condition of old London, and you cannot be surprised if small-pox was then what Dr. Bond calls a scourge; you cannot be surprised if small-pox has declined since, even after this wonderful discovery of vaccination--(laughter and cheers)--and let us not forget that sanitary improvements began in London as early as 1766, and small-pox began to decline as a consequence before vaccination was invented.

I won't go now into the personal character of Jenner, but Dr. Creighton has well described him when he tells us that he was vain and petulant, crafty and greedy, a man with more grandiloquence and bounce than solid attainment, unscrupulous to a degree, a man who in all his writings was never precise when he could possibly be vague, and never straightforward when he could be secretive. This is the character that Dr. Creighton gives him; and as for the statement, which we constantly hear, that Jenner received such wonderful homage in the later years of his life, we well know that his closing years were years of misery as the failures of his fetish began to crowd upon him. It was on January 23rd, 1823, that he wrote his last

letter to his confidential friend, Gardner, when he told him he was never surrounded by so many perplexities. Two days later Jenner breathed his last.

A SUPERSTITIOUS PERIOD.

This practice of vaccination was simply a legend. The idea of charming away disease has been common in all countries and at all times, not only amongst the ignorant but amongst the educated. In old herb books we find how much the remedies for certain diseases depended on the jingle of the names; and there is no doubt that the way in which the idea got amongst the dairymaids that a person who had cow-pox never had small-pox depended upon the jingle of cow-pox and small-pox, and it was this which had such an extraordinary effect upon the mass of the people at that time. In the old herb books, for instance, we find that if you want to prevent suffering from the bite of a mad dog you must carry a herb called hound's tongue, and again, to prevent the ill-consequence of a dog bite you must take a portion of the root of a dog rose. This kind of thing was common at that time; it was a most superstitious period in which Jenner lived, when live frogs were swallowed for the cure of worms; when cow dung and human excreta were mixed with milk and butter for diphtheria; when the brains of a man who had died a violent death were given in teaspoonful doses for the cure of small-pox. Even Jenner had invented, not merely a cure for smallpox, but also one for hydrophobia, which quite takes the steam out of Pasteur's treatment. All you had to do was to duck the man who had been bitten three times in a stream of running water, only taking care that each time you ducked him life became almost extinct. (Laughter.) He said he never knew that to fail under any circumstances. (Renewed laughter.) He evidently had an idea that persons bitten by a mad dog become possessed of an evil spirit, and should be treated as they used to treat the witches. So much for Jenner.

When he first of all heard the story of the cow-pox legend that the dairymaids talked about, that if you only had cow-pox you can't have small-pox, he began to mention it at the meetings of the Medico-convivial Society, where the old doctors of the day met together to smoke their pipes, drink their glasses of grog, and talk over their cases. But he no sooner mentioned it than they laughed at it. The cow doctors could have told him of hundreds of cases where small-pox had followed cow-pox, and Jenner found he would have to drop it.

JENNER'S EXPERIMENTS.

In 1796, however, he performed his first experiment as it is called. He took a boy named James Phipps and inoculated him with some lymph which he took from a cow-pox vesicle. A short time afterwards he inoculated this boy with small-pox, and for very solid reasons which could be explained, the small-pox did not take. "Now," said Jenner, "is the grand discovery. This will answer my purpose, and I shall soon be able to get another paper for the Royal Society," to follow in the wake of the glorious cuckoo, which has been wittily termed "the bird that laid the vaccination egg." (Laughter.) That was in 1796, and we are close upon the century since that wonderful experiment. Russia is preparing to celebrate it, and the Bristol medical men are sending round for subscriptions for £1,000 in order to purchase the relics of this wonderful man--such as his snuff box, his lancets, and the chair the great man sat in--to put in the museum of the Bristol University. I have noticed that the doctors have omitted one important article which appeared in the Bristol Exhibition--a hair from the tail of the first cow that supplied the vaccine lymph. (Loud laughter.) I am sorry they have left that out. I am sure nothing would so stir the hearts of the coming race of medical men as an evidence of belief in the principle contained in the old herb book by which a person had to carry a hair of the tail of the dog that bit him. (Laughter.) I do not know whether the sensation from Russia is going to filter through to England, but unless you people in Gloucester are going to be swayed by the manifesto issued by the medical men my advice to you is to keep your rejoicings for the 5th November, and then if you happen to be hard tip for a companion for Guy Fawkes I would advise you to have an effigy of Edward Jenner to help feed the flames of your bonfire. (Laughter and cheers.)

Jenner inoculated this boy James Phipps in 1796. Then, as soon as he had done that, he wrote it down--

(laughter)--and went round the neighbourhood collecting desultory information with regard to cow-pox and cow-poxed milkers. He got cases of those who had had cow-pox years before and had never had small-pox, as if everybody was bound to have the small-pox. Then he took some worn-out paupers, over 60 years of age, who had had the cow-pox years and years before and inoculated them with small-pox to see if they would take. He found they did not take, because as people get advanced in life they are more or less proof against it. "This," said Jenner, "is the grand proof of the value of inoculation of cowpox as a preventive of small-pox."

HOW JENNER CHANGED HIS TACTICS.

These were the materials which he got together in order to present his paper to the Royal Society. It was not to be surprised at that, with miserable material such as this, the Royal Society, though at that time as low an ebb scientifically, should, nevertheless, immediately reject his paper as unsatisfactory and unsuited to a scientific society or a healthy public. (Cheers.) Jenner took care in that paper never to mention the cases of people who had cow-pox and had small-pox afterwards, he mentioned the cases of a dozen old men who had cow-pox and did not take small-pox afterwards, but he could have had hundreds of cases who had had both. These he took good care never to say anything about. As soon, however, as he came back with his paper the cow doctors were at him. They said this was all rubbish and began to pour on him hundreds of cases, just as we pelt the pro-vaccinists with figures showing that 90 per cent, of those who have had small-pox have already been vaccinated. (Cheers.)

So Dr. Jenner soon found he would have to change his whistle, and invented a novel idea. The idea he started was this: he said there are two kinds of pox. One is the genuine kind and the other spurious, and those who have had cow-pox and yet have had small-pox afterwards, have had the spurious variety. Those who had cow-pox and did not have small-pox afterwards were those who had had the genuine disease. This was a very clever and specious kind of argument, and the next thing that Jenner had to do was to find out where the genuine cow-pox could be found. Accordingly, on going into a stable one day he found that a cow had been affected with a very peculiar kind of disease that was produced in this way. It seems that a man had been seeing to the grease upon a horse's heels, and had gone to milk the cows without washing his hands. The result was that it produced that peculiar kind of disease known by the name of horse-grease cow-pox. "This," said Jenner, "is the life-preserving fluid," and he went home to write about the wonderful virtues of horse-grease cow-pox. However, it was necessary to perform an experiment, and he inoculated a boy named John Baker with horse-grease, direct from the horse's heels. He intended later to inoculate him with small-pox in order to see whether it would take, but it was something like the case of the man, you remember, who had an idea that if he only gave his horse a gradually diminishing diet he would at last be able to keep it on nothing. You remember that the horse died before the experiment could be completed, and it was the same with John Baker, for the poor boy died in the workhouse directly afterwards from a contagious fever contracted from the inoculation. ("Shame.")

JENNER SUBSTITUTES HORSE-GREASE FOR COW-POX.

He then took some of the horse-grease cow-pox and inoculated six children, and without waiting to see the result or to prove whether it would take or not he rushed to London to get his paper printed. And in that paper he had the audacity to assert that it was not necessary to wait to see the result because the proofs he already had were so conclusive, and time experiments had told such an extraordinary tale--although he had completed but one experiment in his life, and that did not prove it at all. That boy James Phipps was hawked about the country as a proof of the value of vaccination, but he had not been inoculated with horse-grease cow-pox at all, but with spontaneous cow-pox, which Jenner now declared in his second paper was absolutely useless and unprotective against the disease!

But as soon as the paper was published the outcry was tremendous. "What," said the people, "take horse-grease, filthy grease from horses' heels, take that and put it into the blood of a child?" No, they would have nothing to do with it. They did not mind having cow-pox without the horse, but they could not

think of having the cow-pox with the horse in it. Dr. Pearson wrote Jenner telling him he must take the horse out, or "it would damn the whole thing." Consequently--there is no accounting for taste--they denounced horse-grease cow-pox, but were prepared to accept spontaneous cow-pox.

JENNER HARKS BACK TO COW-POX.

What did Jenner do? Did he attempt to stick up for his creed or to prove that he was right? No; he wanted money. He said he was looking forward "in the fond hope of enjoying independence," declaring he was in an impecunious condition. He accepted the verdict of the people. They wanted cow-pox; they should have it. And accordingly he wrote a third paper and tried to wipe out what he had written before. With the exception of a solitary footnote, in that paper, horse-grease cow-pox was not mentioned at all, and he fell back on the spontaneous cow-pox theory which he had previously denounced as useless and unprotective. This spontaneous cow-pox is what we are recommended to have by Dr. Bond in almost his last clause, i.e., lymph direct from the cow--which is denounced by the discoverer himself as absolutely unprotective against the disease in question. (Cheers.)

Well, having told you briefly the history of the matter, you may ask, "However was it that this thing was foisted on the people? How came the medical men of the country to accept it?" In the first place science was then at a very low ebb. It was about that time Joanna Stephens lived. She had a wonderful remedy for stone, which gained great notoriety. There was much anxiety to obtain it, and at last a subscription list was opened. It was headed by the Archbishop of Canterbury, and all the leading doctors subscribed. Joanna wanted £5,000 for her recipe. The money was obtained amid the recipe came to light. It ran as follows: "My medicines are a powder, a decoction and a pill. The powder consists of egg-shells and snails, both calcined. The decoction is made by boiling some herbs (together with a ball, which consists of soap, swine's cresses burnt to a blackness, and honey) in water. The pills consist of snails calcined, wild carrot seeds, burdock seeds, ashen keys, hips and haws, all burnt to a blackness, soap and honey." She got her £5,000 and the doctors got their recipe: they say that fools and their money are soon parted. (Laughter.) I don't begrudge either Joanna Stephens the money or the doctors her recipe, but I don't think any more of the doctors in consequence, and we can't be surprised at their accepting with so little opposition the wonderful recipe of Jenner for small-pox.

There was another reason why they accepted it, and that was that the majority of the doctors of that time had never heard of or seen cow-pox. Dr. Denham, writing at that time, said the majority had never heard of it. However, when Jenner came forward with the letters F.R.S., M.D., after his name, with all the impudence of a charlatan, saying, "Such is the singular character of my discovery that a person who is once inoculated with cow-pox is for ever afterwards secure against small-pox," the whole of the profession was arrested by the deliberate statement made, and they all bowed down before the golden calf which Nebuchadnezzar the king had set up. (Laughter and cheers.)

VACCINATION PREFERRED TO INOCULATION.

Another reason was that inoculation had turned out a failure. What was inoculation? It consisted in this: It was supposed at that time that small-pox was a permanent evil influence amongst us, and that everybody was obliged to have it some time or other before they died. Consequently it was thought if they could only have the small-pox in a mild form and at a convenient season it would be nice to have it over, just as mothers now think that their little ones must have measles, scarlatina, whooping-cough, Chicken-pox. etc., and are glad to get it over. It was consequently said, what is more simple? Let us give the people a mild case of small-pox when they are well and able to resist it. This idea, which became very popular, first of all originated in India. They had there a small-pox goddess whose name was Matah, and the Hindoos used to inoculate themselves with small-pox in order to appease the goddess, fancying that if they did so and if small-pox came along they would then have it in a very mild form, or, perhaps, that her Majesty would look kindly upon them and they might not have it at all. This filtered through to the Ottoman Court, and in 1721 Lady Worthy Montague, wife of the then Ambassador, was so struck with it that in her letters to

London she told them that everybody in Turkey was being inoculated with small-pox. Coming from such a person and from the very cream of Society the people were taken with it, and it became the fashion through the length and breadth of England to inoculate with small-pox. But they soon found that it spread the disease tremendously. It was between 1700 and 1800 that small-pox was so rife. You don't see so much now. Why? They were then giving people small-pox right through the country by inoculation. Dr. Bond talks about the unanimity of the profession. Why, the whole profession were unanimous about that then! They said inoculation was the thing and that it must be done. Talk about the unanimity of the profession! That goes for nothing; we have principles to deal with, not the unanimity or otherwise of the profession. (Cheers.) Majorities are never a proof of the truth. The consequence was that small-pox spread, for though a person inoculated might have it mildly he was able to give it to others much more severely. Dr. Lettsom, writing in 1806, tells us that whereas small-pox deaths for 42 years before inoculation were only 72 per thousand, they were 89 per thousand in the 42 years after. Consequently the doctors were getting staggered, though they carried this out unanimously for 80 years, and when Jenner came forward and said, "Here's a mild kind of small-pox; it's not infectious; it is certain to stop the small-pox;" why, the doctors at once fell in with it and received it with open arms. The people craved for it, and instead of wanting to get the small-pox over as before, everyone began to cry for the cow-pox which Jenner brought before their notice. In the first twelve months the King had accepted it, the Queen and her courtiers had fallen in with it, and the illegitimate sons of the Duke of Clarence were vaccinated with it. (Laughter.) And when they saw this done honest mothers knew their doom. And depend upon it, my friends, such was the terror of small-pox inoculation at that time that if you and I had been living then I am quite sure we should have joined the "genteel mob."

