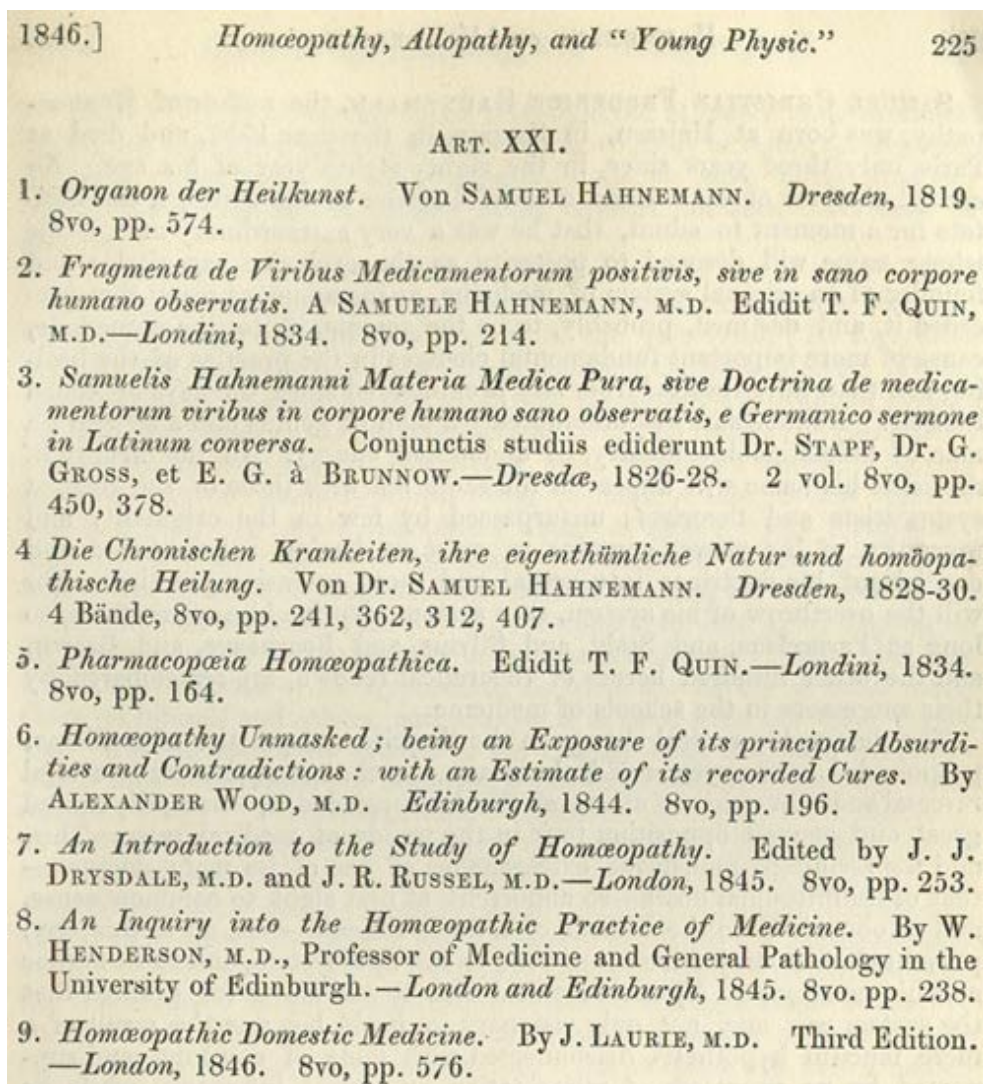


Forbes J (1846). Homoeopathy, allopathy and “young physic”. *British and Foreign Medical Review* 225-265.

Title pages



Key passages

The character of this evidence may be more particularly considered hereafter; we will only now remark, that its validity will depend entirely upon the quality of the evidence which they can adduce under the name of *experience*. If they adduce no other proof but the fact of diseases ceasing on or after the employment of their medicines, the fact, though repeated *ad infinitum*, if standing simply by itself, must go for nothing in the way of proof. If they can show a sufficiently large number of instances of two parallel series of diseases, the one series treated homœopathically, the other left to nature, and show that all or the vast majority of the one set were cured or benefited, and the other set not,—then, indeed, we shall be prepared to admit the conclusiveness of the argument based on experience. And in this case we must concede to the Homœopathists, that no argument based on the mere ground of a positive inconceivableness of a dose, or a supposed impossibility of its action, will have any weight. “Empty declamations,” to repeat Hahnemann’s own words, “must give way before the might of infallible experience.”

