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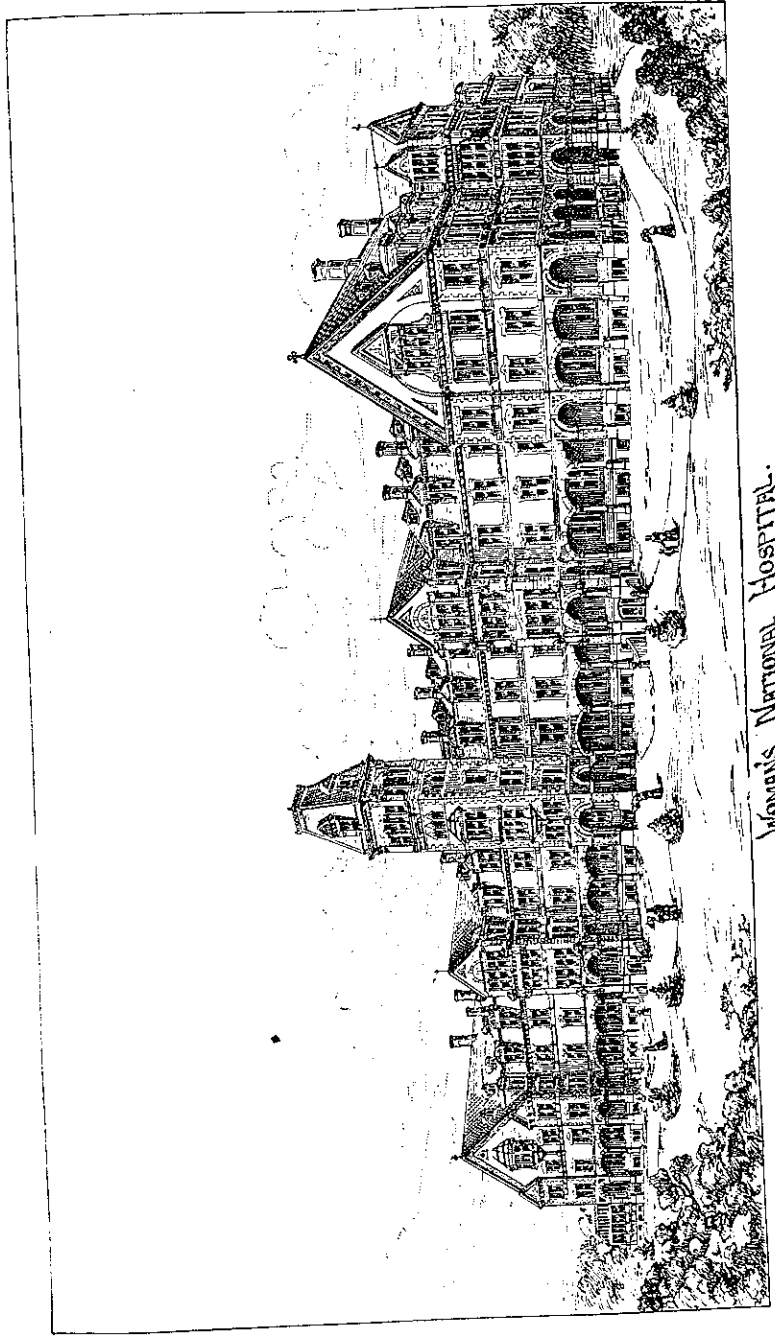
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SKETCH OF THE LATE DR. J. EDWARD TURNER,  
THE FOUNDER OF INEBRIATE ASYLUMS.

By T. D. CROTHERS, M.D., HARTFORD, CONN.

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[Continued from p. 312, October, 1889.]

Heavy head winds had blown continually over the track of this enterprise, and now sudden squalls and cyclones of adverse public opinion gave certain signs of the storm region. The projection and building of an inebriate asylum was a distinct work, and the management and treatment of inebriates was equally new and distinct. The opposition which had retarded the work for a quarter of a century seemed to die away in part, only to break out again with renewed vigor when the question of treatment came up. Dr. Turner's management of the asylum and its patients was sharp, distinct, and emphatic. The institution was a hospital and the remedies were physical, and the individuality of the patient must conform to the principles and the laws of the asylum. As in the founding of the asylum Dr. Turner had formed very clear conceptions of the practical needs and methods of treatment, which were far beyond his day and generation. Looking back after a period of twenty years of

experience and advance in this direction, one is greatly surprised to find how accurate and correct Dr. Turner's measures and methods of treatment were. Every asylum superintendent realizes, from actual experience, that control of the patient and all his surroundings should be absolute to make the cure a possibility. That this control should extend over a long time, and not be governed by the will of patient or his non-expert friends. This was the first principle of treatment laid down and defended by Dr. Turner. On the other side the moralists and patients' friends assumed that each case should have full liberty to determine the question of treatment, and that moral appliances should be foremost of all; also that the asylum should be a popular resort for the patients in every way; that restraint should be only nominal, and the patient's choice and discretion should be consulted.

These views and their advocates were treated with just contempt by Dr. Turner and the board of directors, who were in full accord with him in his conceptions of treatment. In 1865, Dr. Willard Parker of New York city was elected president. Unfortunately, he was a man without any clear conceptions of the inebriate, and without any idea of truths or principles that were unpopular or ignored by the present. As a profound believer in public opinion of to-day, he could not comprehend pioneers or pioneer work, and could not understand how anything could be true that was opposed by the popular sentiment of the hour.

The great central orb of his life was the "Vox populi vox Dei" theory, and to keep on the very crest of popular opinion was his highest ambition.

About this time an unscrupulous lawyer became a member of the board of trustees, a man whose only purpose in life was to get rich, and the asylum and its work was to him a means to this end. As in all the great tragedies of the world, he played the part of heavy villain with success. The financial records of the asylum leave no doubt on this point.

Soon after Dr. Parker became president he complained

that the mental irritations and complaints of the patients under treatment were evidence of the failure of Dr. Turner's methods, which he proposed to remedy, by larger liberty, and by placing them on their honor, as they were "all members of Christian households," etc., etc. Dr. Turner replied "that these patients were suffering from a physical disease, and the source of mental irritation was from within. The promise and pledge had long ago been exhausted, and the asylum never recognized any promise or honor of the patient. The restraints were lessened as the patient improved, and manifested greater physical strength," etc., etc.

It was evident from this that another storm was gathering, and the board of trustees who had up to this time been in full accord with Dr. Turner would now divide.

Dr. Parker, true to his ideals of life, concluded that the asylum could be made popular, and that patients would come as freely and cheerfully as invalids to the healing waters of a medicinal spring. Here was an opportunity to become the great leader in a new and popular cause, and his lawyer friend on the board, with wily cunning, fostered this view. Hence, Dr. Turner's friends, in the board of trustees must be replaced by others who would unite with Dr. Parker and his plans. Then began a series of intrigues and efforts to get certain members of the board to resign and put others in their place, at first very secretly. Then these efforts became bolder, and finally a resolution was offered of inquiry into the finances. When these were found correct, the question came up how Dr. Turner should be paid for his services, he having received no salary for all his years of labor. When it was found that two years before Dr. Mott had offered a resolution that Dr. Turner receive a salary and all expenses incurred in building the asylum, and this be credited as paid-up stock to the asylum, they refused to recognize it as binding. Then they offered him six months' vacation in Europe with full salary. When he declined, they demanded a full financial statement; this being found correct, a minority of the board dismissed him and put the assistant physician in his

place. A full board reinstated him; then followed charges of illegality of the action of the board. Thus the year of 1866 was passed in the most disgraceful intrigues and efforts to drive Dr. Turner away, and make his management a failure. Patients were inspired to drink and keep up a ferment. Slanderous, untruthful statements were given to the press and repeated wherever they could influence public sentiment. The asylum was practically the battle-ground, and the patients were made parties in the conflict as far as possible. Finally the board resolved to close the asylum, ostensibly until the completion of one wing, but literally until the conflict could end, or Dr. Turner would resign. The patients were sent away and Dr. Turner continued the management and erection of the asylum wing with all the energy of his earlier efforts, when an incident occurred which roused the most intense personal feeling, that was never after forgotten, and changed the whole tenor of his life.

Dr. Parker and the lawyer member of the board resolved to starve out Dr. Turner and family. Selecting a favorable moment when he was away, they issued special orders that no groceries or farm supplies should be sent to the asylum from the town, and the asylum farmer should under no circumstances give Dr. Turner's family any milk or produce. Had it not been for some neighboring friends his family would have suffered. Up to this time the struggle had been a great encounter for a scientific truth, in which Dr. Turner had been conscious of success and ultimate triumph. Now it became a personal matter, the lion in his nature was roused, and on to the latest moment of his life he never forgot or forgave these men. In speaking of this event, he said "he suddenly realized that these men were desperate and determined to carry out their projects at all hazards, no matter what the consequences might be."

In 1864, a heavy fire had destroyed some part of the building, and now, two years later, this lawyer-trustee obtained an indictment against Dr. Turner for arson, alleging that he put fire to the asylum for the purpose of the insur-

ance. This indictment was used to prejudice the public against him in every part of the State, and was finally quashed without a trial. Among those who knew it was regarded as a base conspiracy to destroy his reputation as the founder of the asylum. The storm was at its height; public opinion, which had been against the work and its founder from the beginning, now seemed to concentrate with greater intensity and demand his removal. His friends on the board, who had supported him with great energy and spirit, saw that the outcome of this contest would be to destroy the asylum, and urged that he accept some stated sum and leave the work. To abandon the creation of his life-long efforts, to give up the asylum for which he had given over twenty years' labor, and now, when he was on the eve of demonstrating its success, be forced to leave it to the care of those who had no idea of the work, must have caused the most intense sorrow and disappointment. Dr. Turner, like a true pioneer, could realize, that while he might triumph in a long-continued struggle with the board of trustees, the institution would be more crippled than to give it up and wait for reaction of public opinion, which was sure to come sooner or later. He saw clearly that the asylum treatment of inebriates had begun, and was beyond the power of public opinion or individual effort to crush out.

Dr. Parker and his advisers realized that they had roused up a dangerous antagonist in the founder; that although they had forced him to resign, and tried to ruin him as far as possible, any moment he might appear in some unexpected way and take possession of the asylum, and send a lurid light over their proceedings. To save themselves from this contingency they transferred the property to the State of New York for one dollar consideration, making it a State asylum, expecting in this way to have more certain control of the management. In their eagerness to accomplish this they made a fatal blunder, which will some day come to judgment and be corrected. The asylum was a stock company and could not be transferred or sold without the con-



sent of the majority of the stockholders. This was not done; the board of trustees assumed ownership and sold it to the State, and it was accepted with their deed. To-day the magnificent property called the New York State Insane Asylum, at Binghamton, is not legally owned by the State, but has been secured by fraud, which will some day be revealed.

In February, 1867, Dr. Turner left the asylum permanently and went to his home in Connecticut. In May following the asylum was opened for patients, and Dr. Day was made superintendent. The contest among the trustees as to the legality of their work and who was entitled to vote, still continued. Dr. Turner's friends determined to dispute every effort to keep the management from degenerating into a "ring," whose only purpose was pecuniary and political gain, but they failed, and one by one dropped out.

In 1869, a fire occurred in the building, and one of the trustees issued a pamphlet accusing Dr. Day and his friends of setting it on fire. A most atrocious statement, showing the character of the trustees. Another illustration of the same spirit appeared in the October number of the *Atlantic Monthly* for 1867, written by James Parton. The chief purpose of the paper was to show the dishonesty of Dr. Turner. He was called an "English adventurer" and other opprobrious names, and it was asserted that the asylum was built by fraudulent representations, and the present management had rescued it from quackery, etc. This paper made a strong impression at the time, yet read to day in the light of subsequent events is literally the greatest compliment that could be paid undesignedly to the genius and skill of Dr. Turner. This paper, like others of the same bitter cast, was badly written, the opprobrious names, the intense personality, the obviously unfair statements, and the minuteness of many of the charges and a description of the motives which prompted them, were unmistakable evidence of unreliability. The first wave of public opinion might accept such statements, but great wrongs are never written down in that way, and

great facts are only fixed and made more apparent by such personal opposition.

Thirteen years later the asylum at Binghamton was declared a failure and changed to an insane hospital. Five different superintendents had each tried to treat the inebriate on the popular plans of the president, and failed. Political intrigue and dishonest management hurried on its final end, but not until the conceptions of its founder and the inspiration which he left in the work had taken root in many new asylums all over the world.

Like the elder Napoleon, Dr. Turner never recognized defeat; perennial hope and a deathless energy filled all his thoughts and efforts. He left the asylum in February, 1867; a few days later he started out on what he humorously called his "second campaign." This was to secure subscriptions for rebuilding the asylum, parts of which had not been completed, and also to procure assignments of the original stock to him by the old stockholders. All his old friends gave him their stock and aided him in every way.

