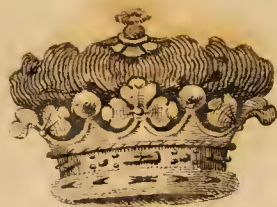




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WHITE CAPTAIN WILLIAM



*Conyngham.*

112





The Marquis of Cunningham  
with the Authors most  
respectful Obedience.



THE EVILS  
OF  
QUARANTINE LAWS,  
AND  
NON-EXISTENCE  
OF  
PESTILENTIAL CONTAGION;  
THE PRIVY COUNCIL,  
AND  
COLLEGE OF PHYSICIANS;  
THE  
MEANS OF PREVENTION AND METHOD OF CURE  
OF  
THE CHOLERA MORBUS,  
AND THE  
ATROCITIES OF THE CHOLERA PANIC.

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*Magna est veritas et prevalebit.*

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BY CAPTAIN WHITE,  
LATE H.E.I.C. SERVICE.

LONDON:

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1837.

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# DEDICATION.

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TO HER MOST EXCELLENT MAJESTY,

VICTORIA THE FIRST, QUEEN OF GREAT BRITAIN,

&c. &c. &c.

MOST HONOURED MADAM,

CIRCUMSTANCES and occasions will arise to justify subjects dedicating their labours to their Sovereign. Instances may occur in which it would almost be criminal not to do so. It is the only way of respectfully drawing the attention of the Crown to any particular subject which otherwise might be lost. The facts which the following pages unfold, and the vast importance of the subject on which they treat, are of that nature, I humbly submit, to crave your Majesty's most serious consideration, if not to require your commands to your Ministers thereon.

During a period of six years I have in vain, respectfully, endeavoured to draw the attention of three successive Prime Ministers of the Crown of England, viz., Lord Grey, Sir Robert Peel, and Lord Melbourne,



to a subject which not only deeply affects the social welfare and the commerce of these kingdoms, but the best interests, nay, the lives, the property, the welfare of the inhabitable parts of the whole world ; viz., the Evils of Quarantine Laws.

While Ministers are chiefly directing their attention as to how and by what means they shall retain their places and preserve their power, thousands and tens of thousands of human beings, through their neglect, are hourly being consigned to premature graves, under circumstances the most horrid and appalling. Millions upon millions of the human race have already been swept away the victims to a barbarous system of laws, the iniquitous effects of prejudice and ignorance.

Ere your Majesty will have closed these pages it will be perceived, that you have it now in your power to do more for the preservation of life and property throughout the world than any Monarch ever yet ventured to do ; the consequence of which would be, that the whole of the human race would never cease to offer up their most fervent prayers to Heaven for your health and prosperity. If your Majesty should have resolution enough to burst asunder the bonds of the barbarous and inhuman quarantine laws, as now supported by this nation, to the great detriment and incomprehensible injury of the whole of the world, you will indeed accomplish one of the most important of achievements.

The subject will have additional interest with your Majesty from the fact, that it is to your late most noble, most philanthropic, and Royal Father, the world is now indebted for the valuable light which

has been thrown upon this interesting and most important question.

When the Ministers of his Majesty George III. had treated with neglect and indifference Dr. Maclean's invaluable services in the cause of civilisation and humanity, and the Duke of Portland had refused to afford him the "facilities necessary to prosecute his important inquiries," to ascertain the nature of the plague, and the validity of the doctrine of pestilential contagion, the Doctor says, "Fortunately, I did not dismiss the subject *for ever* ; but after a lapse of years, by the patronage of his late Royal Highness the Duke of Kent, and of Lord Grenville and the Levant Company, having been enabled experimentally to examine the plague in Turkey, to have since that period succeeded in bringing the investigation of epidemic diseases, generally, to such a state of maturity, that the doctrines in question *must*, in defiance of the prejudices by which their reception is still opposed, in no long time (discussion remaining free), be every where officially acknowledged and applied."

The means of prevention and the method of cure for the Cholera Morbus, that most awful of visitations of Providence, are also subjects well deserving of your Majesty's utmost solicitude ; not only as regards the possible afflictions which your own subjects may thereby escape from, but as regards the rest of the world.

The public, Madam, are sensible of the intense anxiety with which your Majesty seeks to discharge the various and important functions of the Royal prerogative, and the great solicitude with which you watch over the interests of your subjects, in every



department of the State. To aid and assist your Majesty to accomplish these desirable ends, with as much ease and convenience as possible, every class of the community most heartily unite with heart and hand, by every means in their power.

Knowledge is power. No species, therefore, of information, on any question of State policy, should be withheld from your Majesty. On the contrary, it should be considered, as it positively is, the duty of the subject to place all important facts in such a convenient form as that they may meet your Royal eye in a manner least obtrusive, to enable your Majesty to give them a deliberate consideration, exercise your own superior judgment, and afford to your subjects the benefits of the decision of an enlightened understanding and a liberal mind.

With the most humble and dutiful submission,

I have the honour to be

Your Majesty's

Dutiful Servant,

W. WHITE.

*London, October, 1837.*



## PREFACE.

ONE of the greatest evils to which the British public are exposed, and which frequently involves the interests of other States, is the manner in which some of the leading journals occasionally take up, or neglect, subjects. Their zeal oftentimes lead them into great errors on some questions ; their inactivity at other times produces mischief. The greater part of the calamities which befel this Nation, during the cholera panic, in 1832, and which subsequently occurred in many parts of Europe, originated in the injudicious and rash manner in which some of the daily journals, from day to day, in leading articles or letters from correspondents, circulated the most erroneous of opinions. When they saw their error, instead of allowing it to be corrected, they acknowledged their incapacity to discuss the subject, and therefore declared that they “ *must leave it in the hands of the Doctors.*” The Doctors, that is the Board of Health, were as ignorant as themselves upon the question. The consequences were, poor John Bull, between two stools, soon found himself on the ground. Some of the leading journals, like the “ Chieftains” of the Royal College of Physicians, having once committed an error, would strenuously adhere to it, although “ *the whole of the human race should perish.*” \*

It is now nearly three weeks since I sent to the London daily journals, from page 33 to 64 of this work, on the means of prevention and method of cure of the Cholera Morbus, as also a copy of my treatise on cholera (second edition), to which is added upwards of 90 quotations from all the princi-

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\* “ For months the pestilence raged at Sunderland, Newcastle, and their neighbourhood in England ; and in Haddington, Tranent, and Musselburgh, in Scotland, without recourse being had to any measures which deserve mention ; but the instant that a few cases appear in the great centre of opulence, all is panic ; assessments and additional powers are proposed in Parliament ; national grants of money recommended ; and every thing conceded to the terror of the metropolis, and to the apprehension of popular displeasure, which prudence and forethought, and the application of many intelligent members of the profession, and others, as well as extreme suffering and poverty, had long called for in vain.”—*Edinburgh Surgical and Medical Journal.*

pal medical writers upon the question, illustrative of the correctness of my previous opinions. Not one of the daily journals have noticed the important subject notwithstanding thousands of human beings were at that time, in different parts of the continent, being daily carried off with the disease. Whether the London press, by their silence, have on this occasion done their duty, it is not for me to decide; the readers of this work will judge for themselves. As far as I am personally concerned, it was a matter of perfect indifference to me; but not so with reference to the countless millions of people to whom it might have served. Under these circumstances I felt that the interest of the world in this great question should not be left to its chance of success to the British Government alone, still less the London daily press,—therefore, I addressed the following “*Circular to the Ambassadors of Foreign Powers at the Court of St. James’s* ;” and now submit my labours to the world at large, respectfully entreating for a liberal indulgence for the many errors I am aware the work contains :—

“Permit me to have the honour to forward to Your Excellency the accompanying copy of my work on the evils of Quarantine Laws, and the non-existence of Pestilential Contagion. As well also a little treatise on the means of prevention and method of cure for the Cholera Morbus; and which Professor Lizars, of the Royal College of Surgeons of Edinburgh (p. 33), declares, ‘is by far the most valuable little tract that has yet appeared upon the subject, and not only deserves the attention of the public, but, from the many important facts therein stated, will be found very useful even to the Medical Practitioner.’

“The immense and vast importance of these subjects to every nation on the face of the earth, particularly those of Europe, has induced me to believe that a copy of the work, before it is published, will be acceptable to Your Excellency.

“In forwarding the document containing the important and irresistible truths which it does, I am induced to hope that after examination Your Excellency will consider the subject as one deserving of your consideration, and of sufficient importance to introduce to the attention of the Sovereign whom you have the honour to represent at the Court of St. James’s. Indeed, as the work appears to be calculated to render such important services to States, and to mankind at large, if Your Excellency should think it might become desirable that it was translated into the language of the State, I shall be most happy, if you will allow me to have the honour,



to forward to you another copy of the work for that purpose.

“The sole object which has engaged so much of my time for years, and entailed no inconsiderable expense first and last, has been the cause of humanity; and my feeble endeavours, without personal consideration, have been exclusively directed to promote what I consider to be the welfare and safety of the whole of the human race. The same consideration now impels me to obtrude the result of my humble labours upon the notice of the different Ambassadors of Foreign Powers at the Court of St. James’s; with an earnest and sanguine hope that in so purely a philanthropic cause, they will condescend to lose no time in seconding, as far as may appear to be practicable, consistent with the views which they may take on the question, those endeavours.

“If the work, which I have now the honour to submit for the consideration of Your Excellency, does not at once get the better of the vulgar prejudice of ages, and subvert the silly popular faith in the doctrine of pestilential contagion, with Governments as well as mankind, there appears to me to be but one step more required for the accomplishment of it. It is, that the different Governments of Europe should countenance a Council composed of three or four eminent scientific Physicians who are not prejudiced, selected from different nations, who should repair to the spot wherever pestilential contagion was supposed to prevail, and that there they should combine with the most eminent Native Physicians and Philosophers to investigate as closely as possible the real causes of the epidemic, afford a clear report thereon from time to time to the different Governments of Europe, and also express their opinions on the doctrine of pestilential contagion.

“Of the good results of such an enterprise a memorable instance will be found, the only one upon record, in the case of the free Junta of fifteen Physicians at Barcelona in 1822, as particularised at p. 118 of the work, when their Report, and the debates which it produced, caused the Spanish Cortes in 1822 to reject a code of sanitary laws which had been for years in careful preparation successively, by a Commission of the Government and two Committees of public health of the Cortes.

“The presence of such a commission at the time of an epidemic would be eminently useful, by their services and example in dispelling fear, the causes of nine-tenths of the deaths which take place.

“If such a course should meet with the approbation of



your Government, and my humble services be considered available to conduct such a commission, I should be most happy to unite myself in the undertaking.

“Should Your Excellency be pleased to condescend to consider and approve of the propriety and utility of the proposition made, and feel disposed to recommend it to the notice of Your Sovereign, I shall be very proud to be honoured with any commands it may be thought proper to make upon the subject.

“I have the honour to be,

“With the utmost respect,

“Your most obedient and very humble servant,

“W. WHITE.”

# CONTENTS.

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## SECTION I.

Continued ravages of cholera.—Letter to Sir Robert Peel on the means of prevention and method of cure ; the evils of Quarantine Laws, and the atrocities committed during the cholera panic.—Sir Robert Peel's reply.—Conduct of the Central Board of Health : the horrors, cruelty, and deaths they occasioned.—Letter to Lord Melbourne, urging for a Committee of Inquiry into the abuses committed during the cholera panic, and the validity of the doctrine of pestilential contagion.—Lord Melbourne's reply.—Burying people alive ; and poisoning them —Drunken medical men.—Bonquet at a grave-digger's ; and horrid scene at Naples.—Disregard of the Central Board of Health of all advice.—The indifference of his Majesty's Government in 1831 on the subject.—Absurd mission of Doctors Barry and Russell to Riga.—Terror and alarm created by the proclamations of the Board of Health.

## SECTION II.

The means of prevention and method of cure of the cholera morbus.—Review of Captain White's Treatise on Cholera by Professor Lizars.—Letter of Professor Lizars to Captain White.—Calomel recommended in 1831, to the Board of Health as the means of prevention and method of cure in cholera and rejected by the Board.—The injury the world at large has in consequence sustained.—The President of the College of Physicians and Captain White.—Present opinion of medical men of the vast importance of calomel in cholera, as the only means of prevention or method of cure.—Seat of the essential morbid affections of cholera.—Digestive organs the principal seat of the disease.—Action of the atmosphere upon the nervous system.—Premonitory symptoms.—The state of the blood after death.—Absurd proclamation of the Board of Health's "advice to families."—Audacious empiricism.—Select Committee of the House of Commons to inquire into the advantage of calomel in the Milbank Penitentiary dysentery and fever ; differences of opinion of medical men, and decision of the College of Physicians.—Disputes in India with medical men as to the treatment of cholera ; and court-martial on Doctor Peers.

## SECTION III.

The evils of Quarantine Laws, and non-existence of pestilential contagion.—Awful mortality in 1837 by cholera.—Serious responsibility of Sir Robert Peel and Lord Melbourne.—The non-existence of pestilential contagion demonstrated by facts, and the opinions of eminent medical authorities.—Incompetency of the College of Physicians as judges.—Not a medical question.—Contradictions of physicians.—Inconsistencies of medical men.—Quarantine at Marseilles of the French Government steam ship Leonidas, in July, August, and September, 1837, with the plague on board.—Plague in India.—Ignorance of the true causes of pestilence.—The French army in Syria, and Napoleon's opinion of the plague.—Proclamation at Genoa relative to Quarantine Laws; horrors and iniquities they occasion.—The College of Physicians their supporters.—Drs. Pym and Barry.—Sir Gilbert Blane and Sir James Macgregor.—Diet of a contagionist doctor.—Lectures of Sir Henry Hallford after dinner.—Origin of Quarantine Laws —Barcelona manifesto of fifteen physicians on pestilential contagion.

## SECTION IV.

Dr. Maclean, the Privy Council, and the Royal College of Physicians, on the plague of the Levant.—Report of the College of Physicians on Dr. Maclean's work on the plague.—Report of the Select Committee of the House of Commons in 1819 on the validity of the doctrine of contagion in the plague.—Letters of the Privy Council to the College of Physicians, and their answers.—Refutation by Dr. Maclean of the Report of the College of Physicians, on the Report of the Select Committee of the House of Commons.—Dr. Maclean's advice to statesmen and legislators.—The enormous injury Quarantine Laws inflict upon commerce and the shipping interests; recent abominable case at Falmouth.—The necessity for the immediate abolition of the Quarantine Laws.



THE  
EVILS OF QUARANTINE LAWS,  
AND  
NON-EXISTENCE OF PESTILENTIAL CONTAGION,  
&c. &c.

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THE continuation in different parts of Europe, as well as in Asia, of that terrific scourge to the human race the cholera morbus, and the evils arising from the application of Quarantine Laws for the prevention and suppression of it, are subjects of deep importance to every nation. The terrific accounts which we have for some time past been reading daily in the newspapers of the ravages which the disease has lately been committing, in Malta, at Naples, at Palermo, at Rome, Prague, Berlin, &c.; and the horrid results attending the continuation of the enforcement of the inhuman Quarantine Laws, for the professed object of confining or the impeding of its progress, under the supposition that it is contagious and infectious, renders the subject at the present moment one of no little importance to the whole of the population of the inhabitable globe.

In the year 1831, Lord Grey's government formally recognised the doctrine of pestilential contagion in epidemic diseases, in the cholera; and accordingly placed the lives and liberties of all his late Majesty's subjects in these kingdoms under the surveillance of the College of Physicians, designated a "*Board of Health*;" but which might with more propriety, from the evils and calamities they produced, have been appropriately termed the "*BOARD OF DEATH*."

The measures recommended to be pursued by that Board of Health, before the cholera had even reached England, created the utmost alarm, and terror prevailed throughout the land. The calamity, misery, and affliction which it consequently occasioned, when the disease broke out, far surpassed any calamity the nation had ever witnessed ; for the ravages it committed far exceeded that of even the plague in 1603 or 1625.

Having had considerable experience in the cholera in India, previous to the epidemic reaching England I endeavoured to warn the Board of Health of the consequences which were likely to ensue from the line of conduct they were pursuing. I also endeavoured to awaken the attention of the Government to the same, by a letter to Lord Grey ; but to no avail. After an elapse of four years, I had the honour to address Sir Robert Peel the following letter :—

“ Edinburgh, December 30, 1834.

“ Sir,—I beg leave to have the honour to draw your attention to a subject or two of great importance to the nation, and the universe at large ; viz.—

“ 1st. The means of prevention for the cholera morbus.

“ 2nd. The enormous abuses which took place during the cholera panic.

“ 3d. The abolishing, or, at least, ameliorating, the present pernicious and impolitic quarantine laws.

“ FIRST, THE MEANS OF PREVENTION.

“ Previous to the cholera having made its appearance in England I submitted to the notice of the Board of Health what appeared to me to be the only means of prevention for that, theretofore, fatal and destructive disease. I felt myself justified, upon many grounds, for doing so. The absence of any remedy being suggested by any medical man, the extensive experience I had had of the disease in India, the



medical education I had received, and the opinions of the different medical authors whom I had consulted, all tending to prove the vast importance of calomel in the disease.

“Unfortunately for the cause of humanity, and the country at large, the Board of Health, as I was ‘*not a medical man*,’ did not think it proper to listen to my experience, or to attend to my suggestions, notwithstanding the urgent and all-important nature of the subject.

“Considering the Board of Health a public body, bound to receive with courtesy, and duly to investigate whatever information might be offered to them by persons who had had practical experience in the disease, I thought that when they rejected my testimony, it was my duty to address Lord Grey, then his Majesty’s First Minister, stating the fact, and requesting to know whether his Majesty’s Ministers approved of the Board of Health rejecting, at such a crisis, important practical testimony and information upon a subject it was notorious that with the exception of one individual, not any of the members had ever seen the disease. I also took the liberty to point out to his Lordship, in the most unequivocal terms, the dreadful consequences which would necessarily follow a continuance of such a line of proceeding.

“This appeal, however, to his Majesty’s Reforming Prime Minister, was treated with so much indifference as to be considered as unworthy even of notice. It followed that the miseries and affliction of the people, at a most awful crisis, were all but converted into a series of shameful jobs ; and attended with the most appalling consequences.

“The melancholy experience of several years of great affliction in many parts of Europe, and the loss of upwards of sixty thousand lives in Great Britain, has at last proved the vast importance of the suggestions which I submitted to the consideration of the Board of Health. It is now clearly proved by the

testimony of almost all the medical men in the world, that much of the loss of life, misery, and affliction, might have been avoided by proper consideration and attention on the part of the Board of Health, acting under the immediate attention, and direct authority, of his Majesty's Ministers.

Herewith I have the honour to forward to you a second edition of a little pamphlet which was published immediately after the Board of Health had refused to receive my testimony. The most essential parts of it had previously been transmitted to them in manuscript. The present edition has in addition, a preface, addenda, and numerous notes and quotations from all the principal writers on the subject. The cause of humanity induced me to bestow the utmost attention upon every work that had been published upon the disease, which I could place my hands upon. The labour was intense, but I was anxious to arrive at a just conclusion, and strengthened by the quotations of the opinions of the best informed and most eminent medical practitioners, give weight to the work; and thereby ensure it that consideration which the importance of the subject demanded, but which otherwise it might not obtain.

The means of prevention, as originally recommended by me to the Board of Health, will be found at page 25. At the third paragraph of the preface will be perceived the vast importance of them. At page 27 in the Addenda reasons will appear why that little tract is now well deserving of his Majesty's Ministers' most serious attention.

There can be no question but that the disease has become endemic, and that, as in India so in Europe, we shall have it again and again, with more or less virulence. It is therefore most important that his Majesty's Ministers should adopt the most effectual measures to guard the public against its sudden and fatal consequences.

While writing this letter, my attention has been



drawn to a review of the pamphlet in a newspaper, the *Edinburgh Patriot*, and which appears to be so important and conclusive as to its merits, I cannot refrain transmitting a copy herewith. Upon inquiry from the editor I find that the review comes from the pen of one of the most eminent medical men in Edinburgh, Professor Lizars ; and this is confirmed by a letter, herewith enclosed, from Professor Lizars himself, in reply to a note from me.

The reviewer, as will be seen, declares it to be “ *by far the most valuable little tract that has yet appeared on the subject, and not only deserves the attention of the public, but, from the many important facts therein stated, will be found very useful to the medical practitioner.*”

SECONDLY, THE ABUSES THAT WERE PRACTISED  
DURING THE CHOLERA MANIA.

On this head I would beg leave to draw your attention to pages 33 and 34 of the pamphlet, for a slight glance of some of the general abuses that are well known to have prevailed at the time. I must, however, here distinctly state that facts of a most serious and atrocious nature have come to my knowledge which appear to me to be improper to publish without further investigation.

From the inquiries I have been enabled to make at Musselburgh, and which are confirmed by some of the most respectable medical men in Edinburgh, the history of no country in the world, at no period, affords so revolting and disgusting a picture of depravity and inhumanity as the scenes which took place at Musselburgh, Dunbar, and Haddington, during the cholera panic. They are, in short, unparalleled for cruelty, barbarity, and infamy. Through fear, gross ignorance, or something worse, all the bonds of civilised life were torn asunder; the sick and dying were treated *worse than dogs*.

It can be proved that in hundreds of cases the houses of his Majesty's subjects were, by public authority, gutted of their furniture and goods, which were burnt in the street, stated to be for the benefit of the public, without any indemnification whatever being made for them: that there are very strong grounds for believing that many persons were buried alive: that there are now alive, some of whom I have seen, persons who had been ordered to be buried: that there is strong grounds to believe that in many cases very *improper medicines* were administered: that it can be proved that in some places the hired medical men, employed and sent by authority, and living at taverns, were generally so drunk as to be unable to attend to their professional duties: that the hired ruffians employed to carry the sick and dying were allowed so much liquor as that they were often so drunk as to let fall and roll the dying patient into the street: that those who were employed to bury the dead have been seen fighting in a cart while sitting upon the coffin of a corpse.

I submit, sir, that these are facts of an astounding nature to have happened under the *Reform* Government of Lord Grey. I submit, sir, that evidence ought to be taken of these facts, and laid before his Majesty's present Ministers, for them to determine what steps ought to be pursued relative to the past, as well also to prevent a possibility of a repetition hereafter.

The inquiry should be made at Musselburgh, Dunbar, Paisley, Edinburgh, Shields, Sunderland, Haddington, and Newcastle.

If it is considered desirable, I shall be happy to assist in collecting the facts, or even to take upon myself the whole trouble and responsibility of collecting them, and then of submitting them to his Majesty's Ministers, with such a report as may appear necessary after further inquiry.



## THIRDLY, THE QUARANTINE LAWS.

The result of these inquiries I have now suggested will, I am convinced, produce a mass of evidence of so formidable and conclusive a nature, as will for ever set at rest the silly and pernicious doctrine of contagion; and will afford ample materials to enable his Majesty's Ministers to ameliorate, if not altogether to abolish, the present obnoxious and destructive Quarantine Laws; for it must be particularly remembered, that by the College of Physicians, the cholera was declared to be far more contagious than any other disease. This is evidenced by the proclamations that were issued, by the rules and regulations established, and by the decrees of the Board of Health, as fully exemplified at page 33 of the pamphlet.

I have the honour to be, Sir,

Your most obedient servant,

W. WHITE.

It will readily be perceived the vast importance of the subjects submitted in this letter to the consideration of Sir Robert Peel. It will be anticipated that Sir Robert at once took a profound and statesman-like view of the subject, and answered it accordingly. Let us now see what his reply was:—

“Downing-street, January 4, 1835.

“Sir,—I beg leave to acknowledge the receipt of your letter of the 30th of December, and its enclosures.

“I must decline sanctioning such an inquiry as that which you suggest (and of which I do not at present see the advantage), unless it be recommended to me by the proper official authorities.

“I am, sir, your most obedient servant,

“W. White, Esq.”

“ROBERT PEELE.”

This reply of Sir Robert Peel is any thing but what might have been expected from a statesman. The “*proper official authorities*” from whom Sir Robert Peel requires a “*recommendation*” before he would



“*sanction an inquiry*,” the termination of which would do more to promote the welfare of the human race, the prosperity of commerce, and the interests of communities than any other, are the very authors of the evils complained of, the Royal College of Physicians; who, most pertinaciously, in defiance of experience and reason, support those vile, inhuman, and infamous Quarantine Laws—laws originating in ages of barbarism, the offspring of gross ignorance, and which time, that destroys all things, has not yet been able to rectify. While the nation is busily employed in reforming all other antiquated laws, abuses, and institutions, through the influence of a blind and miserable routine, a matter of such paramount interest to nations is to stand still until such time as that hydra of medical science reforms itself.

It will be observed that Sir Robert Peel in his reply confines himself to the simple question of appointing the inquiry recommended. He takes no notice whatsoever of the highly important subject recommended to his attention, “*the means of prevention and method of cure for the cholera morbus*”—a subject of vital interest to the whole of the human race.

The conduct of the British Government on this subject forms a strange contrast with that of the Emperor of the North—the barbarian, the half-civilized savage, as he is sometimes honoured with being called. This uncivilized monarch before the disease reached Russia, advertised in all the papers of Europe a premium of 1100*l.* for the best treatise on the cholera that might be sent to St. Petersburg, as “*no medical work hitherto published on this fatal malady had been found satisfactory; nor had the suggestions contained in such works succeeded in arresting its devastating course, which, on the contrary, become every day more extensive, and seems to threaten the whole of Europe.*”

What did the British Government do? Why, neglected the testimony and experience of hundreds

of well qualified medical men in the disease, and appointed a board of medical men who knew nothing about it; and who, instead of anxiously seeking for information upon the important and momentous subject, positively *rejecting its other information*.

The British Government, in the year 1831, promulgated, in the *London Gazette*, the most dangerous of doctrines, the most pernicious of nostrums, for the management of this disease, which could possibly be devised. Thousands and tens of thousands of persons fell victims to them in these kingdoms; and million after million in other nations of Europe. It, therefore, became an imperative duty of the British Government to promulgate to the world the earliest possible acknowledgment of their error; and, as an atonement for the dreadful evils which they had entailed for years upon life and property, have afforded every information they could possibly give, the result of subsequent experience, to check the disease or to cure it. But no; they had started with committing a great error, and their pride and vanity would not allow them to acknowledge it. Obdurate to the calls of humanity, or the social and political ties of nations, they allow their error to degenerate into a crime of the deepest hue; and now stand convicted of having committed an offence against society at large of which they never can receive their due reward.

But why should the honour of the British nation, its character for humanity and philanthropy, be thus tarnished? Is it because, as Dr. Saunders says, “*what does not emanate from these chieftains (the Central Board of Health), must, if the whole race of men should perish, be circumspectly repressed, or strenuously opposed?*”

Failing in my endeavours to obtain the consideration of Sir Robert Peel to the important subjects recommended to his consideration, I next applied to his successor Lord Melbourne. I transmitted to his



Lordship a copy of my letter to Sir Robert Peel, with the pamphlet on cholera, and other statements. His Lordship, on the 28th of April, 1835, was pleased "*to offer me his best thanks for the communication, and also the pamphlets that accompanied it.*" I subsequently again applied to his Lordship on the same subject. But to no avail. I was not then even honoured with a reply to my letter.

In the communication to Lord Melbourne, and for which he "*offers me his best thanks,*" it was observed :—

"The dreadful scenes of mortality which took place at the period when the cholera first reached England, the distress and terror which that awful visitation of Divine Providence occasioned, are fresh in the memory of all,

"It now appears by the daily papers, that at this present period, 'in the southern provinces of France,' the cholera is exciting the greatest alarm, and that at Lyons the symptoms are ascribed, as has been the case in other great cities on the approach of an epidemic, to the effect of poison.

"This fact clearly shows the necessity there is for the British nation to be at once prepared for the event of its re-appearance; and which is more than likely, as the disease has again and again re-visited almost every part of the globe where it has hitherto once made its appearance.

"We may therefore well ask ourselves, what is there in our physical constitution, our religious and moral habits, or even our boasted local situation, that should induce us vainly to suppose that we are to be more favoured by Divine Providence than our neighbours, or any other nation on earth?

"Considerations such as these impel me to take up my pen, to endeavour to awaken the public to a sense of their danger by slumbering too soundly until the enemy is within the gates.

"Some years ago, long before the cholera had



reached Orenburg, the Russian Consul-General, George Benkhausen, Esq., asked me ‘whether I thought the disease would visit Europe.’ My reply was, ‘that from the observations I had made of the progress of the disease, I had not a doubt but it would.’ He then animadverted upon ‘the barrier the stupendous Steppes presented, and that if infectious or contagious, it could not possibly be conveyed across them.’ My answer was, ‘*I do not believe it to be contagious or infectious*, but an invisible and undiscoverable scourge sent by Providence, that will visit all nations.’\* Two years afterwards, in August, 1829, it broke out suddenly at Orenburg, in the Russian Empire, 1118 miles from Moscow, and 1600 from St. Petersburg; an inland city, remote from any of its known abodes at the time, in a temperate climate and season, in a dry, open, cultivated country, and amongst a people who enjoy abundantly all the necessaries of life. In the early part of the year 1830, Mr. Benkhausen informed me that the cholera had broken out at Moscow, and asked ‘whether I thought it would reach St. Petersburg.’ I answered in the affirmative. He then invited me into his cab, to accompany him to his office, as he was desirous of having a long conversation with me. I did so. The result of the conversation was, that he expressed himself better satisfied with the views I took, and the opinions I gave, of the means of prevention and method of cure, by the facts advanced to support them, than what he had collected from any work he had seen. Mr. Benkhausen stated that the Russian Government had offered a premium of 1100*l.*, for the best treatise on cholera that might be sent to St. Petersburg, and invited me to write a treatise for it,

\* After a good two thousand one hundred and eighty years of research (from the time Hippocrates was born to the present day), by many ingenious and laborious men, there are still such diversities of opinion existing, that scarcely two physicians agree concerning the disease which now rages; and upwards of a third of those seized died.—*Ainslie*.

which he kindly engaged to forward. He further observed of the numberless tracts which had, in consequence, been sent in, not one was so satisfactory and conclusive to his mind.

“I readily acquiesced in Mr. Benkhausen’s desires of committing to paper my sentiments; but I renounced the entertaining an idea of the prize. It was accordingly prepared, and Mr. Benkhausen approved of it very much; but he wished some parts left out. I took it home for this purpose; but unfortunately a sudden and serious fit of illness prevented my accomplishing it before the cholera was rapidly advancing towards St. Petersburg, and the whole of Europe was threatened with it.

“At this period, the first Board of Health being formed, I transmitted to Sir Henry Halford, for the consideration of the Board, the most essential parts of the treatise. Moreover, I personally attended at the College of Physicians, to offer any explanation they might require, or to illustrate my opinions; and also, if acceptable, to offer my services gratis in any way. I particularly drew their attention to my ‘*means of prevention*,’ but Sir Henry Halford and the Board were neither disposed to entertain my suggestions, or listen to any explanations I could offer; they very politely bowed me out of the hall of the College of Physicians, thanking me for my good intentions, but observing that ‘*as I was not a medical man they could not listen to me.*’

“The result of the experience of the last four years clearly proves, beyond all manner of doubt, that had my suggestions and advice been attended to, the lives of many thousand human beings would have been saved; and it also would have prevented almost all the terror, confusion, alarm, and cruelties that took place.

“I have a second time endeavoured to awaken the attention of the first Prime Minister of the Crown to the subject, and to prevail upon him to adopt measures for the public welfare, in case of a relapse, that would



effectually prevent a repetition of the most shameful scenes which took place on the former occasion. But, alas ! I have a second time been unsuccessful.

“ It would therefore seem that the public welfare is but a secondary consideration in the breast of political rulers, and that the lives of the whole community are, under the most appalling of circumstances, to be *left to chance, or what is worse, to the management of persons unqualified and incompetent to the task*. Indeed, their conduct has met with just reprehension and condemnation in all parts of the kingdom, but in the very nest in which they were hatched.

“ I am sorry that I should be placed in so painful a situation as that of complaining against the conduct of two Prime Ministers of the Crown ; but when the lives of thousands, and probably tens of thousands, are at stake, there is no alternative but so doing.

“ It will have been perceived, that at an interval of four years I have twice appealed. If, on the first occasion, the great danger to be apprehended of the disease induced the Minister to a disregard of my suggestions, surely the second was entitled to a consideration, backed as it was by the subsequent experience and opinions of nearly the whole of the medical profession of the world.

“ The eleventh hour has come : a new Minister is appointed ; let us see how he will act in the affair which interests the whole of the human race. The road is open to him to do justice to the country, honour to himself, and effectually to serve countless millions of human beings.”

This appeal to Lord Melbourne was accompanied with an illustration of some of the dreadful abuses which had taken place during the cholera panic, as follows :—

#### PUBLIC AUTHORITIES.

“ By the Cholera Act, framed by the Central Board of Health, all sorts of persons, whether ill or well, living



in a house where any person had had the disease, were dragged off to a pest-house, or quarantine station. Respectable females, as well as males, were thus indiscriminately thrown into contact with the very scum of the earth, and located with thieves and prostitutes. The case of one respectable single lady, in particular, enjoying an income of 500*l.* a-year, has been mentioned to me. She was taken off to the pest-house, in consequence of her servant having had the cholera, and kept a prisoner fourteen days; her house was gutted of its furniture, which was burnt in the street. Hundreds of people in the middling and lower classes, were served the same trick.

“Margaret L———, a fisherman’s wife, being a little unwell, during her husband’s absence from home, was carried off to the hospital. On his return home he was seized by the police, at the threshold of his door, and carried off to the quarantine station or pest-house. Their two sons, when they landed in their boat, on return from fishing, were also seized and carried off to the pest-house. The father and two sons were in good health and strong powerful men. They were all treated as though they had had the cholera. The woman, in two or three days, died—the sons became frantic—they both died, as also did the father, at the end of the tenth day, with a broken heart.

“A medical gentleman in Edinburgh was taken up, cast into prison many days, and fined 10*l.*, for not reporting a patient as having the cholera, who in truth had it not; and this was done upon the report of some evil-minded person. Such was the rigour with which the quarantine law was carried into effect by the civil authorities.

