

such annoyances as these tend to shorten life and to aggravate disease, homœopathists are not likely to be a long-lived or robust race.

Dr. Melicher's age we should guess to be about fifty. It appears that of late he suffered much from a very painful disease, so painful that he frequently wished for death to relieve him from his torture. His death took place on the 16th of last December, in consequence of paralysis of the lungs. He had for many years enjoyed a high reputation and large practice in Berlin. Peace be with his ashes!

DR. MARENZELLER, of Vienna.

ON the 6th of January, of the present year, this veteran homœopathist died. Unlike most of those whose deaths we have recently recorded, Dr. Marenzeller attained a very great age. He had completed his 90th year when he was removed from among us. He was thus a cotemporary of Hahnemann, being only eight years the junior of our illustrious master. The name of Marenzeller is intimately connected with the history of homœopathy, more especially in the Austrian dominions, and yet Dr. Marenzeller was no great writer. His celebrity is chiefly owing to his connexion with the first homœopathic experiments, performed by order of the emperor, in the military hospital at Vienna. At 21 years of age, Marenzeller was a regimental physician and professor. In 1815 he became a convert to the doctrines of Hahnemann; but, nevertheless, he remained in the army, and held the post of staff-surgeon for many years after his conversion. He was appointed by the Arch-Duke John of Austria, formerly Regent of Germany, his physician in ordinary, which appointment he continued to hold till his decease.

Our opponents are constantly in the habit of referring to the experiments of Andral as being a complete refutation of the pretended efficacy of homœopathy. Now these experiments, if they deserve that name, were performed by a man totally ignorant of homœopathy, in defiance of Hahnemann's rules, and with a carelessness and presumption perfectly inexcusable in a man of Andral's reputation. The merest tyro in homœopathy would have been ashamed to call such practice homœopathy. And yet these experiments, which we reject with scorn, and which have been over and over again shewn to be deficient in every element that could constitute them

illustrations of homœopathic practice, are the stalking horse of all the opponents of homœopathy, and their ready excuse for not taking the trouble to enquire experimentally into the truth or falsity of our assertions relative to the superiority of the system we practise. On the other hand, the real homœopathic experiments performed by Dr. Marenzeller, under every condition that a watchful jealousy could suggest, in order to assure their genuine homœopathic character, and with all the accompanying pride, pomp, and circumstance of imperial-royal decrees, commissions, protocols, daily registers, weekly bulletins, and solemn reports, are never now referred to; the *ipse dixit* of Andral, as to the unsuccessful issue of his own experiments in an art of which he was utterly ignorant, being held to be more conclusive than the deliberate report of a commission appointed by the Austrian Government to inquire into the practice of homœopathy by a homœopathic physician.

As we believe no account of Dr. Marenzeller's experiments has as yet been published in English, we take the opportunity suggested to us by the death of the principal actor in connexion with these experiments, to give a succinct account of them, drawn from the official documents and the testimony of impartial and honourable eye-witnesses. These records are contained in various volumes of the *Archiv für Hom. Heilkunst*.

These homœopathic experiments were, as will be hereafter seen, conducted by order of the Government, with every precaution that could secure fair play to the homœopathist during their performance. A daily record of the cases treated was kept by the medical commissioners appointed to watch the treatment; but two mistakes were committed by the Government. One was, that it was not made a condition that these records should be published. The consequence of this oversight was, that the reports of the commissioners were kept secret, and it is only by accident that that of the two commissioners who were appointed to follow the treatment during the third ten days of its continuance (for the commissioners appointed to watch the treatment were changed every ten days), has seen the light. This report fell into the hands of Dr. Atomyr, after the death of one of the commissioners, and was published by him in the 18th vol. of the *Archiv*, twelve years after the experiments had been made. The other mistake made by the Government was, that the hostile allopathic faculty of the Academy of Medicine were constituted the judges of the success or reverse of the treatment. The consequence of this

error was, that the bald judgment of the faculty was alone issued, and the facts on which this judgment was framed were withheld by them.

