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REMARKS ON THE PRESENT ASPECT OF MEDICINE.*

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We are not prepared to say that much of the practice in the present day is not mere guess-work, especially with those who see their patients perhaps but once, or at all events, at very distant intervals; who have no opportunity of watching the influence of their medicines, and modifying that influence according to the peculiar state of the constitution, and rectifying the mistakes or imperfect knowledge of to-day, by the enlarged knowledge of to-morrow, and by the close observation of disease. We believe that a physician, in order to be a successful practitioner, and to carry out his plans, and to develop the agencies of medicine, should be a close attendant upon his patient; and where he is not so, we are not surprised at his hesitating to employ active measures, and at his trusting more to the *do-nothing* system of regimen (because it will do no harm,) rather than to the *do-something* system of medicine, over the influence of which he bears no regulating control; but this again is an error of the system of administration, and detracts not from the power of medicine.

Now, as to the influence of "Young Physic" in correcting these errors, and in working out the projected reformation, we have no means of judging of his powers. So far as parentage is concerned, since *fortes creantur fortibus*, we ought to expect much good from his future Herculean labours; but since we do find sometimes that children differ essentially from the direct parent stock, and are influenced by some previous bend sinister in the family escutcheon, we cannot yet rely upon what may be his developed powers. We cannot but recollect that he has not yet passed through the disorders and the trials of infancy; and we cannot yet predicate that his system will not receive so severe a shock from some of these trials as to enfeeble his progress towards maturity,—to stunt his powers,—to destroy his fair proportions,—and finally, to make him a puny man instead of a giant. Neither can we be assured that his associations will always be of the purest description, and that he will not be tempted in some evil day by some of the alluring provocations of society, to spend his strength upon unworthy objects, and to exhaust his powers upon very inferior pursuits, instead of upon that great and high destiny which the early

breathings of parental vows would have placed before him. Therefore, we must indulge in hope, and cherish the heroic virtue of patience, in waiting for the development of the young champion's powers; and in the meantime, while we entirely concur with many of the educational precepts placed before him, we shall venture an observation or two upon some of the agenda, in order, if possible, to add our mite of contribution towards the realization of this *beau idéal* of perfection.

I. (1.) The preceding observations will have already explained our views with regard to the natural history of disease. To endeavour to obtain a deeper insight into the natural course and events of disorder in all its Protean forms by more care, more zeal, more industry, more nightly study, and more daily toil in the use of every legitimate means within our reach, is good and praiseworthy; but to obtain this knowledge at the expense of our patient is exquisitely cruel, and most deeply criminal. It is at once conceded that all organic disease and functional disorder of the system may have originated from some injury antecedently sustained, often from very remote causes, and frequently from the effort of nature to restore that which was wrong, or by the want of power to produce that effort. In either case, nature generally requires assistance,—in the former, to keep within due bounds that effort, which is almost always overdone,—and in the latter, to restore and re-animate her powers, and aid her in the accomplishment of her sanatory views. Left to herself, in both cases disorganization frequently results, and the physician has the uncomfortable reflection of the destruction of life by his supineness.

II. (4.) We quite agree upon the importance of introducing a more philosophical and "accurate view of the relations of remedies to the animal economy, and to diseases," and we are quite sure that a greater amount of careful and diligent observation will have its reward; but how is this to dissociate the minds of practitioners from the *post hoc propter hoc* notion, especially when tested by the numerical method! A judicious mind sets off upon the investigation of disease and its remedies; it seeks to obtain first every possible theoretical acquaintance with the former and the latter, and thus armed with study, it seeks to verify its principles at the bed-side. Here disease and its symptoms are investigated carefully; the effect of remedies is *minutely watched*; and the result is noted. By degrees, mistakes are corrected, a better acquaintance with the actual forms of disorder is obtained, a juster