#### IMPROPER MEDICINES.

“J. S———, a child of three years of age, the doctors declared could not live. They gave for it a small bottle of medicine, of which half a teaspoonful

in a little water, was to be given every three hours. The doctor stated to the parents the hour the child would die. After the first tea spoonful was given the child continued to get worse, and its stomach swelled enormously. The father was about to give it the second dose, and had put it into a teacup, when, as he sat by the fire stirring it up, he perceived that it got thicker, that it changed into a variety of colours, like paint, and he could hardly stir it. Seeing this he became alarmed, threw it under the grate, and determined to give the babe no more. At the hour named by the doctor that the child would die, the child to all appearance was dead. The parents then wrapped the child up in its cloths, locked the room door, and left it. The father proceeded to the undertaker's for a coffin, and to have the child buried. Being late at night, and the undertakers very busy, the funeral was delayed until the morning. About two o'clock in the morning, while the parents were sitting in an adjoining room bemoaning the loss of their child, they were astonished by hearing the child crying. Upon unlocking the door, they were still more so to find the child sitting up in its bed crying for food. Had the child at an earlier hour been supposed to be dead, or had it happened in the daytime, there is no doubt but that this child would have been buried alive. I have seen this child; and the fact was stated to me by the father.

[There can be no doubt but what the medicine so given was a solution of arsenic.]

“Medicines were sent to B D——, who, after the first dose, would take no more; he is now alive, but the cat to whom some of it was given, mixed with food, died.

#### BURYING ALIVE.

“G. B——, undertaker at——, is prepared to prove, upon oath, that he was often compelled, by the public authorities, to put people into their coffins



before the breath was out of their bodies. In four days he put forty-seven into their coffins. For six weeks, every one who died was treated and buried as though they had died of cholera. They were thrown twenty and thirty into the same grave. He believes that many were buried alive. He particularly instances the case of a remarkable fine young woman, about nineteen years of age, whom he says was "*quite warm when put into her coffin, and had beautiful rosy cheeks, and a smile upon her countenance*, and looked as though she was in a strong sleep, the effects of opium." The public authorities used to drive this man about the town like a mad dog, with long poles in their hands, to keep him at a distance from them, throwing him the key of rooms and houses where he would find a corpse which he must bury.

"There is a middle-aged woman now alive, who was endeavoured to be thrust into a coffin; it being found too short, they were about to break her legs to get her in, when the undertaker went for another coffin. When the second coffin was brought into the room, she had so far recovered as to be able to tell them to save themselves the trouble, for she was not dead.

#### DRUNKEN MEDICAL MEN.

I have been informed, that at a certain town in Scotland, several young medical men had been sent from Edinburgh to assist in the cholera. They lived at a tavern, and were generally drunk from morning to night, so much so as that they were often unable to wait upon the sick and dying, and were always quarrelling as to whose turn it was to attend. They each drank from a bottle to a bottle and a half of brandy a day."

This statement of facts to my Lord Melbourne, was accompanied with a declaration, which I repeat, that "*this is not the worst* that will come out, if a commission of inquiry is established."

“ One case submitted to Lord Melbourne is so horribly depraved that it has been left out, being too disgusting to meet the public eye in this place. At some of the hospitals the dead were robbed, and the fingers of married women had been cut off to get their rings.

“ Yet all these abominations were carried on at *the public expense!* In the first place, immense sums of money were collected by public subscription towards carrying into effect the amelioration of the condition of the poor, and defraying medical expenses. In the second place, those very humane, kind-hearted, and generous people, were subsequently rated, or taxed, for the very same purpose; and to this hour no account has been given of how the private subscriptions were disposed of, or what were the amount of the sums raised by those means. In like manner the public rates. Now, it must be obvious that this is not exactly the thing, or that it can be expected that the public are satisfied with it.

“ Surely it is high time that some public investigation took place into the whole of the transactions of the Central Board of Health; that the public were made acquainted with the sums they have cost them for salaries, expeditions, and the amount paid out of the public purse to the different persons employed under them. There should be a schedule made out of every person so employed, exhibiting who they were, how and where engaged, and at what salary; further, what portion of the Board now remains receiving pay, and how much.

“ A return ought also to be made from every parish in the kingdom that has been rated for the cholera, to see what sums were raised, and how they were expended.

“ As soon as Parliament meets an Act should be passed, calling upon all authorities who have been collecting private contributions to deliver an account of their trusteeship, as it is generally believed that great abuses were committed in some places under



that form. This is due to the public and the cause of charity and humanity; for, unless it is done, in the event of such another sad calamity, the springs of charity will be frozen, and the innocent victim of affliction, probably, left to pine and die in want through the cupidity of former knaves.

“There is, in short, an ample field for inquiry, and which ought to be boldly and fearlessly entered. It matters not whom it may expose, whom it may condemn, or whom it may consign to punishment or everlasting ignomy. It is essential to the ends of justice and good government. It is a work befitting a Government to perform, and will not be neglected by one that knows its duty to the country or the world at large, or has any regard for its character. If the Government decline, why it is for the representatives of the people to do it for themselves.”

Such was the “*communication*” to Lord Melbourne, and for which his Lordship begged “*to offer me his best thanks.*”

There is, however, one statement in my letter to Sir Robert Peel, which at the present time would be incorrect; viz., that “the history of no country in the world, at no period, affords so revolting and disgusting a picture of depravity and inhumanity as the scenes which took place at Mussulburgh, Dunbar, and Haddington, during the cholera panic.” We find that at Naples, last year (1836), the Neapolitan Government had adapted the same course as the British Government in 1831, of treating the epidemic as contagious and infectious; and that quarantine or sanitary laws were enforced to their fullest extent.

A correspondent of the *Morning Post* writes from Naples on the 20th November, 1836:—

“I found the road stopped by soldiers, and began at first to fear I should not succeed in obtaining admittance; but the superior officers very politely took me by another route to the house of the gravediggers. There I found a large assemblage of official

personages at supper, and was in a moment placed at a table amongst them, when I partook of some sweet dishes, and drank a glass or two of wine. After this I was conducted to the burial-place, where I found a parcel of people standing round an immense *bonfire of coffins*, close to the fosse, into which others were engaged in pitching the dead, a duty that was performed with very little ceremony. No religious observance took place, but the sufferers were thrown in pell-mell like dead dogs, some of them in a state of nudity, others partially clothed, and some entirely dressed. Men, women, and children were flung indiscriminately into the same hole. The coffins, with which they kept the large fire, were used first to bring the dead from the carts, standing two or three yards off; but how they were furnished I do not know. When I arrived, which was about eight o'clock at night, they had just commenced. I remained more than an hour, and only three or four carts load, amounting to, I think, thirty-five or thirty-seven persons, were received during that time. From these carts the grave-diggers dragged the bodies by the heels into the coffins, in which they carried them to, and at once cast them into, the hole. I examined several of the dead very carefully, and found them to be chiefly old people. There was among the number one young girl, of, I should suppose, about fourteen or fifteen. The skin was not discoloured, and the limbs appeared to be perfectly round and healthy. Indeed, she looked as if she had been asleep. There was another (a woman), of about two or three and twenty. This corpse I also touched and examined. The flesh was firm, and of a natural colour. These were the only observations I made during my stay at this interesting but horrible place."

This, it must be admitted, is as "*horrible*, deplorable, and depraved a picture of the effects of the "*received opinion*" of the doctrine of "*pestilential*



*contagion*,” and of “*quarantine laws*,” as could probably be produced.

The responsibility of his late lamented Majesty’s Government, and her present Majesty’s, for all these evils, misery, and affliction, is very great. That they were clearly foreseen and pointed out to Lord Grey and the public, the following letters, which appeared in the *Morning Advertiser* of July, 1831, will prove:—

“ TO THE EDITOR OF THE MORNING ADVERTISER.

“ Sir,—As you have thought the little pamphlet on the cholera morbus, which I had the pleasure to send you, worthy of quotation, probably you may do me the further favour of giving insertion to the accompanying letter, addressed by me to my Lord Grey. As no notice has been taken of that letter by his Lordship, will it be going too far if I draw the conclusion that his Majesty’s Ministers approve of the Board of Health rejecting the testimony of persons who have had experience in the disease, unless they happen to be medical men.

“ That such a course should be pursued upon an occasion of so much vital importance appears most extraordinary. It would almost lead one to an uncharitable opinion as to a serious anxiety for the public welfare, and as though the Board of Health, in propagating the doctrine of contagion, had rashly adopted an opinion, of which they were not firmly convinced; or surely they would most readily entertain a consideration of any means that might be suggested as a preventative, whether it came from a medical man, or not a medical man. The opinion of most practical men is, that it is not contagious; and I have reason to believe that even his Majesty’s Ministers and the Board of Health are at variance upon the question. I do not believe that it is.

“ If the Board of Health had been composed of medical gentlemen who had had experience in the

disease, this might have been some sort of an excuse for rejecting my evidence ; but, when it is notoriously known that they are not, and that Mr. Russell is the only one who has, and he is absent, such a mode of proceeding must be any thing but satisfactory to the public. Surely if these gentlemen are paid for their labours, the least they can do is with courtesy to receive communications from those who are not.

“ But there appears to be some mystery in the concoction of the Board. Why were not a portion of them medical gentlemen who have had experience in the disease in India ? Would they not have been infinitely more calculated for the task ? and would their report not have been more satisfactory to the public ? Is it possible that the report of Mr. Russell (sent to Riga), let it be what it will, can throw any new light upon the nature of the disease, or afford the Board more information as to its general symptoms, or the measures to be pursued to cure or prevent it ? Will the Board, upon his return, be better qualified to lay down rules for the guidance of the public than they are at present ? *Certainly not. What are they about ? What have they done ?* Is it Mr. Russell’s sole opinion that is to guide them ? If so, it is a manifest injury to the public at large to trust to the opinion of one man, however numerous or great his qualifications (and Mr. Russell’s have been pretty well extolled), when the assistance might be had, and no doubt *gratis*, of so many enlightened and able practitioners who have had experience in the disease. This seems strange, passing odd, when the health of the public generally is at stake.

“ Probably, sir, some member of either House of Parliament may consider it worthy of some inquiry the proceedings of the Board of Health. They appear to have done nothing hitherto that is at all satisfactory to the public. If the disease was unhappily to make its appearance, which God forbid ! what



measures have they recommended to prevent or cure it ?

“ I am, &c.

“ W. WHITE.”

“ TO THE RIGHT HON. THE EARL GREY.

“ My Lord,—Permit me to solicit your Lordship’s attention to the accompanying pamphlet.

“ Having had considerable experience, during a long residence in India, in the cholera morbus, I addressed a letter to the President of the Board of Health on the subject, and afterwards waited on that Board, by whom I was informed, that, as I was not a medical man, they would not entertain any communications I had to make.

“ I have now most respectfully to inquire of your Lordship, if the Board of Health are fulfilling the intentions of his Majesty’s Ministers in rejecting information on the subject.

“ I have the honour to be, my Lord,

“ Your most obedient servant,

“ July 3, 1831.”

“ W. WHITE.”

“ TO THE EDITOR OF THE MORNING ADVERTISER.

“ Sir,—As you have indulgently inserted my letter to Lord Grey, and appear desirous to afford the columns of your journal for the propagation of information that may be useful to the public on the interesting subject of *cholera*, I need not apologise for addressing you at the present important crisis. Pray indulge me with having a little discussion with what are called the leading journals, who have excited so much alarm, and afterwards abandoned the question ‘*to the doctors* ;’ and I have no doubt but that, by incontrovertible facts, I shall succeed in removing some of it. I must say that some of the journals have shown themselves infinitely more active to create alarm than remove it. My little pamphlet has been in their hands these ten days, and although it is the first, and hitherto the only one, which has ventured to lay

down any rules for the public to regulate their system by, no notice has been taken of it by them. It may have proceeded from my not being a medical man ; but this I protest against, as unfair and illiberal to myself, and impolitic and unjust to the public.

“ I did not appeal to the medical faculty, or the public, rashly ; or ask them implicitly to imbibe my views, or to follow my suggestions. I merely solicited for an impartial consideration of them. It is to facts and experience I refer them, and to the luminous observations I have quoted of medical men of acknowledged talent. This, surely, cannot be deemed presumptuous, when the medical gentlemen of England, generally, have had no experience in the disease, and therefore cannot be expected to be such good judges of it as those who have, nor can their opinions, in comparison, avail. Let the Indian practitioner refute me if he will ; I have no fear that the English one can.

“ We know not how soon it may break out in this country. A few years ago no one would have believed that it would ever appear in Russia. It has however now broken out at St. Petersburg, when they verily believed they were secured from it by quarantine establishments.

“ It may not be unsatisfactory, sir, to you, to peruse the following notice taken of the pamphlet on Sunday last by the *United Kingdom*. I am informed that it comes from the pen of a medical gentleman of the East India Company's Service, who has had very great experience in the disease. It may give confidence to the public.

“ ‘ This little pamphlet, although written by a non-professional person, is the production of a gentleman who has studied the subject, and with a discerning eye has profited by the dreadful experience which a long residence in India has afforded. Mr. Ainslie's inconsistencies are admirably dissected, and the just pathological views of Mr. Johnson are well brought



forward. The facts adduced are in favour of the non-contagion doctrine; and the treatment pursued we know, from professional Indian experience, to be judicious, and founded on sound principles.'

"Permit me, after these observations, to submit to your superior consideration the propriety and utility of affording to your numerous readers the opportunity of perusing the accompanying extracts from my pamphlet on the means of prevention. It is those parts which I submitted to the consideration of the Board of Health. Although it has been treated by that learned body with neglect, if not contempt, until they have denied the practicability and utility of the suggestions, have explained their reasons why, and have suggested something better, the public may probably feel grateful to you for any information they can receive, if ever so little, to allay the anxiety now prevailing. That, too, not without a sufficient cause from the conduct of the Board of Health. If the disease was now to break out, in the present divided state of opinion on the part of medical men generally, the most dreadful sacrifices of life might take place. The public would be subjected to all sorts of experiments; every species of absurd, pernicious, and impudent quackery would be resorted to by the ignorant and needy practitioner, while the difference of opinion amongst the most respectable part of the profession would lead to the most fatal consequences.

"Yours, &c.

"July 11, 1831."

"W. WHITE."

Subsequent events unhappily fully verified the correctness of the forebodings contained in those letters. It will be well if my Lord Grey can reconcile it to his conscience that he has no responsibility to his God, if not to his country, for the deplorable scenes which took place in 1832, in consequence of his disregard to the admonition given to him. It will be more fortunate if Sir Robert Peel and Lord Melbourne can discover that for the lives

that have been lost on the Continent since I submitted my humble labours to their attention, no responsibility can attach to them.

A Board of Health, as I have before remarked, constituted by the authority of his late Majesty, under such extraordinary circumstances, let their talent have been what it would, ought at least to have possessed the qualities of firmness, consistency, personal industry, and forbearance. But of all those qualifications they were notoriously deficient—forming a strange and irreconcilable contrast with the Medical Boards at Moscow. Ignorant themselves, with the exception of one individual, Mr. Russell, even of the nature of the disease, or the method of cure, a panic seized them. Why the Board was so constituted, when there were so many scores of medical men at hand who had seen and had great experience in the disease, *remains to be explained*.

The first proclamation of the Board at once proclaimed their incompetency, weakness, and folly. The disease was declared by them to be contagious and infectious. One day they issued a proclamation allowing of the goods to be landed, but not the passengers, who were to undergo quarantine. The next day they issued a second proclamation, allowing of the passengers to land, but prohibiting the goods.

Totally at a loss to know themselves what to do, as a means of prevention, they reject without inquiry or consideration as to their probable efficacy, the means which were recommended to them; and which are now admitted by almost all the medical men in the world to be the only means of prevention, and are certain as measures of cure.

They treated with perfect indifference and contempt the opinions of all the more enlightened practitioners in the world, and pin their faith to the sleeve of two contagionists, Doctors Barry and Russell. These gentlemen, to amuse and cajole the public, are sent to Riga to ascertain that which had been decided by far more scientific men, and those who had had great



experience in the disease; viz., to identify the disease with that of India. Dr. Walker, at the expense of his Majesty's Government, had travelled from St. Petersburg to Moscow to ascertain the same point: he had nearly lost his life from the excessive fatigue, &c., of the journey; he had made his report; so had also Dr. Hammet, from Dantzic. Yet Mr. Barry and Mr. Russell must be sent, as the Board could not be satisfied. They had not been forty-eight hours at St. Petersburg, when, upon seeing only one case, Mr. Barry says it "afforded to his colleague, Dr. Russell, *ample means of satisfying himself as to the identity of the disease.*" There had been but two cases of cholera; they "*saw the survivor of these two cases;*" and, as though the horrors had seized them on the 1st of July, 1831, they wrote, "*the important object of our mission seems to be already accomplished.*"

No doubt but what the object was a job, a dirty job, a shameful job; as even the misery and affliction of the human race was rendered subservient to the prodigal squandering of the public money. No man in his senses anticipated any practical good from the mission. I commented at the time upon it in severe terms in the *Morning Advertiser*. The medical profession themselves have since denounced it. "The result of their mission," says Dr. Bell, "has been generally unsatisfactory to the profession to which those gentlemen belong, and to the public." He might have added, "*who were their dupes.*"

Both those gentlemen were very properly honoured with knighthood for their exertions in the cause of science and humanity. For this purpose they made a Report, which of course was printed at the public expense, and in which they do not fail highly to compliment each other upon their amazing discriminating powers. For instance, the great Dr. Barry says of the great Dr. Russell, that the moment he saw the "*survivor,*" (mind, *not the dying, or the dead man,*) with "*astonishing discrimination*" instantly exclaimed, "THIS IS THE GENUINE DISEASE!" a



phrase, no doubt, borrowed from Gosnell, the perfumer of Regent-street, who is so remarkable for his "*genuine bear's grease*." But Doctors Russell and Barry—Sirs,—we beg their pardon, were in Russia, and the term was consistent enough.

The object of those gentlemen making a report was curious enough. They say that "*there were many descriptions of the malady much more ably and accurately drawn up than they could pretend to give;*" yet, in the very teeth of this acknowledgment, and that they had seen but one person who had evidently recovered, they do so, as "*a short account of the symptoms they had witnessed might be useful.*"

Good heavens! what an opinion must those gentlemen have formed of the capacity of their colleagues of the Board of Health, and the anxiety of John Bull for gullibility.

Dr. Walker, in his letter to C. Greville, Esq., Clerk of the Privy Council, dated 17th of April, 1831, says, "I had the honour of reporting to you from Moscow, for the information of his Majesty's Honourable Privy Council, my convictions respecting the disease prevailing in this empire, that it was the cholera morbus which had ravaged the territories of the Honourable the East India Company." Dr. Walker's report from Moscow is dated the 17th March. He had then before him the Reports of the Boards of Bengal, Madras, and Bombay, on the disease. In it, he says, "from what he saw, and the reports of medical men whom he had consulted, and whose experience was more extensive than his own, he was led to pronounce, without doubt or hesitation, that the disease in question was the true Indian cholera, agreeing in its symptoms, and in the appearance of the body on dissection, with the accounts given in the reports of the Medical Boards of the three Presidencies."

The Board of Health, instead of employing their minds with anxious solicitude as to the various causes



which might derange the functions of the body, and the prominent predisposing causes of the disease, and suggesting the most rational and probable means of fortifying the constitution against the susceptibility of attack, were engaged in deciding that “decayed articles, such as rags, cordage, papers, old clothes, and hangings, should be burnt;” thinking with Benedictus, who says, that *the yellow fever or plague lay in an incubated state in an old rag for seventeen years*. Instead of devising means for the preservation of the human body, their time was taken up with thinking of the danger of the common sewers, and of “*cleansing the house from the cellar to the garret*.” They were anxious that all the drains and impure ditches were emptied; but they forgot to say one word of the necessity of *purifying the human body, and disencumbering it of the corroding and destructive excrements and the germs of the disease*. In short, they set to work more like scavengers than scientific medical men.

It would have been well for mankind had their folly ended here. Terrified and frightened to death themselves, while they were preaching up “*common prudence*,” they became indiscreet beyond measure.—They railed against unnecessary alarms, but declared that the less intercourse man had with man the better. “*Avoiding all unnecessary communication with the public out of doors*,” was one of their “*preventive measures*;” and, for this purpose, “*all articles of food, or other necessaries for the family*,” were to “*be placed in front of the house, and received by one of the inhabitants, after the person delivering them should have withdrawn*.” People infected were to be removed to the Cholera Hospital, whether they liked it or not; and, for the sake of humanity they decided, that “*the fewer the number of persons employed to attend them the better!*” Those who refused to go to the Cholera Hospital were to have “*a conspicuous mark (SICK!)* placed in front of their house, to warn persons that it was in quarantine; and when persons with the disease

*had been removed, and the house purified, the word (CAUTION!) was to be substituted; and the inhabitants of such house were not at liberty to move out to communicate with other persons until the mark should have been removed."* While the public were informed that "*the two preventives were a healthy body, and a cheerful unruffled mind.*" By way of producing them, the Board ordered a "*strong body of police around infected places, so as to utterly exclude the inhabitants from all intercourse.*" To enforce this, and to preserve a "*cheerful mind,*" it was intimated that "*it might become necessary to draw troops around them, if the disease should ever show itself in this country in the terrific way in which it has appeared in various parts of Europe.*" "Convalescents from the disease, and *those who had any communication with them,*" were to "*be kept under observation for a period of not less than twenty days.*"

The consequences attending those regulations were far more fatal than the spreading of the disease itself; and there is no doubt, as Dr. Kirk says, that it "*multiplied tenfold the mortality amongst those attacked.*"

Even the simple step of the Board ordering the cleansing of the drains, &c., was not done until it had been forced upon them by my letters which appeared in the *Morning Advertiser*. In the letter of the 26th July, 1831, I observed, "It is said that the disease first makes its appearance in the dirtiest parts of every place. Only then look at the filth of St. Giles's, Wapping, Saffron-hill, and fifty other places, and the obnoxious exhalations from the sewers, disgustingly impregnating the atmosphere, producing a variety of diseases, while the habitations and the bodies of the inmates are overrun with vermin. Look at the stagnant pools around the metropolis, filled with putrid matter, with which the commissioners of the roads, under the pretext of laying the dust, annoy the olfactory powers of every passenger, as well as thereby injure the health of the public. Talk of Russian filth! Can it equal



this? Why have not the Board of Health turned their attention to these important points? Are the savoury exhalations from the royal kitchens of St. James's and Windsor so very seductive in their charms, as to deprive Sir Henry Halford of the power of even recollecting that there were such nuisances existing in London? Why does not Sir Henry Halford himself look into facts which painfully obtrude themselves upon every one? Why do not the Board of Health recommend the immediate employment of all the scavengers throughout the metropolis to cleanse the filthy by-ways, and every hole and corner which is favourable to the propagation of the disease? There is where the danger lies, and not at Windsor or St. James's Palace. It is at Wapping, and such like places, where Sir Henry Halford's company as President of the Board of Health is wanted. Why are not the officers of every parish called upon to attend and see that those nuisances are removed or abated? As cleanliness is declared to be one of the best preventives, why are not the inhabitants called upon to whitewash their houses with quick lime—not the common stuff that is only useful to the eye? Where the inhabitants are too poor, let it be done at the expense of the parish, or the State."

## SECTION II.

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### THE MEANS OF PREVENTION AND METHOD OF CURE FOR THE CHOLERA.

I would now beg leave to refer to a second edition of my treatise on “*Cholera Morbus ; the Means of Prevention, and Method of Cure,*” as transmitted to Sir Robert Peel and Lord Melbourne.

In the first place the reader’s particular attention is requested to the following quotation of the review of the pamphlet by Professor Lizars, as it appeared in the *Edinburgh Patriot* newspaper of 27th of December, 1834, and which was transmitted to Sir Robert Peel.

“TREATISE ON CHOLERA MORBUS. By Captain W. WHITE, late of the H.E.I.C.S. Second Edition ; with Preface, Notes, and Addenda.—Strange, London.

“Our attention has been called to a very interesting Treatise on Cholera. Having read it ourselves with much satisfaction, we think it our duty to recommend its perusal to the public. It is certainly an extremely valuable and important little treatise, and may be considered an extraordinary production, coming as it does from the pen of a military man ; for although he did study medicine in his youth,\* his professional duties as a soldier must have withdrawn him at a very early period from prosecuting either pathology or practice of medicine ; he shows, however, that he still retains a knowledge both of pathology and prac-

\* Under his father, the late Mr. W. White, Surgeon, of Bath, and Drs. Crawford, Barlow, and Moodie.



tice, and such as would do credit to many professional medical men. He seems to understand the subject thoroughly, and handles the question, in all its various forms, in a scientific and masterly manner. It is by far the most valuable little tract that has yet appeared upon the subject, and not only deserves the attention of the public, but, from the many important facts therein stated, will be found very useful even to the medical practitioner.

“ Captain White first published his pamphlet in June 1831, and it is to be lamented that the Central Board of Health should have disregarded the suggestions and advice of an individual who had so extensive experience of the disease in India, when it raged so terrifically at Moorshedabad in 1817; as there he was obliged to act the doctor on many occasions, and with what success is demonstrated by several very instructive cases detailed in his pamphlet. The Captain appears to have since read most attentively the various and numerous works which have been published on this fatal disease, for he has given several quotations to illustrate his previous opinions, and to prove his priority of proposing means of prevention, as also some of the most efficient measures of cure.

“ This treatise may be divided into three heads—the means of prevention and mode of cure—the conduct of the Board of Health, and the necessity of a public inquiry into the abuses stated to have been practised—and the important question of contagion, the folly of it, and the injury which the present quarantine laws inflict upon commerce and human life. It seems unnecessary to us to give any quotations, as the work itself is so short; but we cannot conclude without recommending it in the strongest manner to our readers, professional and non-professional, that they may satisfy and convince themselves of the important truths therein stated.”

The following is a copy of the letter of Professor Lizars referred to in my letter to Sir Robert Peel,

the original of which I had the honour to transmit to Sir Robert:—

“20, York-place, Jan. 29, 1834.

“Dear Sir,—When I received your pamphlet, I felt myself called upon to review it, and sent it to the *Patriot* newspaper for insertion. I consider it of great value, as it comes from a non-professional gentleman, who has seen much of the disease, and who has no theory to support. If the important truths you have brought forward tend in the least to prevent a repetition of the disgraceful scenes which took place during the cholera panic, or to lessen the baneful effects of our quarantine laws, which I had the misery to witness at Gibraltar and Malta, I consider your exertions will deserve well of your country.

“Dear Sir,

“Yours very truly,

“Captain White.”

“JOHN LIZARS.”

I will now entreat the attention of the reader to the means of prevention as suggested by me first to the Russian Consul-General, then to the Board of Health; and the motives, as explained, which induced me to obtrude them upon their attention:—

“In the absence of any regular system recommended by medical men for the attainment of so desirable an object as that, of guarding the constitution against susceptibility of attack, and removing those pre-existing causes which are declared to be the positive cause of inveterate cholera morbus, will it be deemed presumptuous in me if I venture to recommend for trial, at least, a course of medicine I have repeatedly adopted, with the most singular success, in removing one of the most determined and inveterate pre-existing causes; indigestion, and suppressed biliary secretion.”

“In the first place, I would give three, four, to five and six grains of calomel, according to age and constitution, to be worked off in the morning with three or four teaspoonsful of tincture of rhubarb; or the



same proportions of calomel prepared into pills, with the extract of colocynth, will perhaps for general purposes be more convenient, and equally useful. The following night let the person take half a grain calomel pill, and continue it night and morning for the space of a fortnight ; taking a teaspoonful or two of tincture of rhubarb, just enough to keep the body gently open, but carefully to avoid any thing like purging, for in that case the calomel would be carried off, and thereby the beneficial effects defeated.

“The gradual introduction of small quantities of mercury into the system, purifies the bile, increases its action, removes obstructions, operates generally upon the fluids, and places the body in the most healthy state possible.”

This remedy for the prevention and cure of cholera was not only rejected by the Board of Health, but the public were, on the 14th of November, 1831, actually warned against its use ; they declaring, that “*the drugs hitherto offered with that pretension \* \* not only did not possess the negative virtue of doing no harm, but were positively found to be injurious.*”

Such was the monstrous conduct of the Board of Health at such a season of calamity. At the very same moment they had the still more monstrous assurance to introduce to the “*particular attention*” of the public some of their own extraordinary quackery, “*Sir William Beatty’s preventative medicine,—viz., one ounce of Peruvian bark, with half a drachm of capsicum (Cayenne) ; a drachm or small teaspoonful to be taken twice a day.*”

After the experience the world has now had with cholera, every person who reads this will laugh at the parade made by the Board of Health about “*negative virtue*” in nostrums which did not emanate in themselves, and still more so at Sir William Beatty’s trash of “*preventative medicine.*”

It would be exceedingly amusing, if not edifying, to hear the learned President of the College of Phy-

sicians, Sir Henry Halford, explain the grounds upon which the Board of Health took upon themselves to recommend "*bark and capsicum*" as a means of prevention of the cholera; as also to have elucidated their peculiar properties of acting upon the fluids.

It has been already stated that the Board of Health declined to listen to my opinions, or to attend to my recommendation, or to hear any thing I could have to say, because I "*was not a medical man.*" The fact is, they did not wish to be informed. I was asked if I "*did not think the disease contagious?*" To which having replied in the negative was quite enough for the Board of Health.

It appears almost incredible, but nevertheless it is a fact, that Sir Henry Halford after observing to me, "You recommend calomel as a means of prevention," asked the extraordinary question, "*Did you ever know an instance where a person had taken calomel prevent their having the disease?*"

It was evident what the public had to expect from the wisdom of the "*sages of the Board of Health,*" when the President could put a question to me as to fact which could alone be known to the Almighty. Admitting that a man had swallowed the whole of an apothecary's shop, how was it possible for it to be known to him that which could alone be known to the great Creator? There might have been good and probable cause for supposing that the use of mercury had the properties of preventing the disease, but beyond this human penetration could not divine. I offered to explain the grounds of my forming the opinion; but no, it could not be listened to, as I "*was not a medical man.*" I should probably have offended Sir Henry Halford's ears by explaining that which the Board ought to have been aware of; viz., the vast importance of calomel in purifying the bile, and increasing the action of the liver. They ought to have been aware of the sympathy between the functions of the skin and liver, the liver and the bile, the necessity



of purifying the blood, as the most trifling causes may derange the whole system in a minute. In short they appear to have been wholly at a loss to know and understand the value of calomel in the disease.

“Physiologists,” says Delpech (the eminent professor of Montpellier), have long placed the liver at the head of the organs, by which the blood is purified; as the solar plexus, common to the two ganglia, and which participates in their morbid affection, supplies the liver with the nerves by which it is animated, it cannot appear strange that the functions of this organ should languish, or close. Whether the obstruction of the principles of the bile contained in the blood, by the action of the liver, is the principal influence of that viscus, with reference to the purification of the blood, or whether it contribute to this purpose in any other manner, it is not the less remarkable that the venous blood passes through the region of the liver, without their undergoing any change, that the secretion of the bile ceases; and that, most commonly, the liver is found destitute of the full injection which constitutes its natural state.”

In connexion with the subject of the sympathy between the skin and the liver I must here observe, that by the pathological investigations, and able scientific anatomical researches, which took place at Edinburgh by Professor Delpech, Doctor Lowenhayn of Moscow, Doctor Cost of Montpellier, and Professor Lizars, the fact has been clearly established, that the “central part of the ganglionic nerve is the seat of the essential morbid affections of cholera.” The enlightened foreigners, however, disavow all claim to a priority of the discovery. They admit that their attention was drawn to it from the opinion expressed by the eminent Dr. Loder, of Moscow. By a singular coincidence Professor Lizars had also entertained and expressed the same opinion. Delpech in his letter to Professor Lizars says, “The result of our

labours may perhaps contribute to throw some light upon a practical question, the solution of which is of the greatest importance to all Europe."

It is here deserving of particular attention that indigestion is a prevailing complaint with every one wherever cholera is common; and the greater the degree of the disordered state of the stomach, the more likely is the person to be affected by the epidemic, and the less likely to recover. The *Russian Report* says, "*The principal seat of the disease is the digestive organs.*" Mr. Bell declares "every symptom of the disease is referable to the secreting functions of the abdominal viscera, and to irritation, consequent on depraved secretions being thrown into the intestinal canal."

"Its first symptom," says Dr. Kirk, "are gastric irritations; and if in this stage remedies are used to rouse the energy of the bowels, and to stimulate them into such action as to throw off offending causes, the future germ of cholera may frequently disappear, nay, even the efforts of the constitution may work it off, and those dreadful symptoms which characterise cholera asphixia may never appear." "The marks of gastric and intestinal irritation," observes Greenhow, "sometimes show themselves for many days, in diarrhœa, loss of appetite, nausea, pain in the stomach, with quick irritable pulse, and the other slight symptoms of indisposition which have already been noticed. The secretions are not yet suspended, and the diarrhœa is perhaps rather a bilious than of a serous nature; the whole train of symptoms are distinctly referable to the digestive organs."

Professor Lizars remarks, that "the atmosphere is unseasonable, it is warm, damp, and surcharged with the electric fluid; it hence impairs the whole nervous system, especially the ganglionic system of nerves. The pulmonary plexus is, therefore, unable to endow the lungs with power to oxygenate



thoroughly the blood—the cardiac plexus to enable the heart to circulate perfectly the blood—the gastric plexus to empower the stomach to digest the food—the hepatic plexus to influence the liver to secrete the bile—and lastly, the renal plexuses to give energy to the kidneys to secrete the urine; the atmosphere stimulates imperfectly the cutaneous nervous filaments and capillary blood vessels. The consequence of this deficiency of nervous energy to these important organs is, that the chylopoietic and assistant chylopoietic viscera become deranged.—“When an individual thus conditioned, with his digestive organs deranged, but much more so with these digestive organs overloaded with indigested food and fæces, which have irritated them, or produced diarrhœa, is exposed to cold, so as to check the cutaneous functions, a twofold disease is produced, a violent colic and fever, or cholera.”

Now, can it be doubted for a moment that as soon as cholera makes its appearance, every person should adopt measures to place the digestive organs and the body in the most healthy state possible?

“It is clear,” says *The Edinburgh Medical and Surgical Journal*, “that it is preceded by a slight, and often imperceptible, but general disorder of the digestive functions, which a very inconsiderable cause suddenly converts into a positive disease, with all the phenomena of the epidemic. Sedulous attention, on the contrary, to every gastric or gastro-enteric uneasiness, disarms the epidemic of its power, and appears to render it of little moment whether the disease is communicated from one to another, or not.”