The deliberate judgment of the faculty, consisting of twelve professors of allopathic medicine, was as follows:—"The experiments terminated in such a way as to make it impossible to say that they were in favour of or against homœopathy." Had the experiments turned out unfavourably for homœopathy, it is to be presumed the faculty would have been too happy not only to say so, but to prove the truth of their accusation by publishing the reports of their professors. And even had the experiments warranted the judgment given, it is but natural to suppose that the faculty would for their own sakes have published the facts in order to justify their conduct. The publication of such a verdict without any corroborative facts, naturally makes us suspect that the facts did not warrant the conclusion nominally drawn from them, that in a word the experiments were more favourable to the new system than is implied in the words of the judgment. Two out of the twelve judges dissented from the verdict recorded. The one, Professor Zang, from his own observation of the cases treated during ten days, came to the conclusion that the facts showed homœopathy to be perfectly powerless—the other, Professor Zimmermann, was so convinced of the contrary, that he confessed himself forced to acknowledge that homœopathy had a real power over disease, and from that day he set himself to study the principles and practice of Hahnemann's system, and became a zealous partisan of homœopathy.

We are not however left to depend entirely on the fragmentary report of the two commissioners for the knowledge of Dr. Marenzeller's experiments. Although he himself was precluded from publishing an account of them, a careful record of the cases was kept by Dr. J. Schmit of Vienna, who attended every visit from the beginning to the end of the treatment, and who communicated the results of his observations to Hahnemann, by whom they were handed to the Editor of the *Archiv* for publication. From Dr. Schmit's report we are able to give the following particulars respecting these interesting experiments.

By the command of the Emperor a ward containing twelve beds was set apart, in the chief Garrison Hospital in Vienna, for the purpose of testing the power of Homœopathy. The staff surgeon, Dr. Marenzeller, a distinguished partisan of the doctrines of Hahnemann

was summoned from Prague to conduct the treatment on Homœopathic principles. The commission appointed to watch and report on the treatment consisted of twelve professors of the Joseph's Academy and the chief staff surgeon. The ward was provided with a homœopathic pharmacy, and a library of homœopathic works to consult in case of uncertainty. Two regimental, two superior, and two inferior surgeons were appointed, whose sole duty it was to see that the orders of the homœopathic physician were strictly carried out. Special nurses were appointed for the service. A special kitchen was set apart for the preparation of the food for the homœopathic patients, and was presided over by a cook who had been instructed in the mode of preparing food according to the rules of the homœopathic system. The surgeons kept watch day and night, in order to see that nothing was given to the patients but what the homœopathic physician ordered. A few of the patients were transferred from the other wards of the hospital, but most of them were taken in as new patients. Dr. Marenzeller paid a visit every morning and every evening at fixed hours, and each time he was accompanied by at least two of the members of the medical commission. There were usually several others of the professors present at the examination of the patients. At these visits the patients were examined, and the examination was entered in a book word for word. The diagnosis and prognosis were then made by Dr. Marenzeller and the members of the commission respectively. The former then made the prescriptions, gave directions as to diet, and all this was entered in the book and subscribed by the signatures of the members of the commission. This took place with every patient and at every visit. The medicine prescribed was always administered in the presence of the commissioners. Other necessary arrangements were made to secure a fair and impartial trial of homœopathy. The experiments lasted forty days, during which forty-two patients were treated. Dr. Schmit was, as before stated, present at each visit, and from the notes he took from day to day he has compiled the following table, for the accuracy of which he vouches. The table speaks for itself without any need of explanation. In most of the cases the principal medicines given during the disease are indicated, but in some of them they are not, as Dr. Schmit forgot to register them. That is however of little importance, as we only wish to know the result of the treatment, and we have sufficient confidence in Dr. Marenzeller's skill to be assured they were all prescribed for in strict accordance

with the homœopathic principle. We may remark that Dr. Marenzeller was what we would now call a rigid Hahnemannist, at least his treatment was in exact conformity with the rules of Hahnemann at that period.

Statement of the patients taken into the Homœopathic ward during the 40 days from the 2nd of April to the 12th of May 1828.

In all forty-three patients were received. Of these, 4 were admitted by the homœopathic physician, 9 by the commissioners, 29 were selected from the new admissions into the hospital, and one came back after some days in consequence of a relapse. Of these 43, 32 were cured (or not counting the relapse 31). One died. Five were transferred to other wards. When the experiment ended five remained uncured, but on the way to recovery.

