

THE ST. LOUIS Medical and Surgical Journal.

Whole No. 739.

VOLUME LXXXIII.—JULY, 1902.—No. 1.

ORIGINAL COMMUNICATIONS.

PROPHYLAXIS TO BE REALIZED THROUGH THE ATTAINMENT OF HEALTH, NOT BY THE PROPAGATION OF DISEASE.

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In view of the fact that a bold attempt has recently been made by a representative of the self-styled "regular profession" to place upon our statute books a compulsory vaccination measure, the provisions of which mark a height of brazen effrontery which medical despotism has never before reached in the Empire State; and inasmuch as the public mind is largely occupied with the questions of small-pox and vaccination, at the present, the discussion of some phases of these subjects seems timely and appropriate. I desire to treat this important topic, not in a spirit of contentiousness, but with a sincere desire to get at the truth even though in so doing some unwelcome facts are disclosed and some cherished ideals are dispelled. My aim is to consider facts as I find them and not as I wish they were.

The advocates of vaccination unhesitatingly assert that the vaccine disease protects its subjects from small-pox, but the facts, so far as we know them, do not warrant this assertion. Indeed, the theory which assumes to conserve health by propagating disease has always had a formidable array of facts to oppose it.

From the days of Jenner to the present time, cases of small-pox have appeared among those who were supposed to be protected by vaccination, and those in no small numbers. When

Jenner began the practice of vaccination in 1798, he rashly assumed that one "successful" vaccination was a preventive of small-pox for an entire lifetime. This, it is readily seen, was a mere hypothesis on his part, because in the very nature of the case it was not possible to determine at that time that the artificial production of one disease would surely prevent, forever afterward, to that subject, the occurrence of another disease (small-pox). Assumption is not law, and Jenner lived to witness the folly of his assumption.

I here present a few examples out of many thousands which are at hand to warrant the affirmation that vaccination does *not* protect its subjects from small-pox.

The London *Morning Advertiser* of Nov. 24, 1870, reports: "Small-pox is making still greater havoc in the ranks of the Prussian army, which is said to have thirty thousand small-pox patients in its hospitals." These were all vaccinated and re-vaccinated. Dr. G. F. Kolb, of the Royal Statistical Commission of Bavaria, officially states: "In the kingdom of Bavaria, where no one for many years, except the newly born, escaped vaccination, there were in the epidemic of 1871 no less than 30,742 cases of small-pox, of whom 29,429 had been vaccinated, as is shown by the documents of the State Department."

The *Lancet* (London) of July 15, 1871, editorially states: "The deaths from small-pox have assumed the proportions of a plague. Over 10,000 lives have been sacrificed during the past year in England and Wales. In London, 5,641 deaths have occurred since Christmas. Of 9,392 patients in the London Small-pox Hospitals, no less than 6,854 had been vaccinated, *i. e.*, nearly seventy-three per cent. Taking the mortality at seventeen and one-half per cent. of those attacked, and the deaths this year in the whole country at 10,000, it will follow that more than 122,000 vaccinated persons have suffered from small-pox. This is an alarming state of things. Can we greatly wonder that the opponents of vaccination should point to such statistics as an evidence of the failure of the system? It is necessary to speak plainly on this important matter."

Statistics of similar import might be quoted by the page, chapter, and volume; but time and space forbid. One such fact is as good as a thousand, because it effectually destroys the foundation of the theory of preventive vaccination.

In the annual report of the Health Department of the city of New York, 1870-71, it is stated: "This extraordinary prevalence of small-pox over various parts of the globe, especially in countries where vaccination has long been efficiently practiced; its occurrence in its most fatal form in persons who gave evidence of having been well vaccinated, and the remarkable susceptibility of people of all ages to re-vaccination, are new facts in the history of this pestilence, which must lead to re-investigation of the whole subject of vaccination and of its claim as a protecting agent."

A. M. Ross, M.D., A.M., an eminent old school physician of Toronto, in writing about the Montreal small-pox epidemic of 1885, said: "Whoever closely watched the course of the epidemic in Montreal must conclude that vaccination is utterly useless as a protection from small-pox. Much of what transpired in our small-pox hospitals was suppressed, especially whatever was likely to operate against the progress of vaccination, which proves a golden harvest to the vaccinators. But notwithstanding the conspiracy of silence, a few official reports came out pregnant with proof against vaccination and demonstrating beyond question that a large proportion of the patients admitted to our small-pox hospitals had been vaccinated, and that many of them died, some with two and others with three vaccine marks upon their bodies."

