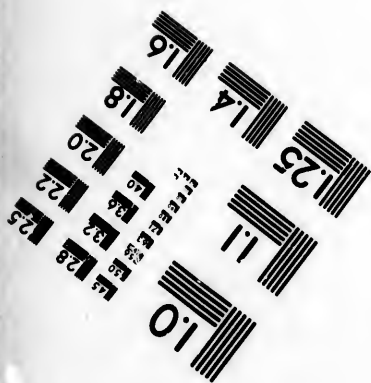
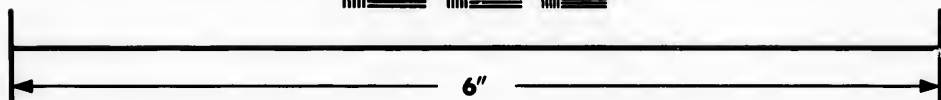
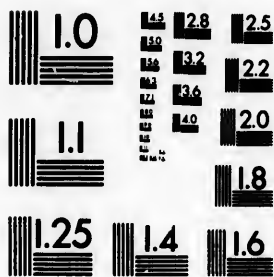


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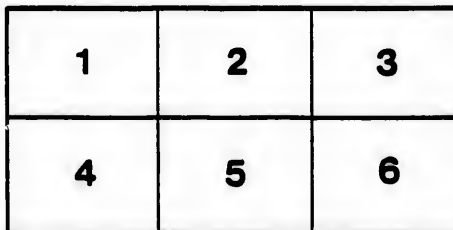
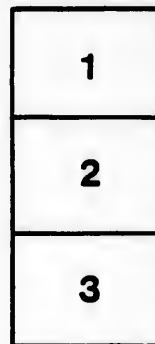
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MONTREAL TRACTS ON HOMŒOPATHY.—No. 5.

THE
MISREPRESENTATIONS
OF
HOMŒOPATHY,

BY

THOMAS NICHOL, M.D., LL.D., D.C.L.,

MEMBER OF THE COLLEGES OF PHYSICIANS AND SURGEONS OF ONTARIO
AND QUEBEC; MEMBER OF THE AMERICAN INSTITUTE OF HOMŒO-
PATHY; CORRESPONDING MEMBER OF THE HOMŒOPATHIC MEDI-
CAL SOCIETY OF PENNSYLVANIA; ONE OF THE CONTRI-
BUTORS TO *Arndt's System of Medicine, based upon
the Law of Homœopathy*; AUTHOR OF *A
Treatise on Diseases of the Larynx and
Trachea in Childhood.*

Montreal:

W. DRYSDALE & CO., 232 ST. JAMES STREET.

1888.

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Congestion of the lungs is a very frequent and very fatal disease in Montreal, and indeed in all parts of this continent, and further it is but imperfectly understood. I will therefore devote No. 6 of the *Montreal Tracts*, which will appear on Oct. 1, 1889, to the consideration of *Congestion of the Lungs and its Dangers*, and I trust that its perusal will diminish, at least in some slight degree, the mortality of this morbid state.

THOMAS NICHOL, M. D.

140 Mansfield Street, Oct. 8, 1888.

THE MISREPRESENTATIONS OF HOMŒOPATHY.

—:0:—

In this tract I purpose stating and discussing a number of the most prominent of the misrepresentations of homœopathy usually made by its opponents; and as most of these are made in grim ignorance of the subject, it may chance that these explanations may "pour light on the eyes of mental blindness."

Undoubtedly, most of the opponents of homœopathy are honest and sincere, but even those who are in perfectly good faith do not take any pains to master the subject. I remember conversing with an Ontario physician, able and conscientious, on this subject, when he surprised me by remarking that he "*had made a thorough study of the subject.*" I asked him *when* he had made the thorough study and *where*, for I knew that when he was in college homœopathy was quite unknown in Great Britain. "Oh," he rejoined, I have read Simpson's *Tenets and Tendencies of Homœopathy* and know all about it." "Precisely so," I replied, "you have read one single book attacking a system of which the author was profoundly ignorant, and you think you understand that system! If a heathen reads Tom Paine or Bob Ingersoll you would hardly think that he had a competent knowledge of the Christian verities!" But my friend did not wish to continue the conversation on that line, and yet there are thousands of physicians just like him, men well versed in all the medical sciences, save the keystone of them all,—the science of therapeutics.

1. HOMŒOPATHY IS OF MODERN ORIGIN.—This statement is frequently made with the view of throwing obloquy upon homœopathy, by classing it among the many forms of quackery which spring into existence, flourish for a brief season, and then sink into merited oblivion. Now as homœopathy is not one of the countless *theories of disease*—the shadows of which have

darkened the human race for so many generations—but a *law of cure*—a precious gift to suffering humanity from the gracious Giver of all good, we may expect, on consulting the records of the medical art, to find many intimations of the existence of that law, and also accounts of cures effected in accordance with it. And such we find to be the case.

Centuries before Claudius Galen promulgated his law, "*Contraria contrariis curantur*," a law impracticable in innumerable cases, for the most vivid imagination fails to conceive the "contraria" of gout or rheumatism—Hippocrates enunciated the homœopathic principle in the following words:—"Another proceeding: the disease is produced by similars, and by similars which the patient is made to take he is restored from disease to health. Thus, that which causes strangury where there is not any removes strangury where it exists." The treatment Hippocrates advises in suicidal mania is a kind of rough-and-ready homœopathy:—"Give the patient a draught made from the root of mandrake, in a smaller dose than will induce mania." A passage recognizing the homœopathic principle occurs in the Epistle of Democritus to Hippocrates:—"Hellebore given to the sane pours darkness on the mind, but it is wont greatly to benefit the insane." Many other distinct allusions to the homœopathic law may be found in the writings of Hippocrates, and we know that he treated cholera morbus with *veratrum album*, which is well-known to produce similar symptoms.

