

The Case Against Vaccination

Walter Hadwen



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Mr. Chairman, Ladies and Gentlemen,—It certainly does one's heart good to see such a splendid and enthusiastic audience here to-night. It shows that one thing is very certain: that whether you are united upon the question under discussion or not you are deeply interested in the subject. Upon coming into the room I had placed in my hands a paper, written, I see, by Dr. Bond, in which he gives "Fifteen reasons why we should believe in the efficacy of vaccination as a preventive of smallpox." I do not know whether Dr. Bond is here himself, but should he be here, I will invite him to come on the platform and discuss those points with me after I have finished what I have to say. I have cast my eyes over them; I shall take up most of those arguments in the course of my address, and I have only now to say that every statement made in that paper has been smashed and pulverised thousands of' times before.

I had better, at the outset, state to you distinctly the position I occupy on the subject. I stand here not only as a medical man, but as a father and a citizen. As a medical man I look upon vaccination as an insult to common sense, as superstitious in its origin, unscientific in theory and practice, and useless and dangerous in its character; whilst as a father and a citizen I view the Compulsory Vaccination Acts as demoralising in their tendencies, degrading in their character, cruel and unjust in their enactments, and an unwarrantable interference with parental responsibility and liberty such as ought not to be tolerated in a country like

England, which has boasted of her civil and religious freedom for generations past.

One is constantly told that this is purely a medical question, and that if I want to air it I should discuss it before a medical audience or by letters in the medical papers. Those who say that know what is the treatment medical anti-vaccinists receive in the journals in question. But it is not a purely medical question. It is one of observation, of history and of statistics, and any intelligent layman can understand it as well as a medical man. It is a mere superstitious creed, and needs no professional knowledge to grasp it. And what is more, I can say from what I have learned in experience that intelligent, thoughtful and studious anti-vaccinators know more about this subject than the majority of the medical men of to-day. And, furthermore, I say that the very moment you take a medical prescription and you incorporate it in an Act of Parliament, and you enforce it against the wills and consciences of intelligent people by fines, distrains and imprisonments, it passes beyond the confines of a purely medical question - and becomes essentially a social and political one.

The medical profession of to-day is divided into two great sections. On the one hand we have a section, who form, I am bound to say, the majority, who believe that the only remedy for small-pox is vaccination with all its risks. On the other hand there is another section, the minority to which I have the honour to belong, which believes that the

remedy for small-pox is not vaccination but sanitation which is accompanied by no risk at all. We protest against the diseasing of children by Act of Parliament. We say that small-pox is a filth disease, and that if we get rid of the filth we shall get rid of the disease. We also declare that when a person is ill the doctor is justified in doing all he possibly can for his patient; but when a person is well he has no right whatever to interfere with the normal functions of the human body as he does when he introduces disease, especially the disease of an inferior animal, unless he can give a distinct and absolute guarantee, not only that the operation will effect the purpose avowed, but also that it will produce no injurious results. And with all the fifteen reasons Dr. Bond can produce I will defy him to give such a guarantee. It is a serious blot upon the medical profession that it has encouraged and that it has helped to enforce a measure and that the Gloucester doctors even to-day are urging the Guardians to prosecute in order to enforce it, when they cannot guarantee that it will effect the purpose professed, nor yet that it will produce no injurious results. The public vaccinators are told in their Orders that they must hold themselves responsible for the quality of the lymph they use. But where is there one who would think of doing so when he can but know that the operation is accompanied with risk? Therefore what right have they to interfere with healthy children? Remember, the Order is most distinct to public vaccinators that it is only healthy children that are to be diseased.

Thomas Carlyle has told us "that no error is fully confuted until you have seen not only that it is an error, but also how it became one." It will, therefore, be as well for me to take you over something of the history of the movement, and give an idea how this gigantic superstition and this monstrous fraud of vaccination came to be enforced, and came to be adopted by the profession and the public. The "discoverer" so-called was, as you all know, a man by the name of [Edward Jenner](#), who lived at Berkeley, in your own county. He was not, however, the discoverer. The whole thing was a superstition of the Gloucestershire dairymaids years before Jenner was born - and the very experiment, so-called, that he performed had been performed by an old farmer named Benjamin Jesty twenty years previously. Now this man Jenner had never passed a medical examination in his life. He belonged to the good old times when George III was King when medical examinations were not compulsory. Jenner looked upon the whole thing as a superfluity, and he hung up "Surgeon, apothecary," over his door without any of the qualifications that warranted the assumption. It was not until twenty years after he was in practice that he thought it advisable to get a few letters after his name. Consequently he then communicated with a Scotch University and obtained the degree of Doctor of Medicine for the sum of £15 and nothing more. It is true that a little while before, he had obtained a Fellowship of the Royal Society. but his latest biographer and apologist, Dr. Norman Moore, had to confess that it was obtained by little less than a fraud. It was

obtained by writing a most extraordinary paper about a fabulous cuckoo, for the most part composed of arrant absurdities and imaginative freaks such as no ornithologist of the present day would pay the slightest heed to. A few years after this, rather dissatisfied with the only medical qualification he had obtained, Jenner communicated with the University of Oxford and asked them to grant him their honorary degree of M.D., and after a good many fruitless attempts he got it. Then he sent to the Royal College of Physicians in London to get their diploma, and even presented his Oxford degree as an argument in his favour. But they considered he had had quite enough on the cheap already, and told him distinctly that until he passed the usual examinations they were not going to give him any more. This was a sufficient check in Jenner's case, and he settled down quietly without any diploma of physician.

The period in which he lived was undoubtedly a very filthy period. It was a time when, to take London for instance, the streets were nothing but a mass of cobble stones, the roads were so narrow that the people could almost shake hands across the street, and as for fresh air they scarcely knew anything about it, for locomotion such as we have to-day was unknown. Sanitary arrangements were altogether absent. They obtained their water from conduits and wells in the neighbourhood, Water closets there were none, and no drainage system existed. It was in London especially that small-pox abounded, where bodies were buried in Old St. Paul's Churchyard in Covent Garden only a foot below the

soil, and people had to get up in the middle of the night and burn frankincense to keep off the stench; and where those who could afford it had houses on each side of the Fleet river, so that when the wind blew towards the east they lived in the west, and when it blew towards the west they lived in the east. This was the condition of old London, and you cannot be surprised if small-pox was then what Dr. Bond calls a scourge; you cannot be surprised if small-pox has declined since, even after this wonderful discovery of vaccination and let us not forget that sanitary improvements began in London as early as 1766, and small-pox began to decline as a consequence before vaccination was invented.

