mentioned that decadence which invariably occurs after a while of the tissues of the fibrous sac in my last communication, and lately whilst satisfying myself on the correctness of some of the above remarks, I had several beautiful specimens of degenerating acephalocysts. The acephalocyst does not appear to suffer any structural change until long after the deposition of that exudation matter within the vessels and tissues of the external fibrous sac, which has been accounted for in the last paper. It is necessary to recollect that the acephalocyst consists of numerous concentric layers, each of which is in close apposition with a layer on either side. In the healthy acephalocyst the layers are in most perfect contact, no fluid even exists between them, but as the supply of nutrient fluids is cut off by the structural changes in the external fibrous sac, so do we notice in many places slight granular deposits between the laminæ. Now these deposits have, as a rule, this peculiarity: they occur between successive laminæ, and each is in the line of a radius, or of an imaginary line, drawn from the most external laminæ to the centre of the acephalocyst, consequently the line of deposit is at right angles to the direction of the laminæ. Generally speaking not more than twenty interlaminar spaces become affected in one of these lines; the deposit is small in the most external interlaminar space, larger in the next, and increases in successive spaces till the tenth or twelfth, when it decreases gradually to the twentieth. These deposits soon undergo a change highly refractile, globules become evident, and after a while the whole mass becomes hard, occasionally crystalline, and destroys, by pressure, the portion of lamina in its immediate neighbourhood. After a while the linear series of deposits is no longer broken by intervening portions of laminæ, but is in perfect continuity, the integrity of the acephalocyst is suffering, and ere long perforation ensues, the fluid escapes, and comes in contact with the fibrous sac, and suppurative inflammation is a natural result. Occasionally the interlaminar deposit is confined to one interlaminar space, and when such is the case it frequently crosses the track of one of the before-mentioned linear series, a crucial mass results. Having thus noticed the generation, development, and decadence of hydatids, the next paper will include the symptoms, diagnosis, prognosis, and treatment of the disease in the various organs usually affected.

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WHAT OUR ASSOCIATION MIGHT DO.

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AN abuse to which people choose to submit cannot be put down. It will die only from inanition, when its

supporters one by one have dropped off. It is, therefore, quite out of our power to put down any form of quackery; but it is quite in our power to draw the line of demarcation between it and medicine so plainly as to deprive it of all countenance from established truth. Let it stand alone. At our last annual meeting, the Association spoke out strongly and well against the prevalent quackery of the day; but through its individual members it might do much more than this. Observe the anxiety of all quacks to be considered as part of the medical profession. The lower grades—for there are gradations in this—filch the names of our men of eminence; the less vulgar seek our titles; would fain be on terms of professional intimacy; are delighted when an established practitioner will meet them in consultation; send their patients to authorities on a given speciality "for a diagnosis," as one might send an unmanageable horse to be broken in for his own bestriding; in short, they seek to obtain both the profit of the charlatan and the position of the honourable professional man. Let them seek to combine these incompatibles; but let not us assist them in the search. The public are taught to speak of the New System of medicine. They are not aware, as we are, that homœopathy is no *system* of anything, nor that it has no connexion with medicine at all. How should they, so long as we speak of allopathy on the one hand, and of homœopathy on the other?—so long as our eminent men, both Physicians and Surgeons, coquet with homœopaths in high places, speak mincingly of homœopathy in society, and in no respect discountenance it?

There are two reasons why certain amongst us have done this injustice to themselves and to medicine. The first is the "*auri sacra fames*;" and that we may leave undiscussed. The second is, the assumed impolicy towards legitimate medicine of fanning homœopathy into greater notice by illtimed opposition. And this reason deserves consideration.

It is neither judicious nor dignified for a medical man to obtrude the subject of homœopathy upon his patients or in society, any more than the subject of pathology. Neither is it generally useful or becoming to make the public our court of appeal in any form. To decide a question of law, the public must apply to honest lawyers. If they act otherwise, they suffer. To decide a question of medicine, the public must apply to honest men who have made medical truths their special study. Law requires the diligent study of numerous and various facts, and the exercise of sound reason upon them. Medicine requires precisely the same. When a non-professional person has gone through the work, study, and reflection of the lawyer, he is a competent judge of law, not before. When a non-professional person has gone through the work, study, and reflection of a medical man, then, and not until then, is he a competent judge of medicine. We forget all this practically, when we appeal to the mind of the public by discussing medical theories with or before them. It is for the public to inquire from us what in our profession is true and trustworthy. They will respect our opinion so

