## CORRESPONDENCE

6

WITH

## T. SPENCER WELLS,

F.R.C.S.;

MEMBER OF COUNCIL OF

THE ROYAL COLLEGE OF SURGEONS;

SURGEON TO THE QUEEN'S HOUSEHOLD;

&c: &c: &c:

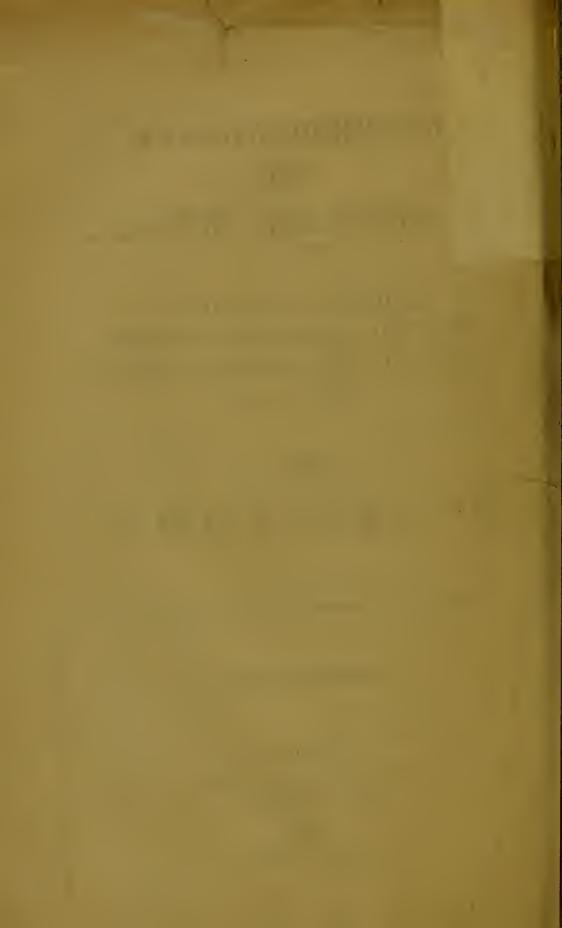
OVARIOTOMY.

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SECOND EDITION.

LONDON:
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1880.

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# TO THE PEOPLE OF GREAT BRITAIN AND IRELAND.

#### CORRESPONDENCE WITH

## T. SPENCER WELLS, F.R.C.S.;

Member of Council

of the Royal College of Surgeons; Surgeon to the Queen's Household; &c: &c: &c:

# OVARIOTOMY.

Henbury, Nr. Macclesfield. 9 Augt. 1879.

SOCIETY PROTAL ABOLITION VIVISECTION.

SIR,

Believing that statements are circulated relative to Ovariotomy, which have not the weight of your authority, but are incorrect,—we shall, as the matter is of public interest, feel obliged if you will kindly inform us how far any improvement in the operation is due to Experiments made by yourself on Living Animals. Also, what definite facts were thus discovered by you,—and by means of what Experiments. Moreover, the specific way in which such knowledge was made beneficial to your Patients.

The late Dr. Lawson Cape, (whose Pupil, he informed us you formerly were,)—was a subscriber to the Society and never endorsed the statements above mentioned.\*

I remain, Sir,

Your obedient Servant.

GEORGE R. JESSE.

Honorary Secretary, &c.

T. SPENCER WELLS, Esq.,

3, Upper Grosvenor St.,

LONDON. W.

\* See Letter from Dr. Lawson Cape. Page 7.

11 August 1879.
3, Upper Grosvenor Street,
London. W.

SIR.

Considering how the Society which you represent has vilified me in its publications and by its paid Agents, I am rather surprised you should expect me even to acknowledge the receipt of a letter from you. But I am not disposed to follow a bad example, and I beg to inform you that you may find at pages 3 and 4 of the British Medical Journal of July 6, 1878, my own statement, made publicly at the College of Surgeons, as to the number of experiments I have made on living animals, and what I believe has been learned from those experiments.

I am, Sir,
Your obedient Servant.
T. SPENCER WELLS.

GEORGE R. JESSE, Esq.

Henbury, Nr. Macclesfield.
13 Augt. 1879.

#### SOCIETY TOTAL ABOLITION VIVISECTION.

SIR,

Your obliging reply of the 11th inst. was written under great misapprehension as to the Society. So far from having "vilified you in its publications," we believe,—though they amount to above Seventy in number,—your name has never been mentioned in them. At one of our Meetings at St. James's Hall, a Physician alluded to your skilful operations in Ovariotomy, but in these words.

"Mr. Spencer Wells deserves well of the Profession and of the Public, for he has performed these operations most successfully."

As to the "paid Agents" you refer to, they cannot have misconducted themselves as you mention,—for the Society has none.

You probably confound us,——(the Original Society, which obtained the appointment of the Royal Commission and gave Evidence on three days before it,)——with persons with whom we have no connection. The accompanying enclosure\* will prove the Society publicly disavowed, by repeated Advertisements

in "The Morning Post" and "The Times," the revolting Placards exhibited in the Streets of the Metropolis, and inserted in the "Police News."

We are obliged by the reference to "The British Medical Journal" and your statement made at the College of Surgeons—and hope to discuss the subject fully at a future day.

I remain, Sir,

Your obedient Servant.

GEORGE R. JESSE.

Honorary Secretary, &c.

T. SPENCER WELLS, Esq.,

3, Upper Grosvenor Street, London. W.

[\*From the "Morning Post" of April 30th, 1877, and the "Times" of May 7th and 14th, 1877.]

## SOCIETY FOR THE TOTAL ABOLITION AND UTTER SUPPRESSION OF VIVISECTION.

This Society disavows any approval of the sensational and revolting Illustrated Placards which have been put up in the Streets and Public Places of the Metropolis and inserted in a Penny Weekly Newspaper; addressed to a certain class. This Society is of opinion that the attempt to excite the Public in this manner is ill-advised and will injure the cause. Such a course of action is unnecessary and impolitic, as it would be for a General Accident Assurance Company to Placard with delineations of the horrors of Railway Collisions.

The Society's object is—having now amply proved and substantiated the existence and cruelties of Vivisection, to which its members directed attention above two years past, and continuously down to the present time—to demonstrate the uselessness and unphilosophical nature of the Practice. Ever open to argue the question with Physiologists, it reprobates any morbid Exhibitions or attempts to inflame the minds of the uneducated.

GEORGE R. JESSE.

Honorary Secretary and Treasurer, Henbury, Macclesfield, Cheshire.

t"THE POLICE NEWS."

14 Augt. 1879. 3, Upper Grosvenor Street, London. W.

DEAR SIR,

Thanks for your note. I was not aware of the difference between the new and the old Society.