Of what avail would Sir William Beatty’s *Preventive Medicine*, “*Bark and Cayenne*,” have been to produce such results? Still more so to fortify the constitution against an invisible inodorous, intangible poison, capable of producing the most

malignant effects upon the human constitution ; “ but,” as Greenhow says, “ how produced, or whence proceeding, is more than we are likely to determine in a satisfactory way ?”

“ By early attention,” says Fife, “ the progress of the disease has been arrested, when there was much reason to believe it might have assumed a severe form.” “ In its first stages,” says Maccalum, “ it is easily cureable by proper means, and it is highly important that every publicity should be given with the knowledge of these facts, throughout the whole empire.”

Let us now inquire what is the result of neglecting to attend to the digestive organs when the atmosphere is pregnated with the noxious vapour producing cholera. The profuse rice, watery or gruelly digestions, which consist chiefly of the serum of the blood poured out by the mucous exhalents of the intestines: “ in proof of this,” says Lizars, “ the flocculi are fibrinous.” “ The evacuations,” says Kirk, “ of advanced cholera, are not the discharges of alvine matters, or the ordinary fluid of the bowels. They are largely composed of the nervous and saline parts of the blood, and consequently produce a destruction of strength, as swift as it is complete.”

Now to obviate and “ *prevent*” all this, of what use could Sir William Beatty’s “ *Bark and Cayenne pepper*” be ?

“ In the premonitory symptoms,” says Dr. D. B. White, “ I order my patients, when they retire to bed, to take a pill composed of calomel prep. gr. vi. opii cruda gr. i; to be followed in the morning with a dose of castor oil, with a few drops of laudanum; or what is probably better, under ordinary circumstances, a powder consisting of pulv. rhei half a drachm, zingib pulv. gr. viii. This simple I may have to repeat, but I *never* knew it fail.” The Doctor adds, “ I have prescribed for



upwards of a hundred patients labouring under those symptoms above alluded to, which usher in the disease, and although within its limits ten cases of cholera have occurred since my superintendence, all of them so preceded, yet in not one of the above hundred instances did this disorder supervene; and in only four individuals was my assistance a second time required."

What further proof is requisite to convince the inhabitants of the whole world, of the vast and invaluable properties of calomel previous to and in the course of the disease. But if we wish for an important illustration of the utility of calomel, and consider that it is the only medicine in the world which acts with effect in promoting the circulation of the blood, we have only to refer to the *post mortem* examinations of cholera subjects.

By the *Russian Report* we find, "the blood was repelled inwards from the surface, especially towards the abdominal cavity. By the excessive secretion of watery fluid from the organs there situated, which is the peculiar effect of this disease, the blood loses its facility of moving, and owing to the superabundance of fibrin, comparatively with its other principles, falls into a state of stagnation. This was sufficiently proved, both by the extraordinary accumulation of *black, thick, almost coagulated blood*, which was found after death in the internal vessels, and likewise by the quantity of blood drawn from the veins during life, which was *thick, black, and obstructed* by scarcely any oxygen from the air." Mr. G. H. Bell observes, "the substance of the liver, when cut into, is found gorged with black blood, not coagulated, but thicker than usual. The colour of the bile is generally green, the great veins of the trunk and liver of thick and impure blood, as are the right auricle and ventricle of the heart. The lungs are black, and in appearance almost a fleshy structure, and, when cut into, freely

gives out the same gremous blood.” The *Russian Report* says, “a superabundance of thick black blood occurred in the veins of the stomach and liver. No bile is visible in the small intestines or stomach. The veins of the liver, and sometimes those of the bowels, are gorged with blood. The gall bladder is full of dark bile.”

“It is,” says Professor Lizars, “an acknowledged fact among physiologists, that black blood impedes the action of the heart. The blood thus vitiated is circulated in the brain, spinal chord, and ganglionic system of nerves, and will impair their functions, and re-act particularly on the circulating and respiratory organs.”

These facts surely ought to instruct mankind to doctor themselves, without the aid of a physician. “*Calomel*,” says the *Russian Report*, “is the most effectual remedy against the stagnation of the blood, and particularly its fibrinous part, which having become thicker and less mobile, only stops up the blood vessels.”

But fully and justly to appreciate the value and vast transcendent talent of the Board of Health, *alias* the College of Physicians, in their endeavours to counteract all those evils, I must beg to introduce to the particular attention of the reader the following, from the *London Gazette* of the 20th October, 1831:—

“*Advice to families for the prevention and cure of this dreadful malady.*”

“It is important to point out the instant measures which may *safely and beneficially be employed* where medical aid cannot be procured. All means tending to restore the circulation, and maintain the warmth of the body, should be had recourse to without delay. The patient should be immediately put to bed, wrapped up in hot blankets, and warmth should be maintained by other external applications, such as repeated friction with flannels and camphorated spirits, poultices of mustard and linseed (equal parts) to the



stomach, particularly where pain and vomiting exists; similar poultices to the feet and legs, to restore their warmth. The returning heat of the body may be promoted by bags containing hot salt, or bran, applied to different parts of it. For the same purpose of restoring circulation, white wine whey, with spice, hot brandy and water, or sal volatile, in a dose of a teaspoonful in hot water, frequently repeated, or from five to twenty drops of some of the essential oils, as peppermint, cloves, or cajeput, in a wine-glass of water, may be administered. With the same view, when the stomach will bear it, warm broth, with spice, may be employed. In any severe cases, or where medical aid is difficult to be obtained, from twenty to forty drops of laudanum may be given in any of the warm drinks previously recommended.

“ HENRY HALFORD,

“ President of the Board.

“ This treatment is within the means of every family, all that is required being, that they should provide themselves with the following simple medicines :—

“ Pint of spirits of wine and camphor.

“ 1 or 2lb. of mustard and linseed powder.

“ 1oz. of essential oil of peppermint, cloves, or cajeput.

“ All of which may be procured for a few shillings.

“ It is seriously recommended that every person should be prepared with the prescribed remedies, so that nobody shall have to attribute to his want of caution the spread of a malady so terrible and overwhelming.”

By this it will be perceived, that while the Board of Health were rejecting the simple and invaluable remedy I had suggested, they were enjoining every private family in these kingdoms to convert their house into a sort of an apothecary's shop, to provide themselves with certain nostrums as specifics, many of which were notoriously well known to be worse than useless for the object to be obtained.

This proclamation of the Board of Health is a bright illustration of a remark contained in the Report of the College of Physicians to the Privy Council, of date the 15th of November, 1815, wherein they say, “The history of physic presents numerous instances of recorded facts, which, after having obtained *credit at certain periods of time*, have, by subsequent investigation and inquiry, *fallen into disrepute, or have been disproved.*”

This may also now be said of Sir William Beatty’s preventative medicine.

“Little was to be learnt,” says Dr. Kirk, “of the right treatment of the disease in Mussulburgh and Tranent. The practitioners were in dismay, and knew not what hand to turn to. Their remedies were as various as they were uncertain; and I retired from the scene, when the opprobrium *Medicinæ* stared me in the face, and taught me an imperative lesson of how poor a thing our boasted art is when God is against us.”

Amongst the “*remedies so various*” and “*uncertain,*” besides those recommended by the Board of Health, were to be found in Mr. Ainslie’s work on Cholera, dedicated to the Court of Directors of the East India Company, “two or three drachms of the sub-carbonate of magnesia in a little tepid water; and so effectual was the remedy, that in few instances,” he says, “had he occasion to repeat it; and by these means he saved the lives of many hundreds.” Nay more, the learned Doctor says, “*ninety-nine out of a hundred*” were saved by that nostrum. He also recommends “*ginger,*” “*calf’s bile,*” “*galvanizing,*” “*blistering,*” “*inhaling oxygen gas,*” &c. &c. All of which, if they “*come up,*” must be “*tried over and over again,*” for this most extraordinary of all reasons, “*if they do not prove successful, at all events they can be attended with no bad consequences !*”

Such trash as this comes from the pen of a gentleman who “*resided* in India for a period of upwards of



thirty years," and "after," as he observes, "having read most of the publications on the subject of cholera which had been given to the world." Therefore he has the modesty to call it, "*elucidating that which seems to have perplexed many; viz., the best methods of treating the cholera morbus.*"

Immense quantities of cajeput oil, oil of peppermint, &c. &c., were sent to Russia by the advice of Sir Henry Halford. There, as in Asia and England, they proved a total failure.

The *Russian Report*, speaking of calomel, says: "it is *the most effectual remedy against the stagnation of the blood*, and particularly of its fibrinous part, which, having become thicker and less mobile, easily stops up the blood vessels. \* \* *All other remedies* which have been extolled as specifics against it, such as sulphates, muriates, cajeput oil, and the like, *completely disappointed our expectations, and were therefore abandoned.*"

The editors of the *Morning Advertiser* and the *Standard* at once saw the importance of the suggestion of calomel and aloes, and quoted the pamphlet; the former journal most freely. I have since had reason to believe that many thousands in the metropolis were benefitted by it. The exposure which the Board of Health suffered at my hands in the columns of the *Morning Advertiser* opened the eyes of thousands, and tens of thousands of persons to their danger, and which was thereby happily averted.

With a remedy so simple, so easy of access, so cheap, and so ready for administration to all classes of the community, *why is it not officially made known to the world in the Gazette?* Hundreds of thousands of human beings are annually carried off with cholera, in one quarter of the globe or another. Has it not therefore become an imperative duty on the part of this Government, who on the onset so grossly misled other nations as to "*the means of prevention and method of cure,*" to afford the utmost publicity to any beneficial result of subsequent practical experience?

Or is it to be as Dr. Saunders says, that “*what does not seem to have emanated from those chieftains (the College of Physicians), if the whole race of men should perish, must be circumspectly suppressed or strenuously opposed!*”

The reply of Sir Robert Peel to my letter, and the neglect with which my “*means of prevention and method of cure*” was treated by the Board of Health, appears the more extraordinary from the fact (and which I have only within the last few months discovered), that in the year 1823, during *the Millbank Penitentiary Fever and Dysentery*, the differences of opinion amongst medical men as to the use of calomel in that disease ran so high, that, as Secretary of State for the Home Department, he wrote to Sir Henry Hallford, the President of the College of Physicians, to appoint a Committee, to “*report*” to him “*the probable efficacy of that course of medical treatment.*”

Doctors Roget and Latham, who had been appointed, under peculiar circumstances, to attend the sick of that prison, finding the treatment usually recommended in such diseases unavailing, resorted, upon general principles, to the use of mercury; and the mercury so administered, proved to be an efficient remedy. But considerable differences of opinion respecting the propriety of this mode of treatment prevailed amongst the members of the Faculty, who were examined before the Select Committee of the House of Commons, on the epidemic of that establishment.

When before the Select Committee, Dr. Latham was asked—

“Have you any observations to make upon what has been said?”

To which Dr. Latham, for himself and Dr. Roget, upon the grounds upon which they had prescribed, replied—

“One word only: after the hinting, hesitating, and disapproving, that have proceeded from our learned brethren, for so many days past, we think it but right



that we should state our unanimous conviction upon this matter ; and the unanimous conviction of my colleague and myself is, that if we had not treated this disease *upon general principles*, and that if, *in particular, we had not pushed that one remedy of mercury to the full extent to which we have pushed it, every one of the individuals who have been effected with dysentery in the Penitentiary would have inevitably perished.* We have stated it as the result of our observation, that there are certain dysenteries (and the dysentery of the Penitentiary is one of them), which are *as actually controlled by mercury as that disease is certainly controlled by it, for which mercury is a reputed specific ;* that the symptoms of this disease will as certainly disappear, or are abated, when the mouth becomes affected, as sores disappear, or amend under the same circumstances ; and this is what we have witnessed, with a very few exceptions, in the Penitentiary. Further I would state, *this is no new opinion ;* for I must be allowed to observe that *we* know (if *some* of the gentlemen who have been examined here do *not* know) that this remedy has been employed for ten or fifteen years, *by the most intelligent* medical practitioners *in every quarter of the globe*, for the cure of *this self-same disease.* Therefore, when it is hinted that this remedy has never before been employed for such a purpose, we can only say, that if indeed it had never been so employed, we necessarily become entitled to the reputation of great discoveries in physic, to which reputation, however, we resign all claim.”—*Minutes of Evidence*, pp. 141, 142.

In consequence of the differences of opinion here alluded to by Dr. Latham, the Secretary of State for the Home Department, Sir Robert Peel (then Mr. Peel) wrote the following letter, on the 23d of June, 1823, to Sir Henry Hallford, the President of the College of Physicians :—

“In consequence of the illness which has long prevailed at the Penitentiary, and the differences of

opinion which have been expressed by medical men of considerable eminence with respect to the causes of the disorder, and the nature of the remedies which it is proper to apply, I am induced to request that you will bring the subject under the consideration of the College of Physicians, and that you will have the goodness to move the appointment of a Committee, for the purpose of visiting the Penitentiary, and of reporting to me their opinion of the nature of the disorder which prevails in that establishment, and upon the probable efficacy of the present course of medicinal treatment."

The Committee appointed consisted of Sir Henry Hallford, President; Doctors Henry Ainslie, Edward Ash, W. G. Maton, Thomas Turner, and Pelham Warren; and who reported upon the two questions submitted to their investigation as follows:—

"From the testimony of the medical officers, compared with the details given uniformly by the patients themselves, of the former stages of the disease prevalent amongst them, that the disorder has been of a dysenteric character. But we have to observe, that the patients are now far advanced towards recovery, and that the several symptoms which distinguish dysentery prevail no longer. Many, however, still continue ill of a milder complaint of the bowels. Upon the second question we report, *that the treatment by mercury, adopted in this disease, appears to have been very successful.*"

Of this fact Sir Robert Peel could scarcely have been ignorant. The very recollection of the report of the Committee of the College of Physicians surely ought to have convinced Sir Robert Peel of the vast importance of the important facts and truths I had the honour to submit to him to prove the infallibility of calomel in the cholera morbus, the leading feature in which disease is, the most determined and destructive dysentery that has ever appeared in the world.

It must also seem most extraordinary that the



London Board of Health of 1831, with Sir Henry Halliday their President, should so far have lost sight of, and repudiated, the use of calomel in cholera, which was nothing more nor less than a somewhat more determined stage of the same disease, and for the treatment of which when the *usual remedies resorted to were* “*unavailing,*” “*the treatment by mercury*” *had been very successful!*

Some discoveries may lay dormant for ages without any positive mischief resulting to mankind from their non-application. But the case is widely different with regard to duly ascertained and positive means for the preservation of the health and the lives of communities. While all the world is progressing, the College of Physicians are standing still. Hence extensive and numerous injuries to many of the best interests of communities daily take place. By maintaining obdurate silence and refusing to promulgate truths, they render themselves morally responsible for all the injury which other nations in consequence sustain. Every day, every hour, wherever cholera prevails, the neglect is productive of an immense sum of sickness, misery, and mortality, all of which would be prevented, if they would only get the better of vulgar prejudices, and assume the attitude of philanthropists and philosophers.

Dr. Latham says, “this remedy,” calomel, “has been employed for ten or fifteen years, by *the most intelligent medical practitioners in every quarter of the globe.*”

From this it would appear, that those who do not use it are any thing but “*intelligent medical practitioners.*” In this we perfectly agree with the heroic Doctor.

Dr. Latham, however, does not go sufficiently far back by which we may trace the rate the College of Physicians keep pace with the rest of the world, in adopting “*great discoveries in physic.*” It appears that Dr. Maclean, in the years 1788 and 1792,

made “a great many experiments to ascertain inductively the value of mercury as a remedy in various diseases in which it had probably never before been employed.” In a treatise which he published in 1796 on the subject, after stating the result of his experiments, he says—“From that period (1792) my confidence in the power of mercury, for the cure of all diseases of indirect debility, became so decided, that I determined to apply it in every case in which the ideas of my patients would admit of the practice, *even in diarrhœa and dysentery, the diseases in which the theory seemed the most difficult of reconciliation.*”

Dr. Maclean proved in the year 1796 the utility and vast importance of calomel in dysentery. Many of the College of Physicians in 1823 doubted its efficacy. The Board, from the College of Physicians, were at last obliged to admit, that it “*had been very successfully adopted in this disease.*” It is now forty-seven years since it was discovered, thirteen since they admit the successful application; and to this hour they have not adopted or publicly countenanced it.

Indeed it appears that it was only in the year 1832 that the Board of Health began to think seriously of the utility of calomel, or mercury, in the disease, for in their circular of January 1832 of Queries to Medical Practitioners they say, “Note whether any persons under mercurial salivation have been attacked by cholera!”

Surely there must certainly be something extremely wrong in all this? While the College of Physicians will not openly avow a conviction of their former ignorance, by admitting the value and vast importance of calomel, we find a late fellow of the College of Physicians, Dr. W. Saunders, in his work, “*Observations on the Hepatitis of India, and on the prevalent use of mercury in the diseases of that country,*” positively complaining that it had become “*domesticated even in the nurseries!*”

But so completely did the Doctors' disgrace, with



regard to the use of calomel at the Millbank Penitentiary Epidemic, which was "*scurvy and dysentery*," one of them, Sir William Blane, assumed that "mercury was prejudicial in scurvy; and he would dismiss a medical officer from the navy who should employ it." So would Dr. Baird, another of the witnesses; who "had never heard or read of the practice."

Now, if they had "*never heard or read of the practice*," they never could have known the *scientific* application of mercury in that disease to be followed by failure, or to be absolutely productive of mischief; then, upon what grounds could their *priori* objections to the practice be maintained? With what face of brass could they dare venture to dismiss the surgeon, who should successfully use a powerful medicine, the valuable properties of which they were themselves, by their own admission, unhappily ignorant of?

"Not only," says Dr. Maclean, "is mercury, in fact, a decidedly efficient remedy in scurvy; but its use, upon principle, was indicated precisely by the symptoms which would have deterred the school from its employment—the ulceration of the gums."

One of the greatest evils to which communities have been exposed, and had to contend against, has been the difference of the opinions of medical men as to the best mode of treatment of epidemic diseases, particularly so of the cholera morbus. This fact is particularly exemplified by the trial by a general court-martial in Fort William, Bengal, in 1818, of Mr. Charles Peers, M. D., for the disputes which arose between him and his superior officers. The superior officers insisting on the use of spirits of wine and camphor, or spirits of turpentine, instead of the oil of peppermint; while Dr. Peers would have it that it was useless, that those upon whom it had been tried had died; while the oil of peppermint had always proved successful.

This court-martial, and the proceedings which led to it, are most important, even at this remote period. In the first place, to prove that the public have suffered more from the misconduct of medical men, than from the disease; secondly, to show that the Board of Health were decidedly wrong in declining to receive information from any persons but medical men; as they would, in the other case, have obtained knowledge of facts which must have convinced them of the ruinous "*advice*" they were giving "*to families for the prevention and cure of this dreadful malady.*" "It was," they observe, "important to point out the instant measures which might safely and *beneficially be employed*" for the "means tending to restore the circulation, and maintain the warmth of the body." Accordingly, they recommend, amongst other trash, "*frictions with flannels and camphorated spirits.*"

In the letter of Mr. C. Peers to his superior, Mr. Browne, surgeon of the Bengal European regiment, dated "*Berhampore Hospital,*" 29th November, 1817, he says, that "he found patients lying upon bedsteads where they had been for half an hour at least, not only without help, dying as they were, but without their admission being even known, except to those who were in the ward in which they were placed;" that he "experienced the total impossibility of procuring aid, and what was required for such as were sent to the hospital in a dying state;" that for want of proper attendance some of the men "threw themselves out of the upper window in delirium;" that he "saw men fomented with their own flannel jackets for want of other;" that "medicines were put into broken bottles, and half bottles;" and "there were only two men to attend to the whole hospital, containing about 160 patients; and these two men had also to supply all the poultices then wanted, great as that number were."



Dr. Peers, in his letter, says: “ Without means procurable at the hospital, where they ought always to be ready ; without direction as to what you would wish to be done, I instantly determined upon what I saw indispensable ; and without attending yourself in such a case, or meeting the difficulty, you blamed me for what was unavoidable (using oil of peppermint, instead of camphor liniments), unless I had let the man die unassisted. This, therefore, I beg to say, cannot be passed unnoticed.

“ At this time, also, another case, of as great, or greater severity, was brought into the hospital in a dooly (palanquin), in which I was naturally led to employ the same means which had, to my conviction, so completely succeeded in the former case ; and when you came, at the usual visiting time, and more than an hour after the above-named patient had recovered, you found me employing those means, and, to my surprise, immediately renewed the expressions of disapprobation, in a manner so violent, and in terms which appeared to me so very improper in a public ward, and before a large number of men from other wards, assembled round the patient, attracted by his screams, and endeavouring to hold him during his violent contortions from excess of pain, that I must beg leave to notice them, that they may be retracted in the same public manner.

“ After you had discanted, at some length, with much apparent violence, on the means which had been employed (though you had avoided directing any other to the contrary), and saw the good effects, by the then quiescent state of the patient, compared with that violence which the surrounding men informed you had required the force of six persons to restrain : you did, before these men, loudly and vehemently reprobate those means, and repeated, that ‘ *camphor lint, or ol. terib. would have answered as well,* ’ though you knew what my answer had stated ; and I now

repeat, that we had *hourly experience of the failure of the former article*, and of the latter, there was not (as you also knew) any in the hospital.

“ It was at this time that an orderly serjeant came to say the warm bath was ready ; *i. e.* three hours after it had been ordered for a dying patient. You thought it was ready, but did not ascertain the fact ; and when I went to do so, suspecting the truth from experience, I found there was not more than half the quantity of water required. And *had* it been otherwise, this bath would not have been ready for use until some time after the patient would, and, I think, inevitably must, have been in the dead-house, if not relieved by the very means you was at that moment condemning, and the only ones procurable.”

Dr. Peers complaining to Mr. Browne that his neglect had imposed upon him additional duty, or otherwise the men must have died through neglect, says : “ It led me to the hospital at all hours in the night and day ; on one occasion, fifteen hours out of the twenty-four ; another gave me only two hours rest in the same space ; another occasion left me no leisure from six A. M. to nine P. M., even to change my clothes ; and ultimately to discontinue them, from lameness, &c., though I could not do so till such a general amendment took place as to enable me to discharge, from my own wards, thirty patients in two days, and to retire for unavoidable rest, with more satisfaction than I could do before.”

Previous to Dr. Peers writing this letter to Mr. Browne he had repeatedly complained of those monstrous evils to the superintending surgeon Mr. Keys, who would not notice them unless the Doctor addressed Mr. Browne, that official letter through him the staff of the hospital. The letter was then shown by Mr. Keys to the commanding officer of the regiment, Major Broughton ; who soon pointed out to Mr. Keys that he had fallen into a fatal error, in supposing by that letter they could rid themselves of Mr.



Peers, on any charges of disrespect and contempt of authority, or by representing him as a madman, without being most seriously implicated. It was, therefore, proposed that Mr. Browne should apologise to Dr. Peers in a letter for his offensive conduct; and that the evils complained of should in future be remedied. The apology was written by Mr. Browne, and presented by Mr. Keys to Dr. Peers. Dr. Peers then withdraws his letter of complaint. Mr. Keys the next day obtains from Dr. Peers the loan of the apology, under the most solemn assurance of safely returning it instantly; he takes it to Major Broughton who destroys it. Mr. Peers demands another apology to be written, in substitute for that destroyed. That is refused. Mr. Peers demands that his letter to Mr. Browne should be forwarded to the commander-in-chief. The authorities refuse to do so; and threaten Dr. Peers with bringing him to a general court-martial. Mr. Peers forwards a copy of the letter himself direct to the adjutant-general, with a letter in which he says, "as the evils continue to exist and increase, notwithstanding my daily representation, I named them in the same manner to the next superior officer Dr. Keys, superintending surgeon, who told me I must address Mr. Surgeon Browne on service, before he could notice the affair; and, as I was anxious to avoid this on every account, I continued to make such representations, and point out to Dr. Keys, as I had previously done to Mr. Surgeon Browne, the nature and dangerous tendency of the evils complained of and shown, without receiving any other reply than his repeating, "*I have told you what to do*, and why don't you do it, put it on paper; send him a public letter, referring it to me, and then I will notice it; but I cannot in any other way." \* \* \*

"In a few days Dr. Keys desired I would call at his house respecting the letter, and he then stated that the commanding officer, Major Broughton, having read my letter to Mr. Browne, had told him it was

his opinion, that the existence of such circumstances as were stated therein, rendered both him Dr. Keys, and Mr. Surgeon Browne, unfit for the situations they held ; and that, if my letter went to Government, it would fall severely upon each of them. He, therefore, had it to propose to me, from the major himself, as their joint opinion, that I should accept an apology from Mr. Surgeon Browne, which they both thought he ought to make, and withdraw my letter. My reply was, that I had no wish for altercation, beyond what justice demanded, and especially if such serious consequences were to arise to him Dr. Keys, and Mr. Surgeon Browne ; and he knew that I had done all that I could to prevent its becoming public, by having stated and shown each particular so repeatedly to Mr. Surgeon Browne himself ; that it was only in consequence of his, Dr. Keys, own express order, that I had written that letter, and sent it direct to Surgeon Browne, referring it to him as superintending surgeon, as the only way in which he would notice it."

When the commander-in-chief, Lord Hastings, heard of all those abominations and atrocities, so far from punishing the authors, they actually received his countenance and support. The adjutant-general, by order of Lord Hastings, wrote to Major-general Wood, commanding at the Presidency,—“In reply, I am directed to convey to you the commander-in-chief's sentiments upon the assistant surgeon, who has so wantonly intruded himself upon his Excellency's notice. The commander-in-chief has no intention of entering into any consideration of the various occurrences alluded to in Assistant-surgeon Peers's letter to Surgeon Browne, which, when considered as an address from an inferior to a superior officer, touching points of duty, performed under the eye of the head of the department Dr. Keys, seems so preposterous a production as to occasion doubts of the writer's being in his sound mind."

Lord Hastings' next commands, that “Assistant-sur-



geon Peers was to be called upon to make an apology to Surgeon Browne, for the *highly offensive and indecorous letter* addressed to him, the assistant-surgeon's superior officer, the apology to be directed by the commanding officer of the regiment, and approved by the commanding officer of the station, in whose presence, attended by Major Broughton, the superintending surgeon and staff of the station, and the two senior captains of the regiment, the apology is to be read and tendered to Mr. Browne by Dr. Peers, and then lodged with the commanding officer of the regiment. You will cause it at the same time to be signified to Assistant-surgeon Peers, that if he hesitates to comply, or shows any disposition to give further trouble, his Lordship is prepared to recommend to Government that Mr. Peers may be suspended from the service."

Mr. Peers having been suddenly summoned before the commanding officer, who had already fully obeyed the injunctions of the commander-in-chief by having the requisite document prepared, and the parties present to witness it, hastily read over to Mr. Peers the apology; who, being assured it was only for any military incorrectness he was called upon to apologise, and not for the facts which he had alleged in his letter, signed the apology. Dr. Peers having subsequently applied for, and been furnished with, a copy of the apology, perceived that it clearly also made him apologise for the facts he had advanced. He therefore instantly, in a letter to Mr. Browne, retracted the apology, as he "could not, consistent with his duty, apologise for known facts."

As Lord Hastings had stated, as his ground of disbelief of Dr. Peers's charges against his superiors, that "*he had doubts of the writer being in his sound mind,*" Dr. Peers very properly remarked, in reference to his lordship's letter demanding the apology, "as that document stated, respecting my letter, that it might be supposed '*the writer was not*

*in his sound mind,*’ and the facts named ‘*are not believed,*’—two points which must necessarily invalidate an apology,—I do most respectfully, and with all due submission, beg leave to say, that I cannot, consistently with my duty, apologise for the letter itself (sent in the discharge of my official duty), or find it compatible with those principles which I feel to be superior to every other consideration.”

To the utter astonishment of the unjust Marquis of Hastings the Doctor added, “in the same respectful manner, I do therefore beg leave to disclaim the apology as mine; and aver, that I am thus compelled to declare, as I now do, with an equal degree of respect, conviction, and decision, that I am unable to make or avow it as my deliberate and final act: that, alone, being so, which I now particularise.”

The confusion and rage with which Lord Hastings read this retraction soon showed itself. The atrocities which had been committed, and his lordship was desirous of concealing, Dr. Peers now demanded should be publicly inquired into. This his lordship was determined should not be done. He therefore ordered Dr. Peers into arrest, and preferred charges against him for “conduct unworthy of an officer and a gentleman; insubordinate, calumnious, and disrespectful; subversive of good order and military discipline;” in “forwarding to his Excellency, the commander-in-chief, a letter,” “calling in question the justice of an arrangement for the medical service of Berhampore,” after he had “*agreed to suppress, and did suppress the letter;*” for “disclaiming the apology after he had, agreeable to the orders of the commander-in-chief, signed, read, and delivered the said apology; under the false pretence that time had not been afforded to him to peruse at leisure the letter.”

Against this court-martial Mr. Peers, when before them, gave in the following “*protest:*”—

“I, Charles Peers, M.D., in the service of the Honourable East India Company, do hereby most



respectfully, but most solemnly, protest against being tried on the charges now exhibited against me,—**BECAUSE** they are founded upon a complaint of mine, made in strict conformity with the first article of the twelfth section of the articles of war, under the head of ‘*redressing wrongs* ;’ but which complaint has not yet been inquired into, nor have any of the allegations therein contained been proved by a competent tribunal to be false or groundless; nor has any other notice whatever been taken of such, my complaint, than naming a prosecutor to prefer charges against me, contrary to the rule and discipline of war: such a proceeding doing away with every means of **REDRESS** for an officer, whatever ill-usage he may have received.

(Signed) “C. PEERS, M.D., Assistant-Surgeon.”  
“Fort William, March 2, 1818.”

The Court found Dr. Peers *not guilty* of forwarding a letter “*presumptuously arraigning and calling in question the justice of an arrangement made by Government for the medical duties of Berhampore,*” but the Court were of opinion that he was “guilty of irregularly forwarding the letter.” The Court found him guilty of “disclaiming an apology made by him,” but they acquit him of its being done “under the false pretence that time had not been allowed him to peruse the letter,” and of “conduct unworthy of an officer and a gentleman; insubordinate, contumacious, and disrespectful, and subversive of good order and military discipline.”

But this was not all. The Marquis of Hastings directed an additional charge to be preferred against Dr. Peers, viz.: “For having, in a letter under date the 15th ult. (Oct. 1818), to the adjutant-general, made the following assertion:—‘I could have summoned nearly the whole regiment, instead of such only (meaning one hundred and three witnesses) as have volunteered, without my solicitation:’ such assertion (that the individuals specified volunteered to give their

testimony) being a positive and deliberate falsehood, disgraceful to the character of a gentleman.”

This charge is dated “Adjutant-general’s office, Presidency of Fort William, the 20th November, 1818.”

“By order of His Excellency the Commander-in-chief. (Signed)

“JAMES NICOL, Adjutant-General of the Army.  
(True copy) “J. BRYANT, Judge Advocate General.”

The sentence of the court, upon this additional article, is in the following words :—

“On the additional charge, the court are of opinion, that the prisoner, Dr. Peers, is *not guilty*, and do fully and honourably acquit him.

(Signed) “J. GORDON, Maj.-Gen. and President.”

It is almost impossible to conceive any thing half so contemptible as the position in which his Excellency the Commander-in-chief, the Marquis of Hastings, had brought himself to by preferring the scandalous unfounded charge against Mr. Peers, which he thus had done; and his acquittal upon which clearly established the truth of the charges he had laid against his superiors.

Mr. Peers, in his defence, most significantly says : “I had yet to learn that what I saw superiors do, I must see in silence. I acted with those common feelings which ought to influence every professional man, who is anxious for the welfare and safety of his patients; and I thought, when I saw them in want of what that safety and that welfare made indispensable, I had only to represent to my immediate superiors, and all would be well. I stated that men were coming in hourly dying with the cholera morbus, and no medicines to give them;—that water was given for medicines, and numberless other abuses; but all in vain.”

Dr. Peers is well known to the medical profession



in London. He had practised many years, and was advanced in life before he went to India.

So much for Lord Hastings' honourable, straightforward, and honest discharge of the functions of Governor-General of India.

It is proper to state, that the arrangements of the Honourable East India Company for the comforts and welfare of the sick, of every hospital, are most liberal and ample. The allowances of the medical gentlemen themselves are abundant. A surgeon of a regiment has so much for every hundred men a month to provide them with medicines, &c. All the evils at Berhampore arose from Mr. Browne's parsimony in not appropriating those allowances to their proper use.

Dr. Peers, notwithstanding his honourable acquittal, became an object of such atrocious persecution, till he at last was obliged to resign the service. He set up in Calcutta in private practice, and in a short time died, the victim of grief and despair!

It was at Berhampore where the disease first attacked the Europeans. Before it broke out at Berhampore, it first made its appearance at Jessore, where there was a large detachment on duty from the Moorshedabad provincial battalions; which at that period was under my command. The havoc which the disease committed upon them, compelled me to relieve the guard; but the new guard, on their arrival at Jessore, fell victims to it in an equal ratio, while the men who were relieved, when marched away, ceased to have it. At Moorshedabad, three miles from Berhampore, according to the returns of the magistrate, the deaths were, for six weeks, from 1000 to 1100 a day.

## SECTION III.

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### THE EVILS OF QUARANTINE LAWS, AND NON-EXISTENCE OF PESTILENTIAL CONTAGION.

When it is considered the dreadful sacrifice of human life which has taken place by the cholera, and by the impolitic enforcement of Quarantine Laws, since I had the honour to submit my work on cholera to Lord Melbourne, April 23rd, 1835, it will be difficult to divest ourselves of a sense of the vast moral responsibility he has incurred by his neglect and disregard to my suggestions. It is difficult to say what the British nation may think of a prime minister of the crown of England, who could be so regardless of the welfare of mankind as to reject the important truths I had the honour to set before him. Other nations will probably look upon him as any thing but a benefactor to mankind. The thousands and tens of thousands of human beings now mourning over their late bereavements, will, when they know how great a share his neglect has had in producing it, offer up any thing but prayers in his behalf.

At Palermo, this year, 30,000 persons have perished by cholera. At Naples, since October 1836, 23,000 have died of it. At Rome, the deaths have been 300 a day. At Malta, out of 280 persons attacked one day, but eight survived. At Rastchuck, on the south of the Danube, of a population of 20,000 souls, 1800 have perished in one week !