The *New York Medical Journal*, edited by Frank P. Foster, M.D., in its issue of July 15, 1899, contains an article, entitled "Vaccination in Italy," written by Charles Ruata, M.D., Professor of Hygiene and of Materia Medica in the University of Perugia, Italy, in which he demonstrates by the presentation of the most trustworthy official statistics that preventive vaccination in that country has been a complete and certain failure.

Prof. Ruata prefaces his article with the following affirmation: "Italy is one of the best vaccinated countries in the world, if not the best of all, and we can prove that mathematically." He says: "Our young men, with few exceptions, at the age of twenty years must enter the army, where a regulation prescribes compulsory vaccination." After having quoted the official statistics of the Italian government as proof of his assertion, he says: "For twenty years before 1885 our nation was vaccinated in the proportion of 98.5 per cent. Notwithstanding, the epi-

demics of small-pox that we have had have been something so frightful that nothing before the invention of vaccination could equal them."

In Italy having a population of 30,000,000, 98.5 per cent. of whom were officially declared vaccinated, Dr. Ruata goes on to say: "During the year 1887, we had 16,249 deaths from small-pox; in 1888, 18,110; and in 1889, 13,413." In referring to the Italian army, in which "vaccination had been performed twice a year in the most satisfactory manner for many years past," Dr. Ruata says: "Now, we see that soldiers not protected because vaccination did not 'take' were less attacked by small-pox than those 'duly protected' by the good results of their re-vaccination; and that the death-rate in those vaccinated with good results was greater than among those in whom vaccination did not take."

In regard to the vaccine material used, Dr. Ruata says: "I have limited my analysis to the last six years, during which time the only lymph used in all our army has been animal lymph, exclusively, furnished by the Government Institute for the production of animal lymph." After having cited the government statistics, which sustain his conclusions, Prof. Ruata remarks: "The 'duly protected' soldiers were attacked by small-pox in a proportion double that among the 'unprotected' soldiers."

"As you see, these official statements, extremely trustworthy because they were made in a country where, and at a time when, no one thought that it was possible to raise a doubt against the dogma of vaccination." "In our country," he continues, "we have no league against vaccination, and every father thinks that vaccination is one of his first duties. For these reasons no bias could exist against vaccination in making these statistics." The figures of these statistical records, presented in the *New York Medical Journal* from the pen of an eminent professor in an Italian University, stand as unimpeachable witnesses to the fact that preventive vaccination has been a complete failure in Italy, which we are assured is one of the most thoroughly vaccinated countries on the globe.

I now call another witness, Prof. Alfred Russell Wallace, LL.D., F.R.S., an expert statistician and one of the ablest scientific men of England. In his latest great scientific work,

entitled "The Wonderful Century," Professor Wallace has devoted a chapter to the consideration of the most trustworthy statistics on a large scale, as relating to small-pox and vaccination. He tells us that in April of the year 1889, Queen Victoria appointed a commission of eight of the most distinguished medical men of England and quite a number of eminent men in other professions, to investigate the question of the effect of vaccination. This commission, we are told, spent more than seven years in its investigations, held 136 meetings, examined about 200 witnesses, and investigated six epidemics which had occurred in recent years at Gloucester, Sheffield, Warrington, Devosberry, Leicester and London.

It is upon the evidence presented in the majority report of this commission that Prof. Wallace bases his statements and conclusions, some of which I herewith present. He has critically examined the early tests employed by the advocates of vaccination to prove the alleged protective influence of the practice, and has pointed out the fallacy and complete inefficiency of these tests. He has brought together an array of remarkable test cases which illustrate the utter worthlessness of vaccination. Of these crucial tests I shall be able to present but a few. "The first is that of Leicester, which for the past twenty years has rejected vaccination till it has now almost vanished and small-pox is almost unknown. The second is that of the Army and Navy in which for a quarter of a century every recruit has been re-vaccinated, unless he had been recently vaccinated or had small-pox. In the first we have an almost unvaccinated population of nearly 200,000, which on the theory of the vaccinators should have suffered exceptionally from small-pox; in the other we have a picked body of nearly 220,000 men who, on the evidence of the medical authorities, are as well protected as they know how to make them, and among whom, therefore, small-pox should be almost or quite absent, and small-pox deaths quite unknown. Let us see then what has happened in these two cases. In both it has been clearly proven that small-pox increased with the increase of vaccination, and decreased under sanitation, cleanliness, and hygienic living."