As some aid to the future discussion of the subject I enclose some extracts from one of my Lectures which may show what is thought (by men capable of judging) of the value of improvements learned by experiments on a few animals, which could not have been learned so well in many years instead of in a few weeks, even by experimenting on women. And the sufferings of those few animals are not to be compared to the suffering inflicted by one Sportsman in one day for no useful purpose.

Yours very truly.

T. SPENCER WELLS.

GEORGE R. JESSE, Esq.

Henbury, Nr. Macclesfield. 18 Augt. 1879.

SOCIETY TOTAL ABOLITION VIVISECTION.

Dear Sir,

I beg leave to return you our thanks for your courteous letter of the 14th inst., and for its enclosed extracts from one of your Lectures.

Believe me,

Yours sincerely.

GEORGE R. JESSE.

Honorary Secretary, &c.

T. Spencer Wells, Esq.,

3, Upper Grosvenor Street,

LONDON. W

Henbury, Macclesfield, Cheshire. 29 Septr., 1879.

SOCIETY TOTAL ABOLITION VIVISECTION.

DEAR SIR,

Since replying to you on the 18th ult. I have made repeated but unsuccessful endeavours to obtain the "British Medical Journal" of 6 July, 1878, which you referred me to. Applications have been made to the Publisher of that Periodical;——to my Booksellers in town;——and to a London News Agent. An Advertisement which I wished to insert, in the "British Medical Journal," offering Half-a-Crown for a Copy, has been refused insertion.

Under these circumstances, may I venture to ask whether you can procure for me, or put me in the way to obtain, the number you referred me to ?—of 6 July 1878. If so I shall feel obliged.

Believe me,

Yours sincerely.

GEORGE R. JESSE.

Honorary Secretary, &c.

T. SPENCER WELLS, Esq.,

3, Upper Grosvenor St.,

LONDON. W.

Note.—No answer was received to this Letter; and much difficulty and delay occurred ere a Copy could be obtained by us of "The British Medical Journal" referred to by Mr. T. Spencer Wells. The refusal of "The British Medical Journal" to insert our Advertisement for the Copy we required,—is significant.

# 28, Curzon Street, May Fair. W. Friday, 20 October, '76.

DEAR MR. JESSE,

Mr. Spencer Wells, was a pupil of mine at St. Thomas's Hospital more than 30 years ago, when Vivisection was not known or thought of—and has only been practised in the Medical Schools 4 or 5 years.

Spencer Wells was very successful in Ovariotomy, but I never heard of his owing his success to Vivisection, nor do I believe it.

Yours very sincerely.

LAWSON CAPE.

NOTE.—DR. LAWSON CAPE, F.R.C.P., LONDON, &c., was Consulting Physician of the General Lying-in-Hospital, York Road, Lambeth; and Lecturer for ten years on Midwifery at Saint Thomas's Hospital.

Henbury, Nr. Macclesfield. 20 March, 1880.

DEAR SIR,

Much difficulty was experienced in obtaining "The British Medical Journal" you referred to. I have now perused it;—and the extracts from one of your Lectures which you were so good as to forward. My attention has also been given to "Bryant

on Ovariotomy:" "Hutchinson on Surgical Diseases of Women:" "Kiwisch on the Diseases of the Ovaries:" Dr. Thomas Keith's Papers. Your book on "Diseases of the Ovaries," published in 1865: and your second work, with the same title, Published in 1872. Likewise to other Medical testimony on the subject.

Your great skill and success in performing operations for removal of Ovarian tumours has been proclaimed, and published, in Newspapers, Periodicals, The House of Peers, etc., etc., as "The Crowning Triumph of Vivisection:"—"the result of Experimentation for Surgical purposes."—"One of the most splendid Triumphs of Modern Surgical Art and Modern Philantrophy."—"With the New Light gained by Vivisection, three out of four have recovered, and he has thus saved the lives of between five and six hundred Women."

The Bishop of Peterborough is reported to have asserted in Debate in the House of Peers, on the 15th July last,—that,—"A London medical man of the highest eminence, with a most extensive practice among female patients, owes a Discovery by which he has saved hundreds of lives to a series of Experiments performed upon a dozen Rabbits."

"The Times" of 16 July, 1879, states the Bishop of Peterborough said:—"One of the most eminent London Surgeons lately told him that he had dealt most successfully with a very difficult case—one which had been opprobrium medicorum—and by his Discovery hundreds, he thought he might say thousands, of human lives would be preserved. The means by which the Discovery was made was the making of experiments upon the lives of 12 Rabbits. The point which his friend wished to ascertain was whether the presence of sutures inside the intestines\* or near them did or did not result in dangerous inflammation."

You yourself, in your reply to me, quote Lord Selborne's very laudatory remarks made in 1875 at the Samaritan Hospital upon your practice. (He seems never to have heard of Dr. Charles Clay of Manchester!) And, you also point to those of a similar kind by Sir James Paget; made in 1877 to the Royal Medical and Chirurgical Society. The former you say asserted that "you had added 10,000 years to the lives of European Women." The latter stated, "Ovariotomy, as perfected by Mr. Spencer Wells, to be one of the greatest achievements of Surgery in this century."

You have marked with your own hands, for my observation, both the last quoted passages.

At least I naturally conclude so, as they are marked in the leaves of your Lecture which you were so good as to present to me. Moreover, you actually quote Lord Selborne as asserting on the same occasion, in 1875, that, "until a few years since this kind of disorder had been regarded as necessarily and absolutely fatal." (!)

In the Periodical named "NATURE:" "No. 346 of June 15, 1876," are the following statements. They were made by Dr. Benjamin W. Richardson, F.R.S., -who helped you to "Experiment" on the eighteen\* Guinea-pigs, Rabbits, and Dogs, when, as he says, you were "beginning your career in performing the operation of this century—the removal of ovarian tumours." Dr. Benjamin W. Richardson, F.R.S., asserts of these "Experiments,"-"The Lessons taught were of vital value."-" He was fortified by the experiments I have described to an extent which no one but an operator himself can fully appreciate." And Dr. Benjamin W. Richardson goes on to asseverate, that, if these animals had not been experimented upon, and you had relied upon experience,—"This plan would have been an obstacle to the Saving of over Five Hundred Women from early and certain death in the practice of Mr. Wells alone." Furthermore, he says,—"Mr. Wells himself has repeatedly urged that what he learned by the result of the experiments we performed together has been of the utmost

Note.—\* Mr. T. Spencer Wells, in the "British Medical Journal" of 6 July, 1878, states the number at fourteen.

importance for the success of the operation, and, in a note addressed to me to-day he repeats and permits me to publish his views in his own words:—

'The few experiments we made on the narcotised animals taught in a few weeks, in the early days of Ovariotomy, what I could not have learned to this hour, after many years' observations on suffering women,'" etc.

