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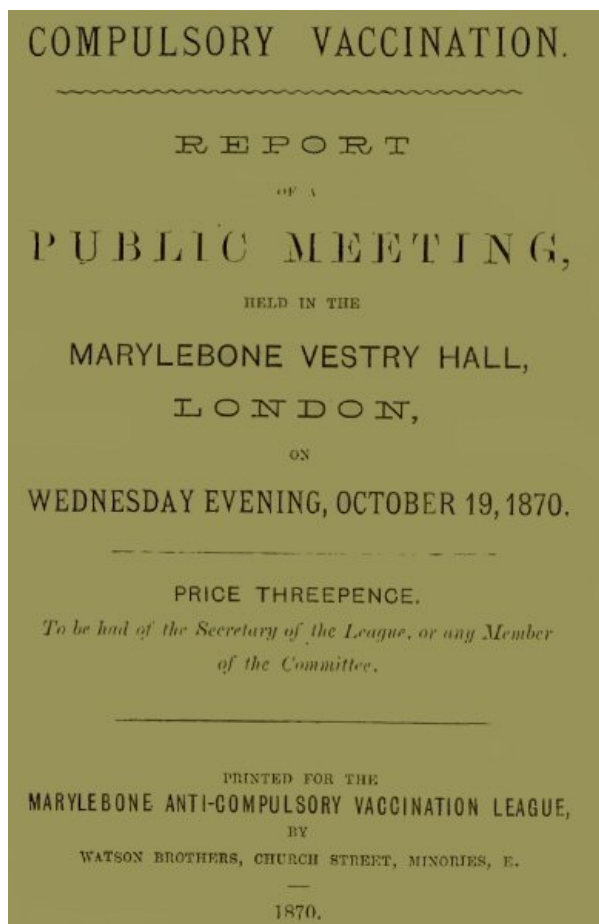
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COMPULSORY VACCINATION.

REPORT
OF A
PUBLIC MEETING,
HELD IN THE
MARYLEBONE VESTRY HALL,
LONDON,
ON
WEDNESDAY EVENING, OCTOBER 19, 1870.

PRICE THREEPENCE.

*To be had of the Secretary of the League, or any Member
of the Committee.*

PRINTED FOR THE
MARYLEBONE ANTI-COMPULSORY VACCINATION LEAGUE,
BY
WATSON BROTHERS, CHURCH STREET, MINORIES, E.

1870.

**THE ST. MARYLEBONE
Anti-Compulsory Vaccination League,
FOUNDED 1869.**

p. 2

Executive Committee.	
J. CAPLIN, Esq., M.D., F.A.S.L.	A. J. DAYMAN, Esq.
C. T. PEARCE, Esq., M.D., M.R.C.S.	Mr. ROBERT COLE.
R. B. GIBBS, Esq.	Mr. AARON EMERY.
R. G. SNELL, Esq.	Mr. THOMAS HOBBS.
F. H. HALLAM, Esq.	Mr. GEORGE MARGERISON.

This League has been established with the following Objects:—

- 1.—To obtain the Repeal of the COMPULSORY Clause of the VACCINATION ACTS.
- 2.—To assist in defending Members, who may be prosecuted under that Act.

Tickets of Membership may be obtained for One Shilling of any Member of the Committee, by whom Donations and Subscriptions will be thankfully received.

Or of the Hon. Secretary,

Mr. G. MARGERISON,
5, BLANDFORD STREET, PORTMAN SQUARE, W.

REPORT.

p. 3

On Wednesday Evening, October 19th, 1870, a Public Meeting, convened at the requisition, numerously signed, of the ratepayers of Marylebone, was held in the Vestry Hall of that large Metropolitan Parish. The object of the Meeting, as announced by advertisement, was "to take into consideration the Acts of Parliament which render Vaccination Compulsory."