Then followed another long tramp of six years, visiting every prominent man in the country, many of them over and over again, soliciting stock and subscriptions, and explaining the plans and methods of Binghamton, and the wrongs he had suffered. Day after day he persistently sought the homes and offices of the leading men in all professions and business circles, and the story of his pioneer work, its present and future, was heard by nearly every prominent man of the country. The list of subscribers grew daily, and embraced the most intellectual men in the country. Over ninety-five per cent of the stock was transferred to him, and he was literally the legal owner of the asylum; still he kept on. Now and then he appeared at Binghamton asylum, looking around with great interest at the changes going on, and seemed to become more enthusiastic after such visits.

At length, in 1876, he began a suit against the trustees of the asylum and the State of New York in the United

States Circuit Court. After several hearings and a large volume of testimony had been taken, the judge decided against the case on some technical point, but gave leave to amend the complaint, and begin the case in a different way. An appeal was taken to hold the case open for the future, but unfortunately it was never carried any further. Several important legal points were involved requiring a long contest before a decision could be reached, and Dr. Turner was unable to pay the necessary expenses to this end. Several leading men offered to carry on the suit and pay all the bills, taking a per cent. of the stock of the asylum as pay, but for some unknown reason Dr. Turner declined this, fearing that he would lose the asylum again by some combination. He seems to have thought that in the near future he could carry on this suit alone, and have the support of public opinion, and be reinstated as superintendent and owner of the asylum, without difficulty. He seemed to have a growing dread of boards of managers and all partnerships, and preferred to leave undone what he could not do himself. This was a natural outgrowth of his experience. Offers of aid that involved association of interests frightened him hence this suit was put off to the future, when he could carry it alone. It was also evident that this suit would require a long time to bring to a final issue, so he determined to start another campaign as he called it. This was the organization and building of a great woman's hospital for inebriates and opium eaters. This project was begun in 1875, and after the halting of the suit, in 1877, he gave all his energies to the organization. With a subscription book he started out on the same beaten track which he had traversed for over thirty years, personally visiting all the leading judges, lawyers, college presidents and professors, clergymen, physicians, and governors of States, and every politician of note from the White House down. The subscription was five dollars as a stock company, on the same plan as Binghamton Asylum. Year after year he worked night and day, traveled all over the country in all seasons, and by all sorts of means. Talked incessantly of the first

*Sketch of the late Dr. J. Edward Turner.* 9

asylum, and urging his second project of a woman's hospital so successfully, that he procured the largest personal endorsement and subscription lists of names of leading men of the country that had ever been gathered excepting that of Binghamton Asylum. In the winter of 1881 the legislature of the State of Connecticut gave him a charter for the first asylum for women inebriates ever projected on a large scale, called the *National Woman's Hospital*. The citizens of Wilton, Conn., and neighboring towns, contributed freely, and a large tract of land was given the hospital. The board of directors were personal friends, and once more this matchless genius as an organizer was directing the formation and growth of an asylum that might have gone down to all future time. On the tenth of October, 1881, a few hundred farmers and professional friends gathered on a magnificent hill-top, and broke ground for this last new humanitarian work of his life. A little son and daughter of Dr. Turner shoveled the first dirt and wheeled it away. Some speeches, a poem, a prayer, and the work began. The day was cloudless and beautiful, and will never be forgotten by those who could appreciate Dr. Turner and his far-reaching work.

The plan of the asylum was spacious and artistic, and the plans of subscriptions for building the asylum showed masterly art. Wards, free beds, chapel, parlors, furnishing rooms, capitals, columns, pillars, and everything about the building were to be endowments and gifts to bear the donor's name forever. The subscription book was arranged so that each donor could see where his money would be expended, and how his name would appear in the building.

In all probability no other institution was ever planned with such skill to reach the hearts and the homes of the benevolent, and no other asylum had such a certain promise of success. Dr. Turner had neglected to secure a permanent control of the asylum at Binghamton when it was offered him by resolution of Dr. Mott; now he seemed to have made a similar mistake in attempting so great a work alone. If he had associated with him a number of influential friends and

assistants, the work would soon have been beyond the power of any personal antagonisms. But working alone it would require years of the most arduous labors to complete. The board of trustees were unable to give only their full sympathy and counsel. Three years passed by, and the subscription book of the hospital had grown to enormous proportions. Free beds, free rooms, furnishing of wards, columns, and arches, had been pledged. Over a hundred clergymen had pledged their churches to fit up and furnish one or more rooms. Leading benevolent men of the country had promised large assistance, as soon as the building should be commenced. Material for building both marble and granite was offered free by leading men, and even the railroad company had offered low freights. Over half of the material for the building was pledged by responsible men, and Dr. Turner was in Ohio soliciting the iron for the work, when suddenly, like a stroke of lightning in the clear sky, came the news that a resolution had been offered in the Connecticut State legislature to repeal the charter of the hospital. It was the same old battle inspired by the friends of Dr. Parker, now dead, supported by Parton's article, and urged by a group of men whose names and memories will go down into the future despised and condemned. It was pitiful to see the "Old Pioneer" of forty years of labor for asylum work and inebriates, pleading for the life of this hospital before the legislative committee, offering the magnificent subscription books in evidence, and urging the necessity of the hospital, which every advance of science revealed more and more clearly.

But all in vain, the charter was repealed, and another event was added to the history of the retrograde marches of ignorant law-makers. The State of Connecticut practically destroyed one of the most magnificently planned hospitals, whose future would have been an honor to the State and a blessing to countless homes and families all over the country. When the governor of the State realized the facts, he expressed regrets that he had not known them before, and offered to aid in having the charter reinstated the next year.

The news of this repeal was maliciously spread far and near through the press, and for the first time in a long life of battling, Dr. Turner went home sick and discouraged. This was a Bull Run defeat, and he realized that the "On to Richmond movement" must be made from another point. In a few days all his old energy came back again, and he began to write a book on the history of the movement, and with this as a permanent record he proposed to go before the public in the last great campaign, as he called it. Nearly two years went by before the book was written and published, then he started out again to sell the work and solicit aid to push on the suit against the State for the asylum at Binghamton. His energy and enthusiasm was unabated, but the storms of over forty years had left their scars and impress on his body. He still dreamed of the final restoration of the asylum at Binghamton and the completion of the Woman's Hospital as the crowning events of his life. Night and day he traversed the streets of New York and other large cities, urging the necessities of these asylums, selling his book, and creating interest among public men. How far he was successful it is impossible to determine. The week of his death a number of wealthy men had agreed to meet for the purpose of forming a company to test the question of ownership of the asylum at Binghamton.

The space of this sketch is too limited to go into the details of Dr. Turner's life. The sufferings he endured and the privations he suffered, the scorn and contempt which greeted him, and extended even to his family, can never be written out fully. To a proud man, conscious of being right, this contumely was enough to have crushed out all ambition and destroyed him forever. But Dr. Turner was of heroic cast, and while he felt the grasp of the present, lived in the coming century, always conscious that his work would be recognized and understood in the future. He often said that he would rather have built the asylum at Binghamton than been president of the country, or had accumulated the greatest wealth possible.

In 1888, Dr. Turner issued a large volume called the "History of the First Inebriate Asylum in the World." This was a general history of his forty years' efforts, full of personal details of the men and events which were prominent in the asylum at Binghamton. The book was remarkable in many respects, and will be read by the future generations with ever-increasing interest. In the midst of all his grand plans for the future, maturing hopes and expectations, the end came. On his death bed he said he had never been nearer the realization of his life work than at that moment. This was the human view, but seen higher up his life work was accomplished in a far wider sphere of influence. While on a visit home he was seized with acute nephritis, and died after a short illness, July 24, 1889, sixty-six years of age. It was night, and the wind and rain howled dismally through the dense grove of evergreens that surrounded the house, as about his bed a little family group watched him drift down and disappear into the ocean of the other life. Again the wind and rain sang a sad requiem through the same trees as a small concourse of friends gathered to pay the last respects to one whose real fame is just begun. The plaintive hymn and the touching words of the pastor, the subdued sob, and all that was mortal of Dr. Turner was hid from view forever. The sun shone out through a rift in the clouds as the body was lowered in the grave, a striking symbol of the stormy life now ended. "That which hath been shall be, and there is nothing new under the sun."

Dr. Turner's life march was over the same old road, and across the same bridges, through the same storms and tempests, and finally reached the same end. It was the pathway along which all the heroes and martyrs of time have passed. Dr. Turner found the great truth that inebriety is a disease and curable in hospitals, and organized it into the realm of practical science. He was more than a discoverer, he was an organizer of truth into the service of humanity. His forty years' labors have already borne fruit, and to-day there are over one hundred inebriate asylums in the world, all the

direct result of Dr. Turner's efforts in founding the first asylum at Binghamton. These asylums are increasing, and it is no prophecy to realize in the future that they will be as numerous as those of the insane; then Dr. Turner and his work will be the great historical study and central character from which all progress in this field of science will date. Dr. Turner's life was centered in founding and putting in operation a model inebriate asylum. He was a man of one clear conception of truth and duty that dominated every other consideration, and while he was a bitter antagonist to those who sought to ruin his reputation and work, he was usually generous and liberal in his views. The intense personal conflicts he passed through left no trace of bitterness in his private life. As he grew older, he became more and more conscious that his reputation was fixed beyond the power of the present to break up. While his faith was boundless, his belief in works was also great, hence every moment was occupied in incessant activity.

Binghamton Asylum was built from an idea that was condemned and denounced by all the world. The Woman's National Hospital was projected and organized to meet a necessity recognized by every one. The one was opposed by superstition and ignorance, the other was crushed out by malice and personal hatred. Both asylums will yet live. The one at Binghamton will be restored to its legal owners some day. The National Woman's Hospital will be built somewhere on the same basis as projected by Dr. Turner. He mapped out the work, and other men must carry it out. He was one of those rare spirits of whom only a few appear during the centuries, and while they are markedly human and mortal, leave a record of acts and deeds that are immortal. When the storms of prejudice and passion shall die away, and the march of science shall develop the scientific treatment of inebriety in asylums, then we shall see the work of Dr. Turner more clearly, and be able to appreciate the selfless ambition to organize and found an asylum that he had all his thoughts from early manhood to the latest moment of life.



Dr. Turner's life seemed unfortunate to the superficial observer, but viewed more accurately it was most fortunate. He found a great truth trodden under foot, reviled and ridiculed by the ignorant bigots of the world, and he lived long enough to see it (chiefly by his own efforts) established in science, inseparably incorporated with the common thoughts of his day and generation. What could any one desire more than that? What fame is greater and more lasting than a permanent contribution to the working truths of the world? His was a life of weary battling, of sorrow, of suffering, of wilderness marches, that at last beat out a new pathway to the promised land of human progress and growth. "That which hath been shall be, and there is nothing new under the sun."

"What though the martyrs and prophets have perished,  
The angel of life rolls the stone from their graves;  
Immortal 's the faith and the truth which they cherished,  
Their lone triumph-cry stirs the spirit of braves.

"They are gone, but a glory is left for our life,  
Like the day god's last kiss on the darkness of even;  
Gone down on the desolate seas of their strife,  
To climb as star-beacons up liberty's heavens."

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**HISTORY OF THE FIRST INEBRIATE ASYLUM  
IN THE WORLD, at Binghamton, New York, by its  
founder, Dr. J. E. TURNER. Including an account of the  
Woman's National Hospital and its opponents.**

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Published by the American Publishing Company at Hartford, Conn. Copies sent by mail post-paid for two dollars and a half.

DRUNKENNESS: ITS INFLUENCE UPON THE  
MIND.

BY T. L. WRIGHT, M.D., BELLEFONTAINE, OHIO.

Passing from the consideration of the more obvious effects of pure intoxication upon the physical body,\* we come to the contemplation of its influence upon the mental powers and movements.

The casual drinker sometimes consumes alcoholic liquors with the object of elevating the standard of his mental capacities. The impression is very common that the use of alcohol will add to the power, the scope, and brilliancy, of intellectual operations. An inquiry into the actual condition of the mind when it is under the influence of alcohol will very clearly determine whether this idea is correct or is not.

There is no question but alcohol makes a very decided impression upon the powers of the mind. In truth, it operates upon them in a way peculiar to itself, and with a force that is irresistible. Alcohol controls every man who partakes of it, as long as he remains under its influence. But it is essential to a right interpretation of the phenomena of mind when under the power of alcohol, to remember that the benumbing effects of the poison permeate the whole organism. While they impress and modify the mental faculties separately and in detail, they also throw an undefined and immovable glamour over the mind as a whole; so that it is quite incapable of judging correctly of its own condition.