The following are the five patients who were transferred to other wards.

Status morbi, as entered by the Commissioners in the Protocol.	Length of time each was in the homœopathic ward.	REMARKS.
1 Phthisis trachealis.	10 days	This patient was declared to be incurable both by Dr. Marenzeller and the commissioners. Before admission he had been pronounced a confirmed invalid.
2 Hæmoptysis.	12 days	During this time the hæmoptysis occasionally ceased but returned again. On the 18th day, Dr. M. declared the patient not only incurable, but in a very dangerous state. He was immediately transferred to the medical wards and died in a few days.
3 Pleuroperipneumonia notha cum gastrica.	1 day	This patient, a Wallachian, could not speak with any one in the ward, and he therefore urgently requested to be transferred to that part of the hospital where his comrades and countrymen lay. His request was immediately granted, as no patient was compelled to allow himself to be treated homœopathically.

Status morbi, as entered by the Commissioners in the Protocol.	Length of time each was in the homœopathic ward.	REMARKS.
4 Febris catarrhalis cum affectione chronica pectoris.	3 days	This patient was at Dr. M.'s request transferred to another ward, as in consequence of a presumed organic affection of the heart and large vessels, nothing could be expected from the homœopathic treatment.
5 Peripneumonia majoris gradus.		This patient was immediately removed from the homœopathic ward, as he could not give an intelligible account of his symptoms, and therefore was not suitable for the experiment.

Of these five patients, No. 1 was taken in by the homœopathic physician, Nos. 2 and 4 by the commissioners. Nos. 3 and 5 were taken from the new patients.

The following died.

1 Febris catarrhalis inflammatoria cum affectione hepatis.	Died on the 7th day.	Besides the symptoms of the disease named, he had several others present that pointed to a very serious affection of the viscera of the chest and abdomen, which could not be referred to any distinct nosological name of a disease. The post-mortem examination revealed organic alterations in the lungs, liver, spleen, kidneys and bladder of such a kind and degree as to render a cure hopeless. Before coming into the hospital the patient had drunk a large quantity of brandy mixed with pepper.
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The following thirty-three patients were cured.

1 Pleuritis, postea febris nervosa.	10 days	After the pleurisy had been cured (in 2 days) in consequence of a chill the patient became affected with typhoid fever. Both diseases were cured in 10 days. <i>Aconite</i> and <i>Rhus</i> were the chief remedies.
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Status morbi, as entered by the Commissioners in the Protocol.	Length of time each was in the homœopathic ward.	REMARKS.
2 Œdema pedum cum 14 days oppressione pectoris.	14 days	In this patient, the whole body, the face and the limbs were œdematous, and there were also present symptoms that would lead to the suspicion of commencing hydrothorax. Dr. M. considered the oppression on the chest to be owing to œdema of the lungs. The disease supervened on an inflammation of the chest, which had been treated with venesection and antiphlogistic purgatives and blisters. <i>China</i> was the chief remedy.
3 Icterus (psoricus).	20 days	This icterus was complicated with itch and diuresis. <i>Carbo veg.</i> was the chief remedy.
4 Erysipelas faciei.	11 days	This erysipelas was combined with inflammation of the meninges of the brain ; it was of the vascular character, extended over the whole head, and of such intensity, that every one doubted of the patient's recovery. Remedies, <i>Belladonna</i> and <i>Rhus</i> .
5 Angina inflammatoria.	4 days	<i>Belladonna</i> .
6 Febris tertiana.	6 days	<i>Pulsatilla</i> .
7 Febris tertiana.	4 days	<i>Pulsatilla</i> .
8 Hepatitis.	7 days	<i>China</i> .
9 Pneumonia.	7 days	Was cured by the third day.
10 Pneumonia notha Sydenhami.	10 days	Besides the pneumonia, there was in this patient, a very disagreeable state of the mind to be combated, which led him to seek to make away with himself. The remedies were, <i>Aconite</i> , <i>Bryonia</i> , and <i>Aurum</i> .
11 Pneumonia.	13 days	This state of mind was brought about by malicious suggestions made to him against the homœopathic treatment, and this was one of the reasons why admission to the ward was denied to strangers.