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confidence in prescribing is acquired, and the practitioner expects that in certain forms of malady, certain effects will be produced by certain remedies, and very generally he is not disappointed in the result. Here, then, is the experienced physician; but how is this obtained by the numerical method, except by summing up the preponderating number of *post hoc*s, and arriving at the identical conclusion of *propter hoc*s. Not so, the injudicious practitioner who infers that a *red herring is good for a tailor, but not for a cobbler*, because, when exhibited in the same form of malady, the one died, and the other recovered. The difference is this, that the one prescribes judiciously and upon sound principles, discriminates results, and finally arrives at *post hoc propter hoc* results; while the other prescribes empirically without knowledge or principle to guide him, and arrives at conclusions, not from the summing up of a large series of inductions, but from a very small number of trials; the one is rational, the other irrational; the one is principled, the other is destitute of principle; the one appeals to reason and common sense, the other is alien from both.

III. (5.) This is a dangerous position, for although the "*anceps remedium melius quam nullum*" may be a very unsafe axiom, if it be construed to mean that any remedy, however wild,—however extravagant,—however absurd,—is better than no remedy at all, then, indeed, leave nature's operations undisturbed; but the cases must be rare indeed where no indication to be fulfilled may be extracted from a careful perusal of the patient, and his constitutional peculiarities, and his present disturbances. And if the case be so rare as to form only an unusual exception to the general result, the adoption of the rule of doing nothing, because the issue of the remedy is doubtful, is really only taking up the old nurses' plea, of letting the patient die undisturbed, or, as they would say, "a natural death," rather than endeavour to save him,—leave him rather in the hands of nature, and of Providence, than to the tender mercies of the doctor. But, as philosophers, we may not be guided by old nurses' views; we cannot be justified in our conduct to our patient, if we see him destroying by disease, and leave him to his fate, while there remains even a remote prospect of advantage from the *anceps remedium*. We are bound to eschew the remedy chosen at hazard; we are equally bound to employ the remedy, which, under the most deplorable circumstances, offers a hope of advantage to the patient. How often has the judicious physician been blessed with a joy almost unspeakable, when he has seen patients recovering under persevering energy, from conditions in which nurses, friends, and even less sanguine medical men, had given up all for lost. How deep must be the remorse of him who feels that a life may have been sacrificed from want of energy on his part!

IV. (6, 12.) We dislike polypharmacy as much as it is possible, and we would never exhibit a remedy of any kind unless we had a scientific reason for so doing, and unless we were prepared to defend our method of treatment upon philosophical, though it may be misapplied, (because mistaken,) principles. We claim no

exemption from the errors and short-sightedness of humanity, and we dislike, with intense aversion, the miserable system of *prescribing for symptoms*, and exhibiting a certain drug for this, and a certain other for that, symptom, and varying our prescription several times in the day, according to the urgency of some particular symptom; and therefore we quite agree in the importance of *simplicity*, but we do not attach the same meaning to the term as does "Young Physic." By the term simplicity of prescription, we mean that combination of medicine, which in our best and deliberate judgment, we think most suited to meet and supersede the morbid action, of which we have endeavoured to take a comprehensive view, in all its bearings, upon the organs and functions of the body,—that form of medicine which, according to its present effect upon the constitution, we are prepared to carry on or to modify, till we have obtained certain changes, which will also demand certain other remedies to be then chosen and selected; and in doing this, we should consider that we have pursued an "*intelligible*" process, and should thus have excluded all unnecessary and useless drugs. But in doing so, we confess that we should have had very little regard to what would prove agreeable to our patient; we should have first decided upon what would do him good; and then if we could have made the same palatable, without injury to our own inductions, we should have had no objection. In carrying out these views, we believe that we should have pursued a rational, scientific, and beneficial system.* In effecting this too, we should have had no difficulty in rendering ourselves intelligible to friends, in explaining the malady before us, what were our indications of treatment,—indications which we were endeavouring to fulfil by medicine, and which they were to support and aid, by following out the regimental directions which we were about to give, all of which would bear upon carrying out one great principle. All this would be really *simple*, but not according to the nomenclature of "Young Physic," which evidently intends to avoid *combination* in medicine. Nothing can be more erroneous; and it would be a mere waste of time and paper to prove that the efficacy of medicine is enhanced by judicious combination,—not by the juxta position of incompatibles, but by throwing together agencies, which will all tend by various routes to the same result.