I won't go now into the personal character of Jenner, but Dr. Creighton has well described him when he tells us that he was vain and petulant, crafty and greedy, a man with more grandiloquence and bounce than solid attainment, unscrupulous to a degree, a man who in all his writings was never precise when he could possibly be vague, and never straightforward when he could be secretive. This is the character that Dr. Creighton gives him; and as for the statement, which we constantly hear, that Jenner received such wonderful homage in the later years of his life, we well know that his closing years were years of misery as the failures of his fetish began to crowd upon him. It was on January 23rd, 1823, that he wrote his last letter to his confidential friend, Gardner, when he told him he was never surrounded by so many perplexities. Two days later Jenner breathed his last.

This practice of vaccination was simply a legend. The idea of charming away disease has been common in all countries and at all times, not only amongst the ignorant but amongst the educated. In old herb books we find how much the remedies for certain diseases depended on the jingle of the names; and there is no doubt that the way in which the idea got amongst the dairymaids that a person who had cow-pox never had small-pox depended upon the jingle of cow-pox and small-pox, and it was this which had such an extraordinary effect upon the mass of the people at that time. In the old herb books, for instance, we find that if you want to prevent suffering from the bite of a mad dog you must carry a herb called hound's tongue, and again, to prevent the ill-consequence of a dog bite you must take a portion of the root of a dog rose. This kind of thing was common at that time; it was a most superstitious period in which Jenner lived, when live frogs were swallowed for the cure of worms; when cow dung and human excreta were mixed with milk and butter for diphtheria; when the brains of a man who had died a violent death were given in teaspoonful doses for the cure of small-pox. Even Jenner had invented, not merely a cure for smallpox, but also one for hydrophobia, which quite takes the steam out of Pasteur's treatment. All you had to do was to duck the man who had been bitten three times in a stream of running water, only taking care that each time you ducked him life became almost extinct. He said he never knew that to fail under any circumstances. He evidently had an idea that persons bitten by a mad dog become possessed of an evil

spirit, and should be treated as they used to treat the witches. So much for Jenner.

When he first of all heard the story of the cow-pox legend that the dairymaids talked about, that if you only had cow-pox you can't have small-pox, he began to mention it at the meetings of the Medico-convivial Society, where the old doctors of the day met together to smoke their pipes, drink their glasses of grog, and talk over their cases. But he no sooner mentioned it than they laughed at it. The cow doctors could have told him of hundreds of cases where small-pox had followed cow-pox, and Jenner found he would have to drop it.

In 1796, however, he performed his first experiment as it is called. He took a boy named [James Phipps](#) and inoculated him with some lymph which he took from a cow-pox vesicle. A short time afterwards he inoculated this boy with small-pox, and for very solid reasons which could be explained, the small-pox did not take. Now," said Jenner, "is the grand discovery. This will answer my purpose, and I shall soon be able to get another paper for the Royal Society," to follow in the wake of the glorious cuckoo, which has been wittily termed "the bird that laid the vaccination egg." That was in 1796, and we are close upon the century since that wonderful experiment. Russia is preparing to celebrate it, and the Bristol medical men are sending round for subscriptions for £1,000 in order to purchase the relics of this wonderful man— such as his

snuff box, his lancets, and the chair the great man sat in—to put in the museum of the Bristol University. I have noticed that the doctors have omitted one important article which appeared in the Bristol Exhibition—a hair from the tail of the first cow that supplied the vaccine lymph. I am sorry they have left that out. I am sure nothing would so stir the hearts of the coming race of medical men as an evidence of belief in the principle contained in the old herb book by which a person had to carry a hair of the tail of the dog that bit him. I do not know whether the sensation from Russia is going to filter through to England, but unless you people in Gloucester are going to be swayed by the manifesto issued by the medical men my advice to you is to keep your rejoicings for the 5th November, and then if you happen to be hard tip for a companion for Guy Fawkes I would advise you to have an effigy of Edward Jenner to help feed the flames of your bonfire.

Jenner inoculated this boy James Phipps in 1796. Then, as soon as he had done that, he wrote it down and went round the neighbourhood collecting desultory information with regard to cow-pox and cow-poxed milkers. He got cases of those who had had cow-pox years before and had never had small-pox, as if everybody was bound to have the small-pox. Then he took some worn-out paupers, over 60 years of age, who had had the cow-pox years and years before and inoculated them with small-pox to see if they would take. He found they did not take, because as people get advanced in life they are more or less proof against it. " This," said

Jenner, "is the grand proof of the value of inoculation of cowpox as a preventive of small-pox."

These were the materials which he got together in order to present his paper to the Royal Society. It was not to be surprised at that, with miserable material such as this, the Royal Society, though at that time at so low an ebb scientifically, should, nevertheless, immediately reject his paper as unsatisfactory and unsuited to a scientific society or a healthy public. Jenner took care in that paper never to mention the cases of people who had cow-pox and had small-pox afterwards, he mentioned the cases of a dozen old men who had cow-pox and did not take small-pox afterwards, but he could have had hundreds of cases who had had both. These he took good care never to say anything about. As soon, however, as he came back with his paper the cow doctors were at him. They said this was all rubbish and began to pour on him hundreds of cases, just as we pelt the pro-vaccinists with figures showing that 90 per cent, of those who have had small-pox have already been vaccinated.

So Dr. Jenner soon found he would have to change his whistle, and invented a novel idea. The idea he started was this: he said there are two kinds of pox. One is the genuine kind and the other spurious, and those who have had cow-pox and yet have had small-pox afterwards, have had the spurious variety. Those who had cow-pox and did not have small-pox afterwards were those who had had the genuine

disease. This was a very clever and specious kind of argument, and the next thing that Jenner had to do was to find out where the genuine cow-pox could be found. Accordingly, on going into a stable one day he found that a cow had been affected with a very peculiar kind of disease that was produced in this way. It seems that a man had been seeing to the grease upon a horse's heels, and had gone to milk the cows without washing his hands. The result was that it produced that peculiar kind of disease known by the name of horse-grease cow-pox. "This," said Jenner, "is the life-preserving fluid," and he went home to write about the wonderful virtues of horse-grease cow-pox. However, it was necessary to perform an experiment, and he inoculated a boy named John Baker with horse-grease, direct from the horse's heels. He intended later to inoculate him with smallpox in order to see whether it would take, but it was something like the case of the man, you remember, who had an idea that if he only gave his horse a gradually diminishing diet he would at last be able to keep it on nothing. You remember that the horse died before the experiment could be completed, and it was the same with John Baker, for the poor boy died in the workhouse directly afterwards from a contagious fever contracted from the inoculation.