Status morbi, as entered by the Commissioners in the Protocol.	Length of time each was in the homœopathic ward.	REMARKS.
12 Inflammatio tonsillar.	3 days	<i>Belladonna.</i>
13 Parotitis.	4 days	
14 Febris quotidiana.	5 days	<i>Pulsatilla.</i>
15 Febris quartana.	8 days	<i>Pulsatilla.</i>
16 Angina inflammatoria.	3 days	<i>Belladonna.</i>
17 Diarrhœa sanguinea.	3 days	<i>Mercurius niger.</i>
18 Diarrhœa catarrhalis, postea bronchitis blennorrhœica.	13 days	<i>Cham., Arnic., Arsenic.</i>
19 Febris tertiana, postea diarrhœa aquosa.	13 days	<i>Pulsatilla</i> for the fever, and <i>Chamomilla</i> for the diarrhœa.
20 Angina catarrhalis.	4 days	<i>Bellad., Mercur. niger.</i>
21 Pleuritis spuria, cum nota gastrica.	3 days	<i>Hyoscyamus.</i>
22 Febris tertiana.	4 days	<i>Pulsatilla.</i>
23 Pleuritis spuria.	7 days	<i>Aconite, Bryonia.</i>
24 Febris tertiana, cum affectione hepatis.	4 days	<i>Nux vomica.</i>
25 Pleuritis.	8 days	<i>Aconite, Bryonia, China.</i>
26 Catarrhus bronch. gradus majoris.	7 days	<i>Hyoscyam., Cannabis, Conium.</i>
27 Rheumatismus chronicus.	8 days	<i>Carbo. veg., Merc.</i> Latterly some interesting experiments were made with <i>digitalis</i> , in reference to his very slow pulse.
28 Diarrhœa aquosa.	14 days	The diarrhœa had lasted 4 weeks before the homœopathic treatment.
29 Catarrhus cum dispositione phthisica.	14 days	
30 Febris quotidiana.	8 days	<i>Pulsatilla.</i> This is the only case of relapse. Thirteen days after getting <i>puls.</i> for the first time, and after having been free from fever for 10 days, he again fell ill. All the others remained well.
31 Febris tertiana.	8 days	<i>Ipecacuanha.</i>
32 Febris tertiana.	8 days	<i>Nux vomica.</i>

Status morbi, as entered by the Commissioners in the Protocol.	Length of time each was in the homœopathic ward.	REMARKS.
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The following five patients were left uncured, but getting better, at the conclusion of the trial, and were transferred to other wards.

1 Ulcus syphiliticum penis.	4 wks.	Besides having syphilitic ulcers, this patient was ill in other respects, and this probably was the reason of his slowness in getting cured.
2 Febris tertiana.	23 days	The attacks continued to come regularly, but were weaker.
3 Hepatitis.	21 days	This patient had also a chronic affection of the lungs, which subsequently became the subject of treatment.
4 Febris quotidiana c. infarctu lienis.	15 days	The attacks recurred, but always weaker.
5 Ulcus syphiliticum cum bubone.	5 days	Getting well.

Of the cured, Nos. 2, 3, and 6, were chosen by Dr. Marenzeller.

Nos. 1, 9, 25, 26, 27, 31, and 32, were chosen by the Commission.

All the rest, including the one that died, were taken from the new applicants for admission. Those that remained after the close of the trial were all from this last source; that is to say, they were at once sent to the homœopathic ward after being seen by the medical inspector, and were chosen neither by the homœopathic physician nor by the commission.

From the report of Professors Jaeger and Zang that has been published, we may extract a couple of the cases described more *in extenso* than the above, in order to shew the character of Dr. Marenzeller's treatment, and to give the valuable testimony of his adversaries to its happy effects.

The following case corresponds with that marked No. 6 in the above list of those cured:—

“ Bed No. 1 was occupied by the infantry-private, Johann Hradil. He was admitted the 20th April with *febris intermittens tertiana*. The 23rd was a day on which he was free from fever. He got *pulsatilla* of the 9th dilution. On the 24th, at half-past nine

A.M., he had an attack of fever, slighter than any of the previous ones. As he had no fever on the 26th, the day that the paroxysm ought to have come, he was declared to be convalescent, and on the 27th was transferred to the convalescent ward."