The chair was occupied by R. HALLAM, Esq. a Vestryman, who said, it was twelve months that day, since a meeting was held in that hall, for the purpose of inaugurating a Marylebone Branch of the Anti-Vaccination League. Some gentlemen of the medical profession, subsequently said that if they had been present, they could have upset all the arguments on the other side. The executive of the Marylebone Branch had very straightforwardly said, they would be happy to meet those professional gentlemen, and the public notice which the secretary would read, invited their presence. The notice having been read, the Chairman proceeded to say it must be apparent to all that they were not assembled there to make pecuniary profit. They did not come to receive vaccination fees, but to enter their protest against such an iniquity. The subject they were to discuss was one of the most important that could engage their attention. A great outcry had been raised about the unfortunate position they stood in with respect to infanticide and baby-farming; and Dr. Lankester, one of the coroners for Middlesex, had made himself very busy to have a check put upon those practices, but why did not the coroner reflect upon the enormous amount of infanticide caused by the point of the lancet? Could he be a conscientious man, when he carried his prejudice for vaccination into the coroner's court? He very much regretted that they had a medical coroner, and although he had voted for him at first, he would promise never to vote for another gentleman of the same profession. He then referred to the recent inquiry in St. Pancras, on the body of a child which died the day after it was vaccinated. The death was attributed to congestion of the lungs, but the iniquitous part of the proceedings was that the doctor who vaccinated performed the post-mortem examination. Referring to the general question, he said that under the vaccination system, even when small-pox was absent there was

p. 4

an equivalent disease present. Dr. Lankester himself, in a return he had furnished to the parish of St. James's, said that although they had no small-pox, they had its equivalent—scarlet fever—very bad. Dr. Lankester had also said that there were three small-pox cases in the hospital; one patient was unvaccinated, and two had been vaccinated. That order of things was not according to the promise of the vaccinators, who told them that vaccination was a preventative. Before calling on the speakers he would just say to the medical profession, that they desired a fair and impartial investigation. As an individual he was open to conviction, if any gentleman present could prove he was in the wrong, but as far as he at present saw, he should as much expect to see the sun shining in the middle of the night, as to be convinced of the utility of vaccination. If any medical gentlemen wished to speak and would hand up their names they should be heard.

Dr. Routh and Dr. Thompson (of the Brompton Hospital) sent up then cards.

Mr. Snell, on rising, said that the meeting was, no doubt, acquainted with the account of Do-the-boys Hall, in one of the works of the late Charles Dickens, in which an amusing description is given of the weekly administration of brimstone and treacle. The boy had to open his mouth and *nolens volens*, receive therein and swallow the spoonful. Now, said the speaker, we Englishmen are in a somewhat similar position; it is true we are not commanded to open our *mouths*, but our *veins*, to receive the poison of a diseased brute. Now the celebrated John Hunter, the great Anatomist and Physiologist said, "Any extraneous substance introduced into the blood modifies the vitalized or living fluid. The introduction of animal products from another living body, be it a man, a cow, or even the ass, is infinitely more pernicious because allied to it, being vitalized." He held, therefore, that government violated a natural law, besides one of the fundamental principles of the English constitution, when it enforced this odious compulsory vaccination, by depriving parents of their liberty—committing them to prison for refusing to contaminate their infants with the disease of a brute. The speaker then briefly called attention to the law of vicarious mortality, which had been so ably elucidated by Dr. Pearce, in his Essay on Vaccination, which proved that we had no control over the epidemic visitations of small-pox, or any other disease. With great pleasure, he moved the following resolution.

p. 5

"That the enforcement of the practice of so-called Vaccination, is an interference with the liberty of the subject, and injurious to the community, and that therefore, this meeting is of opinion that the Vaccination Acts ought to be repealed."

The resolution was seconded by Dr. McCoubrey, who called the attention of the meeting to the unconstitutional character of the Acts which enforced the practice of vaccination; giving power to magistrates to consign to prison, men and women, without trial by jury. He adverted to the almost unexceptional practice of magistrates, of cruelly inflicting the utmost penalty of the law, and this in defiance of the clause in the Act, which provides that if a reasonable excuse be offered, the fine may not be inflicted. The loss of one or even two children by vaccination, was not held by any magistrate to be a sufficient or reasonable excuse. Moreover, said the speaker, there is no justification for the law, the whole thing is a delusion. Vaccination never did prevent small pox, and Jenner knew it—and therefore he invented a theory that the virus from the horses' heel was the true source of the matter, and was alone protective. The disease which Jenner produced was not like small-pox. Phagædenic ulcers, with inflamed and swollen glands in the axilla, were the result of the process which he imposed upon the government, and on his unproved assertion, that his process would protect the subject for ever, obtained no less than thirty thousand pounds of British gold. And this was done against the protest of all the leading medical men of the time.

p. 6

What are the facts regarding this professed protective power? Why, that of the patients admitted into the small-pox Hospital, no less than eighty-four of every hundred cases, were found vaccinated! call you this protection? The whole thing is a falsehood.

