HILL, R., Esq., Worcester.
 HILL, H., Esq., Worcester.
 HORTON, J., Esq., Bromsgrove.
 HALL, W., Esq., Lancaster.
 JOHNSON, H., M.D., Shrewsbury.
 LINGEN, C., M.D., Hereford.
 MARSHALL, G. H., Esq., Kington.
 NANKIVELL, C. B., M.D., Torquay.
 NORRIS, W., M.D., Stourbridge.
 PRICE, Dr., Monmouth.
 PENNELL, R. L., M.D., Exeter.
 POPE, T., Esq., Cleobury-Mortimer.
 REID, J., Esq., Canterbury.
 RAY, G., Esq., Milton.
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 SHARLOCK, M., Esq., Ensham.
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 TUNSTALL, J., M.D., Bath.
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 WALKER, E. D., M.D., Teignmouth.
 WOODWARD, J., Esq., Worcester.
 WILTON, J. W., Esq., Gloucester.

Worcester, 1850.

ON THE PROTECTIVE POWER OF VACCINATION.

By THOMAS HUNT, Esq., LONDON.

Read before the Annual Meeting of the South-Eastern Branch.

A CORRESPONDENCE on this subject having recently occupied the pages of the *Journal*, I take the opportunity afforded by this meeting to inquire of the members present how far their experience would lead to the conclusion that septennial revaccination is requisite to ensure protection from the small-pox for life. And, by way of provoking discussion, I beg to lay before the meeting certain considerations which appear to me to militate strongly against the necessity of revaccination; premising, that in cases where it is doubtful whether the patient has ever really had the genuine vaccine disease, there cannot be any objection to test the validity of a former vaccination by an introduction of pure, fresh, fluid vaccine lymph into the arm. But I maintain that, as a general rule, a patient cannot have the disease called cow-pox more than once; and that, therefore, septennial vaccination, or even revaccination is not only needless but actually impossible. It is not probable that the real source of difficulty, as well as of difference of opinion, is to be found in the extensive circulation of a deteriorated lymph, which produces in many patients, though not in all, a spurious vesicle? In what other way are we to account for certain facts apparently contradictory, but by supposing the existence of a lymph, imperfect in character, which has the power of communicating to one individual the genuine vaccine disease, and to another a spurious form of vaccinia

which may be followed by a modified variola? That this or any other vaccine influence should become protective for seven, fourteen, or twenty-one years, and then leave the subject exposed to the contagion of small-pox until he is revaccinated, is a modern doctrine, opposed to all the analogies of pathology; and, as far as I know, wholly unsupported by facts. It is on this point that I appeal on this occasion to the experience of my brethren. Not only the immortal Jenner himself, but Willan and Bateman, men, whose respective names will be scarcely less known to posterity than his own, were singularly enough agreed in opinion as to the nature of the cow-pox, the appearance and progress of its vesicle, and its permanent protective power. And the facts which are to overturn the opinions of such men ought to be numerous and weighty indeed. And it must be remembered that the Jennerian side of the question, from its very nature, cannot be indebted to positive facts for its support. It consists of a negative proposition, and it derives its whole support from a negative source. Dr. Jenner challenged the world to show him a case of small-pox after vaccination. He minutely described the true vaccine vesicle, and cautioned his brethren against mistaking it for a spurious form of the disease. His sagacity enabled him to perceive by analogy what has since been proved abundantly by experiment, that the cow-pox *is* the small-pox in the cow—that the small-pox can be transferred from the human being to the cow, and from the cow to the human being without losing its specific properties, without suffering deterioration, without any change but being freed from its virulence and danger; and that therefore it ought to protect for life: and it did so. At the end of the sixteenth year from the promulgation of Jenner's discovery a very few cases of spurious small-pox after vaccination had attracted the notice of the profession, and none of these were true small-pox. To this hour there are few medical men, *if any*, who have ever *seen* the two diseases both well marked, genuine in appearance, and regular in course in one and the same person; and, unquestionably it is just as easy to meet with a practitioner who has seen the small-pox *after* the small-pox, as to find one who has seen the small-pox after the cow-pox. Moreover, there was a time when the success of vaccination was absolutely triumphant. I allude to the period from 1810 to 1820. Any medical man who at that time had been bold enough to question, before such a meeting as this, the permanent protective power of vaccination would have shared the fate which Jenner suffered when he first pronounced his discovery to the Medical Society of London. In a large medical practice in Hertfordshire, embracing the majority of the population of thirty square miles, only one case of small-pox occurred in seven years—from 1812 to 1819, and that *not* after vaccination. At that time medical men only vaccinated. The operation was never performed gratuitously, or cheaply. No zealous clergyman nor benevolent ladies, much less nurses nor midwives, had then presumed to introduce an animal poison into the human system, and to sit in judgment over its results. The diagnosis

of the true vaccine vesicle was then considered one of the most delicate and difficult problems in medicine. Jenner's diagnostic signs of its appearance, progress, termination, and cicatrix was the first lesson which the apothecary of that day gave to his pupil, for him to commit to memory. But Jenner's descriptions soon began to be thought over nice: another test was introduced, more simple and more easy; revaccination was proposed, and the result supposed, I think erroneously, to prove the safety of the subject: and now, if twenty medical men were asked to define the genuine vaccine vesicle, twenty different descriptions would probably be given, and as many distinctions between the true and the spurious.