V. (7.) We are disposed to think the exertions of "Young Physic" in the department of hygiene far more limited than our author believes. We agree with him as to the truth of the trite proverb, that prevention is better than cure, and that he who succeeds in limiting the incursions of malady, achieves for himself a far higher honour than he who assists and directs nature in her efforts to control malady. But we are very sceptical as to the power which the medical philosopher possesses of effecting any great good in this way. Take for instance one ruthless malady, phthisis,—all our epidemical visitations,—all our specific diseases,—and what power do we possess of preventing them by any exertions of hygiene. Why are they present at one time and not at another? And how is it that when

present we seem to possess few means for preventing their extension, beyond the ordinary qualification of susceptibility and non-susceptibility? Even with ague, we may drain marshes, and we may seem to gather to ourselves the laurels of victory over disease; and yet even here I would ask, how is it that a few years ago ague was prevalent over the entire country, and in districts where it was never known before? How is it that in an undrained portion of my own neighbourhood, where formerly ague was exceedingly rife, and scarcely ever absent, not a case of ague has been known for many years? Again, what means have we of preventing fever, where famine and destitution have been the promoting causes? And finally, what power do we possess of exerting such an hygienic influence over our patients in health, as shall induce them to be careful, and attend to its preservation? We would not undervalue hygiene; let it have its proper place, let it be diligently studied, but do not suffer it to supersede its more manageable neighbour, medicine, judiciously directed to the relief of disordered function.

VI. (8 and 9.) We quite agree with our author that much good may be done by abandoning the heroic method of treatment, provided that it be not supplanted by that system of negative expectancy,—the mischievous arrangements of the “do-nothing” school, which will ever prove a refuge for the idle and the unthinking. Man will gladly do any thing rather than think, and any system which encourages his *inertia*, must be fatally injurious. Nevertheless we think, that by careful attention he will find the same effects are to be produced by milder means, as by vaunted calomel and heroics, and that by throwing his mind into their active employment, he can do much good to his patient. The promotion of this end is to be accomplished by his better acquaintance with foreign medical literature. But here again is a great difficulty: the language is not sufficiently known in general to be read and studied with comfort, and if so, every possible advantage is gone. This difficulty may indeed be obviated by a more enlarged attention to preliminary education; yet it must be confessed, that the knowledge of living languages acquired at school is generally most inadequate for practical purposes. While then we ask to abate the recklessness of fool-hardy prescriptions, let us also strive to stem the sluggish stream of equally criminal inertness, and strenuously at least attempt to steer “with steady helm, and well-bent sail,” between these two great evils. So with regard to the specific diseases, we had thought that it was an established axiom, not to attempt to interrupt their progress, but merely to watch their advancement, to moderate nature’s action where it was excessive, and to remedy the evils of any organ or function which may happen to become disturbed in their course. But what a wide field does this open for judicious interference, while it affords no room for negligence, or indolence, or apathy.

VII. (10 and 11.) We agree with the objects to be placed before the mental vision of “Young Physic” in so far as regards the spirit of the former *agendum*. We believe that mischief perpetually arises from administering powerful remedies in large doses; we believe

that irreparable evils accrue from the *uncalled for* exhibition of purgatives; and that much injury is occasioned by this perturbing system, by this thoughtless administration of drastic poisons, which are not converted into valuable remedies by the mere *Æsculapian* touch; and we quite think that much reform is needed, especially in this department of medicine. But we must enter our solemn protest against the administration of feeble or powerless remedies prescribed *pro forma*, for the satisfaction of the patient’s mind. Prescribe honestly, or not at all; if there be an indication to accomplish, pursue it, and if not, give nothing; tell the patient honestly that he requires nothing, or that you are ignorant of what is good for him, or that you are too indolent to think of what might be useful; and let him then judge whether he would like to cast himself upon the tender mercies of such *vis inertiae*, or whether he would prefer placing himself under the care of somebody less given to slumber in guilty apathy over the sorrows and the sufferings of mankind, and better disposed to adopt the motto, “*Inveniam viam aut faciam*.”