He then took some of the horse-grease cow-pox and inoculated six children, and without waiting to see the result or to prove whether it would take or not he rushed to London to get his paper printed. And in that paper he had

the audacity to assert that it was not necessary to wait to see the result because the proofs he already had were so conclusive, and time experiments had told such an extraordinary tale—although he had completed but one experiment in his life, and that did not prove it at all. That boy James Phipps was hawked about the country as a proof of the value of vaccination, but he had not been inoculated with horse-grease cow-pox at all, but with spontaneous cow-pox, which Jenner now declared in his second paper was absolutely useless and unprotective against the disease!

But as soon as the paper was published the outcry was tremendous. "What," said the people, "take horse-grease, filthy grease from horses' heels, take that and put it into the blood of a child?" No, they would have nothing to do with it. They did not mind having cow-pox without the horse, but they could not think of having the cow-pox with the horse in it. Dr. Pearson wrote Jenner telling him he must take the horse out, or "it would damn the whole thing." Consequently—there is no accounting for taste—they denounced horse-grease cow-pox, but were prepared to accept spontaneous cow-pox.

What did Jenner do? Did he attempt to stick up for his creed or to prove that he was right? No; he wanted money. He said he was looking forward "in the fond hope of enjoying independence," declaring he was in an impecunious condition. He accepted the verdict of the people. They wanted cow-pox; they should have it. And accordingly he

wrote a third paper and tried to wipe out what he had written before. With the exception of a solitary footnote, in that paper, horse-grease cow-pox was not mentioned at all, and he fell back on the spontaneous cow-pox theory which he had previously denounced as useless and unprotective. This spontaneous cow-pox is what we are recommended to have by Dr. Bond in almost his last clause, i.e., lymph direct from the cow—which is denounced by the discoverer himself as absolutely unprotective against the disease in question.

Well, having told you briefly the history of the matter, you may ask, "However was it that this thing was foisted on the people? How came the medical men of the country to accept it?" In the first place science was then at a very low ebb. It was about that time Joanna Stephens lived. She had a wonderful remedy for stone, which gained great notoriety. There was much anxiety to obtain it, and at last a subscription list was opened. It was headed by the Archbishop of Canterbury, and all the leading doctors subscribed. Joanna wanted £5,000 for her recipe. The money was obtained amid the recipe came to light. It ran as follows: "My medicines are a powder, a decoction and a pill. The powder consists of egg-shells and snails, both calcined. The decoction is made by boiling some herbs (together with a ball, which consists of soap, swine's cresses burnt to a blackness, and honey) in water. The pills consist of snails calcined, wild carrot seeds, burdock seeds, ashen keys, hips and haws, all burnt to a blackness, soap

and honey." She got her £5,000 and the doctors got their recipe: they say that fools and their money are soon parted. I don't begrudge either. Joanna Stephens the money or the doctors her recipe, but I don't think any more of the doctors in consequence, and we can't be surprised at their accepting with so little opposition the wonderful recipe of Jenner for small-pox.

There was another reason why they accepted it, and that was that the majority of the doctors of that time had never heard of or seen cow-pox. Dr. Denham, writing at that time, said the majority had never heard of it. However, when Jenner came forward with the letters F.R.S., M.D., after his name, with all the impudence of a charlatan, saying, "Such is the singular character of my discovery that a person who is once inoculated with cow-pox is for ever afterwards secure against small-pox," the whole of the profession was arrested by the deliberate statement made, and they all bowed down before the golden calf which [Nebuchadnezzar](#) the king had set up.

Another reason was that inoculation had turned out a failure. What was inoculation? It consisted in this: It was supposed at that time that small-pox was a permanent evil influence amongst us, and that everybody was obliged to have it some time or other before they died. Consequently it was thought if they could only have the small-pox in a mild form and at a convenient season it would be nice to have it over, just as mothers now think that their little ones must

have measles, scarlatina, whooping-cough, Chicken-pox. etc., and are glad to get it over. It was consequently said, what is more simple? Let us give the people a mild case of smallpox when they are well and able to resist it. This idea, which became very popular, first of all originated in India. They had there a small-pox goddess whose name was Matah, and the Hindoos used to inoculate themselves with small-pox in order to appease the goddess, fancying that if they did so and if small-pox came along they would then have it in a very mild form, or, perhaps, that her Majesty would look kindly upon them and they might not have it at all. This filtered through to the Ottoman Court, and in 1721 [Lady Worthy Montague](#), wife of the then Ambassador, was so struck with it that in her letters to London she told them that everybody in Turkey was being inoculated with small-pox. Coming from such a person and from the very cream of Society the people were taken with it, and it became the fashion through the length and breadth of England to inoculate with small-pox. But they soon found that it spread the disease tremendously. It was between 1700 and 1800 that small-pox was so rife. You don't see so much now. Why? They were then giving people small-pox right through the country by inoculation. Dr. Bond talks about the unanimity of the profession. Why, the whole profession were unanimous about that then! They said inoculation was the thing and that it must be done. Talk about the unanimity of the profession! That goes for nothing; we have principles to deal with, not the unanimity or otherwise of the profession. Majorities are never a proof of the truth. The

consequence was that small-pox spread, for though a person inoculated might have it mildly he was able to give it to others much more severely. Dr. Lettsom, writing in 1806, tells us that whereas smallpox deaths for 42 years before inoculation were only 72 per thousand, they were 89 per thousand in the 42 years after. Consequently the doctors were getting staggered, though they carried this out unanimously for 80 years, and when Jenner came forward and said, "Here's a mild kind of small-pox; it's not infectious; it is certain to stop the small-pox;" why, the doctors at once fell in with it and received it with open arms. The people craved for it, and instead of wanting to get the small-pox over as before, everyone began to cry for the cow-pox which Jenner brought before their notice. In the first twelve months the King had accepted it, the Queen and her courtiers had fallen in with it, and the illegitimate sons of the Duke of Clarence were vaccinated with it. And when they saw this done honest mothers knew their doom. And depend upon it, my friends, such was the terror of small-pox inoculation at that time that if you and I had been living then I am quite sure we should have joined the "genteel mob."