Galen followed with what Cullen styles "his false and unapplicable theory," and the ancient homœopathy was obscured for a time by the new and specious theory. The long night of the Middle Ages followed, and not till the commencement of the fifteenth century do we find any distinct allusions to the homœopathic law of cure. At this period there flourished Basil Valentine, a Benedictine monk, who wrote as follows:—"Likes must be cured by means of their likes, and not by their contraries, as heat by heat, cold by cold, shooting by shooting; for one heat attracts the other to itself, one cold the other, as the magnet does the iron. Hence prickly simples can remove diseases whose

characteristic is prickly pains; and poisonous minerals can cure and destroy symptoms of poisoning when they are brought to bear upon them. And sometimes a chill can be removed and suppressed, still I say, as a philosopher and one experienced in Nature's ways, that the similar must be fitted with its similar, whereby it will be removed radically and thoroughly, if I am a proper physician and understand medicine. He who does not attend to this is no true physician, and cannot boast of his knowledge of medicine, because he is unable to distinguish betwixt cold and warm, betwixt dry and humid; knowledge and experience, together with a fundamental observation of nature constitute the true physician."

In the sixteenth century, Theophrastus von Hohenheim, commonly called Paracelsus, used the homœopathic principle extensively in practice, but failed to perpetuate his system for want of physiological provings of drugs upon the healthy organism. Opinions differ greatly as to this man's true place in medicine; von Helmont styled him the "forerunner of true medicine," and the "jewel of all Germany," while, on the other hand, the gifted Zimmerman says that "he lived like a hog, looked like a carter, found his chief pleasure in the society of the lowest and most debauched of the rabble, was drunk the greatest part of his life and seemed to have composed all he wrote in this condition." But recent researches, especially by Rademacher, founder of the Empiric school, place Paracelsus in a more favourable light.

The man was dissipated but brilliant, a kind of sixteenth century Hahnemann *minus* his exact scholarship and iron tenacity of purpose. In style the two men were at times strikingly similar. Compare von Hohenheim's saying,—"Countries are the leaves of Nature's code of law, patients the only books of the true physician. Reading never made the physician—only practice," with Hahnemann's words, which should be burned into the very soul of all true healers:—"When we have to do with an art whose end is the saving of human life, any neglect to make ourselves thoroughly masters of it becomes a crime."

In his system, Paracelsus assumed the existence, on the part

of the physician, of a power of direct intuitive knowledge of diseases as a whole, not learned painfully in the schools but an almost preternatural gift.

The system of Paracelsus was a system of specifics, and as homœopathy is neither more nor less than a system of specifics, so we find many truly homœopathic ideas in the voluminous writings of Paracelsus. Thus he says, "Likes must be driven out by likes," and "we must summon to our aid a spirit of good; we must discover for every form of disease its own arcanum or proper specific." Again he enunciates the homœopathic law very plainly in the following words:—"What makes jaundice that also cures jaundice and all its species. In like manner, the medicine that shall cure paralysis must proceed from that which causes it; and in this way we practise according to the method of cure by arcana."

In more recent times the celebrated Danish physician Stahl writes:—"The rule which is admitted in medicine, of treating diseases by contraries, or by remedies which are opposed to the effects of these maladies, is completely false and absurd. I am persuaded, on the contrary, that diseases yield to agents which determine a similar affection (*similia similibus*),—burns by the heat of a stove near to which the parts are held; congelations by the application of snow and cold water; inflammations and contusions by the application of spirits. I have removed a disposition to acidity by small doses of sulphuric acid, in cases where a quantity of absorbing powders had been employed without any benefit."

Many more proofs might be adduced, but sufficient has been said to prove that homœopathy is *not* of modern origin.

2. HOMEOPATHY WAS DISCOVERED BY A QUACK.—In order to appreciate this mis-statement, a brief review of the more salient features of Hahnemann's career is requisite. Studious at school, Hahnemann, at the age of twelve, taught Greek to the junior classes of the Princely school at Meissen, his birth-place, and when he went to Leipzig, at the age of twenty, he was master of both French and English. After a stay of two years at Leipzig,

he repaired (1777) to Vienna, and was so fortunate as to be taken by the hand by Dr. von Quarin, physician in ordinary to the Emperor of Germany, who even took him to see his patients. The famous Bischoff writes that "Freiherr von Quarin bestowed on Hahnemann his special friendship." Through the influence of Dr. von Quarin, Hahnemann was appointed physician to Baron von Bruckenthal, governor of Transylvania. In 1779, he graduated at the University of Erlangen, Bavaria, and, after a brief residence in Hettstadt, he was appointed in 1781 to the position of district-physician at Gommern, near Magdeburg. In 1790, he removed to Leipzig and here he discovered that cinchona bark was capable of producing a medicinal intermittent fever, and this was to him what the falling apple in the orchard was to Sir Isaac Newton, or the swinging lamp in the baptistry at Pisa to Galileo. In 1792, Hahnemann resided at Gotha, as physician to a lunatic asylum which had been founded by the reigning prince, an ancestor of the late Prince Consort. Here Hahnemann was one of the first, if not the very first to treat the insane with kindness rather than severity. On this subject, he writes:—"I never allow any insane person to be punished by blows, or other corporeal inflictions, since there can be no punishment where there can be no sense of responsibility; and since such patients cannot be improved, they must be rendered worse by such rough treatment."

In 1796, Hahnemann published in the journal of his friend Hufeland "*An Essay on a New Principle for Ascertaining the Remedial Powers of Medicinal Substances*," which was his first public avowal of the homœopathic principle. In 1812, while resident in Leipzig, Hahnemann conceived the idea of giving a course of lectures on homœopathy to students and practitioners of medicine who might be desirous of mastering the new system. But in order to be permitted to do so, it was necessary to pay a sum of money and defend a thesis before the Faculty of Medicine. Accordingly he wrote the thesis *De Helleborismo veterum*. This has been republished in the Lesser Writings, and shortly after he commenced his course of lectures.

In 1821, Hahnemann removed to Coethen, the capital of the Duchy of Anhalt-Coethen, having been appointed councillor and physician to the reigning Duke.