It is more difficult to enlist the interest and engage the attention of a man when intoxicated, than it is when he is sober. The reason is, that his nervous sensibilities being enfeebled, he is not thoroughly alive to ordinary sensations

\* See Quarterly Journal of Inebriety for Oct. 1889, p. 332, *et seq.* The of the paper referred to in the Quarterly Journal of Inebriety for Oct. 9, is erroneous. It should be, *Drunkenness—its influence on the body.*  
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and impressions. Whatever thoughts may happen to be in his mind remain there, in stubborn and stupid possession. Nevertheless, he often imagines that he is in a turmoil of active mental labor. The drunken man, in truth, has no right conception of the passage of time. He is always surprised when told how late it is. The reason of this is, also, the dullness of his nervous sensibilities. He is deprived of his ordinary experiences in sensation, whereby he is admonished of the existence of time. For the succession of ideas through the mind, as it is rapid or slow, gives to an individual some notion of time's flight. To have the common or average conception of the passage of time, therefore, a man must be in possession of his natural sensibilities, so that the habitual impressions of common events may bear their natural relationship with the habitual experiences of other persons. Sound minds have an approximate notion, common to them all, of time's flight. It is reasonable to infer that in a person whose sensitive capacities are obtunded there can be no regular or normal succession or procession of ideas.

Ideas therefore become fixed; that is, they are changed with difficulty in a person who is drunken. Such a man is pertinacious and tiresome. The leading idea is not readily modified or abandoned, for the formation of new conceptions is prevented by the difficulty of obtaining new facts for rational contemplation. The drunken man will rehearse some story or jest for half a day together, making himself a nuisance to each and every one he meets. If enraged, he stays enraged, and hunts his enemy with a doggedness often out of all proportion with his alleged grievance. He loudly proclaims, "I won't forget it," and he truly will not for a good while; for he has not sufficient mental vigor to supplant an old idea by the adoption of a new one. There seems to be an inconsistency in holding a mind whose instruments are dull, broken, or mislaid, responsible for the strength and perfection of work, in the same degree as a mind that operates by means of instruments keen, bright, and ready at hand.

The wonderful *egotism* of the drunken state exposes the

inebriate to contempt as well as ridicule. It betrays him into all manner of absurd and unpleasant situations. Even the geniality and good nature of new intoxication are intensely selfish. They are manifestations of a morbid grandeur and condescension. An effort to guide or modify the vainglorious display will be met with abrupt and positive opposition. Drunkenness is usually an exhibition in which an imbecile and pitiable weakness of character is joined to an imagination filled with illusions of magnificence and power. Affection, love, regard for others, have really little part in the motives actuating a drunken man. Yet, the annoying and offensively patronizing airs of the drunken state are the least troublesome of its usual manifestations. For, quite likely the same self-esteem will be shown by a contemptuous and even ruffianly treatment of others—as though they were really the inferior and insignificant personages that they are held to be by a drunken man.

But the deception practiced by alcohol upon the egotistic feelings of one under its influence are sometimes really amusing. The casual drinker when intoxicated, especially if he happens to occupy some responsible station in life, often becomes impressed with an exceedingly acute sensitiveness with respect to his social position as compared with the social position of others. He claims practically to occupy a station of the highest possible eminence, and demands that everybody shall approach him or his family "hat in hand." It is worthy of note that his punctilio in this matter grows more exacting in the precise ratio of the increase in the number and magnitude of his "drinks."

The assistance of alcohol is often sought by public men for the purpose of adding to the luster of their eloquence. Orators of true merit cannot, of course, address the public without saying something worthy of attention. But even these mar their best efforts by mingling with them the empty assumptions and exaggerations of the alcoholic style. Speakers who are in the habit of drinking generally keep on hand for instant use strings of verbiage consisting of

words sonorous and lofty, but usually of little meaning. With these they beguile themselves and others into the belief that something of extraordinary significance is being said. Expressions about *Eternity*, *Everlasting*, *The Almighty*, and the like, are apt to pour in a mighty stream from drunken lips. Drinking orators seem to be on terms of great familiarity with the Deity. They speak of the "Almighty" in a manner half patronizing and half contemptuous, like a small boy when he alludes to his father as "the old man." Not a scintilla of rational sense can be discovered in drunken fustian of this sort. No more definite idea or mental picture can be drawn from it than from the hidden recesses of an impenetrable fog-bank; yet there are persons who admire with bated breath and wonder what it all means. Nothing is more deceptive than alcohol in the *role* of oratory. It is, however, a universal liar. To search the eloquence and poetry of a nation, to carefully consider its literature and legislation and mark the blemishes that have been placed upon them all by the audacity, the braggadocio, and the falsifications of alcohol, would be a curious and instructive labor.

The folly and danger into which the treachery of alcohol may lead its votaries are very clearly manifested in another direction. Illusions, hallucinations, and delusive convictions will beset the soundest mind when the sense of feeling is impaired. Common sensation is continually appealed to by all men in order to confirm or deny the correctness of information afforded by the special senses. In truth, there must be a thorough co-operation of the several senses in the determination of facts, or the mind will surely be deceived. It is easy to see, therefore, how misleading must be the knowledge of a person whose sense of feeling is materially blunted. And when it is remembered that in the drunken man the whole range of sensibility is deficient as well as distorted, the misapprehensions under which his mind must labor will be evident.

Into the mind of a man who is intoxicated there often comes a singular idea,—consequent upon the absence of

the sense of feeling — the idea that *he is somehow physically invulnerable*. His imagination seems to clothe his person in an impenetrable suit of mail. In this belief he is fortified by a consciousness that he is insensible to physical pain. All this is the result of illusions growing out of a poisoned and depraved state of the nervous energies. The sense of feeling is obtunded, and for that very reason the mind is misled; is, in fact, deluded.

But these fancies are likely to lead to disastrous consequences. A drunken person is often filled with an indomitable and reckless courage, a courage liable to be carried to the highest pitch of audacity and extravagance. This arises from his erroneous convictions respecting his personal safety as well as of his bodily prowess. A man in this state of drunken frenzy is truly "pot-valiant," a condition well-known all over the world.

Tragedies in abundance owe their origin to the presumptuous arrogance of drunkenness: yet comical episodes are not unusual. When the inevitable time comes, that alcoholic indulgence is no longer possible — when some rest and repose from the delirium of liquor is demanded by the outraged physical organism, the awakening from the drunken imaginings and fancies is attended with much nervous perturbation and mental misgiving. With returning sobriety, the notion of bodily immunity from danger begins to dissolve and melt away. Very likely there is total forgetfulness as to many of the scenes and events of the drunken experience. A notification is perhaps received of insults tendered or outrages perpetrated, or shameful indecencies committed, and apologies are demanded.

Explanations and abasements are now in order. The period is come when it is necessary for the drinker to skurry around and find out his various freaks of meanness. At length the humbled man, however high in the "social scale," is ready to admit that he is no better than his neighbors. There is a special performance that is commonly in order at the end of an alcoholic storm. Very few drinkers escape it.

The fitness of things imperatively demands it, and the requirement must be met. It is known, in common but emphatic language, as the process of "crawling out of the small end of the horn."

A discussion of the effects of alcohol upon the mind would be imperfect, without directing attention to the sympathetic influence which a community living in an alcoholic atmosphere, exerts upon all who are within its boundaries.

It is doubtful whether the surroundings of an ordinary drunken home conduce very much to fasten intemperate habits upon its younger members. Apart from the influence of heredity, the probabilities are, that the tendency may be the very opposite. The horrors experienced by all, the complaints and admonitions of the sober members of such a home, together with the daily example of decency and morality seen elsewhere in all directions, lead to sobriety rather than drunkenness.

But there are regions of country of considerable extent where strong drink is habitually taken by the people in general, where as a rule, the wealthy, the intelligent, the influential, are almost continually under the influence of alcohol. In such an atmosphere there is little, if any, home objection; while the conduct and language of the public at large teach nothing of the advantages and beauties of sobriety. In such communities, the exaggerations of the alcoholic disposition are in daily operation. The unduly sensitive inebriate "honor" is ever on the alert to detect "insults." Deadly weapons are habitually carried; for some "difficulty" or other, having its foundation in drink, is perpetually on the tapis. The mother tongue is much employed in asseverations of intent to *kill*, or willingness to *die*, "in defense of my honor."

Now, there is here disclosed a mental nervous state that is habitually present and is in constant activity. The tone of the voice, the expression of the eye, the matter of the speech, necessarily impress themselves on the daily beholder whether he drinks or not. *His* voice, *his* looks, *his* speech

begin to correspond with these perpetual surroundings. His nerves vibrate in unison with the nervous impulsions of others. As a chord in musical vibration awakens a sympathetic movement in other chords, so the mere on-looker becomes imbued, through nervous sympathy, with kindred nervous feelings. Even the women of the households, through force of habit and association, rather encourage the ragings, and killings, and dyings, for "honor's" sake; and in case of tragedy, they wear their weeds with something of pride and vanity—for have not their lords and husbands "died in defending their honor?" It really seems to be possible that

inhabitant of an inebriate community might transmit a neurotic constitution to his posterity, weighted with all the evil potentialities of that constitution, even though he had never himself tasted of alcohol. It is manifest that when the indispensable pre-requisite to knowledge, namely, sensation, is materially depressed and torpid, a clear and true idea of anything presented to the mind is an impossibility. But the senses are not merely weakened by alcohol, they are unequally depressed; and besides, they are disturbed in the uniformity with which they severally represent the same thing, both with respect to quality and completeness. There is distortion and caricature in the mental pictures of a drunken man. The information conveyed by the senses, and especially the sense of feeling, is not only imperfect, incapable of becoming "set" in definite shapes, but it is deformed and even false.

If a person esteemed to be trustworthy deceives and falsifies regarding important things, those deceived by the falsification will think and act wrongfully respecting the things misrepresented. And this is the only rational and honest course they can pursue. In a manner parallel, when a drunken individual is deceived by false reports coming through the sense of feeling, and in fact through all the several senses, the convictions of his mind, and the language and conduct inspired by them, must be out of harmony with things as they are observed by men in general; that is, out of proper relation with the recognized fitness of things.



There is another point of view from which to observe the distinctive influence of alcohol upon the mind — the point of *consciousness*. If alcohol depresses — blunts sensation in proportion to the quantity taken into the system, then the presumption is, that there must be a point of alcoholic saturation, at which sensation will be practically extinguished, and this is the actual fact. This condition of alcoholic torpidity is not sleep. The senses are not simply suspended and subject to revival at the instigation of some slight irritation, or possibly of the wakeful mind itself. On the contrary, the senses are truly paralyzed by the poison, and no amount of irritation will serve to arouse them. This paralysis will remain unalterable as long as the conditions inducing it are unchanged. No effort of volition will exercise the slightest influence upon it. Indeed, volition itself is impossible. For, if the paralysis is partial, an enfeebled will may provoke partial response, yet mere slumber, or dullness, or fatigue may respond to the impress of volition. There is, therefore, a radical difference between the unconsciousness of physiological states and that of toxicological states.

Now, to know precisely the injury done to the mind by the suspension of consciousness by alcohol, it will be proper to make some inquiry as to the nature, or rather the offices of consciousness.

Sir Wm. Hamilton describes consciousness to be "the *self-recognition* that we know, we feel, we desire. . . . It is an actual or living, not a potential or dormant knowledge. . . . It is an immediate, not mediate, knowledge. . . . It supposes discrimination, involves judgment, and is possible only through memory. . . . Nothing but the facts of consciousness can be taken, or if reason be admitted, it must rest solely upon the data of consciousness. . . . Consciousness constitutes, or is co-extensive with, all our faculties of knowledge, those faculties being only special modifications under which consciousness is manifested.

But in drunkenness the powers of discrimination —

impression, sensation, perception — are paralyzed by alcoholic anæsthesia, as also are the faculties of judgment and memory. Reasoning is impossible, for the "data of consciousness" are dim, imperfect, or altogether absent.

In a man quite unconscious from alcohol, the revival of the senses, and an approach towards a resumption of their uses, are very gradual. In its primary stages, this resumption is very indefinite and unsatisfactory. The first glimmerings of sense are not attended by a right perception of things; and indeed it is impossible to indicate any point in the process of regaining the state of natural consciousness, where the convictions of a mind can be trusted, where in truth its knowledge is accurate and its conclusions are just. There is, in fact, no true "self-recognition." The same principle holds good in tracing the progress of an individual under the influence of liquor *downward* from a condition of pure consciousness to one of lumpish and insensate stupor. The very first drink throws a haze around consciousness, for alcohol tampers with the data essential to its brightness and perfection.

The transition from the physical to the mental is the secret. The point of junction where the physical movement ceases to be physical, and where mental knowledge — no longer physical — begins, is the delicate and ethereal subject that has absorbed the best efforts of the human mind for ages. To accomplish the best work in this transference of the functions of the mere material body to the spiritual and immaterial qualities of the soul, surely demands the aid of the physical organism in its freest and brightest perfection. Alcohol is an insuperable obstacle to this work.

What are the physical movements that lead up to consciousness? "Take an act of perception, *e. g.*, that of the face of a friend. We find there steps in the process: the impression received by the sensitive membrane; the transmission of the stimulus through the nerve fibers; and last, the conscious perception in the brain."\* But in drunken-

\* E. A. Washburn, Princeton Review, May, 1878.  
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ness, the "membrane" is no longer normally sensitive — so the impression is misleading; the "transmission" is incomplete, for all the nerves are torpid; the "conscious perception" is cloudy, for the brain is in a state of partial paralysis. The consciousness thus developed must be unsound.