COMPULSION DEMANDED.

Two years after that the whole of the London doctors signed a testimonial and declared that this discovery was such that persons once vaccinated were for ever protected against small-pox. We have found out since then by experience that doctors are as liable to make mistakes as other people. It would have been just as well, before putting their pens to a testimonial like that, to have remembered the old proverb, "Never prophesy until you know."

They very soon began to talk about compulsion. In 1840 vaccination was paid for out of the public rates, and the doctors said inoculation must be put down. The vaccinators and inoculators--here were two sets of doctors then, as now--fought against one another like the pro-vaccinists and the anti-vaccinists at the present time. The vaccinists were in a majority, and could not rest until they had the inoculators put down. Consequently in 1840 an Act was passed that anybody who tried to inoculate another with small-pox would be liable to a month's imprisonment. In 1853 they managed to pass that Compulsory Vaccination Act which we are here to protest against to-night. (Cheers.) I think one of the most serious complaints against the whole system is this: They dare not trust it to its own merits. Do people want small-pox? If the System is any good it will speak for itself; if it is bad they have no right to enforce it. You may ask, "Why was compulsion necessary?" The reason was simply this--the people were beginning to find out it was no good; they were beginning to clamour again for inoculation, and the working classes, who reason more by the hard facts of experience than by medical dogmas, found that it was not the slightest use for protecting People against small-pox. In 1811 there had occurred a notable instance of failure. Lord Robert Grosvenor, ten years of age, who had been vaccinated by Jenner himself, was now taken with small-pox, and lay hovering between life and death. Jenner sat by the bedside of his illustrious patient, and when at last the boy began to turn and get better Jenner turned to the father with "What a lucky job he was vaccinated. If he had not been, he would surely have died." Thus Jenner started the glorious doctrine of mitigation, which has been handed down as the heirloom of the medical vaccinists ever since.

THE GLAMOUR OF A NAME.

Another reason why the doctors accepted it was this: Jenner gave a brand new name to cow-pox that had not been heard of before, he called cow-pox small-pox of the cow, or Variolae Vaccinae, but you may

search in vain for any attempt upon his part to prove it. He might as well have called it diphtheria of the cow, for all the analogy it bore. It gave a scientific air to the whole thing, although there was just as much science in it as in the heads of the old women of Gloucestershire. (Laughter) The theory was this cow-pox is small-pox of the cow; therefore, if you give a person this cow-pox it is the same as small-pox, only in a very mild form, and it is not infectious. Sir John Simon, the great high priest of the vaccine cult in England for many years, said that the reason cow-pox prevents small-pox is because it is small-pox, and that a person who has had cow-pox has really passed through small-pox. And Jenner himself absolutely declared that it is not that cow-pox is a preventive of small-pox but it is small-pox itself. Look at the incongruity of the whole thing. Someone has remarked that "the law's an ass," and I am sure it is in the present instance. By the Act of 1840 anyone who gave another small-pox was liable to a month's imprisonment; by the Act of 1853 if you don't give another small-pox--which is what cow-pox is supposed to be--you are liable to a fine of £1 and costs. So that between the two things, as Mr. Alfred Milnes has said, "a man is about as happy as a Jew in Russia." (Laughter.)

COW-POX AND SMALL-POX COMPARED.

What is cow-pox? It is a disease which occurs on the teats of cows; it only occurs when they are in milk; only in one part of the body, and naturally only in the female animal; it results in an ugly chancre; and is not infectious. Small-pox, on the other hand, is not limited to the female sex as is cow-pox, nor to one portion of the body; it presents different physical signs, and, furthermore, is tremendously infectious, and the course and symptoms of the two diseases are totally different. Therefore there is no analogy between the two. Badcock, of Brighton, accepting this theory, however, inoculated a number of cows with small-pox, and fancied that it should have become cow-pox. But it never produced anything but small-pox. So much had this question obscured the minds of the medical profession that the French savants formed the Lyons Commission to go thoroughly into the whole thing, and Mons. Chauveau, the eminent French scientist, after experimenting, told his Government that it was totally impossible to convert smallpox into cow-pox. The fact is, as Dr. Creighton said, to try and turn small-pox into cow-pox you may as well try to convert a horse chestnut into a chestnut horse. If they can turn cow-pox into small-pox I say let them do the conjuring trick backwards, and I'll believe them. (Cheers.)

Look at the absurdity of the whole thing! For the sake of argument take it for granted that cow-pox is small-pox, and that to vaccinate is to give small-pox. Then, according to Jenner's theory, the person inoculated with small-pox should not take it, like his case of James Phipps. But is it not a fact that you can be successfully re-vaccinated frequently? If, therefore, vaccination is a form of small-pox, it does not prevent you having "small-pox" again. If once vaccinating does not prevent your being re-vaccinated, how can it protect against the genuine article? (Cheers.) If it can't protect you against the bite of a cat, how can it against the scrunch of a tiger? Why, these Gloucester doctors, in boasting of their re-vaccination, are absolutely damning their whole creed, for if their theory were correct they have no business to be able to be re-vaccinated at all! But I may be told, this may be true enough. There may be no science in it--and I have no hesitation in saying that the gentlemen alluded to by the Chairman, Dr. Crookshank and Dr. Creighton, have knocked the bottom out of this grotesque superstition and shown that vaccination has no scientific leg to stand on--but there are some remedies, which, though you can't prove the physiological effect they have or see the science that belongs to them, yet you know by experience will produce certain results. Now let us test vaccination by this law.

THE TEACHING OF EXPERIENCE.

I have clearly proved that there is no science in vaccination; now we will see what experience has to say upon the subject. Since the passing of the Act in 1853 we have had no less than three distinct epidemics. In 1857-9 we had more than 14,000 deaths from smallpox; in the 1863-5 epidemic the deaths had increased to 20,000; and in 1871-2 they totalled up to the tune of 44,800. It might be asked; Did not the population increase? Between the first and second epidemics the population did increase by 7 per cent., but the smallpox deaths increased by 41 per cent. Between the second and third epidemics the population went

up by 9 per cent. and the small-pox by 120 per cent. Small-pox is an epidemic disease, and if cow-pox is to do anything as a preventive of small-pox it should prevent an epidemic. It is all very well to say what a splendid protection it is when there is no epidemic about, but the question is: How will it stand when small-pox comes? But, as Dr. Druitt has well remarked: "You may just as well try to stop small-pox epidemics by vaccination as to prevent a thunderstorm with an umbrella." In 1880 the Registrar-General reported that although typhus fever and other zymotics had gone down, the only one to show a rise was small-pox; i.e., after thirty years of compulsory vaccination it was 50 per cent above the average of the previous 10 years. We got rid of the black death and gaol fever entirely. What did it? Good water, good drainage, and the whitewash brush. (Cheers.) Yet the only zymotic which shows a notable increase is the only one against which a special prophylactic has been used, and so remarkable was this that the Registrar-General had to draw attention to it. Undoubtedly small-pox would have gone too if the inoculators had not taken such pains for nearly 100 years to establish it in this country.

I constantly find that when the pro-vaccinists are driven into a corner as to the failures occurring in this country they always adopt the plan of Jenner, and invite us to look at the brilliant successes in other countries. As soon as ever they are asked to remember the number of vaccinated people who get small-pox they say, "Oh, look at Ceylon," "come with me to the plains of India," or they ask you to hook into Central Africa and "see what vaccination does there." Yes, it is all very well to be carried away to those countries where no Registrar-General is kept and no official statistics have ever been published. (Cheers.)

THE HISTORY OF SMALL-POX IN GERMANY.

They say, "Look at Prussia, and the way vaccination has stamped out small-pox there." Very well, we will look at Prussia, which, I may say, has kept better vaccination records than any other country in Europe, except, perhaps, Sweden. In 1834, which is twenty years before England adopted the Compulsory Vaccination Act, so severe was the Act in Prussia that, in addition to primary vaccination, every child had to be vaccinated over again when he started upon his school life; he had to be re-vaccinated on going from college to college; and re-vaccinated over again when he entered the Army, which meant every healthy male out of the whole of Prussia. And so severe was the Act that if any man refused to be vaccinated he was ordered to be held down and vaccinated by force; and so thoroughly was it done that he was vaccinated in ten places on each arm. That was stiff enough for anybody, I should think. (Laughter.) In 1871-2--thirty-five years after this Compulsory Vaccination Act--came the terrible epidemic which swept all over Europe. It came to Prussia, and what was the result? In that year small-pox carried off no less than 124,978 of her vaccinated and re-vaccinated citizens after thirty-five years of compulsory vaccination of the description which I have referred to! This roused Prussia, and she began to look about her; she saw the cause, and she was determined to remedy it. She brought good water into her cities, purified her river Spree, introduced a complete drainage system throughout the country--(loud cheers)--she got rid of her "rookeries," and ordered model barracks to be built for the soldiers; and away fled the small-pox, like the Philistines before the Children of Israel. Sanitation did for Prussia what 35 years of compulsory vaccination was unable to accomplish. At the present time in Prussia small-pox is almost extinct. (Cheers.) It is not that people are being vaccinated more; they are vaccinated less. (Hear, hear.) They hate it in Germany as we English people do; and you can now get out of vaccination there by the payment of a shilling fine. Even the very children in Germany know well enough how it is hated, and in proof of this I may relate to you an amusing incident. A school inspector went to one of the schools the other day and asked the question of the class, "Why was Moses hidden by his mother in the bullrushes?" Very soon a little fellow put up his hand and replied, "Please sir, she did not want him to be vaccinated." (Loud laughter.)

SMALL-POX EPIDEMICS IN ENGLAND.

We will now come nearer home and take the Metropolitan Asylums Board and their statistics. From 1870 to 1886 there were 53,579 cases of small-pox, and out of that number there were 43,919 who had undergone the process spoken of by Sir John Simon as "removing every taint of susceptibility to

infection." But you may say, perhaps, "Will it protect for a time?" Well, I should like to know for how long? (Hear, hear.) Dr. Bond says up to fourteen years, some people say ten; in Birmingham they were rejoicing the other day that they had had nobody take small-pox, no vaccinated child, under three; so that it has got down rather low. (Laughter.) Jenner said that to talk about re-vaccination was to rob his "discovery" of half of its virtues; he was dead against it by the statement he made that one vaccination was protection for a life-time. On that he got £30,000. (Laughter.) Dr. Bond tells us that that was altered afterwards, and that it was not the expression of Jenner's matured vision. No, Jenner altered it afterwards; he got his £30,000 first, though. (Renewed laughter.) He never yielded up the £30,000 when he found he had made a mistake.

How long will it protect? Dr. Bond talks about the Sheffield epidemic in his letter two or three days ago, and I have no doubt Mr. French Hensley, to whom he replies, will very soon put the matter straight. He tells us that the Sheffield statistics show a wonderful immunity of vaccinated children. Dr. Bond bases that upon the marvellous statistics of Dr. Barry. Dr. Bond has evidently never read the Royal Commission reports at all. (Laughter and cheers.) It looks as though Dr. Bond has never seen the cross-examination of Dr. Barry. Dr. Bond has no idea of the fatal fallacy underlying the Sheffield epidemic report, which came to an utter collapse when Dr. Barry was cross-examined upon it. He has no idea of all that; he is evidently something like the old lady Sydney Smith talked about, who never read anything on the opposite side of the question in case she should be prejudiced. (Laughter.) If it had not been for the Sheffield report--I am very pleased it was brought forward, although it is a perfectly hollow thing so far as facts go--we should not have had the Royal Commission. The vaccinators thought when it fell into Government quarters that they had such a tremendously strong case that the anti-vaccinators would have been wiped off the scene. But when it came before the Royal Commission, Dr. Collins, one of the Commissioners, took Dr. Barry in hand and very soon spoilt the whole game; and it turned out that the whole of the report, from beginning to end, was nothing but a statistical trick, based upon evidence collected by census collectors towards the close of the epidemic instead of at the beginning, when many of the unvaccinated had passed over to the vaccinated class. (Cheers.) I will give you some statistics with regard to Sheffield as far as one can gather them, which I take out of this very report. There were ten cases of small-pox under one year old, 87 cases under five years of age--vaccinated all of them--and 241 cases of vaccinated small-pox between the ages of five and ten. In spite of what is said about vaccination protecting up to 14 years of age, this splendid report, that Dr. Bond speaks of with such admiration, declares that Dr. Bond's theory is as false as anything can be, for it gives no less than 338 cases of vaccinated small-pox under ten years of age. (Cheers.)