Take the fact that in Paris, in the Barracks of the 1st regiment of the Voltigeurs of the Guard, in 1867, the soldiers were vaccinated to the number of 457, when towards the end of 1868, a small-pox epidemic in a highly confluent form, broke out in this regiment. This epidemic *made many victims* where the hygienic conditions, as space, ventilation and food were excellent; while in the 2nd regiment, in a similar barrack in the same court-yard, but wherein *no vaccination* had been done, *not a single case of small-pox occurred*.

p. 7

Take another case. In Bavaria every person is vaccinated, yet a short time ago small-pox broke out in Munich, and the Royal Pages were seized with small-pox. The Royal Court left the capital in alarm, not less than if a shell had burst in their midst. Since the passing of the Compulsory Act almost every constitutional disease that flesh was heir to had increased most alarmingly. In 1866, 122,222 persons died of chest disease, and of consumption alone 55,714. Now consumption was increasing by 2,000 cases a year. These facts should rouse the people to indignation against a government whose acts are despotic and which aimed at the destruction of the people's liberty. He cordially seconded the resolution.

Before putting the resolution to the meeting the Chairman intimated to Dr. Routh who had sent up his card that if he wished to move an amendment he could now do so.

Dr. Routh said: It was not his intention to move a formal amendment to the resolution, but merely a negative vote. He was very much surprised at the two speeches he had heard. He had no doubt, both the gentlemen were perfectly convinced they were right, but he did not know how they could have come to that conclusion if they had taken statistics. They had been told that the

mortality from every form of disease had increased, but it had not done so from small-pox. The population was increasing, and therefore there were more deaths than there used to be. The speakers on the other side were taking a time when the whole population of the kingdom was not more than 20,000,000, and comparing the gross number of deaths then with those that took place now; they ought, if they meant to deal fairly, to take the number of deaths to the million of population. It had been said that by the statistics of the Small-pox Hospital a greater number of persons were there who had been vaccinated than had not. What was the fact? The official return showed the following:—Number of deaths among the unvaccinated, 35 per cent.; vaccinated with one vaccine cicatrice, 7; with two cicatrices, 4; with three, 1; with four, 5–10ths. Well-marked, 2; badly-marked, 18; those who had previously had small-pox, 19. This last average showed that the vaccine was a better preventative than small-pox itself. Dr. Seaton, medical officer of the Privy Council, had published a return showing the annual death-rate in England and Wales. The death-rate per million of population during the 30 years previous to vaccination was 3,000. In '38 and '40, when vaccination was diffused, but before it was gratuitous, it was 770. The average for nine of the years when public vaccination was gratuitous but not obligatory was 304, and during the time it was both gratuitous and obligatory, the vaccination death-rate was 202 per million. Who, in the face of that, would maintain that vaccination was not a preventative of small-pox? Having referred to the ravages the disease used to commit, and the powerful nature of the small-pox virus, he proceeded to say that a great deal had been made of the fact that more people died of other diseases than usual, when deaths from small-pox were few in number. It stood to reason that if they saved a certain number of people from a certain disease, they must leave a greater number than if they had not saved them to die afterwards from some other disease. So, when a fearful epidemic had just left a place the number of deaths for some time afterwards was much smaller than at any other time during a long period of health. The reason of this was that nearly all the weak had been killed. It had been said that vaccine put into the system a great number of noxious diseases. That rested on the mere *ipse dixit* of a few persons. No doubt, in the crowded and unhealthy neighbourhoods of the poor, where no attention was paid to cleanliness, serious consequences might follow upon the mere scratch of the lancet or anything else, but that furnished no real argument against the system. He quite acknowledged they had no right to prevent Mr. Tomkins keeping any disease he liked in his own house, but if Tomkins came out amongst other people, and poisoned them, they had a right, and it was their duty to the nation, to take measures for preventing him.