The next case corresponds to that marked No. 25.

"On the evening of the 24th April bed No. 3 was occupied by Jacob Czikaro, cadet in Baron Meyer's infantry regiment. For the last four days he had suffered from *febris rheumatico-gastrica cum pleuritide spuria*, combined with *infarctus lienis*, the sequela of a previous intermittent fever. He got *Bryonia* 18. On the 25th, in the evening, the local affection having increased was declared to be *pleuritis vera*. On the 26th, in the morning, the fifth day of the disease, there occurred critical excretions in the form of perspiration, urine, and feces. On the same evening, as the fever and painful chest-symptoms assumed a dangerous character, Dr. Marenzeller was asked to declare whether he would go on with the treatment or not. He stated he would. With this considerable exacerbation the disease had, at the end of the sixth day, attained its climax, and on the seventh and eighth days profuse critical excretions, in the shape of sweat, epistaxis, urine, and faecal evacuations, occurred, and the disease seemed to be on the decline; however, on the eighth day, there occurred increase of the fever and of the pain in the affected side of the chest. The fever declined gradually, with universal nocturnal sweats; but the shooting pain betwixt the seventh and ninth ribs, felt on touch or deep inspiration, remained, though less in degree. On the 30th he got *China* 9. On the 1st May he was dismissed as convalescent."

These two are the only cases of which the details are given by Professors Jaeger and Zang that seem worthy of record. The case of pneumonia (No. 11 in the above list) they merely mention as having been admitted one day, and discharged cured after thirteen days of treatment. Altogether we cannot help remarking in the report of these illustrious professors, a tendency to dwell upon the slighter cases, and an attempt to prove their recovery to be little, if at all, connected with the administration of the medicine; and on the other hand, we notice that they slur over the more serious diseases treated by Dr. Marenzeller. If the reports of all the commissioners were of a similar character, it is little wonder that a prejudiced academy of allopathic professors should not give a verdict favourable to homœopathy founded on such records: the fact of their verdict not being

adverse to homœopathy, speaks to our mind greatly in favour of the homœopathic treatment of Dr. Marenzeller, as it shews that all the ingenuity of the inimical reporters could not pervert the results of the treatment into the basis of a judgment by a hostile faculty unfavourable to homœopathy.

As far as Dr. Marenzeller's experiments in the presence of the allopaths went, they are undoubtedly much more favourable to the claims of homœopathy than the reverse. The only tenable ground possessed by the commission for their neutral verdict is, that the experiments were not carried on for a sufficient length of time, and did not extend over a sufficient number of patients, to enable them to decide very positively as to the influence of the treatment adopted. But who is to blame for this? Certainly not Dr. Marenzeller, who was perfectly willing to continue with the treatment for any length of time. The time for continuing the trial was originally fixed at sixty days (a short enough time assuredly), but it was suddenly interrupted, after only forty days had elapsed, by order of the government (doubtless at the instigation of the official allopaths).

However, these homœopathic experiments have not been without their influence on the progress of homœopathy in Vienna; and we believe they mainly contributed to induce the government to repeal the laws that had been passed against homœopathy in Austria, and are partly the cause of the rapid spread of our system in Vienna, and of the favour now shown to our practice by the governing bodies of that city.

MISCELLANEOUS.

Mr. Brady's Medical Registration Bill.

We have already expressed our general approval of a measure of this nature. This bill has, we observe, just been read a second time in the House of Commons, and nothing could be further from our wish than to cast any obstacle in the way of elevating the standard of professional attainment, and of enforcing a previous medical education as the only admission to the emoluments of medical practice. At the same time we think it right to call attention to the important fact that this is a great innovation in the legislation of this country. Hitherto all the benefit conferred by a University degree, in a legal point of view, was a social position; now it is to be made, along with the licences of other bodies, the only avenue to livelihood by the practice of medicine. And the question we wish to bring clearly out is this, Are we to have any guarantee that this imperatively required licence