Two years after that the whole of the London doctors signed a testimonial and declared that this discovery was such that persons once vaccinated were for ever protected against small-pox. We have found out since then by experience that doctors are as liable to make mistakes as other people. It would have been just as well, before putting their pens to a

testimonial like that, to have remembered the old proverb, "Never prophesy until you know."

They very soon began to talk about compulsion. In 1840 vaccination was paid for out of the public rates, and the doctors said inoculation must be put down. The vaccinators and inoculators—here were two sets of doctors then, as now—fought against one another like the pro-vaccinists and the anti-vaccinists at the present time. The vaccinists were in a majority, and could not rest until they had the inoculators put down. Consequently in 1840 an Act was passed that anybody who tried to inoculate another with small-pox would be liable to a month's imprisonment. In 1853 they managed to pass that Compulsory Vaccination Act which we are here to protest against to-night. I think one of the most serious complaints against the whole system is this: They dare not trust it to its own merits. Do people want small-pox? If the System is any good it will speak for itself; if it is bad they have no right to enforce it. You may ask, "Why was compulsion necessary?" The reason was simply this—the people were beginning to find out it was no good ; they were beginning to clamour again for inoculation, and the working classes, who reason more by the hard facts of experience than by medical dogmas, found that it was not the slightest use for protecting People against smallpox. In 1811 there had occurred a notable instance of failure. Lord Robert Grosvenor, ten years of age, who had been vaccinated by Jenner himself, was now taken with small-pox, and lay hovering between life and death. Jenner

sat by the bedside of his illustrious patient, and when at last the boy began to turn and get better Jenner turned to the father with "What a lucky job he was vaccinated. If he had not been, he would surely have died." Thus Jenner started the glorious doctrine of mitigation, which has been handed down as the heirloom of the medical vaccinists ever since.

Another reason why the doctors accepted it was this: Jenner gave a brand new name to cow-pox that had not been heard of before, he called cow-pox small-pox of the cow, or Variolae Vaccinae, but you may search in vain for any attempt upon his part to prove it. He might as well have called it diphtheria of the cow, for all the analogy it bore. It gave a scientific air to the whole thing, although there was just as much science in it as in the heads of the old women of Gloucestershire. The theory was this Cow-pox is small-pox of the cow; therefore, if you give a person this cow-pox it is the same as small-pox, only in a very mild form, and it is not infectious. Sir John Simon, the great high priest of the vaccine cult in England for many years, said that the reason cow-pox prevents small-pox is because it is small-pox, and that a person who has had cow-pox has really passed through small-pox. And Jenner himself absolutely declared that it is not that cow-pox is a preventive of small-pox but it is small-pox itself. Look at the incongruity of the whole thing. Someone has remarked that "the law's an ass," and I am sure it is in the present instance. By the Act of 1840 anyone who gave another small-pox was liable to a month's imprisonment; by the Act of 1853 if you don't give another

small-pox—which is what cow-pox is supposed to be—you are liable to a fine of £1 and costs. So that between the two things, as Mr. Alfred Milnes has said, "a man is about as happy as a Jew in Russia."

What is cow-pox? It is a disease which occurs on the teats of cows; it only occurs when they are in milk; only in one part of the body, and naturally only in the female animal; it results in an ugly chancre; and is not infectious. Small-pox, on the other hand, is not limited to the female sex as is cow-pox, nor to one portion of the body; it presents different physical signs, and, furthermore, is tremendously infectious, and the course and symptoms of the two diseases are totally different. Therefore there is no analogy between the two. Badcock, of Brighton, accepting this theory, however, inoculated a number of cows with small-pox, and fancied that it should have become cow-pox. But it never produced anything but small-pox. So much had this question obscured the minds of the medical profession that the French savants formed the Lyons Commission to go thoroughly into the whole thing, and Mons. Chauveau, the eminent French scientist, after experimenting, told his Government that it was totally impossible to convert smallpox into cow-pox. The fact is, as Dr. Creighton said, to try and turn small-pox into cow-pox you may as well try to convert a horse chestnut into a chesnut horse. If they can turn cow-pox into small-pox I say let them do the conjuring trick backwards, and I'll believe them.

Look at the absurdity of the whole thing! For the sake of argument take it for granted that cow-pox is small-pox, and that to vaccinate is to give small-pox. Then, according to Jenner's theory, the person inoculated with small-pox should not take it, like his case of James Phipps. But is it not a fact that you can be successfully re-vaccinated frequently? If, therefore, vaccination is a form of small-pox, it does not prevent you having "small-pox" again. If once vaccinating does not prevent your being re-vaccinated, how can it protect against the genuine article? If it can't protect you against the bite of a cat, how can it against the scrunch of a tiger? Why, these Gloucester doctors, in boasting of their re-vaccination, are absolutely damning their whole creed, for if their theory were correct they have no business to be able to be re-vaccinated at all! But I may be told, this may be true enough. There may be no science in it—and I have no hesitation in saying that the gentlemen alluded to by the Chairman, Dr. Crookshank and Dr. Creighton, have knocked the bottom out of this grotesque superstition and shown that vaccination has no scientific leg to stand on—but there are some remedies, which, though you can't prove the physiological effect they have or see the science that belongs to them, yet you know by experience will produce certain results. Now let us test vaccination by this law.

I have clearly proved that there is no science in vaccination; now we will see what experience has to say upon the subject. Since the passing of the Act in 1853 we have had no less than three distinct epidemics. In 1857-9 we had

more than 14,000 deaths from smallpox; in the 1863-5 epidemic the deaths had increased to 20,000; and in 1871-2 they totalled up to the tune of 44,800. It might be asked; Did not the population increase? Between the first and second epidemics the population did increase by 7 per cent., but the smallpox deaths increased by 41 per cent. Between the second and third epidemics the population went up by 9 per cent. and the small-pox by 120 per cent. Small-pox is an epidemic disease, and if cow-pox is to do anything as a preventive of small-pox it should prevent an epidemic. It is all very well to say what a splendid protection it is when there is no epidemic about, but the question is: How will it stand when small-pox comes? But, as Dr. Druitt has well remarked:

"You may just as well try to stop small-pox epidemics by vaccination as to prevent a thunderstorm with an umbrella." In 1880 the Registrar-General reported that although typhus fever and other zymotics had gone down, the only one to show a rise was small-pox; i.e., after thirty years of compulsory vaccination it was 50 per cent above the average of the previous 10 years. We got rid of the black death and gaol fever entirely. What did it? Good water, good drainage, and the whitewash brush. Yet the only zymotic which shows a notable increase is the only one against which a special prophylactic has been used, and so remarkable was this that the Registrar-General had to draw attention to it. Undoubtedly small-pox would have gone too

if the inoculators had not taken such pains for nearly 100 years to establish it in this country.