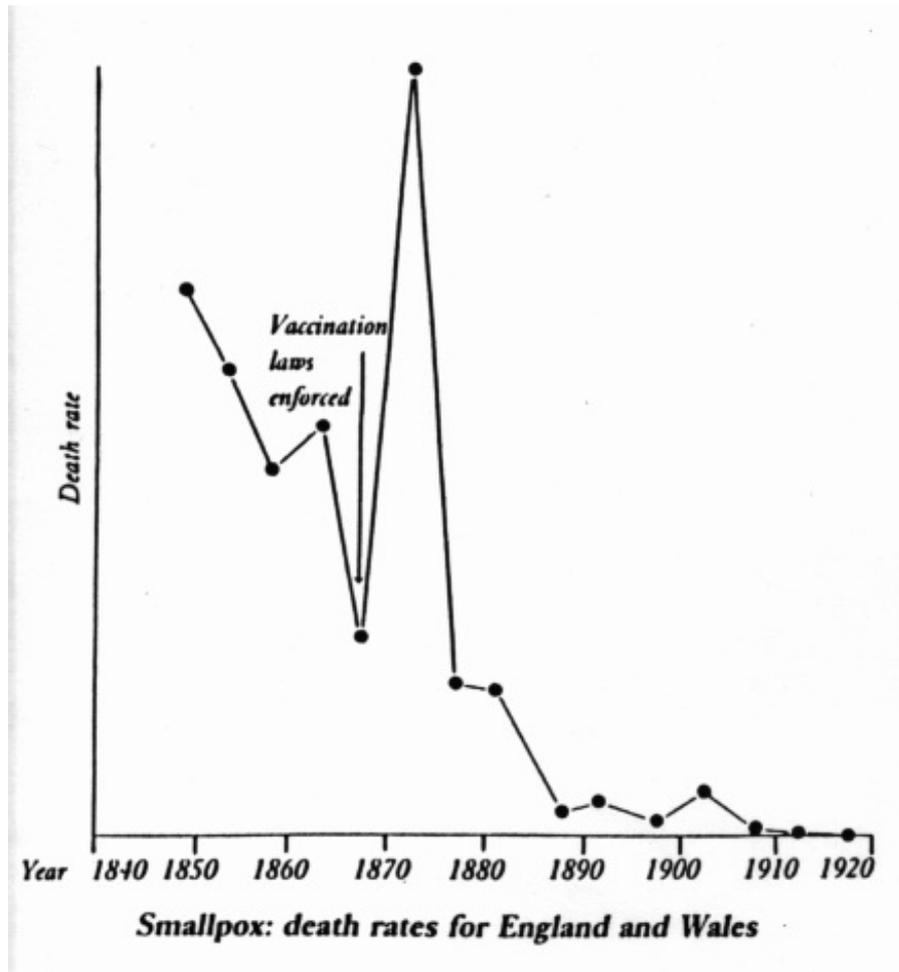
Well now, let us see what vaccination did for Sheffield. This Sheffield epidemic occurred in 1887 in the very worst quarter of the town, on 135 acres of the most horribly insanitary part of the town, which was condemned years ago by the Government Inspector, and it has never been put right yet. That is where small-pox has always broken out, that is where small-pox has flourished: and when this tremendous epidemic took place on they went, vaccinating and re-vaccinating; and still the small-pox epidemic spread. There were no less than 7,000 cases of small-pox, and, alas! 600 deaths, and still the small-pox went on; until at last God in his mercy opened the floodgate of heaven and down came the rain, which washed the sewers and the drains, cleared away the refuse from the gutters, washed the dirt from the streets and the filth from the slums and away went the small-pox. Pure water accomplished for Sheffield what 56,000 vaccinations had been unable to effect. (Loud cheers.)

Again, take Gayton, a great authority with the pro-vaccinists, who in his book entitled "The Value of Vaccination" shows that of 10,403 cases of vaccinated small-pox 20 cases were under one year old, 341 between one and five, and 945 between five and ten; i.e., 1,306 cases of small-pox in vaccinated children, in order to prove the efficacy of vaccination!

WHY VACCINATED CHILDREN "DON'T DIE".

"But," we are told, "the children don't die." Well, that may be all very well; we will see whether they die or not. Turn to Germany, for instance. During that epidemic I spoke of just now there were 2,140 cases of children under ten who had small-pox, and 736 of them died; there were 1,503 cases vaccinated under

five, and there were 573 deaths. You may say,



"Then why is it they don't die in this country?" Turn to the Muller's Orphanage in Bristol. In 1872 there were 740 children, all vaccinated, and 292 cases of small-pox amongst them, and there were 17 deaths. But I can give you the reason, perhaps, why the children don't die--why vaccinated children don't die from small-pox so much as we should expect. In 1886, for instance, there were 275 cases of small-pox deaths altogether throughout England and Wales; there was only one vaccinated child that died from small-pox under ten years of age, but there were 93 children who died from "chicken-pox." (Laughter.) And the Registrar-General, in commenting upon the fact, declared that nearly, if not all, those cases should have been registered as small-pox, because chicken-pox "never kills"; and Dr. Ogle, the chief in the Registrar-General's Department, told the Royal Commission as a witness before it, that he had never known chicken-pox kill a child in his life. (Cheers.) Why were not they registered as small-pox? In 1893, the last published returns we have, there were 127 children who were reported to have died from "chicken-pox"; so perhaps that will explain why "the children don't die." (Laughter and cheers.)

RE-VACCINATION,

Then they say if it will only protect for a time re-vaccination is the thing. I want to know how often are we to be re-vaccinated? Jenner said once was enough; Dr. Thorpe Porter, Superintendent of the Dublin Small-pox Hospital Sheds, says he has no faith in re-vaccination; Dr. Pringle, the great Indian vaccinator, says re-vaccination is an unpathological and unphysiological blunder; whereas Dr. Seaton says that to be vaccinated once at puberty is quite enough; Sir William Jenner says you ought to be vaccinated once in infancy, again at seven years, and again every time an epidemic comes along (laughter); Dr. Oakes says you ought to be vaccinated every ten years; and a great German vaccinator, whose name I won't attempt to pronounce, says you ought to be vaccinated every four months until you cannot be re-vaccinated any

longer. (Laughter.) What, to be kept in a constant state of cowpox in order to prevent small-pox? Why, I would sooner have the smallpox--it would be a thousand times better--and have done with it. (Cheers.)

THE SMALL-POX NURSE FABLE.

Then people say, "What about the nurses; why, don't you know that for 50 years there has not been known a single nurse in any small-pox hospital who has taken the small-pox, because they have been re-vaccinated?" Dr. Cory was responsible for the card which has been handed for years to mothers who brought their children to the vaccination station, and which served to stamp this delusion upon the country; and when Dr. Cory was before the Royal Commission this card was brought to his notice. "How is it that it has been published; is it a fact?" he was asked, and the answer was "No." "Is it not a fact that nurses who have taken small-pox had been re-vaccinated?" "Yes." "How is it that you printed this?" "Oh," said Dr. Cory, "originally the card was simply concerning Highgate Small-pox Hospital and it was the printer"--oh, that naughty printer--(laughter) "who deleted the definite article when it ought to be there, who put an 's' after the 'I' who dropped out two capital letters instead of leaving three, who scattered the word Highgate, and left it as a matter for generalisation!" (Renewed laughter.) In Highgate Small-pox Hospital we know that whenever it was possible they got the nurses from the small-pox patients, and the reason these did not have it was because they had had small-pox beforehand, Now take the nurses in the fever hospital. Dr. Hopwood lately declared that no nurse had died in the Fever Hospital of London for ten years. But they were never vaccinated against fever, and why did not they die? The fact of the matter is this, the small-pox nurse fable is a very absurd one. We know well enough that small-pox has the faculty of taking hold of the weakest; that is the reason why children, whether vaccinated or not, naturally fall the easiest prey. In Gloucester you have practically no vaccinated children to suffer. It depends upon the constitution and the amount of resisting power to the disease. The nurse is a selected person--she will never be likely to be taken on as such unless she is perfectly healthy; As I said, she is frequently taken from the ranks of the small-pox patients, but otherwise is perfectly healthy; she has good food, regular exercise; she works in a well-ventilated ward; amid, what is more, she has no fear--which I believe is one of the greatest protectives under the sun. (Cheers.) She is in a far better position than her patients who, as a rule, come from insanitary places, from the slums and dens of our cities; and it is not, therefore, to be wondered at that the nurses should be able to resist the small-pox. Even in the time of the plague, when vaccination was not dreamed of, it was remarked in all the old writings that the doctors and nurses rarely if ever caught the disease. But it is not that the nurses do not take it, Dr. Cohn, of the Paris Small-pox Hospital, said that in the hospital he had no less than 200 nurses re-vaccinated under his own eyes, and yet out of that number 15 took small-pox and one of them died. Furthermore, he tells us that at time Bicetre hospital there were 40 medical attendants and apothecaries who never contracted small-pox at all, although they had neglected to be re-vaccinated; and he mentions, moreover, 40 sisters of mercy who were right in the very centre of the hospital who refused to be re-vaccinated, and not one of them had small-pox. (Cheers.)

RE-VACCINATION IN THE ARMY.

Then look at our re-vaccinated Army. From 1860 to 1888 we had no less than 3,953 cases of small-pox in the British Army, and 391 of them died. If re-vaccination won't protect the soldier, how is it going to protect the nurse? (Hear, hear.) In Egypt in 1889 they died at the rate of 1,750 per million from small-pox. But, as a matter of fact, the Government do not believe in re-vaccination. The other day, when the epidemic broke out in London, a regiment of soldiers was stationed at St. John's Wood, near, and so terrified were the Government with regard to the matter that an urgent order came down from the Horse Guards sending the regiment right away to the other end of England, lest the re-vaccinated soldiers should catch small-pox. (Laughter.) I heard an amusing incident the other day about a magistrate who had some of those "ignorant fanatics" like some of you--(laughter)--before him. He told the defendants that they ought to be ashamed of themselves letting their children go unvaccinated, and added, "Why, I would not let my children go unprotected from this dire disease on any account." A short time afterwards illness came into his house, and the doctor told him that a servant had the small-pox; and no sooner did the old

gentleman hear that than his courage oozed out at his finger-tips, and he sent for the nearest fire-escape in order that the children might be taken away through the window, so as to avoid passing the door of the infected chamber. (Laughter.) Then there are those doctors who tell us that not only have they been re-vaccinated, but that if a small-pox epidemic occurred they would be done again, which shows that they have not much faith in re-vaccination. (Hear, hear.) At Berkhamstead, Sir Astley Cooper, who has been sitting on the Bench, declared in a speech on the subject that he had been vaccinated no less than seven times, and such was his wonderful faith in the operation that he declared, with all the courage of a Roman gladiator, "If an epidemic occurred, I would go and be vaccinated again." (Laughter.) Why, if they had tattooed the old gentleman from head to foot he would still be crying, "Do, pray give me more vaccination." (Renewed laughter.)

MITIGATION.

Then they tell us that vaccination will mitigate the disease that it will make it milder. I should like to have it proved. (Hear, hear.) How are we to know how severely a person is going to have small-pox? If everybody who had been vaccinated had it in a milder form and every person who was unvaccinated had the smallpox more severely, there would certainly be some ground for the argument. But we know well enough that long before vaccination was dreamed of the usual kind of small-pox was the mild; and, as Dr. Wagstaff wrote to Dr. Freind in 1721 "There is one kind of small-pox which the doctor cannot cure, and another kind which the nurse cannot kill." That is quite enough to show there were very mild cases of small-pox at the time; and Dr. Plot in 1677, in speaking of an epidemic at Oxford, tells us that the whole of the cases were extremely mild, and that with proper care they all recovered. So that before ever there was vaccination there was plenty of mild small-pox. (Cheers.)

Look at the hospital statistics, and see what they have to say. I find from the last published statistics, which are for 1893--I am now speaking from memory--that there were 150 unvaccinated cases and 253 vaccinated, but 1,054 cases were never stated at all. When out of a total of 1,457 cases over 1,000 are left undescribed, and we are not told whether they were vaccinated or not, what confidence can you have in such statistics? I say that such statistics as those, upon which vaccinators base their case, are nothing more nor less than a fraud. (Cheers.)

Now, you test the mitigation theory by malignant cases. Mr. Alexander Wheeler proved before the Royal Commission that of those said to be vaccinated 82 per cent died, and of those with good marks 85 per cent died; so that the well marked patients come worse off when vaccination is most needed. The argument we generally get is this: If a person happens to have been vaccinated and he goes through life without catching small-pox they say, "What a splendid thing it is that he was vaccinated"; if he has a mild attack they say, "How very fortunate he was vaccinated, or he would have had the small-pox very severely"; if he happens to have a severe attack we are told, "It was a lucky job he was vaccinated, or he would have died"; and if a person who has been vaccinated should have the impudence to go and die, then we are coolly told, "Oh, he had not been vaccinated properly." (Laughter.)