Alcohol in small quantities will render consciousness dim, feeble, and unreliable. In larger portions, it will disorganize the powers of consciousness, or will totally wreck and destroy it.

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The annual meeting and dinner to DR. PARRISH at his home in Burlington, New Jersey, was an occasion that will be long remembered in our Association. While the tone and character of the addresses may seem to many laudatory, yet to those who know of DR. PARRISH and his work, they will be recognized as only fair tributes to one who has been so prominent in the infancy of this great subject. It is eminently fitting that our Association, whose life is perennial, should recognize the work of its pioneer members ere they pass away. In the future a study of these men, their work and motives, will form an essential part of the history of this great movement. While our meetings may lack the elements of popular societies, in numbers and enthusiasm, they comprise a gathering of men who are keenly conscious of the importance and value of their work, and its influence in the future. The extent of our field of research, and the vast wide-reaching problems that open up on every side, draw us continually nearer to each other: each individual's attainments become the common possession of all, and the honor we pay to any one is a public expression of our joy and share in these attainments. DR. PARRISH has gone on beyond us, and we follow with rejoicing, for his knowledge is ours. Meeting him down near the sunset of his life, we clasp hands and hail him, then go on. Our meeting and this anniversary dinner will be marked events in our history.

REPORT OF COMMITTEE ON NOSTRUMS, PROPRIETARY MEDICINES, AND NEW DRUGS.

BY THE CHAIRMAN, N. ROE BRADNER, M.D., OF PHILADELPHIA, PA.

At the last meeting of this Association, which was held in the city of Brooklyn, N. Y., on the fourth day of December last, your attention was called to a serious and growing evil, resulting from the sale of fraudulent and dangerous compounds under the fair name of medicine. By a unanimous resolution you then appointed a committee on "Nostrums, Proprietary Medicines, and New Drugs," conferring upon Dr. J. B. Mattison, Dr. C. J. Barber, and the writer, the distinction of committeemen. As chairman of that committee I now have the honor of submitting to you a report of our investigation.

Having addressed letters of inquiry to trustworthy authorities in several sections of the country, we received replies that establish beyond all question the fact that a great and crying need exists for the work that you have inaugurated.

Dr. Cyrus Edson, of the Health Department of the city of New York, writes as follows :

"DR. N. ROE BRADNER, Chairman: You have a splendid field for good work against a species of fraud that is nowhere so extensive as in this country. We have a host of these things on our market, some of which are only frauds, others, however, are worse, and I believe it should be made a felonious act to put such things on the market. I have no official charge over such matters, and cannot give you authoritative statements. I am, however, entirely in sympathy with you, and will aid you to any extent in my power.

Yours faithfully, CYRUS EDSON."

From the Health Department of the city of Baltimore, we received the following :

"DR. N. ROE BRADNER, Chairman: We have no printed information regarding the sale of patent medicines, etc., although our city is flooded with them, and lots of so-called doctors to recommend the use of them, as we have laws regulating the practice of medicine. Very truly,

A. R. CARTER, Secretary."

From Dr. E. A. Craighill, President of Virginia State Pharmaceutical Association, we have received valuable information, including the following :

"DR. N. ROE BRADNER, Chairman: In my experience I have known of men filling drunkards' graves *who learned to drink* taking some advertised bitters as legitimate medicine. The soothing syrup for children, and the cough syrup for everybody, all contain opium in some form. It would be hard to estimate the number of young brains ruined if not destroyed, and the maturer opium wrecks from nostrums of this nature. I could, if I had time, write a volume on the mischief that is being done every day, to body, mind, and soul, all over the land, by the thousands of miserable frauds that are being poured down the throats of not only ignorant people, but alas, intelligent ones too. All of these medicines known as 'patent medicines' are prepared by uncultured people, with no medical education. But there is a certain other class of so-called remedies, prepared by a more intelligent set, sometimes by physicians and pharmacists, that do a great deal more harm. I allude to the 'non secret proprietaries' that claim to publish their formulas *but do not*. One in particular has made thousands and likely tens of thousands of *chloral drunkards*, dethroned the reason of as many more, beside having killed outright very many. It is impossible for any one to estimate the mischief that is being done by such remedies, and the physicians who recommend them. It is impossible for any one not in a business such as I am to form an idea of the amount of misery and mischief that is being done by these same so-called 'non-secret remedies.' If I can serve you, and you will say how, I will be glad for you to command me. I would like to contribute my best effort, though feeble, to destroy what I honestly believe to be one of the curses of our day and generation.

Yours truly and respectfully, E. A. CRAIGHILL."

Now, Mr. President, when you consider who the authors of these letters are, the position they occupy in the world of science, what they say, and that what they do say is positively true, it would seem that little could be left to be said. This committee is thankful for so much and important help from these distinguished gentlemen, and with full indorsement of their letters, and acknowledgment that they have expressed the sad facts better than we could have done, we proceed to another section of our investigation.

We lay before you a voluminous pile of American literature, all referring to the highly important subjects, the treatment of the morphine habit and alcoholic inebriety. You are all not only physicians but gentlemen of culture, and by reason of your long and earnest application to this very subject, are prepared to give a good opinion as to the value and

truth of the remarkable statements made by the authors of these books, pamphlets, and other circulating mediums. We assert that part of what is therein said concerning the probable terrible consequences of these fatal habits is unquestionably true, but that at least ninety-five per cent. of what is said of the composition and curative effects of these opium and whisky antidotes and the abilities of their proprietors is absolutely false. You, however, as we have said, are competent judges, and if, in your better judgment, we have erred in branding them lying frauds you have only to repudiate the conclusion we have arrived at, leaving the charges and responsibility of the same upon the writer. But, gentlemen, these advertisements, these volumes of gilded falsehood, were not designed for you, nor for any scientific investigation. They were designed for an innocent, unsuspecting public, as a trap for persons who are possessed of more money than strength of mind, especially those who had either contracted the opium habit, or feared they might do so. We desire to call particular attention to this last class of people—those who are free from the disease, but whose natural nervous qualities render prone to fear. There can be no doubt that the use of such nostrums would do more towards confirming than eradicating the habit, if it already existed, while a far worse result of their sale may be reasonably expected—namely, that of inviting and creating addiction to an almost hopeless fatality, where the habit had not previously existed. Many persons have the same prejudice against opium that prohibitionists have of alcohol, and it is no uncommon thing for practicing physicians when prescribing morphine to meet with the honest opposition of the patient, or some one in his interest, on the ground that it might lead to “the habit.” We have often been told by a suffering patient that he would rather endure the pain than to “touch, taste, or handle” a remedy so dangerously seductive.

We have also met with those who had simply taken medicinal and probably judicious doses of the drug who had

become frightened, almost into frenzy, by contemplating the possible consequences, as portrayed by the vile, outrageous illustrations in the advertisements before you; manifesting the same apprehension that would be more reasonably exhibited by one who had been bitten by a rabid dog. Such people, whose name nevertheless is legion, must be of highly sensitive, nervous constitutions, and could without doubt and very easily acquire the habit; and knowing this they will buy and devour any and everything advertised to cure or prevent the malady. Under such circumstances, and to such people, these so-called opium cures and habit preventives and antidotes, are forcibly suggestive, but peculiarly dangerous. Bottle after bottle is consumed until it is found that the victim cannot live without the "cure," which is opium itself. Your committee knows of no dangerous or terrible consequences of the opium or morphine habit that might not have their origin in such nostrums, nay, a blacker fraud upon the art of medicine or a more diabolical plot to get gain could hardly be invented.

As you are aware, we undertook this work under difficulties, not least of which existed in the fact that we were unprovided with funds, or any means whatever beyond our own energy to enable or aid us in our work. It is true that we have not incurred very much expense, and that we have discharged whatever costs that were indispensable. It must, however, be evident to you, that those who are to carry on the work from the point to which we have brought it should be provided with funds commensurate with the work and results that may be required or expected of them. For instance, and especially, how are we to determine as to suspected dangerous and poisonous properties of an advertised nostrum except by chemical analysis? And, may we not here state that one of the most puzzling conundrums your committee has been called upon to solve, is how to get this expensive work done without money to pay the expert, even for his actual expenses. We have been kindly and most potently aided by analyses made by the most reliable of

chemists, employed by other individuals and associations, and we take sincere pleasure in making the following acknowledgment :

Through the courtesy of such gentlemen as Dr. Samuel W. Abbott of Boston, Dr. Willis G. Tucker of Albany, and Professor G. C. Caldwell of Cornell University, we have received the result of most careful examination of many of the very nostrums we were most anxious to have analyzed — including those whose virtues are heralded by the very and varied advertisements that now lie before you ; and notwithstanding the adroit villainy that has made them deceptive, enticing to others, they are now uncovered before you, and presented in their nakedness of honesty. Dr. S. W. Abbott has furnished us with the astonishing result of Dr. B. F. Davenport's chemical examination, proving beyond the possibility of doubt that nineteen out of twenty of the nostrums most commonly sold as opium cures were composed in part of opium itself, constituting unmistakable evidence of a monstrous fraud as well as dangerous evil. Upon this table you see advertisements setting forth the curative agency of certain wonderful compounds, the delights of the so-called Sanitariums whence they came, and the remarkable skill and *success* of the proprietor. There they are, behold them ! Then look at this chemical analysis and you will see that each one of the whole twenty except one contains opium itself ; and that the one so excepted, professing to be a preparation of gold, does not contain the slightest trace or evidence of that metal. Next look at this declaration of startling "facts," this fine work of art, representing a female with two faces, and meditate an instant upon the value of "Kaskine," providing all that this advertisement says is true. A perfect substitute for quinine, but "better," and only one dollar a bottle ! You may well ask, what is it ? and as we have been provided with a bottle you shall at least see it.

Here it is. Examine and test it any way you will, and if you find it to contain anything except granulated sugar of



market value not exceeding the quarter of one cent, you will do more than all the analytical chemists who have lent us their aid. *The Druggists' Circular*, *The American Analyst*, and *The Western Druggist* are each deserving of credit for their work in the exposure of this fraud, for fraud it is, and the effect of these *double-faced* advertisements alone has been to dupe many people into depriving themselves perhaps of the necessities of life to enable them to save up a dollar to buy this worthless trash.

But the evil of *Kaskine* sinks into insignificance when compared with that of another, "Dr. Buckland's Scotch Oats Essence." We first became acquainted with this celebrated article through the mother of one of our patients, while he was under our treatment. A brief examination showed us that it was largely composed of poor vile whisky, and it was condemned before we were aware that it contained both whisky and opium.

The person who had supplied it was indignant, saying it had cured the celebrated Bartley Campbell, quoting no doubt from Dr. Buckland himself, and removed her son from our care. A few months later Bartley Campbell was dead, of paresis, and in passing through the hopeless ward of a State lunatic asylum we saw our quondam patient totally bereft of mind. At the time he was deprived of our care he was rapidly improving, with promise of ultimate recovery.

*Kaskine* is comparatively a small fraud, and its robbery extends principally to the purse. Scotch Oats Essence, however, does all this, which is as nothing compared with what else it does. It is sold as a cure and preventive of both whisky and opium habits, and has been abundantly proven to be a mixture of opium and whisky, a more satanical scheme than we have ever before known or heard of. Certainly a course more likely to produce addiction to both alcoholic and narcotic inebriety could not be desired than the use of this concoction, under the circumstances and according to the direction of the proprietors of this most devilish of all nostrums.

With the exception of the last-named, which is a double-barreled weapon, all these nostrums so far mentioned have reference primarily to morphinism, and as you would expect, there is a still greater number of concoctions on the market with the ostensible object of curing alcoholic inebriety, whereas we believe of them as of the pretended cures of narcotic inebriety, *i. e.*, that they are more likely to foster and even engender than to alleviate or eradicate the disease.

Look at this: "Parker's Tonic. A purely vegetable extract. Stimulus to the body without intoxicating." And how can we frame words to justly and sufficiently condemn the following passage in their wicked and insidious advertisement, viz.: "Inebriates struggling to reform will find its tonic and sustaining influence on the nervous system a great help to their efforts," when chemical analysis reveals the fact that it is almost half — actually, and accurately, 41.6 per cent. — pure alcohol. Hooffland's German Bitters, which is largely sold as an innocent preparation, entirely vegetable and free from alcoholic stimulant, contains 25.6 per centum of alcohol. This we have reason to believe is a popular and favorite tonic with the gentler sex, and at the present state of our investigation, we can only guess at the number of females who have been made inebriates by means of its agency. There can be no doubt that such beverages are more dangerous, especially to refined persons, than whisky itself: just as any honest or open enemy is less to be feared than an insidious traitor. Very many who could not be induced to taste whisky, can be easily deceived into doing the same thing if, peradventure, the bait is called "tonic," "bitters," or even elixir or ginger. It is true that such people must be easy of seduction, indeed, they would seem purposely blind, when they accept it more readily because it is of vegetable extraction. As we have intimated, those of the better class, at least those better educated, most often become victims of these treacherous compounds; those indeed who know that all alcohol as well as narcotic drugs used by inebriates are of purely vegetable origin."