p. 8

p. 9

Dr. Thompson was then called upon. He thought in such an important matter they ought to put aside feeling and look only to the facts themselves. In the first place, great credit was due to Dr. Jenner for pressing so forcibly upon public notice the system of vaccination, although no doubt he did not discover it. If vaccination did not preserve persons absolutely, neither did a previous attack of small-pox, for he knew a case of a woman who had it seven times, and died from the last attack. A strong point had been made by the other side on the statement that there had been a great increase in the number of deaths registered from chest diseases since the introduction of vaccination. He most unhesitatingly admitted that to be a fact, but why was it? It was not because of vaccination, but in consequence of the introduction of the use of that instrument (producing a stethoscope) for sounding the chest. Previously there were next to no means of discovering chest disease, and persons dying from it were registered as dying from other forms of disease. There had been no increase shown in the number of deaths from chest disease. More than 20,000 cases had been under his care during the last seven or eight years, and he had found that persons suffering from consumption had, in a very large proportion, suffered from small-pox also. He believed small-pox to be an exciting cause of consumption, rather than a preventative as had been asserted. Previous to vaccination, as many as 4,000 in 1,000,000 died from small-pox, and that number, since its introduction, had fallen to 158. He really, in his ignorance, had thought that the anti-vaccination movement would have ceased in face of the facts from St. Giles's and Ireland.

p. 10

The chairman: The sanitary habits of the people have something to do with the improvement in Ireland.

Dr. Thompson had no doubt that was the case, but it could have nothing to do with the improvement in St. Giles's, as the sanitary habits of that place were not very advanced. Let them continue vaccination till small-pox was eradicated, and then they could do without it altogether. Small-pox had only originated once in the history of the world, and if they could only once stamp it out, it might never recur. His attention had been called to some figures which he had omitted to notice in regard to Sweden, where the mortality which was so strikingly reduced after the introduction of vaccination, that in one year there were only two deaths, again rose by degrees till it reached 2,000. This was owing to the carelessness of the people, who thought the disease had gone altogether, and neglected the continuance of vaccination. Strenuous efforts were again made when the mortality rose, and it was reduced rapidly, till there were only 41 deaths in one year.

At the conclusion of Dr. Thompson's speech several gentlemen rose to put questions to Dr. Thompson, when Dr. Pearce asked permission of the chairman to reply to the two medical gentlemen who had just addressed them. Permission being obtained—

p. 11

Dr. Pearce said, he felt happy in meeting his two professional brethren, Dr. Routh and Dr. Thompson, and discussing with them this important question; and he proposed in order to avoid taxing the memories of the audience, to mingle the two speeches, and to reply in the reverse order of their delivery, noticing first the concluding remarks of Dr. Thompson.

Dr. Thompson had, unhappily for the cause he advocated, referred to that well vaccinated country, Sweden, where every child born is vaccinated, and where compulsory vaccination has been in operation many years. Dr. Thompson had pointed out that small-pox had declined in that country, in consequence of vaccination, adducing the fact, that while in 1838 the mortality was 1,805, in 1839 it was 1,934, it fell in 1840 to 650, and in 1842 to 58; indeed, in 1846 only two deaths from small-pox were recorded, and this, said Dr. Thompson, was the result of vaccination; but if he had continued his inquiry to later years, he would have found, as he will see there in that table, that the small mortality was owing to the fact that the epidemic had done its work and taken its departure, but that when another epidemic came, the mortality was again raised, and in 1849—31 died; in 1850—1,376 died; in 1851 no less than 2,488 died;—the heaviest mortality for forty years *though every inhabitant of Sweden was vaccinated.* ^[11]

And now for Ireland, on which so much stress has been laid of late. You tell us, that vaccination has extinguished small-pox in that country. I deny it. For while it is quite true that small-pox is absent—this is not the result of vaccination—for the Registrar General’s returns shew that there is less vaccination in Ireland than in England, and far less than in Scotland. You flatter yourselves that *you* have put out small-pox by vaccination. In regard to Ireland the fact is, that inoculation has been clandestinely carried on in that country, the people having more confidence in the protecting power of small-pox, a disease which is human, than in vaccination, a disease of a brute. They have this instinct, and this instinct is right in the mother who shudders at the idea of *cow-pox*. You overrule this instinct which is natural, with your reason, you impose a substitute which is revolting. Small-pox is absent from Ireland, but is the mortality less? No, on the contrary under the operation of a natural law which I have illustrated in my essay on vaccination, to which Mr. Snell has alluded, scarlatina has displaced small-pox, and the general mortality has increased. It is a general rule that when small-pox is present you have a low mortality, and when it is absent you have a higher mortality. Small-pox is absent from England, but look at your frightful mortality from scarlatina. ^[12] In the last two years, I estimate the mortality from scarlatina at 40,000 per annum, and small-pox only 1,500. And what is the nature of this process which you call *vaccination*. Dr. McOubrey has already told you this evening, that the disease which Jenner implanted was *not* natural cow-pox, but a disease which developed itself in phagædenic ulcerations. You follow Dr. Blane who advocated vaccination direct from the heifer to avoid the admitted dangers arising from arm to arm vaccination—the diseases transplanted therewith. You tell us to-night, that vaccination with cow-pox will prevent small-pox. Did Jenner tell you this? Let me read to you his words at page 7 of his work, published in 1798, he cautions you against trusting to spontaneous cow-pox, lest you should be deceived into a false security.