It is painful to ruminate over the doleful catalogue of human misery ; let us look to the cause of it.

One of the papers says, that at Malta “ the doc-



tors, if they deserved to be called such, insisted upon treating the disorder as contagious, and refused to touch or assist the poor creatures in the hospital, many of whom perished from actual neglect and famine rather than disease."

This then is the effect of Quarantine Laws, and "*received opinion*" of the doctrine of pestilential contagion!

At Palermo the physicians refused to attend to the sick, and were abandoning the city, when the populace murdered all they could lay their hands upon.

What has been the chief cause of all these melancholy and afflicting evils? The answer is evident, *The Quarantine Laws*, and the conduct of the English Board of Health in 1832,—Sir Robert Peel's not being able to "*see the utility of the inquiry I had suggested*," and Lord Melbourne's disregard to the important facts I had the honour to place before him.

By the Bengal "*Report*" on cholera, we find that in no quarter of India did its contagious nature "*form any part of popular belief*." At page 124, with respect to the faculty it is stated, "*The whole body of the medical officers in Bengal, who have had an opportunity of seeing and remarking on the disease, without a dissenting voice, concur in declaring that it is not contagious*." Of between 250 and 300 medical officers, "*most of whom*," says the Report, "saw the disease largely, only THREE persons were attacked, and ONE death only occurred."

In the face of this "*Report*" the College of Physicians, not one of whom had ever seen the disease, declared the cholera to be *ten times more contagious and infectious than the plague*; and, that *the less intercourse man had with man the better*!

"Had the public," says Professor Lizars, "instead of being terrified with the bugbear of contagion, been warned by the same authorities of this undisputed fact, that cholera is epidemic—that it has been cast upon us by Providence, which human power cannot

avert—and that no man could tell who would be afflicted or who would escape, the same precautions as to health, temperance, cleanliness, and attention to the wants and the comforts of the poor, the kindly intercourse and best affections would have been preserved; hundreds of miserable creatures, (*millions he might have said*) the hapless victims of antiquated prejudices would have been spared.”

The Russian *Report on cholera* observes: “In the opinion of medical men, it is not infectious or communicable by human intercourse, notwithstanding the dreadful mortality occasioned by it. That the great extent of the Steppes, the period spent in crossing them, which varies from thirty-three to ninety days; and the healthiness of all the merchants, drivers, and of other people, who have arrived at various places with caravans, sufficiently show that these persons did not carry any infection along with them: that, if it be assumed that an infectious matter may be concealed and transported in goods, it is inconceivable that such infection should not have been communicated in one way or another to the people accompanying the caravan, on occasion of the daily packing and unpacking of the goods, and the constant residence of the merchants and drivers in the encampments.”

Is there one member of the College of Physicians who would now venture to assert, that the cholera is contagious and infectious? If not, what must go with their doctrine of contagion in the Plague?

This like many other pernicious and deep-rooted prejudices in time must give way. As Dr. Charles Maclean in his “*Representation to the Spanish Cortes*,” during the Barcelona fever raging, protesting “against all projects of sanitary laws,” says, “the questions here at issue are only fit for the consideration of medical academies, or the decision of physicians, is a great and pernicious error. Academies (and I am not aware that medical ones ought



to be exempted), are too frequently only embankments to prevent knowledge from spreading beyond certain boundaries, or from diffusing more equally its benignant influence through the various classes of the community. Like the cloistered monks of old (the modern monks are *ex-necessitate* comparatively gentlemen), who, whenever a ray of light broke into a cell, were ready to cry fire! Academicians, always retaining somewhat too much of the monkish and exclusive principle, are generally more intent on causing their *dicta* to be respected than ascertaining whether they be true. As well might the question respecting the existence of pestilential contagion, and the utility of sanitary laws, be referred at once to a Junta of superintendents of quarantine and lazarettoes, as to a medical academy. *They are questions of fact, not of physic, of which all persons of liberal education are as* COMPETENT TO JUDGE *as physicians*; and even more so in proportion as they are more exempt from the influence of preconceived notions on the subject. If it were desired to have a decision in favour of the doctrine of pestilential contagion right or wrong, there could not be a better plan to place on the committee of public health of the Cortes, physicians or academicians, who should all be antagonists. If it were desired to render the labours of the committee null, the plan would be to put on it an equal number of members of each opinion. But in order to ascertain the truth, the only effectual mode is omitting physicians altogether, to select a committee wholly consisting of known philosophers, men of letters, lawyers, and logicians; men accustomed to elucidate, not to confound; to unrid-dle, not to mystify; and whose self-love could not be affected by the decision that might be given."

These are very important facts, and emanating, as the remarks do, from so eminent a man as Dr. Charles Maclean, they demand more than common attention from this nation, and the world at large. In-

deed, it will soon appear, as Dr. Maclean will have it, that “on such questions *physicians*, instead of being considered as authorities from which there is no appeal, ought to be interrogated, *viva voce*, respecting the grounds of their opinions. They ought to be examined and cross-examined, like witnesses in a court of justice. Such alone are the means by which truth, on this subject, can be thoroughly ascertained.”

The disciples of pestilential contagion have their seat in the College of Physicians, and at the head of whom were Drs. Pym and Barry; the latter of which, the reader will remember, was sent with Dr. Russell, at a great expense, to Riga, to report upon the true nature of the disease, which had already been pronounced upon by thousands of medical men, equally well informed, if not more discreet in their decisions.

The plague, the cholera, yellow fever, typhus, dysentery, the Milbank Penitentiary epidemic, and a variety of others, have all been pronounced as contagious, infectious, importable, and communicable from person to person, or conveyed in goods, and thus generated in the atmosphere.

The alarm which the Milbank Penitentiary dysentery and scurvy created in 1823 was productive of some good. It caused a committee of medical men to inquire into the origin of the disease, its properties, and to report whether it was contagious or not. The doctors differed in opinion; and when doctors disagree who is to decide? Mr. A. White was “*disposed to think the disease contagious.*” Sir James Macgregor, who “had, during a course of thirty years, occasionally seen sea scurvy, had never seen it contagious; but he was by no means prepared to say that it was not.” Sir Gilbert Blane, an old doctor at Portsmouth, declared “*it became infectious in a whole district there;*” but was obliged to admit that he “*had never been able himself to ascertain whether it be contagious or not contagious.*”



So much for those learned doctors. Their report was, of course, all of the same piece : they did not once allude to a specific contagion, the object of their inquiry, that would not do, they were too wise, or rather too discreet to do it while Dr. Maclean was close at their elbow to explode their silly doctrine. To mystify the thing as much as possible, they tell us that which every body knows, viz. that “ *some injurious influence has been in operation which has hitherto eluded their detection.*” “ The difficulty of detecting this cause,” they confess, “ *is inherent in the subject itself.*” “ If it consist of *contagion*,” they say, “ and such probably may be the case, dysentery will still probably linger in the prison as long as any remain there who have not suffered it ; and then it will entirely disappear.”

For once we have the contagionists in their den. Here is a disease raging in a prison, within close confined walls, which they admit they cannot detect the cause of. Locality has nothing to do with it, for they enter into an elaborate vindication of the salubrity of the situation. They have the disease in close quarantine, locked up within the walls ; here it was to continue “ *as long as any remained there who had not had it ;*” when, like a vampire, having glutted itself with the blood of its victims, “ *it would entirely disappear.*”

If this is not a humiliating picture of barbarous superstition and consummate ignorance, it is difficult to say what would be.

If epidemics depended upon contagion, no officers of the establishment who approached the patients, no medical man, or any other, who made the most transient visit to the sick, could escape the disease ; and all those diseases being capable of affecting the same person repeatedly, their ravages would never cease until communities were extinguished. Consequently, had contagion existed in the Penitentiary, the dysentery would not have ceased in the prison, or “ en-

tirely disappeared," as erroneously inferred, "*as soon as all its inmates had been once affected.*" On the contrary, it would proceed in a perpetual circle, affecting again and again those who had already repeatedly recovered, as long as an individual of them remained alive."

We have, at the present moment, a very important and decisive case to prove the non-existence of pestilential contagion, in the French Government steamship, the *Leonidas*. On the 12th of July she arrived at Marseilles from Constantinople, and was instantly placed under quarantine. Fifteen days afterwards three supposed cases of plague appeared on board too certain. Two proved fatal. The ship is instantly ordered for quarantine for 100 days from the date of the last death. The remainder of the crew, about twenty in number, and the whole of the passengers, twelve in number, have all escaped the infection, are still riding at quarantine, in good health and spirits.

Now, if the plague was infectious and contagious, would any one individual in the *Leonidas* have escaped catching it under the rigour of Quarantine Laws?

Is it not really too bad, in these days of advancement of knowledge, that the world should be exposed to the horrors of Quarantine Laws out of deference of opinion to the College of Physicians?

The contempt with which the opinions of the College of Physicians on the doctrine of pestilential contagion are held, even by the rest of the profession, who all seem afraid to look the hydra in the face, is notorious. Well, indeed, may it be so, when we find the most grovelling of the admirers of the Board of Health, the most fulsome of their panegyrists, Dr. Brown of Musselburgh, in whose opinion "*it is as clear as the sun at noon-day that cholera is infectious,*" declaring that "the anti-contagionists have only one very strange foundation



to stand upon ; viz., *that every one does not take the disease.*" While, according to the doctrine of Sir William Blane, if the Milbank dysentery had been contagious, it would not have condescended to have left the prison," or "*disappeared,*" "*as long as any remained there who had not suffered it !*"

But it is all of a piece with contagionists. Of Doctors Barry and Russell, the founders of the doctrine of contagion in the cholera, Dr. Bell says ; "Contagionists, such as Drs. Russell and Barry, certainly involve themselves in strange inconsistencies ; for while, on some occasions, they vary like lines in the cordage and sails of a ship, on others they suppose it to lay from seven to thirty days. But this is nothing :—Benedictus says, that the yellow fever or plague lay in an incubated state, in an old rag, for seventeen years. While Astrue declares, that the chaste nuns of a certain nunnery were affected with some dreadful malady by the impurities of the atmosphere.

Talking of the yellow fever at Gibraltar, Mr. Frazer says, "before the arrival of Dr. Pym in the garrison, towards the termination of the malady, the word contagion had nearly become obsolete. So clear and satisfactory were the proofs of the endemic origin of the disease, to those who had witnessed its rise and progress, that no one doubted the accuracy of this doctrine ; and Dr. Barry himself, soon after his arrival, drew up a paper setting forth a variety of arguments corroborative of the same. *The Chirurgical Medico-Review*, says, "The question of importation or domestic origin, as respects the Gibraltar fever, is one of immense interest, and deserves a philosophic investigation. This inquiry has been opened in France, and now in England. Our own impression was stated while giving an *expose* to Dr. Barry's paper, read before the College of Physicians ; and all that we have since learned on the subject only tended to strengthen our conviction, that the Gibraltar fever was just as much imported from the Havannah with a

cargo of cigars, as from Old England in the *snuff-boxes* of Doctors Pym and Barry."

The question of pestilential contagion and sanitary laws, is one of immense magnitude to the future welfare and interests of commerce, prosperity of nations, and the preservation of human life. It is greatly to be lamented that Sir Robert Peel could "*not see the utility of the inquiry I had suggested*," for the purpose of obtaining the most conclusive and satisfactory evidence in favour of the doctrine of non-contagion, which here presented itself to a Prime Minister of the Crown of England. It is equally to be lamented that Lord Melbourne should have so disregarded my solicitations urging the inquiry. What awful consequences have there not in consequence ensued! Besides the dreadful sacrifice of human life, we find the trade and commerce of the world, time after time, and at place after place, paralyzed.

While parts of Europe are scourged with the plague, the cholera, and yellow fever, the former has made its appearance in our Asiatic dominions, and in April, at Joudpore, in a few days carried off, at a small village, 5000 persons. In the Marwar district it has swept away 50,000 of the inhabitants. The greatest consternation prevailed, the most ruinous and disastrous results ensued; but all from one source, viz. the neglect of his late Majesty's Ministers to adopt those measures which had been so repeatedly urged upon them.

Is it any longer to be tolerated, that in consequence of the blind prejudice of a few bigoted individuals, "the whole of the human race should" be exposed to "perish?"

Sanitary laws are founded on the assumption, that epidemic diseases depend upon a specific contagion. This doctrine must be distinguished from that which relates to simple contagion, or to the *virus* of known contagions, with which it has been frequently and purposely confounded, by the title of "*the doctrine of pestilential contagion*."



According to this system, the specific *virus* of each epidemic differs, of course, from that of every other; and thus, as many *invisible* and *unknown* contagions, as there are epidemics, are to be restrained by positive laws; whilst we are confessedly unable, by the same means, to restrain the contagions that are *known* and *palpable*.

The professed end of sanitary laws, then, are to prevent the exportation, importation, and spreading of pestilential contagion. Their means are, accordingly, for the first, airing or purification of goods, and patents or bills of health; for the second, quarantine and lazarettos; and for the third, lines of circumvallation; ditches; single, double, and treble cordon of troops; single, double, and treble walls; and, in general, all modes of separation, seclusion, and restriction.

In the whole history of legislation, in the world, a superstruction so vast and so pernicious, raised upon a purely imaginary foundation, and supported by a barbarous superstition, is without a precedent or parallel.

A striking illustration of the injurious consequences of ignorance of the true causes of pestilence, or a belief in the existence of an imaginary cause, or an indecision between opposite opinions, is to be found in the fate of the centre division of the Anglo-Indian Army in 1817, in the Report drawn up by order of Government, under the superintendence of the Bengal Medical Board, by their secretary, Assistant-Surgeon Jameson.

From the 6th to 8th of November, 1817, cholera attacked the centre division of the grand army, then encamped under the personal command of the Marquis of Hastings, near the banks of the Sinde, in Bundelcund.

“ It was here that the disease put forth all its strength, and assumed its most deadly and appalling form. It is uncertain whether it made its first ap-

proaches on the 6th, the 7th, or the 8th of the month. After creeping about, however, in its wonted insidious manner, for several days, among the lower classes of the camp followers, it, as it were in an instant, gained fresh vigour, and at once burst forth with irresistible violence in every direction. Unsubjected to the laws of contact and proximity of situation, which had been observed to mark and retard the course of other pestilences, it surpassed the plague in the width of its range, and outstripped the most fatal diseases hitherto known, in the destructive rapidity of its progress. Previously to the 14th, it had overspread many parts of the camp; sparing neither sex nor age, in the undistinguishable virulence of its attack. The old and the young, the European and native, fighting-men and camp followers, were alike subject to its visits; and all equally sunk in a few hours under its most powerful grasp. From the 14th to the 20th, or 22d, the mortality had become so general as to depress the stoutest spirits. The sick were already so numerous, and still pouring in from every quarter, that the medical men, although night and day at their posts, were no longer able to administer to their necessities. The whole camp then put on the appearance of an hospital. The noise and bustle, almost inseparable from the intercourse of the large body of people, had nearly subsided. Nothing was to be seen but individuals anxiously hurrying from one division of the camp to another, to inquire after the fate of their dead or dying companions; and melancholy groups of natives bearing the biers of their departed relatives to the river. At length, even this consolation was denied to them; for the mortality latterly became so great, that there was neither time nor hands to carry off the bodies, which were then thrown into the neighbouring ravine, or hastily committed to the earth, on the spot on which they had expired, and even round the walls of the officers' tents. All business had given way to solicitude for the suffering. Not a smile could be



discerned, nor a sound heard, except the groans of the dying, and the wailing over the dead. Through the night especially, a gloomy silence, interrupted only by the well-known and dreadful sounds of poor wretches labouring under the distinguishing symptoms of the disease, universally prevailed. Many of the sick died before reaching the hospital; and even their comrades, whilst bearing them from the out-post to medical aid, sunk themselves, suddenly seized with the disorder. The natives, thinking that their only safety lay in flight, had now begun to desert in great numbers; and the highway and fields, for many miles round, were strewed with the bodies of those who had left the camp with disease upon them. It was clear that such a frightful state of things could not last long; and that, unless an immediate check was given to the disorder, it must soon depopulate the camp. It was therefore wisely resolved by the Commander-in-Chief, to move in search of a healthier soil and purer air. The division accordingly, on the 13th, marched in a south-easterly direction towards Talgong and Sileia; and the several intermediate halts on the 19th crossed the clear stream of the Betwah, and upon its high and dry banks at Erich soon got rid of the pestilence, and met with returning health."

This single event ought to have been enough to establish the immense importance to Nations that an accurate knowledge should prevail respecting the causes of epidemic diseases; and consequently the "*utility of the inquiry*" I had "*suggested*" to Sir Robert Peel, and subsequently to Lord Melbourne, is apparent.

It is really astonishing how very coolly, and if not indifferently, a prime minister of the Crown of Great Britain can ruminate over the doleful catalogue of the annual number of victims to sanitary laws, without bestirring himself to examine into the true or false basis upon which they are founded.—It is, moreover, most surprising that the facts set forth from time to time in the newspapers, relative to evidence of non-contagion

in pestilential epidemics should not arouse him from his lethargy.

Lord Hastings in removing his army from the pestilential atmosphere in which they were encamped, only followed the example of Napoleon with the French army in Syria. "We are informed by Las Cases, that Napoleon conceived the plague was caught by aspiration as well as the touch; and he maintained that the greatest danger and cause of the infection spreading, arose from fear; that its principal seat was in the imagination: all those, he remarked, who gave way to terror uniformly perished. The principal remedy was moral fortitude. He then stated having touched some infected with the plague when at Jaffa, and many were saved by being deceived as to the real nature of the malady for two months. Napoleon further observed, that the best means of preserving the army was to proceed on the march, giving the soldiers great exercise or fatigue, and keeping the mind occupied, were found to be the best guarantee against infection.

"The French army in Syria lost seven hundred by the plague. Desgenetes, chief physician to the army, closely attended the hospitals, visited every patient himself, and tranquillized their apprehensions. He maintained that the glandular swellings, which were taken to be symptoms of the plague, were those of a species of malignant fever, which might easily be cured by care and attention, and keeping the mind easy. He even went so far as to inoculate himself, in the presence of the patients, with the suppurated matter from one of their buboes, and proceeded to cure himself by the same remedies which he administered to them. Having restored to the soldier that tranquillity (the philanthropic devotion—generous and useful) of mind so necessary to convalescence, he perfected by his care, assiduity, and the exertions of his talents, that cure which he so happily undertook, and



the far greater number of his patients were completely restored."

Surely all these facts tend to prove that it is a national disgrace, that so much selfishness, barbarism, and ignorance should have been displayed by the Board of Health of England in 1831 in their Proclamations in the *Gazette* of London on the doctrine of contagion in the cholera. Even the admission now of this fact, cannot obliterate the direful responsibility that has been incurred by the evil and fatal example set to other nations, some of whom have reproached us for it in no measured terms.

We find that during the last month, the noble example set by Desgenetes, has been followed in Smyrna by "the French Physician, Dr. Bulard, who inoculated himself with the plague, and is perfectly convalescent, but still in quarantine. The archbishop, the grand vicar, and all the foreign consuls having been to visit him."

What will our far-famed contagionist, the Royal College of Physicians, say to this? What will they think of "Dr. Ludlow persisting" (as the correspondent of the *Morning Herald* at Constantinople says) "in treating that frightful malady as a curable disorder. While others were dying around, nearly all his patients recovered in a few days, whilst he himself, although constantly handling the worst cases, never experienced ill effects as regards his health." The same authority states, that when Mr. John Showers, the head engineer of the Turkish steam boat, died of the plague, "he was not abandoned during the rapid progress of the malady; many of his friends were around him, and his wife was with difficulty dragged from his arms; yet not one of them caught the disorder." The correspondent of the *Morning Chronicle*, speaking of contact, says, "This latter precaution, if we adopt the prevailing opinion of medical men in this part of the world, is superfluous. Non-contagion is decidedly in

vogue, and its advocates appear to become as confident and numerous, with respect to the plague as the cholera."

While such is the state of opinion on the plague by experienced and rational men, we find the sanitary code adopted in England with regard to the cholera, now for the first time to be put in force in India for the plague. In *The Times* of the 13th, we find in an extract of a letter, dated Sauger in the Decan, 15th April, 1837, that "at Joudpore within five miles of Neemuch, and four marches from here, 5000 in a few days in a small village, so many died that there was no wood to burn the bodies, or indeed people left to do it. Sir C. Metcalf has issued a very long minute for its prevention, and for the protection of the western frontier; and, I believe, four companies are to go out from this to protect the Ghauts, but if they are not quick about it, I fear the precaution will scarcely be of use!"

This will please the College of Physicians mighty well. They themselves were apprehensive "*it might become necessary to draw troops around affected places, if the disease (the cholera) should even show itself in this country in the terrific way in which it had appeared in various parts of Europe.*"

Sir Charles Metcalf's minute of council for "*the prevention of the plague*" must be a curious, if not instructive, document, which I should well like to see; and I trust it will be published for the benefit of the world at large, although he does not happen to be a *medical man*.

A document of no little importance at the present moment, is the

“ PROCLAMATION OF THE BOARD OF HEALTH OF  
GENOA, 27TH AUGUST, 1835.

“ As long as the Board of Health of this city entertained hopes that the cholera morbus, which was raging in Provence and Nice, could be prevented from spreading in the duchy, they put in force the severest



precautions prescribed by sanitary regulations, considered the most efficacious to attain the object, under the impression that the distemper was of an infectious kind.

“Experience, however, has proved here, as well as in other places, the inutility of these provisions. Facts are more convincing than human reasoning. Nations that have been afflicted by this scourge committed the same errors, and have been subsequently taught by experience.

“The appearance of the disease amongst us, notwithstanding” the cordons sanitaires, “the several cases which took place at a great distance from one another on individuals that had no suspected communications, the persons that fled from Nice and Cunio, who did not infect most of the places they went to reside in, and the disease breaking out at so late a period, as not to attribute to them the cause of its introduction, as also the great number of individuals who, entirely devoting themselves to the service of the sick in the hospitals of Genoa and its neighbourhoods, have all remained free from the disease.

“In consequence of so many repeated proofs, government wisely abandoned all the measures which, after proving useless, became injurious by leaving an awful impression, and thereby still more uncertain recovery of the sick, as well as occasioning expense extremely heavy to the citizens and artisans.

“It is also proved that the greatest part of the victims, whose loss we have to deplore, is from disorders and fear.

“Regular living, good spirit, and confidence in Divine mercy, are the principal preservations against the prevailing pestilence.

“The Board in conformity to this wise measure, and in pursuance of superior orders, resolved that the circulars of the 6th and 10th, and their proclamation of the 13th inst., should be strictly attended to, and that the following regulations should be put in

force in Genoa and its dependencies as have been practised in other places, viz. :—

“1st. To leave it entirely to the care of the friends of the sick, using proper precautions, during the malady, without putting any guard in the house, merely suggesting to execute the same precautions that the medical man who attends the sick would use for himself, and would consequently point out to others.

“2nd. In event of death, to air and purify the effects which served for the use of the sick; and after the people who attended, and the grave-diggers who buried the deceased, shall have washed themselves with lime water,” *acqua di cloruro di calce*, “the house and people will afterwards be in free pratique.

“3rd. To bury the bodies in an open field, in a hole eight palms deep, covered with lime.

“4th. *Not to prevent commerce and intercourse*, not to separate any private dwelling, or, if it should be considered of an infectious kind, yet unnecessary restrictions are to be avoided, which will only produce serious injury.

“For the said most excellent and illustrious Board,  
(Signed) “C. COSTA, Secretary.”

“Genoa, August 27, 1835.”

How different has been the conduct of the Board of Health of England? They produced the utmost alarm, dismay, and confusion; they calmly contented themselves with smoking their cigars, ruminating over the daily Bills of Mortality, and pocketing their salaries. They have ever since remained quiet, leaving the British public and the world to shift for themselves!

The wise and humane proclamation of the Board of Health of Genoa, does indeed form a strange contrast with that of the London Board; and it will be considered as a reflection upon this nation, upon Lord Grey's government, upon Sir Robert Peel's, and upon Lord Melbourne's, and every succeeding ministry,



until such time as the Board of Health have been compelled publicly to renounce the “*errors*” they “*committed*.” This event, however, I fear, is not likely to take place. The votaries of the doctrine of pestilential contagion reverse the order of things. “*Facts*,” say the Board of Genoa, “*are more convincing than human reasoning*.” With the Contagionists of England, *human reasoning is more convincing than facts!*”

Dr. Thomas Brown, of Musselburgh, in his fawning letter to the Board of Health, says, “*I believe it may be here stated as a truth, that two men who were employed to take up a body at Tranent or Preston-pans, for the purpose of dissection, have both died of cholera.*”

This *belief* of the doctor induced him to publish his letter addressed to the President of the Board of Health, in which he is pleased to declare, “*the most determined means for isolating every case should be adopted, not only removing the infected person to an hospital, but also placing the whole family under surveillance.*”

So much for BELIEF *v.* FACTS!—Professor Lizars says, “*It is as free of contagion as a cut finger;*” but Dr. Brown will have it, “*It is as clear as noon-day that it is contagious.*”

Another contagionist, Dr. Moir, in his work on Cholera, tells a very funny story about a Mrs. Shivers, how she caught the disease; and how she was frightened and *shivered* to death. The doctor says, “on the evening of the day when cholera first manifested itself in Musselburgh, in the case of Wilkie’s wife, the daughter-in-law of that woman carried out the blood which had been abstracted from her arm by Mr. Sibald, and threw it into the *mill-dam*, which runs nearly under the windows of the houses on the opposite side of the street. *Mrs. Shivers*, the wife of a hatter, *chanced to be leaning out of them at the time*, and the vessel was *emptied* in the water within a few yards of her. She was shortly afterwards seized with

sickness and shivering, and on the following day was seized with the disease, of which she died."

"Facts are more convincing than human reasoning," and the manner in which Mrs. Shivers caught the disease, will to the contagionist's mind be conclusive evidence of the wisdom of quarantine laws, and the infallibility of the doctrine of contagion.

A curious "*fact*" is given by Dr. Brown, of the manner in which contagionists can render themselves secure, and, as it were, almost bomb-proof against contagion.

The Doctor is a great moralist, as well as contagionist. He is, moreover, a philosopher of the first water, and might, with great advantage to himself and also to the country, be entreated to accompany Mr. Buckingham, the *tee-totaller*, on his voyage round the world. It is impossible to say what mighty discoveries they might make in Japan or China, by their *joint-stock* experience. The doctor is a great advocate for "*sobriety and temperance*." So is Mr. Buckingham. But the doctor has some advantage over Mr. Buckingham for priority of discovery. The learned doctor declares that "*soup*" is an excellent substitute for "*solid diet*;" and that starvation with the poor is almost equivalent to gormandizing and guttling with "*the more substantial classes of society*."

The doctor says, "*he is satisfied that the further progress of this horrible disease will prove to the world the great benefits of sobriety, temperance,*" &c.; and he adds, *he was quite sensible of its exerting influence over him.*

The doctor thus explains what he means by "*sobriety and temperance*." He "*took care*," he says, "*never to visit any one before swallowing some breakfast, with half a glass of the very best brandy after it, again taking a glass of the best port or sherry, about one o'clock, with a biscuit; and dining regularly at, or as soon after four as possible, upon a plain, but rather solid diet; but if he ate of several dishes, he*



*preferred the good old Scotch custom of a dram to the wine, and found himself much lighter after this last practice."*

Now, this is the *prescription* of a contagionist to the "*Central Board of Health*," as the "*means of prevention of the horrible disease*."

This sage advice may have been very acceptable to Sir Henry Halford, and the College of Physicians, because it was completely in unison with their practice; as they always *lecture after dinner*; but it is very odd, if it does not appear to most people's ideas more like GORMANDIZING, than "*sobriety and temperance*."

It was thus, in his funny manner, that Mr. Brown maintained his doctrine, that "there should be no *revelling, feasting, and extravagance*," because "*the public distress gave ready vent for all our superfluous enjoyments*." We should almost be disposed to think that the doctor wrote his essay on "*sobriety*," after he had "*ate of several dishes*," and after he had "*followed the good old Scotch custom of a dram*;" and that he was "*lighter after*" it, when he said, "*the regimen I have recommended can only be obtained by the more substantial classes of society*;" and with regard to the other, the "*difference is in a great measure counterbalanced by the soup kitchen*."

The "*Contagionist*," besides gormandizing and guttling himself, *before he would visit a patient*, informs us how he fortified himself against infection. "*I washed my temples and forehead*," he says, "*with aromatic vinegar and spirits of wine* (the doctor again at the spirits) *and camphor, mixed with a little water, every time I returned home, and also applied the mixture to my clothes; and these, together with chewing cinnamon, and keeping a regular state of the bowels, formed the whole of my defence*."

From the doctor's own account, notwithstanding all his guttling and ablutions, he several times narrowly escaped. Nay more, he positively had the disease, for

he says, “ in eight days *I got the better of my different ailments ; my pulse became regular, and I now enjoy better health than before the scourge came amongst us.*”

So much for a contagionist. Query, are not the causes of the irregularity of his, the doctor's, pulse explained by his good living ?

I hope the good-natured doctor will have the kindness to excuse the freedom with which I have made use of his letter to Sir Henry Halford, as President of the College of Physicians. It was essential for the public good these explanations.

In order to deprive the learned doctor of all cause, however, of complaint, as a sample of a contagionist, or of being singled out from amongst the mass of the medical profession as an object deserving of *alteration for his dinners*, I will introduce a paragraph which appeared in *The Edinburgh Patriot* newspaper, on the 31st of January, 1835 :—

“ We see announced in the London papers, *a splendid dinner* given by Sir Henry Halford to the Cabinet Ministers on Monday last ; and that *afterwards* they retired to the College of Physicians, of which Sir Henry Halford is the President, when they, and a party of about seven hundred, were entertained by the learned baronet, by his reading a very interesting manuscript, ‘ Observations on the treatment adopted by medical men, in the cure of various complaints, and related many amusing anecdotes of the remedies they applied.’ We are at a loss to know whether those ‘ *amusing anecdotes*’ relate to the practice observed during the cholera panic, and the dreadful scenes which were in consequence witnessed in different parts of the kingdom. We can hardly suppose it to be possible that ‘ *amusement*’ should have been derived from so terrible a source of affliction ; although we are well aware that there was little sympathy or humanity demonstrated on the occasion by the measures and the conduct of the Central Board of Health. Indeed, if we are not very much mistaken,



there is at present a very serious responsibility attaching to the President and Members of that Board for their conduct, and that of subordinates acting under their authority on that occasion, it will be as well they refresh their memories upon. The object and the drift of the President's lecture and '*amusing anecdotes*' appears to have been to smother with the grossest adulation the Royal Family, on the last moments of George III. and the Duke of Gloucester. On this subject *The Times* very properly remarks:— 'Praise, however much deserved, should be lavished with a very delicate hand. *Lavish panegyric is offensive to the high-minded, and painful to the modest; and even the dead should not be eulogised in a manner which would have been painful and unpleasant to them when living.*'"

If this book should fall into Sir Henry Hallford's hands, it will furnish the President with some curious matter relative to "*the treatment adopted by medical men in the cure of the cholera;*" and "*many amusing anecdotes of the remedies they applied,*" particularly by the first London Board of Health, to entertain his friends with upon a future occasion.

Professor Christison, in the supplement to *The Edinburgh Surgical Review*, of February, 1832, says, "The first London Board, which was superseded by the present Central Board, distinctly pointed, in the first report, at violent measures to be taken throughout the kingdom for shutting up the sick and suspected, and generally for enforcing rigid internal quarantine, in the same manner as has been pursued in this and other countries, during the prevalence of the plague. The minds of *all intelligent persons* here, and I understand throughout the country generally, were filled with surprise at this announcement."

Dr. W. B. White informs us, "had we been made aware of the nature of the disease, its general rise and progression, such as dreadful experience has conferred upon us, \* \* \* how much modified might have been

those dreadful statements, official and non-official, which diffused throughout the land, have scared the stranger from our walls, and carried horror and alarm into every family in the kingdom."

"Were sanitary laws," says Dr. Maclean, "efficient for their proposed ends, we should have, in every epidemic, palpable proof of the fact. The moment the regulations enjoined by these laws were fully enforced, the sickness would necessarily cease: but the reverse of all this we find to be the case. There is not upon record a single instance of sanitary regulations having, even in appearance, proved efficient for their proposed ends. Epidemics from ordinary causes have generally run their regular course, observing their usual laws the same as if no restrictions had been imposed; with this material difference, however, that restrictions have invariably contributed to augment the sickness and mortality: it is unnecessary for me to do more than to show, that sanitary laws never stop the course of the disease. Whenever an epidemic commences, and the people are not removed from its site, it invariably pursues the ordinary course of these maladies, notwithstanding the intervention of sanitary restrictions. To this rule there have been no exceptions that I am aware of, from the earliest application of sanitary laws to the present time. But notwithstanding these striking facts, in a situation liable to epidemics, and having sanitary laws, whenever an epidemic appears at the usual season, under the application of its proper causes, we are told by the pestilential contagionists, that it is because the sanitary laws have been infringed. No doubt sanitary laws must always suffer violation, because they are incapable of being duly enforced or observed; but if the disease was attributable to their violation, it would never disappear, because that violation is incessant."

The Board of Health of 1831 were no sooner formed, than they were aware of the fact that the rigid quarantine they were about to establish was all a



farce. They thought it expedient to be beforehand with their excuse for its appearance if the epidemic should break out in England. They therefore, in the first *Gazette*, establishing the most rigid quarantine, boldly asserting that while they could “*effectually prevent its introduction through the regular channel*,” they warn the public that they could not, by “*the secret and surreptitious intercourse between the coast of England and the opposite shores*.”

“This ‘*clandestine introduction by means of smuggling*,’ says the Barcelona Manifesto of fifteen physicians, “is a stratagem to which the partizans of importation usually have recourse, *when puzzled to indicate the origin of an epidemic malady*.”

However, the doctors must have been sadly perplexed when they found that, notwithstanding all their boasting about “*effectually preventing its introduction through the regular channel*,” the disease was stated to have been imported at Hull and at Standgate Creek; and not through “*the secret and surreptitious intercourse between the coast of England and the opposite shores!*”

We have another bright illustration of the efficacy of the “*regular channel*” for “*effectually preventing*” the importation of a disease, in the following fact. “A ship from England,” says Dr. Kirk, “took the disease immediately she came to anchor in Bombay harbour, before there was any communication with the shore. She had passed along the Malabar coast, about seven or ten miles distant from the shore. This sets at rest for ever the power of atmospheric air in producing the disease.”