soon as we are unanimous in respecting it ourselves. They respect a legal opinion. The law is one—or is supposed to be—and an appeal to the *litera scripta* is decisive. Our *litera scripta* is Nature; a book more difficult to read correctly, unintelligible to the many in proportion to its difficulty, but unexceptionable and all true when it is read. Every special chapter is sealed to all but the special student, and the amount of the ignorance of others concerning its contents, must be unknown to every one but him. It is quite impossible, therefore, for unprofessional people to realize their own utter ignorance of medicine, and consequent incapability of arriving at a just conclusion on theoretical medical questions. The loosest analogy is enough to mislead them. They are asked why doubt the power given by rubbing to a decillionth of mercury, when you see the power of friction to elicit electricity? Or, why question the efficacy of infinitesimal particles of matter, when mental emotion, which is no matter at all, can shock or kill? Or, why deny the transmuting efficiency of the minutest particle of medicine over the condition of the blood in therapeutics, when an inappreciable quantity of contagious matter can derange the entire economy? And what answer have they ready? Ignorant of the facts in point, but acquainted with those which erroneously seem to appertain;—ignorant of the laws of physiology of either body or mind;—unaccustomed to weigh evidence in scientific questions in the same scales which they employ in the routine of life, the only scales they or any one ought to use;—bewildered by the charm of mystification, and pleased with the newness of ideas, so fresh and strange, non-professional persons may be smitten with the theory, or the several theories of homœopathy, without any grave disparagement to either their character or their judgment. It is not, then, to them we can with advantage expose the fallacies of homœopathy in theory. But shall we, therefore, pass by a question honestly asked, in silence, or worse? Shall we answer with a yea, yea, or nay, nay, when asked our opinion on the subject? If we do so, can we wonder that the public suppose homœopathy to be really medicine, but in a new and improved dress? and suppose, moreover, that we ourselves are really of that opinion but will not own it? We should avoid the possibility of this mistake. We cannot, it is true, say anything that will convince the impressionable, who have seldom any convictions upon anything; or the prejudiced, who rejoice in their bigotry; but we can clear ourselves from all suspicion of agreeing in their views. We can, without using uncourteous language, render it quite clear that we are obliged to consider all homœopaths as a distinct class, having nothing with us in common; that whilst we can make no reflection on a non-professional person for espousing homœopathy, we can find no excuse for a professional one. A student to whom the truths of medicine have been disclosed, cannot shut his eyes to them except wilfully. Either, then, a homœopathist has never gone through the labour required to learn these truths, or else he wilfully ignores them. Upon ascertained facts there can be no difference of opinion. No one disputes that

a pound of black paint will make a certain extent of surface black. If then, some one declares that a decillionth of a grain of black paint will make the same extent of surface *black*er than the entire pound, we consider either that he is ignorant of all the truths connected with the subject, or that he is unable to appreciate truth when he has it; or that he has something to gain by differing with his Fellows and with experience. Especially when the apple of his new tree of knowledge is a gilt one; when his espousal of what others reject happens to be fashionable and profitable, we are usually right in concluding that of the common two-horned dilemma which suggests itself, such an one is not the fool.

If we cannot, without much self-restraint, discuss calmly and seriously amongst ourselves the theories of homœopathy, any more than we could calmly discuss maniacal illusions if presented to us as scientific doctrines, it is still more trying to discuss them with non-professional persons. Probably it is never useful, and therefore seldom desirable to do so. A simple denial of all credence in them, and of their analogy to any real facts in physics or physiology, which is the plausible ground of reasonableness generally put forward, is all that is necessary. But the main point in consideration is—the facts. Ask a homœopathist to furnish one *fact* capable of being proved to an unbeliever. Ask him to do by homœopathy anything that is visible;—to clear away the lymph in syphilitic iritis, as medical treatment will clear it away;—to remove purulent ophthalmia;—cure a varicose ulcer, stop a phagedænic one;—cure severe ague, or severe delirium tremens, or congestive apoplexy, as completely and as soon as medical treatment can;—or, at all sooner or more effectually than nature, favoured by hygiene, but unaided by medicine, does. Homœopathists keep the visible in the back ground.

In like manner, when a patient mentions having heard that Dr. Globularius has cured ninety cases of croup, without losing one, in the course of the winter, in a locality where the disease is rarely to be met with at all; or, has succeeded in preventing scarlatina in all of the families he attends (who have escaped the epidemic); or has “stopped” typhus fever from pursuing its course in eighty-six cases in three months; it may be well to explain to the narrator why these statements cannot by possibility be correct.

In the proper way, and at the suitable opportunity, every member of our Association might say a word in season in regard to homœopathy. To fear the impolicy of so doing, is to doubt the prerogative of truth. She will support us, if we never fail to maintain her.