In this hasty sketch we find that the highly educated friend of von Quarin, Bischoff and Hufeland was successively physician to the Governor of Transylvania, director of the Georgenthal Insane Asylum, and Councillor and physician to the Duke of Anhalt-Coethen; and the fact of his occupying these honourable positions is sufficient to show that homœopathy was *not* discovered by a quack.

3. HOMŒOPATHY IS QUACKERY.—This is a statement frequently made, chiefly by individuals who know little or nothing of the system of medicine which they so confidently condemn. Quackery is usually defined to be the possession of some secret remedy which the individual retails for his private gain, but refuses to disclose for the public good; or, from another standpoint it is understood to be a pretension to knowledge which the individual does not possess. Now, homœopathy is in all respects the very antipodes of quackery. *Homœopathy courts inquiry.* Six years after discovery of the Law of Cure, Hahnemann enunciated it in Hufeland's Journal, at that time (1796) the leading medical journal in Europe, and neither Hahnemann nor any of his followers have ever made a mystery of homœopathy, its principles or practice.

Does the inquiring physician or layman desire to investigate the principles of homœopathy? Then he is referred to Hahnemann's *Organon of Homœopathic Medicine*, originally published at Dresden in the year 1810 and since translated into English, French, Italian, Spanish, Portuguese, Danish, Swedish, and Hungarian. After reading this work the inquirer can study the treatises on the institutes by Rosenstein, Rau, Marsden, Dake, Hughes, Dudgeon, Johnson, Cockburn, Joslin, Ryan, Burnett, Clarke, Morgan, Marcy, Dunsford, Nichol, Salzer, Amake, Russell, Sampson, Everest, Black, Henderson, Hempel, Stens, Sharp, Holland, Neidhard, Morgan, Grauvogl, Vanderburgh, Fellger, Holcombe, Mohr, Lippe, Wells and Dudley. No other system.

of medicine possesses such an array of writings on its philosophy.

Does the physician desire to study the homœopathic *Materia Medica*? Then in addition to the glorious tomes of Hahnemann—the *Materia Medica Pura* and the *Chronic Diseases*,—we possess the works of Cleveland, Hempel, Jahr, Arndt, Peters, Teste, Lippe, Dunham, Heinigke, Underwood, Sircar, Gross, Guernsey, Stapf, Hering, Farrington, Possart, Hughes, Dunsford, Mure, Hale, Hoyne, Hartmann, Breyfogle, Curtis and Lillie. The great work of Dr. T. F. Allen, the *Encyclopædia of Pure Materia Medica*, in eleven volumes, is now complete, but several important works are still in course of publication, especially the *Cyclopædia of Drug Pathogenesis*, in four volumes, and Constantine Hering's *Guiding Symptoms of our Materia Medica*. Of the *Materia Medica physiological and applied*, but one volume has appeared. In addition to these systematic works we have monographs by Metcalf, Reil, Hering, Hirschel, Neidhard, Burnett, Marcy, Thomas and Nichol, and Repertories by Hempel, Neidhard, Gregg, Munroe, Bønninghansen, Petroz, Winterburn, Jahr and Lee.

Does the inquirer wish to know precisely how homœopathic remedies are prepared? Then in addition to the *British Homœopathic Pharmacopæia*, which is the standard with very many physicians, we have Quin, Bæricke, Spillan, Jahr and Gruner. Then in the important department of medical botany, Germany gives us Goullon; Great Britain, Hamilton; and the United States, Millspaugh.

Does the inquirer wish to study the practical applications of the homœopathic law to the cure of disease? Then he is referred to the works of Arndt, Jahr, Small, Dickinson, Behr, Ruddock, Laurie, Curie, Rave, Marcy, Lilienthal, Peters, Jeanes, Henderson, Kreussler, Hughes, Hartmann, Hunt, Hempel and Beakley. In clinical medicine we possess the works of Clarke, Yeldham, Bayes, Rückert, Jousset, Beauvais, Chepmell, Petroz, Martin, Epps, Jahr, Russell, Ruoff and Perkins.

Does the inquirer wish to study the homœopathic treatment

of cholera, in which the system has won its brightest fame? We have the books of Tessier, Humphrey, Joslin and Salzer. In diphtheria, too, that scourge of infancy, we have the writings of Ludlam, Helmuth, Hunt, Neidhard, Morgan, Gregg, McNeil, Dake and Oehme. In fevers, the works of Kippax, Panelli, Lord, Rapov, Allen, Wilson, McLeod, Douglas. In diseases of the respiratory organs, Holland, Shuldham, Tessier, Brigham, Morse, Ruddock, Meyhoffer, Hartmann, Hale, Becker, Hayward. Of the digestive organs, Burnett, Bernard, Morgan, Broackes, Korndorfer, Humphreys, Lade, Bell, Becker, Wells; of the nervous system, Peters, Hart, King, Shuldham, Worcester, Wilde; of the skin, Epps, Lilienthal, Jahr, Kippax, Winterburn, Goullon; of the heart, Hale, Wyld, Lade, Armstrong; of the urinary organs, Gollmann, Morgan, Buchner.

Does a mother desire a hand-book for domestic practice? Then she has the choice of Kelly, Shipman, Moore, Laurie, Tarbell, Holland, Pulte, Small, Halsey, Bigel, Lutze, Hering, Johnson, Freligh, Douglas, Guernsey, Hamilton, Curie, Epps, Fleury, Ruddock, Caspari, Hempel, Morgan, Hill, Shuldham, Millard, Hale and Jahr.

Is a more professional treatise on the diseases of children—the very strongest point in homœopathic practice—called for? Here we have the works of Thomas, Hartlaub, Ruddock, Drury, Teste, Williamson, Becker, Duncan, Pope, Laurie, Hartmann, Edmonds, Underwood, Minton and Nichol.

Does a surgeon desire to know what homœopathy can offer to “the art which is almost a science?” In general surgery we have Helmuth, in many editions, Franklin, Gilchrist, Hill and Hunt; in special surgery, Yeldham, Morgan, Berjeau, Eldridge, Kent, Small, Gollmann, Franklin and Hoyne; in ophthalmic surgery, Angell, Peters, Becker, Allen and Norton; in aural surgery, Cooper, Sterling and Houghton; in veterinary surgery, Moore, Ruddock and Hurdall. In midwifery and gynecology, Ludlam, Skinner, Pulte, Leadham, Matheson, Jahr, Peters, Minton, Morgan, Hale, Guernsey and Conant.