Not a shadow of *proof* exists that the symptoms were the consequence or direct effect of the medicine; while a thousand reasons can be adduced for supposing the contrary to be the fact. As the doses administered in these trials—at least, in the later and principal trials—were administered in infinitesimal doses, we are fully warranted in even denying entirely that *any* effect was produced by them. Before we can be called on to admit the recorded phenomena as *consequences* of the medicines, we have a right, as in the case of the treatment of diseases, to call for a parallel series of healthy persons set down to record all their sensations for days, after taking *no* medicines.

4. Many persons deny the truth of the homœopathic therapeutics, on the mere ground of the extreme improbability of the *theory* of disease adopted by the homœopathists. We do not admit the validity of this objection. If we once admit that the homœopathic doses possess a medicinal potency, and that this potency exerts itself in exciting actions analogous to those of certain diseases, we see nothing unfeasible in the doctrine that the new artificial action should destroy the previous natural or morbid one. At least, this is as good and rational theory as most of our orthodox medical theories. And, indeed, it is supported by several strong analogies afforded both by pathology and (allopathic) therapeutics.

But when—going far beyond all this—we find the homœopathist maintaining that substances utterly powerless in a state of sensible bulk, even in the greatest amount, acquire astonishing powers by mere subdivision, without any discoverable change in their physical or chemical properties,*—can any proposition be submitted to human apprehension that seems more utterly improbable—more ludicrously absurd? To be called on to believe that the decillionth of a grain of charcoal or oyster-shell, is capable of producing hundreds of the most formidable symptoms, and of curing, as by magic, the most inveterate diseases—while we can take ounces, nay, pounds, of the very same substance into our stomachs with no other inconvenience than its mechanical bulk—seems so gratuitous an outrage to human reason that the mind instinctively recoils from the proposition.

Many years ago, when in charge of a large body of men in the public service, we had occasion to treat an epidemic diarrhea, of considerable violence but not dangerous. Finding our patients recover as fast under one as another of several methods of treatment adopted, we thought there would be no unpardonable *lèse-majesté* either to our royal master of London or our divine master of Delos, in carrying our trials one step further. Accordingly, we put half of our remaining patients on a course of orthodox physic, and half on homœopathic doses of flour (*farin.* 30) in the shape of bread-pills; and it puzzled us sadly to say which was the most successful treatment.

In finishing our examination of the writings of the Homœopathists, we said, that we did not shrink from admitting and adopting the inferences—however unfavorable to Allopathy—which seemed necessarily to flow from the results of their treatment of diseases. The principal of these inferences have been already stated more than once. It seems necessary, however, to recapitulate the more important of them here. These are:—

1. That in a large proportion of the cases treated by allopathic physicians, the disease is cured by nature, and not by them.

2. That in a lesser, but still not a small proportion, the disease is cured by nature, in spite of them; in other words, their interference opposing, instead of assisting the cure.

3. That, consequently, in a considerable proportion of diseases, it would fare as well, or better, with patients, in the actual condition of the medical art, as more generally practised, if all remedies, at least all active remedies, especially drugs, were abandoned.

We repeat our readiness to admit these inferences as just, and to abide by the consequences of their adoption. We believe they are true. We grieve sincerely to believe them to be so; but so believing, their rejection is no longer in our power; we must receive them as facts, until they are proved not to be so.

Although Homœopathy has brought more signally into the common daylight this lamentable condition of medicine regarded as a practical art, it was one well known before to all philosophical and experienced physicians.