VIII. We agree that a “very elegant prescriber is seldom a great physician,” and for the most obvious reason—he thinks very little of the good of his patient, but simply what will please his palate and amuse his mind; therefore it is that the patron of inertness becomes the elegant prescriber, because he grasps the shadow and throws away the substance. There are great errors in the present day, and in the present style of prescription; and much as we abhor the system of being paid for medicine,—much as we think it odious and intolerable, there are advantages even in this system which are forfeited by others. The honest practitioner is only anxious for the good of his patient, and selects the best medicines careless of their cost, because (if you please,) it is his interest to do so; while should he prescribe, and send his prescription to a druggist, who lives from the profit he can make upon his drugs, and who cares not how adulterated may be the medicines, because he has no interest in their effect, why the whole thing proceeds badly. And again, it is the fashion with many physicians of the present day, to prescribe medicine in a very concentrated form, of which a few drops, or a teaspoonful is to be taken in water or some simple vehicle. No accuracy can be obtained in this way, while teaspoons and tablespoons differ exceedingly in their size,—while one patient fills his quantity by a different measure from another,—while one takes a quantity of water and another a very little,—and while one drops for himself, and another trusts this agency to a friend. From this latter I have known death produced by a blunder made in the careless exhibition of prussic acid in drops.

IX. (13.) One word upon *mercury*! We believe that the use of this remedy is often inordinate—often misplaced—often mischievous. We have been saturated *usque ad nauseam*, by the public and by medical consultants, with the reference of every form of gastric and intestinal malady to bilious derangement; and that too, as a direct consequence of some primary irritation of the liver. We have been grieved with the

eternal and mischief-making prescription of calomel, and blue pill, and grey powder, for ever and aye, upon occasions where mercury in every form should have been religiously withheld; and we believe that the occasions for its exhibition are really *rare*. But we fully believe that when these occasions present themselves, no other medicine can advantageously and thoroughly supply the place of mercury judiciously administered. The fault is not in the remedy: it consists in the fact that its great curative powers have been demonstrated, and then by those who have little experience, or little thought, or little reason, it has been given without discrimination. The evil therefore consists in the mode of its administration; and the just method will not be learned by the advocates of the do-nothing system. Let us here again mention the great value of foreign medical literature on the subject of diseases of the liver, and their treatment without mercury.

X. (14.) But we cannot go with our author in his contrast between the "natural system of curing diseases, in contra-distinction to the pharmaceutical, or empirical drug plan, generally prevalent." We are quite willing to admit that in general we may be too little attentive to diet, regimen, &c., and that medicine loses much of its power by being deprived of the aid thus afforded. But we must deny the terms of the proposition—a very strict regimen for an omnivorous animal is equally repugnant to nature as the exhibition of medicine; there is just as much physiological license in the prescription of appropriate medicine, as of appropriate diet; a certain effect is to be produced upon the system,—slowly by diet, more rapidly by medicine; more securely, more thoroughly, more certainly, by diet and medicine combined. Hence, however, it will follow, that there will be just as much *empiricism* in the diet as in the medicine: the same effect is to be produced. If, then, medicine or diet be prescribed upon just *principles*, there is no empiricism in either; if they are prescribed without sufficient reason, and a sufficient knowledge of the object to be accomplished, then both are prescribed empirically. In fact the object of both is the same,—both are prescribed medicinally; if the one be required, so is the other; if the one be useful, so is the other; if the one be exhibited without sufficient thought, so is the other, and both are valueless. But the attempt to supplant medicine by diet, is to supersede the greater by the less, the prime agent by the adjuvant, to trifle with science, to discard its advantages, to despise its offers of mercy, and therefore "hygienic, regimenal, and external means" are to be rendered *subservient* to medicine; and in the order of nature and of society, the servant is not to change places with his master.