The foregoing quotations from "The Standard" Newspaper; "The Times" Newspaper; The Bishop of Peterborough; Lord Selborne; Dr. Benjamin W. Richardson; and Yourself, demonstrate the manner in which this matter has been placed before the Public. The impression produced has been,—

FIRSTLY: That Ovariotomy is an operation which is new. SECONDLY: That up to the period of your practising it, the results of operations had been generally disastrous.

THIRDLY: That your success is due entirely or mainly to Vivisection.

FOURTHLY: That by "Experimenting" on a small number of animals you have saved the lives of hundreds or thousands of Women,—and saved them by those "Experiments" alone.

Your success in Ovariotomy has been blazoned, published, and trumpeted abroad. It has been held up as a crowning Triumph of Surgery gained by "The Practice of Subjecting Live Animals to Experiments for Scientific Purposes." As a great achievement which could have been accomplished in no other way. We will now investigate these Four Points.

FIRSTLY:—As to the History of Ovariotomy—Other Writers in favour of this operation might be quoted, but it will be sufficient to mention the distinguished Dr. William Hunter; and his brother the great John Hunter, who expressed himself in 1786 decidedly in favour of it. And "Chambon, who, in 1798, entered fully into the question and boldly advocated excision." Doubtless there have been men of eminence, as Liston, Lee, and Lawrence, who were adverse. How could it be otherwise? In human affairs innovations and Reforms are ever opposed by some men. The greater the Reform, the more bitter the Opposition.

Dr. Robert Houstoun had operated most successfully for

Ovariotomy in 1701, and removed a tumour of monstrous bulk. His patient recovered perfectly, and lived in excellent health for sixteen years after the operation. Dr. Robert Houstoun was followed by Dr. Ephraim Mc.Dowell, who was the pupil in Edinburgh of the able Surgeon, John Bell, the brother of that ill-requited genius and discoverer, Sir Charles Bell, who asserted in "The Philosophical Transactions," that "Experiments have never been the means of discovery." John Bell's teaching is said to have had great influence on Mc.Dowell, and the latter operated Thirteen times before his death in 1830, and at least eight times with success. Mc.Dowell left full instructions for the practice of Ovariotomy by future Surgeons. He wrote,—"I think my description of the mode of operating, and of the anatomy of the parts concerned, clear enough to enable any good anatomist, possessing the judgment requisite for a Surgeon, to operate with safety. I hope no operator of any other description may ever attempt it. It is my most ardent wish that this operation may remain to the mechanical surgeon for ever incomprehensible. Such have been the bane of the science, intruding themselves into the ranks of the profession with no other qualification but boldness in undertaking, ignorance of their responsibility, and indifference to the lives of their patients," &c.

To such as these, Liston might justly indeed apply the term, "Belly-Rippers." Washington Atlee and other American Surgeons followed the example of Ephraim Mc.Dowell, and achieved, we hear, an honourable position in the history of the operation. Atlee preceded you by several years, and performed Ovariotomy on nearly Four Hundred Women.

The Medical Profession in America erected, we believe, in 1879 a Granite Monument thirty feet high at Danville, Kentucky, in memory of Mc.Dowell, with this inscription:

"Beneath this Shaft rests EPHRAIM Mc.DOWELL, M.D., THE FATHER OF OVARIOTOMY, who, by originating a great surgical operation, became a benefactor of his race, known and honoured throughout the civilised World." "A grateful profession reveres his memory and treasures his example." The date of his

birth, attendance at the University of Edinburgh, and his first Ovariotomy in 1809 are also inscribed on the monument.

Mr. Thomas Bryant, F.R.C.S., Surgeon to Guy's Hospital, states in his work on Ovariotomy, published in 1867, that Lizars. of Edinburgh, had a successful case in 1825. In 1836 Jeaffreson of Framlingham, King of Saxmundham, West of Tonbridge, were successful. In 1838 Crisp of Harleston was successful. In 1842-3, and 4, Walne, F. Bird, and Lane were successful in eight cases; and in the former memorable year Dr. Charles Clay of Manchester commenced his illustrious career in Ovariotomy. Southam of Salford, Dickson of Shrewsbury, and H. E. Burd were successful in 1843-5, and 6. Cæsar Hawkins was successful at St. George's Hospital in 1846. Protheroe Smith, Elkington of Birmingham, Crouch, Cornish, and Day of Walsall had successful cases in 1849 and 1850. Between 1842 and 1866 Charles Clay had 110 cases, of which 76 recovered. He has published the "Results of 314 Ovarian Operations." Thomas Bryant, F.R.C.S., of Guy's Hospital, in his work on Ovariotomy, Published by Churchill in 1867, terms, "Dr. CHARLES CLAY, OF MANCHESTER,—THE FIRST GREAT APOSTLE OF OVARIOTOMY IN THIS COUNTRY,"—and he goes on to say that Mr. Lane, Baker Brown, and Spencer Wells, in London, and others, have led the way." In Ireland, Dr. Thompson is said to have been successful in 1848. Your own first case of completed Ovariotomy was not performed till 1858 about Sixteen years after Dr. Charles Clay of Manchester had commenced his long series of successful operations. His example can hardly have been lost upon yourself or upon others. Surely humanity is greatly indebted to Dr. Charles Clay. The "Edinburgh Medical Journal" said in 1867, "Clay perseveringly continued not only to operate, but, in every other manner within his power, to urge the propriety of the proceeding on his fellowcountrymen. Without his untiring efforts, we do not believe the operation would have now stood in the position which it holds."

The following Statistics of completed operations are extracted from "Bryant on Ovariotomy." They include all the published cases up to December, 1866.

#### "STATISTICS OF COMPLETED OPERATIONS."

Name of Operator.	No. of Case	s. Recoveries.	DEATHS.
British.			
Mr. Spencer Wells	150	103	47
Dr. Charles Clay	110	76	34
Mr. Baker Brown	107	72	35
Dr. Keith	48	37	11
Mr. Thomas Bryant	28	17	11*
Dr. Tyler Smith	20	16	4
Dr. F. Bird	12	8	4
Mr. Lane	11	8	3
Other Cases	172	98	74
Total British	658	8 435	223

<sup>\*</sup> In two of these cases both ovaries were removed.

NOTE. The names of those who have operated on less than ten cases have been omitted, their cases being grouped together in the Statistics.

It appears from these Statistics that your success in operations has not been greater than that of your predecessor in Ovariotomy, Dr. Charles Clay, of Manchester; and has been less than that of Dr. Thomas Keith, of Edinburgh,\* and Dr. Tyler Smith.

We hope these facts and observations dispose of the FIRST AND SECOND POINTS, viz.—"That Ovariotomy is an operation which is new;—and that up to the period of your practising it the results of operations had been generally disastrous."

We now proceed to the THIRD POINT, viz.—"That your success is due entirely or mainly to Vivisection."