It is, in truth, a fact of such magnitude,—one so palpably evident, that it was impossible for any careful reader of the history of medicine, or any

long observer of the processes of disease, not to be aware of it. What, indeed, is the history of medicine but a history of perpetual changes in the opinions and practice of its professors, respecting the very same subjects—the nature and treatment of diseases? And, amid all these changes, often extreme and directly opposed to one another, do we not find these very diseases, the subject of them, remaining (with some exceptions) still the same in their progress and general event? Sometimes, no doubt, we observe changes in the character and event, obviously depending on the change in the treatment,—and, alas, as often for the worse as for the better; but it holds good as a general rule, that, amid all the changes of the treatment, the proportion of cures and of deaths has remained nearly the same, or, at least, if it has varied, the variation has borne no fixed relation to the difference of treatment.

COGITANDA—EXCOGITANDA—AGENDA.

1. To endeavour to ascertain, much more precisely than has been done hitherto, the natural course and event of diseases, when uninterrupted by artificial interference ; in other words, to attempt to establish a true Natural History of human diseases.

2. To reconsider and study afresh the physiological and curative effects of all our therapeutic agents, with a view to obtain more positive results than we now possess.

3. To endeavour to establish, as far as is practicable, what diseases are curable and what are not ; what are capable of receiving benefit from medical treatment and what are not ; what treatment is the best, the safest, the most agreeable ; when it is proper to administer medicine, and when to refrain from administering it ; &c. &c.

4. To endeavour to introduce a more philosophical and accurate view of the relations of remedies to the animal economy and to diseases, so as to dissociate in the minds of practitioners the notions of *post hoc* and *propter hoc*.

The general adoption by practitioners in recording their experience, of the system known by the name of the *Numerical Method*, is essential to the attainment of the ends proposed in the preceding paragraphs, as well as in many that are to follow.

5. To endeavour to banish from the treatment of acute and dangerous diseases, at least, the ancient axiom, *melius anceps remedium quam nullum*, and to substitute in its place the safer and wiser dogma—that where we are not certain of an indication, we should give nature the best chance of doing the work herself, by leaving her operations undisturbed by those of art.

6. To endeavour to substitute for the monstrous system of Polyphar-

macy now universally prevalent, one that is, at least, vastly more simple, more intelligible, more agreeable, and, it may be hoped, one more rational, more scientific, more certain, and more beneficial.

7. To direct redoubled attention to hygiene, public and private, with the view of preventing diseases on the large scale, and individually in our sphere of practice. Here the surest and most glorious triumphs of medical science are achieving and to be achieved.

8. To inculcate generally a milder and less energetic mode of practice, both in acute and chronic diseases; to encourage the Expectant preferably to the Heroic system,—at least where the indications of treatment are not manifest.

9. To discountenance all active and powerful medication in the acute exanthemata and fevers of specific type, as small pox, measles, scarlatina, typhus, &c., until we obtain some evidence that the course of these diseases can be beneficially modified by remedies.

10. To discountenance, as much as possible, and eschew the habitual use (without any sufficient reason) of certain powerful medicines in large doses, in a multitude of different diseases, a practice now generally prevalent and fraught with the most baneful consequences.

This is one of the besetting sins of English practice, and originates partly in false theory, and partly in the desire to see manifest and strong effects resulting from the action of medicines. Mercury, iodine, colchicum, antimony, also purgatives in general and bloodletting, are frightfully misused in this manner.

11. To encourage the administration of simple, feeble, or altogether powerless, non-perturbing medicines, in all cases in which drugs are prescribed *pro forma*, for the satisfaction of the patient's mind, and not with the view of producing any direct remedial effect.

One would hardly think such a caution necessary, were it not that every-day observation proves it to be so. The system of giving and also of *taking* drugs capable of producing some obvious effect,—on the sensations, at least, if not on the functions,—has become so inveterate in this country, that even our *placebos* have, in the hands of our modern doctors, lost their original quality of harmlessness, and often please their very patients more by being made unpleasant!

12. To make every effort not merely to destroy the prevalent system of giving a vast quantity and variety of unnecessary and useless drugs, (to say the least of them,) but to encourage extreme simplicity in the prescription of medicines that seem to be requisite.

Our system is here greatly and radically wrong. Our officinal formulæ are already most absurdly and mischievously complex, and our fashion is to double and redouble the existing complexities. This system is a most serious impediment in the way of ascertaining the precise and peculiar powers (if any) of the individual drugs, and thus interferes, in the most important manner, with the progress of therapeutics.