After having set forth page upon page of these test cases, Prof. Wallace observes: "It is thus completely demonstrated that all the statements by which the public has been gulled for

so many years, as to the almost complete immunity of the re-vaccinated Army and Navy, are absolutely false. It is all what Americans call 'bluff.' There is *no immunity*. They have *no protection*. When exposed to infection they *do* suffer just as much as other populations, or even more. In the whole of the nineteen years, 1878-96 inclusive, unvaccinated Leicester had so few small-pox deaths that the Registrar-General represented the average by the decimal 0.01 per thousand population, equal to ten per million, while for the twelve years 1878-89 there was less than one death per annum. Here we have *real immunity*, *real protection*; and it is obtained by attending to sanitation and isolation, coupled with the almost total neglect of vaccination. Neither Army nor Navy can show any such results as this." "Now," says Prof. Wallace, "if there exists such a thing as a crucial test this of the Army and Navy as compared with Leicester affords such a test. The populations concerned are hundreds of thousands; the time extends over a generation; the statistical facts are clear and indisputable; while the case of the Army and Navy has been falsely alleged again and again to afford indisputable proof of the value of vaccination when performed on adults."

Prof. Wallace produces official statistics which verify his affirmation that "The town of Leicester is, and has been for the past twenty years, the least vaccinated town in the kingdom. Its average population from 1873 to 1894 was about two-thirds of that of the Army during the same period. Yet the small-pox deaths in the Army and Navy were thirty-seven per million, those of Leicester under fifteen per million." Prof. Wallace justly declares: "It is not possible to have a more complete and crucial test than this is, and it absolutely demonstrates the utter uselessness or worse than uselessness of re-vaccination."

"Before leaving Leicester," says Prof. Wallace, "it will be instructive to compare it with some other towns of which statistics are available. And first, as to the great epidemic of 1871-72 in Leicester and in Birmingham. Both towns were then well vaccinated, and both suffered severely by the epidemic. Thus:

	LEICESTER.	BIRMINGHAM.
Small-pox cases per 10,000 population.....	327	213
Small-pox deaths per 10,000 population.....	35	35

But since then Leicester has rejected vaccination to such an

extent that in 1894 it had only seven vaccinations to 10,000 population, while Birmingham had 240, or more than thirty times as many, and the proportion of its inhabitants who have been vaccinated is probably less than one-half that of Birmingham. The Commissioners themselves state that the disease (small-pox) was brought into the town of Leicester on twelve separate occasions during the recent epidemic, yet the following is the result :

1891-1894.	LEICESTER.	BIRMINGHAM.
Small-pox cases per 10,000 population.....	19	63
Small-pox deaths per 10,000 population.....	1 (1-10)	5

Here we see that Leicester had less than *one-third* the cases of small-pox and less than *one-fourth* the deaths in proportion to population than well-vaccinated Birmingham ; so that both the alleged *protection* from attacks of the disease and *mitigation* of its severity when it does attack, are shown not only to be absolutely untrue, but to apply, in this case, to the absence of vaccination."

The last quotation from "The Wonderful Century," which I shall here present is the following: "But we have yet another example of an extremely well-vaccinated town in this epidemic—Warrington, an official report on which has been issued. It is stated that 99.2 per cent. of the population had been vaccinated, yet comparison with unvaccinated Leicester stands as follows :

EPIDEMIC OF 1892-93.	LEICESTER.	WARRINGTON.
Small-pox cases per 10,000 population.....	19.3	123.3
Small-pox deaths per 10,000 population.....	1.4	11.4

Here, then, we see that in the thoroughly vaccinated town the cases are more than six times, and the deaths more than eight times that of the almost unvaccinated town, again proving that the most efficient vaccination does not *diminish* the number of attacks, and does not *mitigate* the severity of the disease, but that both these results follow from sanitation and isolation."

The history of small-pox in Leicester, England, has, as pointed out by Prof. Wallace, furnished conclusive testimony to the world that small-pox can be confined within very narrow limits without any assistance (?) from the vaccine operation.