We proudly boast that our own day is one of discovery and improvement; but I strongly suspect that in the art and science of vaccination we have been retrograding ever since the days of Jenner. When the whole profession sat at the feet of that man, the small-pox fled at their bidding, and, if we would again rout the enemy, we must go back to our teacher, and sit at his feet again. We must study the works of Jenner, Willan, and Bateman, and follow the steps of Dr. Walker, who vaccinated with his own hands half a million of human beings, and pronounced them all secure for life, challenging the mothers to convict him of falsehood if his words did not prove to be true. And after being engaged in vaccinating for thirty years he saw but two cases of small-pox after vaccination, and these, he says, beyond doubt, were two lives saved: for they only out of two large families were vaccinated, and the rest all perished with the disease.

Now then, let us look at the facts.

1. As Jenner predicted so it happened; the small-pox, regarded as a pest and an epidemic, was once banished from our shores by vaccination.

2. At that time due regard was paid to the character of the vesicle.

3. A vesicle, described by Jenner and Willan as spurious, is now very commonly pronounced as genuine.

4. Many patients, having this spurious vesicle, have the small-pox after it.

5. This spurious form protects some persons and even originates in others a genuine vesicle.

6. In others it may be reproduced again and again from the genuine vesicle.

7. The vesicle may become spurious from various causes often overlooked.

They are as follows:—

1. Vaccination, from a spurious vesicle, commonly gives rise to a spurious vesicle.

2. If the matter be taken after the eighth day, the vesicle will be spurious.

3. If taken before the eighth day, but if turbid or purulent, the same effect will be produced.

4. If the lancet be dirty or rusty.

5. If the matter be kept too long.

6. If the dried matter be applied too much diluted.

7. If the patient be out of health, or especially if he be subject to chronic cutaneous disease.

8. If he be previously exposed to the contagion of

small-pox, or any other eruptive fever, so as to have taken the contagion previously.

9. An inaptitude to be affected may arise from constitutional causes.

10. Previous vaccination often prevents the patient receiving again the genuine disease, but does not always prevent a spurious form of it.

In conclusion, I repeat that my object in throwing these observations together is to elicit discussion and information; and if I succeed in provoking the expression of opinions differing from my own, and, at the same time, the relation of facts or reasons justifying those opinions, I shall feel myself not only corrected, but grateful for the correction. I presume not to dogmatise on a subject which I confess I do not understand; but I ask especially, whether the members present have not seen cases in which a genuine vesicle has produced a spurious vesicle, and *vice versa*, an apparently spurious vesicle has originated a genuine vesicle, which has run its course and protected the individual.

I much suspect that there is a spurious form of the disease which will protect one person and not another, and that there is a genuine cow-pox which will protect every subject; and that this theory will account for all the diversity of opinion existing in the profession.

CASE OF

OBLIQUE STRANGULATED HERNIA, WITH REMARKS. •

By ARTHUR MATTHEWS, Esq., ROBERTSBRIDGE.

ON the night of the 11th instant my assistant was called up in my absence to visit W. M., aged 41, of rather spare habit, and found him suffering from the usual symptoms of strangulated hernia, but was somewhat puzzled in the diagnosis, in consequence of the unusual symptoms present, and the mildness of those generally met with in these cases. Vomiting and eructations were slight, pulse about 50, pain in the diaphragm rather severe. The patient complained of a swelling in the groin, which upon examination was found to be very sensitive to the touch, oblong, and extending downwards and inwards, but instead of its being elastic, it had more the consistence of cartilage. My assistant had him placed in a warm bath immediately, and administered Tinct. Opii, m. xxx., with Vin. Ant. Pot. Tart. and Mist. Camph.; and whilst in the bath employed the taxis, which caused extreme pain, without producing any beneficial results. He was then bled to three pints, after which he vomited. Upon my arrival I found the tumour much the same, but more sensitive to the touch, which forbade the further use of the taxis. I gave him another draught of Tinctura Opii, which was repeated in an hour, and a cold lotion applied to the part. My assistant visited him at nine o'clock in the morning and