You speak to me of the "value of improvements learned by experiments on a few animals." You have repeatedly urged that these experiments have been of "the utmost importance for the

<sup>\*</sup>Note.—It was stated on the 20th November, 1879, in "The Scotsman" Newspaper, that in Dr. Thomas Keith's last Twenty operations not one ended fatally, and in his last Hundred only three.

success of the operation." You have asserted that these "few experiments" "taught in a few weeks in the early days of Ovariotomy, what you could not have learned to this hour, after many years' observations on suffering women," &c.

All this refers to your Discovery (so considered by you), in regard to the Peritoneum. In "The British Medical Journal" of 6th July, 1878, page 3, to which you refer me, you say—in regard to "uniting the wound in the abdominal wall, including the Peritoneum in the Sutures, or not including it." \* \* \* "The Peritoneum must be included."

In your Second Book on "Diseases of the Ovaries," published in 1872, you assert that "The including of the Peritoneum within the Stitches is of the utmost importance for the success of the Operation."

Strong, decided, and unqualified as these most deliberate statements of yours are, nevertheless Surgeons of eminence and experience in Ovariotomy differ widely from you on the point. For example, Mr. Thomas Bryant, F.R.C.S., Surgeon and Lecturer on Surgery to Guy's Hospital, says in his Book on "OVARIOTOMY," published in 1867, "It is not yet decided by operators whether the Peritoneum should be included in the Sutures or not. The fact that different operators adopt different plans with equal success, tends to prove that the point is not of much importance. In my own operations I have, as a rule, included the Peritoneum; in exceptional cases I have failed to do so, and upon the whole I do not think the matter is of much consequence."

In his last recorded case, Mr. Bryant says,—"The wound was then closed by silk Sutures, the Peritoneum not being included." Everything in this case went on most satisfactorily, not one symptom showing itself to cause anxiety."

Mr. Jonathan Hutchinson, F.R.C.S., Senior Surgeon to the London Hospital, etc., says in his Article on "THE SUR-GICAL DISEASES OF WOMEN."

"HOLMES'S SYSTEM OF SURGERY." 2nd. Edition.
Longmans and Co. 1871.

Closing of the External Wound.—This is an easy matter, and may be done with equal facility either by hare-lip pins or silver wire. If pins are used, they must be gilt or silvered, not plain

steel. The practice of Mr. Spencer Wells has proved that it is safe to pass the needles through the Peritoneum; but it may be doubted if any material advantage is obtained. If not through the Peritoneum, the ligature or pin should pass close to it through everything else."

The opinion of Mr. Thomas Whiteside Hime, B.A., M.B., Dublin, Medical Officer to the Sheffield Hospital for Women, etc.; is given in "THE BRITISH MEDICAL JOURNAL" of November 30, 1878. He says, in his "REMARKS ON OVARIOTOMY,"—"It cannot be so important to include the Peritoneum in the Abdominal Sutures as Mr. Wells supposes, seeing that Kæberlé and other successful Ovariotomists have never done so; and it must generally happen, when it is so included, that it will double up into the wound more or less, and prevent union throughout the entire thickness of the sides of the wound. Should it have been by mistake partially detached, it must, of course, be included, etc.

It appears then, that in the opinion of Messrs. Bryant, Hutchinson, and Hime, no material advantage in Ovariotomy was gained by your Vivisection of Animals.

On referring to a Book, dedicated to you by Mr. John Clay, M.R.C.S., of Birmingham, and entitled "CHAPTERS ON DISEASES OF THE OVARIES,"—I find by the Tables of Cases of Diseased Ovaria, that you did NOT include the Peritoneum in any of your three first Successful cases of completed Ovariotomy (!)—Namely, in February, August, and November, 1858. Moreover, I note that in your first Unsuccessful Case, which was in January, 1859, you did NOT include the Peritoneum. In your next Unsuccessful Operation, which took place in June, 1859, the Peritoneum WAS included;—and the Patient died, and, of extensive Peritonitis, on the Second Day.

These were "the early days of Ovariotomy."

Those persons who have read Dr. Benjamin Richardson's remarks in the periodical called "NATURE;" and your own note to him, which he says he published with your permission, will muse on the apparent discrepancy between the statements in "NATURE" and those published by Mr. John Clay, of Birmingham, who says they were "kindly revised by the Operator," that is, Yourself.

As your first three cases are put down by you as Recoveries, why did you "Experiment" upon Animals? If you had not in those "early days" already performed with Dr. Benjamin Richardson those "Experiments" of "the utmost importance for the success of the Operation," what necessity was there for them at all, seeing that your three first Operations were successful?

It appears, from your own statements, that the success of your three first operations was not due to Vivisection at all.

And what good could possibly arise from cutting open the Abdomens of Animals and Stitching them up again? Neither Rabbits, Guinea Pigs, nor Dogs demonstrate what will happen to Women in similar circumstances; and the circumstances were not similar, for the Animals had no Ovarian Disease. Why select those species? And what similarity, rendering "Experiment" conclusive, exists between a Carnivorous animal such as the Dog and a Rodent animal like the Rabbit which lives on plants?

Travers and Blundell had wandered already in that barren country—and what did they acquire? We will soon refer to them again.

On the 13th January, 1863, you removed an Ovarian tumour from a Patient, and she died on the seventh day after. This Patient had been operated upon by another Surgeon in or about June, 1862, and a first ovarian tumour completely and successfully taken away. In your own account of this Case, which was read before the Royal Medical and Chirurgical Society in June, 1863, you said—"The Surgeon who performed the first operation on this Patient does not include the Peritoneum in his Sutures; and I think," etc., etc. What inferences you intend to suggest, you yourself best know; -but whatever the inferences may be, these facts are stated, viz., that your Professional Brother removed one tumour completely and successfully, and his Patient recovered from the operation and left the Institution, where Ovariotomy was performed, three weeks after the operation. Another tumour grew; -you removed it about eight months after and she died within Seven Days. He did not include the Peritoneum;—you did the reverse.

THE FOURTH POINT is now to be considered, viz., that "By Experimenting on a small number of Animals you have saved the lives of hundreds or thousands of Women;—and saved them by those Experiments alone." We think that very few able and candid Ovariotomists will be of this opinion. Indeed, we believe they will be opposed to it. For, the improvements in Diagnosis; in Anæsthetics; in the Surgical removal of Ovarian Tumours; and in the Treatment of Patients, are very considerable, and have greatly decreased the proportion of unsuccessful cases.

Putting entirely aside your Experiments on Guinea-Pigs, Rabbits, and Dogs,—and whether the Peritoneum is, or is not, included in the Abdominal Sutures, we think there is in the opinion of the Medical Profession a matured conviction that the former rate of mortality in Ovariotomy has been very greatly lessened by various progressive and important advances in Surgical Knowledge, and, that to these advances in Knowledge painful Experiments on Living Animals have contributed little or nothing of much value.