In 1872, when Leicester was a well-vaccinated city, it was visited by a small-pox epidemic and suffered a heavy mortality. The doctors had so overdone the business of coercive vaccina-

tion and public prosecution that the people rose, *en masse*, in open revolt against the propagation of the vaccinator's poison. This emphatic protest had the effect of checking vaccination and of diminishing the percentage of vaccinations to the number of births. From page 209 of "The Wonderful Century," I quote the following: "But immediately after the great Leicester epidemic of 1872, which was worse than in London, the people began to reject vaccination, at first slowly, then more rapidly, till for the last eight years (1890-98) less than five per cent. of the births have been vaccinated. During the whole of the last twenty-four years small-pox deaths have been very few, and during the twelve consecutive years, 1878-89, there was a total of only eleven small-pox deaths in this populous town." Thus we see the history of Leicester presents one of the best object lessons of the past thirty years; for, since its small-pox epidemic of 1872, its citizens not only rose in open revolt and rid themselves of the incubus of vaccination, but also instituted as thorough a system of sanitation as their crowded population of nearly 200,000 would admit of. Leicester, therefore, under the guidance of a creed, the main articles of which are founded on the teachings of sanitary science and obedience to the laws of hygiene, stands out clear and distinct above all the other cities in England, both as a rebuke to the vaccine practice and as a testimony that salvation from the contagion of small-pox lies in the direction of sanitary regulations and hygienic habits of life. In defence of the Leicester system, which is simply a system of thorough sanitation, the report of its medical officer for 1893 tells a story which should be emphatically and repeatedly impressed upon the mind of every health-board official throughout the civilized world. Addressing his townsmen, the Leicester health officer said: "You are entitled to great credit, more especially in the case of small-pox, which, by the methods you have adopted, has been prevented from running riot throughout the town, thereby upsetting all the prophecies which have again and again been made. I need only to mention such towns as Birmingham, Warrington, Bradford, Walsall, Oldham, and the way they have suffered during the past year from the ravages of small-pox, to give you an idea of the results you, in Leicester, have achieved—results of which I, as your medical officer of health, am justly, I think, proud."

The foregoing are a few of the hundreds of demonstrations that can be cited of the utter worthlessness of vaccination as a preventive of small-pox. If protection is good for anything, it should be effective during the prevalence of an epidemic; but, as we have seen, that is just where the unvaccinated enjoy the greater immunity from the variolous infection. Can any one explain why it is that the vaccine practice continues to be perpetuated, and the contagion of the cowpox disorder to be propagated by the medical profession in the face of such evidence as this?

The statement of such demonstrations as these puts the advocates of vaccination in a very awkward predicament, to say the least. A knowledge of such clean-cut facts should be sufficient to destroy in unprejudiced minds all belief in the efficiency of so-called preventive vaccination.

The ancient theory which ignores the laws of hygiene and sanitation by teaching the absurd doctrine that the propagation of the contagion of disease by ingrafting it into the bodies of healthy people can be of advantage to the well-being of a community, should find no favor with the sanitary rationalist of the twentieth century, and, in my humble opinion, deserves the open condemnation of every scientific physician.

SMALL-POX A FILTH DISEASE, AND VACCINATION ITS HANDMAID.

Belief in this curious dogma has tended to foster a disregard for cleanliness. By leading people to overlook the real cause and to neglect the true preventive of small-pox, it has done much to obstruct the progress of truth, and to retard the evolution of hygiene and sanitary science.

Instead of having been instructed by their family physician to observe the laws of health and to avoid the cause of disease, people have, on the contrary, been taught, for a century, to rely upon a fetich for immunity from a filth-disease. The only measure which has been found competent to cope with small-pox and other zymotic diseases is cleanliness. As people learn to keep their dwelling apartments clean and well ventilated, their streets and alleys free from the accumulation of filth, their water supply pure, their food free from injurious adulteration, their bodies free from the accumulation of effete tissue, by taking plenty of exercise in the open air, they rise superior to the thralldom of zymotic disorders. There is no exception to this

rule. Whom do these diseases attack? The untidy and unclean. What neighborhoods do they visit? The filthiest. What cities do they select? Those in which sanitary conditions are most neglected. Note the small-pox epidemic of Montreal of 1885, in which 3,400 people died of the disease. Who were the victims? The very lowest class of society, children that were filthy, neglected and ill-fed, who were living in houses that were overcrowded, destitute of proper ventilation, and in courts and alleys reeking with filth, and where sanitation is a term unknown.