In the hospital statistics of to-day you generally find that the unvaccinated people die at the rate of from 30 to 60 and even 80 per cent. or higher; and yet when we come to look at the fatality of the last century and the horrible condition of things which I have mentioned to you, we find that the fatality was only 18 per cent. If, therefore, the fatality of unvaccinated people last century was only 18 per cent., and the average fatality of the present day amongst the unvaccinated runs from 30 to 80 per cent., I want to know, like Trehawney's Cornishmen, "the reason why." (Hear, hear.) I do not believe the doctors of the present day are less competent than those of a hundred years ago; and therefore why double and treble the number of unvaccinated patients who are slipping through their fingers as compared with a century before? It is not for me to explain this. Let them explain it themselves. Mitigation is therefore a sham. I remember that the Duke of Connaught, although vaccinated with the very finest and the most recherché lymph, had the small-pox afterwards, and they could not understand it. (Laughter.) A great deal of interest was aroused upon the point, and the doctors came to the conclusion that his Royal Highness could not have been vaccinated properly. Why, if a Royal Vaccinator cannot do their work properly what must you poor wretches expect from the rank and file of the profession? (Loud laughter and cheers.)

THE NUMBER OF MARKS.

Then we are told it goes by the marks: that you must have a certain area, a certain shape, and a certain number. In fact there are any amount of shuffles: as Cobbett used to say, "Quackery has always one shuffle left." (Renewed laughter.) When you come to remember that you can have no less than 70 different kinds of marks from the same lymph, it shows the utter absurdity of the whole thing. (Hear, hear.) Mr. Marson, who was the surgeon at the Highgate Smallpox hospital, produced a number of statistics showing that the unvaccinated patients died at the rate of 35 per cent., and then according to the marks they had, one to three or four marks, so they died less and less until with four marks it almost came down to a vanishing point. Mr. Marson was submitted to cross-examination before the Committee of 1871, and then it turned out that a good many of those patients had died from what he was pleased to call "super-added disease." That is, although they went in suffering from small-pox, yet there was some other disease they had got, and they were put down not as dying from small-pox, but from this other disease. It is a most extraordinary coincidence that the more marks the patients had the more they died from something else than small-pox. (Laughter.) And when you come to the four mark patients, of whom there were only eleven, absolutely ten died of "super-added disease," and there was only one left for the record of small-pox, and that one was made to record a fatality of three-quarter per cent. This has been the sheet-anchor of the medical profession for years; these are the statistics dinned into the ears of the medical students to prejudice their future career in the medical profession; these are the statistics which present, I have no hesitation in saying, the most glaring specimen of "cookery" ever penned by mortal man. (Cheers.) I think I have shown pretty clearly that vaccination is no protection, that mitigation is false, and that re-vaccination is a fallacy.

THE DANGERS OF VACCINATION.

Another most important point is this: You may say, "Never mind, rather than have the bother of being summoned and the rest of it, I will let my children undergo the operation." What about the danger? (Cheers.) Upon this subject I will dare to say this:

There is not a medical man in the kingdom but will admit there is a risk. Before the Royal Commission 6,000 cases of injury from vaccination were presented, with 800 deaths. This is the condition which we have upon the most reliable statistics, and that represents a very sorry fact. We are told by Dr. Bond that we should have calf lymph; but we must not forget that some of the most disastrous results which have ever occurred, and which have been recorded only recently, have been the result of the use of calf lymph; and so terrified is the Government about it that it will not sanction its use by the public vaccinators. Therefore it is no use going to cow-pox direct from the calf.

You may say, "What is this calf lymph?" There are three kinds. Supposing you have the spontaneous cow-pox taken from the sore on the cow's udders, a calf is strapped to a table and its abdomen having been shaved, about 100 punctures are made in it and some cow-pox matter rubbed into them; the calf is then tied up for eight days when it is strapped down to the table again and this lymph, by means of clamps, is squeezed out of the various sores raised and put into capillary tubes. Then the calf is let loose and sold to the butcher for prime veal. (Laughter.) That is the spontaneous cow-pox, which Jenner himself said was practically useless.

With regard to the other kind of cowpox, which is commonly used, you put the matter from a child's arm into the calf's abdomen; and you stand a chance of getting some human diseases of the worst kind as well as cattle disease into the bargain. The third kind is small-pox virus itself with which Badcock inoculated no less than 20,000 people under the name of vaccination. Even Sir James Watson said he could sympathise with, and even applaud a father who would pay multiple fines and even undergo imprisonment rather than submit his child to such a ghastly risk. (Cheers.) He (Sir J. Watson) was then speaking about syphilis.

INCREASE OF INFANT SYPHILIS.

What about syphilis? (Hear, hear.) It is a very strange thing that up to 1853, when the Compulsory Vaccination Act was passed, the annual deaths from syphilis of children under one year old did not exceed 380; the very next year the number had jumped up nearly double, to 591; and syphilis in infants under one year of age has gone on increasing every year since until 1883, when the number of deaths reached 1,813. It has increased four-fold in infants since the passing of the Compulsory Vaccination Act, and yet in adults it has remained almost stationary. Surely this speaks for itself. (Hear, hear.) These deaths have only begun to decline since, in proportion as the number of vaccinations to births have declined. Therefore we have not merely children dying primarily from vaccination, but from a concurrent disease. The question is asked, "Cannot you get any pure lymph which will really answer the purpose?" Well, they have tried all sorts. They have tried cow-pox, horse-pox, horse-grease cow-pox, also goat-pox, and that from the sheep; they even went to the buffalo, but the buffalo-pox stank so horribly that they had to give it up. (Laughter.) Surgeon O'Hara even advises that we should get some lymph from the donkey. (Renewed laughter.) One would have thought that the donkey was low enough, but someone has gone further. Dr. Monckton-Copeman as suggested in the "British Medical Journal" that some small-pox scabs should be powdered as fine as possible in a mortar, placed in an egg, stirred up into a kind of smallpox omelette, and after being put by for a certain time it is ready to be placed in the babies' arms. ("Shame.") That is what I may call a "fowl" concoction. (Laughter.) We have had almost as many animals suggested for the purpose of supplying lymph as there were in Noah's Ark--a regular menagerie of them; the vaccinators are in as big a muddle about it as ever, and yet they say "You must have the genuine variety or you will be sure to catch the small-pox." (More laughter.) "Pure lymph from the cow!" It reminds me of the notice one sometimes sees, "Pure milk from the cow; animals milked on the premises." (Laughter.) "Pure lymph" calls to mind the green fields and pastures of the country! Can it be had, you ask? Well, Government Microscopist Farn, who examines the lymph sent out, was asked by Dr. Collins, "As a matter of fact have you ever guaranteed the purity of lymph in your life?" and he had to acknowledge "No."

And yet members of the medical profession are saying this kind of thing: Dr. Hind wrote to the Devises Board of Guardians some time ago saying that he would be very happy indeed to supply them with calf lymph "which would be undoubtedly pure." He is another gentleman who does not appear to have read the other side of the question. (Laughter.) Mr. Microscopist Fain was further asked by Dr. Collins, "Can you recognise under a microscope of the highest power the germs of syphilis?" and the answer was "No." And yet they talk about "pure lymph!" From 1881 to 1892 we have had no less than 620 deaths recorded, 620 English homes which have been one little occupant the less, 620 mothers' hearts which have been bleeding as a result of this Compulsory Vaccination Act; and yet they say "there are no bad results with proper care." How is it, then, that this mischief occurs? If they cannot happen with proper care, then these results, according to that theory, must be due to carelessness, and if so it is manslaughter; and have you ever heard of a medical man being charged with manslaughter in such a case? (Cheers.) The Grocers' Company a few years ago offered £1,000 to anybody who would discover an artificial nutritive medium by which the germ vaccinia could be cultivated without any foreign elements or risk of disease. No one has claimed the £1,000 yet, and still they talk about "pure lymph." I will give you one or two statistics with regard to Leicester. In 1868-72 the mortality of children under one year was 107 per thousand, when 98 per cent were vaccinated; from 1888-9 only two per cent, were vaccinated, and, in spite of what Dr. Bond says, the general mortality of children had declined from 107 to 63 per thousand. Furthermore, from 1874-89 the number of children under one year who died of erysipelas had declined from 193 to 47 per 10,000 deaths. The Guardians of Gloucester are being urged to re-commence prosecutions, and I appeal to them to make a firm stand against it. (Loud cheers.)

LIBERTY OF CONSCIENCE.

There is one thing about this Vaccination Act which I don't like: it's an unequal law--it presses hardly upon the poor. The rich man can pay his sovereign fine and feel none the worse for it; but the poor man has to either submit or have his goods seized, or go to the prison cell in default of paying his fine. I say that

the poor woman's child is as dear to her as the child of a prince is to its parents, and that she has no right to be put in a harder position for its protection than those who are wealthy. (Cheers.)

But there is another thing that I must mention to you, and that is the case of Emily Maud Child, of Leeds. That child who was vaccinated, died, and a coroner's jury having held an inquest, it was brought in conclusively that she died from syphilis, as the result of vaccination. A certificate to that effect went up to the Government, who sent an inspector down to investigate the case; he took photographs of the teeth of the other children, declared they were syphilitic, and reported that it was not vaccine lymph which produced the syphilis, but that the fault lay with the mother herself. (Cries of "Shame.") At last the Royal Commission heard of the case and sent down independent investigators, who found that there was not a vestige of syphilis in the remaining children, and that the charge against the mother was false. (Cheers.) It is a terrible thing, I say, that not only have you to stand the chance of losing the child who is dear to you, but you have to stand the chance of the powerful machinery of Government being turned on in order to take away the character of your wife. They tell me I have no right to pick out these hard cases; but I tell my friends I will stop picking them out when they stop putting them in. (Cheers.) Then, when you go before the Bench, the magistrates tell you they are "only administrators of the law," which has been the plea of the greatest persecutors of every age. Remember that the Vaccination Act does not deal with the drunkard; it is the best classes of the country, the earnest, honest people, the Sunday school teachers, who love their children and their homes. The Scotch Covenantors, Ann Askew, John Wyecliffe, and the apostles of old were told that their persecutors were "only the administrators of the law," but they defied the law, and the proudest privileges and blessings we possess have been won for us by the law-breakers of this country. It is not a question merely of the health but of the very lives of the children which are at stake in this matter; and I believe that the present century shall not close until we have placed our foot upon the dragon's neck, and plunged the sword of liberty through its heart. (Cheers.) They tell us we are trying to rouse the country with a "crazy cry"--the cry of liberty of conscience--and, we are not ashamed of that cry. It is that "crazy cry" which snapped the shackles of despotism in the past. That "crazy cry" is spreading at the present time throughout the length and breadth of the country. We are told that the intelligent portion of the population is against us; it's false. That "crazy cry" is ascending higher and higher, into a raging and tremendous storm; that liberty which has been won by the blood of our forefathers for the theological conscience, is the liberty we demand for the scientific conscience. (Loud cheers.) Already it is thundering at the door of the House of Commons, and it shall be heard. Yes, we are going forward with the "crazy cry" of liberty of conscience upon our unfurled banner, and we never intend to rest until we get it. (Loud and prolonged cheering.)

Mr. D.C. JONES proposed the following resolution, which was seconded by Mr. A. RICE, and carried unanimously, amidst great enthusiasm:

"That this meeting of the inhabitants of Gloucester views the Compulsory Vaccination Act as a serious infringement of the liberty of the subject, and earnestly desires its repeal, believing that the practice of vaccination has not only not fulfilled its promise of protection from small-pox, but that it is also accompanied with very serious risks."

Mr. GEORGE NEWMAN proposed, and Mr. H WHILEY seconded, "that a hearty vote of thanks be accorded Dr. Hadwen for his eloquent and interesting address," This was carried unanimously, the audience spontaneously rising to their feet and singing "For he's a jolly good fellow."

A vote of thanks to the Chairman, proposed by Mr. CARTER and seconded by Mr. T. CLIFFORD, terminated a most enthusiastic meeting.

THE MORTALITY AMONG CHILDREN.

It is often said that unvaccinated children are in special danger. That fable has been dissipated by a table given by Mr. Neville Chamberlain (who appeared quite unable to grasp the meaning of his own figures)

on July 23rd, 1923. We reproduce it from the Star of July 26th, in order to incorporate the editorial comment.

The following table gives the number of deaths per million living from small-pox arranged in decades, and divided up according to the ages of the sufferers:

	Under 5	5-10	10-15
1861-70	638	145	56
1871-80	518	285	138
1881-90	80	33	26
1891-1900	29	10	3
1901-1910	22	7	6
1911-1920	0.57	0.32	0.11

It will be noted that there has been an enormous decrease in the small-pox mortality among children under 15.