It is remarkable that you did not extract mental food from the "Experiments" of Benjamin Travers and John Blundell, Published in 1812 and 1824. How is it that their violations of the Peritoneums of Dogs, Rabbits, &c., gave you no sufficient light? The Animals were not sparingly sacrificed, nor were their long-continued sufferings unduly regarded by the Surgical Haruspices, who professed to foretel the future by inspecting the entrails of their sacrificed Victims. Did not the mangling and mutilation of those creatures demonstrate, if they demonstrated nothing else, that danger from Peritonitis in them is much less than in the Human race?

Those "Experiments" by Benjamin Travers on Dogs and Horses gave birth to one of the most erroneous methods of treatment ever practised in Surgery. In his Book detailing his "Experiments" on Dogs and Horses, (that is, stabbing, cutting them open, dividing their intestines, stitching up the wounds, &c., &c., &c.), he also published his directions for the treatment of Strangulated Hernia. That treatment killed the Patients. Very many lives have been destroyed by the treatment he advised,—viz., giving purgatives to prevent or cure Peritonitis. That

fatal error has since been corrected, and in the Treatise on Hernia recently written by John Birkett, Member of Council and Fellow of the Royal College of Surgeons, Consulting Surgeon to Guy's Hospital, etc., he says,—"The introduction of every kind of purgative medicine into the stomach must be scrupulously avoided in all cases of strangulated bowel."

Travers has put as a motto on his Title Page a quotation from Francis Bacon. "Prudens interrogatio quasi dimidium scientia." But, Violating and Outraging Nature is not wisely questioning the Goddess: and she grants not even half-knowledge to those who deface and cruelly mutilate her Children. Blundell himself admits in his Book, entitled "Researches Physiological and Pathological," the frequent fallacy of conclusions drawn from the mangling of Animals. He says: "To confirm this conclusion, the accuracy of which I doubted at the time, it was determined to submit it to the test of another train of Experiments. \* \* \* \* \* for I need not observe that circumstances often exert a silent and most fallacious influence over our Experiments, (our negative Experiments especially), to be deprecated the more, because, from its insidious nature, it is so frequently overlooked."

Is it not well known that Boarhounds are ripped and torn open by the tusks of the Boar, and their entrails let out to the ground;—those entrails washed, replaced, and the bellies of the Dogs sewn up by the Huntsman;—and the animals recover perfectly?

Did not the Annals of Military Surgery contain facts enough to guide you as to wounds of the Peritoneum?

Though the Animals who had their Peritoneums gashed and stitched up by you, apparently recovered sooner than those who had their Peritoneums gashed but not stitched up, nevertheless you could not possibly be at all sure from that what would be the result upon Women. YOUR STITCHING UP THE PERITONEUM OF A WOMAN STILL REMAINED AN EXPERIMENT. Even if you had cut open and stitched up the Peritoneums of a hundred species of Animals, that would not have demonstrated what would happen to a Woman under such treatment. No: Not even had you experimented — like Dr. David Ferrier—on the Monkey tribe.—No: Nor even had

you experimented upon the Orang—or got still nearer to "The Missing Link." No: Nor even had the poor brutes who wander happy in the Primeval Forests of Sumatra been afflicted with Ovarian Disease—and which, probably, they never have. For, 'tis Civilized Man, and not the Wild Animal, who inherits diseases dire from the intemperance of his Foregoers; and of his own pleasant vices makes instruments to scourge himself and his afflicted Race.

You, yourself, state, relative to the unmanly "Experiments" of German Professors on poor Bitches, etc.—such as mutilating the womb: "If we could hope in diseased Women for the same series of changes as have been observed in healthy Dogs and Rabbits, we might agree more completely with the conclusions of the German Experimenters." This remark resembles irony or contempt, but possibly it was not so intended by you.

You will, we think, admit that the following are some of the improvements which have done much to reduce mortality in Ovariotomy.

In the early days of the operation, Opium was too extensively used. An able Surgeon says, "Wounds do not unite so well with a Patient fully under the effects of this drug, as under other circumstances." You stated yourself, in 1859, that your confidence in Opium, as a preventive in Peritonitis, etc., was "unshaken." But most of the fatal cases since have been ascribed to Peritonitis, so possibly you, too, have partially eliminated Opium.

Considerable ignorance of physical Diagnosis in Ovarian Disease existed even fifty years ago, and such ignorance led to death. Exploratory incisions are now less frequently necessary.

To Mr. Baker Brown the division of the Pedicle, by the actual cautery, is unquestionably due; and Mr. Thomas Bryant asserts, that it "bids fair to do more for Ovariotomy than any other improvement of modern times." Dr. Thomas Keith's high opinion of this improvement, will be given presently; and the "Edinburgh Medical Journal," in 1868, termed this cauterization of the Stump of the Pedicle, "An enormous improvement."

The dropping of the Pedicle into the abdomen, with the divided ligature, was first done by Dr. Nathan Smith, of

Baltimore, in 1821, and followed in 1830 by David Rodgers, of New York. This bold innovation was not well received in England, though Brodie approved of the practice, and it is due to Dr. Tyler Smith "that it has now gained a hold on the Professional mind," and been followed by many Operators. You first adopted this method, we understand, in your 79th case, in 1863, but, previously, was it not your practice to fix the Pedicle externally in all cases?

On the 16th November, 1863, you "for the first time returned the tied stump, with the knots and loops of the ligatures, into the abdomen, and closed the wound completely, after the plan introduced by Dr. Tyler Smith." Your practice as to this important proceeding appears to have undergone a marked change between the 8th February, 1859, and the end of November, 1863. This appears to be indicated by the account you read before the Royal Medical and Chirurgical Society, on the former date, when you said, "I had long regarded the ligature on the Pedicle, and the sloughing of the stump within the abdominal cavity, as one of the most frequent causes of death after Ovariotomy." But, after November, 1863, you repeatedly returned the Pedicle into the abdominal cavity; and in October, 1878, Dr. Thomas Keith wrote, "With Antiseptics, some form of Intra-peritoneal treatment of the Pedicle will be found to answer best. The Clamp has done good service, but it must give place to something better." We presume that the Clamp here mentioned as having "done good service," is the one invented by Mr. Hutchinson.

Avoidance by the Surgeon and his Assistants of the Postmortem or Dissecting-room for several days before the operation of Ovariotomy is considered of much importance; and all Contagious Diseases should be carefully shunned. The necessity that all sponges should be new, all bedding fresh, the hands of the operator and every instrument scrupulously clean, is now much insisted upon.