I constantly find that when the pro-vaccinists are driven into a corner as to the failures occurring in this country they always adopt the plan of Jenner, and invite us to look at the brilliant successes in other countries. As soon as ever they are asked to remember the number of vaccinated people who get small-pox they say, "Oh, look at Ceylon," "come with me to the plains of India," or they ask you to hook into Central Africa and "see what vaccination does there." Yes, it is all very well to be carried away to those countries where no Registrar-General is kept and no official statistics have ever been published.

They say, "Look at Prussia, and the way vaccination has stamped out small-pox there." Very well, we will look at Prussia, which, I may say, has kept better vaccination records than any other country in Europe, except, perhaps, Sweden. In 1834, which is twenty years before England adopted the Compulsory Vaccination Act, so severe was the Act in Prussia that, in addition to primary vaccination, every child had to be vaccinated over again when he started upon his school life; he had to be re-vaccinated on going from college to college; and re-vaccinated over again when he entered the Army, which meant every healthy male out of the whole of Prussia. And so severe was the Act that if any man refused to be vaccinated he was ordered to be held down and vaccinated by force; and so thoroughly was it

done that he was vaccinated in ten places on each arm. That was stiff enough for anybody, I should think. In 1871-2—thirty-five years after this Compulsory Vaccination Act—came the terrible epidemic which swept all over Europe. It came to Prussia, and what was the result? In that year small-pox carried off no less than 124,978 of her vaccinated and re-vaccinated citizens after thirty-five years of compulsory vaccination of the description which I have referred to! This roused Prussia, and she began to look about her; she saw the cause, and she was determined to remedy it. She brought good water into her cities, purified her river Spree, introduced a complete drainage system throughout the country—she got rid of her "rookeries," and ordered model barracks to be built for the soldiers; and away fled the small-pox, like the Philistines before the Children of Israel. Sanitation did for Prussia what 35 years of compulsory vaccination was unable to accomplish. At the present time in Prussia small-pox is almost extinct. It is not that people 'are being vaccinated more; they are vaccinated less. They hate it in Germany as we English people do; and you can now get out of vaccination there by the payment of a shilling fine. Even the very children in Germany know well enough how it is hated, and in proof of this I may relate to you an amusing incident, A school inspector went to one of the schools the other day and asked the question of the class, "Why was Moses hidden by his mother in the bullrushes?" Very soon a little fellow put up his hand and replied, "Please sir, she did not want him to be vaccinated."

We will now come nearer home and take the Metropolitan Asylums Board and their statistics. From 1870 to 1886 there were 53,579 cases of small-pox, and out of that number there were 43,919 who had undergone the process spoken of by Sir John Simon as "removing every taint of susceptibility to infection." But you may say, perhaps, "Will it protect for a time?" "Well, I should like to know for how long? Dr. Bond says up to fourteen years, some people say ten; in Birmingham they were rejoicing the other day that they had had nobody take small-pox, no vaccinated child, under three; so that it has got down rather low. Jenner said that to talk about re-vaccination was to rob his "discovery" of half of its virtues; he was dead against it by the statement he made that one vaccination was protection for a life-time. On that he got £30,000. Dr. Bond tells us that that was altered afterwards, and that it was not the expression of Jenner's matured vision. No, Jenner altered it afterwards; he got his £30,000 first, though. He never yielded up the £30,000 when he found he had made a mistake.

How long will it protect? Dr. Bond talks about the Sheffield epidemic in his letter two or three days ago, and I have no doubt Mr. French Hensley, to whom he replies, will very soon put the matter straight. He tells us that the Sheffield statistics show a wonderful immunity of vaccinated children. Dr. Bond bases that upon the marvellous statistics of Dr. Barry. Dr. Bond has evidently never read the Royal Commission reports at all. It looks as though Dr. Bond has

never seen the cross-examination of Dr. Barry. Dr. Bond has no idea of the fatal fallacy underlying the Sheffield epidemic report, which came to an utter collapse when Dr. Barry was cross-examined upon it. He has no idea of all that; he is evidently something like the old lady Sydney Smith talked about, who never read anything on the opposite side of the question in case she should be prejudiced. If it had not been for the Sheffield report—I am very pleased it was brought forward, although it is a perfectly hollow thing so far as facts go—we should not have had the Royal Commission. The vaccinators thought when it fell into Government quarters that they had such a tremendously strong case that the anti-vaccinators would have been wiped off the scene. But when it came before the Royal Commission, Dr. Collins, one of the Commissioners, took Dr. Barry in hand and very soon spoilt the whole game; and it turned out that the whole of the report, from beginning to end, was nothing but a statistical trick, based upon evidence collected by census collectors towards the close of the epidemic instead of at the beginning, when many of the unvaccinated had passed over to the vaccinated class. I will give you some statistics with regard to Sheffield as far as one can gather them, which I take out of this very report. There were ten cases of small-pox under one year old, 87 cases under five years of age—vaccinated all of them—and 241 cases of vaccinated small-pox between the ages of five and ten. In spite of what is said about vaccination protecting up to 14 years of age, this splendid report, that Dr. Bond speaks of with such admiration,

declares that Dr. Bond's theory is as false as anything can be, for it gives no less than 338 cases of vaccinated small-pox under ten years of age.

Well now, let us see what vaccination did for Sheffield. This Sheffield epidemic occurred in 1887 in the very worst quarter of the town, on 135 acres of the most horribly insanitary part of the town, which was condemned years ago by the Government Inspector, and it has never been put right yet. That is where small-pox has always broken out, that is where small-pox has flourished: and when this tremendous epidemic took place on they went, vaccinating and re-vaccinating; and still the small-pox epidemic spread. There were no less than 7,000 cases of small-pox, and, alas! 600 deaths, and still the small-pox went on; until at last God in his mercy opened the floodgate of heaven and down came the rain, which washed the sewers and the drains, cleared away the refuse from the gutters, washed the dirt from the streets and the filth from the slums and away went the small-pox. Pure water accomplished for Sheffield what 56,000 vaccinations had been unable to effect.