I will read the passage from Jenner, “It is necessary to observe that pustulous sores frequently appear spontaneously on the nipples of cows, and instances have occurred of the hands of servants employed in milking, being affected with sores in consequence, and even of their feeling an indisposition from absorption. These pustules are of a much milder nature than those which arise from that contagion which constitutes the *true* cow-pox. They are always free from the bluish or livid tint, so conspicuous in the pustules of that disease. *No erysipelas attends them, nor do they show any phagædenic disposition, as in the other case*, but terminate in a scab, without creating any apparent disorder in the cow. But this disease is not to be considered as similar in any respect to that of which I am treating, as it is *incapable of producing any specific effects on the human constitution*. However, it is of the greatest consequence to point it out here, lest the want of discrimination should occasion an *idea* of security, from the infection of small-pox which might prove delusive.” Now, mark the words—an *idea* of security—it is an idea, it has no reality; and for this idea you commit to prison mothers, whose only crime is to refuse to obey the mandate of a faculty, at whose bidding the Act of Parliament, which disgraces the statute book was passed. This spurious vaccination, this vaccination is Dr. Blane’s, it is a sham, a delusion. Have we not proof? Appeals have been made to-night to the statistics of the Small-pox Hospital, drawn up by Mr. Marson, its surgeon, in which he very ingeniously makes it appear, that although 84 of every hundred cases are found to have been vaccinated, the disease small-pox is modified by vaccination—this is a new tangled dodge. Mr. Marson tells us that the mortality in the “unprotected” is 34 or 35 per cent., that in modified cases it varied from 24 down to 7 per cent., and that these *modified* cases were among the vaccinated. Stress is laid on the importance of the number of the cicatrices. While Jenner said one puncture was sufficient, these men tell us that four, five, even six on each arm are necessary in order to ensure efficient protection. One dart of the serpent’s sting is not enough.

This ingenious division of the mortality into groups, according to the number of cicatrices is a delusion. Why, Mr. Marson tells us, with regard to the ‘modified’ cases said to have been vaccinated, but having no marks of vaccination, that they “must have received a protective influence as regards fatality, which would have been greater, but for the disease having been influenced by vaccination.”

So it is *assumed* that when small-pox occurs mildly in the vaccinated—that the disease is modified thereby. The fact being that it depends on the natural susceptibility of the subject and not on vaccination. This different susceptibility in the attacked was pointed out by Rhazes, an Arabian physician, centuries before vaccination was thought of; but what happens when small-pox occurs in a severe form? Let us see—here is Dr. Russell Reynolds’ System of Medicine, and in it, vol. 1, 2nd edition, page 229, is an article by Mr. Marson on small-pox. He tells us that 104 cases of the severe (corymbose) form of small-pox were admitted into the hospital—of these 29 were unvaccinated, 74 were found vaccinated (mark the greater number were vaccinated as usual)—of the 29 unvaccinated, 13 died; of the 74 vaccinated, 32 died;—shewing a difference in

p. 12

p. 13

p. 14

the mortality of less than 3 per cent. Of the 104 cases one only had been inoculated, that case died. Here then we see that with all your boasted protection the great majority are found with the mark of the beast on the arm, yet they die at the rate of 42 per cent.

Reference had been made to the diminution of small-pox in the parish of St. Giles's. At a meeting in Kentish Town some months ago, Dr. Ross adduced what he thought to be evidence of the effect of vaccination in St. Giles's. At that meeting he, Dr. Pearce, had combated Dr. Ross's argument by shewing that the diminished mortality from small-pox was owing to its absence and its displacement by scarlatina.