Great improvement has been effected in the administration of Anæsthetics, and the success of the operation greatly influenced thereby. "Under the circumstances of Ovariotomy," Mr. Thomas Bryant states, "the value of chloroform as an anæsthetic cannot be too highly praised." But, in former times

Ovariotomy was undertaken before the introduction of any anæsthetic, and "to see a Patient writhing under the agonies of an abdominal section was enough to make the hardest heart turn with horror, and to witness the surgeon's hands within the abdomen of a struggling woman, in his endeavour to remove an adherent growth, was almost sufficient to make any professional spectator decide that such an operation was really unjustifiable." The absolute quiescence of the Patient gives you an immense advantage; an advantage which some of your able predecessors in the operation did not possess.

By the improved chloroform mixture of alcohol, chloroform, and ether, the injurious after vomiting is certainly less. In all your earlier operations chloroform was used. You next tried sulphuric ether. Then chloroform and ether mixed. After this, alcohol was added to the mixture. And then bichloride of methylene was brought out. With chloroform you "never felt quite at ease,"—and the vomiting, termed "Chloroform Sickness," was "a principal cause of fatal results."

Temperature of Room; great importance of free Country air; of experienced Nurses; of having few persons present at the operation; of warm flannel dress; waterproof sheet; guarding the patient against fluid that runs down during the operation; Improvements in Instruments by yourself, and by other medical men; the simplification of the operation by you; and the introduction by you of common-sense into the aftertreatment, have all tended to lessen the mortality in Ovariotomy. Experience has taught that very much better results from operations are obtained in the Country than in the Town;in private houses than in Hospitals. And in a Room alone, in a small Hospital; than in a Ward with other Patients, and subject to the influence of dissecting students in a large general Hospital. Also, it has been found that periods of good results in Hospitals depend upon Sanitary arrangements,—such as emptying, cleansing, lime-washing, and painting. And bad results upon crowding, bedding not purified, contagion, and infection. The difference in the Mortality in Ovariotomy in different large London Hospitals is enormous. In Guy's the deaths were stated as under 48 per cent. up to November,

1866,—but in King's College were above 85 per cent., and in Middlesex above 87 per cent. But this startling difference is not due to Experiments upon Living Animals.

Nursing has much to do with recovery, or death. Great improvements have been made in nursing.

The social condition of the patient has likewise a good deal to do with the result. Dr. Keith's deaths have almost all been among *poor* women; and he observes, "this is not accidental."

Dr. Keith's poor Patients, in his Private Hospital, received most assiduous attention; and, as Nature makes no social distinctions in functional structure of her children, and a Poor Woman's Peritoneum is very much like a Rich Woman's Peritoneum, "Experiments" on Guinea Pigs, etc., should prove of equal benefit to her.

A larger number of cases is now submitted to the operation in early periods of the Disease.

Mr. Jonathan Hutchinson, Senior Surgeon to the London Hospital, says, "No doubt something has been done in the introduction of more cautious after-treatment, especially in the comparative disuse of Opium. But chief amongst the reasons of the advance of Ovariotomy in general favour is, that it has been largely and openly tried."

In the above statement of that eminent Surgeon not a word is said as to anything having been obtained by Vivisection of Animals, nor does he ascribe success in the slightest degree to your practice of including the Peritoneum in the Sutures.

"It is not so much by individual efforts as by the wholesome rivalry that has arisen in the Profession that those (successful) results have been brought about"—says Mr. Thomas Bryant,—but he, also, so far as we are aware, makes no mention whatever of your Vivisection of Animals, and does not consider it of much consequence whether the Peritoneum is treated as you treat it—or, otherwise.

That most formidable operation, the Cæsarean Section, was successfully performed long before your day, and yet the incision through the Abdominal wall was made and closed as in Ovariotomy.

Dr. Thomas Keith, of Edinburgh, (the most successful of all Ovariotomists),—ascribes his brilliant and long series of successes anterior to Antiseptics, to Four circumstances.

- 1. To Koeberle's idea of using a large perforated glass tube going to the bottom of the pelvis. Concerning which, he, Dr. Thomas Keith, says, "I am as certain as I am of my existence, that had I used them earlier and oftener the mortality would have been less by one-third."
- 2. "To the use of the Cautery in dividing the Pedicle, as proposed and practised by the late Mr. Baker Brown."
  - 3. "To the employment of Kæberlé's Compression Forceps."
- 4. "To the substitution of Ether for Chloroform in my last Two Hundred and Thirty Operations."
- "So much," says Dr. Thomas Keith, "for Ovariotomy and its results before Antiseptics."

His results since have been still more happy. Out of Fortynine Cases done under the Carbolic Acid Spray, between March, 1877, and September, 1878, Forty-seven recovered. By Antiseptics the mortality is lessened, and the Drainage-tube not so often required. "Joseph Lister, who put us on the right way, will not be forgotten," are the concluding words of Dr. Keith. No credit, we think, is given, no mention whatever made, of your Experiments upon Animals; and no successful results attributed to your "Discovery" as to including the Peritoneum in the Sutures.

None of the eminent Members of your Profession I have quoted appear to coincide with you as to the value of your "Experiments" on Animals;—and it is, I believe, a fact that no claim to any Discovery having been so made by you exists in the REPORT OF THE ROYAL COMMISSION ON "THE PRACTICE OF SUBJECTING LIVE ANIMALS TO EXPERIMENTS FOR SCIENTIFIC PURPOSES."\* Most

<sup>\*</sup> Report of the Royal Commission on the Practice of Subjecting Live Animals to Experiments for Scientific Purposes; with Minutes of Evidence, etc. Presented to both Houses of Parliament by Command of Her Majesty.

London; Printed by Eyre and Spottiswoode, 1876. Price 4s. 4d.

Also, Digest of Evidence taken before the Royal Commission, etc., with an Alphabetical List of Witnesses. London: Printed by Eyre and Spottiswoode, 1876. Price 6d.

undoubtedly you did not appear as a Witness before the Commissioners.

But, even granting that your Vivisectional Experiments have been of the value you set upon them in regard to Operations, let the Public bear in mind that Cheselden, John Hunter, Abernethy, &c., regarded Operations (except as to Accidents) as a reproach of the Profession, because, most of them are consequent upon the imperfection of Medical Science.

We now leave the Public to judge as to the value of the assertions so loudly and persistently proclaimed as to your Experiments on Rabbits, Guinea Pigs, and Dogs being "The Crowning Triumph of Vivisection." We think many Members of your most noble Profession will regret that such assertions have been put forth, and the honourable success in Surgery achieved by distinguished and able men, been tarnished by ascribing a brilliant victory to a barbarous and unphilosophical Practice.

Whether it would have been better had you promptly and publicly contradicted the erroneous statements which ascribed to the Vivisection of Animals the success due to the foresight, skill, sense, and experience of yourself and other men, we express no opinion, but we fear that your continued silence tended to the infliction of useless and unjustifiable suffering on many creatures, and to perpetuate a Practice which we hold to be equally opposed to Morality, true Philosophy, and the temporal and eternal Welfare of the Human Race.

I remain

Yours sincerely.

GEORGE R. JESSE.