We are aware of the arguments that are adduced in defence of medicinal combinations. We do not deny that some of these combinations are beneficial, and therefore proper; but there cannot be a question as to the enormous evils, speaking generally, resulting from them. Nothing has a greater tendency to dissociate practical medicine from science, and to

stamp it as *a trade*, than this system of pharmaceutical artifice. It takes some years of the student's life to learn the very things which are to block up his path to future knowledge. A very elegant prescriber is seldom a good physician. And no wonder. Tailors, barbers, and dancing-masters, however learned they may be in the externals of gentility, are not expected to be fine gentlemen or men of fashion.

13. To endeavour to break through the routine habit, universally prevalent, of prescribing certain determinate remedies for certain determinate diseases or symptoms of diseases, merely because the prescriber has been taught to do so, and on no better grounds than conventional tradition.

Even when the medicines so prescribed are innocuous, the routine proceeding impedes real knowledge by satisfying the mind, and thus producing inaction. When the drugs are potent, the crime of mischief-making is superadded to the folly of empiricism. In illustration, we need merely notice the usual reference, in this country, of almost all chronic diseases accompanied with derangement of the intestinal functions, to "affection of the liver," and the consequent prescription of *mercury* in some of its forms. We do not hesitate to say, that this theory is as far wrong as the practice founded on it is injurious; we can hardly further enhance the amount of its divarication from the truth.

14. To place in a more prominent point of view the great value and importance of what may be termed the physiological, hygienic, or natural system of curing diseases, especially chronic diseases, in contradistinction to the pharmaceutical or empirical drug-plan generally prevalent. This system, founded as it is on a more comprehensive inquiry into *all* the remote and exciting causes of disease, and on a more thorough appreciation of *all* the discoverable disorders existing in all the organs and functions of the body, does not, of course, exclude the use of drugs, but regards them (generally speaking) as subservient to hygienic, regimenal, and external means,—such as the rigid regulation of the diet, the temperature and purity of the air, clothing, the mental and bodily exercise, &c., baths, friction, change of air, travelling, change of occupation, &c. &c.

15. To endeavour to introduce a more comprehensive and philosophical system of Nosology, at least in chronic diseases, whereby the practitioner may be led less to consider the name of a disease, or some one symptom or some one local affection in a disease, than the disease itself,—that is, *the whole* of the derangements existing in the body, and which it is his object to remove, if possible.

16. To teach teachers to teach the rising generation of medical men, that it is infinitely more *practical* to be master of the elements of medical science, and to know diseases thoroughly, than to know by rote a farrago of receipts, or to be aware that certain doctors, of old or of recent times, have said that certain medicines are good for certain diseases.

17. Also to teach students that no systematic or theoretical classification of diseases, or of therapeutic agents ever yet promulgated, is true, or anything like the truth, and that none can be adopted as a safe guide in practice. It is, however, well that these systems should be known; as most of them involve some pathological truths, and have left some practical good behind them.

18. To endeavour to enlighten the public as to the actual powers of

medicines, with a view to reconciling them to simpler and milder plans of treatment. To teach them the great importance of having their diseases treated in their earliest stages, in order to obtain a speedy and efficient cure; and, by some modification in the relations between the patient and practitioner, to encourage and facilitate this early application for relief.

19. To endeavour to abolish the system of medical practitioners being paid by the amount of medicine sent in to their patients; and even the practice of keeping and preparing medicines in their own houses.

Were a proper system introduced for securing a good education to chemists and druggists, and for examining and licensing them—all of easy adoption—there could be no necessity for continuing even the latter practice; while the former is one so degrading to the medical character, and so frightfully injurious to medicine in a thousand ways, that it ought to be abolished forthwith, utterly and for ever.

20. Lastly, and above all, to bring up the medical mind to the standard necessary for studying, comprehending, appreciating, and exercising the most complex and difficult of the arts that are based on a scientific foundation,—the art of Practical Medicine. And this can only be done by elevating, in a tenfold degree, the preliminary and fundamental education of the Medical Practitioner.

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