We do not think it advisable to burden this report nor weary your ears with the names of all these tonic nostrums, but as we have done with the opium cures, so do we with the whisky antidotes, and having given you a brief but accurate account of a few of each class, we will annex as an appendix to this report a full and complete list of twenty so-called opium cures, and fifty proprietary preparations sold as whisky cures — each one of which itself contains in large proportions the very drug, whether opium or alcohol, addiction to which it professes to cure, one actually containing 47.5 per cent. of pure alcohol.

Another "New Drug" to which we would call your attention is called "Dr. Green's Nervura," and we submit for your examination the full advertisement concerning the wonderful preparation, as clipped from a recent issue of the *Philadelphia Sunday Press*, and which you will find on the table amongst a mass of kindred literature. We regret our inability at this time to give you an analysis of this article, but have taken measures to determine whether our suspicion as to its composition is correct or erroneous.

Our attention was also first called to this great remedy by an old gentleman who had long been under the general professional care of a member of this committee. He had been attracted by "Dr. Green's" advertisement, and placing himself under his treatment for a short time developed symptoms which in our judgment were due to opium or its equivalent. In a word, we have a suspicion that this new candidate for notoriety is a revival under another name of a too well-known but well-exposed dangerous nostrum.

In this connection we would state that our letter to Prof. G. C. Caldwell, analytical chemist at Cornell University, and to the New York State Board of Health, concerning the work of our committee, with special reference to this particular subject, was promptly replied to, viz.:

"DR. N. ROE BRADNER, Chairman: Just what power the Board of Health has in the suppression of the sale of such articles as the Scotch Oats Essence I cannot say, but since it was at the special request of the Secretary of the Board that I made the examination referred to in your communication, he undoubtedly

felt that something could be gained by exposure of the fraud even if no further steps could be taken. As for myself, I can say that I shall be only too glad to be put on the track, by you or any member of your association, of any such suspicious nostrums as the one that you mention, and to report my results to you, although such results should be held primarily as the property of the Board of Health, whose official I am, and should appear as a part of my monthly report to that office; this would not, however, prevent your making such use of my results as you could for the good cause in which you are working. Trusting that you may some time have further hints to give me, I remain,

Yours very truly, G. C. CALDWELL."

Alcohol and opium have as a matter of course produced the most of inebriety; together, they compose the arch enemy of mental equilibrium, and have received as they deserved the greater part of our attention. But, gentlemen, the scope of this subject is too large to be even explored at first attempt. We must of necessity leave the subject unfinished, and as time presses we are nearly ready to do so, without having even named chloral, cocaine, chloroform, or tobacco.

The miserable cigarette must not be overlooked. There is no question but that tobacco is a powerful irritant to the nervous system, not only fully able to produce intoxication, *per se*, but more dangerous probably by reason of the appetite if not necessity it creates for other stimulation.

All this is too well known to be discussed here, and is merely referred to to make clear our present conclusion, which is, that in the suspected danger of the cigarette the real danger of tobacco has been overlooked. Cigarettes made of pure tobacco are certainly no more noxious than cigars or other forms of the weed. It has been assumed and widely published that cigarettes are made from an admixture of cigar stumps and opium, and if we should believe half of what we have heard and read about the dangers of cigarettes and the noxious drugs they are said to contain, we would certainly forget all about tobacco. We acknowledge that the use of these abortive cigars has produced alarming and fatal results, but think the theory of their being drugged or otherwise more noxious than other forms of tobacco, less tenable than that the cigarette is the only form in which it is used by children; and we are confident that any fatal or serious

consequences that have befallen women or persons of tender years, through cigarette smoking, were simply due to tobacco. We cannot doubt that the use of the pipe or full grown cigar would have been more quickly followed by the same consequences. But, the small boy and the fast girl do not indulge in these articles, and the very reason that teaches them that they *can* smoke a cigarette, but not a cigar, should teach us that the former is less potent, notwithstanding it is but a smaller morsel of the same thing. We do not hear of men being killed or injured by the cigarette, and doubt if any confirmed smoker could consume enough nicotine to do him serious harm through cigarette smoking. It is not to us a reasonable argument, that the low price at which they are sold should compel the manufacturer to use poor tobacco, making up any deficiency of strength with opium. We learn that enough good tobacco to supply America with cigarettes for a year can be bought in Maryland and Virginia for ten cents per pound. Opium costs from three to five dollars a pound, and when prepared for smoking requires also a pipe prepared to burn it. No, gentlemen, it is not the cigarette, but tobacco, that is poisoning our youth; the danger of the cigarette, *per se*, is that it presents tobacco in an attractive and tolerable form for persons of immature years. We deplore the existence of cigarettes containing *tobacco*; of soothing syrups and other concoctions containing *opium*; and of vegetable tonics containing *alcohol*; but words fail us in attempting to foretell the result of this awful traffic. Insanity, palsy, idiocy, all forms of physical, moral, and mental ruin, have followed the sale of these nostrums through and throughout our broad land. New remedies, elegant specimens of pharmaceutical science, are daily added to the above list, notwithstanding they are recommended by physicians and praised by medical journals.

Surely the time has come for some one to cry halt, and if any legislation or other means of lessening, if not eradicating, the evil can be effected, now is the time for action. This association has made the initial step, and having taken the

"bull by the horns," should never yield nor suffer the just cause it has espoused to be strangled by brute force, guided by the wisdom of the devil, whose emissaries and agents are charlatans and proprietary nostrums; altogether constituting a powerful antagonist, and rich of blood money — the price of numberless bodies, minds, and souls.

No; right shall prevail, but if that monitor has slumbered he must be awakened, and in full armor, with all his might and strength, stretch forth a saving hand and quickly, for the peril is imminent. Persons of every class are rapidly falling victims to habits worse than death, for death would put a period to their misery. They live however, not only as a curse to themselves and cotemporary friends, but to bring forth children tainted even to the third and fourth generation. Where, oh, where will it end! Already the largest proportion of our patients, whether inebriate or insane, may charge such an inheritance with aggravating their disease, perhaps as its primary cause.

One stimulant leads to another, and it has been estimated that nine hundred and fifty out of one thousand men are consumers of tobacco. If they acquire the habit in early life, especially before their physical and nervous systems are developed, their mental powers must become impaired by this powerful brain irritant; divergence to other and more powerful stimulants ensues; the usefulness of their lives is wrecked; and their posterity will positively suffer impairment of either or both physical and mental strength.

It is beyond the province of this committee to suggest the remedy, and he who does will deserve a towering monument. Surely it will require local, State, and national legislation, but this can only be effected through individual activity. Who can dare to ignore the importance of the subject or fail to comprehend his own duty. Time and talent are needed. The field is large. We must work or perish, and one and all should start at the command that aroused Jonah in a less dangerous lethargy — "What meanest thou, O sleeper."

N. ROE BRADNER,  
*Chairman.*

## APPENDIX "A."

This committee is indebted to Dr. S. W. Abbott, Secretary of the Massachusetts State Board of Health, for the following results of analyses, made by Dr. Bennett F. Davenport, State analyst of drugs, showing that fifty different proprietary preparations sold for special usefulness in the reformation of intemperate habits, all and each contain alcohol itself in the following proportions :

	Per cent.
Dr. Buckland's Scotch Oats Essence, . . . . .	35.
(Also $\frac{1}{4}$ gr. morphine to the ounce.) A more insidious and dangerous fraud can scarcely be imagined, especially when administered as this is recommended, for the cure of inebriety or the opium habit.	
The "Best" Tonic, . . . . .	7.65
Carter's Physical Extract, . . . . .	22.
Hooker's Wigwam Tonic, . . . . .	20.7
Hoofland's German Tonic, . . . . .	29.3
Hop Tonic, . . . . .	7.
Howe's Arabian Tonic. "Not a rum drink," . . . . .	13.2
Jackson's Golden Seal Tonic, . . . . .	19.6
Liebig Co.'s Coca Beef Tonic, . . . . .	23.2
Mensman's Peptonized Beef Tonic, . . . . .	16.5
Parker's Tonic, . . . . .	41.6
"A purely vegetable extract. Stimulus to the body without intoxicating. Inebriates struggling to reform will find its tonic and sustaining influence on the nervous system a great help to their efforts."	
Schenck's Seaweed Tonic, . . . . .	19.5
"Distilled from seaweed after the same manner as Jamaica spirits is from sugar-cane. It is therefore entirely harmless, and free from the injurious properties of corn and rye whisky."	
Atwood's Quinine Tonic Bitters, . . . . .	29.2
L. F. Atwood's Jaundice Bitters, . . . . .	22.3
Moses Atwood's Jaundice Bitters, . . . . .	17.1
H. Baxter's Mandrake Bitters, . . . . .	16.5
Boker's Stomach Bitters, . . . . .	42.6
Brown's Iron Bitters, . . . . .	19.7
"Perfectly harmless. Not a substitute for whisky."	
Burdock Blood Bitters, . . . . .	25.2
Carter's Scotch Bitters, . . . . .	17.6
Colton's Bitters, . . . . .	27.1
Copp's White Mountain Bitters. "Not an alcoholic beverage," . . . . .	6.
Drake's Plantation Bitters, . . . . .	33.2
Flint's Quaker Bitters, . . . . .	21.4

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Goodhue's Bitters, . . . . .	16.1
Hartshorn's Bitters, . . . . .	22.2
Hoofland's German Bitters, . . . . .	25.6
"Entirely vegetable and free from alcoholic stimulant."	
Hop Bitters, . . . . .	12.
Hostetter's Stomach Bitters, . . . . .	44.3
Kaufmann's Sulphur Bitters, . . . . .	20.5
"Contains no alcohol." (In fact, it contains no sulphur, but 20.5 per cent. alcohol.)	
Kingsley's Iron Tonic, . . . . .	14.9
Langley's Bitters, . . . . .	18.1
Liverpool's Mexican Tonic Bitters, . . . . .	22.4
Oxygenated Bitters, . . . . . Acid.	
Pierce's Indian Restorative Bitters, . . . . .	6.1
Porter's Stomach Bitters, . . . . .	27.9
Reed's Bitters, . . . . .	35.
Dr. Richardson's Concentrated Sherry Wine Bitters, . . . . .	47.5
"Three times daily or when there is sensation of weakness or uneasiness at the stomach."	
Secor's Cinchona Bitters, . . . . .	13.1
Shony's German Bitters, . . . . .	21.5
Job Sweet's Strengthening Bitters, . . . . .	29.
Thurston's Old Continental Bitters, . . . . .	11.4
Walker's Vinegar Bitters, . . . . .	6.1
"Free from all alcoholic stimulants. Contains no spirit."	
Warner's Safe Tonic Bitters, . . . . .	35.7
Warren's Bilioous Bitters, . . . . .	21.5
Wheeler's Tonic Sherry Wine Bitters, . . . . .	18.8
Wheat Bitters, . . . . .	13.6
Faith Whitcomb's Nerve Bitters, . . . . .	20.3
Dr. Williams' Vegetable Jaundice Bitters, . . . . .	18.5

APPENDIX "B."

Dr. S. W. Abbott, Health Officer of the State Board of Health of Massachusetts, has kindly furnished this Committee with the following valuable and remarkable information, extracted from the report of Dr. B. F. Davenport, State analyst of drugs :

DEAR SIR,—I have to report upon twenty samples of so-called opium cures, which have been obtained from their proprietors. They have all been tested for the presence of morphine, and they have all responded to the usual reaction therefor, except the "Kesley's Double Chloride of Gold Cure." This one, however, gave no reaction for the presence of even a trace of gold. The cures were all uniformly obtained as for one who had acquired the habit of taking morphine.



The twenty variety of cures were as follows :

H. L. BAKER, Toledo, Ohio.  
J. C. BECK, Cincinnati, Ohio.  
CHAS. C. BEERS, New York City.  
GEO. A. BRADFORD, Columbus, Ga.  
P. B. BOWZER, Logansport, Ind.  
J. L. CARLETON, Chicago, Ills.  
S. B. COLLENS, La Porte, Ind.  
B. S. DISPENSARY, Berrien Spring, Mich.  
J. A. DOLLINGER, La Porte, Ind.  
J. R. A. DUM, Elizabeth, N. J.  
J. C. HOFFMAN, Jefferson, Wis.  
H. H. KANE, New York City.  
L. E. KEELEY, Dwight, Ill.  
F. E. MARSH, Quincy, Mich.  
L. MEEKER, Chicago, Ills.  
WM. P. PHELON, Chicago, Ills.  
SALVO REMEDY, New York City.  
W. B. SQUIRE, Worthington, Ind.  
J. L. STEVENS, Lebanon, Ohio.  
B. M. WOOLLEY, Atlanta, Ga.