Dr. Seaton's statistics had been quoted to-night in proof of the advantage of legislation on the subject. That well paid officer of the Privy Council had drawn up a table for the Epidemiological Society which he, Dr. Pearce, had republished in his essay, and which he begged now to hand to Dr. Routh and Dr. Thomson for their inspection.

Table, showing the annual mortality from small-pox in England in three periods: (1) Before the enactment of any vaccination laws; (2) After vaccination was provided gratuitously, but was not obligatory; and (3) since vaccination has been obligatory:—^[15]

DIVISION 1. Before the enactment of any Vaccination Laws.		DIVISION 2. Vaccination provided gratuitously, but not obligatory.		DIVISION 3. Vaccination obligatory.	
Year.	No. of Deaths.	Year.	No. of Deaths.	Year.	No. of Deaths.
1838	16,268	1841	6,368	1854	2,808
1839	9,131	1842	2,715	1855	2,525
1810	10,431	1847	4,226	1856	2,277
		1848	6,903	1857	3,936
		1840	4,645	1858	6,460
		1850	4,666	1859	3,848
		1851	6,997	1860	2,749
		1852	7,320	1861	1,320
		1853	3,151		
Average Annual Deaths.	11,944	—	5,221	—	3,240

The table was compiled for the purpose of showing that legislative measures to provide and enforce vaccination, have been effective in diminishing the mortality from small-pox.

The year 1838 was the most fatal year, from small-pox, in the present century. The table is commenced with that year, *while former years are omitted in which the death-rate from small-pox was low*, (for it had not prevailed severely since 1825). Hence the average mortality is swelled to 11,944. So much for the first division.

The third division is supposed to prove that the decrease of the mortality from small-pox is due to compulsory vaccination. It must be remembered however, that in the second division there are three epidemic visitations included, while in the third division there is only one. Moreover, if the years 1862-3-4-5, be added, the average annual deaths for the period 1862-65 amount to 5,421, thus—

Year.	No. of Deaths.
1862	1,628
1863	5,964
1864	7,684
1865	6,411
—	5,421

Dr. Seaton attributes the diminished mortality from small pox to compulsory vaccination, closing his account with 1861, which is the year of lowest mortality in the table. How will he account for the subsequent increase of mortality from small-pox under a more vigilant enforcement of the Act of Parliament?

In 1863 it amounted to 5,964; and it rose to 7,684 in 1864; *which was the most fatal year in regard to small-pox for twenty-four years*. If vaccination be really "protective," and if the gradual diminution of the mortality from small-pox down to the year 1861 was consequent on vaccination having been made compulsory, how, and why was the mortality of 1864 from that disease no less than 6,364 *in excess* of the mortality of 1861?

Dr. Routh has quoted Dr. Seaton with a view of illustrating the contrast between the last century

and the present in respect to the mortality from small-pox.

He has told you that prior to vaccination, the annual death-rate of small-pox per million of population was 3,000. This was a rough estimate made by Sir Gilbert Blane and Dr. Lettsom. The value of this "estimate" may be judged of, when I tell you that prior to 1838, there were no complete statistics of mortality. Mr. Simon in his "Papers on Vaccination" at page lxviii says, "Till after 1837, *there could be no authentic knowledge of deaths by small-pox.*"

Dr. Farr in the 30th annual report of the Registrar General says, quoting Dr. Watt, of Glasgow, a child had a better chance of reaching its tenth year in the last eighteen years of the last century when small-pox formed 20 per cent. of the whole mortality than it has now, when small-pox mortality is only two per cent.

No one disputes that small-pox is less prevalent now than it was a century ago, but what gain is there? Dr. Farr says, "it is useless to bar the door against one form of zymotic disease, as small-pox by vaccination, while the *causes* of zymotic disease are suffered to remain."

In 1863 scarlatina destroyed 30,000 in England, a mortality of 1,800 to each million persons living. In 1869 and 1870 the probability is that the mortality from scarlatina will reach 40,000 annually, shewing a death rate per million of 2,000, while small-pox will probably not exceed 70 to a million.