When epidemic prevails in one place, and does not manifest itself in another, their proper causes not being applied in places where plague police exist, as at Gibraltar, whilst they prevail in some neighbouring places, as Cadiz or Tangiers, we are gravely assured by the pestilential contagionists, that this exemption is owing to the strict observance of those

very regulations, which they cannot but know, indeed they admit, it is impossible to enforce. Thus whilst, in the absence of epidemics at Gibraltar, the commanding officer of that garrison gets credit for preventing their recurrence, by the strictness with which he enforces the observance of quarantine ; whenever an epidemic does occur in that fortress (its proper causes being applied) the credit of it is with equal reason given to contagion, suspected to be introduced by some unfortunate smuggler, assumed to have violated the sanatory laws, or in consequence of these laws being remissly executed ; even although the disease should go through its usual course, and terminate at the usual time, and in the usual manner, as it necessarily must do, unless the inhabitants be in the *interim* removed to what is called the neutral ground.

Of the vast utility of quarantine laws in England, we are enabled to form a tolerable just conclusion by the following fact. From the official evidence presented to the select committee of the House of Commons, appointed to inquire into the validity of the doctrine of contagion in the plague in 1819, we find that no person has, since the establishment of quarantine, at any time arrived in any English port, being ill of the plague ; and that no person has been seized with it in any of the lazarettos of this country. And from a petition of the Levant Company to his Majesty in Council against the passing of the quarantine laws, dated the 31st of January, 1720, it appears for 140 years preceding that period, the trade with Turkey had been carried on “*without any ill consequences.*” Thus in a period of 257 years, 140 without, and 117 with quarantine, plague has not appeared *in England in consequence of intercourse with the Levant.* (The pestilence which did appear in the course of the sixteenth and seventeenth centuries, were of course produced by their proper causes, widely differing from, or diametrically opposite in their nature to, a specific



contagion.) If, then, 257 years be not sufficiently long to authorise us to conclude that the experiment is complete, we ask in vain, what period would be sufficient: yet with such irresistible evidence perfectly accessible to them, evidence calculated to convince all persons not proof against conviction, that quarantine and lazarettos could have neither end or object in England, *even if plague were undoubtedly contagious in the Levant*, did the physicians who had been appointed from time to time as Boards of Health, in order to frame systems of sanatory laws, evince the determination not to indulge a single doubt, nor to hazard a single inquiry respecting the doctrine, upon which their regulations were to be founded; *i. e.* respecting the existence of the evils which they were to frame laws to remedy. It was to provide for a case, which in the history of the world has never been known to happen; viz., the arrival of an empested person in England from the Levant; that the station of Sicily, with a pest-house, was established by one of these sagacious boards; and it is singular enough that a physician, who had been at one time almost perpetual president of the college, and on the occasion of the Walcheren inquiry candidly confessed at the bar of the House of Commons his ignorance of camp and *contagious* diseases, should have proposed that the double walls of the lazaretto of Mahon, *thirty feet high*, then in our possession, should be preserved as a defence against the *contagion* of the Levant pestilence.

The amount of positive loss annually sustained by the public, owing to this cause, by vessels during quarantine in England, at Malta, Gibraltar, and the Ionian Islands, is very great. The quarantine charges at the port of Sicily for three years exceeded seven thousand pounds, and only one vessel performed quarantine. At another period, after ten years, the charges were 20,522*l.* 13*s* 1*d*, and no more than three vessels performed quarantine there, being at the rate of nearly

seven thousand pounds for each vessel. This was the port destined for vessels having empested persons on board. But neither of these vessels had any such commodities on board, but were probably driven in by stress of weather, or some other accidents which does not appear.

But the detriment occasioned by sanatory restrictions, in preventing agriculture, commerce, navigation, and manufactures, &c., from extending to those limits which they would otherwise attain, is above all calculation. They may be regarded as being more instrumental than any other cause, or perhaps than all other causes combined, in checking the progress of population, wealth, and prosperity in the British dependencies in the Mediterranean.

The great pecuniary detriment which they occasion to nations, is certainly a strong ground why sanatory laws should universally be abolished ; but it ought to be of itself sufficient, that they are disgraceful to science and civilization, and destructive of health and life. It has been proved that pestilential contagion does not exist ; that sanatory laws are consequently without an end or object ; that they are highly injurious to many of the best interests of communities ; that they increase in an extraordinary ratio, the sickness and mortality which it is their professed end to avert or to remedy ; that they are a powerful engine in the hands of despotism, for the oppression and degradation of nations ; and that, even if pestilential contagion did undoubtedly exist, the sanatory code would still be both unjustifiable and pernicious.

In the whole circle of human opinions, there is not, perhaps, another individual error to be found, so productive of complicated mischief to mankind, as that which teaches that epidemic and pestilential diseases depend upon a specific contagion. The injurious consequences of the belief in that doctrine comprehend the effects of legislative enactments, and municipal regulations, as well as of popular faith.



It consists throughout of a series of gratuitous assumptions, or mere chimeras. The first of this series of chimeras, is, that there actually exists an invisible, intangible, inscrutable, inconceivable *virus*, of so indiscoverable a nature as to have for thousands of years eluded the utmost vigilance of vulgar research ; but capable of propagating, at particular seasons of the year, and under particular circumstances only, all sorts of *epidemic* diseases ; and what would seem to the uninitiated still more surprising, that this invisible, intangible, inscrutable, inconceivable power is capable of being crushed in its secret, mysterious, and devastating course, by the physical restraints of walls, cordons, bayonets, quarantines, and lazarettos ! The next series of assumption is, that this unknown and incomprehensible power is endowed with the faculties of self-generation, self-annihilation, self-transportation, self-propagation, and an immense variety of other capabilities, no less wonderful, which it condescends to exercise, for the destruction of mankind. The intimate acquaintance which the pestilential contagionists have, by inspiration it must be presumed, obtained, respecting the humours and caprices of this eccentric agent, is truly astonishing. Amongst other freaks they discovered that it sometimes buries itself in rags, in a dilapidated wall, or conceals itself, perhaps for a quarter of a century or two, in a feather bed in a lumber room, or a garret ; after which, feeling a new thirst for slaughter, it sallies forth, like a giant refreshed, and before walls, cordons, and bayonets, &c., can be brought into efficient operation by its active and sagacious enemies, will, perhaps, have destroyed whole communities. Like every thing else relating to this wonderful agent, its susceptibilities for different bodies is surprising and unaccountable. This has been so nicely calculated, that all the objects in nature, considered in regard to their susceptibility for the matter of pestilential contagion, have been divided into three classes, viz :—susceptibility in the first de-

gree, susceptible in the second degree, and non-susceptible. The individual articles comprehended in this singular classification, are to be found enumerated in various official records of various countries. The articles susceptible in the first degree, are the foulest, the most mephitic, and the impurest objects in nature. These objects, of course, are its delight ; and their united influence is fatal to all who come in their way. From its combination with articles susceptible in the second degree, there result epidemics of the second order. With objects not susceptible, it cannot, of course, unite. Amongst these is pure air, in the presence of which it is either immediately suffocated, or affected with such agonies, as to put a period to its existence. Although it can laugh at cordons, bayonets, and lazarettos, it has an unfeigned horror at pure air.

With such an immense variety of objects in the classes of susceptible articles, and such a great number of shipping at their disposal, as commerce and navigation supply, the pestilential contagionists can never be at a loss to assign innumerable means by which any presumed contagion may have been imported. In large cities the chief difficulty is the distraction occasioned by this variety. But this is easily surmounted ; for then, instead of one or a few, they have a choice of a million of sources, all equally probable.

In all epidemics, they have pretended to depict, with mathematical precision, the exportation, course, importation, or domestic origin and progress, of a contagion which they have never proved to exist in any. In Spain it has been usual to give credit of the origin of the presumed contagion of epidemics, to South America, and more especially to the Havannah. This was particularly the case with the Barcelona fever of 1821 ; notwithstanding history proves, that of thirty-two epidemics which have prevailed at Barcelona between the years 1333 and 1803, seventy-two happened



previous to the discovery of the new world. At the period of that discovery, there existed no disputes respecting this matter, the system of pestilential contagion not having been invented till about half a century later.

It is, for the most part, at the precise period when the greatest number of persons are affected, and when the greatest mortality prevails, that epidemic diseases regularly but rapidly decline, and suddenly cease. Instances of this we have abundance of proof of recent date in the cholera; and we may refer to the fevers of London, Marseilles, Cadiz, Malta, Gibraltar; the Barcelona fever of 1821, from 246 deaths a day on the 19th of October, to 98 on the 2nd of November; after which it finally ceased. If, on occasions like these, sanitary laws have any influence, it must be of the noxious kind; for the epidemic continues to increase considerably the moment all communication is cut off; until that at which the disease attain their greatest extension. This has been particularly remarkable this year at Palermo, Naples, Marseilles, and other places. In places where restrictions have been placed before the epidemic appeared, they have always suffered the most when it has. Fear and terror seize upon the minds of the people. The doctors are on the alert to catch the epidemic on its arrival; and the first ship that arrives with a sick man on board, (for it is always in the first place imported) is declared to have imported it; this whether or not communication has been had with the shore.

Scarcely any place, in proportion with its extent and population, ever suffered more from the effects of quarantine laws than Tortosa, in Spain, in 1821. The sanitary restrictions established were remarkable both for their rigour, and for having been imposed a considerable time, not only before their apprehension of contagion was officially proclaimed by the juntas of Barcelona, but before any suspected deaths or sickness had taken place at Tortosa itself. The

evidence of the Military Governor, Don Miguel de Haro, in a letter to the political chief of Catalonia, dated August 26th, 1821, speaks for itself: “as soon as the first notices of the contagion were received, the municipality and municipal Board of Health of the province daily report the state and progress of the disease; in vain it is asserted that the city of Barcelona is free from contagion; in vain does your order of the 15th, the communication not to be cut off, and that passengers shall not be detained who have regular passports—for this Junta, before that of any other town, cuts off all intercourse by land and water; establishes foul lazarettos, and lazarettos of observation, placing sentinels at the gates; adopting an infinity of measures, and ordering to the lazarettos for an indefinite period, all travellers coming from Barcelona. They interrupt the entrance of vessels, and put a stop to the important commerce arising from the manufacture of oil. Finally, a sailor falls sick, coming from the river (also), who had not been in Barcelona, nor held any communication with infected vessels; and in consequence of the doctors not being well acquainted with this disease, they treat him as pestiferous—and this man at length dying in the lazaretto, they conclude with alarming the people by the measures they adopt for the interment of the body.

“By the conduct, then, of this Junta, they have set an example of disobedience highly injurious to the state; and have given undue importance to the malady in question, to the great prejudice of Barcelona and of the principality. They have alarmed the whole nation, and particularly the kingdom of Valencia; and have suspended the extensive and lucrative maritime commerce which existed with foreign countries—a commerce which draws from that district rivers of oil, supplying it in return with rivers of gold.”

How nearly akin to the Juntas of Barcelona were the Board of Health of London of 1831!



When the fever had become so severe in Tortosa that persons could not be found to bury the dead, a reward was offered by advertisement to such as would undertake that employment; with the promise, if they should survive, of a pension for life, or, if they should perish, of a provision for their families. Eight or ten inhabitants of Reus embarked in the perilous undertaking; they all perished except two. The survivors returned to Reus, entering the town secretly in the evening; the following day being a festival, they had the imprudence to show themselves, and were, of course, immediately apprehended. They were closely imprisoned, and it was discussed whether they should be immediately shot. The sanitary laws during that season having been the subject of much popular indignation, ridicule, and scorn, this punishment for the infraction of them was deemed to be of too bold and violent a nature to be with safety openly ventured upon; but the poor prisoners were privately counselled to make their escape, and it was contrived that, in the act of escaping, they should be shot by the guard.

One of the most singular delusions in the faith of a contagionist is, that whilst an epidemic proceeds with increasing, and even more than ordinary severity, much beyond the usual period of the termination of epidemics at the same place, its cessation, when at length it does happen from a change of season, is pertinaciously attributed to the very measures which had been the chief cause of its aggravation and prolongation. Of this we have a most striking instance recorded by Mr. Tully, in his “*History of the Plague in the Island of Malta*,” &c.

Mr. Tully, with mathematical precision, describes how that pestilence in 1813 “*clandestinely* disseminated itself,” “*lurking in every corner of the island*,” and “*bidding defiance to every previous exertion*,” “*when on a sudden that arm was raised, which, under Providence, was destined to crush the foe*.” The labours

of the Governor, Lieutenant-General Oakes, at the commencement and during the progress of the malady, had been “*unavailing*” to arrest its progress. “The arrival of his Excellency, Sir Thomas Maitland, in the capacity of Governor of Malta, which took place on the 5th of October, 1813, formed, as we learn from the events that speedily followed, a particular history of the plague of Malta; for we find (and it must be noticed with feelings of *gratitude* as well as *admiration*) that the progress of the disease was *everywhere arrested by the decided and energetic* system adopted by his Excellency.”

And what did this “*arm raised under Providence*” do? As atrocious an act as ever was committed—perpetrated wholesale murders according to law.

The disease, in consequence of the rigour of the sanatory measures adopted, had continued longer at the unfortunate village of *Casal Curmi*, than the other parts of the island. It was, however, imagined that the reason why the disease did not yield, was, that the precautions adopted were not sufficiently vigorous, and they were, therefore, redoubled. The curious results of this increased activity and vigour, was the discovery that “the disease was *fostered* and *kept alive* from the hourly intercourse with infected goods on the part of many of the misguided inhabitants.”

Mr. Tully does not condescend to inform us by what experiments or process he discovered the foe “*alive*” concealed in goods and contagioning them; but with much self-complacence he informs us, “the knowledge of the above circumstances compelled his Excellency (*‘the arm lifted up by Providence!’*) to have recourse to the novel and extraordinary plan of converting a populous country town into a species of lazaretto, shutting the inhabitants within their own precincts, by the erection of double walls, and by the establishment without these walls of cordon over cordon.”

Not content with having done this, “the *annihilation*



of the disease," being, as Mr. Tully says, "*reserved under Providence for his Excellency*," he, on the 4th of December, issued a proclamation against the Curmians, who thus obstinately maintained themselves in an empested state, declaring that the law, as it stood, had been found inadequate to prevent the stealing of infected (contagioned) goods, and the secreting of infected (contagioned) articles ; and, therefore, he enacted, first, "that all that part of Casal Curmi, within the cordon of troops, in as far as relates to the plague, be *put out of the King's peace*, and be henceforth declared to be under martial law." Secondly, "that a military commission be appointed to carry into effect the said martial law, as far as relates to any case of the plague within the said district !"

This is what Mr. Tully calls "*hermetically sealing the plague*," by "*that arm which, under Providence, was destined to crush the desolating foe*."

The inhabitants of Casal Curmi, being cordoned, "walled in," and even "locked within their respective dwellings," the island was then deemed safe from that source of contamination. The inhabitants of the island at large were doubtlessly perfectly safe, and they would have been equally so, had those of Casal Curmi shook hands with them beyond the precincts of their own town.

But notwithstanding the effects of this vigorous blockade, which, in correctness of circumvallation, Mr. Tully seems to think surpasses the feats of any of the greatest captains of ancient Greece, was, that the epidemic being duly provisioned by the season, and laughing at cordons, held out in full vigour until the month of December, and did not wholly capitulate until the month of March, provisions and garrison being then all but expended.

"Nor was the conquest," says Mr. Tully, notwithstanding the "arm was raised under Providence which was destined to crush the desolating foe," "an easy one ; Casal Curmi boldly contesting, inch by inch,

every effort that was made for the destruction of the disease."

Doubtless, Sir Thomas Maitland considered it incumbent on him vigorously to enforce the measures which he was informed were the best calculated for obtaining the end in view ; and he could not be supposed to have been aware that those vigorous measures, upon which so much praise is bestowed, were calculated to aggravate the evils which they were intended to remedy. But each person that died in consequence of being imprisoned in that village, was murdered according to law ; whilst, if they had only been allowed to fall back to the walls, or to the station occupied by the troops of the cordon, in proper time, they might all have escaped death, and the greatest number of them sickness.

In exposing the pernicious operation of the system of sanatory laws, it must not be supposed that I am censuring Sir Thomas Maitland ; but the delusion under which public authorities are acting, when enforcing them. There can be no doubt that on the day that Sir Thomas issued his proclamation against the poor Curmians, by the advice of Mr. Tully, as "*the arm raised under Providence to crush the desolating foe ;*" that he was as miserable in his mind as any of the inhabitants of the impested town. Compelling the inhabitants of Curmi to remain exposed to the cause of the disease, not only prevented its cessation, whilst the atmosphere remained in any degree pestilential, but absolutely consigned them to certain death.

We find, also, from Mr. Tully, that "*under Providence,*" and under similar circumstances, the like event occurred at Corfu. Providence, indeed ! How abominably impious must it not appear the using of the name of the Deity in such affairs.

Mr. Tully, formerly Surgeon of the Forces, Inspector of Quarantine, and President of the Board of Health of the Ionian Islands, who is looked up to by



all contagionists as an authority of the first water, has the temerity to say, "*season has nothing whatever to do with the plague.*" Consequently "*season*" can have "*nothing to do whatever*" with any other epidemic.

This is, however, a no less extraordinary, than monstrous doctrine to be broached : particularly so by so high a personage !

It is a well known fact that in all countries epidemic diseases usually commence, decline, and cease, at certain determinate seasons, and differing in different countries according to the latitude of those countries respectively. In Egypt they usually begin in March or April, and cease in June ; while in the more northern latitudes, as Turkey or Europe, and Spain, they begin in July or August, and cease in November or December ; these periods being, however, occasionally accelerated or retarded, according to particular circumstances. In 1804, in ten out of twenty-three towns of Spain, the epidemic commenced in August, and in eight in September. This was also the period of the commencement of the Barcelona, Tortosa, and Palma fevers, in 1821. In Egypt, Asia Minor, and Syria, it is as regular in the period of its commencement and cessation as the rising and falling of the Nile. And of the five plagues which are recorded as having afflicted Malta in the 16th, 17th, and 19th centuries, three, of which the dates are specified, happened at regular seasons, viz. :—those of 1592, 1673, and 1813. It is notorious that, in Egypt, the plague ceases almost precisely on the 24th of June, or St. John's day ; and that the Christian inhabitants, on that day, regularly sing *Te Deum* for their deliverance.

Yet in the face of all these palpable historical facts, Mr. Tully ventures to assert, that "*season has nothing to do with the plague.*" Immediately after St. John's day, the clothes of the many thousands that have died during the continuation of the plague (at Grand Cairo) are *handed*, bought, *put on*, and *worn*, without any ap-

*prehension of danger* ; and though they consist of furs, cotton, silk, and woollen cloths, no accident happens to those who wear them.”—(Bruce’s Travels and Russell’s Treatise on the Plague.) The same thing happens with respect to the clothes at Smyrna, Aleppo, and all the other towns of the Turkish empire, which are subject to epidemic maladies. These clothes are in a constant state of transfer from the dead to the living. Clothes are supposed capable of conveying contagions that have a real existence, as that of small-pox. But the plague is an epidemic capable of affecting the same person over and over again. Under these circumstances, if it were contagious, it would be in a constant state of circulation in the Turkish empire, whilst an individual of that community remained alive ; and being capable of transportation, it would not terminate until all the accessible portions of mankind were annihilated. Yet none of these phenomena happen ! “ We are told,” says Dr. Maclean, “ that three hundred thousand deaths from plague have happened in one season in Grand Cairo, two hundred thousand in Smyrna ; and the clothes of the dead have been worn by their surviving relations, or sold in the bazaars, and worn by the purchasers ; the disease, instead of spreading wider and wider, as would inevitably have happened, if contagion were its cause, has, on the contrary, regularly declined and ceased at the usual periods.”

The plague of the Levant begins, proceeds, and terminates, in the usual manner, and with great regularity, at the usual seasons, observing all the ordinary laws of epidemics. In 1819, these facts were all proved in evidence before a select committee of the British House of Commons. They are familiar to every one in the Levant ; and yet, in the face of them, our understandings still continue to be outrageously insulted with the gross and gratuitous assumption of a contagion *modified, generated, debilitated, invigorated, annihilated, resuscitated, or suspended, by certain dispo-*



*sitions of the atmosphere*; rather than admit the plain and obvious fact, that the atmosphere itself, in concurrence with other palpable causes, constitutes the sum total of the true causes of these maladies.

Applying the same principles to the yellow fever of America, and to those of the Spanish peninsula, we invariably find that these epidemics are incapable of being propagated beyond the sphere of the causes of which are well known to produce them, however intimate may be the intercourse between the sick and the rest of the community. Proofs of these facts, as they regard epidemics in general, are notorious, and well supported by the manifesto of the fifteen independent physicians on the fever of Barcelona, in 1821.

In the epidemics of the Levant, it is quite common for persons ill of the disease, and having even pestilential sores upon them, to go from one town to another (there being in that country, fortunately, no sanitary laws), without the malady attacking any persons in the towns which they entered. Russell relates, that in April, 1759, the crew of a Turkish vessel, which was wrecked off the island of Cyprus, having the plague upon them, were in part saved, and some of them carried to Larnica. Other parts of the island were at that time labouring under an epidemic. Peasants and mule drivers from those parts, with pestilential sores upon them, were daily to be seen in the streets and markets, and some of them died in the houses of Larnica. Two vessels also arrived, both of which landed sick passengers and sailors. Notwithstanding these various kinds of intercourse, none of the inhabitants of Larnica were known to have contracted the plague *that year*; *although they suffered severely from it in the following year, in the months of February and March, when few or none of the infected recovered.* The daily funerals were from twenty-five to thirty; and many of the inhabitants fled to the mountains. Such cases are quite common in the Levant.

It is well known that persons having come from places where epidemics prevailed, and who afterwards fell sick, the causes having been applied previous to their departure, were never known to communicate the disease to any one of the immense population of the numerous cities, towns, and villages they have visited. If any of the residents of the country were affected, their illness has invariably been traced to their having been in contact with the air, and not with the inhabitants. This fact is clearly established by the French government steam-boat now under quarantine at Marseilles, where two of the crew sickened and died of the plague, and the rest of the crew and all the passengers, thirty-two in number, are in perfect health.

“It is an acknowledged fact,” says Dr. Maclean, “that in hospitals which are well situated, and well kept, physicians, nurses, and other attendants on the sick, are proportionably even more exempt from epidemic diseases than individuals in general of those classes of society to which they respectively belong. From evidence laid before the committee of the British House of Commons, on this subject, in 1819, it appears, that in the fever institutions of London, Chester, Manchester, and Waterford, from their first establishment, as well as in the seven great hospitals of London, in which fever patients are mixed with others, the description of persons above enumerated have, upon the whole, been affected with disease in a much smaller proportion than the community at large.

“There also exist undoubted proofs, that even expurgators of goods in lazarettos are less liable to be affected with epidemic diseases than the community at large. In the plague of Malta, in 1813, it appears from the evidence of the physician who superintended the quarantine and lazaretto establishments at the time, and of other persons, that whilst the city of La Valetta, and the villages around, were suffering dreadfully, not a single expurgator of those goods, which were supposed to be importers of the contagion,



was affected with the prevailing malady. In whatever manner these facts may be accounted for, they afford absolute demonstration of the non-existence of contagion, in the epidemics to which they respectively relate."

The laws of epidemics prove the non-existence of pestilential contagion. Different from those *general* maladies which depend upon a specific contagion, and which alone can be confounded with them, epidemic diseases are capable of affecting the same person repeatedly, even in the same epidemic and the same season; or as often as their causes are applied in due force. With respect to the plague of the Levant, this is confirmed by Oliver, D'Ohsson, and other writers on Turkey; and Dr. A. Russell has seen instances of the same persons being affected *three* several times in the same season. In the epidemic of Philadelphia, in 1797, Dr. Rush attended six persons (of whom he gives the names) who had previously undergone an attack of the disease. *Fifty-six* instances of second attack are enumerated by medical officers of the British navy and army at Gibraltar in 1813, of which twenty-two happened in the same, and thirty-four in different seasons. In the plague of Moscow, in 1771, Mr. Samaclowitz experienced three several attacks of the disease in his own person. The having had an epidemic once, twice, or thrice, is therefore no guarantee against its recurrence.

"Epidemic diseases," says Dr. Maclean, "are maladies of an indeterminate form, produced by causes capable of acting simultaneously upon the whole, or any given portion of a community, and of affecting the same person repeatedly, even in the same epidemic and the same season. A specific virus, or contagion, can form no part of those causes.

"The laws, by which they are distinguished from those contagious diseases with which they have been sometimes confounded, are numerous.

"The phenomena of epidemics are so different, in

different persons, as to have obtained for them the appellation of Proteian maladies. This difference depends upon the almost infinite variety of combinations, proportions, and degrees, in which their causes may be applied. Hence, whilst all epidemic fevers are in reality nothing else than modifications of the *causus*, or *febris ardens*, of the ancients, an almost endless variety of names has been given to them in modern systems, to the great detriment of science.

“ Besides every form of idiopathic fever, as those which have been called plague, typhus, yellow, scarlet, jail, hospital, and ship fever, &c., diarrhœa, dysentery, cholera morbus, scurvy, &c., may be ranked amongst epidemic diseases. The *affection of the blood and circulating system* being the chief characteristic of epidemic maladies, the dissimilarity of their phenomena, in other respects, depends upon the affections of the other organs; which again depend upon the various combinations, proportions, and degrees, duration, and intensity, in which the numerous causes which concur to produce these maladies have been operating.

“ The causes, the laws, and the phenomena of epidemics and contagious diseases being so dissimilar, or opposite, those diseases themselves are necessarily incompatible and inconvertible. That a disease, capable of being propagated by a specific *virus*, are, indeed, self-evident propositions. The idea of a spontaneous generation of a specific *virus* in the progress of an epidemic malady, is much too gross for animadversion. Between epidemic and contagious diseases, then, there is a clear and a wide distinction. Some persons, following literally the etymological interpretation of the word ‘epidemic,’ have imagined that the small-pox, when considerably diffused, ought to be so considered. But, in order to deserve to be so ranked, a disease must obey all the other laws which are peculiar to this class of maladies, as well as that of diffusion. Small-pox, measles, or lues venerea, may



affect a great number of persons at once; but however diffused, they can never, for that reason alone, be entitled to the appellation of epidemics.

“ In epidemic diseases, recovery or death may take place, at every period, from the first minute or hour to several weeks or months. The sick are liable to successive relapses.

“ Contagious diseases are maladies of a determinate form, produced by a specific *virus*, passing from person to person, from persons to goods, and from goods again to persons—by means of the air as a vehicle, or by the process of inoculation. They are never produced by any other cause than a specific *virus*. The contagion is not obscure or doubtful; and is capable of taking effect in any air, at any season, or under any circumstances. They are general and local. Of the former, small-pox and measles; of the latter, the itch, gonorrhœa, &c. &c.

“ Contagious *general* diseases, with which alone epidemic maladies may be confounded, are not capable of affecting the same person more than once. The periods of fever—eruption, recovery, and death, &c.—are all determinate. They never kill speedily, or all at once. According to Sydenham, the usual period of death, in small-pox, is from the eighth to the twelfth day.

“ There cannot be any relapse.”

It is self-evident, that diseases capable of affecting the same person repeatedly, if they were also contagious, would be incompatible with the existence of communities. The contagion would spread in a geometrical ratio, diverging, as it were, from the centre to every point of the circumference of a city, a camp, an hospital, or a ship. Whilst it had subjects to operate upon, *i. e.* whilst a single individual of the community remained alive, it would never cease. Those who recovered would again and again be seized. No person who remained within the pale of society could escape. The malady would be communicated

to the most distant nations. It would proceed on a continued circle, until the whole human race was extinguished. Turkey would, in the course of a single season, become a desert.

The doctrine of contagion in pestilential epidemic is, therefore, apparently, most absurd. If small-pox, avowedly a contagious disease, were capable of affecting the same person repeatedly, what could put a stop to its progress short of the extinction of communities?

In the whole circle of human opinions, there is not perhaps another individual error to be found so productive of complicated mischief to mankind as that which teaches that epidemic and pestilential diseases depend upon a specific contagion.

Were pestilential contagion proved unquestionably to exist, sanitary laws would notwithstanding be unjustifiable. They would be still a grievous, barbarous, selfish code—a great, positive, and certain evil—which legislatures and governments can have no right to inflict on certain portions of mankind already suffering, in order to afford to others the presumed means of escaping a sickness not necessarily fatal. It is most certain that if persons labouring under small-pox, measles, or any other known contagious disorder, were doomed, in consequence of some sanitary police regulations, to remain exposed to a noxious atmosphere, such as pestilential contagionists allege is indispensable to the activity of their *virus*, the deaths of almost all of them would be ensured.

“No fevers,” says Dr. Maclean, “whether produced by specific contagion, or the causes of epidemics, are at their commencement necessarily mortal; and if not improperly treated or interfered with, the danger is not even great; but apply noxious air, and terror, and very few will escape. Nor would this wholesale murder be the less unjustifiable, that the cause of the disease might be contagion; in the small-pox, for instance, would it be justifiable, by the appli-



cation of terror and foul air, to expose some children to certain death, in order that other children might have a chance of escaping? No reasonable man would make such an assertion. And would a proceeding of this kind be less cruel, immoral, or unprincipled, in respect to patients labouring under epidemic diseases, admitted or proved to be actually contagious, to compel the sick to remain exposed to a noxious atmosphere, as equally to ensure death of by far the greatest portion of those so exposed. It is wholesale official murder; and to effect it by the forms of law, does not diminish the moral turpitude of the act."

Considering the nature of the sanitary laws, it might be supposed that in all the epidemic diseases, erroneously reputed contagious, against which they had been intended to guard mankind, it had been discovered that there exists, from their commencement, some property decidedly fatal; certainly nothing less than such a discovery could justify those laws. Of how much deeper turpitude, then, will they appear, when it is shown that the extraordinary mortality of the disease which it is their professed object to avert, has absolutely no other source than themselves.

Thus, whether epidemic diseases be deemed to depend upon contagion or other causes, sanitary laws are unprincipled, because their operation is direct, powerful, and unequivocally injurious, or rather, destructive to mankind. They are immoral, because they beget cruelty, selfishness, cowardice, and a desertion of relations and friends; and finally, they are unjustifiable, because they have no quality or qualities capable of counterbalancing, in any degree, the enormous mischiefs which they occasion to society.

The dread of an imaginary, is far more destructive than the dread of, or even the actual operation of, a real contagion. The principle must be obvious, by which it happens that the dread of an unknown, mysterious, imaginary, and incomprehensible agency, from which we every moment apprehend destruction,

is necessarily more fatal in its effects than that of either a real and known contagion, as that of small-pox, or of any other deleterious object cognisable to the senses, as a pestilential atmosphere.

*Rivinus* relates, and he was a pestilential contagionist, that during the plague of Leipsic, in 1680, fear wrought greater mischief than the true contagion itself. “*He did not know a single instance of sickness occurring from the plague, which did not originate in terror.*” *Constance* and *Tamsino*, who attended the hospitals during the pestilence which almost depopulated Rome in 1655, declared that “all who were timid were carried off by the *distemper*.”

But if such be the effects of terror inspired by popular faith only, what must its effects be when that popular faith is sanctioned, invigorated, and excited by municipal regulations and legislative enactments? The intensity of terror must be thereby augmented in a dreadful ratio; and it only requires the addition of the surrounding scenes of sickness, misery, and death, when an epidemic arrives at its highest degree of severity, to complete the picture of human calamity and wretchedness. The application of such a combination of moral causes of destruction, it can be the lot of very few to survive.

The terror occasioned by the application of sanitary laws, superadded to a lesser degree of the proper causes of epidemics, would otherwise be sufficient to produce disease.

There are also a variety of ways, besides its direct operation on the mind of the sufferer, in which the terror incidental to the operation of sanitary laws, combined with that which is the result of popular faith, produces, or concurs to produce, those various injurious consequences.

Persons who find themselves attacked by an epidemic disease reputed contagious, knowing that upon their disease being declared they will be most probably abandoned by all the world, conceal their sickness as



long as they are able ; *i. e.*, until, if even an efficient treatment were at hand, they are past recovery. This renders the application of an efficient method of cure impracticable.

The same cause occasions the desertion of the sick by friends, relations, and attendants, and often ensures death from accident or want.

By the operation of the same principle, famine may be occasioned on a large scale, as happened this year at Palermo ; and at Marseilles in 1720 ; or the means of subsistence be cut off by the impossibility of getting employment, as happens in almost all epidemics reputed contagious in large and especially manufacturing towns, although there may be no deficiencies of the necessaries of life, or even if abundant.

The sick are also deprived of medical aid, or medical aid is rendered useless by the restraints imposed upon, or the apprehensions of, medical men.

By being compelled, in the pursuance of the same base and selfish laws, to remain exposed to the noxious atmosphere of the place in which the disease originated, and to the other pestilential causes, the sick are almost doomed to death. Of this truth we have a melancholy instance in the case of the Ionian brig, *St. Spiridione*, which arrived at Zante from Tunis, on the 18th of June, 1819, with a crew of eight persons on board, master and super-cargo included.

A health-guardian was immediately placed on board ; on the 23d one of her crew, on the 24th three, on the 25th one, on the 26th two, on the 27th the health-guardian, sickened. Every one of the eight that sickened died ; one only remained in health. The symptoms were unequivocally those of the plague. They died at periods of two, three, four, five, six, and seven days from that of attack : a variety that never takes place in any disease known to depend upon a specific contagion. “The most humane means were resorted to by Government,” says Dr. Thomas, “*for the safety of*

*the unfortunate persons attacked with the plague.*" (Yet every one of them perished!) "And the most decided measures were carried into effect, *for the purpose of preventing the possibility of the introduction of contagion into the island.* The consequence was, that this dreadful disease, *which committed such dire havoc amongst the limited few exposed to its influence, was confined to its original source.*"

We have here a perfect epitome of the absurd system of sanitary laws, and its destructive effects.—Without proving of the smallest use as a preventative to the island, there being, in fact, no preventative wanted, "the most decided measures" that were resorted to upon this occasion, had the undoubted effect of killing the people on board of this vessel, as certainly as cannon balls. The "dire havoc," then, was not the effect of disease, as it would have proceeded under the application of its proper causes, but as aggravated by sanitary restrictions, creating terror, and occasioning a destitution of medical aid, common attendance, and even, perhaps, sustenance. The probability is, that, under ordinary circumstances, three-fourths, if not the whole, of the sick in this vessel might have been saved. But as it was, it would have been an act of kindness to have shot or thrown them into the sea.

