Lastly, will reporters of fair reputation be allowed a seat on the floor of the convention, that all of us may be made acquainted with the whole movements and steps of an undertaking that is so intimately connected with the advancement of the medical profession in America?

Saratoga Springs, March 4, 1846.

M. L. NORTH.

VACCINATION AFTER EXPOSURE TO SMALLPOX.

By Samuel Salisbury, Jr., M.D.

[Communicated for the Boston Medical and Surgical Journal.]

MRS. S——, a married woman, 36 years of age, unprotected by vaccination, left home to visit a friend who resided in the city of Rochester, eighteen miles distant. She found her friend confined to her bed, and affected by natural smallpox. After sitting by her bed-side about half an hour, she crossed the street to a physician's office, was vaccinated, and returned home. The progress of the vaccine disease was regular, the vesicle forming perfectly, and attended with considerable constitutional fever on the eighth and ninth days. Virus was taken from the vesicle on the eighth day, and inserted in the arms of seven persons, five of whom were children, by a physician who was ignorant of the exposure of this woman to the contagion of smallpox. On the eighteenth day after her visit to Rochester, I was called, and found her in the eruptive period of smallpox; symptoms of which she told me had manifested themselves four days before. The disease was of great severity, its violence being in no degree mitigated by the prophylactic power of the recent vaccine disease. Of the children vaccinated from her arm, three had the cowpock succeeded by modified or mild smallpox, but partial desquamation having taken place when I visited them on the twenty-first day from the vaccination. In the other two, the vaccine vesicle was fully perfected, and not succeeded by any symptoms of smallpox. The two adults, who were vaccinated with virus taken from the woman's arm, left the place, and I learned nothing further of them, than the fact that they both escaped the smallpox. Neither of the five children had been vaccinated previously, and circumstances did not favor the idea of a direct communication of the disease from the woman to them.

The foregoing case leads us to the following conclusions.

I. Vaccination on the day of exposure to the contagion of smallpox is not always a protection. Might it not have proved a protection, had it been deferred for four or five days, so that the manifestation of the constitutional symptoms of both diseases would have been synchronous?

II. It is unsafe to make use of vaccine virus taken from persons who are in a location where smallpox exists; whether the smallpox in these children be viewed as caused by the vaccination, communicated through the medium of the physician, or as arising from an epidemic influence.

As safety from attacks of smallpox depends on the change produced by the vaccine disease in the system of the individual, we should view it as essential that the whole system, and not merely a portion of it, be

brought under its influence. The *constitutional* phenomena of cowpock are as indispensable as the *local*, to the abolition of the individual susceptibility to the contagion of smallpox. The imbibition of the inoculated virus into the circulating current of the blood of the arm does not necessarily, or in every instance, affect the whole human system, for it may not always be absorbed, or diffused in the general circulation to such a degree as to produce any change in the nervous system or its functions. Individual idiocrasy, the nature of the virus introduced, violent inflammation occurring around the vesicle producing a kind of local congestion, either of these we conceive may so far diminish the effect of the virus, as to render it uncertain, however regular the progress of the vesicle, whether the individual has had a perfect course of the eruptive fever termed cowpock. The fact of the greater intensity of the symptoms which follow inoculation direct from the cow, leads to a suspicion that much of the virus in common use has in a degree lost its energy.

A consideration of the general principles which are supposed to govern the operation of morbid poisons, and exanthematous diseases, as well as known facts, impress us with a sense of the importance of revaccination with virus which has been renewed by reproduction from its original source, the cow :

- I. As a test of individual idiocrasy ;
- II. In order to determine the perfection of the virus previously introduced ;
- III. Lest all the symptoms of the cowpock, both constitutional and local, were not produced by the previous vaccination.

Avon, N. Y., March 3d, 1846.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 18, 1846.

Medical Graduates in Boston.—On Thursday last, the examination for degrees was closed at the Medical College, and thirty-one gentlemen, having passed, in the most satisfactory manner, have ere this received the honors of the University. Dr. Channing, the Dean of the Faculty, assured us that he was never more gratified with the qualifications of a graduating class. This is creditable to the newly-made doctors, and we congratulate them in leaving the Medical College with the high approbation of those who have conducted them through their professional studies.

Specific Treatment of Smallpox.—In view of the general prevalence of smallpox at the present time, Dr. Robert Wesselhøft, of Brattleboro', Vt., a hydropathic practitioner, has recently addressed a letter to the Mayor of Boston, on the subject of a "*Specific treatment of smallpox, which is now in use in Germany, and simple as sure.*" "The ravages which