At the beginning of these periods (1871) It was officially recorded that 97.5 per cent, of the whole population between the ages of two and 50 was vaccinated.

At the end of these periods (1921) only 38 per cent of the births was vaccinated.

There has admittedly been a constant decline in the number of children vaccinated.

The Editor of Truth, commenting upon the above figures on August 1st, 1923, observed:

"No doubt Dr. Garstang will be of the opinion that for calling attention to these incontrovertible facts I ought to be sent to Broadmoor. For my part I think that a man who cannot see the significance of the above figures and those referred to in Truth last week ought not to allowed to practise on the public as a doctor."

Dr. Garstang is a medical man who, at a recent Medical Congress, had described all anti-vaccinationists as "criminal lunatics." They can at least draw a logical deduction from figures so easily understood.

The following figures form a complete refutation of the claims for vaccination. They were given in a written answer by Lord E Percy to a Parliamentary question by Mr March, MP to the Minister of Health on July 16th 1923

Year	Vaccinations per cent of births	Smallpox deaths	Smallpox death-rate per 100,000 population	Deaths from cowpox and other effects of vaccination
1872	85	19,022	82.1	
1873	85.2	2,303	9.8	
1874	85.05	2,084	8.8	
1875	84.9	849	3.5	37
	86	2,408	0.0	2122

1876	80	2,400	7.7	2152
1877	86.3	4,278	17.3	39
1878	85.3	1,856	7.4	36
1879	86	536	2.1	41
1880	85.1	648	2.5	58
1881	86.6	3,098	11.9	65
1882	85.9	1,317	5.0	55
1883	85.6	957	3.6	53
1884	84.4	2,234	8.2	52
1885	84.7	2,827	10.3	45
1886	83.4	275	1.1	45
1887	82.8	506	1.9	45
1888	81.7	1,026	3.7	58
1889	79.8	23	0.1	43
1890	78	16	.0	43
1891	75.8	49	0.2	58
1892	74.5	431	1.5	59
1893	72.3	1,457	4.9	50
1894	70.04	820	2.7	56
1895	67.8	223	0.7	42
1896	66.0	541	1.7	35
1897	62.4	25	.0	26
1898	61.0	253	0.8	34
1899	66.4	174	0.5	25
1900	68.7	85	0.3	17
1901	71.4	356	1.0	22
1902	71.8	2,464	7.5	26
1903	75.4	760	2.3	28
1904	75.3	507	1.5	26
1905	75.8	116	0.4	29
1906	73.4	21	0.1	12
1907	70.9	10	.0	13
1908	63.2	12	.0	11

1909	59.8	21	0.1	8
1910	55.9	19	0.1	14
1911	52.3	23	0.1	10
1912	50.1	9	.0	7
1913	46.5	10	.0	6
1914	44.6	4	.0	11
1915	45.5	13	.0	4
1916	44.7	18	.0	9
1917	43.3	3	.0	5
1918	41.5	2	.0	7
1919	40.6	28	.1	19
1920	39.5	30 (b)	.1	8
1921	38.3	5	.0	7
1922	a	27	.1	

a. Figures for 1922 not yet available.

b. In addition one death certified as influenza, and so classified, was regarded by the Ministry of Health as definitely ascribable to haemorrhagic smallpox.

Dr. Hadwen's First Article

From "Truth," January 3, 1923

THE FRAUD OF VACCINATION

Dr. Alfred Russel Wallace in his book *The Wonderful Century*, devoted a chapter to "Vaccination, a Delusion"; Dr. Charles Creighton, an acknowledged authority on epidemiology, declared independently that "the bottom had been knocked out of a grotesque superstition," a conclusion irresistibly forced upon anybody who gives unbiased study to the subject. Yet so strong is the effect of authority, custom, and endowment, and so prone are people to save themselves the trouble of personal investigation by the simple process of accepting the decisions of "the majority" (which they thereby swell, rendering the process easier to others), that it has been possible, within the last few weeks, for a gigantic scare to be got up in the interests of vaccination on the ground of an altogether insignificant outbreak of smallpox almost entirely confined to one East End workhouse, where the Public Vaccinator himself was one of the first to fall a prey to the disease.

One well-known daily paper, not a household word for accuracy, committed itself to the ludicrous statement that two of the adult patients, having been protected by vaccination in infancy, thereby secured a mild attack, ignoring the fact that vaccination in infancy had not prevented the actual death of others. Jenner declared positively that a primary vaccination protected for life, and his followers, while obliged to drop this claim (for which piece of unsupported bombast he received £30,000), have fallen back upon the theory that it at least mitigates the disease. Evidently these have been "mitigated"-deaths.

SMALLPOX NO LONGER SERIOUS

According to a reply given recently by Major Boyd Carpenter in Parliament, 56 provincial and 7 London districts have had cases of smallpox during the past year. And in all these places many thousands of unvaccinated persons, called a "danger to others," have not even been a danger to themselves, the total deaths, including vaccinated and unvaccinated, having only been 27, with the unprecedentedly low death-rate of barely 3 per cent. The total number of cases all over the country is given as 902, of whom 271 were vaccinated and 625 either "unvaccinated" or "presenting no evidence of vaccination" and incubation cases; 6 cases with no information.

We are struck here with the remarkable fact that two distinct classes are included among the unvaccinated, namely, those which presented no doubt, and those apparently examined for "evidence" which was not found. Clearly the latter cases are those in which the patients declared that they had been vaccinated. The marks may have been concealed by the eruption, or their vaccination may not have "taken"--in which case, according to the theory, smallpox ought not to have "taken" either. This circumstance, together with the tricks that can be played with the classification during a scare--counting as unvaccinated those alleged to have been "probably" sickening before the vaccination took place--renders the classification highly unsatisfactory. I have had personal experience of the tendency to put down a smallpox case as unvaccinated. Every kind of disingenuousness is resorted to in order to make the diagnosis agree with a preconception. The fact has ere now been confessed by the offender. Even where--if anywhere--the classification is correct, it must be remembered that the unvaccinated class is liable to contain children so delicate that the public vaccinator has refused to vaccinate them, infants a few days or weeks old whose parents are among the sufferers, and others who cannot be fairly compared with the normal majority. In the recent Poplar outbreak an official of the Ministry of Health has stated that only 19 per cent of the child population is vaccinated, and practically everywhere the percentage of the unvaccinated exceeds that of the vaccinated. This, of course, has a great influence on the figures. If smallpox breaks out in a school, in a district where most of the children are unvaccinated, the majority of the sufferers are bound to be in that class.

People have been solemnly warned that the reason why smallpox has just broken out is because our population is *unvaccinated*; yet Dr. Killick Millard complains of primary vaccination as liable to make smallpox mild and unrecognised, so that the element of danger lies in the *vaccinated*! He has his excuse in the circumstance that these have always started epidemics.

THE ORIGIN OF VACCINATION

Why do people believe in vaccination? Why did they ever believe in the King's touch?

Jenner's idea was based solely upon a dairymaid's superstition. He sought to give it a scientific air by calling cowpox (a disease which bears no analogy to smallpox) *variolae vaccinae*--i.e., smallpox of the cow. The Latin name was not without its effect, and anything that promised less harmful results than the prevailing practice of the direct inoculation of smallpox matter (which had been killing people by hundreds, and afterwards had to be forbidden by Act of Parliament) was acceptable at the time to the frightened and gullible population. The rest was an affair of influence. When once an error is accepted by a profession corporately and endowed by Government, to uproot it becomes a herculean task, beside which the entrance of a rich man into the Kingdom of Heaven is easy.

The Compulsory Vaccination Act was passed in 1853; a still more stringent one followed in 1867. And between the years 1871 and 1880 there were 57,016 smallpox deaths. Compare this with the small number in the present day, when considerably more than half the population is unvaccinated, and when awful warnings are periodically uttered about the decimating scourge always "bound to come," which never arrives! Between 1911 and 1920 the deaths numbered only 110.

Let us look at the most recent Annual report of the Registrar-General--the eighty-third. He states that during the last 15 years 53 *vaccinated* persons have died of smallpox. In addition, there were 92 other deaths of the "doubtful" class mentioned above; that is, those declared by patients or friends to have been vaccinated, but which have been entered by medical officials as "doubtful" rather than take the slight trouble of searching the registers for verification. We may conclude, therefore, that there were 145 cases of smallpox deaths in *vaccinated* persons in this country during the last 15 years. And yet there were only 78 *unvaccinated* deaths during the same period. Thus, the rate of vaccinated to unvaccinated deaths is nearly two to one. This is the more remarkable seeing that during this same 15 years England has been largely unvaccinated, probably to the extent of about 75 per cent.

DANGERS OF VACCINATION

But the tragedy of the whole sorry business is this:

That during the same 15-year period there is recorded by the same authority the terrible toll of 165 deaths from "cowpox and other effects of vaccination!" In short, vaccination not only failed to save 145 persons from death, but actually killed another 165 in addition! Hence, whereas 78 are alleged to have died because the "preventive" had not been resorted to, more than double that number died from the effects of its use. What have the scaremongers who boast of the "certain and harmless preventive" to say to this? The only way, so far as I can see, that those 165 poor little victims of the eighteenth century Gloucestershire dairymaid's superstition were prevented from having smallpox (if they were ever likely to get it) was in being killed by the "preventive" before the disease could attack them.

In some years more persons have been officially certified as killed by vaccination than by smallpox. Besides this, enormous numbers are left with some permanent disability, a fact to which parents, at least, can testify. Meanwhile, whenever smallpox comes, it is promptly and easily dealt with, and fails to spread beyond a limited time and area. Sanitation has practically banished the disease, just as it banished black death, cholera, and typhus. It would appear that vaccination, so far from aiding, actually retarded the decline, for the Registrar-General reported in 1880 that it was the only gross zymotic which showed a rise in the death-rate--that is, after 30 years of compulsory vaccination.

THE GLOUCESTER EPIDEMIC

The advocates of vaccination are never tired of quoting the smallpox epidemic which occurred in

Gloucester in 1895-6. A picture of Gloucester Cemetery is often presented, apparently with the idea of impressing an *ex parte* statement upon the memory. Where the picture itself cannot be given, the statement alone is made--viz., that 279 unvaccinated children lie buried in that cemetery (the picturesque detail is never by any chance omitted), together with only one out of some 8,000 children said to be vaccinated before or during the epidemic. The latter figure may be correct officially, but it is incorrect actually, for I worked in Gloucester at the time and came into personal contact with the cases, and I have the names and addresses of 116 vaccinated children up to ten years of age attacked by the disease, of whom 27 died.

The truth is that the whole *child* population of Gloucester was practically an unvaccinated population, the vaccinated numbering only 4 per cent.; hence the greater number of unvaccinated attacked is easily explained. Ten thousand unvaccinated children passed through that epidemic unscathed. The severity of the scourge was due to sanitary defects, which were afterwards remedied at great cost, to the fact that the disease broke out and spread like wildfire in a large unsanitary elementary school, where the vaccinated teacher was the first to succumb, and to the utterly disgraceful hospital conditions to which these little patients were removed. Out of the 1,979 total cases; about 1,750 occurred in the southern half of Gloucester, where the sanitary defects above mentioned existed, the unvaccinated children of time northern half escaping practically unscathed. Nearly two-thirds of those attacked--viz., 1,211 out of 1,979--were vaccinated, in spite of the fact that Gloucester was an "unvaccinated city."

GERMANY AND THE PHILIPPINES

No European country has had such severe vaccination laws as Germany. They started in 1834, and enforced continual re-vaccinations. Yet in 1871-2 smallpox carried off no fewer than 124,948 in Prussia alone. In Berlin itself there were 17,038 vaccinated cases of smallpox, of whom 2,240 were under ten years of age, and of these vaccinated children 736 died.

A particularly interesting case is that of the Philippines. When these islands fell into the hands of the Americans a vast vaccination scheme was carried out, and smallpox, which had naturally been a scourge among the inhabitants owing to the bad sanitary conditions, declined just in proportion as these were remedied. The result was, of course, put down to vaccination, though there is a certain humour in the circumstance that, while the natives were suffering less from smallpox, the vaccinated and re-vaccinated American soldiers fell victims to it, dying at a percentage three times higher than that which obtained among the unvaccinated people they had come to instruct. Of course, the usual thorough system of cleansing, finding its parallel later in the Panama region, was pursued, and for many years it was the great boast of the disciples of Jenner that smallpox was banished from the Philippines.

They boasted too soon. Within the last few years, in spite of the rigorous vaccination laws, the disease has regained its old virulence, and there were no fewer than 60,612 cases and 43,294 deaths from smallpox in the Philippines during 1919--an enormous toll in a population of something under 11,000,000.

