PRINCIPLES OF HOMŒOPATHY: IN A SERIES OF LECTURES

Published @ 2017 Trieste Publishing Pty Ltd

ISBN 9780649479641

Principles of Homceopathy: In a Series of Lectures by B. F. Joslin

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Edited by Trieste Publishing Pty Ltd. Cover @ 2017

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LECTURE I.

OBSTACLES TO HOMOSOPATHIC INVESTIGATION AND BELIEF.

Educated physicians who embrace Homeopathy in the present early stage of the reformation. are under the necessity of sacrificing not only. their preconceived opinions, but a portion of that respect which they previously enjoyed in the profession and the community. In order to make these sacrifices, they must generally be men possessed of sound minds and actuated by pure and lofty motives --- men who prefer facts to hypotheses, and the interests of truth and humanity to their own temporary advancement. Though the Homeopathic physician, before he can be recognised as such, is required to possess as thorough knowledge of every branch of medical science as the most respectable portion of his Allceopathic brethren, and although he has actually gone through a regular course of Alloeopathic study, under Allocopathic professors, and has been by Alleeopathic boards of examiners, declared duly; qualified to practise medicine, he is now proscribed

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for the knowledge which he has superadded. However highly the Homoeopathic physician may be respected for his probity, his learning, and the general strength and soundness of his intellect, yet as a Homoeopathist he is regarded by the mass of the community as a kind of monomaniac, and is viewed with suspicion and jealousy, if not contempt, by a majority of those to whom the public look up as the leaders of medical fashion, and the expounders of medical doctrine. Under such circumstances, it is not to be expected that the ranks of Homoeopathy are to be filled from among the timid, the ambitious, the avaricious, the devotees to medical fashion, or the aspirants to medical honour.

The converts to the new doctrine are not to be sought among undergraduates still dependent on the patronage of professors, nor among newlyfiedged licentiates still fortified against new truth by undue reverence for the dogmas of the schools, and inexperienced in their practical fallacy at the bed-side of the patient. This must be the general rule. If any have been exceptions, they are worthy of peculiar honour, as men whose intellectual powers and moral qualities have been such as to elevate them above the unfavourable influences by which they were surrounded.

There is another class with whose countenance and presence our fraternity can rarely hope to be honoured. They are those who have arrived at

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that age which thinks and acts from habit, and recoils from a new and laborious investigation, and a total revolution of their theories and practice. Upon the more aged specimens of this class I look with mingled feelings of respect, sympathy and regret. They have sincerely simed to do their duty and promote the welfare of man under the best lights formerly accessible. That they were born a few years too early for this glorious and beneficent reformation, is their misfortune, not their fault. It is now too late even for their friends and the friends of truth to desire their conversion, which might involve personal sacrifices transcending the amount of public good achieved by their future labours. Such individuals, however, are not numerous in our laborious and self-sacrificing profession, in which an unavoidable neglect of regimen, occasioned by imperative and unreasonable calls, induces disease, and cuts off a great majority of our fellow labourers in the midst of their useful career.

There is another class of unbelievers which, from the nature of the case, must embrace some of the foregoing class. It consists of those who are regarded as eminent in the medical profession. They are rich in honours and emoluments. Their circumstances naturally give them a strong bias against innovation. They apprehend that a medical revolution would check their brilliant career, and from their towering elevation, suddenly de-

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grade them to the leval of second-rate practitioners. Some among them may not only have attained wealth and popularity by practice, but honourable and influential posts as teachers of medicine, and, what is still more unfavourable to conversion -should their love of truth be less active than their self-esteem and love of approbation-some of them may "have written a book," and stereotyped their opinions. To this whole class, their admiring pupils direct our attention, and exultingly inquire, "Have any of the rulers or of the Pharisees believed on him?" Have the leading and most learned men of the profession been converted by Hahnemann? Then turning to his followers, they exclaim with contempt, "But this people, who know not the law, are cursed."

With many individuals, such a state of things is unfavourable to their reception of the new truth. Conversion requires either the absence of these circumstances, or else an intellectual and moral character capable of resisting their influence.

There are other influences arising from the inherent nature of the doctrine and of the evidence adduced in its support. These oppose its reception in proportion to the defects in the mental character and in the previous training in observation and induction.

I shall allude only to the inductive character of Homceopathy, and its analogy in this respect to the physical sciences as now cultivated, and to

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