It must be unnecessary to dwell on the shooting of *suspected* persons, for consulting the first law of nature by violating cordons ; on the refusal to receive ships, or ordering them away in distress, or in sinking, or burning them, when suspected of having *suspicious* sickness on board ! Such acts are so very cruel, barbarous, shocking, and unprincipled, it is needless to dwell upon them. At the very recollection of such horrors, who can refrain from blushing at the depraved selfishness of our species ?

In 1814, by order of Dr. Pym, late superintendent of quarantine, part of the cargo of the *Lucy* from Smyrna was burnt, when not one of the crew had been



infected with the plague. It was done upon a report made to the Privy Council, from the council of Smyrna, that the persons who were employed in removing and packing the skins had died of the plague. Could the crew have escaped, if contagion had existed in the cargo, which they had assisted to stow and unstow? In 1721, the ships *Turkey Merchant* and *Bristol*, with their cargoes, were taken from Standgate Creek out to sea, and burnt, in pursuance of an order in council, dated the 28th July, 1721. In 1792, a chest of goods was burnt, imported in the *St. George*, from Zante. In 1800, the ships *Aurora*, *Mentor*, and *Mogadore*, were destroyed, with their cargoes, pursuant to an order in council of the 7th January, 1800, in consequence of a representation of the committee, consisting of his Majesty's physicians, and others, that great *suspicion* was entertained that the same was infested with the plague. Yet in this case, again, no one of the crew had sickened, or ever after had the plague. This was in the year 1800, when the code of quarantine regulations, now in force in England, was framed by a Committee, or Board of Health, appointed for that purpose by the Privy Council; revised, with some trifling alterations, and confirmed by another committee in 1805. The first committee was composed of nine physicians, and two Levant merchants; the second, of nine physicians, principally fellows of the College of Physicians. Sir Lucas Pepys, one of them, physician-general to the army, and president of the College of Physicians; in consequence of the exposures which were made by Dr. Maclean, of the medical delinquencies committed during the Walcheren expedition, in 1809, ceased to be physician-general of the army, and also, at the same time, in consequence, to be president of the College of Physicians.

What took place with Sir Lucas Pepys ought now to take place with Sir Henry Hallford; for the delinquencies committed during the cholera panic by the

Board of Health, of which he was the president. The only thing which should prevent this taking place, would be Sir Henry following the example of Doctor Rush, in 1804 ; retracting his former opinion of the yellow fever spreading by contagion. In his preface to his “ *Medical Inquiries and Observations*,” Dr. Rush “ begs forgiveness of the friends of science and humanity, if the publication of that opinion has had any influence in increasing the misery and mortality attendant upon that disease. Indeed, such is the pain he feels, that he ever entertained, or propagated it, that it will long, and, perhaps, always deprive him of the pleasure he would otherwise have derived from a review of his attempts to fulfil the public duties of his station.”

The belief in contagion, with the numerous consequences of that belief, constitute or give rise to adventitious causes of sickness, which, in epidemics, amounting to pestilence, are twenty times more destructive to mankind, than all the proper causes, physical and moral, of these maladies combined ; it follows, that to effect its renunciation would be at once to obviate nineteen-twentieths of the sum total of the causes of pestilence, when this delusion prevails, and, consequently, to avert in the same proportion the calamities occasioned, under the existing system, by this class of maladies. On the other hand, it is equally certain, that, unless this doctrine be renounced, and the laws and regulations founded upon it be abolished, the proper causes of epidemics cannot be obviated, nor efficient means of cure applied. The adventitious causes, which are presumed to be as nineteen in twenty, being kept in constant operation, to attempt to alleviate the proper causes, which are presumed to be only as one in twenty, or to endeavour, by the application of remedial powers, to remove the effects of the causes thus artificially maintained in permanent operation, would be equally idle. In the application, on the one hand, of remedies for the removal of a disease, whilst, on the other hand, nine-



teen-twentieths of the sum total of its causes are kept, *by law*, in a forced state of operation, there is a *prima facie* absurdity. But demonstrations of the absurdity being given, there is in the continuance of the practice something worse.

“Mankind,” says Dr. Maclean, “has been calculated to consist of a thousand millions; that of these, three in the hundred, or thirty millions, die annually of all diseases; and that of this number, one half, or fifteen millions, fall a sacrifice to epidemic maladies. The proportion of these deaths that happen in Christian communities, where alone the adventitious causes of mortality prevail, let us roundly estimate at one half, or seven millions five hundred thousand; and let us suppose that the epidemics amounting to pestilence, the concurrent causes of sickness and mortality, dividing them into twenty parts, are operating in these communities in some such proportion as the following:—

The proper causes.....	1
The adventitious causes, moral and physical, viz., terror from the belief in contagion from the opera- tion of sanatory laws, and from the surrounding scenes of misery, desolation, and death.....	12
Compulsory exposure under sanitary laws to the action of the noxious air, and of the other prin- cipal proper causes of epidemic maladies.....	4
Various other consequences of that belief, and of these laws; as, concealment of sickness, deser- tion of the sick, want of medical aid, and want of food, &c. &c.....	3
Sum total of the adventitious cause....	19
<hr/>	
Sum total of the proper and adventitious causes.....	20

“In the details of any estimate of this kind, it would be absurd to pretend to any thing like an approach towards accuracy. The variations to which the combinations, proportions, and degrees of these causes are perpetually liable, or rather the impossibility of their being precisely the same in any two

epidemics, at any two periods of the same epidemic, in any two persons at the same period, or in the same person at different periods of the same epidemic, would render it at all times quite impossible to form a scale of proportions that should be found generally applicable. But it will be sufficient for my purpose here, if this sketch should serve as an illustration of the principle. Thus, it will result from the principle of this computation, that of the seven millions and a half of deaths that are supposed to take place annually in Christendom, from epidemic diseases, 7,100,000, or nineteen-twentieths, are owing to the adventitious causes ; whilst only 370,000, or one-twentieth, depend upon the proper cause of pestilence."

But whether Dr. Maclean's calculation is correct or incorrect, there can be no question that if the lowest computation that can be taken of the mortality arising from adventitious causes of pestilence, *millions of human beings are annually the victims of a single delusion.*

Conclusions of so much, and such vast importance, even admitting that they were but weakly supported by argument, surely deserve the most serious attention of every class of the community. But facts as they are, the public of all nations have a right to expect that they should be subjected to by every legislature and by every government, to the most anxious, careful, deliberate, and unbiassed scrutiny. The extent of the mischief which it has lately occasioned throughout Christendom, has conferred on it an extraordinary degree of importance, and rendered it an object worthy of the utmost attention.

"Sanitary laws," says Dr. Maclean, "have operated as a permanent and insurmountable obstacle to an efficient investigation into the causes and cure of epidemic maladies. They have been an insuperable bar to experiment and observation, as well as to the application of known remedies. They have served, not simply to prolong ignorance, but to produce an



accumulation of false knowledge in medicine; and, upon the whole, to occasion, in respect to epidemic diseases, a great and important retrogradation."

When the intercourse between places infected and not effected, is interdicted, it cannot be questioned that a total stagnation of commerce must take place, producing a certain effect even in distant nations. The great loss incurred by navigation, owing to the same cause, is extremely difficult to calculate, although not difficult to appreciate. The inconvenience, expense, and sometimes ruin, which those laws bring upon travellers, upon fleets, and upon armies, are too palpable to require elucidation.

The sanitary code is necessarily arbitrary, capricious, and despotic, supplying governments, corporations, and juntas with extensive means of influence, coercion and mischief. As all men love power, and as the individuals who compose the constituted authorities of states cannot be presumed to be exempted from this common law of nature, it follows that they must necessarily feel a partiality for such establishments as contribute to gratify their desires. Hence, without any reference to their intrinsic merits, sanitary laws have always obtained a large portion of official favour. The truth of this conclusion, which results as a consequence from the nature of man, is also demonstrated by the evidence of particular facts. These observations are applicable in their degree to all governments. Their partiality, in point of fact, to the constitutions in question, is evidenced by the readiness they have always shown to adopt them, without the previous institution of any very strict inquiry into their fitness for their proposed ends; by the reluctance which they have manifested to examine that fitness when it has been called in question; and by the marked difference of treatment which has been invariably experienced by the medical supporters, and the medical opponents of the abolition of sanitary institutions.

If it should be alleged, that, in the event of the abolition of sanitary laws, there would be the danger of a popular re-action, I answer, that I do not believe it; and that, when such an evil arises, it will be time enough to apply the remedy. What! are laws, notoriously bad, notoriously destructive, to be continued, only in order to humour popular caprices, supposing such caprices to exist? But they do not exist; or at least their existence is partial and uncertain. The fact is, that to attribute to the ignorance of the people obstacles which arise only from ignorance or design on their own parts, is here meanly resorted to, as a subterfuge, by those of the medical faculty who are advocates of pestilential contagion. Whatever be the motives of this opposition to the progress of knowledge, and the establishment of beneficial measures, is immaterial. If it arise from ignorance, it was a culpable negligence not to have taken due pains to become acquainted with what has been done and written upon the subject of epidemic diseases; if from design, to sacrifice knowingly, and in the face of demonstration, truth and science on the altar of policy, or of personal interests, denotes a criminality of still higher degree.

The partial administration of the sanitary laws is another, which ever of the conflicting opinions be correct, cruelty and injustice practised upon portions of mankind. If these laws be efficient for their proposed ends, it is cruel and unjust towards those, who are suffering from the want of them, as in the British dominions in the East and West Indies, and on the coast of Africa, and various parts of the world, that they should not be universally extended: if pernicious, it is unjust and cruel towards those who are suffering from their operation, that they should not be universally abolished. The deaths, which happen from epidemic diseases, owing to the non-extension of these laws, if they be sanitary, or to



their operation, if they be noxious, are alike attributable, as their remote cause, to the conduct of those medical bodies, or individuals, by influence or authority who have contrived to obstruct free and efficient inquiry.

It must now have been made manifest that it is of the greatest and most pressing importance to the world at large, that the questions respecting the existence of pestilential contagion, and the effects of sanitary laws, should be decided upon clear and satisfactory grounds. The politico-avalanches of pestilential contagion and sanitary laws, which were wont to hang over their devoted heads being levelled to the ground, empested communities may henceforth look up to heaven, without the constant apprehension of being utterly destroyed. Disencumbered from those mortal enemies of health and life, and almost insurmountable impediments to knowledge, the subject will revert of right to the province of the physician ; from which, by an extraordinary effect of superstition, it has been so long disjointed. The statesman, the legislator, the police, and even the municipal officer, will, in propriety, have no more to do with epidemic, than they have heretofore with spasmodic diseases. To the physician alone, untrammelled by Juntas or Boards of Health, unapprehensive for his personal security, and freed from the responsibility imposed by sanitary laws, will devolve the duties of directing, in the ordinary course of his profession, the means of preservation and of cure ; duties, which, under the sway of these laws, he could not have hoped to perform, either with safety or success.

In the achievement of this great object, it is the duty of England to lead the way—to set the example ; for every nation on earth now has the paltry excuse for the enforcement of those abominable laws, that in this they “ follow the example of England, France, and America.” An abomination first practised by

the See of Rome in 1547, which nations have, since that period, followed each other upon trust in the erroneous course, like flocks of sheep or wild geese.

Were these laws repealed, in Britain, their discontinuance in Malta, Gibraltar, and the Ionian Islands, would follow of course; Genoa, Venice, Leghorn, Ancona, Trieste, Marseilles, the Spanish ports, Odessa, and other places, if they did not abolish them from conviction or imitation, would soon be obliged in self-defence. Nay, the civilisation of Egypt, and all those countries which do not possess sanitary establishments, would be materially advanced by the removal of these restrictions by other nations. Thus all nations and all colonies would be reciprocally benefitted; as well those which are, as those which are not, burdened with these pernicious establishments.

It is, for many reasons, incumbent on Britain to set an example in this matter; but particularly, because the sanitary system is far more injurious to her than other commercial nations. France does not suffer proportionally near so much; since, from proximity, the commerce of Marseilles, with all parts of the Levant, may more readily embrace those seasons which are most favourable to short quarantines; nor the Netherlands, since their quarantine is neither so rigid, nor of such long duration. The sum total of the advantages which would arise to the different interests which they affect in this country, from the removal of these restrictions, will, of course, be variously estimated by individuals, according to their particular views. But without attempting a calculation, I shall readily adopt the opinion of one individual, who has most minutely attended to the subject, (Dr. Maclean), who says he was "*not disposed to estimate them at a less amount than several millions sterling annually!*"

The Royal College of Physicians are the grand impediment, and stumbling-block, in the way of



correcting and rectifying all those atrocities and villanies. They are the high-priests of the doctrine of pestilential contagion, and the supporters of the barbarous and most infamous Quarantine Laws. Laws that are a disgrace to the whole of the civilised world, because of their unparalleled atrocities, wanton cruelty, and barbarity.

The grounds which they assume for their monstrous conduct is, "the general opinion of medical and philosophical authors and historians, from the time of Thucydides, Aristotle, and Galen, to the present day." Of the latter, was that extraordinary phenomenon, Mr. Tully.

Why the devil should these *Fellows* of the Royal College of Physicians throw themselves back upon the ancients, as a justification for their practice in the present day, *i. e.* their delinquencies? The ancients, bad as they were, would have held no fellowship with such "Fellows." The ancients had no such laws; they are of modern invention.

Although a doctrine be neither the less nor the more true, nor the less nor the more meritorious, on account of its antiquity or its novelty, yet the circumstances attending its introduction into the world may contribute to throw considerable light upon its character.

"It is most certain," says Dr. Maclean, "that the doctrine of pestilential contagion is not to be met with in the works of the ancient physicians; it was entirely unknown to them. Hippocrates wrote whole books upon epidemics, but he does not mention contagion. The first traces of it which we meet with, are in the 'Tales' of Boccacio; the first methodical treatise, in the work of Fracastorius, entitled, 'De Sympathia et Antipathia, et de Contagione et Contagiosis Morbus'—Venice, 1546. It being at that time an object of the See of Rome to translate the Council of Trent to Bologna, this was effected by persuading the Fathers of the Council that a contagious epidemic

prevailed at Trent, the contagion of which Fracastor-ious affirmed ‘*was particularly* dangerous to persons of rank.’ Persons of quality were then susceptible articles in the first degree; and the Fathers of the Council of Trent were almost all persons of quality. But now, in the revolution of human affairs, the poor, untitled and destitute, have risen to the highest place in the scale of susceptibility; while persons of rank and fortune have nearly descended to the degree of non-susceptibles: yet we are told of a ‘*received doctrine.*’

“ Thus did the delusive doctrine of contagion in epidemic diseases originate, and has since been cherished and extended, and now is maintained by political expediency. The doctrine was soon regularly erected into a system, and practically applied to the affairs of life; it has become a species of medical religion, and been taught in the universities and schools of physic as a part of education. From the universities of Italy it pervaded all other states of Christendom; but, notwithstanding the assertion of the London College of Physicians, that it was believed by the ancients in the time of Hippocrates and Thucydides, it has assuredly never formed a part of the creed of any Pagan, Mahomedan, or Hindoo nation. By the terror which it inspired among the ignorant, the impediments which it threw in the way of investigation among the faculty, and the arbitrary power with which it armed Governments, it was a delusion singularly calculated to perpetuate its own existence. These circumstances not only arrested improvement, in respect to epidemic diseases, but smothered pre-existing knowledge, occasioning a positive retrogradation. Some eminent physicians of Italy, of the times immediately succeeding, as Mercurialis, Rudius, Sancto-rius, Leplatius, &c., were not indeed blind to its demerits or novelty; but the infallibility of the Pope, and the power of the Inquisition, were too formidable to be questioned, much less to be opposed, by mere



cultivators of science; and pestilential contagion was firmly established by the highest authority.

“When we reflect upon the advantages of this doctrine, in affording to the *ignorant and indolent of every class a ready and summary explanation of all the phenomena of epidemics*, and to despotic Governments that choice implement of arbitrary rule—a plague-police—we cannot wonder that it should have continued to be as eagerly maintained as it was originally adopted; or that, when once established, a great reluctance should have been evinced by those whose views it served, to admit of a *bona fide* and efficient inquiry into its disputed validity. The restrictions emanating from the belief in contagion were first imposed by the Venetian oligarchy; and Boards of Health, and quarantine and lazaretto establishments, were multiplied along the shores of the Adriatic; they were afterwards in succession by other Christian countries: but in no case had any previous inquiry been instituted, by the constituted authorities of any country, into the validity of the doctrine upon which these precautions were founded. The necessity of restrictions being taken for granted, the only questions have been as to the extent and severity of those that should be imposed.”

In juxta-position with the College of Physicians, let us place the “Manifesto” presented to the Spanish Cortes in 1821, by the “free union of fifteen foreign and native physicians of different nations,” who volunteered their services to visit Barcelona, during the period the fever was committing such ravages as to carry off 246 persons a day. It is a most valuable and important document. It must silence for ever the College of Physicians; or otherwise convince the world, that they are incorrigible, and that their opinions are not worth one straw on the doctrine of pestilential contagion.

These physicians had come from England, and from France, for the sole purpose of ascertaining

whether the facts observed in the Barcelona fever were conformable with those which they had remarked in different epidemics which they had treated, not only in parts of Europe, but in Asia, and in the East and West Indies.

The project originated in the immortal Dr. Maclean, who had devoted thirty years of his life to the study of epidemics generally, and written many volumes thereon, as well as on the plague. The physicians were all men of great eminence. *Lassis*, Physician-in-Chief of the Hospital of Nemours, and formerly Physician to the French Armies; *Rochoux*, Member of the Medical Commission sent by the French Government to Catalonia, formerly Physician *en second* to the Military Hospital of Fort Royal at Martinico; *Francisco Piquillem*, Vice-President of the Sub-delegation of Medicine, Clinical Professor, and a member of various learned bodies; *Francisco Salva*, Honorary Physician to the King, Clinical Professor, Dean of the Faculty of Medicine of Barcelona, member of various academies; *Manuel Duran*, Member of the Academy of Practical Medicine; *Juan Lopez*, Member of the Superior Junta of Sanidad; of Catalonia; *John Leymerie*, citizen of the United States, formerly Physician-in-Chief to the Hospital of Santiago in Paris; *Dr. Thomas O'Halloran*, of the British Army; *Dr. Maclean*; and seven other equally eminent and respectable physicians.

Most of those fifteen physicians were contagionists: "Adhering to the doctrines which were held established, had strenuously defended that of the contagious properties, and the importation of the yellow fever from the other hemisphere into our soil; but, undeceived by sad experience, they recognise the immense difference which exists between knowledge acquired from books, and that which is obtained at the bed-side of the patient; and, after having adopted a philosophical doubt, abjured their error, and did not disdain to publish an open retraction, as has been done



in similar circumstances by the most celebrated physicians of America.

“Almost all of us, ocular witnesses of the horrid scene, from its commencement to its termination, superior to the terror inspired by the severity of the disease, and encountering all perils, had opportunities of observing it in the lazarettos, in the hospitals, in Barceloneta, in private houses, amongst all classes of persons, and under all the various forms and anomalies which it assumed.

“For the space of two months that our meetings were held, we had no other object than to set forth severally the observations which we had noted ; and having collected a sufficient number of valuable facts, we analyzed, compared, and discussed them, with the most scrupulous attention, neglecting no means to ascertain the truth, which it was often a very difficult matter to discover, amidst the general perplexity and confusion that prevailed during the epidemic.

“Our manifesto is consequently the result of an infinity of observations, exactly noted, and duly controverted : to a scientific discourse, capable of imposing upon the government, we have preferred deducing a series of corollaries from facts, which are incontrovertible, and cannot be denied by those who are of an opposite opinion.

“The corporation spirit, which is naturally suspicious and extensive, could not have animated physicians whose association is dissolved from the instant they sign this document : but notwithstanding the immense distance which is to separate us, a mutual correspondence will be established between us ; for, in the republic of letters, professors who entertain the same sentiments, form but one extended family. Notwithstanding our dispersion into various regions, the same philanthropic spirit, by which we are now animated, will continue to inspire us, and we will not cease to raise our voice in vindication of the rights of humanity, outraged by those sanitary laws, which,

being founded in error, have only served to augment the calamities which it was their professed object to avert."

The manifesto then proceeds to notice the proclamations which had been issued "*dictating the most efficacious means for maintaining isolated the sickness proceeding from that port*;" the manner in which the disease first appeared; the local and meteorological causes which had given the disease greater intensity; the stagnant water, and foul places of the city; having traced the disease from its rise till it had acquired its greatest degree of extension, and remarking upon its diminishing in a regular and progressive manner, they observe,—

"And of what diseases, produced by a known contagion, do the appearance and cessation depend upon determinate periods of the year?"

"During the prevalence of a popular and general cause, all the facts which can be cited in favour of transmission from the sick to the healthy, are inexplicable by contact, either direct or indirect, since all is under the influence of that cause.

"The fever did not pass the ditch which surrounds the city. And if this undeniable fact does not prove that the cause has been purely local, let the cause be indicated by which it has been thus circumscribed and limited.

"Not a single positive fact can be cited to prove that any healthy person has contracted the disease, beyond the sphere of the action of local causes, even having communicated with the sick and their effects.

"Thus, as during the whole month of August, those who fell ill, in front of the Casa Lonja, in the streets de las Encantes and de las Molas, it is certain, contracted their maladies in the part; so the few who sickened in Gracia, Sons, and other parts of the plain of Barcelona, contracted theirs within the walls of that city.

"And whether the aforesaid sick died or recovered,



there is no proved fact to show that any of their nearest relations were affected, if they had not been in Barcelona.

“ A great number of persons, who, after passing the whole day in the capital, retired at night to their families, either in country houses, or in the nearest villages, communicated the disease to no one, whatever were the situation of these houses ; not even those who had quitted the town on the very day they had lost a member of their family, and notwithstanding their having taken no precautions.

“ The daily traffic of carriages, which had conveyed sick persons privately introduced, on mattresses, linen, clothes, and other furniture, taken from the very focus of infection, did not transport the malady beyond the limits which had been assigned to it.

“ Notwithstanding the crowds squeezed into the smallest habitations, the general panic, the heat of the weather, and the combination of many other causes well calculated for the propagation of disease, however destitute that disease might be of any contagious property, it could not be transplanted out of the city.

“ And if to respire the pure country air, or solely to go beyond the walls of the town, sufficed to destroy the activity of the pretended contagious seed, and to hinder it from fructifying in the places in which it had been sown, we find it as little prolific among those who frequent places the most fit for developing the contagious properties of any disease whatever possessing it.

“ Thus danger, so far from being in the closest ratio of exposure (contact or intercourse with the sick), was positively (in many instances) in the reverse ratio.

“ In the marine lazaretto, in which, from the 7th of August to the 13th of September, there entered 79 sick (of whom 55 died and 24 recovered), not one, out of 32 of all classes of officers and attendants, contracted the disease.

“ In the lazaretto of the Vice-queen of Peru, which

received 56 sick (of whom 39 died, and 17 recovered), out of 23 persons of various classes who attended them, four only contracted the disease ; and these had come out of Barcelona.—They recovered.

“ In the hospital of the Seminario, into which 1767 persons were admitted during the epidemic (of whom 1293 *died*), out of 90 attendants on the sick, three only contracted the disease, which is but in the rate of one in thirty, *constituting a far greater exemption from sickness than was enjoyed by any other portion of the community.*

“ In the general hospital, whilst the fever attacked persons who had no communication whatever with the sick or their effects, the vicars, the brothers, and sisters, who attended the sick with the purest charity, the physicians, surgeons, &c., remained in perfect health.

“ Is it conceivable, that amongst such a great number of persons (attendants), there should not be any who had the disposition to be contagioned, (23 were susceptible), although differing in age, sex, temperament, mode of living, sensibility, &c.

“ Those who intrepidly performed dissections did not contract disease. One of them, who cut himself with a scalpel, only experienced for some days a swelling of the glands of the arm-pit.

“ Even insane persons, shut up in their cells, were attacked. They complained of an ardour, or intense heat, which unexpectedly seized them.

“ If so many and such repeated irrefragable facts do not constitute a convincing proof of the non-existence of contagion, we must acknowledge our ignorance of what ‘a convincing proof’ means.

“ Some families, who isolated themselves in their houses, employing the most exact precautions for avoiding external intercourse and communication, did not try such means to preserve themselves from the malady, because it depends upon general causes.

“ It was very common to see four, six, or even



eight individuals of the same family simultaneously affected; that is, on the same day, the same hour, the same instant.

“ Various persons, who had had the fever in the West Indies and in Cadiz, not only did not escape contracting it anew, but fell victims to the necessity of it.

“ Whilst it is in our power to preserve the germ of contagious maladies, as the small-pox, the vaccine, the itch, &c., to reproduce and to spread them, at pleasure, an epidemic having terminated, it is impossible to re-produce it by any known means. Many persons have inhabited apartments in which pestiferous patients had perished, without their having been white-washed; others have slept in beds in which pestilential patients had perished, without causing the mattress to be washed or cleaned in any way; and others have used their clothes and linen without purification; and there is not a single example of a disease being communicated in this way, which disappears at a certain period.

“ We may defy those who attribute this malady to exotic miasms; let them employ all imaginary means to re-produce it in the present season, or in any other, in which the same combination of causes which produced it last year does not exist.

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“ The very sanitary precautions which have been adopted by the Government, from the beginning to the end of the epidemic, supply an argument of the most weighty kind against the existence of contagion.

“ They permitted intercourse and communication between the inhabitants of Barcelona and Barceloneta to the 2nd of September; they did not hinder the removal to the general hospital of the sick from the ships, even after the establishment of the lazarettoes; they persisted in declaring, in all their manifestos, especially in that of the 18th of August, that ‘ *the fever, although exotic, and transmitted by means of*

*miasmata to this port; had not yet assumed a contagious character, and that probably it would not assume it in future;* forming, it must be admitted, an assemblage of proofs against the contagious property of the disease, which, however, must have belonged to it, had its origin been exotic.

“After the superior Junta of Sanidad had maintained that the disease was *not contagious*, and even desired to recall the word ‘*contagion*,’ which, they said, had been inserted by inadvertence in an official letter, dated the 1st of September, its professors (medical members) declared that the yellow fever existed in Barceloneta with a *tendency to a contagious character*.

“The barrier between the two towns being established on the following night, its object must have been, of course, to stop the growth or progress of this *tendency to a contagious character*.

“Experience has proved the inefficiency of these means, extremely prejudicial to the unfortunate inhabitants, whose intercourse was interdicted, and useless towards preventing the disease appearing in the city.

“On the 3d of September, on which day Barceloneta was isolated, or put in quarantine, there were only *nine* sick persons in that town; *by the 10th their number had increased to one hundred and sixty-two*.

“The only efficacious means employed by the Government, namely, *emigration*, at once demonstrates the influence of local causes, and destroys the idea of contagion.

“Those who left Barceloneta, with all their effects, without submitting to the purifications enjoined by the contagionists, did not carry the disease to any of the healthy points to which they were destined; and if a few of them sickened, the causes having been applied at Barceloneta, none of their companions or attendants were affected, who had not notoriously been in the focus of the infection.

“The infractions, whether direct or open, of the strict cordon by which the place was surrounded, gave



occasion to the people to turn it into ridicule, bestowing upon it the most contemptuous epithets.

“The vexations experienced by those who quitted Barcelona, and the arbitrary measures adopted by each separate community, even in the highest mountains, against an imaginary contagion, were an insult to humanity, and a proof the most authentic of the ignorance in which nations may be plunged by the vicious routine of sanitary laws.

“From all that has been stated it results:—

“1. That the fever which prevailed in 1821, was *indigenous*.

“2. That it was epidemic.

“3. That it was *not* contagious.

“4. That the sanitary measures adopted by the Government were precarious, wholly useless, and even prejudicial, if we except that of emigration.

“5. That if, instead of remaining in a shameful inaction, expecting *to knock on the head an invisible and imaginary contagion, unknown in its essence and impossible to be demonstrated*, all the means calculated to remove the local causes were employed with constancy and energy, it might be hoped that the disease would not re-appear; that this beautiful capital would recover the degree of salubrity which it formerly was wont to enjoy; and that commerce and industry, in a word, that prosperity, extending not only to all Catalonia, but to the whole of Spain, and even to the most distant nations, would revive.

“Barcelona, February 21, 1822.

“(Signed) Lassis, M.D.; Rochoux, M.D.; Francisco Piquillem, M.D.; Francisco Salva, M.D.; Manuel Duran, M.D.; Juan Lopez, M.D.; Salvadore Compmany, M.D.; Ignacio Porta, M.D.; Jose Calveras, M.D.; Antonia Mayner, M.D.; Ramundo Duran, M.D.; Buenaventura Sahuc, M.D.; John Leymerie, M.D.; Thomas O'Halloran, M.D.; Charles Maclean, M.D.”

The presentation of this document to the Cortes led to the first public debate which ever took place

in a legislative assembly on the important question of the doctrine of contagion, and the utility and policy of quarantine laws. Regardless of the *unanimous dictum* even of the medical members of their own body, being *nine* in number, as well as the known opinion of an immense majority of all the physicians of Spain, in October, 1822, they rejected *in toto*, after a solemn debate, and by a majority of sixty-five to forty-eight votes, the project of a code of sanitary laws, which had been for years in careful preparation successively, by a commission of the Government and two committees of public health of the Cortes.

The debates were long and very interesting. *Senor Valdes* (Don Cayetano) remarked:—"I must oppose the project, as considering it *worse than contagion*; since, in seeking to prevent an evil which may sometimes be uncertain, it will occasion real ones, and will never succeed in shortening contagion. Let us suppose Madrid to be contagioned; if it were to be isolated, what would follow? That the people of the environs would not bring their provisions, and that the inhabitants would die of a malady for which no cure has yet been discovered—hunger, and want of food; and, at the same time, the inhabitants of the neighbourhood would have no vent for their provisions. Further, would it be possible to isolate Madrid? I think not. In a vessel the evil might be restrained; but on land it could not, because the intercourse of communities cannot be cut off. Moreover, the project is useless, because, if from a vessel coming from America, after having been made to perform quarantine, the disease may be propagated after five months, it is clear that the contagion may lie five months in an occult state, and consequently that no precautionary measures can ever be successful. Let us suppose, further, that one of a community is seized with yellow fever; it is clear that if he did not come from America, it could not be brought from thence; and I ask, where is the person to be found



who has communicated it to him, or those to whom he has communicated it? These measures must be admitted to be a nullity.

“ The passports which are required in this project are of no use ; for we know that the suspected may procure them for one dollar, two dollars, or a doubloon, &c. ; *for the poor alone there is no passport ; and they are shut up in a lazaretto, as suspected, there to die.*

“ It is said to be very possible to shorten contagion ; but, what measures are to be adopted in a community where two or three hundred die daily ? None. Unfortunately I have suffered sixteen quarantines, in which I have experienced sixteen thousand vexations ; and what followed ? That the very persons set over me as guards invited me to infringe the quarantine. It is for these reasons that I consider this code as useless, and that I oppose the Cortes, declaring that there is ground to vote against it.”

His Majesty, the King of Spain, knighted Doctor Maclean, “ in order to recompense, in some manner the important services rendered to humanity by the English physician, Don Carlos Maclean, in proceeding at his own expense, from London to Barcelona, under the critical circumstances in which that city experienced all the calamities of the yellow fever, with the philanthropic object of observing the nature and progress of that malady ; and in also presenting, as the fruits of his interesting investigations, a printed exposition, manifesting the principles on which that celebrated professor founds his opinion of the non-existence of contagion in the yellow fever. His Majesty has been pleased to invest the said Don Carlos Maclean with the Cross of the Royal and distinguished Order of Charles III., directing, at the same time, this exposition above mentioned to be transmitted to the general direction of studies for their opinion of such matters.”

This reference to the general direction of studies, terminated in a similar manner as the reference of the

British Privy Council to the London College of Physicians ; of which we shall shortly see.

In the face of the Barcelona Manifesto, and the conclusive evidence detailed in Dr. Maclean's most valuable and excellent tracts, on epidemics, on the plague, &c., all clearly proving the non-existence of pestilential contagion, how came the Board of Health, in the year 1831, to act the rash part which they did on the anticipated approach of the Cholera Morbus? What reparation is there not due to the public and the world at large for the misery, affliction, death, and destruction, which their proclamations have entailed upon mankind?

In the manifesto we have truth and experience ; in the proclamations, ignorance and falsehood combining to suppress it.



## SECTION IV.

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DOCTOR MACLEAN, THE PRIVY COUNCIL, AND THE ROYAL COLLEGE OF PHYSICIANS; AND REPORT OF THE SELECT COMMITTEE OF THE HOUSE OF COMMONS.

THE facts already detailed will have satisfied the reader of the vast importance of the investigation which I had the honour to press upon the attention of Sir Robert Peel, and subsequently Lord Melbourne, for “the abolition, or at least ameliorating the present pernicious and impolitic quarantine laws;” but of which, unfortunately, Sir Robert Peel “could not see the advantage of the inquiry suggested;” and, therefore, “declined sanctioning” it, “unless recommended to him by the proper official authorities”—*i. e.* the Royal College of Physicians.

This decision of Sir Robert Peel will be considered the more remarkable, if not extraordinary, when we examine the correspondence which took place in 1818, between the Privy Council and the College of Physicians relative to Dr. Maclean’s publications on the plague of the Levant, and the evils of quarantine laws, his ample refutation of the doctrine of pestilential contagion, as well as the Report of the College of Physicians on his works; and the Report of the Select Committee of the House of Commons, appointed in 1819, on the application of Dr. Maclean, “to consider the validity of the doctrine of contagion in the plague;” and the brief refutation of Dr. Maclean of the grounds upon which the abolition of the system of sanitary laws were then resisted by those authorities.

The documents referred to are now of the utmost

importance to the whole of the world; and will do more to remedy and correct the melancholy and fatal delusion under which mankind are now unfortunately labouring with regard to the doctrine of pestilential contagion, than the results of any inquiry Sir Robert Peel, or Lord Melbourne, could have instituted, even had they been pleased to have attended to my humble recommendation. Indeed, no inquiry is requisite after the facts set forth. They are of themselves sufficient data for every nation on the face of the earth to act upon in the most summary and decisive manner.