Whenever laxity in sanitation occurs, it is clear that smallpox ignores vaccination, just as typhoid fever ignored inoculation during the war under similar conditions. The Americans, content with having once cleansed the Philippines, no doubt shut their eyes to many unhygienic practices. It is one thing to teach natives how to live and start them on a right path, but quite another to see that they keep to it. Vaccination, however, never suffers neglect so long as medical officials are maintained for the performance of the rite; and it is somewhat amusing to find that the Filipinos, horror-stricken at the toll smallpox has been taking, have attacked vaccination itself as the originating cause which seems to them time most probable.

The Birth of the Vaccination Fraud

Editorial in "Truth" for January 10, 1923

In his article "The Fraud of Vaccination," published last week in *Truth*, Dr. Hadwen made some remarks not altogether complimentary to the discoverer of time reputed prophylactic against smallpox. These remarks led one reader to denounce both Dr. Hadwen and myself--Dr. Hadwen for libelling one of the greatest benefactors of humanity, and myself for propagating the libel. Dr. Hadwen is well able to take care of himself. For my own part, not wishing to do any injustice to the name and fame of the late Dr. Jenner, I asked Dr. Hadwen what he had against him, and he replied by sending me a pamphlet he has written on the subject. This I have compared with the account of Jenner's life given in the *Dictionary of National Biography*, and the result is so illuminating that I will now give the salient facts as briefly as possible.

To begin with, it is clear that Jenner never possessed anything that would be recognised to-day as a medical qualification. At the age of 16 he was apprenticed to a country surgeon and apothecary, and at 21 he was sent for two years as a pupil to Dr. John Hunter, of London, who undoubtedly was the most eminent surgeon of his day, and, like Jenner himself, a keen naturalist. At 23 Jenner returned to his native village and started to practise as surgeon and apothecary. Here he remained for 17 years, just a plain unqualified country surgeon and apothecary, unknown to the world at large, but keeping up a correspondence with Hunter on a variety of natural history subjects. At the end of this period he made his first bid for fame. In 1787 he sent a paper on "The Natural History of the Cuckoo" to the Royal Society, and, as a result, with Hunter's influence, he was elected F.R.S. The paper contained a number of commonplace facts and some others, which Jenner stated to be from his own observation. The latter turned out to be purely imaginary, Jenner having accepted the report of a youthful nephew on the incidents he described. The coveted fellowship, therefore, appears to have been obtained by something very nearly approaching fraud. Three years later he applied to St. Andrew's University for an M.D., and as St. Andrew's in those days was no more squeamish about granting degrees than some of the so-called American Universities are to-day, so long as the fees are forthcoming, Jenner became Dr. Jenner for the modest outlay of £15. Later on in life, after several applications, he was also granted an M.D. by the University of Oxford, though this was not until after his discovery had been generally adopted.

As for the discovery itself, it appears to have been founded upon what Dr. Hadwen calls a "superstition among the dairymaids of Gloucestershire that a person who had suffered from cowpox would never have smallpox." I hardly think anyone would to-day regard this as more than superstition. Smallpox was then one of time commonest, most dreaded diseases in all ranks of society, and it was already the custom to inoculate people with it in order that they should get the disease under the most favourable circumstances. Jenner appears to have bethought himself of testing the Dairymaid's superstition, and with this object he inoculated a boy named James Phipps with lymph from a vesicle on the hand of a dairymaid suffering from cowpox in May, 1796. In July of the same year he inoculated the same boy with smallpox by what Dr. Hadwen calls the "bogus Suttonian method," which "afforded no evidence as to protection." Yet it was upon the strength of this solitary experiment that Jenner had launched his discovery upon the world, claiming that cowpox was a prophylactic against smallpox, while to give some sort of scientific colour to the claim he labeled cowpox with the name "*Variolae Vaccinae*" (smallpox of the cow).

On the later developments and time exploitation of vaccination there is no need to dwell at any length. Jenner obtained both cash and credit. He received £30,000 in grants from Parliament for his wonderful discovery, and all classes, medical and lay, tumbled over themselves in their desire to do him honour, though even then there existed a few sceptics who asked for better proof of the claims made for time new prophylactic. That those claims could not be fully substantiated was proved when he was called upon to attend the son of Earl Grosvenor, who was suffering from confluent smallpox, although vaccinated in infancy by Jenner himself. He thereupon modified his claims for the protective powers of his cowpox vaccine, and he was content to assert that vaccination had modified the disease so that his patient's life was preserved.

What strikes me as most remarkable about the whole story is the ease with which Jenner got his theory accepted. It is true that medical research was a very different thing in the early days of the nineteenth century from what it is to-day ; but even then the picture of the whole of time Colleges of Physicians and Surgeons swallowing the theory of an unqualified country apothecary, based on one totally unreliable experiment, seems scarcely credible. Jenner's personal bona fides is a different matter. It is unquestionable that he obtained his Fellowship of the Royal Society by humbugging that learned body with his yarn about

a cuckoo; but that he deliberately set himself to humbug the whole of the public as well as the medical profession 'with his "*Variolae Vaccinae*," I hesitate to believe. I should imagine that he was one of those unscientific researchers who, like the spiritualists, are on the look out for facts to fit their theories, instead of first making sure of their facts. His methods were those of the quack, but of the self-deluded quack. But how any real scientist can accept his theories to-day seems astounding, except under the supposition that they have been supported by later and more conclusive experiments.

From "*Truth*," January 17, 1923

SANITATION v. VACCINATION THE ORIGIN OF SMALLPOX

By following the superstitious impulses of Edward Jenner and the ancient tradition of time Gloucestershire dairymaids, the medical profession has lost sight of the vital question, what is the origin of smallpox? The faculty of reasoning upon time subject appears to have become almost extinct; in its place there has arisen a demand for obedience to authority. Fashion has usurped the place of scientific thought, and arbitrary Acts of Parliament and the policeman's truncheon have supplanted logical consistency.

When the question is asked, "Why does smallpox break out at all?" the twentieth century scientist answers, "Because time populace have not been 'protected' against it by vaccination." This reply only begs the question. It pre-supposes that smallpox is a natural visitation of Providence which may strike anybody at any moment, and that the only way by which this presumed inevitable evil can be met, is to compel every human being in this world to undergo a process of "protection," which is to render the system "immune" to attack. This is a negative form of reasoning. It leaves unanswered the crucial question, what is the origin of smallpox? Why are we to suppose, as was believed in the eighteenth century, that a smallpox attack is the probable lot of every member of the race? Why must everybody be diseased to protect him against disease, especially if that disease is one from which, owing to altered conditions, lie is never likely to suffer? Surely, if a disease breaks out there must be a cause for it.

THE SOURCE OF ALL "OUTBREAKS"

Now one fact stands out pre-eminently in every part of time world where smallpox has appeared--namely, it has been invariably associated with insanitary and unhygienic conditions. From time immemorial it has been called in Austria "The Beggar's Disease." It has followed in the wake of filth, poverty, wars, pestilences, famines, and general insanitation, in all ages. It accompanied the clash of arms of the American armies in their struggle for independence, and in their Civil and Spanish wars; it claimed more victims than the battlefield in the ravages of the Crimea; it formed the dark background to the triumphant marches of the German army in 1870; it increased tenfold the horrors of the siege of Paris; and plagued our warriors at Tel-el-Kebir. Even during the late Great War no inconsiderable amount of smallpox occurred amongst all the armies involved wherever conditions of unsanitation triumphed over the scrupulous efforts made to circumvent them. Smallpox outbreaks and epidemics have invariably been the call of Nature to responsible authorities at home: "Put your house in order"; personal municipal, and civic cleanliness has been her unvarying demand, a demand which was couched in one striking injunction by the prophet of old: "Wash and be clean."

REDRUTH

I remember 26 years ago there was an outbreak of smallpox at Redruth, in Cornwall. The Press in all parts of the United Kingdom was immediately supplied with exaggerated reports, and scares were created by public vaccinators hundreds of miles away. I went down to investigate the affair on my own account. There were altogether 44 cases; 84 per cent. occurred in vaccinated persons. One-fourth of the cases was located in "Trestrails Row," consisting of seven houses, each containing only two small low-roofed rooms, and with no water connections. One midden privy, in the most disgusting condition, accommodated the

seven houses. One of these hovels was occupied by no fewer than seven persons, all of whom contracted smallpox, and out of the total of seven deaths three occurred in this house. Nearly another fourth of the cases was confined to Adelaide Road and Raymond Road, where smallpox first appeared, the houses of which were supplied with uncovered cesspits. Three cases occurred in Falmouth Road, with one death which took place in a house closely hedged in by foul middens, a manure heap, and a piggery. Three more cases and one death occurred in the midst of similar unsanitary conditions at Hockin's Court. Midden privies were the order of the day, and the ultimate disposal of the sewage was primitive to a degree. The smallpox rapidly played itself out, and then the municipality corrected the conditions that had been the cause of time outbreak.

GLOUCESTER

I remember, too, the epidemic in Gloucester in 1895-6. I was in and out of the smallpox houses throughout that visitation of nearly 2,000 cases. The echo of it is still heard among time ranks of Jennerian followers, and always with time tragic whisper, "Gloucester was an unvaccinated city!" Never in all time history of professional scaremongering was such a determined effort made to boost vaccination, and never a word was uttered as to the shocking insanitary conditions which produced the tragedy. In fact, those conditions were persistently denied by time officials who were responsible for them.

The smallpox was practically confined to the southern half of the city, where there was no fall for the sewage. The pipes had been hurriedly laid in this new district without concrete base or cemented joints. There was a drought that lasted months; time water supply ran short; flushing of the sewers had to be discontinued, and time sewerage pipes became choked. When, after time epidemic was over, investigation was made, the pipes were found to be broken in all directions; in fact, the whole district of--for the most part--crowded houses, many of them back-to-back with no through ventilation, lay over what was nothing more nor less than a huge cesspit. The outlets for the sewer-gas consisted of street manholes, which belched their poison into time atmosphere. I traced the first case of smallpox in every street to the house nearest to a manhole. Wooden stoppers were made to close them down, but they had to be used sparingly lest the sewer-gas should be driven into the houses. Hundreds of the houses were drawing their water supply from shallow wells, liable to contamination by constant leakage into them from house drains; and the sewage-pipes in numerous instances ran under the floors of the houses from the closets at the back to the street in front. Some of the houses had their w.c.s in the back kitchen. In one street of 114 houses the latter were supplied with water declared by the city surveyor to be contaminated with sewage from its source to its delivery, and as it had not force enough to fill the flushing tanks, the w.c.s were never flushed and always choked, the contents being emptied periodically on to the small garden ground attached.

In some of these tiny houses there were seven, nine, and even twelve cases of smallpox. A sixth part of the whole epidemic occurred in three streets. In one street the sewage entered the cellars of the houses, and the choked-up street sewer had to be opened up in the midst of the epidemic. Nearly half the houses in this street had smallpox cases. Then the epidemic caught on in two disgracefully insanitary and overcrowded, ill-ventilated elementary schools. Forty-five children were struck down suddenly in one of them and 31 in the other. The patients were removed to what was called an isolation hospital. It was *congregation*, not isolation. A woman employed in the early part of the epidemic as solitary night nurse told me that time sight and screaming of these poor children at night as they ran about the wards in delirium so completely unnerved her that she was obliged to leave. They were allowed no water for their fevered skins, time baths were choked with dirty linen, and never used. The little ones were packed three, four, and even five in a bed; vermin was crawling everywhere; no oil was used for the faces, and the poor children scratched themselves till they bled. Of every two taken in to the Stroud Road Hospital one was carried out a corpse; when the mortuary became choked with dead bodies, the bathroom was utilised for this purpose. One child lay for two weeks and two days with her eyes scabbed and not a single drop of water was given to relieve her. When one hospital became full, another one was opened which had been used as a cholera hospital many years before. It was built on stakes in a rough, boggy field; it had no sewerage connections, nor any drainage whatever, and water had to be carried in water-carts over a quarter of a mile of bog to reach it.

The panic became fearful, and a wild, despairing cry went up from the plague-stricken city as the destroying angel sped from house to house in these awful slums. And what was the answer the terror-

stricken inhabitants received from the Guardians of Public Health? Still the same mad reply: "These be thy gods, O Israel!" as they pointed to the vaccine lancets, dripping with their filthy venom; in helplessness and fear they implored the people, in a unanimously signed medical manifesto, to bow down and worship at the shrine.

At last the rain came. It washed the atmosphere, it flushed the sewers and drains; it filled the vacuoles of sewer gas in the sandy soil, and the epidemic died down. The councillors who put up at the next municipal contest were one and all indignantly swept away at the polls by the enraged voters, and anti-vaccinationists took their place; a new sewerage system was laid throughout the whole smallpox district at a cost of some £30,000; 20,000 sanitary defects in the houses were rectified, and no smallpox has occurred since, although nearly 90 per cent, of the population is unvaccinated. But even in that awful epidemic, smallpox picked out the vaccinated for attack; two-thirds of the sufferers had been "protected" by time filthy superstitious rite.