Again, take Gayton, a great authority with the pro-vaccinists, who in his book entitled "The Value of Vaccination" shows that of 10,403 cases of vaccinated small-pox 20 cases were under one year old, 341 between one and five, and 945 between five and ten; i.e., 1,306 cases of small-pox in vaccinated children, in order to prove the efficacy of vaccination.

"But," we are told, "the children don't die." Well, that may be all very well; we will see whether they die or not. Turn to Germany, for instance. During that epidemic I spoke of just now there were 2,140 cases of children under ten who had small-pox, and 736 of them died; there were 1,503 cases vaccinated under five, and there were 573 deaths. You may say,

"Then why is it they don't die in this country?" Turn to the Muller's Orphanage in Bristol. In 1872 there were 740 children, all vaccinated, and 292 cases of small-pox amongst them, and there were 17 deaths. But I can give you the reason, perhaps, why the children don't die—why vaccinated children don't die from small-pox so much as we should expect. In 1886, for instance, there were 275 cases of small-pox deaths altogether throughout England and Wales; there was only one vaccinated child that died from small-pox under ten years of age, but there were 93 children who died from "chicken-pox." And the Registrar-General, in commenting upon the fact, declared that nearly, if not all, those cases should have been registered as small-pox, because chicken-pox "never kills "; and Dr. Ogle, the chief in the Registrar-General's Department, told the Royal Commission as a witness before it, that he had never known chicken-pox kill a child in his life. Why were not they registered as small-pox? In 1893, the last published returns we have, there were 127 children who were reported to have died from "chicken-pox"; so perhaps that will explain why "the children don't die."

Then they say if it will only protect for a time re-vaccination is the thing. I want to know how often are we to be re-vaccinated? Jenner said once was enough; Dr. Thorpe Porter, Superintendent of the Dublin Small-pox Hospital Sheds, says he has no faith in re-vaccination; Dr. Pringle, the great Indian vaccinator, says re-vaccination is an unpathological and unphysiological blunder; whereas Dr. Seaton says that to be vaccinated once at puberty is quite enough; Sir William Jenner says you ought to be vaccinated once in infancy, again at seven years, and again every time an epidemic comes along; Dr. Oakes says you ought to be vaccinated every ten years; and a great German vaccinator, whose name I won't attempt to pronounce, says you ought to be vaccinated every four months until you cannot be re-vaccinated any longer. What, to be kept in a constant state of cowpox in order to prevent small-pox? Why, I would sooner have the smallpox—it would be a thousand times better—and have done with it.

Then people say, "What about the nurses; why, don't you know that for 50 years there has not been known a single nurse in any small-pox hospital who has taken the small-pox, because they have been re-vaccinated?" Dr. Cory was responsible for the card which has been handed for years to mothers who brought their children to the vaccination station, and which served to stamp this delusion upon the country; and when Dr. Cory was before the Royal Commission this card was brought to his notice. "How is it that it has been published; is it a fact?" he was asked, and

the answer was "No." "Is it not a fact that nurses who have taken small-pox had been re-vaccinated?" "Yes." "How is it that you printed this?" "Oh," said Dr. Cory, "originally the card was simply concerning Highgate Small-pox Hospital and it was the printer"—oh, that naughty printer—"who deleted the definite article when it ought to be there, who put an 's' after the 'I' who dropped out two capital letters instead of leaving three, who scattered the word Highgate, and left it as a matter for generalisation!" In Highgate Small-pox Hospital we know that whenever it was possible they got the nurses from the small-pox patients, and the reason these did not have it was because they had had small-pox beforehand, Now take the nurses in the fever hospital. Dr. Hopwood lately declared that no nurse had died in the Fever Hospital of London for ten years. But they were never vaccinated against fever, and why did not they die? The fact of the matter is this, the small-pox nurse fable is a very absurd one. We know well enough that small-pox has the faculty of taking hold of the weakest; that is the reason why children, whether vaccinated or not, naturally fall the easiest prey. In Gloucester you have practically no vaccinated children to suffer. It depends upon the constitution and the amount of resisting power to the disease. The nurse is a selected person—she will never be likely to be taken on as such unless she is perfectly healthy; As I said, she is frequently taken from the ranks of the small-pox patients, but otherwise is perfectly healthy; she has good food, regular exercise; she works in a well-ventilated ward; amid, what is more, she has no fear—

which I believe is one of the greatest protectives under the sun. She is in a far better position than her patients who, as a rule, come from insanitary places, from the slums and dens of our cities; and it is not, therefore, to be wondered at that the nurses should be able to resist the small-pox. Even in the time of the plague, when vaccination was not dreamed of, it was remarked in all the old writings that the doctors and nurses rarely if ever caught the disease. But it is not that the nurses do not take it, Dr. Cohn, of the Paris Small-pox Hospital, said that in the hospital he had no less than 200 nurses re-vaccinated under his own eyes, and yet out of that number 15 took small-pox and one of them died. Furthermore, he tells us that at time Bicetre hospital there were 40 medical attendants and apothecaries who never contracted small-pox at all, although they had neglected to be re-vaccinated; and he mentions, moreover, 40 sisters of mercy who were right in the very centre of the hospital who refused to be re-vaccinated, and not one of them had small-pox.

Then look at our re-vaccinated Army. From 1860 to 1888 we had no less than 3,953 cases of small-pox in the British Army, and 391 of them died. If re-vaccination won't protect the soldier, how is it going to protect the nurse? In Egypt in 1889 they died at the rate of 1,750 per million from small-pox. But, as a matter of fact, the Government do not believe in re-vaccination. The other day, when the epidemic broke out in London, a regiment of soldiers was stationed at St. John's Wood, near, and so terrified were the Government

with regard to the matter that an urgent order came down from the Horse Guards sending the regiment right away to the other end of England, lest the re-vaccinated soldiers should catch small-pox. I heard an amusing incident the other day about a magistrate who had some of those "ignorant fanatics" like some of you—before him. He told the defendants that they ought to be ashamed of themselves letting their children go unvaccinated, and added, "Why, I would not let my children go unprotected from this dire disease on any account." A short time afterwards illness came into his house, and the doctor told him that a servant had the small-pox; and no sooner did the old gentleman hear that than his courage oozed out at his finger-tips, and he sent for the nearest fire-escape in order that the children might be taken away through the window, so as to avoid passing the door of the infected chamber. Then there are those doctors who tell us that not only have they been re-vaccinated, but that if a small-pox epidemic occurred they would be done again, which shows that they have not much faith in re-vaccination. At Berkhamstead, Sir Astley Cooper, who has been sitting on the Bench, declared in a speech on the subject that he had been vaccinated no less than seven times, and such was his wonderful faith in the operation that he declared, with all the courage of a Roman gladiator, "If an epidemic occurred, I would go and be vaccinated again." Why, if they had tattooed the old gentleman from head to foot he would still be crying, "Do, pray give me more vaccination."