Honorary Secretary, etc. SOCIETY TOTAL ABOLITION VIVISECTION.

- T. SPENCER WELLS, Esq.,
  - 3, Upper Grosvenor Street, London. W.

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3, Upper Grosvenor Street, London, W. 23 March, 1880.

SIR,

I have received and read your letter of the 20th inst. In reply, I need only say that I think Lord Selborne, the Bishop of Peterborough, and Sir James Paget, are fully as competent as any member of the Society for the Total Abolition of Vivisection, to judge upon questions of Evidence, Morality, and Surgery. You may not be surprised, therefore, when I say, that the appreciation of the above three eminent representatives of the Law, the Church, and of Medicine, more than compensates for the attacks of the Anti-Vivisection Society.

In reply to your statements about Dr. Keith—whose brilliant results in Ovariotomy are a pride and a delight to all true Philanthropists—I may inform you that he has published his opinions in the "British Medical Journal," (Vol. 2 of 1873, page 739), that before I began my work in 1858, "Ovariotomy was then as an operation simply nowhere."—And he says, of what he calls my "great work," that "there never has been anything like it in Surgery since Surgery began."

If you publish your long letter, I shall be obliged if you will also publish with it this short note.

I remain,

Yours sincerely.

T. SPENCER WELLS.

To G. R. Jesse, Esq., Hon. Secy., etc.

Henbury, Macclesfield, Cheshire, 26 March, 1880.

SOCIETY TOTAL ABOLITION VIVISECTION. Dear Sir,

Your letter, dated the 23rd inst., arrived yesterday.

Instead of entering into a "discussion of the subject,"—as you contemplated doing,—you retire behind "three eminent representatives of the Law, the Church, and of Medicine." But, high as the voice of authority may be, its power must yield, in these days, to reason, facts, and experience.

Lord Selborne does not appear to have read up the subject.

The Bishop of Peterborough has mixed up Surgery with his Morality in a remarkable manner.

He is reported to have stated in the House of Lords,—"His Friend wished to ascertain" whether "Sutures inside the Intestines" resulted "in dangerous inflammation." We do not suppose that you appeal to this statement, made on your behalf by the learned Prelate.

As to Sir James Paget, he certainly never intended to ignore the very great improvements made in the removal of Ovarian Tumours by "the first great Apostle of Ovariotomy in this country, Dr. Charles Clay of Manchester:" Mr. Baker Brown: Dr. Tyler Smith: Dr. Keith of Edinburgh: Kæberlé: and other able Surgeons.

You do not meet the point at issue. Of your great skill and success we have no doubt whatever. We have expressed our appreciation of them. But we do not believe that your skill is due to Experiments upon Animals; or, that you have made "A Discovery" by Vivisection. The flattering praises of the eminent persons you put forward, are, doubtless, very gratifying to you; ——still, they are not argument. They do not demonstrate that you achieved "the Crowning Triumph of Vivisection;"—removed an "opprobrium medicorum;"—and saved the lives of thousands of Women through "A Discovery" made by "Experiments" on a few Guinea-Pigs, Rabbits, and Dogs.

In reply to your quotations of Dr. Keith's kind expressions in the "British Medical Journal" of 1873, pray permit us to refer you to his comments in the "British Medical Journal" of October 19, 1878, relative to the Samaritan Hospital and its Reports.

We shall have pleasure in complying with your request as to the Publication of your note with the rest of the Correspondence.

I remain,

Yours sincerely.

GEORGE R. JESSE.

Honorary Secretary, &c.

T. Spencer Wells, Esq., 3, Upper Grosvenor Street, London, W.

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"Publicity is the Soul of Justice."—BENTHAM.

# TO THE PEOPLE OF GREAT BRITAIN AND IRELAND.

# CORRESPONDENCE DR. CHARLES CLAY, M.D., ON OVARIOTOMY.

MANCHESTER,

April 6th, 1880.

My DEAR SIR.

I am very much obliged to you for the Pamphlet Correspondence between T. Spencer Wells and yourself, with which I was much interested.

Fifteen years after my first operation, (in 1842), T. S. Wells came to Manchester to be present at one of my Operations, and made many enquiries, amongst which,—"Did I include the peritoneum in my interrupted sutures?" I replied,—"Certainly:" and gave as my reason, that in two Cases where the suture had not included the peritoneum Hernial protrusions had followed. I also added, that Peritonitis could only be set up once whether the sutures included the Peritoneum or not. I was for some time after in correspondence with Mr. Wells, but never heard of Vivisection in connexion with Ovariotomy, nor can I perceive any advantage that Ovariotomy has received from such experiments. All my operations from first to last have shown the same average amount of success,—about 75 per cent. I have never practised, nor yet countenanced Vivisection. I have given up operating after 400 Cases and about 100 Deaths.

I am, Dear Sir,

Yours obliged.

CHARLES CLAY. M.D.

G. R. JESSE, ESQ.

Henbury, Macclesfield, Cheshire.
7 April, 1880.

My DEAR SIR.

I am gratified by your kind letter, and to learn that you coincide with Dr. Lawson Cape and ourselves as to Mr. Spencer Wells not owing his operative success to Vivisection. As you informed him in 1857 when he came to see you in Manchester, that you included the Peritoneum in the Sutures when performing Ovariotomy on Women, it is not easy to perceive what object he could have had in view in "experimenting" afterwards on the Peritoneums of Animals. Indeed, the statements made by Mr. Spencer Wells to Dr. B. W. Richardson, and the Bishop of Peterborough, (See pages 8, 9, and 10 of our Correspondence with Mr. Spencer Wells), appear inconsistent with pre-established facts and knowledge, and the Public may be of opinion that such statements require explanation.

Sir William Ferguson asserted, in 1875, that "In Surgery he was not aware of any of these experiments on the lower Animals having led to the mitigation of pain or to improvement as regards Surgical details."\* We have an impression that Mr. Spencer Wells' experiments are no exception to that rule.

Hoping you have no objection to the publication of your valuable communication,

I remain, dear Sir,

Yours sincerely.

GEORGE R. JESSE.

Honorary Secretary, etc.,

SOCIETY TOTAL ABOLITION VIVISECTION.

DR. CHARLES CLAY. M.D., MANCHESTER.

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<sup>\*</sup> See his Evidence in the Report of the Royal Commission on the Practice of Subjecting Live Animals to Experiments for Scientific Purposes. Page 50: Question 1049.

"Publicity is the Soul of Justice."-BENTHAM.

# TO THE PEOPLE OF GREAT BRITAIN AND IRELAND.

# OVARIOTOMY.

#### LETTER FROM

## ROBERT McCORMICK, R.N., F.R.C.S.

Deputy Inspector-General of Hospitals and Fleets; Chief Medical Officer and Naturalist to the Antarctic Expedition in Voyage of "Erebus" and "Terror," &c., &c., &c.