So-called "successful" vaccination is nothing less than the implanting into the healthy organism the virulent products of diseased animal tissue, with the effect of inducing actual disease. The performance of such an operation, in the very nature of the case, violates every principle of modern aseptic surgery, the legitimate aim of which is to *remove from* the organism the products of disease and never to *introduce* them. The chief aim of the modern surgeon is to make and treat wounds aseptically. The careful operator employs every means at his command to clear the field of operation of all bacteria, and he uses every available resource of the marvelously minute and intricate technique of asepsis to prevent the entrance through the wounded tissue into the organism of any germ or morbid agent before, during, and after an operation. He fears sepsis as he fears death; and yet under the blighting and blinding influence of an ancient and venerated superstition, he will intentionally inoculate into the circulation of a healthy human being, the virulent animal poison, vaccine virus, the infective products of diseased animal tissues, "under strictly aseptic conditions!"

Think of the unparalleled absurdity of deliberately infecting the organism of a healthy child in this era of sanitary science and aseptic surgery, with the poisonous matter obtained from a sore on a diseased calf, under the pretense of protecting the victim of the ingrafted disease against the contagion of another disease! Can inconsistency go farther than this? Inoculating an indeterminate lot of microbes into a healthy organism "under aseptic precautions!" Ladies and gentlemen of this society, just think of it!

IS VACCINE ANYTHING BUT SYPHILIS?

In considering the subject of preventive vaccination the ques-

tion arises: What is vaccinia? And what is it that the vaccinator implants into the healthy human organism? Into this part of the subject time forbids me to enter, except to point out a few brief quotations from high authorities on this subject. From the American Text Book of Diseases of Children, article Vaccination by T. S. Westcott, M.D. (p. 192), I quote the following: "The exact nature of vaccinal disease is a question which has been the subject of repeated theorizing and experimentation since the time of Jenner, and even at the present day no consensus of opinion has been reached." Many pro-vaccinal authorities aver the belief that vaccinia is small-pox modified or attenuated by passing through the system of the cow. This theory, however, rests on very inconclusive evidence and must soon be relinquished.

Dr. Chauven, in his notable address before the French Academy of Medicine, October, 1891, after detailing his elaborate experiments which had continued for years, concludes: "(1) Vaccine virus never gives small-pox to man; (2) variolic virus never gives vaccinia to the cow; (3) vaccinia is not even attenuated small-pox."

Vaccinia is, in all probability, a modified form of syphilis, as has been clearly pointed out by Dr. Chas. Creighton, of London, and Dr. Crookshank, professor of Pathology and Bacteriology in King's College, London, two of the highest living authorities on these subjects. Dr. A. W. Hutton, another eminent authority says: "The syphilitic nature of cow-pox is the theory which now holds the field; and it is hardly contested by the advocates of vaccination, who are content to rely solely on the evidence of statistics."

Dr. Charles Creighton, who was employed to write the article on Vaccination in the ninth edition of the Encyclopedia Britannica, because he was considered the ablest living authority on that subject, says: "The real affinity of cow-pox is not to small-pox, but to the great pox. The vaccinal roseola is not only very like the syphilitic roseola, but it means the same sort of thing. The vaccinal ulcer of every-day practice is, to all intents and purposes, a chancre; it is apt to be an indurated sore when excavated under the scab; when the scab does not adhere, it often shows an unmistakable tendency to phagedena." Thus we come face to face with the gravest and, at the same time,

the most disgusting aspect of the whole vaccination problem. Here we have some of the highest authorities who have produced the clearest evidence showing that vaccinia is modified syphilis. The chronic and protean manifestations which at times follow vaccination, must have impressed us all with their close analogy to syphilitic lesions.

Prof. Alfred Russell Wallace has proven by the testimony submitted in the Majority Report of the Royal Commission of Inquiry on Vaccination, that the cow-pox practice instead of protecting its subjects from the contagion of small-pox, actually rendered them more susceptible to it. This conclusion, based upon facts, is in harmony with the physician's daily observations and experiences. Health is the ideal state to be sought for and attained, not disease. Disease should always be avoided. Every pathogenic disturbance in the infected organism wastes and lowers the vital powers, and thus diminishes its natural resisting capacity. This fact is so well known and so universally conceded that it seems superfluous to cite authorities. Nevertheless at the risk of being considered redundant I shall mention a couple. The American Text Book of Surgery, one of the latest standard works (p. 59), says: "The healthy body is intolerant of bacteria and will resist the invasion of a mass of organism which an inflamed or diseased part may be unable to withstand."

Another of the latest works, The International Text Book of Surgery (Vol. 1, p. 263), is authority for the following statement: "Persons weakened by disease or worn out by excessive labor yield more readily to infection than healthy individuals."