All the books above mentioned are in the medical library of the present writer, and many more exist in addition to these.

Does the physician or layman wish to see what medical journals are issued in support of the doctrines of homœopathy? I shall mention only those lying on my own table; they are, of course, only a selection. They are the *Monthly Homœopathic Review*; the *Homœopathic World*; the *Annals of the British Homœopathic Society*; the *North American Journal of Homœopathy*; the *New England Medical Gazette*; the *Hahnemannian Monthly*; the *Homœopathic Physician*; the *Clinique*; the *Homœopathic Recorder*; the *Medical Counselor*; the *California Homœopath*; the *Medical Visitor*; the *Buffalo Investigator*; the *Homœopathic Journal of Obstetrics*; the *Chironian* and the *Medical Institute*.

Finally, does the physician or medical student desire to become thoroughly educated in homœopathy? Then on the Continent we have fourteen well equipped medical colleges, namely, the Hahnemann Medical College of San-Francisco, California; the Hahnemann Medical College and Hospital, Chicago, Illinois; the Chicago Homœopathic Medical College; the Homœopathic Medical Department of Iowa University; the Boston University School of Medicine; the Homœopathic Medical Department of University of Michigan; the Homœopathic Medical College of Missouri; the Homœopathic Medical Department of the University of Nebraska; the New York Homœopathic Medical College; the New York Medical College and Hospital for Women; the Homœopathic Hospital, College, Cleveland, Ohio; the Pulte Medical College, Cincinnati, Ohio; the Hahnemann Medical College of Philadelphia; Minnesota Homœopathic Medical College. These fourteen medical colleges are further reinforced by forty-eight hospitals, of which the largest is Ward's Island Homœopathic Hospital, New York, with 574 beds and 3,733 patients last year; next to this is the Homœopathic Medical and Surgical Hospital, Pittsburgh, Pennsylvania with 200 beds and 1,114 patients last year. A good idea of the size of these hospitals is gained by comparing them with, say, the Montreal General Hospital, which has 175 beds. Among the special hospitals, we find the New York State

Homœopathic Asylum for the Insane, at Middletown, N.Y. with 400 beds and 568 patients last year; the New York Stat, Asylum for the Chronic Insane, at Binghampton, N.Y., with 1,000 beds and 1086 patients last year; and the Home for the Aged Poor, Allegheny, Pa., with 220 beds. In addition we have in the United States 46 Homœopathic Dispensaries, many of them on a very large scale, treating many thousands of patients each year.

What is the meaning of all this array of books, and journals, and colleges, and hospitals, and dispensaries? Simply this, that homœopathy courts inquiry to the fullest extent, that the fullest possible information is afforded to all inquirers, that, in fact, homœopathy is the very antipodes of quackery.

Quackery dwells in darkness. No quack ever yet revealed the secret of the composition of his medicaments. No quack ever yet published a book of *Materia Medica* or on the practice of medicine. No college was ever founded for instruction in quackery.

Homœopathy is unchanging and unchangeable. The manner of preparing the medicines may change, and new medicines are constantly being added to our therapeutic armament, but the principle itself can never change, simply because it is a law of Nature. Ages ago Hippocrates cured cholera morbus with veratrum album, and that plant is a leading remedy in this disease at the present day. Even the dose was settled long ago, for Hippocrates states that "it is necessary to give a smaller quantity to the sick than would produce similar symptoms on the healthy." How much smaller he does not state, and probably the experiments of that most acute observer were never pointed in that direction.

I have said that *homœopathy is unchanging and unchangeable*. By this I mean that a medicine that cured a given morbid state, when that fact was first ascertained, let us say by Hahnemann, continues to cure that same morbid state to the end of time. Thus in the year 1799 Hahnemann ascertained by pure experiment the power of Belladonna to cure certain forms

of scarlet fever; Belladonna then still cures that same form of that disease, and will continue to do so indefinitely. In the year 1814 Hahnemann pointed out the curative relations between *Rhus toxicodendron* and *Bryonia alba* and the war-typhus, which was left as an evil legacy to Germany by the Grand Army on its disastrous retreat from Moscow; these remedies cure similar morbid states to-day, and will always continue to do so. Only the other day I gave the first named remedy in a case of typhoid fever from first to last with the most gratifying results. In the year 1830 Hahnemann, without ever having seen a single case of Asiatic Cholera, stated that *camphor*, *veratrum* and *cuprum* would prove the leading remedies; they are still the chief reliance of the homœopathic physician, and they will hold that position as long as cholera is cholera. What was true with us three generations ago is true to day, and will always be true. We add to our knowledge but we do not disown the old knowledge, which did knightly service in the hands of our medical ancestors, and which will continue to be a benediction to humanity in the hands of our medical descendants.

Quackery is changing and changeable.—The most common form is that of the well-known pill-box, "with the proprietor's signature in white letters on a red ground without which none is genuine, and to counterfeit which is felony," but in vastly higher medical circles it appears in the form of some panacea for typhoid fever or diphtheria; or, taking still another direction, it recklessly offers to cure stammering in five minutes without an operation; or, still in the highest circles, it offers to cure the hopelessly deaf or blind, well knowing that the deafness and blindness are hopeless. All these are forms of quackery, and with these homœopathy has nothing in common, any more than the stately oak has aught in common with the foul parasite that clings around its base.

Comparisons might be multiplied, but I trust that sufficient has been said to prove that *homœopathy is not quackery*.

4. HOMŒOPATHY IS INEFFICIENT AGAINST VIOLENT DISEASES.—When Hahnemann enunciated his great discovery in that

remarkable *Essay on a New Principle for ascertaining the Remedial Powers of Medicinal Substances* published in *Hufeland's Journal* in the year 1796, he stated that in chronic diseases at least, the remedies ought to be chosen in accordance with the law of similars ; and for some time after the publication of that essay, he continued to treat *acute* diseases after the ordinary method. Accident, however, revealed the remarkable efficacy of the new system in *acute* diseases, against which it has been employed with remarkable success since the year 1798.