Then they tell us that vaccination will mitigate the disease that it will make it milder. I should like to have it proved. How are we to know how severely a person is going to have small-pox? If everybody who had been vaccinated had it in a milder form and every person who was unvaccinated had the smallpox more severely, there would certainly be some ground for the argument. But we know well enough that long before vaccination was dreamed of the usual kind of small-pox was the mild; and, as Dr. Wagstaff wrote to Dr. Freind in 1721 "There is one kind of small-pox which the doctor cannot cure, and another kind which the nurse cannot kill." That is quite enough to show there were very mild cases of small-pox at the time; and Dr. Plot in 1677, in speaking of an epidemic at Oxford, tells us that the whole of the cases were extremely mild, and that with proper care they all recovered. So that before ever there was vaccination there was plenty of mild small-pox.

Look at the hospital statistics, and see what they have to say. I find from the last published statistics, which are for 1893—I am now speaking from memory—that there were 150 unvaccinated cases and 253 vaccinated, but 1,054 cases were never stated at all. When out of a total of 1,457 cases over 1,000 are left undescribed, and we are not told whether they were vaccinated or not, what confidence can you have in such statistics? I say that such statistics as those, upon which vaccinators base their case, are nothing more nor less than a fraud.

Now, you test the mitigation theory by malignant cases. Mr. Alexander Wheeler proved before the Royal Commission that of those said to be vaccinated 82 per cent died, and of those with good marks 85 per cent died; so that the well marked patients come worse off when vaccination is most needed. The argument we generally get is this: If a person happens to have been vaccinated and he goes through life without catching small-pox they say, "What a splendid thing it is that he was vaccinated"; if he has a mild attack they say, "How very fortunate he was vaccinated, or he would have had the small-pox very severely"; if he happens to have a severe attack we are told, "It was a lucky job he was vaccinated, or he would have died "; and if a person who has been vaccinated should have the impudence to go and die, then we are coolly told, "Oh, he had not been vaccinated properly."

In the hospital statistics of to-day you generally find that the unvaccinated people die at the rate of from 30 to 60 and even 80 per cent. or higher; and yet when we come to look at the fatality of the last century and the horrible condition of things which I have mentioned to you, we find that the fatality was only 18 per cent. If, therefore, the fatality of unvaccinated people last century was only 18 per cent., and the average fatality of the present day amongst the unvaccinated runs from 30 to 80 per cent., I want to know, like Trehawney's Cornishmen, "the reason why." I do not believe the doctors of the present day are less competent than those of a hundred years ago; and therefore why

double and treble the number of unvaccinated patients who are slipping through their fingers as compared with a century before? It is not for me to explain this. Let them explain it themselves. Mitigation is therefore a sham. I remember that the Duke of Connaught, although vaccinated with the very finest and the most recherché lymph, had the small-pox afterwards, and they could not understand it. A great deal of interest was aroused upon the point, and the doctors came to the conclusion that his Royal Highness could not have been vaccinated properly. Why, if a Royal Vaccinator cannot do their work properly what must you poor wretches expect from the rank and file of the profession?

Then we are told it goes by the marks: that you must have a certain area, a certain shape, and a certain number. In fact there are any amount of shuffles: as Cobbett used to say, "Quackery has always one shuffle left." When you come to remember that you can have no less than 70 different kinds of marks from the same lymph, it shows the utter absurdity of the whole thing. Mr. Marson, who was the surgeon at the Highgate Smallpox hospital, produced a number of statistics showing that the unvaccinated patients died at the rate of 35 per cent., and then according to the marks they had, one to three or four marks, so they died less and less until with four marks it almost came down to a vanishing point. Mr. Marson was submitted to cross-examination before the Committee of 1871, and then it turned out that a good many of those patients had died from what he was

pleased to call "super-added disease." That is, although they went in suffering from small-pox, yet there was some other disease they had got, and they were put down not as dying from small-pox, but from this other disease. It is a most extraordinary coincidence that the more marks the patients had the more they died from something else than small-pox. And when you come to the four mark patients, of whom there were only eleven, absolutely ten died of "super-added disease," and there was only one left for the record of small-pox, and that one was made to record a fatality of three-quarter per cent. This has been the sheet-anchor of the medical profession for years; these are the statistics dinned into the ears of the medical students to prejudice their future career in the medical profession ; these are the statistics which present, I have no hesitation in saying, the most glaring specimen of "cookery" ever penned by mortal man. I think I have shown pretty clearly that vaccination is no protection, that mitigation is false, and that re-vaccination is a fallacy.

Another most important point is this: You may say, "Never mind, rather than have the bother of being summoned and the rest of it, I will let my children undergo the operation." What about the danger? Upon this subject I will dare to say this:

There is not a medical man in the kingdom but will admit there is a risk. Before the Royal Commission 6,000 cases of injury from vaccination were presented, with 800 deaths.

This is the condition which we have upon the most reliable statistics, and that represents a very sorry fact. We are told by Dr. Bond that we should have calf lymph; but we must not forget that some of the most disastrous results which have ever occurred, and which have been recorded only recently, have been the result of the use of calf lymph; and so terrified is the Government about it that it will not sanction its use by the public vaccinators. Therefore it is no use going to cow-pox direct from the calf.

You may say, "What is this calf lymph?" There are three kinds. Supposing you have the spontaneous cow-pox taken from the sore on the cow's udders, a calf is strapped to a table and its abdomen having been shaved, about 100 punctures are made in it and some cow-pox matter rubbed into them; the calf is then tied up for eight days when it is strapped down to the table again and this lymph, by means of clamps, is squeezed out of the various sores raised and put into capillary tubes. Then the calf is let loose and sold to the butcher for prime veal. That is the spontaneous cow-pox, which Jenner himself said was practically useless.

With regard to the other kind of cowpox, which is commonly used, you put the matter from a child's arm into the calf's abdomen; and you stand a chance of getting some human diseases of the worst kind as well as cattle disease into the bargain. The third kind is small-pox virus itself with which Badcock inoculated no less than 20,000 people under the name of vaccination. Even Sir James Watson said

he could sympathise with, and even applaud a father who would pay multiple fines and even undergo imprisonment rather than submit his child to such a ghastly risk. He [*Sir J. Watson*] was then speaking about syphilis.