#### To GEORGE R. JESSE, Esq.,

Honorary Secretary and Treasurer for the Society for the Total Abolition and Utter Suppression of Vivisection, Henbury, near Macclesfield, Cheshire.

Wimbledon, April 12th, 1880.

My DEAR JESSE,

I need scarcely say, I have read your Pamphlet on the "Ovariotomy Controversy," which you kindly sent me, with the deepest interest and satisfaction; and from the able and skilful way by which you have disposed of your opponent, I look upon your letter as a masterpiece of reasoning, which would have done credit to either a Legal or Medical Authority. None could have acquitted themselves better,—few so well. Indeed, so little have you left to be said on the subject, that, but for my being a "Member of the Council" of the Society which owes its very existence to yourself and for which you have so indefatigably and honourably laboured, I should not have felt myself called upon to make any comments at all,—so complete and exhaustive have been your own discussion of the subject in all its bearings.

I fully agree with you that whatever weight high sounding Names may for a time carry with them in favour of Vivisection, and with all due respect for Lord Selborne, the Bishop of Peterborough, or even that all-powerful, able, and usually farseeing and clever Organ, "The Times," all must eventually yield to the stubborn influence of facts and experience.

The question at issue is one belonging more especially to the province of the Anatomist, by whom the problem must finally be solved. And I have too high an opinion of my fellow Countrymen, for one moment to suppose they would encourage a system of barbarous wanton cruelties of exotic growth and introduced but recently by foreigners under the term of "Vivisection," having for their victims helpless Animals. I have reason to believe the majority of our Noble Profession cannot but agree with me that "Vivisection" never did and never will advance either the interests of Science, or even by the most indirect means enable that Profession to mitigate the sufferings of Humanity one iota. Take, for example, the subject under discussion,—"Ovariotomy:"-what does it really owe to the Dissection of Living Animals? Let the Professors and Supporters of this cruel and un-English system answer for themselves if they can. It appears to me conclusive enough that in respect to the Operation itself, Surgeons are far from being unanimous as to whether the Peritoneum should be included in the sutures or not, and Dr. Thomas Keith of Edinburgh, the most successful of all the operators in Ovariotomy, is silent about it.

Vivisection is not only useless, but since its introduction into this Country must have done much injury to Science and Humanity—disposing our young Medical Students to become callous and indifferent to suffering; as well as leading its Professors to false inferences and conclusions inseparable from Experiments on the Lower Animals, which Experiments cannot be relied upon in operations on the Human subject. In the Newt, a small Lizard, the most severe mutilations to the body are repaired by Nature, even to the reproduction of a tail or the feet when broken off. Again,—some poisons destructive to Human life are innocuous to some Animals, etc., etc.

If I have written somewhat strongly on this painful subject, it is because I not only feel strongly but Comparative Anatomy has been a life-long pursult of mine, and now, as an "Octogenarian," still has its charms for me as when years long past dissecting the Great Penguin of the Antarctic Seas I found the beautiful arrangement, so wonderful in design, of a circle of small muscles surrounding the insertion of each feather in the skin, which enabled the bird to rotate them on coming out of the water, and which had so often attracted my attention and was subsequently so beautifully described in a series of plates of the Penguin at the Royal College of Surgeons by my distinguished friend, Professor Owen, from the specimen I sent him for the College Museum.

Ever,

My dear Jesse,

Faithfully yours.

R. Mc.CORMICK. R.N.

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# SOCIETY FOR THE ABOLITION OF VIVISECTION

This Society (the first of its kind) was Established in February, 1875. GEORGE R. JESSE, Esq., Hony. Secy., and Chairman of Committee.

#### SOCIETY FOR THE TOTAL ABOLITION AND UTTER SUPPRESSION OF VIVISECTION.

This Society has the same Object and Supporters as the above. It has a Council and Leg Constitution; and was founded March 1876, in consequence of an attempt made (but ultimately defeated), to suppress the original Society by a Chancery suit.

This Society numbers amongst its supporters the following and many oth persons of distinction:

H.I.H. Prince Louis Lucien Bonaparte.

Prince Batthyany. The Marquis Townshend.

The Earl of Charlemont.

The Countess of Charlemont. The Countess of Albemarle.

The Lord Camoys.

The Lady Forester.
The Lady William Godolphin Osborne.
The Lady Abinger.
The Lady Charlotte Blount.
The Lady H. Saint-Maur.

The Lady Hawley. The Hon. Mrs. Cowper-Temple.

The Hon, and Rev. L. W. Denman. The Hon. Mrs. Annesley Gore. The Hon, Mrs. F. R. Boyle.

Sir William de Capell-Brooke, Bart. Sir Christopher R. Lighton, Bart.

Sir Walter R. Farquhar, Bart. Sir Arthur Hallam Elton, Bart.

Sir Patrick Colquhoun, Q.C., LL.D.

General Jephson, C.B. Miss de Winton.

Mrs. Oates.

Professor Francis W. Newman. Professor T. W. Moffett, LL.D. George W. Marshall, Esq., LL.D., F.S.A

Hony. Secy., and Treasurer-GEORGE R. JESSE, Esq., Henbury, Macclesfield, Cheshire Bankers-Messrs. HERRIES, FARQUHAR, & Co., 16, St. James's Street, London.

The object of the Society is a Law for the Total suppression of Vivisection or putting animals to death by torture under any "Scientific" pretex whatever. To call on the Legislature for less would be to admit the principle (and thereby perpetuate the enormity) that man is justified in selfishly inflicting agony on the innocent.

Opponents of the Slave Trade agitated not for restriction but abolition The wrongs perpetrated by man on animals are even more dire than those inflicted by him on his own species. The Abolition of Slavery was an act of high Christian philanthropy. It is no less noble or less Christian to stop the sufferings of other helpless creatures of our God.

The hideous cruelty of dissecting living animals, or inflicting on them though innocent and defenceless, multitudinous deaths of excruciating and protracted agony, has secretly grown up in this Nation—a Nation which for ages past has been nobly distinguished by the courageous and unsanguinary character of its people.

This moral ulcer has spread widely, and (whether it be or not a dreadfu form of insanity) become dangerous and demoralising to Society-a blot or civilisation—a stigma on Christianity. The public has little idea what the horrors of Vivisection are; its crimes in studied, ingenious, refined, and appalling torture, in wantonness, uselessness, and wickedness cannot be surpassed in the annals of the World. It therefore calls for extirpation by the Legislature, cruelty being not only the worst of vices in itself, but the most retributive to mankind, more especially when perpetrated by the refined and educated.

### THE NATION IS APPEALED TO FOR AID.

Subscriptions may be paid to Messrs. Herries, Farquhar, and Co., 16, St. James's Street, London. S.W.; or to George R. Jesse, Esq., Honorary Secretary and Treasurer, Henbury, Macclesfield, Cheshire.