At the present moment if I were called on to demonstrate the power of homœopathic remedies over disease before an impartial tribunal, say the Board of Governors of the Royal Victoria Hospital, Montreal, or the Faculty of Medicine, McGill University, Montreal, I would select such diseases as cholera, dysentery, yellow fever, typhoid fever, typhus fever, scarlet fever, pneumonia, and especially congestion of the lungs, as well as all the acute diseases of childhood. And I would feel serenely certain of a favourable verdict.

Thus when typhus fever and dysentery were devastating Ireland in the year 1847, Dr. Joseph Kidd, at that time an orthodox homœopath, attended one hundred and ninety-two cases in their own homes, amidst all the wretchedness of that most wretched time, and the results of his treatment were as follows :

Mortality from typhus fever	2	per cent.
“ “ dysentery	14	“

At the same time, and in the same neighbourhood (Bantry) Dr. Abraham Tuckey, an allopathic physician, treated a number of cases in the Bantry Union Hospital, with every possible advantage of cleanliness, ventilation and diet, and here the results were :—

Mortality from typhus fever	13	per cent.
“ “ dysentery	36	“

At the same time an hospital was opened in Liverpool, England, for the reception of sick Irish emigrants, and here the physician abstained from giving any medicine whatever, contenting himself with watching the cases, giving great attention to diet,

cleanliness, and so forth. The following were the results of this expectant treatment:—

Mortality from typhus fever 10 per cent.
 “ “ dysentery 25 “

Here we find that, while the mortality in typhus fever, under homœopathic treatment was only 2 per cent., the mortality under allopathic treatment was 13 per cent., while the loss when no medicine whatever was given was only 10 per cent.

So that while homœopathy saved 98 out of every 100 fever patients, nature unaided by medicines saved 90 out of every 100, while allopathy, with every possible advantage of diet, only 87.

Again, Dr. Kidd, the homœopath, lost 14 per cent. of his dysentery cases, while Dr. Tuckey, the allopath, lost 36, and the expectant treatment only 25 out of each 100.

Here homœopathy saved 86 out of every 100 dysentery patients, nature 75, and allopathy 64 only.

So that in these most striking tests, nature was a little better than allopathy, or allopathy a little worse than nature, while homœopathy was very much better than either.

Or take pneumonia, inflammation of the lungs, a very common and very fatal disease in this city. Here is an outline sketch of a tragedy which has happened quite too frequently of late years. A prominent citizen is ill, he calls in a leading man of the dominant school, who assures him jauntily that he has a “cold,” and that “he will be around in a few days.” The few days pass and the patient gets no better very fast, and a second practitioner, also a man of mark, is called in. The combined wisdom of these gentlemen enables them to determine that “bronchitis has set in,” but that “no danger is present.” More days of anxiety pass, and the two medical attendants unite in calling in a third, of course a man of light and leading. He surprises his *confrères* by pointing out *that the patient has pneumonia*, and that the situation is very grave. More days of racking anxiety, now hoping against hope, now cast down to the very dust, when the community is startled by the intelligence that Mr. So-and-So is dead.

What, then, has homœopathy to offer in this dire disease? How do its results compare with the results of other systems of treatment? I will tell you. A certain Dr. Dietl, an allopathic physician attached to the Wiesbaden Hospital, Vienna, Austria, desirous of testing the efficacy of various plans of treatment in this disease, instituted a series of experiments. In the course of three years he attended 380 cases, 85 of these were treated by repeated bleedings; of this number 17 died, or 20 per cent., the remaining 38 recovered; 106 were treated with tartar emetic; the mortality was now 20 per cent., 22 dying, 84 recovering. The remaining 189 were treated by simple dietetic and hygienic measures, *no* medicine whatever being given; the deaths amounted to 14 only, or 7.04 per cent, 175 recovering.

So that when Dr. Dietl treated inflammation of the lungs with bleeding and large doses of powerful drugs he lost twenty out of every hundred; and when he contented himself with simple dietetic management he lost but seven out of every hundred!

In the same city and during the same period of time, Dr. Fleischmann, of the Gumpendorf Homœopathic Hospital, treated 538 cases of pneumonia with 28 deaths, a mortality of 5 per cent.

Compare this with the results of Dr. Dietl's varied treatment:—

Under allopathic treatment the mortality was	20	per cent.
“ no medicine at all	“	“ 7 “
“ homœopathic treatment	“	“ 5 “

It will thus be seen that the homœopath *gains* by giving medicine, while the allopath loses by it.

The duration of this disease, too, varies astonishingly with the treatment employed. Thus Dr. Tessier of Paris, and Dr. Henderson, Professor of Pathology in the University of Edinburgh, both prominent homœopathic physicians, found that under homœopathic treatment the duration of a case of inflammation of the lungs was 11½ days. From the allopathic side Dr. Louis of Paris, and Dr. Dietl of Vienna, show that under “regular”

treatment the average duration is 29 days. Under expectant treatment—no medicine at all—it is 28 days.

How do the figures stand in pleurisy? A very common malady in all northern lands and one, too, in which homœopathy is so successful that Dr. Routh, author of the well-known *Fallacies of Homœopathy*, admits, that while the practitioners of the dominant school lose 13 out of the hundred, homœopathic practitioners lost but 3 out of each hundred.

Yellow fever has to-day a melancholy interest for English-speaking people, inasmuch as it has recently caused the death of one of the most brilliant scientists of our day. It is, as every one knows, a very prevalent disease in the southern parts of this continent, where it is almost as fatal as cholera. Omitting all notice of inferior authorities, I turn to Dr. La Roche's voluminous work on this disease, in two volumes of fourteen hundred pages, and I find that he states that the average mortality is one hundred out of every three hundred and fifty attacked—or, in other words, out of every seven persons attacked, two die. So much for allopathic practice.