What about syphilis? It is a very strange thing that up to 1853, when the Compulsory Vaccination Act was passed, the annual deaths from syphilis of children under one year old did not, exceed 380; the very next year the number had jumped up nearly double, to 591; and syphilis in infants under one year of age has gone on increasing every year since until 1883, when the number of deaths reached 1,813. It has increased four-fold in infants since the passing of the Compulsory Vaccination Act, and yet in adults it has remained almost stationary. Surely this speaks for itself. These deaths have only begun to decline since, in proportion as the number of vaccinations to births have declined. Therefore we have not merely children dying primarily from vaccination, but from a concurrent disease. The question is asked, "Cannot you get any pure lymph which will really answer the purpose?" Well, they have tried all sorts. They have tried cow-pox, horse-pox, horse-grease cow-pox, also goat-pox, and that from the sheep; they even went to the buffalo, but the buffalo-pox stank so horribly that they had to give it up. Surgeon O'Hara even advises that we should get some lymph from the donkey. One would have thought that the donkey was low enough, but someone has gone further. Dr. Monckton-Copeman as suggested in the "British Medical Journal" that some small-

pox scabs should be powdered as fine as possible in a mortar, placed in an egg, stirred up into a kind of smallpox omelette, and after being put by for a certain time it is ready to be placed in the babies' arms. That is what I may call a "fowl" concoction. We have had almost as many animals suggested for the purpose of supplying lymph as there were in Noah's Ark—a regular menagerie of them; the vaccinators are in as big a muddle about it as ever, and yet they say "You must have the genuine variety or you will be sure to catch the small-pox." "Pure lymph from the cow!" It reminds me of the notice one sometimes sees, "Pure milk from the cow; animals milked on the premises." "Pure lymph" calls to mind the green fields and pastures of the country! Can it be had, you ask? Well, Government Microscopist Farn, who examines the lymph sent out, was asked by Dr. Collins, "As a matter of fact have you ever guaranteed the purity of lymph in your life?" and he had to acknowledge "No."

And yet members of the medical profession are saying this kind of thing: Dr. Hind wrote to the Devises Board of Guardians some time ago saying that he would be very happy indeed to supply them with calf lymph "which would be undoubtedly pure." He is another gentleman who does not appear to have read the other side of the question. Mr. Microscopist Fain was further asked by Dr. Collins, "Can you recognise under a microscope of the highest power the germs of syphilis?" and the answer was "No." And yet they talk about "pure lymph!" From 1881 to 1892 we have had

no less than 620 deaths recorded, 620 English homes which have been one little occupant the less, 620 mothers' hearts which have been bleeding as a result of this Compulsory Vaccination Act; and yet they say "there are no bad results with proper care." How is it, then, that this mischief occurs? If they cannot happen with proper care, then these results, according to that theory, must be due to carelessness, and if so it is manslaughter; and have you ever heard of a medical man being charged with manslaughter in such a case? The Grocers' Company a few years ago offered £1,000 to anybody who would discover an artificial nutritive medium by which the germ vaccinia could be cultivated without any foreign elements or risk of disease. No one has claimed the £1,000 yet, and still they talk about "pure lymph." I will give you one or two statistics with regard to Leicester. In 1868-72 the mortality of children under one year was 107 per thousand, when 98 per cent were vaccinated; from 1888-9 only two per cent, were vaccinated, and, in spite of what Dr. Bond says, the general mortality of children had declined from 107 to 63 per thousand. Furthermore, from 1874-89 the number of children under one year who died of erysipelas had declined from 193 to 47 per 10,000 deaths. The Guardians of Gloucester are being urged to recommence prosecutions, and I appeal to them to make a firm stand against it.

There is one thing about this Vaccination Act which I don't like: it's an unequal law—it presses hardly upon the poor. The rich man can pay his sovereign fine and feel none the

worse for it; but the poor man has to either submit or have his goods seized, or go to the prison cell in default of paying his fine. I say that the poor woman's child is as dear to her as the child of a prince is to its parents, and that she has no right to be put in a harder position for its protection than those who are wealthy.

But there is another thing that I must mention to you, and that is the case of Emily Maud Child, of Leeds. That child who was vaccinated, died, and a coroner's jury having held an inquest, it was brought in conclusively that she died from syphilis, as the result of vaccination. A certificate to that effect went up to the Government, who sent an inspector down to investigate the case; he took photographs of the teeth of the other children, declared they were syphilitic, and reported that it was not vaccine lymph which produced the syphilis, but that the fault lay with the mother herself. At last the Royal Commission heard of the case and sent down independent investigators, who found that there was not a vestige of syphilis in the remaining children, and that the charge against the mother was false. It is a terrible thing, I say, that not only have you to stand the chance of losing the child who is dear to you, but you have to stand the chance of the powerful machinery of Government being turned on in order to take away the character of your wife. They tell me I have no right to pick out these hard cases; but I tell my friends I will stop picking them out when they stop putting them in. Then, when you go before the Bench, the magistrates tell you they are "only administrators of the

law," which has been the plea of the greatest persecutors of every age. Remember that the Vaccination Act does not deal with the drunkard; it is the best classes of the country, the earnest, honest people, the Sunday school teachers, who love their children and their homes. The Scotch Covenantors, Ann Askew, John Wycliffe, and the apostles of old were told that their persecutors were "only the administrators of the law," but they defied the law, and the proudest privileges and blessings we possess have been won for us by the law-breakers of this country. It is not a question merely of the health but of the very lives of the children which are at stake in this matter; and I believe that the present century shall not close until we have placed our foot upon the dragon's neck, and plunged the sword of liberty through its heart. They tell us we are trying to rouse the country with a "crazy cry"--the cry of liberty of conscience—and, we are not ashamed of that cry. It is that "crazy cry " which snapped the shackles of despotism in the past. That "crazy cry" is spreading at the present time throughout the length and breadth of the country. We are told that the intelligent portion of the population is against us; it's false. That "crazy cry" is ascending higher and higher, into a raging and tremendous storm; that liberty which has been won by the blood of our forefathers for the theological conscience, is the liberty we demand for the scientific conscience. Already it is thundering at the door of the House of Commons, and it shall be heard. Yes, we are going forward with the "crazy cry " of liberty of conscience

upon our unfurled banner, and we never intend to rest until we get it.

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