Small-pox was a scourge in Europe a century ago. Now, scarlatina is the scourge, and this will continue. One or other form of zymotic disease will continue to exist while the causes which develop them remain. You gentlemen, who advocate vaccination as a preventive measure are in error—you begin at the wrong end—you aim not at taking away the cause, but prefer to contaminate the body with one disease, to prevent the subject from taking another, which is the result of filthy habitations, unclean towns, and bad sanitary arrangements. p. 18

It has been disputed to-night that diseases are induced by vaccination; will it be denied that erysipelas is a common—a frequent result of the process? What are the facts? Erysipelas, which, prior to vaccination, was a disease incident to adult life, especially to middle age, is now a disease of infant life. In the Registrar General's returns, you will find in the six years 1862 to 1867, there died of this disease 10,635, including all ages from birth to 80 years; of that number no less than 3,261 died in the first year of life, *the year of vaccination*, while 3,904 died under five years of age. This frightful mortality of infants is the direct consequence of vaccination; a natural result; indeed, Jenner tells us that, that vaccination is alone protective, which is attended by erysipelas; while the spontaneous cow-pox, which is *unattended* by erysipelas, is not protective. Yet when children die of erysipelas following vaccination, the deaths are certified "*death from erysipelas,*" while the truth is concealed. The death should be certified properly, DEATH FROM VACCINATION. But when an inquest is held in this parish, under the coronership of Dr. Lankester, on a child of Mr. Emery of Great Portland-street, although the evidence adduced to the jury clearly shewed that the child died in consequence of vaccination, efforts are made to conceal the fact; for while the jury unanimously returned a verdict "*died from erysipelas caused by vaccination,*" the coroner's copy deposited at the Registrar General's office, Somerset-house, certifies the additional words "*death by misadventure.*" ⁽¹⁹⁾ And with what object were those words added, but to screen the operator, by whose vaccinating hand another child also lost its life (probably with the same lancet) on which the coroner for Westminster, Mr. Bedford, held an inquest. I do not say that Dr. Lankester intentionally suppressed the truth, to save his professional brother, but I do say, that it is highly dangerous to the community, to have a *medical* coroner, whose leanings in favor of his profession may lead him into partial verdicts. The duty of a coroner is to hear evidence, and direct the jury as to the *law*, not to give opinions with a professional bias. Compulsory vaccination may be defined to be manslaughter by Act of Parliament. p. 19

So much for one disease, Erysipelas. Let us now come to another frightfully increasing disease of infant life, Diarrhœa. I have, during the last twenty years in which I have given my attention to this subject—vaccination and its effects—observed the frequency with which vaccination of infants is followed by a fatal kind of diarrhœa. Enteritis of infants has without doubt increased and is increasing.

I was not surprised, therefore, to find in the twelfth report of the medical office of the Privy Council, just published, a paper by Dr. Seaton on vaccination in Paris, in which at page 176, occurs the following passage:—

"In some cases the vaccinated calves have suffered from diarrhœa."

At page 178, "In Depaul's seventh and eighth experiments, for example, *the calves suffered severely from diarrhœa.*" p. 20

Another passage, page 178, shows that diarrhœa is an accompaniment of the process; "the health of the calf, however, affects the character of the eruption, for it has been observed that *when diarrhœa happens in the course of its evolution*, the pustules, although they rise as in the healthy calf, are smaller in size, and less full."

And thus infant mortality is increased by the infliction of a disease of the brute creation, which in the "course of its evolution," causes diarrhœa.

The medical press has lately teemed with articles calling attention to the prevalence of small-pox,

in Paris, it is stated that small-pox prevails there because vaccination is not compulsory. While it is quite true that the Legislature of France has passed no such disgraceful and tyrannical vaccination acts, as those which exist in England,—yet vaccination is almost universally adopted. Mr. Smee, the surgeon to the Bank of England, and examiner of candidates for life assurance, lately, in a letter to the “Times” newspaper, stated that his large experience enabled him to state that to find a Frenchman unvaccinated was an exception. The 12th report of the medical officer of the Privy Council tells us that in France it has been decreed, under the direction of the Academy of Medicine, by ministers, that “No infant should enter an orphan asylum, an hospital, a primary school, a lyceum, or a government college without a certificate, of vaccination.”