During the years 1853, 1854 and 1855, Drs. F. A. W. Davis and W. H. Holcombe, two of the best homœopathic practitioners in the South, treated 1016 cases, of which 55 terminated fatally. This is a mortality of 5.4 per cent., or nearly nineteen out of every three hundred and fifty attacked. *Nineteen as compared with one hundred!*

During the terrible epidemic of 1855 at Portsmouth and Norfolk, Virginia, Dr. Lisle Augustus Bilisoly, whom I am proud to claim as a fellow-student, treated 137 yellow fever patients, of whom 8 died, and of these, five had previously been under allopathic treatment.

In 1878, yellow fever raged in New Orleans and its vicinity, and after its close the American Institute appointed a special commission to report on the statistics. The following facts and figures sum up the matter:—

“ We had here (New Orleans) 1,945 cases of yellow fever treated homœopathically, with a loss of 110 patients,—a mortality of 5.6 per cent.

" We had 1,969 cases of yellow fever treated in cities and towns outside of New Orleans, with a loss of 151 patients,—a mortality of 7.7 per cent.

" This makes a total of 3,914 cases of yellow fever treated homœopathically, during the epidemic of 1878, with a loss of 261 patients,—a mortality of 6.6 per cent.

On the same ground, and during the same epidemic, the most favourable allopathic results averaged 17 per cent., while the mortality, under the heroic treatment still in use in many parts of the South,—bleeding, calomel, quinine—was greatly above that figure.

Of cholera, we have had three visitations in Canada, in the year 1831-2, in 1849, and again in 1854, and during these epidemics thousands of our people died. Consequently, the subject must always be one of deep interest to all thoughtful minds, and a natural inquiry is: how do the homœopathic statistics compare with those of the regular school? I hasten to reply.

Just forty years had passed away since the eventful year (1790), when the sagacious experimenter discovered that cinchona produced symptoms similar to intermittent fever, when the tidings spread through Europe that the cholera—the scourge of the Ganges—had left its Asiatic home and was rapidly advancing westward. A full description of the disease was placed in the hands of Hahnemann, and, after a careful comparison of the symptoms of the disease with the well-ascertained symptoms of a number of drugs, he fixed upon the remedies *camphor*, *veratrum* and *cuprum* which, he stated, would prove the principal remedies and also prophylactics.

The dreaded enemy came, and passed like a destroying angel over the fairest provinces of Europe, and after its departure the published statistics afforded means of comparing the results of the rival systems.

Now, medical statistics differ very much in value. Cases occurring in private practice are the least reliable, as the capacity and honesty of the physicians may be questioned. But the case is different when well-known physicians make the reports, and, further, when they are able to give the names and resi-

dences of the patients treated, so that the reports may be verified or contradicted, as the case may be.

Next in value are hospital reports, where a large number of cases of the same disease have been treated, under similar circumstances.

The most valuable statistics of all are those verified by government inspection, and if the government or the inspector are hostile to the system inspected, then the statistics are all the more valuable.

I would further remark that the results of homœopathic treatment in cholera differ greatly, and this difference does not depend so much upon the severity of the epidemic as on the skill of the physician. When men of transcendent ability, like Dr. Rubini of Naples, or Dr. Bull of London, Ontario, are at the helm, the statistics are simply astounding, for these eminent men attended numerous cases of undoubted cholera without losing a single patient.

Immediately after the cholera epidemic of 1830-31 in Russia, a report was made to the Czar of the total number of cholera patients who had been under homœopathic treatment in the governments of Saratow, Tambow and Twer. The president of the Imperial Council reported the number of patients at 1273, with 108 deaths, making a mortality of less than nine per cent.

In April, 1832, Dr. Rath was ordered by the King of Bavaria to collect authentic information as to the results of the homœopathic treatment of Asiatic cholera; and he reported, that out of 1269 cases treated by fourteen homœopathic physicians in the cities of Vienna and Prague and in Hungary and Moravia, there were only 85 deaths, showing a mortality of less than seven per cent; while in the same cities and countries, under allopathic treatment, the mortality was over thirty-one per cent.

In 1826 the Emperor of Austria forbade the practice of homœopathy in all the States of his empire, but the marked success which attended the homœopathic treatment of cholera in Vienna induced that excellent sovereign to cancel the decree in the year 1836.

In the year 1849 cholera raged in Cincinnati, Ohio, and Drs. Pulte and Ehrmann, two leading homœopathic physicians, attended 1,116 cases from May 1 to August 1, with a loss of 35 patients—a mortality of less than 4 per cent. So great was the contrast of these results with those reported by their allopathic neighbors, that the truthfulness of the homœopathic statistics was publicly called in question; and in self-defence, the two physicians submitted their lists, giving names and residences of all the persons treated; and on inquiry it was found that their claim was correct.

In the year 1848, cholera raged in Edinburgh, Scotland, and the six physicians of the Edinburgh Homœopathic Dispensary attended 236 patients at their own homes, of whom 57 died. This is a mortality of a decimal over 24 per cent.

In the same city, and during the same epidemic, 640 cases were treated by allopathic physicians, of whom no less than 435 died—a mortality of 68 per cent. *Sixty-eight as compared with twenty-four.*

In the year 1854, cholera of a severe type raged in London, and the General Returns made to Parliament admitted a mortality of 59.2 per cent. When the returns were brought before the House of Commons, Lord Robert Grosvenor, now Lord Ebury, noted that the returns from the Homœopathic Hospital were not included, though it was known that Dr. Macloughlin, Medical Inspector of the General Board of Health—an allopathic physician, of course—had certified to their correctness. It was soon ascertained that *they had been suppressed* by a joint resolution of Dr. Paris, President of the Royal College of Physicians and the Medical Council! Lord Robert at once moved that the homœopathic returns be brought before the House, and the motion was agreed to. Then the revelation was made,—astounding to those unacquainted with homœopathy,—that while the allopathic mortality was 59.2 per cent., that the homœopathic mortality was but 16.4 per cent!