XI. We quite agree with Dr. Forbes in his suggestions (15. 16. 17.) for the promotion of professional science, and for taking enlarged views of malady, and for not treating disease by a name, but by looking especially after all the organs and functions of the body which may be disordered by its presence; but we cannot do so in his view of the necessity (18.) of "endeavouring to enlighten the public as to the actual powers of medicines, with a view to reconciling them

to simpler and milder plans of treatment." We would make no secret of physic, at least, with the better informed part of the community who could understand our explanations; we would form our own opinions upon the existence of disorder, and we would give the reasons for that opinion, and the objects which we proposed in the treatment, and the way in which medicine and diet were to be brought to bear upon the fulfilment of these indications; and we would be prepared to answer honestly any questions which might be propounded. But to discuss the powers of the medicine we proposed to give, or to give a name to the disorder we were called to treat, we would carefully avoid, because we should only furnish our patient with materials for consulting various works of popular medicine or encyclopædias as soon as we had gone; we should have set their minds afloat; we should have destroyed their confidence in the plans prescribed by the very means which are so deprecated in practical medicine by the blight of *insufficient knowledge*; the natural effect of medicine would be impaired, and our object would be lost. This is not a theoretical opinion, but one which has been formed by painfully purchased experience, and we are quite sure that while we would treat our patients as men of sense, if we value their well-being and desire their recovery, we must not attempt to make them physicians. Much evil perpetually results from carrying our explanations even too far, or from endeavouring to force them into a mental calibre incapable of receiving them.

We thoroughly approve of endeavouring to impress upon patients the necessity for the treatment of disease in its earliest stages, but we submit that this recommendation is in direct opposition to that natural history of disease, which it is the primary object of our author to inculcate. Treat disorder early, ere yet habit shall have established it in the system of constitutional actions, or organic changes shall have taken place in the tissues, and the result will generally be successful; but leave disorder to develop its natural history, structural disease will be the consequence, and in vain will any treatment be adopted.

Most devoutly do we wish for the day, when all medical practitioners shall be paid for their time and talents, and not by the amount of medicine which has been exhibited; but this object is not easy of accomplishment with a large proportion of the community. In our own circle, with a certain class of patients, the payment by visits has been cheerfully and willingly adopted; and after a long series of years, we find that these patients have taken by far the most medicine, for two obvious reasons; first, that *they* knowing they did not pay for their *medicine*, took it unhesitatingly as prescribed; and, secondly, that *we* have felt no scruples in sending them as much as we thought desirable for them, and were not always seeking to spare their pockets. But with another large class of patients we have found it impossible to establish a payment for visits; they have fancied themselves imposed upon;—that visits were made for the sake of making a charge;—that they had not their *quid pro quo*, if medicine were sent in a concentrated form;—and that in fact

nothing would do but the old payment of so much per bottle. We have already stated our reasons for wishing that the present system may continue, not for own sake, but for the health and welfare of her Majesty's lieges.

And now we turn to a few observations of what strikes us as at this time especially wanting in the profession. Were we to take up this subject as it ought to be treated, in all its length and breadth, we should write a volume instead of an article; we shall content ourselves with a rapid glance at only a few particulars.