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Dr. ROSE, in a letter to the *Medical Record*, writes of an epileptic who has been repeatedly arrested as an inebriate while suffering from an epileptic paroxysm. At one time he was sent ten days to Blackwell's Island, at another fined ten dollars. If the doctor will make inquiry he will find that these cases are more or less common in all large cities. In several instances, epileptics, supposed to be inebriates, have been sent to prison for life and hung for crimes committed during the paroxysm. Many epileptics who are temperate have taken or been given spirits for bad feelings on the approach of the paroxysm, and been punished by courts as intoxicated and willful. The entire treatment of inebriates by courts, as wicked and malicious, is a disgrace to the intelligence of the age. This cannot be otherwise as long as inebriety is regarded as a moral disease, which the victim can control at will. Policemen and courts will continue to arrest and punish all cases who have the appearance of being inebriates, without any discrimination, as long as the vicious theory of moral depravity of inebriates prevails.

NINETEENTH ANNUAL MEETING OF THE  
AMERICAN ASSOCIATION FOR THE STUDY  
AND CURE OF INEBRIETY—COMPLIMEN-  
TARY DINNER TO THE PRESIDENT—  
SPEECHES, ETC.

The Association is indebted to the Executive Committee for making this occasion most memorable in its history. In connection with the annual meeting a complimentary dinner was given the president, Dr. Parrish, at his home, Burlington, New Jersey, November 11, 1889.

The hearty responses and warm congratulatory letters received in reply to the many invitations sent to the leading medical men of the country were very complimentary to Dr. Parrish, and also to our Association. It clearly indicated that our society and its work were regarded with great interest and sympathy by the leaders of the profession.

The president, Dr. Parrish, occupied the chair, and welcomed the Association in most touching words of sympathy. He referred to those who had been with us so long, now gone forever, and their influence and work, and the change of public sentiment regarding the disease of inebriety, and the need of more concentrated, earnest effort to rouse up public interest in the scientific study of the inebriate and his malady; and, in closing, said: "I am reminded that I can not hope to meet with you many more times, but it will ever be a source of the greatest pleasure and satisfaction to feel that this work will go on with renewed vigor and interest in your hands."

The present officers of the Association were re-elected for the ensuing year. Dr. Bradner, chairman of Committee "on Nostrums, Proprietary Medicines, and New Drugs," read a report, which was accepted, and the committee continued for another year.

Several papers were presented and read by title, after

which the society adjourned to attend the complimentary dinner.

A large concourse of people assembled in the parlors of Dr. Parrish's house, and Dr. Day, vice-president, was called to preside. After prayer by Rev. Dr. Porter, Dr. Day spoke as follows :

Dr. Parrish : A few of your many friends have called on you to offer their congratulations on this your seventy-first birthday. You have passed the usual allotment of man's span of life, but we greet you with the hope that your life may be lengthened through many more years of usefulness to bless mankind. Quite a generation ago, when I was struggling almost alone with the problem how to establish and conduct an institution for the alleviation and treatment of a class the most unfortunate of our race, I well remember the words of encouragement you gave me, and I also found you imbued with the same ideas as myself, that something should be done for the inebriate in the way of institutional treatment.

Heretofore the intemperate for ages, yes, extending back into the prehistoric period, were considered persons possessed of demons, and the soul was consigned to chains and darkness forever. But there were those, and you, my dear Doctor, amongst the first, who touched the wand of science, and the sun of a newer and purer idea sprung forth, the light of which has shone around the world, and now there are established institutions for the humane and scientific treatment of inebriety in almost every enlightened nation of the earth. The Antipodes respond to the new and glorious idea, and the sunlight, in its course around the world, doesn't grow dim over any civilized people who do not recognize the truth you less than a generation ago promulgated.

No one has done more than yourself to elucidate by scientific treatise on alcoholism the fact that most cases of inebriety are a sequence of diseased organism rather than moral depravity. Now, the best thinkers in Europe and in our own country (more particularly the medical profession) are almost unanimous in response to your suggestions, and

are now dealing with these cases in a practical way. We now have professional men, co-workers with us, such as Drs. Kerr, Carpenter, and a multitude of others in the old world, while in the new we have Drs. Crothers, Mason, and a host of true-hearted men devoted to this cause. Our co-workers, Dr. Willard Parker of New York, and Dr. T. L. Mason of Brooklyn, and other great and good men, have gone to their reward, who were at first with us in this noble and humane work.

And now, my dear friend, we must ourselves own that we are nearing the end. I am three years only behind yourself.

I feel that what little I have done for the cause during the last thirty-three years is only laid up for the future to improve upon. What little has been written by me is not entirely for this generation, but for the future. What you have written will be for the centuries as well as for the near future; your reward will not come in this world, but we trust for the future. A hope is all we can now entertain. May your future years be full of peace and satisfaction, with the thought that you have labored for and "loved your fellow-man," and, no doubt, when the Angel of Peace comes, surrounded by a halo of light, with the names of "those whom love of God had blessed," your name will lead all the rest.

"Count not thy life by calendars; for  
Years shall pass thee by, unheeded, whilst an hour —  
Some little fleeting hour, too quickly past —  
May stamp itself so deeply on thy brain,  
Thy latest years shall live upon its joy.  
His life is longest, not whose boneless gums,  
Sunk eyes, wan cheeks, and snow-white hairs bespeak  
Life's limits; no! but he whose memory  
Is thickest set with those delicious scenes  
'Tis sweet to ponder o'er when even falls."

Dr. L. D. Mason, the second vice-president, was introduced, who spoke as follows:

It is our special privilege to speak of the relation of Dr. Joseph Parrish to that cause in which we all have a common interest, and in which he has been so prominent and useful

— and incidentally of the cause itself. My first acquaintance with Dr. Parrish was at a meeting held to organize "*The American Association for the Cure of Inebriates*," at the rooms of "The Young Men's Christian Association" in New York City, Nov. 29, 1870. He then acted as secretary of that meeting, and was the most energetic member of the organization and the originator of the whole movement; he has since then been elected to nearly all the offices in the gift of the association, and has proved himself a most valuable member in all those relations, and now fills, as he has for some time past, the office of president.

Not only his early identification with the movement, but his sincerity and fidelity to his convictions, are worthy of remark. He believed the assertion of Dr. Benjamin Rush, made one hundred years before, that "*inebriety was a disease and required special hospitals for its treatment*," and he also believed what Dr. Valentine Mott said, "that you might as well try to treat a *broken leg* by preaching to the patient as to cure an *inebriate* by moral persuasion alone."

Drs. Rush and Mott had strongly marked individuality and followed independent lines of thought, based on *common sense*. They were what we call "original thinkers"; would there were more men to-day like them brave enough to assert their convictions and "knowing dare to maintain them." Fortunately for our cause Dr. Parrish possessed this characteristic — he had the "courage of his convictions"; these were the result of his careful, conscientious, and scientific consideration of the facts before him. They were the results of conclusions deliberately formed, hence his constancy. Others came from curiosity or some superficial motive, looked in upon us and departed. "They are not with us, because they were not of us." The seed was good, but it fell on stony ground, and having no root, perished.

What has Dr. Parrish seen, and what does he now behold? He saw a cause apparently insignificant, the subject of marked indifference, wilful ignorance, and even ridicule, *now* firmly established as a scientific fact. He now sees special hospitals

throughout the land for the treatment of alcoholism as a *Disease*. In England, where in company with a fellow member of our society he testified in 1872 before a "select committee of the House of Commons" and gave his testimony before an almost skeptical audience, a few years later, in 1885, returning, he finds on English soil reputable institutions under the best of medical care, and he is dined and fêted, and his labors duly recognized; later still he rejoices to know there is being held in London, July 1887, a "congress" of all nations — England and her colonies, Germany, Austria, America, Russia, France, and the lesser nationalities — it is called an "International Congress of Inebriety," and the whole scientific world with "bated breath" listen to what *American* experts have to say on the subject of inebriety. There is no indifference *now*, the scientific mind is *anxious* and thoroughly aroused; *at last* it has struck the trail of truth, and henceforth it will follow where that path leads. Other "congresses" succeeded this one, and an "International Congress on Alcoholism" was held in Paris, July 29, 1889. At the latter a special committee, Drs. Motet, Duvrger, and Petithan advocated the establishment of special asylums for the treatment of chronic alcoholics, thus ratifying and endorsing the action of the "Congress of Brussels", when similar resolutions were passed, in 1881. This congress was for the consideration of "Nervous and Mental Maladies", alcoholism being incidentally considered. The *literature* of inebriety has not failed to keep pace with the advancement of general knowledge on this all-important subject. Dr. Parrish has added many papers of value to it, and the results of his investigation appeared in a work on inebriety published in 1883. He has seen a *Journal* published in the interests of inebriety, as an organ of this association under the editorship of one of our most prominent members, attain and maintain a marked position in the fields of journalism, as well as much matter also of interest issued from the "*American* ..." on this subject.

The *medical literature* of other countries includes the names of Richardson, Carpenter, Kerr, Peddie, Brodie, Cameron of England and Scotland, and last but not least the English pioneers Dr. Donald Dalrymple and Dr. Stephen Alford, Magnan, Beaumetz, and others of France, Baer and Binz of Prussia, Magnus Huss of Sweden, Petithan of Switzerland, Lentz of Belgium, Kowalevsky of Russia, as well as many others of more or less note, who have added greatly to the clinical history, "Therapeutics," "Pathology," and "Medical Jurisprudence" of Inebriety. Dr. Norman Kerr and Prof. Kowalevsky have written valuable and exhaustive treatises on the subject of inebriety. *Special societies* have been formed for "The Study and Cure of Inebriety" and other societies not especially formed for the consideration of the subject are willing and anxious to admit it as a matter to be discussed before their members. Medico-legal societies have evinced a special interest, and the medico-legal society of New York not long since gave an evening or more to the consideration of this topic, soliciting experts in this branch to testify and give their views and experience.

"The Pathological Society of London," over whose deliberations Sir James Paget presided, devoted an entire week of its sessions last winter to the consideration of the "Pathological Effects of Alcohol." *Foreign societies* have recognized and have extended their honors to American specialists in this branch of medicine. Dr. Parrish *now* sees medical journals, who a comparatively few years ago ignored the subject of inebriety, gladly welcome it to their columns. Also physicians who refused to acknowledge the causative relation of inebriety to disease *now* recognize it as an important factor, not only in the etiology of many diseases, either as a direct cause or as a complication, but also itself originating from certain diseased conditions, which precede its special manifestations.

The public mind now appreciates the fact, at least in some measure, that "inebriety" is a term which covers a host of diseases resulting from alcohol, especially its action on the

nervous system as in chronic alcoholism, acute alcoholic delirium, alcoholic dementia, alcoholic neuritis, alcoholic paralysis and dipsomania, including oftentimes with these the especial deteriorating effects of alcohol on the glandular, circulatory, and respiratory system.

Inebriety, it is seen, also not unfrequently results from involuntary causes as preceding *disease* or *injury*, and *more especially* from an *inherited tendency* that may be truly called an "inebriate diathesis," and that the inebriate under these conditions is not a *voluntary* sufferer, *volition* under these circumstances being excluded, his *inebriety being but the usual manifestation of a certain diseased condition which lies at the root of and is the cause of his inebriety.*

The fact is appreciated that inebriety and its consequences are but the eruption of the volcano, and like the subterranean causes of the volcanic disturbance, the inebriety has its causes concealed and behind it. *Prometheus chained to the rock* was not more impotent than the *inebriate* chained to his habit. The fact is being appreciated that intelligent medical aid can alone break these fetters, strengthen the impaired will power, and restore the inebriate to his friends and to his social position.

Twenty years ago *legislation* was practically indifferent to the inebriate except as a criminal, but now, in proportion as a legislator is intelligent, just in that degree does he accept the "disease doctrine" of inebriety and recognize the inebriate as a diseased person. Within a few days I have communicated with a member of the legislature of Louisiana, who is preparing a bill for the cure, not the punishment, of inebriates. A few days later a prominent member of the South Carolina legislature wrote me stating that he was drafting a bill for a similar purpose. Canada, the British provinces, Continental Europe, every scientific center is moved with the question: "What shall we do with the inebriate?" How shall we solve this great social problem?

Three classes of society bitterly oppose the solution of the question on the disease basis: the *moralists* on the one



hand, who claim that we are endeavoring to substitute *disease* for *sin* and *immorality*; the *lawyers*, who assert that the inebriate is *responsible* for his acts, which are voluntary, and last, but not least, the *liquor-dealers*, who are opposed to such doctrine, because it may involve a direct tax upon them. Thus fanaticism and ignorance, pedantry and avarice, have endeavored to stay the progress of reform. But moral measures and punitive laws have failed to cure the inebriate; intelligent persons see that these measures have no therapeutic value. From all sides the disease doctrine is meeting with acceptance. For twenty years or longer it has been before the community; its application has resulted in the cure of from 30 to 40 per cent. of the inebriates submitted to it, and that under *the most disadvantageous circumstances* it is now an accepted scientific fact that "*inebriety is a disease.*" With this view of the question let us "call things by their right names". The inebriate is a sick man, and the place where he is to be healed is not a *home* or a *retreat*.