“It is incumbent,” says Dr. Maclean, “on statesmen and legislators to make use of their senses. It is incumbent on them not to confide too implicitly in the representations of the followers of the craft and mystery of conjectural medicine. By what process, for instance, are the College of Physicians of London to form a judgment on this matter? I will admit them to be, collectively or severally, possessed of very great, indeed wonderful, sagacity; but I am, notwithstanding, somewhat at a loss to conceive, how a body, whose members, with very few exceptions, have never explored beyond the sources of the Thames, the Cam, or the Isis, can intuitively possess a knowledge of the maladies which desolate the banks of the Ganges, the Nile, or the Bosphorus, equal to that acquired in the usual way by persons who have visited those regions. I have seen cattle on board of an East Indiaman appearing to inhale with satisfaction the fragrance of the cinnamon, at a computed distance of twenty leagues from the island of Ceylon; that the senses of a collegian in Warwick-lane should be capable of discerning the properties of pestilences in the most distant regions, is a phenomenon infinitely more surprising, if not absolutely miraculous.”

“*The Privy Council to the College of Physicians.*

“Council Office, Whitehall, 16th February, 1818.

“Sir,—I am directed by the Lords of His Majesty’s



most Honourable Privy Council to acquaint you, that their attention has recently been called to a publication by Dr. Charles Maclean, which he has communicated to their Lordships, on the subject of epidemic and contagious diseases, and particularly with reference to the Plague.

“The subject is obviously of so much importance to the welfare of mankind in general, that the Lords of the Privy Council do not feel that they could pass by Dr. Maclean’s communication without notice, and their Lordships naturally look to the enlightened Members of the Royal College of Physicians, as being eminently calculated to furnish them with the most valuable information, and to elucidate a subject which is no less interesting than difficult : under this impression their Lordships have directed me to transmit to you a copy of the printed volume\* published by Dr. Maclean, together with a written summary of his argument, which the doctor has prepared by their Lordships’ direction ;† and to request that you will submit the same to the consideration of the Members of the Royal College of Physicians, in order that they may report, for the information of the Lords of His Majesty’s most Honourable Privy Council, the view which the College take of this question, and more particularly their opinion on the following propositions, as stated by Dr. Maclean, viz. :

“1st—Whether it be sufficiently proved, that epidemic diseases do not depend upon contagion ; and that, consequently, quarantine and other regulations of plague police are not only useless but pernicious.

“2nd—If not, what additional proofs are considered necessary.

\* “The first volume of my ‘Results of an Investigation respecting Epidemic and Pestilential Diseases, including Researches in the Levant concerning the Plague,’ published in 1817.

† “Inserted in No. 31 of the ‘Pamphleteer,’ for April, 1820.

“ 3rd—Whether the doctrine of contagion, as the cause of epidemic diseases, be still deemed to stand, in whole or in part, confirmed and unshaken, and all the establishments founded upon it worthy of being continued.

“ I am, Sir, your most obedient humble servant,  
(Signed “ JAMES BULLER.

“ *The President of the Royal College of Physicians.*

“ *The College of Physicians to the Privy Council.*

“ College of Physicians, 31st March, 1818.

“ Sir,—I have the honour to transmit to you, for the information of the Lords of His Majesty’s most Honourable Privy Council, the following answers to the questions proposed by their Lordships to the Royal College of Physicians :

“ 1st—We are of opinion, although some epidemic diseases are not propagated by contagion, that it is by no means proved that the plague is not contagious, or that the regulations of plague police are useless and pernicious; we are persuaded, on the contrary, from the consideration of the experience of all ages, and some of us from personal observation, that the disease is communicable from one individual to another.

“ 2nd—The additional proofs which would be required of the non-existence of contagion, must be such proofs as would be sufficient to counterbalance the general opinion of medical and philosophical authors and historians, from the times of Thucydides, Aristotle, and Galen, to the present day; so late as the year 1813, the contagious nature of plague was fully ascertained by the British medical officers in the island of Malta.

“ 3rd—The doctrine of contagion appears to us to be wholly ‘unshaken’ by any argument which Dr. Maclean has advanced; at the same time



we think it probable, that some of the personal restrictions enforced on the establishments for quarantine, might be modified without risk to the public safety.

“ I have the honour to be, Sir,

“ Your most obedient servant,

(Signed)

“ CLEM. HUE, Registrar.

“ *To James Buller, Esq. Council Office, Whitehall.*

“ *The Privy Council to the College of Physicians.*

“ Council Office, Whitehall, 30th Sept. 1818.

“ Sir,—I am directed to acquaint you, that the Lords of His Majesty’s most Honourable Privy Council have, since the receipt of your letter of the 31st March last, received from Dr. Maclean a second volume of his work on the non-contagious nature of the plague, which the doctor has represented to their Lordships, as containing additional proofs of the accuracy of his views upon that subject ; and as being in consequence not unlikely to lead to some variation in the sentiments of the College of Physicians. Although the Lords of the Privy Council cannot undertake to say how far this may be the case, the importance of the subject induces them again to bring it under the consideration of the College of Physicians ; and I am therefore directed to transmit to you a copy of the second volume of this work, and to request that you will lay the same before the College for that purpose.

“ I am, Sir,

“ Your most obedient humble servant,

(Signed)

“ JAMES BULLER.

“ *To Clement Hue, Esq., Registrar of the College of Physicians.*

“ *The College of Physicians to the Privy Council.*

“ College of Physicians, November 7th, 1818.

“ Sir,—I am directed by the President and Fellows of

the Royal College of Physicians, to acknowledge the receipt of your letter of the 30th September, together with a copy of the second volume of Dr. Maclean's work on epidemic and pestilential diseases, and to state to you, for the information of the Lords of His Majesty's most Honourable Privy Council, that nothing contained in Dr. Maclean's second volume has altered the opinion expressed by the College in their former Report.

“ I have the honour to be, Sir,

“ Your most obedient servant,

(Signed)

“ CLEM. HUE, Registrar.

“ *To James Buller, Esq., Council Office, Whitehall.*”

“ Were the question of pestilential contagion,” says Dr. Maclean, “ a mere matter of faith, which could only be decided by authority, or by numbers, then, doubtless, it would be justifiable to defer to a *mere dictum* of the College of Physicians, or to the votes of a majority of the medical faculty : but it is a matter of fact, resting, like all others, on appropriate evidence of which medical men are more incompetent judges in proportion as they are, from prejudices of education, habit, or interest, less unbiassed than other persons of equal intellectual power and general acquirements : and of all the members of the medical faculty, the Royal College of Physicians of London, for the reasons which I shall presently state, must, in all that regards the question of pestilential contagion, and the merits of sanitary laws, be deemed to be by far the least unbiassed. It is unfortunate, when Governments, swayed by routine, or impelled by necessity, find themselves in the predicament of being obliged to consult, respecting the propriety of adopting an important innovation, the very persons who have the most powerful motives for resisting a change.

“ The College had, in their corporate capacity, in the course of centuries, been in the habit, as often as the subject was brought before them, of committing



themselves, as a matter of course, in favour of the existence of pestilential contagion, and of the efficiency of sanitary laws for their proposed ends, without any previous inquiry into the real state of the facts ; and were in 1800 and 1805, still without any previous inquiry into the existence of the evil, for which these regulations were intended as the remedy, the framers of the quarantine regulations, which now exist in England.

“ To have pronounced against the doctrine of pestilential contagion, and in favour of the abolition of sanitary laws, would have been to condemn all their own former numerous decisions ; an act, which, although it would have been only a virtual declaration that they were at that time wiser than they had been at any of these former periods,—so wise as to make a merit of renouncing error,—would have indicated a magnanimity which but rarely falls to the lot of individuals, and still more rarely to that of bodies of men. It was therefore quite evident beforehand what would be their decision on the subject of this reference.

“ Having stated the grounds upon which I consider the College as incompetent, because not unbiassed judges in this case, I now proceed to show that the Reports which they did make upon this occasion, dated the 31st of March and the 7th of November 1818, are in every particular destitute of foundation.

“ Respecting the general features of these documents I may observe, that instead of detailed and argumentative Reports, assigning fully the grounds of the opinions delivered, as might have been reasonably expected, and I had expressly required, they consist of nothing but bare unsupported negatives to two or three questions proposed to them by the Privy Council, from a summary of doctrines, which had, with a view to simplify the inquiry, been presented by me to that body. Thus the merits of a system, of stupendous magnitude, unparalleled importance, and universal interest, the development of which has occupied

several years of laborious investigation, and filled two volumes of no inconsiderable size, were disposed of in *about twenty lines!*

“The phraseology of these Reports is also not a little remarkable; instead of speaking of the doctrines of *pestilential* contagion, or of the doctrine of contagion in *epidemic and pestilential diseases*, or of the doctrine of *contagion in the plague*, they uniformly speak of “the doctrine of contagion,” simply; in which sense, as these terms properly include only diseases that are unquestionably contagious, their opposition, had I denied the existence of such a property in respect to them, would have been perfectly well founded. To the doctrine of contagion thus limited within its proper sphere, it must have been quite obvious that I had never intended to object: that this phraseology was deliberately chosen, for purposes of mystification, I cannot allow myself to suspect; and yet so egregious an inaccuracy, on the part of so learned a body, is not a little surprising. In the next reference which may be made to them upon this subject, if that should be thought fit, it is to be hoped the Privy Council will insist upon their making the proper distinction between *simple* contagion and *pestilential* contagion.

“Having taken this slight glance at the general features of the Reports of the College, let us now examine their particular structure, by dissecting each sentence or paragraph in succession, beginning with the first in point of date, or that of March 31st, 1818.

“1. ‘We are of opinion, although some epidemic diseases are not propagated by contagion, that it is by no means *proved* that the plague *is not* contagious.’

“In science, it has not, I believe, been very usual to consider the affirmative side of any question as *proved*, merely because the negative has *not* been proved. The *onus probandi* is, on the contrary, if I understand the matter rightly, always deemed to rest with the persons affirming; those denying never being



in reason required to prove a negative. In ancient times, the absence of all proof of existence was wont to be regarded as sufficient evidence of non-existence, '*de quid non apparentibus et de quid non existentibus eadem est ratio.*' If contact were sufficient evidence of contagion, and in pestilence no other has been adduced, gout, rheumatism, and dropsy, might be equally proved to possess that property. Under these circumstances, and independently of the evidence adduced on the opposite side, it might have not unreasonably been expected from a public body, which has been characterized as 'profound, sad, and discreet, groundly learned and deeply read,' when solemnly called to sit in judgment upon a question of singular importance, and universal applicability, that they would have made a becoming and philosophical declaration to this effect:—'As no proof has ever been given, that plague, or any other epidemic disease, is capable of being propagated by contagion; and as, if so remarkable a property did exist, the proof could not have lain so long concealed; for these reasons alone we hold it to be our indispensable duty to declare it as our firm conviction, that such a doctrine has not the slightest foundation.' But as we are told, that in modern times, physicians, despising the ancient laws of nature, have taken the liberty to change the seat of the heart, so the College, reversing the axioms, and contemning the rules of inductive philosophy, have, by the help of a new species of reasoning altogether peculiar to medicine, felt themselves authorized to conclude, that 'as it is by no means proved (in their opinion) that the plague is *not* contagious, it is *therefore satisfactorily proved* (in their opinion) that the plague *is* contagious.' Had the premises been correct, the conclusion would still be erroneous: it would with due deference to modern *medical logicians*, be a perfect *non-sequitur*. I know of nothing to which this mode of ascertaining physical truth is so analogous, as that which is invariably pursued to ascertain



moral truth by another renowned tribunal. The College impose upon medical sceptics the penalty of being obliged to conform to the affirmative, unless they can prove the negative, of a most momentous proposition of science: the Inquisition consign those, who are accused of religious or political scepticism, to the torture, unless they can give satisfactory proof that they are not deficient in faith! nor is it any sensible alleviation of this evil, that it is not *always* impossible to prove a negative. In the physical world, the negative of a simple proposition of science may sometimes be proved, by showing the impossibility of the affirmative; as, in the moral world, innocence may sometimes be proved by showing the impossibility of guilt; but these cases would be only rare instances of good fortune, or exceptions to a general rule; whilst such a perversion of all the accredited rules of evidence, in judicature and in science, as has been mentioned, would, if generally extended, prove almost uniformly fatal both to innocence and to truth. In estimating the effects of the Inquisition, and of sanitary institutions, upon the well-being of society, contrary perhaps to what might *prima facie* be expected, we find, on a strict examination, the balance of humanity considerably in favour of the holy office. The Inquisition, however horrid the torture which it inflicts upon the individuals whom it selects for its vengeance, and however extensive and complete its influence in preventing the utterance, perhaps even the conception, of truth, and the progress of human happiness and prosperity, has not physically destroyed as many of the human species in a whole century, as have fallen victims to sanitary establishments, consequences of the doctrine of pestilential contagion, in a single season! But because I make this declaration, am I to be charged with being the apologist of the Inquisition, or the denunciator of medical corporations? I speak of the *effects of institutions*, not of the *intentions of men*; these are not by any means so widely



different as ignorance or knavery, wishing by implication to arrogate a superior inherent propensity to virtue, would fain maintain. The four emphatic words of the historian, "Man and for ever!" embrace a comprehensive, although compendious, code of ethics. The monk, whose destinies have allied him to a most inhuman tribunal, might, if his lot had been differently cast, have proved a good member of general society, in the precise proportion that he is a flaming inquisitor: the medical corporator, whose overflowing zeal impels him the most violently to maintain the *dogmas* of his body, or to resist the new truths which would overthrow them, might, if no medical corporations existed, or if he considered his interests as identified with those of society at large, have proved, in the same proportion, if he had turned his attention that way, a good cultivator of science, perchance a most excellent investigator,—nay, a profound discoverer. I leave the sagacious reader to apply these observations, which he will find applicable much beyond the pale of medicine or religion.

" 2. 'We are persuaded on the contrary, from the consideration of the experience of all ages, and some of us from personal observation, that the disease is communicable from one individual to another.'

" Here the term 'experience' is evidently confounded with *tradition* or *practice*; seeing that the result of the application of a doctrine, either palpably erroneous, or which had not been proved to be true, would not in a hundred thousand years amount to an iota of experience. And even thus modified, the assertion would be still incorrect; since it has been shown that the very idea of *pestilential* contagion was unknown to the ancients, and is, in fact, a *discovery* of very modern date.—With respect to the alleged 'personal observation' of some of the members of the College, as we are uninformed wherein it consists, we may, in the face of demonstration, be excused for considering

it no less fanciful than ‘the experience’ of the ancients. Indeed we find that, even according to their own estimate, the degree of conviction produced upon the College, as the joint effect of ‘the consideration of the *experience* of *all ages*,’ and of the ‘personal observation’ of some of its own members, does not amount by any means to a certainty, but only to a simple persuasion: and upon this simple persuasion of the College, in the face of the most irrefragable proofs, are institutions continued, which, independently of numerous other injuries of immense magnitude, subject this nation and its dependencies to the continuance of a great pecuniary detriment annually!

“ 3. ‘The additional proofs which would be required of the non-existence of contagion, must be such proofs as would be sufficient to counterbalance the general opinion of medical and philosophical authors and historians from the times of Thucydides, Aristotle, and Galen, to the present day.’

“ *Proofs* to counterbalance *opinion*! This appears to be *prima facie* very much of the nature of nonsense. The absence of all proof of existence ought to be sufficient proof of non-existence to counterbalance the opinion in its favour, had such opinion actually prevailed; of all the persons who have existed from the beginning of the world to the present day. But I have shown, in the work which is here the subject of collegiate animadversion, that such a doctrine could not even have been known to the ancients, as well as the æra and the object of its introduction; and the absurdity of attributing this belief to any period prior to the dark ages, has been further shown, and at greater length, in a paper entitled ‘Reasons for concluding that the Doctrine of Pestilential Contagion was wholly unknown to the Ancients, &c.,’ inserted in Nos. 110 and 111 of the *London Medical Repository* for February and March, 1823, being volume xix.

“ For the sake of those who may not have an opportunity, or be disposed to take the trouble, of consult-



ing the publications to which I have referred, I shall here state one or two facts, which they may deem sufficient proof, that the doctrine of pestilential contagion could not have been known to, and, *à fortiori*, could not have been believed by, the ancients. Hippocrates had written expressly upon epidemic diseases. Do his works mention or allude to pestilential contagion? No! not once: nor to simple contagion either; for even that was unknown to the ancients. They are both *modern discoveries*! But Thucydides? He was the contemporary of Hippocrates: one unlucky sentence of that celebrated historian, which had the misfortune to fall into the hands of the pestilential contagionists, has been unmercifully tortured, without however being made to utter the absurdities which they wished it to declare: and it is a remarkable circumstance, that this sentence should be made to speak a different language by the translators who have preceded and by those who have followed the æra of the Council of Trent. It was a sort of God-send, like the incidents from Malta and from Zante, related in section xxxi:

“ It seems a surprising absurdity, not to say effrontery, to represent an historian cotemporary with Hippocrates as speaking of a medical doctrine, as a thing of course and generally received, respecting which the great father of physic himself had been wholly silent, and respecting which he could not have been silent, if it had been known, or even surmised, although not believed, in his time. In regard to this, as well as to every other part of their system, the partisans of pestilential contagion would, in their humility, arrogate to themselves the right of imposing upon their opponents the task of proving negatives. ‘If you do not prove that the ancients did *not* know and believe in the doctrine of pestilential contagion,’ say they, ‘we shall assume, as of right, that it was both known to and believed by them, without considering ourselves bound to adduce any specific proofs.’ For my part,



not having studied under Prince Hohenlohe, I take leave to decline entering into any formal engagement for the performance of miracles. But, whoever, without being able to produce satisfactory evidence, by more than dubious words, or mere fragments of sentences, in short, by some explicit and unequivocal declaration, shall persist in maintaining these propositions, I shall, in the quality of an uninspired investigator of sublunary facts, feel justified in considering him as affirming what he cannot but know to be wholly destitute of foundation.

“Thus, the proofs required by the College have been abundantly supplied. But the truth is, that this question is not of the smallest importance; since as many opinions as could possibly exist upon the subject might be overturned by the experiments of a single day: nor is it probably so regarded; but is merely brought forward as a tub for the whale, to divert the attention of the public from the main question. I shall therefore not dwell any further on this part of the subject. From the wording of this sentence, who would not think that I had denied the existence of simple contagion, in those diseases of which it is unquestionably the cause.

“4. ‘So late as the year 1813, the contagious nature of the plague was fully ascertained by the British medical officers in the island of Malta.’

“The ‘*nature*’ of a disease, I may observe by the by, is wholly independent of the properties of its cause. Similar diseases may be produced by agents of dissimilar qualities. A disease is not a substance, but the condition of an organ. I dislike verbal criticism; but in disquisitions of science, accuracy of language is essential; and in medicine, the want of attention to it has been no less injurious than it is notorious.

“‘The contagious nature of the plague,’ then, we are told, ‘was fully ascertained’ (not proved) at Malta in 1813. In what manner, or upon what occasion, were these contagious properties ‘ascertained’



tained?' Of this the College omit to inform us; and we are left to our conjectures. Was it by feeling the pulse through a tobacco leaf, a practice that was actually enjoined, under the penalty of a long quarantine? or by viewing patients through an opera-glass or a telescope? or was it a deduction from the fact, that the disease did *not* spread among the soldiers, living *gregariously*, as they do in barracks, nearly so much as among the inhabitants, who do not live *so* gregariously? or from the still more decisive fact, that the orderlies, who attended the sick soldiers, were not *in any single instance* affected?—Such are the *proofs*, according to the medical logicians of the College, of the contagious properties of plague, imported from Malta in 1813! I should be curious to know by what processes of reasoning the same conclusion has been obtained at different æras, in the course of '*the experience of all ages.*'

“5. ‘The doctrine of contagion appears to be wholly ‘unshaken’ by any argument which Dr. Maclean has advanced.’

“I suspect the College must have here meant to be sarcastic as well as correct, and that the word ‘unshaken’ should be understood in a literal, not in a figurative sense. In this sense, it is certainly quite true, that no arguments which I have employed have *shaken* either the doctrine of *simple* contagion, or of *pestilential* contagion, for the very obvious reasons, that they could not have performed the miracle of shaking either what is immoveable, or what has no existence. Here I have the rare and unspeakable happiness of *literally* according with the College. But if my arguments have not literally *shaken* the doctrine of *pestilential* contagion, it is only because they have abundantly proved it to be incapable of being placed in a tangible shape; for evidence of which I would beg leave to refer the reader to the following sources: 1. ‘A Dissertation on the Source of Epidemic and Pestilential Diseases, showing that they

never arise from contagion, &c. Calcutta, 1796 :” 2. “ Suggestions for the Prevention and Mitigation of Epidemic and Pestilential Diseases, comprehending the Abolition of Quarantines and Lazarettoes, &c. London, 1817 :” 3. “ Results of an Investigation respecting Epidemic and Pestilential Diseases, including Researches in the Levant concerning the Plague. 2 vols. 8vo. London, 1817 and 1818 :” and various essays subsequently inserted from time to time in the *London Medical Repository*, and other periodical publications.

“ 6. ‘ At the same time, we think it probable that some of the personal restrictions enforced in some of the establishments for quarantine might be modified without risk to the public safety.’

“ This admission on the part of the College is wholly inconsistent with all their previous conclusions. If sanitary laws, of which quarantine is a part, be efficient for their professed objects, they ought to be universally extended ; if not, they ought to be universally abolished. There is, in this case, no middle course—no compromise. If the College then be justifiable in not recommending their universal extension, they are not justifiable in not recommending their total abolition ; and if they be justifiable in not recommending their total abolition, they are not justifiable in not recommending their universal extension. Let them choose which horn of the dilemma they please ; there is no escape from censure.

“ 7. The purport of the second Report of the College to the Privy Council, dated November 7th, 1818, concerning the second volume of my work upon epidemic diseases, is, that nothing contained in it has altered the opinion ‘ expressed in their former Report.’ (I have shown in the preceding pages how much the opinion ‘ expressed in their former Report’ is worth.) Besides the notorious incompetency of the College as judges of this question, upon general grounds, I have, in my observations on their first Re-



port, shown *seriatim* the perfect futility of every one of the reasons which they have there assigned for their opinion; and as their second Report is but the mere expression of their adhesion to the opinion delivered in their first Report, but little further comment is necessary. In this matter at least, without consideration of their general merits, the interests of the country, and of mankind at large, demand that we should consider ourselves as absolved from all allegiance to the authority of the College. To effect the conversion of that learned body, was a task which I was not by any means visionary enough to undertake; but only to produce sufficient materials of conviction. Respecting the validity of these materials, I am now again at issue with that learned body. If they will disrobe themselves of the mantle of fancied authority; if they will abandon the scholastic intrenchment of dogmatism untenable in these times; if they will descend, in the face of day, into the open field of fair discussion, committing the issue of the controversy to the appropriate weapons of fact and argument, and show cause *in foro scientiæ*, why sanitary institutions, comprehending quarantine and lazarettoes, should not be every where abolished; if, I say, they will now do all these things, or not being able to do them, if, in so important a matter, they will evince the magnanimity to acknowledge error, they will merit applause; whilst, if they act otherwise, the irreverence of the age for mere authority, when placed in opposition to reason, may induce the public wholly to disregard their opinion; in which case they will themselves be the only losers by their nonconformity; for surely we are not in the predicament of being obliged to abide by the authority of any collegiate body, however respectably composed, in opposition to truth and reason; or to abstain from abolishing establishments proved to be pernicious and expensive, merely because we may not be able to obtain from such body the acknowledgment of conviction."

“The reader will perhaps marvel, aware as I must have been of all these circumstances of disqualification beforehand, that I should have at all assented to a reference, which it was obvious could be productive of no immediate or direct beneficial result. The explanation is easy. The difficulties by which an inquiry of this kind, officially instituted for the first time in the history of the world, was found to be on all hands surrounded, were such that, unless I suffered it in some measure to take its course in the usual channel, there was but little probability of its proceeding at all; whereas the agitation of the question, even in this inadequate manner, and whatever might be the conduct of the College, could not, I was persuaded, fail to be useful, if it were only by showing the weakness of their cause; whereby we should afterwards be enabled to resume the subject with much greater advantage. This was also in conformity with the unerring principle of the utility of public discussion in all matters whatsoever appertaining to science. But in order that nothing might be wanting that depended upon me, I earnestly represented both to the Privy Council and to the College of Physicians, pending the proceedings, the perfect nullity of any decision which should consist of a mere collegiate *dictum*,—of any thing short of an argumentative Report.”

Dr. Maclean, of course, was any thing but satisfied with the decision of the Privy Council and the College of Physicians. Upon the doctor expressing his dissatisfaction at the result of the reference, it was agreed that a select committee of the House of Commons should be appointed “to consider of the validity of the doctrine of pestilential contagion in the plague.” “Thus,” says he, “instead of embracing the doctrine of pestilential contagion generally, the functions of the Committee were limited in a manner that, even were all other circumstances favourable, must have had the effect of leaving the inquiry incomplete. As sanitary laws equally regard all epidemic diseases supposed to be



contagious, an inquiry into the validity of the doctrine of contagion in any single epidemic, however well conducted or correctly terminated, it is obvious could only have a result as one is to the whole number of known epidemics. By restricting, therefore, the functions of the Committee to an inquiry into the validity of the doctrine of contagion *in the plague*, to the exclusion of the fevers of Gibraltar, Spain, America, &c., as well as of the epidemics which had then for some years prevailed in England, Scotland, and Ireland, although equally objects of sanitary laws, and much more easy of investigation, it may be said that the failure of the inquiry was ensured previous to its commencement.

“To this pernicious limitation, I however thought fit to assent, rather than that there should be no committee; persuaded that every fresh agitation of the question, in however inadequate a form, would, by destroying some links of the chain of delusion, bring us nearer to the point at which the effulgence of truth would become irresistible. The following is their Report.

“ ‘The Select Committee appointed to consider the validity of the doctrine of contagion in the plague: and to report their observations thereupon, together with the minutes of the evidence taken before them to the House; have considered the matters to them referred, and have agreed upon the following Report.

“ ‘Your Committee being appointed to consider the validity of the received doctrines considering the *nature* of *contagious* and *infectious* diseases, as distinguished from *other epidemics*, have proceeded to examine a number of medical gentlemen, whose practical experience or general knowledge of the subject appeared to your Committee most likely to furnish the means of acquiring the most satisfactory information.

have also had the evidence of a number of persons whose residence in infected countries, or whose

commercial or official employments enabled them to communicate information as to facts, and on the principle and efficacy of the laws of quarantine; all the opinions of the medical men whom your Committee have examined, with the exception of two, are in favour of the received doctrine, that the plague is a disease communicable by contact only, and different in that respect from epidemic fever; nor do your Committee see any thing in the rest of the evidence which they have collected, which would induce them to dissent from that opinion. It appears from some of the evidence, that the extension and virulence of the disorder is considerably modified by atmospheric influence; and a doubt has prevailed, whether under any circumstances the disease could be received and propagated in the climate of Britain. No fact whatever has been stated to show, that any instance of the disorder has occurred, or that it has ever been known to have been brought into the lazarettoes for many years; but your Committee do not think themselves warranted to infer from thence, that the disease cannot exist in England, because, in the first place, a disease, resembling in most respects the plague, is well known to have prevailed here in many periods of our history, particularly in 1665-6: and further it appears, that in many places and in climates of various nature, the plague has prevailed after intervals of very considerable duration.

“Your Committee would also observe, down to the year 1800, regulations were adopted which must have had the effect of preventing goods infected with the plague from being shipped directly to England: and they abstain from giving any opinion on the nature and application of the quarantine regulations, as not falling within the scope of inquiry to which they have been directed; but they see no reason to question the validity of the principles on which such regulations appear to have been adopted.

“ ‘ June 14, 1819.’



“ Upon this document I shall now proceed to comment, sentence by sentence.

“ 1. ‘ Your Committee being appointed to consider the validity of the received doctrines concerning the *nature* of *contagious* and *infectious* diseases, as distinguished from *other epidemics*, have proceeded to examine a number of medical gentlemen, whose practical experience or general knowledge of the subject appeared to your Committee most likely to furnish the means of acquiring the most satisfactory information.’

“ Here we perceive, that, whilst the original appointment of the Committee was, in express terms, for the purpose of considering ‘ the validity of the doctrine of contagion *in the plague*,’ or, in other words, the validity of the received doctrine concerning the *cause* of a *particular* malady (this limited function was kept pretty steadily in view in the examination of the witnesses), they assume, in the first sentence of their Report, powers of a very different and a much more extended kind, constituting themselves judges of ‘ the *received* doctrines concerning the *nature*’ of a *multiplicity* of maladies—‘ *contagious* and *infectious* diseases, as distinguished from other epidemics.’ Here we have three kinds of epidemics, ‘ contagious, infectious, and other ;’ whilst, in nature, contagious diseases are so far from being epidemics, that they may be regarded as their opposites ; and, in correct language, infectious and epidemic diseases are one and the same thing. How many varieties may be comprehended under the head of ‘ other epidemics’ we are not informed. By this preposterous deviation from the functions assigned to the Committee at their formation, they plunge, at one leap, into inextricable confusion. The jumble of doctrines which this single sentence comprehends, is altogether unintelligible. That some contagious diseases are epidemic, and others not ; that some epidemic diseases are contagious, and other not ; that some infectious diseases are epidemic,

and others not ; that some epidemic diseases are infectious, and others not; and that ‘contagious’ and ‘infectious’ are synonymous terms, are some of the curious inferences which it supplies. The term ‘infection,’ in its proper acceptation, and as it was understood by the ancients, means nothing else than the noxious influence of a pestilent air, in producing its appropriate sickness. It is equivalent to epidemic or pestilential influence. And the term ‘contagion,’ in its proper acceptation, means nothing else than the influence of a specific *virus*, in producing its appropriate diseases, by propagation from the sick to the healthy, or from *fomites* to persons, or through the medium of the air, *considered as a vehicle*. These distinctions are surely sufficiently intelligible to every mind, which is not saturated with the prejudices and inconsistencies of the medical schools.

“Respecting the qualifications, which the Committee have attributed to the medical men whom they did examine, I may observe that, if mere opinion or numbers are to decide, qualification can be of little value. Concerning the more immediate subject of inquiry—the plague—it happened that but very few of the witnesses had ever seen the disease; and of these few, scarcely any had seen it without the restraints of prejudices of education, preconceived notions, or sanitary police, leaving scarcely a chance for the exercise of an unbiassed judgment. The same difficulties did not, however, exist in regard to yellow fever, one of the other principal objects of sanitary laws. There were in the country, at the period of this inquiry, a great number of experienced and intelligent medical officers both of the army and navy, who must have frequently seen and treated yellow fever in Gibraltar, Spain, and the West Indies; and whose testimony might have been very easily procured. They would from analogy at least have been able to give much valuable information. After the epidemic of Gibraltar in 1814, the majority of the medical officers, who had been in that



garrison during its prevalence, it is known from official returns, were convinced that it did not depend upon contagion.\* Why were not those officers of both opinions sought, rather than Fellows of the College of Physicians, who had so much less experience of epidemic diseases? or rather, why did they appear to have been avoided? In Spain, the instructions of the general Government to the local authorities, in relation to the fever of 1821, were ‘to consult and examine medical men of opposite opinions, as nearly as possible, in equal proportions.’

“Let us now examine the actual composition of the majority of witnesses, upon whose *opinion* the Committee, in disregard of the *facts* of the minority, profess to have founded their Report. They consisted of eight Fellows of the College of Physicians, the confidential adviser of the Privy Council in matters of quarantine, and the chief of the army medical department. In addition to the grounds stated in the last section, why the College of Physicians should, in their corporate capacity, be regarded as incompetent, because not unbiassed judges of the questions here at issue, I may state that they twice recently made adverse Reports to the Privy Council concerning the results of the author’s researches in the Levant. The members of that body, I submit, cannot, in such a case, be individually regarded as impartial witnesses.—Similar objections apply, with at least equal force, to the confidential adviser of the Privy Council in matters of quarantine, who is *ex officio* necessarily a

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\* “At the conclusion of the epidemic fever in 1814 in Gibraltar, Mr. Frazer, surgeon-major of the garrison, proposed a series of questions to the different medical officers, relative to the origin and subsequent propagation of the disease: and the following is the result extracted from their official replies. Eight not contagious—two neutral—five contagious—two contagious in a limited degree: of the seven who are of opinion that the disease was contagious, four have assigned to it a domestic, two an exotic origin, and one remained neutral in this respect. The decided majority is therefore in favour of non-contagion:

believer in pestilential contagion, and has besides written a book in its support,\* as well as to the chief of the army medical department, who is also an approved literary defender of this medical faith.† These ten persons, forming the majority of the medical witnesses examined by the Committee, had they otherwise all the professional merit in the world, must, as avowed partisans, be deemed to be, on these points, very exceptionable witnesses. Would persons, so circumstanced, be regarded as impartial witnesses in a court of justice, even on any ordinary trial of comparatively trivial importance, between man and man? The Committee were then assuredly mistaken in their choice of ‘the most likely source,’ to furnish the means of acquiring the most satisfactory ‘information;’ and their error, let us hope, will serve as a beacon in future inquiries.

“2. ‘They have also had the evidence of a number of persons whose residence in infected countries, or whose commercial or official employments, enabled them to communicate information as to facts, and on the principle and efficacy of the laws of quarantine.’

“There cannot be worse evidence in general, on this subject, than that of Christian merchants, or others who have resided in the Levant; not that they have any intention to deceive, but that they are themselves deluded. Amongst the Christian inhabitants of Italy and the Levant, the doctrine of pestilential contagion, which has grown into an enormous system by the accumulated false knowledge of nearly three centuries, has long been a species of sanitary religion (if I may so express myself), and the most absurd traditions are regarded by them as substantive facts. Terror at the very sound of plague is too powerful to admit of the smallest exercise of the understanding. The mind

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\* “Observations on the Bulam Fever, &c. By W. Pym, M.D., &c.