There are some homœopathic practitioners who avow their disbelief in the infinitesimal doses, but adopt the name of homœopathist because they see some truth in the doctrine of “*similia similibus curantur*.” And, apart from the rest, this doctrine, when used with considerable latitude of meaning, is in many instances true enough. In chronic diseases we habitually select as remedies those drugs which specially act upon the diseased organ, and which, by so acting, induce in it some

manifest departure from its ordinary condition. As a result of this alternative influence, the organ will sometimes cease to pursue its morbid mode of nutrition, and by degrees will regain its normal one; in other words it will be restored to health. Now, as all such alternative remedies are abnormal stimuli to the organs on which they act by preference, we should expect to perceive when they have been administered for a sufficient period to a person in health, some departure from normal nutrition in the particular organs in question. And so it is. Mercury, for instance, in a healthy person, will often *produce* a cutaneous eruption. And mercury will *cure* many varieties of cutaneous eruption. The same holds good of iodine, sulphur, and arsenic. Here, then, the remedy will remove in disease that, which in health it will produce. So far we have an illustration of *similia similibus*. But this knowledge is as old, at least, as Paracelsus—who was in some respects, intellect excepted, a very fit representative of Hahnemann—and is and has been constantly acted upon by honourable medical men. A man needs not to become a homœopathist in order to believe and practise this. Is this, then, all that *similia similibus* signifies in the jargon of the craft? It is all that can be proved to be true.

Does mercury occasion precisely those forms of cutaneous diseases which it can cure? By no means. If it did it would produce almost the entire catalogue. Can it produce psoriasis gyrata, or herpes circinnatus? To remove chronic diseases of the skin, remedies are useful which act upon the nutrition of the skin. If they can do this in disease, they can do the same in health; and in health they will manifest their action by *some kind* of outward sign—some kind of blush or eruption. But these same remedies will cure *many other kinds* of eruption than the one they give rise to in a healthy person. Hence, the expression *similia similibus* is a very loose one, even when applied to its pattern-examples. But whether precise or vague in its signification, to how few of the facts of therapeutics is the expression applicable at all. The homœopathists make it the one ruling principle of all their treatment (we mean they *profess* to do so) of all diseases. When congestion of the brain is relieved by purging, plethora by abstraction of blood, iritis by the action of mercury, or when hæmorrhage is checked by turpentine, flux by acetate of lead, is there any resemblance whatever between the effects which the remedies can produce in health and do produce now, and the morbid conditions which they remove? To deny the facts would falsify experience; to ascribe them to the principle of *similia similibus*, or to *any other one single principle* would be to stultify the judgment.

An universal doctrine in therapeutics that shall be applicable, without exception, to all diseases, is a sheer impossibility. A law can only be universal in its strict application so long as its subject consists of two elements, and no longer; any third element introduces exceptions which neutralize the law. Thus the law of gravitation is unmodified only so long as matter in a passive condition and space, are the constituent elements

of the problem. Add a third element in the shape of force, such as heat, elasticity, &c., and the influence of gravitation is modified, opposed, and, it may be, virtually overcome. If this be so, that a law is only conditionally universal in respect of inanimate matter, how much more certainly will the more complex and numerous elements of a living system preclude the possibility of expressing the sum of their operations in any one form of words. And what is a general principle, a doctrine or law of nature, but the expression of the essential truths of the subject in the fewest words.

Does *similia similibus curantur*, if we admit its truth in a vague sense in regard to some of the facts of therapeutics, explain *all*, or even *most*, of the ascertained truths of the practice of medicine? Not a tithe of them. It cannot then be an universal principle of medicine. So far as it is true, it is old and constantly carried into effect. The man who adopts homœopathy, *minus* its infinitesimals, for the purpose of practising according to this tenet of *similia similibus*, does so practise only where he would have done it before. He treats the great bulk of his cases by the means which experience has sanctioned, whether they agree with his principle (medical) or not. He chooses to assume that all such successful treatment accords with his adopted doctrine; but he knows that he cannot prove it. Does he ever believe it? Would he believe any doctrine in science which could bring no profit with it on similar evidence? If not, the adoption by him of the name of homœopathist can proceed only from contemptible motives. Let every such renegade be held by every member of our Association in the contempt he merits.

There are two occasions on which we provincial practitioners may, with propriety, exercise whatever influence we possess in giving patients a proper bias. In recommending a medical attendant during an occasional residence in town, we ought scrupulously to avoid suggesting the names of all who have coquetted with the homœopathists. Let us, as far as possible, dissuade patients, if so inclined, from consulting these men, and refer them to others who have always maintained what is due to their own position and to their profession. There can be no difficulty in learning of the magnates in our profession "Who is who, in 1851?" The *Lancet* will, doubtless, supply those who require it with a list for their guidance and avoidance.

Secondly, in cases where more than domestic hydrophobia is suitable, desirable, and desired by the patient, we may generally prevent him from applying to establishments kept as water-hospitals by omnivorous dealers in homœopathy, mesmerism, and cold water. But on this, and on several other points touched upon in these papers, little needs to be added to the admirable remarks on "Orthodox Medicine," published at page 393 of this journal.