SHEFFIELD AND OTHER CASES

I remember Sheffield and its epidemic in 1887-8. No less than 98 per cent of the population had been vaccinated; it was the best vaccinated town in the kingdom the public vaccinators had reaped a richer harvest of bonuses for "successful vaccination" than those of any other town, and yet they had 7,000 cases of smallpox. It originated and clung to an unsanitary area of 175 acres covered with cesspits--which was called The Croft. The medical profession helplessly cried "vaccinate" and "re-vaccinate"--as if the public had not already had enough of it. At last the flood-gates of heaven were mercifully opened, and the bountiful rains suddenly accomplished what 56,000 vaccinations had failed to effect.

I went to Middlesbrough in the great epidemic of 1898. I visited every smallpox hospital ward, and investigated the conditions of the houses, and their environment, from whence the smallpox came. As everybody knows, the houses at that time had been run up at an enormous rate, much too fast for the sanitary officials to keep pace with them. The part where the smallpox raged was situated chiefly over a swamp where it was difficult to find foundations for the houses; many of them were raised on piles driven through the soil. The only method of house sanitation in all that district was that of pails in the backyards. But whatever else had been neglected, vaccination had been sedulously attended to--the inhabitants were vaccinated up to 98.4 per cent, of the population. Nevertheless the vaccinated and re-vaccinated hospital officials fell before the disease side by side with the vaccinated and re-vaccinated inhabitants. Nine hospital ward-maids, one trained nurse, one medical man and three policemen fell victims to the disease. Outraged Nature laughed outright at the Jennerian fetish and declared in plain and unmistakable language that if smallpox was to be prevented the conditions which caused it must be remedied. Poisoning human bodies with the products of a foul eruption on a cow's udder could only add fuel to the fire by reducing the vital resisting powers of the sufferers.

I call to mind the case of one adult male I interviewed in one of the smallpox hospital wards at that time. He was vaccinated in infancy, had smallpox when eight years old, and was subsequently re-vaccinated three times. That man died of smallpox. I took a particular interest in that case, and was staggered to find when the official report was published that, owing to his having had the eruption so badly as to cover his vaccination marks, he was actually declared to be "unvaccinated"!

I have visited Glasgow in two of its smallpox epidemics. The slums in which they occurred; the overcrowded and unsanitary condition of the tenements told, the same tale as elsewhere. Nothing but sweeping away, the rookeries, where smallpox invariably, takes hold, can ever save those parts of the city from periodical visitations. Space forbids further reminiscences but it is the same story everywhere. Go back to the records of Old London and we find insanitation and smallpox keeping company throughout.

THE LESSON OF THE PUBLIC HEALTH ACT

Before the passing of the Public Health Act of 1875 in this country, every succeeding epidemic of smallpox was worse than its predecessor in spite of more and more compulsory vaccination; but with less and less vaccination and more and more sanitation smallpox has become a comparative curiosity. It is only in unsanitary quarters it can gain a hold. Sir Edwin-Chadwick, the veteran sanitarian, has well said:

Smallpox, typhus, and other fevers occur in common conditions of foul air, stagnant putrefaction, bad house drainage, sewers of deposit, excrement sodden sites, filthy street surfaces, impure water, and overcrowding, and the entire removal of such conditions is the effectual preventive of diseases of those species, whether in ordinary or extraordinary visitations.

When will the medical profession arouse itself to ask the question: "What is the origin of smallpox?" When will a Ministry of Health cease to bring discredit upon itself by the advocacy of a disgusting fetish that has proved, itself a failure as a preventive of the disease in every part of the world in which it has been adopted for the last century and a quarter? When will a British Government that boasts of its progress and civilisation cease to ally itself with a filthy, uncivilised, unscientific practice that has done nothing but spread disease and death amongst the populace for generation and which is opposed to the common-sense views of the majority of thinking men and women in the realm?

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"Dare Doctor's Think?"

**Verbatim Report of the
Great Meeting held at Queen's Hall, London,
Fri, Feb 6, 1925**

In connection with the Rex versus Hadwen manslaughter charge

Dr. HADWEN, on rising to speak, received a great ovation, which lasted some moments. He said: Mr. Chairman and friends--I cannot thank you in words for such a reception as you have given me. In fact, your sympathy throughout the whole of my trial has been such as has supported me when everything else seemed dead against me. I must also thank the vast numbers who wrote me kind letters of sympathy and congratulation, telegrams and cablegrams galore. I tried again and again to reply to them, but the thousands that lay before me took all the heart out of me. I hope a great many here to-night who have written or wired me will accept my very deepest thanks for all their kindness throughout the whole of that period.

I have passed through some strange experiences in the course of a long and chequered life, but I never expected to reach a stage in my career when I should stand as a criminal at the bar of an English Court of Justice to answer the charge of having "feloniously killed and slain" an innocent little patient of 10 years old. (Shame.)

This grave charge rested primarily upon the fact that I had neglected to look for a particular kind of "microscopic bug" (as American scientists call it) which was subsequently found in a swab taken from the child's throat; and secondly, because I had declined to inject into my little patient's body a certain nostrum by the name of antitoxin, which is supposed to scotch the microscopic bug when it has been discovered. (Laughter.)

I viewed this attack upon my treatment of my patient as a gross interference with medical right and liberty (applause), and, as a fully qualified medical man, possessing qualifications and experience at least equal to those possessed by any of the men who were responsible for this persecution, I repudiated this onslaught upon my intelligence and reputation and declined to submit to such unwarrantable dictation. (Hear, hear.)

The whole thing resolved itself into the question as to whether a medical man of the 20th century had a right to think for himself.

The slogan "Dare Doctors Think," which has been displayed upon the London hoardings for the last two or three weeks was not, however, chosen by me. It was chosen by those who, rightly or wrongly, had come to the conclusion that the position in which I found myself recently, namely, that of a prisoner in the dock, with a charge of manslaughter hanging over my head, was not because of anything I had done or of anything I had not done, but was because of the opinions I hold and which I have never hesitated to openly express. (Loud applause.)

It is quite certain that there would have been no trial inasmuch as there would have been no inquest, had I not been so unfortunate as to estrange a fellow practitioner by the exposure I made of the ridiculous

smallpox scare in Gloucester the year before. If I had refused to think for myself, but had, instead, bowed down to the Ministry of Health and had joined in the scaremongering along with 27 other doctors who obliged the Whitehall emissaries by signing a manifesto to the effect that there was smallpox in Gloucester and the only remedy was vaccination, it is quite certain that the death of little Nellie Burnham would have passed unnoticed. I had dared to think and act for myself and that was the brunt of my offence. (Applause.)

This was not the first time I have had to take my stand in the cause of personal liberty. Nor was it the first time that I had been accused of wilfully making a false diagnosis of the illness of a patient to suit my views, but on the first occasion when that happened I was able to clear my character by bringing an action for libel against my medical traducer. On this occasion I was not given the opportunity. I was charged with manslaughter instead. Nearly half a century ago, I was hauled again and again before the Magisterial Bench because I declined to allow my children 's pure blood to be polluted with the loathsome excretion from the sores of a diseased beast. (Cheers.) At that time men were led handcuffed to prison through the public streets, their goods were sold in the public market place to pay the fines inflicted upon them; mothers who had lost their husbands were sent to prison for a month at a time because they dared to protect their children from this wholesale blood-poisonmg: conscience was treated with derision, and no punishment was thought too severe to inflict upon respectable, home loving, thinking men and women--aye, the very salt of the community--by the authorities of the day, who bowed, as they still do, to the medical hierarchy which held sway over the bodies of the people.

We broke down that tyranny. (Applause.) We secured the addition of the Conscientious Objectors' Clause to the Vaccination Acts--that was a compromise--we shall not rest until that indignity to liberty-loving parents is swept away and vaccinated and unvaccinated stand equal before the law. (Renewed applause.) Again and again it has been sought by the bureaucrats of Whitehall and their obsequious public officials throughout the country to reinstate the hydraheaded monster of vaccination in its old place, but the attempt has failed, and now, after my 50 years of struggle against these iniquities and superstitions, I have been forced to appear before an antiquated Coroner's Court, presided over by a young and very cocksure Coroner; then before a Bench of my fellow Magistrates, and, after being informed by a Grand Jury that a true bill of manslaughter was found against me, I had to take my place in the dock as a common felon whilst the best Counsel of the day spent three days in debating whether I ought or ought not to be sent to gaol for exercising a medical man's right to do the best he could for his patient in accordance with his knowledge and experience. (Shame.)

THE PROSECUTION'S SPECIAL PROVIDENCE

The case of the opposition was that my diagnosis and treatment were all wrong. But it is clear that if they were right there must have been the most remarkable combination of circumstances arranged by a special Providence to give them a case against me.

It will be remembered that the doctor who was called in when the child was dying--the very doctor who had used such strong and vulgar language concerning my views on the alleged smallpox epidemic--declared that he found diphtheritic membrane--which is the characteristic sign of diphtheria--stretching right across the throat. It certainly was not there when I examined the throat in the morning, nor was it there when the post-mortem examination took place two days later. But had it been there when this doctor professed to see it, it must have been there during no less than 11 days. This must have been a very special arrangement by a very special Providence acting on behalf of my enemies, for I have never seen, and I doubt if any of the many medical men on this platform to-night have ever seen, a membrane persist for more than six or seven days at the very outside. As a rule, in four days, it has come away bit by bit and all but disappeared.

To say the least of it, it was a rarity of a very exceptional type. (Laughter.)

Next we come to the pneumonia which my little patient had contracted by going downstairs in her bare feet and nightdress and walking over a tiled passage on a line with the street door into the scullery where she stood on a floor of blue bricks and drew some cold water from the tap to assuage her thirst. The doctor

who conducted the post-mortem examination admitted that he found lobar pneumonia, and declared that it was the kind of pneumonia which follows a chill, of "not more than two or three days duration," which coincided with the date when she had so exposed herself, and that it was *not* the kind which arises out of diphtheria. But after he had come in contact with the Home Office Medical Adviser, he weakened upon the point and subsequently discovered that it *could* in *very* rare exceptions follow diphtheria--a rarity of less than one per cent., Sir William Willcox subsequently stated. This was an additional curiosity--a second rarity of a very extraordinary type. (Laughter.) But Sir William Willcox, the special medical adviser of the Home Office, who was out to give me no quarter upon any point or under any circumstances, denied flatly that it was lobar pneumonia--although he had never seen the child, dead or alive. He declared it was *lobular pneumonia*--the kind which arises directly from diphtheria, (for he had to push the *diphtheria* theory for all it was worth, in order to condemn me for neither taking a swab nor giving antitoxin), but instead of the consolidation being in patches as lobular pneumonia should be, he declared it had taken such a severe form that the patches had all run together and the lung had become solid as in the lobar variety. That was a remarkable explanation from a man who had never set eyes on it. "But," said he, "I admit it is *very* rare." (Laughter.)

MORE RARITIES

This was the third startling exception and a rarity such as I have never seen, nor do I believe that any experienced medical man in this hall to-night has ever witnessed it.

But the curious fact existed that the pneumonia was confined to only one lung--which is the characteristic of *lobar pneumonia*--and this undoubtedly considerably nonplussed Sir William Willcox, for in lobular pneumonia *both* lungs are invariably affected. Sir William Willcox, however, was quite ready even for this emergency. In very, *very* rare cases, said he, lobular pneumonia, *might* affect only one lung; even though the attack were as severe as he described, which to any medical man of practical experience would be deemed an utter impossibility. (Hear, hear.)

Did ever you hear, in all the experience of the whole medical profession since the days of Hippocrates, such a marvellous combination of exceptions and rarities gathered together in one little body, all so carefully arranged by Providence for the special purpose of convicting a heterodox medical practitioner of manslaughter? (Laughter.)

It was solely upon this marvellous combination of the greatest rarities and curiosities that the medical witnesses depended for their case against me.

Now this precious membrane, so facetiously referred to by Lt.-Col. Donegan, played the most important part in the trial. My chief opponent declared the mouth was "full of it" when he first examined the throat by the light of an electric lamp about an hour before the little one died, and the question of questions was: what had become of it? My contention was that all he saw was some clotted milk which he had mistaken for membrane, as many a medical man had done before him.

THE SEARCH FOR A MEMBRANE

Still, if there, what had become of it? For the little one was surrounded to the time of its death by friends who declared at the inquest that the child had neither vomited nor choked; nor was it swallowed, for no membrane was found in the stomach.

Mrs. Burnham, the mother, was greatly exercised upon this point, and so were the medical witnesses. And realising, apparently, after the first day of the Coroner's inquest, how necessary it was that that membrane should be discovered, she announced a month later that when she was washing the daughter's clothing after the death, she found it lying among the soap-suds at the bottom of the bath! (Laughter.) It was circular in shape, she averred, all in one solid piece of about three inches in diameter and half-an-inch thick. (Renewed laughter.) And as the prosecution were most serious upon this point, I presume it was believed by them and their medical supporters with the same touching degree of faith that they placed in

antitoxin. (Laughter).