The Army and Navy of France are vaccinated, and vaccination is enjoined, if not enforced, on all who hold government situations. Besides this, it is forced upon the poor by a rule that “*those who refuse to have their children vaccinated, shall have no public assistance.*”

The fact is, that vaccination has failed in Paris, as in every other city. Let the medical gentlemen opposite, look to the paper of Dr. Seaton, whose cooked statistics they have quoted to-night; the paper to which I have before alluded, presented to the Lords of the Privy Council in the 12th report of Mr. Simon, and at page 188, they will find the following passage:—

“Striking exemplification of the danger of confiding in animal vaccination during an outbreak of small-pox has been given during the present epidemic in Paris, no doubt a large share of the *unsuccess* which has *notoriously* attended the practice, has been due to the hurry, and other unfavorable conditions under which it has been carried on. *But apart from this, and where the conditions have been favorable, THE FAILURES HAVE BEEN QUITE REMARKABLE.*”

I unhesitatingly affirm that vaccination from whatever source, whether from the heifer direct or from arm to arm, or even the heel of the greasy horse, which Jenner defined to be the *true source of protective matter*, is not only a failure—it is a delusion, an imposture, and the law which enforces it at the bidding of the medical department of the Privy Council, is a disgrace to the Statute Book of England, and ought to be repealed. For the reasons I have given, after nearly twenty years of attention to this important subject, I support the resolution.

Mr. Glidden made a few observations in support of the medical men who had spoken in advocacy of vaccination, expressing his surprise at the want of modesty in the last speaker, who, as a member of a learned profession, spoke disparagingly of his medical brethren, and applied the term “cooked” to statistics on the other side, while he produced a multitude of statistics of his own.

The chairman here interposed stating that Dr. Pearce had only produced the official statistics of the Registrar General. The resolution was then put and carried with only four dissentients.

Mr. R. B. Gibbs, Hon. Sec. to the Anti-Compulsory Vaccination League, moved “that a memorial be presented to the Lords of Her Majesty’s Privy Council, praying them to suspend the vaccination laws until the inquiry, promised by the Government, had been made,” and said, that similar requests had been made several times, and that so far back as 1856, the government had promised a committee of the House of Commons, which promise was evaded. Instead of a committee an *ex parte* investigation was made by sending a string of questions to a number of interested doctors, who, of course upheld the system. This course was much the same as if the late Royal Commission on Trades Unions had written to the secretaries of the various unions, to enquire how they worked. If a question had been asked of Broadhead, respecting the Saw-Grinders’ Union, of course, he would have reported that it was working satisfactorily.

Mr. Gibbs said, that the League would be satisfied with nothing less than a full investigation of the Medical Trades Unions. He then adverted to the case of the Rev. H. J. Allen, who had appealed to the Court of Queen’s Bench against a second conviction, which conviction had been upheld by the Court, and Mr. Allen left to pay a lawyer’s bill of over £30. He trusted that the lovers of freedom would assist him in his difficulties. Mr. Gibbs then referred to the important testimony, lately adduced by medical gentlemen in Manchester and elsewhere, that the evil results of vaccination were often apparent after “successful” operations with “pure lymph,” and reminded the audience that it was from the effects of such an operation, that Sir Culling Eardley, and many others had died. In view of such uncertainties, Mr. Gibbs argued that it was cruel to enforce the prisoning of the community.

The resolution was seconded by Mr. MacHeath, who in an interesting and amusing speech alluded to the “beastly” practice of vaccinating the human species.

The resolution was carried unanimously.

Dr. Caplin moved a vote of thanks to the Chairman, which was heartily responded to, and the meeting, which was most effective, was brought to a close.

DEATHS FROM SMALL-POX IN SWEDEN,

1821-1852. ^[23]

Date.	Deaths.	Date.	Deaths.
1821	37	1837	361
1822	11	1838	1,805
1823	39	1839	1,934
1824	618	1840	650
1825	1,243	1841	237
1826	625	1842	58
1827	600	1843	9
1828	257	1844	6
1829	53	1845	6
1830	104	1846	2
1831	612	1847	13
1832	622	1848	71
1833	1,145	1849	341
1834	1,049	1850	1,376
1835	445	1851	2,488
1836	138	1852	1,534

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FOOTNOTES.

[11] See page 23.

[12] Since the meeting was held the quarterly returns of the Registrar General has appeared, shewing that in the present year the mortality of England has considerably increased.

[15] Transactions of the Epidemiological Society, vol. ii., part 1.

[19] Three fourths of the jurymen have in their own hand writing repudiated the words "death by misadventure" and declare that the verdict returned did not contain those words. The remaining members of the jury have not yet been consulted.

[23] From page 92, Dr. Pearce's Essay on Vaccination.

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