These names lead to confusion and misinterprets the object which these institutions have in view. Let us use plain English and call these institutions "*Hospitals* for the cure of inebriety or chronic alcoholism," if the latter term is preferred.

Those who have control of these institutions should be regularly educated physicians, especially qualified for the work. The time has passed when clergymen without a parish, or general practitioners without a practice, can as a last resort attempt to make a living by *endeavoring* to cure the inebriate. We also include "reformed inebriates". We do not believe that "reformed inebriates" have any special qualifications that should place them at the head of inebriate asylums; indeed, we believe they are especially disqualified for such a position, which is one that would severely tax a person who possessed a healthy, vigorous, normal constitution, in addition to special qualifications for the work.

You who minister in "holy things." think not we are come to amend, misinterpret, or destroy the moral law, nor to

frame an excuse for immorality, nor to shield a willful sinner from divine justice; we have no such mission.

But the days of demonism and of witchcraft, the days of Chrysostom, Tertullian, and of Cotton Mather have passed away. Every lunatic, hysterical person, or epileptic is not now "possessed of a devil," nor is every feeble-minded and silly old woman "a witch." Before you "cast the first stone" we ask you not to condemn the inebriate as a sinner because an inebriate, but lead your unfortunate brother to an institution, where his diseased body and enfeebled intellect can be reformed; where, clothed and in his right mind he can receive *in* gently your spiritual instruction and encouragement. And you, who make, amend, and enforce the law, protectors of our persons, our property, our liberty, and our privileges, do not think that because we may plead at times the "irresponsibility of the inebriate," that we therefore would set aside all human law. Nay, we appeal to the higher, yet unwritten law, the law of simple *justice*; for is it right to sentence and punish an irresponsible person, who is feeble minded, or a lunatic? — and that the inebriate is not unfrequently one or the other, and that his career often ends in the lunatic asylum is a fact abundantly shown and proven beyond dispute. We simply ask you in all such cases to listen to the evidence, consider the previous life and manner of the accused, not alone under the light of medical testimony, but from investigation of the evidence before you based on common sense, and then deal with the inebriate *as practically an insane person* if the testimony sustains the plea of "*non compos mentis*." And what shall we say to you, my brother physicians? American physicians originated the thought that inebriety was a disease, and that finally was materialized into the asylums and homes for inebriates that now are found in almost every scientific center. Shall American physicians fail to sustain and endorse those who were the pioneers in this movement? Are you ashamed to follow in the footsteps of Benjamin Rush, Valentine Mott, John W. Francis, and a host of medical men who in more modern times included in

their number the best and noblest names of the day? To all political economists, to all statesmen, we would say, behold the only practical and satisfactory solution of the great question, How shall we control the inebriate? Not by punitive laws, but by proper legislation. Put the brand of mental and physical *disease* and consequent irresponsibility upon the inebriate and enact laws for the control of inebriates and provide proper institutions, where they can be treated, just as you now do for the insane, with such modifications as the circumstances may demand. This is your especial duty.

Whatever beneficial effect restrictive legislation may have on a community, *it cannot cure the inebriate*. Special laws are required for his control and treatment. New York State and Connecticut have such laws, based on the fact that the inebriate is a diseased person, not a criminal. England and her colonies have within a few years enacted similar laws in behalf of the inebriate, and we believe the time is not far distant when every civilized community will have its special laws for the control and treatment of the "*Inebriate as a diseased person.*"

Physicians, sanitarians, scientists, bacteriologists, you who meet to consider causes that are detrimental to the public health and destructive to human life, do not, we implore you, *eliminate* from your learned councils the consideration of a destructive agency so potent for evil as alcohol; but while you diligently search the slums and sinks of great cities, polluted water supplies, and the excretions of the living or the tissues and fluids of the dead for disease germs, do not forget that while cholera and the eruptive and continued fevers have slain their thousands, alcohol has slain its *tens of thousands*; while these appear as epidemics, *alcohol* is constant in its destructive effects.

It does not often fall to the lot of a reformer or one who endeavors to establish a principle or fact, to live to see that principle or fact accepted and established beyond a peradventure or a doubt. Dr. Parrish can do this. At the latter part of a long and useful career he can take a retro-

spective glance over the "battlefield of life" and say: "I have waged a warfare, and established a principle. And when I have been 'gathered to my fathers' my name and the name of my confrères will be handed down for generations to come as the pioneers of a reform conferred upon society, a *practical* and *safe* solution of the great question that has agitated the minds of physicians, legislators, and all social economists from time immemorial: 'How shall we deal with the inebriate?'"

And now, Dr. Parrish, accept the sincere congratulations of your associates, over whom you have presided so many years. Your life has been a busy one in many departments of knowledge and duty. But in none have you attained or will you attain more eminent success, than in the part you have taken in establishing the fact, laid down in the creed of our association: "*Inebriety is a disease; it is curable in the same sense as other diseases are curable.*"

But as we write, memories crowd upon us, and the shadowy past is full of familiar faces—Turner, Mason, Dodge, Parker, Willetts — all names associated with our early work.

There is on the part of the younger members of this association a desire to cling to these names, as we could not easily forget them if we would, nor willingly let their memory die. We especially recall that earnest pioneer of our principles, the late Dr. J. Edward Turner, who, as he stated, devoted fifty years of his life, practically his whole life, demonstrating that inebriety was a disease, and founding, Sept. 24, 1858, as a means for its cure, *the first inebriate asylum established not only in this country but in the world.* He was engaged, at the time of his death, in endeavoring to wrest from illegitimate seizure the asylum to whose interest he had devoted his whole life, and also in founding a "Woman's National Hospital" for the treatment of alcoholism and the opium habit, writing in his unbounded faith over its yet unerected portals —

"Neither are our hopes buried in the dust,  
Nor our faith darkened into night."

Dr. Turner was the St. Paul of our gospel. We use the word in no sacrilegious sense, for is it not "good news" to the chronic inebriate that his disease may be cured? and was not *our* Dr. Turner similar to the great apostle in his "journeyings oft," his trials, rebuffs, disappointments, and in his final success? for he saw the principle he advocated at last firmly established before he was called away from this field of duty. He has labored, and we have literally entered into his labors. There is an inspiration in the life of such a man. Fellow associates, as death lessens our numbers, let us stand shoulder to shoulder, rallying around the standard of our principles. Let us be faithful to the trust that these pioneers in the work have bequeathed to us, saying with the soldiers of the first empire: "The Old Guard dies, but never surrenders!" and let the presence to-day of one who embodies in his life work so *illustriously* the principles on which this association is founded, animate us to further and greater efforts in a field so important to the commonwealth, so full of great results; and may we, directed and strengthened by the memory of those faithful exemplars that have gone before —

So live that when our summons comes to join  
The innumerable caravan, which moves  
To that mysterious realm, where each shall take  
His chamber in the silent halls of death,  
We go not, like the quarry-slave, at night,  
Scourged to his dungeon, but, sustained and soothed  
By an unfaltering trust, approach our grave  
Like one that wraps the drapery of his couch  
About him and lies down to pleasant dreams."

Dr. Crothers, secretary of the association, remarked as follows: On the 29th of November, 1870, in the parlors of the Young Men's Christian Association at New York City, a small company of gentlemen formed themselves into an association. The following preamble and declaration of principles were adopted as explaining their object and work.

WHEREAS the American Association for the study and cure of inebriety, having met and considered important essays on the various relations of inebriety to individuals, to society, and to the law, and having seriously determined to use their influence in all suitable ways to create a public senti-

ment and jurisprudence, which shall co-operate with true methods for the recovery of inebriates, do make the following declaration of their principles.

1. Intemperance is a disease.
2. It is curable as other diseases are.
3. Its primary cause is a constitutional susceptibility to the alcoholic impression.
4. This constitutional tendency may be inherited or acquired.
5. Alcohol has its true place in the arts and science. It is valuable as a remedy, and like other remedies may be abused. In excessive quantity, it is a poison and always acts as such when it produces inebriety.
6. All methods hitherto employed, having proved insufficient for the cure of inebriates, the establishment of asylums for such a purpose is the great demand of the age.
7. Every large city should have its local and temporary home for inebriates, and every State one or more asylums for the treatment and cure of such persons.
8. The law should recognize intemperance as a disease, and provide other means for its management than fines, station houses, and jails.

This was published, and would have passed all unnoticed in the current march of events, had it not been for the heresy hunters of the religious press. They discovered danger signals in these declarations, and opened fire with the result of giving them permanency and rapid growth among the great truths of the world. It was the old, old story of opposition and denial which greets every advance of science and truth. Dr. Parrish was the target of this first battle. He was credited with being the first to offer such an explanation, and for a long time the impression prevailed, that to silence him was to end this theory forever.

This group of earnest men on that November morning nearly a quarter of a century ago, who made this record of their principles, were all unconsciously building another step on the great altar stairs leading up to a higher plane of human activity. We are just beginning to see faint outlines, as through a glass darkly, of this great new realm of scientific research; we are just beginning to realize that this really wonderful statement of truths so far beyond that day and generation, like a burst of inspiration, or a rift in the clouds through which the blue vault beyond appears, was one of those rare events of the century. Our honored guest was

the author of these statements, and, as the noted Dr. Rush seventy years before affirmed that inebriety was a disease and should be treated in special hospitals, these declarations of Dr. Parrish represented the slow advance of seventy years. Simply another statement of the new continent that had come into the horizon of science. For over two thousand years, pioneer explorers had seen this continent, but Dr. Rush was the first to land on its shores for a brief moment. Then a long interval of silence, and finally Dr. Parrish landed, and the first work of exploration began. This declaration of principles is an outlined statement of the geographical features of the country. The enthusiastic Dr. Turner who organized the asylum at Binghamton, and our honored Dr. Day, Drs. T. L. and L. D. Mason, Rev. John Willetts, and a few others, were all cotemporary workers who landed on the same shores, and following the lines laid down by these principles have gone far inland, leaving imperishable records of their work.

Many grand and heroic men have gone far into the mystery and desolation of the polar regions in the effort to reach the pole. The drink problem of to-day is more of a mystery than the geography of the poles. Five hundred thousand men dying every year, sorrow, loss, and misery that can not be computed by figures or expressed in words.

Every remedy proposed by church or state fails. All the theories of what it is and how it exists fail when seen in the light of science. Sound and noble men in church and state have thrown away their lives in efforts to solve this mystery, and now a political party like the old crusaders are gathering their forces and pressing on to the rescue. As in the march towards the pole, the most exact use of and recognition of means and physical forces are absolutely essential to secure the slightest measure of success. So this mystery must be solved by a study of the forces and laws which govern and enter into the progress and development of every human life. From a recognition of these forces, and the application of this knowledge, we shall find the means

and remedies for this evil. To-day a little band of explorers represented in nearly every country of the world, with our honored guest at the head, have crossed the frontiers into the *realms of heredity*. Here we are confronted with the facts of transmitted tendencies, of physical and psychical forces that came on down from the generations back. The sum total of the tides of passions, of the waves of evil, the ignorance, the neglect, the sorrows and wrongs that have passed long ago but left their mark on the ages to come. Here we are to read the geological revolutions and evolutions of the human brain, and trace its effects in the abnormalities of the inebriate.

We have come to the great *realm of environment* — of the forces of education, of ignorance, of food, of climate, of soil, of sunlight, of labor, of social influences, and many other forces which surround us on all sides, whose influences are likewise traceable all along the death march of the inebriate.

We have passed into *another realm* of inquiry — the *nature and effects of alcohol*. As we press on up this road of research, we are startled to realize that we have *no* accurate knowledge of alcohol, and no clear conception of its effects on the delicate nerve cells and tissue of the brain. Alcohol is a composite and a name for an almost infinite variety of chemical combinations, whose effects may vary like the colors of the clouds. The most minute chemical research, the most exact pathological scrutiny, only reveal wider realms of truth inviting further study, until even the imagination pales and grows weary in the attempt to grasp the facts.

We ascend a little and are confronted by the higher forces that are vaguely expressed by the term psychical; forces that hold nations, societies, and human conduct in the aggregate within bands and limits which it cannot pass; forces that control communities and regulate the march of humanity; forces of evolution and dissolution, that are as silent and powerful as the motion of the stars; forces that throw out great armies of inebriates to be wrecked on the shores, and forces that send other armies on to the haven of successful life.



Another realm comes up nearer us — the field of practical asylum care. From our knowledge, limited as it is, we can see wide ranges of possibilities that are scarcely conceived of yet.

There are over one hundred asylums in operation in the world to-day, working at this problem from all sides. Every one of them are conscious that their best efforts are as nothing compared with the practical attainments of the next century. Like the old Northman, we who are engaged in practical asylum work have just landed on the shores of this new continent. We have just seen the rich lands and mountain ranges, full of wealth and possibilities for the prevention and cure of inebriety.