With regard to futurity, the great panacea to be recommended is enlarged preliminary education,—not simply relating to that which is professional,—not simply relating to that which is necessary to constitute the gentleman,—but by a happy combination of the two, to form at once the gentleman, and the medical man;—to teach him to *think*, to *reason*, and to *read*. In order to accomplish these objects, he must make a certain proficiency in mathematical study, and he must be acquainted not merely with the dead, but especially with the living, languages,—above all, with French and German; and these not learned as school-taught,—to translate miserably with the aid of a Dictionary,—but to read and understand thoroughly without adventitious aid. It is absurd to expect man to reason correctly, if he has never been taught the use of reason; it is absurd for him to talk of being acquainted with his profession, if he be not thoroughly imbued with an intimate knowledge of French and German. Nothing more shrivels and contracts the mind into the narrowest selfishness, than the impression that knowledge is to be found only within the circle of its own country.

Second only to this grievous mischief is that want of exertion, and of intellectual expansion, which confines professional reading almost exclusively to the *Journals* of the day. We have the highest possible respect for many of these *Journals*, and we believe them capable of much usefulness, but we also believe them effective of much evil, where they are taken as substitutes for more laborious research; as if the digested food of certain individuals could afford a proper supply of nourishment, if removed into the stomach of another. We look with much jealousy upon all these *Journals* and *Retrospects*, because they form a royal road to knowledge, and are to spare the trouble of research, and take the place of individual study. By means of these fugitive papers, prejudices may be sown, but opinions are not formed; the reasoning powers are never called into exercise, and a reference to a retrospect takes the place of research, and of really deep abiding thought. Tell me not that persons in actual practice have no time for reading; they have time enough if they will make it; what is wanting is inclination. After a weary day, a nap of fifteen or twenty minutes, and a dish of tea, will enable the brain to pursue its studies for hours, and almost every man may obtain time for study, if he will systematically improve it. But if he gossip all the morning,—if he return home to dinner and subsequent siesta of two hours,—and leave work to be done late in the day,—then, indeed, he may not

have time. But this arises from his own thriftless expenditure. We repeat it,—everybody has time for study if he will diligently improve the passing hours, and if he will redeem some portion of that time which is now devoted to little domestic luxuries, and to a larger allowance of sleep than is absolutely required. It may be said that the rule is too stringent, and that the common comforts of life are interfered with. Agreed: so it is; the life of a medical man must be a life of self-denial. But what are these little animal enjoyments when compared with the life and health of the poorest, and the meanest, and the most obscure of the family of man; what are they when contrasted with the unspeakable luxury of ministering to the wants, and weaknesses, and the infirmities of our fellow creatures? Who can estimate the delight which fills and animates the bosom of the medical attendant when he sees his plans succeed, and witnesses the gradual restoration to health and comfort of some valuable life, over which he has watched with intense anxiety. And although, under these circumstances, he may too frequently be assailed by ingratitude,—even then, he can fall back upon the consciousness of his own deservings, instead of that remorseful upbraiding which ought always to rest upon the heart of him who has not done his utmost to enlarge the boundaries of his knowledge, and to perfect the means for its application.

(To be continued.)

ON THE NON-ABSORPTION OF NARCOTIC POISONS BY THE LYMPHATICS.

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Before the discovery of lymphatic vessels, the power of absorbing was attributed solely to the veins; after this discovery solely to the lymphatics. Further investigation showed that absorption is effected through the agency of both systems of vessels, but that lymphatics absorb more slowly than veins, and that some substances are not taken up at all by them.

Thus the extended observations of Tiedemann and Gmelin led these authors to conclude that lymphatic vessels readily take up saline, but reject colouring matters—a conclusion which has been generally accepted by physiologists.

The later researches of Herbst (a) have shown that the absorbing power of the lymphatics is by no means so limited as has been commonly supposed, but that almost all soluble bodies may be conveyed into the system by these vessels. This is proved by careful experiment for alkaline and metallic salts, starch, colouring and odorous matters. There is, however, one class of bodies—those poisons which act on the brain and spinal system, and which are usually included under the term "narcotics," of which it is proved by

(a) Das Lymphgefäßsystem und seine Verhältnisse, Götting, 1854.