That is, that while the “regular” treatment saved *forty-one* out of every hundred attacked, the homœopathic treatment saved *eighty-four!*

During the Naples epidemic of 1854, Dr. Rubini, an homœopathic physician of undoubted experience and trustworthiness, attended 377 cases without a death. Two hundred of these were in one institution, and his published statement has never been contradicted. During the same epidemic other homœopathic physicians attended 215 additional cases, without the loss of a single patient.

On August 7, 1854, cholera broke out in London, Ontario, advancing from the East where it had been very fatal, especially in Hamilton and Brantford. It was of a malignant type, and numbers died, but most fortunately Dr. Alexander Thompson Bull, now of Buffalo, N.Y., had located in the place just two weeks before the dreaded enemy made its appearance. His first case was in the family of Marcus Holmes, Mayor of the town, who frankly told him that he was called because no one else could be had. The case, which was a severe one, recovered, and during the entire epidemic the doctor attended fifty-three cases, many of them in the stage of collapse, *without a single death*. I was with Dr. Bull at the time and vouch for the accuracy of these statements, which were never doubted or contradicted at the time. During the same epidemic, the loss under allopathic treatment was very great; in the cholera hospital especially hardly a patient escaped. The treatment throughout was strictly homœopathic, the lower dilutions being exclusively used.

But, it may be argued, medical science has advanced greatly since 1854, and the results to-day would be much more favourable. But during the last epidemic in the United States, in the year 1873, the mortality, according to the government statistics, was 52 per cent., which is more than double the mortality of the least successful homœopathic treatment on record. But even this awful mortality is moderate compared with that experienced in France, Spain and Italy during the epidemics of 1884 and 1885—yesterday as it were. There the average mortality was over seventy per cent., and as a result the medical men were often driven away from the sick with sticks and stones.

What success has homœopathy in the diseases of children ? After an experience of thirty-four years, during which time I attended tens of thousands of cases of illness in children, I am strongly of opinion that even if homœopathy were totally useless in the diseases of adults, it would still be a priceless blessing were it only for its usefulness in the maladies of the little ones. Statistics support this claim. From the year 1830 to 1842, the Protestant Half-Orphan Asylum in the city of New York was under allopathic treatment, and the average mortality during that time was 1 in 48. In 1842 the homœopathic treatment was adopted, and from 1843 to 1859 the average mortality was 1 in 145. So that, you see, the probabilities of a child attaining the age of fifteen are as 145 if treated homœopathically, compared with 48 if treated allopathically.

Figures might be multiplied almost indefinitely, but sufficient has been said to prove to any impartial mind that *homœopathy is most efficient against violent diseases.*

5. HOMŒOPATHY IS EVANESCENT AND WILL PASS AWAY.—When I commenced the study of the great law of healing, I was told by numbers of highly intelligent people, chiefly however of my own sex—for the other sex has an intuitive appreciation of homœopathy and its milder means of cure—that I was wasting time and money and energy in the study of a system which would surely wither and die, as numerous medical systems had withered and died before it. Thirty-five years have passed away since these very confident prophets uttered their predictions, and I have lived to see two of the most confident of them enter the ranks of homœopathic practitioners, while most of the remainder have become patrons of the very excellent homœopathic physicians of that part of Ontario.

During these thirty-five years the progress of homœopathy has been simply marvellous. Then we had on this continent fifteen hundred physicians; now, counting Americans, Mexicans and Canadians, we have more than ten thousand. Then we had in Canada not more than twelve physicians, of whom but two possessed the legal right to practice; now we have one hundred

and twelve, nearly all of whom are licentiates. Then we had but two medical colleges with 14 professors and 220 students; now we have fourteen colleges with 200 professors and 1,050 students. These colleges are well equipped, and are in all respects the peers of the best colleges of the dominant school. Then we had no hospitals whatever; now we have 58 hospitals, with 27,925 patients last year. Then we had a few struggling dispensaries; now we have 46 with 138,694 patients last year. Then we had really but one journal, the old *North American Journal of Homœopathy*, still flourishing; now we have twenty of the very best quality. During these thirty-five years the homœopathic physicians of this continent of North America have literally created a literature; we who thirty-five years ago had to learn foreign tongues, in order to acquire a knowledge of homœopathy, have forced foreign physicians to learn English in order that they might read our books.

But, say the critics,—and it is marvellous how many are critics of homœopathy—all this progress has been made on the North American continent, confessedly enterprising and progressive; how does homœopathy stand with less progressive people?

Let us turn to Spain, supposed by many to be ultra-conservative, some even say effete. Homœopathy was first introduced into Spain by Dr. Horatiis, an Italian physician, attached to a royal commission sent by the King of the Two Sicilies to attend the marriage of Donna Maria Christina with Don Ferdinand VII. Dr. Horatiis left no notable results behind him as his stay was necessarily short, and the real pioneer was a Cadiz merchant named Zuate, who introduced the new science into Andalusia in 1830. Three years later three distinguished physicians adopted homœopathy, Drs. Lopez Pinciano, Rino y Hurtado, and Prudentio Querol. A great impetus was given by the success of Dr. Rino y Hurtado in the epidemic of cholera, which ravaged Badajaz in 1833, and in 1842 the same practitioner commenced the first Spanish homœopathic journal. Soon an animated controversy was begun by the leading allopathic organ, the *Boletano de Medicina*, the leading writer on the allopathic side being

Dr. Cazetano Balseiro, who was finally converted to homœopathy of which he became a life-long champion. Dr. Lopez Pinciano also was very successful in the epidemic of cholera in 1834, and he devoted himself for many years to the task of translating homœopathic works from the original German.

So complete was the success of the homœopaths, that their opponents invoked the assistance of the law, in order if possible to crush the pestilent medical heretics. In Granada, Dr. Manuel Gidela was prosecuted for practising homœopathy, but was triumphantly acquitted. A short time afterwards, Dr. José Lopez, one of Gidela's prosecutors, became insane, and having recovered under the care of Don Felipe Gil, a leading homœopathic physician, he was himself converted to homœopathy.