Of all the combined rarities this, perhaps, was the most remarkable of all. It is a great pity that scientific experimentation was not instituted to show its possibility. Sir William Willcox has told us that he dropped poison into a cat's eye in order to prove something in the Crippen case, and we have lately seen in America that in order to ascertain whether a woman had deliberately got into a furnace feet first in order to commit suicide, two live guinea-pigs were thrown by a vivisector into a furnace whilst legal gentlemen stood outside with watches in their hands calmly calculating how long it took before the poor little frantic, screaming, roasting creatures were slowly done to death. It ought not to have been beyond the capability of an expert vivisector like Sir William Willcox to have devised some great scientific experiment by which to check this comical story of membrane in the bath. (Hear, hear.)

But the doctor who conducted the post-mortem examination had his own theory about that precious membrane. *He* found it--a piece three inches by one--on the top of the lung! so that, putting the two samples together, there must have been a rare collection of it in that small throat, such as defied the accounts of all time. The quantity was more suited to the throat of an elephant. (Laughter.) He thought it must have slipped down from the throat just before the child died. But this again would have to be a rarity such as is unheard of in medical history. Who ever heard of a diphtheritic membrane either vomited in one huge piece or slipping down the windpipe like a bear down a greasy pole?

This wonderful membrane was described by the mother on different occasions as looking like "a piece of tissue paper"; like "a yellow sponge," and like "a piece of India-rubber about half-an-inch thick," and all the medical witnesses for the prosecution listened open-mouthed without a smile upon their faces! (Laughter.)

You will thus see that the special Providence of the prosecution had arranged for them the most marvellous combination of rarities in one little body that had ever entered into the mind of man to conceive. The jury, however, who, fortunately, were not men and women of science, arrived at the commonsense conclusion that although mine was only one solitary voice against 12, my diagnosis of a simple sore throat, followed by pneumonia contracted through a chill, was much more reasonable than an aggregation of miracles and impossibilities. (Applause.)

I have been told that medical men are amazed at the boldness with which I enunciated my views at the trial. It was evident that the Judge himself was greatly astonished at my not following the fads of the hour. He looked upon me as very old-fashioned and asked me if I were not prepared to progress with the times. (Laughter.) I told him I was, but that I looked upon Pasteurism and all its superstitions as a retrograde movement--it was like the go-aheadism of the lobster, a progression backwards. (Laughter and loud applause.) It is the old-fashioned medical man who believes in Jenner and vaccination and the outcome of all the legendary nonsense represented by vaccines and serums and inoculations of every description. (Hear, hear.) I once believed in Jenner; I once believed in Pasteur. I believed in vaccination. I believed in vivisection. But I changed my views as the result of hard thinking. (Hear, hear.) I belong to the new fashion and not to the old, antiquated fashion of my medical opponents. (Laughter.)

Why is it that medical men for the most part follow the fashion of the day? Is it that they dare not think?

Are they like Sidney Smith's old lady who said she never read the other side of a subject in case she might be prejudiced? I know one of the most eminent medical men of the present day, perhaps *the* most eminent medical man in his particular line, who, after he became converted to anti-vaccination, was unable to fill a lecture hall. Students were not encouraged to go and hear him. A man is eminent as long as he is orthodox. When he begins to think for himself he becomes a crank. (hear, hear, and laughter.) The only way to remedy this state of things is to have more cranks, so that the man who is boycotted and persecuted shall not have to plough a lonely furrow. (Applause.)

It might be supposed that the very unscientific nature of modern medical treatment would have been sufficient to open the eyes of tile understanding to its folly.

First look at the method. Today, the whole scheme is inoculation for everything. I say that *that* in itself

is unscientific. Nature has given us a covering of skin for the protection of the body, whose organs are vested with the power of excretion only. The skin as a whole is the largest excretory organ of the body, in which are situated millions of excretory glands for the purpose of carrying off the waste material of the system: the thought of its being a receptive organ is opposed entirely to the character of its structure. The modern system does violence to Nature 's law and teaching; it ignores the only aperture which Nature has provided for the entrance of solids or liquids into the system; it ignores the only numerous and complicated workshops ranged in association with the alimentary canal, placed there to prepare everything that enters by the mouth for assimilation and absorption, and deliberately punctures this protecting organ and forces drugs--many of them of the most filthy description--directly into the life blood, the results of which cannot possibly be gauged. Frequently, it ends in sudden death. Even the injection of plain water by this unscientific method has proved fatal. In its very inception the system of inoculation by the skin is unscientific and false. (Cheers.) If medical men would only think for five minutes as to this *method* of inoculation, the whole system would be condemned and ended. (Hear, hear.)

Then as to what is injected: Perhaps one of the most amusing episodes in the whole trial was when the Judge asked Sir William Willcox: "Tell me, what is antitoxin?" The look of surprise on his Lordship's face was a study as Sir William Willcox unfolded the weird romance. "It is made," he said, "by inoculating a horse." His Lordship put down his pen and turned full round to look into the face of the doughty knight, and repeated in astonishment and almost awe, "Into a horse!" (Laughter.) "Yes, my lord," proceeded Sir William jauntily, "by inoculating a horse with the poison of diphtheria; and by so doing the horse develops protection, and after the horse has been protected by several doses of the poison, the horse's blood is taken." Again his Lordship stopped writing and turned round and seemed to mutter "horse's blood!" (Laughter.) But Sir William unconcernedly proceeded, "and the serum--a straw-coloured, clear liquid, separates, and it is that serum which is the antitoxin, and it is that which is injected into the patient suffering from diphtheria." The judge looked from counsel to counsel in almost bewilderment! (Laughter.) He must have fancied himself back in Shakespeare's day, looking in wonderment at the witches' cauldron. (Renewed laughter.) As I described it to his Lordship afterwards, it is "poisoned horse blood"--poisoned by the injection of so-called diphtheria germs.

The medical man does not think--he dare not--or he would see at a glance the superstition wrapped up in all this unscientific absurdity. (Cheers.)

THE COMMERCIAL PUSH BEHIND

It is the great commercial manufacturing firms who are providing the brains for the medical man of to-day. (Applause and laughter.) We are deluged with circulars of ready-made medicines for every ailment under the sun. There never was a day when a medical man had less need for the use of his brains than he has at the present time. The commercial firms do all the thinking for him. (Hear, hear.) With a pocket syringe and a case of concentrated tabloids he can go forth a veritable medical Don Quixote to do battle with every imaginary foe. (Laughter.)

I said "imaginary," for what are the foes to-day? In the old days medical men fought against conditions of disease, to-day the fight is against germs--"a germ is a disease and a disease is a germ." What was all the fight at my trial about? As to whether my little patient had diphtheria. She never had a solitary sign of diphtheria from first to last, but they found the germ--and that was sufficient to charge a man with manslaughter although this germ can be found in healthy throats, in every kind of sore throat and in lifeless objects.

The modern germ theory of disease, upon which the charge against me was based, was formulated by M. Pasteur, a French chemist. It was an evolution of the folklore of the Gloucestershire dairy-maids which was popularized by Edward Jenner. This in turn was the outcome of the weird practice of inoculation common among Turkish peasants a couple of centuries ago--a practice which had itself been derived from a Hindu smallpox superstition which goes back to the misty era of past ages when invisible devils and hobgoblins and wrathful gods and goddesses or witches and the "evil eye" were supposed to be the originators of every human disease. The germ theory is the most old-fashioned tradition of the heathen world. (applause and laughter.)

This craze for finding the germ origin of every disease is well illustrated in the case of swine fever. Its origin has been attributed to no less than 15 germs in succession, every one of them proved scientifically to be the real, genuine thing, and now science has reached the conclusion that none of these alleged germs is genuine, but that the real one must be a filter-passer, which the most powerful microscope in the world cannot discover, and therefore, one which nobody has ever seen or is ever likely to see. (Laughter.) Science declines to consider the common-sense fact that with wholesome pigstyes and a sanitary environment swine fever cannot get a look in. (Applause.)

THE ANTI-VIVISECTION VIEW

This is known as the anti-vivisectionist point of view. All these inoculation treatments are based upon the most cruel experiments on animals, and necessitate whole menageries of animals kept for the purpose of testing them. We object to the cruelty that is involved, but we can also prove that out of it comes no good to mankind, but harm. Anti-vivisection is not only love for animals--it is a sane and rational system, a belief in all that is good in medicine and surgery but a disbelief in modern fads which arise in the vivisection laboratory and do not fit the facts observed at the bedside of human patients. (Hear, hear.)

This is the anti-vivisection that is growing so rapidly that it has inspired fear among our medical rulers, so that at a recent Congress in Ottawa, British and Canadian medical men were urged to combine to "fight anti-vivisection." They began by fighting me and they were beaten. (Loud cheers.) They are now after a parent in Canada who would not allow antitoxin to be used on his child, because he knew of several deaths that had been caused by it, and I understand *he* is charged with manslaughter; and it is a remarkable coincidence that a town in Alaska which nobody can get at except by dog sledges, and from which any scare can therefore be started with absolute impunity, is said to be in danger of extinction from diphtheria--an unheard of thing!--and the solitary medical man there, instead of thinking, and treating his patients naturally, is frantically calling for antitoxin by aeroplane! (Laughter.) I don't believe a word of it. I have travelled across America from the Atlantic to the Pacific twice over, and I know how largely the American Press is in the hands of the serum manufacturers. It is only a newspaper stunt.

WHAT A DOCTOR MAY DARE

The medical profession during my trial was divided into two camps. The one desired me to be convicted because I was a nuisance, and the other was terrified lest I *should* be convicted, for they realised that my conviction would mean an end to medical liberty. When the verdict of the jury was known, the majority rejoiced; but the minority held up its hands in pious horror, and cried, "Good heavens! why, the verdict means that any doctor will be able to do as he likes!" (Laughter.) The only other part of the world where I found that sentiment expressed was in an editorial article on my trial published by an advanced editor in a Chinese newspaper. (Renewed laughter.)

Sir William Willcox actually went so far as to declare that a man who doesn't believe in a certain treatment ought to give his patients the chance of it by recommending them to somebody more orthodox than himself.

Have you hear such sublime logic? and to emanate too from the lips of the medical adviser to the Home Office! a man is expected to do despite to dictates of his own conscience in order to comply with time current fashion of the time.

But my opponents do not fight fair; they don't play the game. Right the way through I have had to contend with every form of misrepresentation by unscrupulous opponents. Most of you have no doubt seen that since the trial I have been obliged to compel one medical man to publish a public apology for declaring that I had been surreptitiously vaccinated by another medical man during the smallpox scare. It took me years to run that widely circulated libel to earth. The stupidity of the libel is apparent, for had I wished to protect myself in this silly manner I should hardly go to an enemy to do it for me. I should have vaccinated myself. (Laughter and cheers.) Another medical man remarked to a medical friend who is on this platform to-night: "Of course, it is Hadwen's living"; I had an anonymous postcard some three or four

weeks ago, in which a medical man wrote, "You old humbug, you know you get fifteen hundred a year from the Anti-vaccination League for what you do." Fancy the poor Anti-vaccination League offering me fifteen hundred a year! (Laughter.) Let me at once say, that it has always been the proudest boast of my life that I have fought my battles without ever having put a single halfpenny of pay or reward of any kind into my pocket. (Loud applause.) The Societies' I work for are rich in loyalty, sterling in their zeal and earnestness, proud in their ideals, but poor in their funds. But even were they wealthy I should still feel it the greatest honour to say with the Apostle Paul: "These hands have ministered unto my necessities and I would not be beholden unto any of you." (Renewed applause.)

When I went into this recent light for the maintenance of personal and medical liberty to maintain time right to think and act for myself, I knew that it meant months of anxiety and strain and a cost of some thousands of pounds, which I should probably have to bear alone.

Your sympathy and loyalty helped me in the strain, your marvellous liberality freed me entirely of the burden of cost. I am still your unpaid servant, and the memory of your love will be my reward for all that I may yet hope to do in the field that lies before me. (Continued applause.)

Our battle against wrong, our struggle for liberty both for ourselves and others is a battle of sacrifice and unselfishness against the most selfish of creeds in Christendom. Our claim is that right is greater than might; that time work of evil cannot be the foundation of good; that the defenceless and the weak must not be exploited by the strong, and even though we may be few against the many, nevertheless, as James Russell Lowell wrote :--

"They are slaves who will not choose
Hatred, scoffing and abuse,
Rather than in silence shrink
From the truth they needs must think.
They are slaves who dare not be
In the right with two or three."

As the speaker resumed his seat there was prolonged applause, the audience rising and giving loud cheers, followed by the singing of "For he 's a jolly good fellow" and further cheers. The Chairman thanked the several speakers and Dr. Gertrude Best for her beautiful rendering on the organ, and the meeting closed.

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