If this is true, it explains why in variolous epidemics, small-pox always attacks the vaccinated first, and why this disease continues to infest the civilized world while its allied "filth-diseases" have disappeared before the advance of civilization, through the good offices of sanitation, hygiene and isolation.

In conclusion, I venture to think that I am warranted in maintaining that an impartial and comprehensive study of vital statistics gleaned from every reliable source, proves that the extension of the practice of vaccination cannot be shown to have any logical relation to the diminution of cases of small-pox.

HOW THE DECREASE OF SMALL-POX IN THE LAST CENTURY IS ACCOUNTED FOR.

After a careful consideration of the history of vaccination and small-pox, and after an experience derived from having vaccinated more than 3,000 subjects, I am firmly convinced that Edward Jenner saddled a legacy of disease and death upon the human race, and incidentally made \$150,000 by the transaction; that the practice of vaccination has been the means of disseminating some of the most fatal and loathsome diseases, such as leprosy, cancer, syphilis, tetanus and tuberculosis; that vaccination is not only useless, but positively injurious; that instead of protecting its subjects from the contagion of small-pox, it actually renders them more susceptible to it by depressing the vital powers and diminishing natural resistance; that vaccination was introduced at a time when small-pox was a diminishing factor, and by checking small-pox inoculation, withdrew a fertile source of variolous propagation; that the discontinuance of variolous inoculation, therefore, rather than the practice of vaccination, accounted for the diminished prevalence of small-pox during the first three decades of the present century; that previous to the introduction of vaccination, variolous inoculation was unanimously believed in and generally practised by the doctors of the self-styled "regular" profession in multiplying small-pox cases by spreading the contagion; that there is no evidence worthy of the name on record to prove that vaccination either prevents or mitigates small-pox; that many thousands of healthy children have died from the effects of vaccination; that millions of vaccinated people have died of confluent small-pox while having the plainest vaccine scars on their bodies; that small-pox epidemics invariably attack the vaccinated first; that small-pox is a filth disease which ever follows closely upon flagrant violations of the laws of hygiene and sanitation; that the occurrences of all the great epidemics of small-pox have coincided with periods of sanitary neglect; that cow-pox and venereal-pox have much in common; that the analogy between the manifestations of vaccinia and those of syphilis are so close that several of the most eminent pathologists of the world regard cow-pox as a modified form of syphilis; that the condition set up by vaccinia is often chronic and as protean in its manifestations as in syphilis; that the identity of cow-pox

and syphilis was first clearly pointed out by Dr. Hubert Boens-Boissan in 1882; that so-called "spontaneous cow-pox" is a myth; that cow-pox is a disorder not natural to the cow; that it never occurs in bulls or steers, nor in young heifers that have never been milked; that it is a disease of the milch cows which has been communicated to them from sores on the hands of milkers who were suffering from the "bad disease;" that when these facts are fully realized by the medical profession and the public, it will not take long to put an end to the crime of compulsory vaccination; that the community that has sanitary surroundings, a pure water supply, wholesome food, good health and freedom from the blood-poisoning incident to vaccination, need have no more fear of small-pox than of measles; that Leicester stands out clear and distinct above all the other cities in England, both as a rebuke to the vaccine practice, and as a testimony that salvation from the infection of zymotic diseases lies in the direction of sanitary regulations and hygienic habits of life; that the legitimate function of the true physician is not to *propagate disease*, but to *restore health* and *prevent disease*; that the attainment of health is the great desideratum; that a state of health is the ideal state to be sought after and attained; that immunity from the contagion of all disease is to be realized through the attainment of health, not by the propagation of disease; that vaccination has utterly failed to fulfil the flattering promises made for it by Jenner and his followers; that a portly volume could be filled with the records of these failures; that compulsory vaccination has been abolished in Switzerland and England, while laws sanctioning this crime still disgrace the statute books of "free" America; that compulsory vaccination ranks with human slavery and religious persecution as one of the most flagrant outrages upon the rights of the human race; that the vaccine operation, which consists in abrading the epidermis and implanting an indeterminate lot of microbes into the organism of a healthy person, is opposed to the laws of hygiene and to all the teachings of modern surgical practice; that immunity from the contagion of small-pox is to be realized through the *attainment of health*, not by the *propagation of disease*; that attention to hygiene and sanitation, supplemented by segregation of the sick, have robbed small-pox of all its terrors; that enlightenment on these subjects is sure to bring the conviction that the *propagation* of disease under the pretext of *preventing* disease has been a *malefaction* instead of a *benefaction* to the human race.