In 1844, Don José Nunez, who had studied homœopathy under Hahnemann himself, and practised successfully in Bordeaux, returned to Spain, and commenced practice in the capital. One of his first patients was a noble of high position at court, who had been unsuccessfully treated by the most distinguished physicians of the dominant school, and by them pronounced incurable. Dr. Nunez was called in, and confidently predicted a cure, which promptly followed his treatment. At once the young Queen was drawn towards homœopathy. Dr. Nunez was appointed one of the physicians of the bed-chamber, created Marquis and Grandee of Spain, receiving also the grand cross of the Order of Charles III. and of the Civil Order of Beneficence; he also received the royal permission to teach and practise homœopathy in the wards of the allopathic hospitals. But the allopathic opposition was so strong that this plan could not be carried out, so some years later a homœopathic hospital was founded, which was at once a public charity and an institution for the clinical instruction of students.

The royal example gave such an impetus to homœopathy that several journals were commenced with the view of spreading the new doctrines, and also of meeting the attacks of the allopathic press. The first of these polemic journals was *La Gazeta Homœopatica*, conducted by Don Roman Fernandez del Rio,

followed by others of the same stamp, till, in 1846, the permanent Spanish homœopathic journal appeared. In 1845 the Marquis de Nunez founded the *Hahnemannian Society of Madrid*, and in the following year its official journal appeared. In *El Criterio Medico* we possess a record of Spanish homœopathy for the past forty-three years, during which time it has ever been the organ of the strict Hahnemannian homœopathy, while at the same time it must be admitted that it has never impeded the progress which study and experience inevitably bring.

At first the new *Sociedad Hahnemanniana* included most of the homœopathic physicians in Spain, but dissensions soon arose concerning the vexed question of the dose. A number held to the earliest practise of the master in the administration of the lower dilutions and triturations, while the majority held to the later views which sanctioned the use of infinitesimals only; so the low dilutionists organized the *Homœopathic Academy of Spain*, with Don Joaquin Hyssem as president. In 1859, a truce was patched up, and the low dilutionists returned to the *Sociedad*; but in a year or two a new secession took place, and the Academy was revived under its old president, who, by the way, was a Professor in the College of Madrid.

Notwithstanding these lamentable dissensions, which certainly impeded the growth of homœopathy, the public,—especially the wealthy and cultured public—supported homœopathy so enthusiastically, that the allopaths could no longer restrain their wrath at seeing the wealthy desert the camp of calomel and bloodletting. So Doctors Frau and Conal attacked it furiously in public addresses at the University, while Don Pedro Mata, a very eloquent speaker, delivered a fiery oration in the Athenæum. Don Pedro Hernandez followed in the homœopathic interest, and the result was that Don Pedro Mata's eloquence produced results contrary to his wishes; at the same time similar discussions were carried on in all parts of Spain, resulting in the conversion of a number of allopathic physicians.

In 1878, the *Homœopathic Hospital and Institute of St. Joseph* was founded, with a full staff of lecturers. From 400 to

500 patients are treated annually, chiefly acute cases of a serious nature, and the Dispensary, which is thoroughly appreciated by the poor of Madrid, treats 800 patients a month. The medical school attached to the hospital had 43 students in 1885.

The Dispensary of the Madrid Homœopathic Society treated 6,422 patients in 1885, and, in addition, nearly every homœopathic physician in Spain has a free Dispensary of his own.

The Marquis de Nunez died in 1879, but his old patrons, the Royal family, have in exile always remained steadfast friends of the homœopathic cause.

At the present time there are 53 homœopathic practitioners in Madrid, and 41 in Barcelona and its vicinity, and in all the Spanish dominions there are 600 homœopathic physicians. Homœopathy has always held Cuba with very excellent physicians, and Dr. Plana y Cunill y Castroverde, an avowed homœopath, was Dean and Rector of the University of Havana. Indeed, in all the Spanish dominions, there is a curious absence of the *odrum medicum* so rife in English-speaking lands; for example, some years ago, Dr. Garcia Lopez, a well-known homœopath, was appointed Professor of Physiology in the University of Salamanca.

I have been thus minute in detailing the history of Spanish homœopathy, because its history is that of our beneficent science in all civilized lands. Everywhere the same furious opposition on the part of the physicians of the older school, everywhere the same rapid yet abiding success, everywhere the same triumphant success. Everywhere, too, the same strange unity amidst every possible variety of nationality, and to-day if six physicians, a Brazilian, a Russian, a Spaniard, a Hindoo, an Englishman and a Canadian, were called on to prescribe for the same cholera patient, they would all give the same identical remedy.

But, say the critics once more, homœopathy may be suited to the keen, incisive American mind and to the stately Spanish intellect, but is it suited to, say, Asiatic peoples? Let us turn to India, with a national intellect probably inferior to the Persian

and certainly inferior to the Japanese, and what do we find in that vast realm with her ancient civilization and her almost incomparable literature ?

There are to-day three mighty forces at work in Hindoostan, namely, the christian religion, English law, and homœopathic medicine. Christianity is everywhere victorious, and there are now a million of native Christians where forty years ago they were counted by scores. Thus, in the province of Tinnivelli, with a population of eighteen hundred thousand, the missionaries of the Church of England baptized sixty thousand converts from heathendom in a single year. English law, too, stripped of its cumbrousness, is rapidly superseding the antiquated native systems of law.

I regret exceedingly that space fails me and that I cannot now tell of the Indian homœopathy, with its *Calcutta School of Homœopathic Medicine* with its thoroughly educated native lecturers, but one being a European ; of the excellent *Calcutta Journal of Medicine* with its native editors and writers ; of the rapidly growing homœopathic literature, including the best treatises on cholera in any language ; of the numerous native practitioners, many of them holding British qualifications ; of the homœopathic hospitals and dispensaries maintained by native sovereigns and nobles, and of the very cordial reception given to the evangel of healing by the vast native population. I would like to tell, too, of the persistently hostile attitude of the allopathic physicians and of the almost volcanic outbursts of professional jealousy, and when I write the Tract entitled "*The History of Homœopathy*," I will not overlook Hindostan.

I submit that the evidence I have adduced is sufficient to prove that homœopathy is permanent and will abide.

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