† “Medical Sketches, &c. By Sir James M’Grigor, M.D., &c.



becomes incapable of distinguishing or appreciating phenomena ; and exists, as it were, but in an atmosphere of delusion. As to *facts*, upon the production of a *single* one in proof of pestilential contagion, from ‘the *experience* of all ages,’ I will cheerfully consent at once to abandon all my doctrines ; and as to the ‘*principal*’ and ‘*efficacy*’ of the laws of quarantine, they are, like every other part of the system, perfectly *in nubibus*. All that such persons can speak of is the *practice*. They know, that when plague exists, ships sail with foul bills of health ; that precautionary measures are adopted to prevent the *embarkation* of an *assumed* contagion ; and that, upon the arrival at their destined ports of the ships so sailing, they are put under quarantine, to prevent the *debarkation* of this assumed *virus*. In all this there is not a single fact. The existence of contagion in the plague ; the prevention of the embarkation of that contagion by means of expurgation ; and the prevention of its debarkation by quarantine, are all implicitly taken for granted. They are all creatures of the imagination, matters of pure and unqualified fiction.

“3. ‘All the opinions of the medical men whom your Committee have examined, with the exception of two, are in favour of the received doctrine, that the plague is a disease communicable by contact only, and different in that respect from epidemic fever.’

“What signify opinions ? A single *fact* is worth more than a hundred thousand opinions !—We are told also of ‘received doctrines.’ But where every thing is assumption, it must be obvious that there cannot be a received doctrine. All is necessarily arbitrary. Each witness has his particular version ; and it must be by mere chance if any two of them coincide respecting any single point of doctrine, or if any one continues to be consistent with himself for two answers successively. There is therefore here no such uniformity of evidence in favour of a precise doctrine,

as the Committee have assumed ; although, if there were, it would still amount to nothing more than an uniformity of *faith*. Far from its being common to them, with the exception of two, I cannot discover, from the evidence itself, that such a doctrine as is here specified by the Committee, has been precisely set forth, and uniformly maintained, by any one of the witnesses. If it had indeed, it would have very widely differed from the ‘received doctrine’ of the earlier contagionists, whilst the system was yet in the infancy of absurdity, that the plague is communicable by persons ; by *fomites*, as clothes, goods, and merchandise ; and by the air, *considered as a vehicle*. But if the uniformity, instead of being quite wanting, had been complete, it would have been nothing to the purpose ; since we are inquiring, not what is the ‘received doctrine,’ but the *true* one. In illustration of the manner in which the doctrine of pestilential contagion is supported, on the one hand, by mere fables or absurd traditions ; and refuted, on the other hand, by incontrovertible facts, I shall here state part of the evidence of the confidential adviser of the Privy Council in matters of quarantine in its favour, and of my own against it. Dr. Pym is asked, (Minutes of Evidence, p. 56.)

“ ‘ Do you give your opinion on the contagious nature of the plague from your own knowledge, drawn from your own observations ?—No, not from my own observations ; I never saw it.

“ ‘ From whence ?—From general information ; from reading, and from *facts* communicated to me by individuals who had seen the disease in Egypt, at Malta, and other places. I know one instance of the plague having been communicated at sea : some French gun-boats were taken by a man of war ; they were ordered alongside, and while lying there, the person ordered on board to issue provisions, &c. received the infection of the plague.

“ ‘ Name the ship ?—The Theseus.

“ ‘ What year was it ?—In the year 1800.



“ ‘In what part of the world?—Off the coast of Egypt.’

“ *Dr. Robert Tainsh called in and examined.*

“ ‘You were surgeon of the *Theseus*, I believe, in the Mediterranean, at the siege of Acre?—Yes, I was.

“ ‘In what year was that?—It was in the years 1798 and 1799.

“ ‘Did you see any cases of plague whilst there?—Yes.

“ ‘How many cases of plague did you see?—I saw five cases of plague.

“ ‘Were they on board the *Theseus*?—Yes.

“ ‘What countrymen were the persons infected?—There were three Englishmen and two Frenchmen.

“ ‘Did they belong to your ship?—The three Englishmen had belonged to the *Theseus* formerly, and they had been taken in one of our gun-boats.—They all appeared infected by the disease.

“ ‘In what state of the disease were they; had they buboes?—Only one of them had it of any great consequence. The other four were *petechial* slight cases. They were in a state of convalescence, and had rather the remains of disease than any thing else. One of the Frenchmen, however, had buboes, and in a state of suppuration.

“ ‘Did that Frenchman recover?—Yes.

“ ‘After what lapse of time?—In about three weeks or a month. Both the Frenchmen were sent on shore.

“ ‘But was there any communication of the plague to any other persons on board the *Theseus*?—No.

“ ‘Were there any means of separating these plague patients from the rest of the crew?—Certainly; all of them were removed into one berth on the starboard side of the ship, called the sick bay. Every part of their clothes that were on them, on their coming on board, were immediately taken off and thrown overboard by my orders. Their bodies were shaved, and no hair left on them that could lodge moisture. They were then washed with soap and warm water, and new clothes were given to them: they had new bedding,

new shirts, and every thing new within ten minutes after they came on board.

“ ‘Who washed them?—One man whom I persuaded so to do, by handling the patients myself, and applying the poultices to the buboes.

“ ‘Had you communication with the ship’s crew at the same time?—Yes. I examined them every morning to see whether they had caught any infection; but none of them had.

“ ‘Did the man, who attended these patients, mix with the crew?—He communicated generally with the crew of the ship.

“ ‘What was your object in destroying their clothing in which they came a-board?—It was a mere caution to prevent those clothes from being again used. It was on account of no particular theory, but merely for cleanliness.

“ ‘It did not arise, then, from the belief that it was of itself contagious?—No; and, my hands being so much engaged with the knife at that time, I had not much opportunity of studying the disorder.

“ ‘Did you touch the man who was so badly affected?—Yes; I applied his poultices.

“ ‘Did the same man attend upon him who had shaved him?—No; the barber of the ship shaved him; and the only precaution used was, when the attendants came out of the sick bay, I made them immerge their hands in a bucket of vinegar!

“ ‘Do you suppose they always did that?—They were ordered to do so, and a sentry was placed there to oblige them so to do.

“ ‘How near was the sentry to them?—He was on the opposite side of the ship, the sick bay generally taking in half the galley.’—*Min. of Evid.* p. 66.

“ This evidence is important, as being singularly illustrative of the nature of the fables upon which the doctrine of pestilential contagion has been founded, and continues to be maintained. To investigate the merits of such traditions separately, I hold to be not



only idle, but injurious, by giving them an adventitious importance; since, the impossibility of the existence of pestilential contagion being demonstrated, all narratives pointing to an opposite conclusion must necessarily be fallacious. Every reader is able to judge for himself, whether the Theseus here mentioned by Dr. Pym and by Dr. Tainsh be one and the same ship; whether the time and place be the same; and whether the French sailors be the same: as well as to form a correct opinion of the degree of credit which is due to the history that has been related to Dr. Pym, and by him detailed from hearsay to the Committee, so different from the real events as stated by Dr. Tainsh, who was surgeon of the ship at the time, and himself not only an eye-witness, but the principal actor!

“ The following series of incontrovertible facts, extracted from my own evidence, each of which is more powerful than all the opinions that can be collected together, and the whole irresistible, will form a striking contrast with that just quoted of the confidential adviser of the Privy Council in matters of quarantine; and will also serve as a sufficient commentary on this article of the Report.

“ ‘ The instances of plague affecting individuals, without the disease being propagated, which came under my immediate observation whilst at the pest-hospital near the Seven Towers, are remarkable, and in my opinion conclusive of the question. Three successive priests, the purveyor, the interpreter, and all the attendants on the sick; several persons who were in the hospital for sore legs, or other local ailments; and some poor women and children in health, who were there upon charity, amounting in all to about twenty persons, were not, in any single instance, affected with the disease, although there was a constant succession of pestilential patients; and although a great proportion of the persons mentioned were *ex officio* necessarily in frequent contact with the

sick ; and many of the others slept in the same apartments with them. The purveyor, or some of the servants, went of course daily to the bazaars or markets to purchase provisions, and to dispose of the clothes or other property of the dead, and without using any precautions, or occasioning any alarm. I have myself, with the interpreter, repeatedly walked into that part of Constantinople, which leads to the Golden gate, in the vicinity of the Seven Towers, several times even during my illness, and entered coffee-houses, or traversed chaans and bazaars in the body of the town, frequently in collision with the passing multitudes ; assured that there was no danger of my communicating the disease to any one, either directly in consequence of my own malady, or indirectly from the patients ; and finding that no apprehension of such a danger was entertained by the inhabitants of that quarter (being chiefly Mahomedans), although they must have been generally aware that we came from the Greek pest-house, there being no other persons in the Frank dress, or but very rarely to be seen in that part of the town. But neither from this communication, nor from the constant transfer of the clothes of the dead, was any malady propagated ; for this obvious reason, that, although the cases which did occur, were in general of sufficient intensity to prove fatal, the epidemic constitution of the air did not prevail so uniformly, or to such a degree, as to render its effects liable to be confounded with those of a specific contagion. To the reasons which I have already assigned, for considering epidemic and pestilential diseases as never depending upon contagion, I beg to add the following :—

1. Generally, because the laws of epidemic and those of contagious diseases, as I stated in my work upon the subject, are not only different but incompatible ; and because pestilences observe exclusively the laws of epidemics, of which they are but the higher degrees.
2. Because no adequate proof has ever, in any single instance, been adduced, of the existence of con-



tagion in pestilence ; from its first promulgation to the present day, the doctrine has been nothing more than a series of gratuitous assumptions. 3. Because, had pestilential diseases been contagious, consequences must have followed which have not taken place ; being capable of affecting the same persons repeatedly, they would never cease, where no precautions are employed (and in such case no precaution could avail), until communities were extinguished : Turkey would long ago have been a desert. 4. Because phenomena now take place, which, if pestilences were contagious, could not happen ; instead of the laws of epidemic, they would observe only those of contagious diseases. 5. Because a superabundance of irrefragable proof has been adduced, showing that pestilence never arises from contagion ; and because the assumption resorted to, in order to elude this proof, that ‘ to the effect of contagion, a particular state of the atmosphere is necessary to produce the disease,’ is only in other words an acknowledgment, that a particular state of the atmosphere is its real cause. 6. Because for centuries before any intercourse, direct or indirect, was established between this country and the Levant, or rather as far back as history extends, pestilence was at least as frequent in England as in the 16th and 17th centuries, when our commercial intercourse with Turkey was considerable. 7. Because, when the free states of Italy traded both with the Levant and with the North of Europe, when they were the carriers, not only of the merchandise, but of the troops of the principal powers of Christendom engaged in the crusades ; and when they possessed Smyrna, Cyprus, Candia, Scio, Cephalonia, Caffa, and even Pera, a suburb of Constantinople, no apprehension was then entertained, under a constant intercourse, of pestilence being propagated by contagion, nor any precautions adopted by any nation for the prevention of such a calamity. 8. Because during the century and a half which has elapsed since 1665, and in which there has been no

plague in England, our commerce and intercourse with the Levant have been more extensive and more rapid than at any former period. 9. Because there is no reason to believe that in modern times pestilences have undergone any revolution, in respect either to their nature or to their causes, further than may depend upon the advancement or retrogradation of countries respectively, in cultivation, civilisation, and the arts of life, or upon an alteration in the seasons. 10. Because, as contagion, where it does exist, is sufficiently palpable (it did not require the evidence of inoculation to show that small-pox depends always upon that source, and never upon any other), if it were the cause of pestilence, its existence could not, for thousands of years, have remained concealed ; it must have been discovered, and demonstrated to the satisfaction of the world, by the ancient physicians, and could not now have been a subject of controversy among their successors. 11. Because no person has, at any period of history, been known to arrive in England, from the Levant, labouring under pestilence. 12. Because no person, employed in purifying goods in the lazarettoes of England or of Malta, has ever been known to be affected with pestilence, which could not have happened if contagion had existed in the goods ; and because such goods could not be uniformly exempt from contagion in particular countries, if that were the cause of plague ; if, in other countries, expurgators of goods in lazarettoes have been known to be affected, it must have been from other causes. 13. Because, after three hundred thousand deaths from plague have happened in one season in Grand Cairo, two hundred thousand in Constantinople, and one hundred thousand in Smyrna, as we are told has repeatedly occurred in those places, and the clothes of the dead have been worn by their surviving relatives, or sold in the bazaars, and worn by the purchasers, the disease, instead of spreading wider and wider, as would inevitably have happened if contagion



were its cause (since in that case it could not fail to be carried in the clothes), has, on the contrary, regularly declined and ceased at the usual periods. 14. Because, in those countries in which the plague is supposed to be introduced by means of contagion conveyed by travellers or goods, as Egypt, Asia Minor, and Syria, it never occurs epidemically, but at particular seasons; although in the other seasons, travellers and goods from places in which the disease prevails, continue equally to arrive. And, 15, Because in other countries, as Persia, which maintain a similar uninterrupted intercourse with places liable to frequent attacks of plague, that disease never occurs.'—*Min. of Evid.* p. 95-97.) If plague were contagious, it would be quite impossible that it should not be frequently carried, could communities survive such processes, to Persia and to Hindostan, by means of the merchandise of Egypt and other parts of the Ottoman dominions. How absurd is it to suppose, that a contagion could be carried to Moscow, and not to Ispahan, which is a shorter distance from some of the chief seats of pestilence! "Mais on ne finirait pas, si on voulait ramasser toutes les contradictions où le système de la contagion a engagé ceux qui le soutiennent."—*Senac.*

"4. 'Nor do your Committee see any thing in the rest of the evidence they have collected, which would induce them to dissent from that opinion.'

"The *opinions* of the majority having been preferred to the *facts* of the minority, in the case of the medical witnesses examined by the Committee, it was not to be expected that the same thing would not happen with respect to the non-medical witnesses. We are therefore not surprised to find, that more weight was attributed to the common and contradictory traditions of the Levant, detailed by the bulk of these witnesses, than to the following striking, clear, and convincing narrative of facts, related by a member of the House of Commons, who had served in Egypt, with the

armies, and consequently spoke from personal knowledge.

*“ Sir Robert Wilson, a Member of the House, called in and examined.*

*“ While in Egypt with the army, have you seen any cases of plague there?—Many; and if you will allow me I will state the result of my observations. The army that invaded Egypt was divided into two corps; one was stationed at Alexandria, and the other moved on against Cairo; a part of the army which remained stationary at Alexandria had a detachment at Aboukir, where the preceding year many thousand Turks had been put to death in consequence of a defeat in an action with the French (and where several hundred British and French had recently been interred); every precaution was taken to prevent the introduction of plague into that part of the army which blockaded Alexandria, and was stationed at Aboukir; and from particular local circumstances, all communication with the country was successfully intercepted, except under authorised regulations; notwithstanding which precautions, plague broke out three distinct times, beginning amongst the troops occupying Aboukir, and extending to those stationed before Alexandria. That part of the army, Turkish and British, which moved against Cairo, passed through the country, where numerous villages were infected with the plague; and during the march the soldiers had constant communication with the inhabitants of those infected villages. At Menoof, where the plague had raged with the greatest violence, a bakery was necessarily established for the use of the army; but none of the persons who attended that bakery was infected with the plague. At Rahmanieh there was a lazaretto or plague hospital; several men were lying infected with the plague, and many were brought out already dead; others were dying in the environs of the town of the same disorder; the Turks stripped the bodies of all indiscriminately of their clothing, and there was no restraint whatsoever in the communication with the*



inhabitants, who had also free access to the camps, yet no plague was communicated to the troops. The city of Cairo had lost a great many inhabitants the same year by the plague. When the army arrived at Cairo, and united with the Grand Vizier's army, many of the graves in which the inhabitants had been buried, who had died of the plague, were opened, and the bodies stripped of their clothing, with which the Turkish covered themselves; and yet no soldier of either the British or Turkish armies was infected with the plague. The disorder ceased between the 17th and 24th of June, at the precise time when its cessation had been anticipated, and assured by the inhabitants, except at Aboukir, where it continued to exist some time longer. It was also affirmed to us by the French officers, that, although the plague had raged in Cairo that year with very great violence, and carried off some of the French army, yet, notwithstanding a constant communication was held between the garrison stationed in the citadel, and the inhabitants of the town, the soldiers in the citadel were not affected in any one instance with the disorder; many thousands of the inhabitants of Lower Egypt had died that year of the plague. The Indian army, passing through Upper Egypt, had traversed a country in which about sixty thousand inhabitants were said to have perished, whole villages having been destroyed; but yet the troops of that army brought no infection with them, nor were any precautions adopted to prevent contagion on their junction with the British European army. To these circumstances I was myself an eye-witness. I would wish also to state that, as we moved through the country, the inhabitants pointed out to us particular villages that were infected with plague, and which plague did not extend out of those particular villages to any of the contiguous villages, although there was no precaution whatever used as to the communication with the inhabitants of the infected villages. Conversing with Dr. Desgenettes, the chief physician of the French army, and M. Assilini, the

head surgeon of the French army, they assured me, that whenever a battalion infected with the plague had been marched out of the infected place, the soldiers recovered, and never conveyed the infection to other garrisons ; and that troops, marching into that infected garrison which had been vacated, did not become themselves infected, unless they remained there longer than eight or ten days ; and M. Assilini further assured me, that several French officers and soldiers, who had the plague, having removed themselves, or been removed, when sick of the plague, into other places, they had almost always recovered : but he said, his great difficulty was in persuading people to make the exertion of movement, for they were generally so enervated, that they preferred to remain where they were and meet their fate.

“ You have stated that the French officers thought their garrison at Cairo had never been infected that year in the citadel ; are you aware that they took any precautions to prevent it ?—I know there were none taken ; the citadel contained a very small portion of the garrison, perhaps only twelve hundred men. There was an army in the city (including followers) of near thirty thousand ; and the communication of the soldiers of the garrison with those in the town was constant. Some of the French soldiers in the city died ; but the French soldiers themselves felt a perfect confidence, provided they did not remain stationary in any garrison in which the plague raged. What makes the phenomena of this disorder more remarkable, is, that the villages are insulated and built on parallel lines, not more than 500 yards asunder ; and though six or seven of those villages in one district may be affected with the plague, and though the inhabitants of those infected villages constantly pass through villages not infected, on their route to the Nile ; yet, though there is such a daily traverse and communication, the infection will remain in the villages where it



broke out, and not extend infection though the district.’  
(*Minutes of Evidence*, p. 69-71.)

“5. ‘It appears from some of the evidence, that the extension and virulence of the disorder are considerably modified by atmospheric influence ; and a doubt has prevailed, whether, under any circumstance, the disease could be received and propagated in the climate of Britain.’

“It is quite certain not only that the ‘extension and virulence of the disorder are considerably modified,’ but that the disease, whether in its mild or virulent, its circumscribed or diffused state, is entirely dependent upon atmospheric influence, or vicissitudes of temperature, as its principal or efficient cause ; a phenomenon wholly incompatible with the existence of a specific *virus* as any part of that cause. The intended meaning of the second part of this article I am not certain that I understand. If it be, that plague can never be received and propagated *by contagion* in Britain, it is certainly quite correct ; but it is not more true of Britain, than of any other country, since it can no where be so introduced or propagated. If, on the other hand, it be meant, that the alleged incapability of being received and propagated depends on the atmosphere, it cannot be more true of Britain than of other countries similarly situated in respect to cultivation and improvement, and to liability to atmospheric vicissitudes. The disease has been reproduced in Malta, after an absence of 140 years, and may be reproduced in England after a similar or a longer absence. But if it were contagious, and if its existence were compatible with that of human communities, it would constantly prevail in every country, having constant communication with that which is its head quarters ; for no season could pass, without every place of any considerable commerce receiving cargoes, of which portions had been manufactured or handled by persons labouring under plague. Quarantine could

not prevent its being so introduced in goods, or its affecting persons in the lazarettoes. But it is in evidence that in the lazarettoes of England no person has ever been affected with plague ; a fact which alone demonstrates sufficiently that its prevalence at former periods in this country has depended not upon contagious properties.

“6. ‘No fact whatever has been stated to show that any instance of the disorder has occurred, or that it has ever been known to have been brought into the lazarettoes for many years.’

“From the evidence of official Reports, of a nature not liable to doubt, it results that no case of plague has *ever* occurred in any of the lazarettoes of England ; a circumstance wholly incompatible with the existence of contagion in that disease, and alone sufficient not only to have authorised, but to have required the Committee to pronounce quarantine, in respect to plague, to have no object in England. Such a recommendation in respect to England, would have been fully warranted by such evidence, even had it been proved, that in the *Levant* the plague was actually contagious.

“7. ‘But your Committee do not think themselves warranted to infer from thence, that the disease cannot exist in England ; because, in the first place, a disease, resembling in most respects the plague, is well known to have prevailed here in many periods of our history, particularly in 1665-6 ; and further, it appears that in many places, and in climates of various nature, the plague has prevailed after intervals of very considerable duration.’

“These observations, whilst they are perfectly correct, are however nothing but truisms ; but they are at the same time rather inconsistent with article 5,—an inconsistency which necessarily arises from the nature of the subject. The doctrine of pestilential contagion is, indeed, composed of nothing but contradictions



throughout; and it is not unaptly represented by a Report consisting of such a jumble of incongruities. But although it would be wrong to infer that the disease cannot exist in England, we are however warranted in concluding that it is not likely that it should, in future, occur nearly as often as it has formerly done; the situation of this country having, in respect to the efficient causes of plague, as we shall see when we come to that part of our subject, considerably improved within the last century and a half. The plague, as it used to appear in England, was essentially the same with the plague of the Levant, as the typhus of one country is essentially the same with that of another.

“8. ‘Your Committee would also observe, down to the year 1800, regulations were adopted, which must have had the effect of preventing goods infected with the plague, from being shipped directly for Britain.’

“Nothing in nature can be more absurd, than the idea, that any precautions, which have been taken, or could possibly be taken, would be sufficient to prevent the shipping of a contagious *virus* by goods, except the idea of its being prevented from landing by quarantine. It would infallibly be introduced by every ship from the Levant, not only into the lazarettoes, but into every shop or warehouse which might receive any part of her cargo. The wonder is, that such things could ever have been imagined possible by men in their senses; but the doctrine of pestilential contagion, when once adopted, appears to bewilder the understanding. In 1814, when part of the cargo of the *Lucy* was burnt, by order of Dr. Pym, had any individuals of the crew been affected with the plague?—Not one!—And could this have happened had contagion existed in the cargo, which they had assisted to stow and to unstow?—In 1721, the ships *Turkey Merchant* and *Bristol*, with their cargoes, were taken from Stan-gate Creek out to sea, and burnt, in pursuance of an

order in Council, dated the 28th July, 1721. In 1792, a chest of goods was burnt, imported in the *St. George* from Zante. In 1800, the ships *Aurora*, *Mentor*, and *Lark*, from Mogadore, were destroyed, with their cargoes, pursuant to an order in Council of the 7th January, 1800, (grounded upon a representation of the Committee, consisting of His Majesty's physician and others,) great *suspicion* being entertained of the same being infected with the plague. The master of the *Lark* died at Mogadore, where the disease was raging at the time the vessel sailed; and it was reported that nearly all the persons who assisted in loading the ships also died of the plague. (Report, App. p. 101.) All this account of deaths at Mogadore might be very true. But did any one die, or had any one been ill of the plague in any of those vessels, at the time of their arrival in England?—Not one! Such a circumstance has never been known to happen. What folly, then, nay, what madness, thus to destroy property on account of a chimera! Since the regulations alluded to have been altered, and goods have been shipped directly for England, no cases of plague have occurred in the lazarettoes; and if the whole of the sanitary laws were abolished, there would not be one pestilence the more, nor any single case the more of any pestilential malady; but, on the contrary, such epidemics as might occur would be many times milder, and less diffused.

“ 9. ‘ And they abstain from giving any opinion on the nature and application of the quarantine regulations, as not falling within the scope of inquiry to which they have been directed.’

“ This declaration appears extraordinary. I cannot conceive what practical object the appointment of such a Committee could serve, unless they were to inquire into the consequences as well as the validity of the doctrine of contagion in the plague; for even if that doctrine had been proved to be correct, sanitary laws would not necessarily have been efficient for their



proposed ends, and might be discovered to be in many respects highly injurious to the best interests of communities. If the doctrine had been proved to be wholly incorrect, the total abolition of these laws would have been a necessary consequence; and if partially incorrect, their modification, or partial abolition, would be indicated. Thus it is evident, not only that the nature and application of the quarantine regulations did fall properly within the scope of inquiry of the Committee, but that they were precisely what ought to have constituted the principal objects of that inquiry.

“10. ‘But they see no reason to question the validity of the principles on which such regulations appear to have been adopted.’

“By the uniform silence of history, in that case forming the best evidence; by the testimony of almost all the witnesses examined before the Committee; and even by official Custom-house returns, it stands confirmed, that, in the memory of man, not a single person has arrived in this country ill of the plague; and that not a single case of that disease has ever occurred among the expurgators of goods in the lazarettoes. The Levant Company, in their printed orders to their factories abroad, assert, that the plague was never brought to England by means of their commerce. Sir James Porter (*Obs. on the Turks*, p. 41) asserts, without limitation to the Company’s establishments, that the plague was never brought to these kingdoms immediately from Turkey. The Custom-house returns presented to the Committee are as follows: ‘*Rochester*: There is not any record of a case of absolute plague in any lazaretto at this port having occurred, from the earliest period that can be traced to the present time. *Portsmouth*: It cannot be ascertained that any case of absolute plague has ever occurred at this port, on board any lazaretto. *Falmouth*: The officers at this port are not aware that any case of what is usually called plague has occurred. *Milford*: No case of absolute plague has occurred at this port, *Bristol*:

No instance is on record of absolute plague having occurred at this port from 1619 to the present time. *Liverpool*: The officers at this port have not any knowledge of the plague having had existence in any lazaretto or other vessel there. *Hull*: The officers at this port cannot find recorded in their books a case of absolute plague in any lazaretto during the last 200 years." Yet, with all this evidence staring them in the face, the Committee 'see no reason to question the validity of the principles upon which such regulations appear to have been adopted.'

"The eulogium in this article appears very inconsistent with the profession in the preceding one. And it is still more extraordinary that the unqualified, although indirect approbation here conveyed, of the laws of quarantine, should have been expressed by the Committee, not only in opposition to the declared opinion of the College of Physicians, in their collegiate capacity, but individually of almost all the medical witnesses examined by the Committee, who gave any opinion at all upon the subject. The former had stated, that 'the personal restrictions might probably be modified without risk to the public safety;' and the latter, when they did give an opinion, were almost all equally favourable to some sort of mitigation. Thus, it was only when any abatement of the severity of sanitary laws was recommended by the College, or by a majority of other medical witnesses, that their authority was disregarded."

Thus terminated, without any direct beneficial results, the first official inquiry that has ever been instituted, even partially, into the validity of the doctrine of pestilential contagion, and the efficiency of sanitary laws for their proposed ends. Its indirect advantages, however, are now likely to prove great and lasting. It places in full view of the public, the utter futility of the ground upon which the College of Physicians have endeavoured to uphold a system, which, besides numerous other injuries, occasions a great pecuniary detriment annually to this country, and



is an indelible disgrace to science and civilisation. The whole of that ground consists, as we have seen, in one miserable subterfuge, and one unfounded allegation, which, had it even been true, would have been nothing to the purpose.

“ The amount of the reasoning of the College,” says Dr. Maclean, “ is simply this :—assuming that you have *not* proved the non-existence of contagion in the plague, we therefore *assume* its *existence* ; assuming that you have *not* proved that the ancients were *unacquainted* with the doctrine of pestilential contagion, we *therefore* assume that they were believers in it. We further *assume* that all the *real facts*, which you have adduced, are insufficient to counterbalance this *assumed opinion* of the ancients : and finally, we take the privilege to assume the rights of dispensing with the trouble of adducing any *fact* or *argument* in support of any one of these *assumptions*. I defy the College to prove that this is not a correct representation of the substance of the Reports of that body to the Privy Council, concerning my work on epidemics.”

The Committee of the House of Commons, as will have been observed, formed their decision concerning the validity of the doctrine of contagion in the plague, and the efficiency of sanitary laws for their proposed ends, upon the alleged opinion of a majority of medical witnesses examined by them, consisting of Fellows of the College of Physicians and others, who had repeatedly committed themselves in favour of that doctrine ; and therefore any thing but unbiassed witnesses.

The House of Commons and College of Physicians in their Reports had not ventured to affirm that the existence of pestilential contagion, or the efficiency of sanitary laws for their proposed ends, had been proved, but merely that the contrary had *not* been proved ; it therefore would follow that these points had been regarded by themselves as still undecided, and, consequently, if the subject was worthy of investigation,

further investigation was indispensable upon their own principle.

It was in vain that Dr. Maclean endeavoured to prosecute his researches in this most interesting question, the Government would not countenance him. The only reply the doctor could obtain was, “with respect to the prosecution of your inquiries at the public expense, or proposed by you in a former communication, the Lords of this Committce have only to say, that, after the decided opinion expressed by the House of Commons, founded upon a long and laborious investigation, and in exact conformity with the sentiments previously expressed by the College of Physicians, they do not feel that they should be justified in laying a charge of such a description upon the public purse!”

What an abominable insult was this to the nation, to talk of economy of the “*public purse*” upon an occasion of so much vital importance to the best interests of the nation, and where the welfare of the whole universe was deeply concerned. This economy appears to have been exercised for a most unaccountable end. The Levant Company had the year before petitioned His Royal Highness the Prince Regent in Council, that Dr. Maclean should be allowed, at the public expense, to prosecute his studies for demonstrating the real character of the plague. In a letter of Mr. Bosanquet, the Deputy-Governor of that body, to the Governor, Lord Grenville, dated 25th June, 1818, he states, “The court, my Lord, have given this most interesting subject all the consideration of which they are capable; and, without entering into the discussion of inferences, which may depend exclusively upon medical science, they entirely concur in opinion with your Lordship, that enough has been done by Dr. Maclean to call irresistibly for the fullest and most minute investigation, and therefore, I request your Lordship, as Governor of the Company, to lay the subject, which is truly national, in such a manner as your



Lordship may think proper, before His Royal Highness the Prince Regent in Council, for His Royal Highness's most gracious consideration. And to pray that Dr. Maclean, who has shown himself to be so singularly qualified for the perilous undertaking, may be enabled, at the public expense, to renew his experiments for demonstrating the real character of the plague," &c.

If any thing further was required to show the infamy of quarantine laws, we should discover it in the capricious manner in which they are administered; to the ruin of commerce, and the serious loss and injury it occasions to the merchant. We have no occasion to travel back for precedents, as they are of daily occurrence. For instance, by the *Shipping Gazette*, we find that, on the 13th of September, 1837, there arrived at Milford, "*The Tiber, Candler, from Smyrna, ordered to proceed to this place from Falmouth to perform quarantine;*" upon the 20th she was released, and is now on her passage to the port of London.

Now, what a farce of quarantine must this not appear? What an injury to the owners of the vessel and the shippers of goods? Why have sent the vessel such a distance out of her track for a quarantine of four days, when she might, if requisite to perform quarantine, have taken it on her route to her destination, viz.: —at Stangate Creek? We find that the "*Panther,*" which arrived at Falmouth on the 28th from Odessa, "*is allowed to proceed to Stangate Creek.*" Why, and wherefore, then, should the "*Tiber*" have been subjected to the additional burden of the voyage to Milford, exposed to adverse winds, and probably to a great detriment of the value of her cargo?

But this is not all of the working of the machinery of the English quarantine laws. Upon the 15th of September, two days after the "*Tiber*" reached Milford from Falmouth, to perform quarantine, by the *Shipping Gazette*, we find that "*The Caledonia, Robertson, from Smyrna, arrived with a foul Bill of Health.*"

Now if it were requisite that the "*Tiber*" was sent to Milford to perform quarantine, it would follow that the "*Caledonia, with a foul Bill of Health*," should also be sent there. But how did it turn out? Why, the *Caledonia* was a more fortunate, if not favoured vessel. She was allowed to remain at Falmouth until the 1st of October, as appears by the *Shipping Gazette*, when she sailed for her destination, Exeter, where she arrived on the following day.

Surely it is high time that the Parliament of this country should interfere to put a stop to such an abominable state of legislation as this. There was or was not occasion to put the "*Tiber*" under quarantine. If occasion, and sanitary laws are supposed to be capable of resisting or restricting pestilential contagion, the vessel ought to have performed the due course; if there was no occasion, as it appears there was not, nothing can be pleaded in justification or palliation, for such wanton trifling with the lives and property of individuals. If the "*Caledonia, with foul Bill of Health*," has been released, as she has, in fifteen days, and any of her crew are affected with the plague, they may yet sicken, while comfortably sleeping on shore at Exeter, as the two men who died in July last, on board the *Leonidas*, French government steam-ship at Marseilles, sickened on the 15th day of her quarantine. The *Leonidas* had *not even a foul Bill of Health* when she arrived, the passengers and crew were all well, she had come from Constantinople, where the plague was raging, and that was quite enough to render her worthy the notice of the quarantine laws. In the event of any of the crew of the *Caledonia* sickening of the plague, we may have the honour of having it introduced into England "*through the regular channel*" of the quarantine laws, and not by the "*surreptitious*" one of smugglers: and if contagious and infectious, we may then speedily expect to find it travelling up by the Exeter Express Coach to Lad-lane, probably to pay a visit to the Lord Mayor on the 9th of November, if the



weather should not prove too cold for it to make its appearance ; and in that case it will conceal itself in an old rag, or decayed wall, until the spring, when, like a giant refreshed by sleep, it will sally forth with increased vigour, and commit all sorts of comical pranks.

This one fact alone, if there were not ten thousand others equally, if not more cogent, proves that the abolition of sanitary laws does not admit of delay : since it has been shown, first, that either in the case of the existence or non-existence of contagion in epidemic diseases, these laws would be pernicious, selfish, and immoral, barbarous and unprincipled : secondly, that they are, in point of fact, utterly inefficient for their proposed ends, of arresting the progress of epidemic diseases : thirdly, that pestilential contagion, upon a belief in which these laws have originated, has no existence : fourthly, that their continuance, even for one season, will occasion the sacrifice of much wealth, and be destructive to health, life, and property, as well as highly injurious to liberty, science, public prosperity, commerce, navigation, manufactures, and with every thing, with the solitary exception of the persons employed to administer them : lastly, that they are a powerful engine in the hands of Government, Corporations, and Juntas, for the oppression, vexation, impoverishment, and subjugation of communities.

FINIS.