These are some of the great outlying continents that loom up before us, shrouded in the most fascinating mysteries — mysteries that are to be solved and made clear in the future; realms for exploration, awaiting and inviting the discoverer; realms for the grandest triumphs that are possible for human effort to attain. The marvelous power of electricity, and the most fascinating efforts to harness it down to the service of man, are insignificant compared with a knowledge of brain growth and evolution, and the laws which control its highest development, and the laws of dissolution, which control its destruction with equal certainty. The world is a vast storehouse of unused forces, and it is the divinity of humanity to discover and apply them to the grand march of life.

Inebriety is a dissolution that is governed by laws and forces that move with the same certainty and exactness of the motions of the planets. Our work is to discover these laws and forces, and get possession of the means of cure and prevention and apply them to check the inebriate's downward march. Our work is to change the current back at the fountain head, to stay the pollution of the springs of life, to halt this great army of inebriates that are marching on to death.

A quarter of a century ago, when Dr. Parrish wrote this declaration of principles we have mentioned, not a dozen

men in the world were willing to defend them. To-day five large medical societies — four in Europe and our own society— have made them the corner stone of their work. Some of the great medical and scientific men in the world support and endorse them enthusiastically.

This is triumph enough for one lifetime. The song of the poet may die away in the progress of the centuries; the work and memory of the inventor will be forgotten, as science marches on beyond. But he who lays down great principles that are fixed and eternal, has won an imperishable place among the world's benefactors that cannot be forgotten.

Our meeting to-day is to grasp hands once more with our honored president, and not by extravagant laudations or high-sounding words bow down before him. But with the warmest greetings and our personal presence assure him that we are still pressing along the lines he marked out a quarter of a century ago. The little we have attained compared with the boundless wealth of truth awaiting development, creates humility rather than pride. The highest pleasure of the scientist is in the triumph and endorsement of the truth he has advocated. The keenest pleasure we can share with our honored president to-day comes from the fact that the truths he urged against bitter opposition have at last been recognized, and are fast becoming the great principles of science. Our work has been right, and although yet doubted, denied, and sneered at, is fast becoming recognized. We thank God and take courage, "that where our vanguard rests to-day the rear shall rest to-morrow."

For years we have met our honored president, in the storms and sunshine. Over and over again we have met the stings and arrows of contradiction and opposition from without, and our impatient spirits urged for battle, but his counsel was ever for more faith, and patience in the final triumph of the truth. He was right.

The tide of truth comes up always  
Though we may stand in sorrow,  
And our lone barque aground to-day  
Shall float again to-morrow.

As secretary of our association, whose members are scattered in nearly every State of the Union, and whose honorary members abroad comprise some of the great scientists of the world, and also to in some measure express the feeling of our members in China, India, and Australia, I offer the following preamble and resolution :

WHEREAS, In the Providence of God we are permitted to meet our honored President, Dr. Joseph Parrish, on the occasion of the seventy first anniversary of his birth, and mingle our personal congratulations with those of his numerous friends; therefore be it

*Resolved*, That in the name of our Association, whose members are scattered in almost every clime of the world, we extend our warmest greetings and most sincere hopes that many more anniversaries of his life may follow, that we shall have the benefit of his counsel and the cheer of his presence far down into the future.

*Resolved*, That as a pioneer in this great "dark continent" of humanitarian effort we recognize his work and its imperishable value, and we send him our most hearty thanks and assurances that he has built a monument that will serve as a guide for us and others long after we have all passed away.

*Resolved*, That his personal efforts on behalf of our Association, and writings on the subject of inebriety, have given an impetus to the work which will be felt in the long centuries. And we most earnestly desire to make this public record of our indebtedness to him and the obligations of science, for his most earnest and persistent labors to secure the full recognition of the fact of the disease of inebriety and its curability in asylums.

*Resolved*, That a copy of this be published in the *Journal of Inebriety* and be placed in the minutes of our Association as a permanent record of united sentiment and feelings of deep personal regard.

The resolutions were adopted unanimously.

Dr. C. H. Shepard of Brooklyn, N. Y., was called upon, and remarked :

It is well for us to meet to-day in honor of one who has devoted the best years of his life to an earnest endeavor to ameliorate the condition of his fellow men and save what he could from the wrecks of inebriate humanity.

To one who lives in the brighter light of to-day the dark vail that shaded this subject forty years ago seems almost incomprehensible. At that time but few minds appreciated the true position of the inebriate, and even now, in the thought of most of the laity, this disease is looked upon

and treated as a vice ; consequently, there are administered large doses of good moral counsel, which in the great majority of cases has but little or no effect. It was given to the trained mind of the medical expert, however, to discern the true situation and recognize the symptoms of disease as such cases presented themselves.

Among the few who did so recognize these truths, the name of Dr. Joseph Parrish is eminent, as has been well attested by his life work and also by the result of his summons for examination before the committee of the English Parliament in the year 1872.

The inebriate asylum of to-day is the foremost step in the right direction. Here the invalid is treated according to the best experience and in the light of our present knowledge. Those who are conducting these institutions are to be commended as most worthy, for they necessarily work under many disadvantages. One of these is the want of a crystallized public opinion to encourage and sustain them in what they have already accomplished, as well as the more radical measures they would gladly adopt. With the progress of knowledge on this subject the advance will surely be more satisfactory.

The treatment of the insane and the criminal, which the eminent philanthropists Howard and Pinel did so much to elevate, has wonderfully improved since their time, and even though there is much yet to be desired, progress is constantly being recorded, while at the same time the sympathies of society are warmly interested therein, and the growth of hospitals for the sick and the insane is such, that in a few years every large city will be well supplied, all of which is very creditable to the better feeling of humanity.

Now, the inebriate is equally deserving, and much more amenable to treatment, for in the one case we can entirely abstract the *cause* of the disease, and unless treatment has been too long delayed, recovery is certain, whereas in the other, the physician is frequently entirely in the dark as to its initiation, and recovery is very uncertain. Society calls

aloud for protection from the consequences of inebriety, and most assuredly should such invalids be protected from themselves.

The model institution is yet to be built — where the patient is isolated from all temptation, and will be retained till cured and strong enough to cope with outside influences — where narcotics shall be entirely banished — where all the appliances of hygienic treatment shall be in perfection — where skill and kindness shall be allied — where ingenuity shall bring all the best of modern appliances to work in subserviency to the one grand end of restorative action.

The nearest approach to such an institution as I have indicated was the New York State Inebriate Asylum, whose unfortunate termination was due to the differences of opinion regarding the question of isolation and reasonable restraint.

For such an ideal we may work, and in the meantime make use of the best appliances we have at hand.

War has its victories and its great generals, but peace has far greater. The great exemplar went about doing good — healing the sick and restoring the blind. Is not the inebriate both sick and blind? and he who labors in that field does the Master's work. If perchance but one out of many is saved, more than one broken heart is bound up thereby and a step is taken in progress toward the healing of the nation. All honor then to Dr. Joseph Parrish, who has earned right royally the title of a great general in the world's list of heroes in her army of Peace.

Dr. Bradner of Philadelphia remarked :

“ A graceful form, a noble mind,  
A pleasant countenance and fair,  
A tender heart, sincere and kind,  
How sweet, but, oh, how rare !”

It is fitting that a Philadelphia physician should make some remarks on this interesting and memorable occasion, and while it is to be regretted that the pleasant lot had not fallen upon one more worthy and better able, I am

nevertheless proud of the honor, and glad of the opportunity to pay a passing tribute to one long rested from earthly labors, and to bear testimony that his good works have followed him and been kept good, by his son; "one who is, when he is not, to tell that he has been." For nearly a hundred years the medical profession of Philadelphia has been ornamented by the name of Dr. Parrish. If we search the medical history of that great city, we can find no more illustrious name than that of the father of him whom we to-day delight to honor. The strength of his professional powers, the integrity of his personal character, and the kindness of his heart, made him a conspicuous and shining example in life, and will cause his memory to be fondly cherished for ages yet to come. The sons of great men too seldom become or even remain great, themselves, but happily for us, aye, and for future generations, there are exceptions to that rule; and to-day we are witnesses of a most notable exception. "Like father, like son." The greatness and goodness of the historic Dr. Parrish descended to his son, who has kept the grand inheritance not only untarnished, but added new luster to its brightness; and it is our happy privilege to live cotemporary and in close fellowship with this worthy scion of that noble stem. Of such parentage is Dr. Joseph Parrish, president and founder of the American Association for the Study and Cure of Inebriety, the pioneer in the humane and scientific treatment of kindred diseases, formerly regarded wholly vicious; the warm-hearted friend of the inebriate, the insane, the idiot, the lame, the halt, and the blind. Where in all our broad land has not his influence reached? Nay, the mighty billows of old ocean could not environ it—Britain even called for his counseling wisdom, and the parliament of that great nation so profited by his advice that thousands of such sufferers have been provided for and their miserable condition ameliorated.

Truly may it now be said, that the sun never sets on those who have been benefited by the life and love labor of our Dr. Parrish. And now, as we refer to the numberless

pages of his writings — the records of his professional career — and contemplate the number of self-despised unfortunates, whose unhappy minds have been alleviated by the kind words and acts, prompted by the big, warm heart of this good man, we are not surprised that he has already passed the period allotted to man. We rejoice, however, in the fact, that he is still with us, and are happy in the hope and reasonable expectation that the powers of his noble mind and the strength of his mighty pen, not yet abated by length of years, may be spared and vouchsafed to us for many years yet to come. It is true that the festivities of this day remind us of the flight of time, and that threescore years and ten and one are already gone since the birth of the American physician whose name is dear to each one of us, and which must stand first among those whose lives have been devoted to our specialty, forever!

*Vivis et vivis, non ad deponendam, sed ad confirmandam opum magnum bonum vitae.*

Prof. Travis of Burlington, N. J., read a poem, called the "Worm of the still, and the heel which bruises it." Francis B. Lee, the well-known newspaper correspondent, read the following poem:

TO DR. JOSEPH PARRISH.

As when a stately pine in Arctic plains,  
 Sprung from the thankful glebe of northern clime;  
 Proud in the sturdy strength of earlier prime,  
 Full of rare vigor in its hardy veins,  
 Ne'er breaking with the weight of icy chains,  
 Bears its snow-covered head to heights sublime, —  
 Faithful to honored sires of ancient time.  
 At last in eventide when Phœbus wanes,  
 Is bathed in liquid light, in flowing gold,  
 God's own reward to it by his behest,  
 I would, oh Master, that thy God enfold  
 Thee, thou fair pine, with a light thrice blessed  
 Of hope and faith and glories manifold;  
 Then give for aye His perfect peace and rest.

Short addresses were then delivered by Dr. Ulrich, of

Chester; Mr. Milligan, Dr. Corson, of Plymouth, Pa.; Rev. Eli Gifford, Rev. E. B. Hodge, Rev. A. E. Ballard, of Ocean Grove, Dr. T. T. Price of Tuckerton, Dr. Atkinson of Philadelphia, and many others.

After a short recess Dr. Parrish read a paper in reply, in which he detailed the beginning, progress, and present status of the study of inebriety as a disease. After the Doctor had concluded, all were invited into the dining-room, where an elaborate dinner prepared by Caterer Dubell was served.

Nearly seventy-five guests were present from all sections of the country.

Among those present were included Dr. Ward, superintendent of the State Insane Hospital; Dr. William Hunt, Dr. C. H. Thomas, Dr. N. R. Bradner, of Philadelphia; Dr. J. C. Hall, Frankford; Dr. J. H. Thompson, New York; Dr. Blanchard, Fort Hamilton, Pa.; Benjamin F. Lee, Trenton; Dr. Alice Bennett, Norristown; Hiram Carson, Conshohocken; Paul R. Shipman, Edgewater Park; Albert Day, Boston; Dr. Lewis D. Mason, Brooklyn; Dr. Thomas D. Crothers, Hartford; Rev. E. B. Hodge, Rev. I. W. Eastwood, Rev. J. L. Roe, G. W. Harrod, Rev. J. B. Westcott, Rev. Robert MacKellar, Dr. J. Howard Pugh, Dr. Walter E. Wall, Dr. Ledyard Van Rensselaer, Dr. Franklin Gauntt, Dr. E. S. Lansing, Dr. F. Allen Gauntt, Dr. J. B. Cassidy, W. D. T. Travis, W. E. Schermerhorn, Dr. W. G. Parrish, and many others.

Dr. Parrish's reply and other addresses were reserved for the next number of the JOURNAL.

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Spinoza's saying, that "Our illusions of free will are but our ignorance of the motives and influences which enter into our acts" is true among inebriates. The oft-repeated statement that inebriates could have done this or that, is never supported by the facts of their history.



EXPERIMENTS AS TO THE ACTION OF ALCOHOL ON THE BRAIN.

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By J. J. RIDGE, M. D.,

*Physician to the London Temperance Hospital.*

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“Half a pint of beer can't do anybody any harm.” This is regarded as a self-evident truth by non-abstainers. Half a pint of beer, or a glass of wine, or a couple of table-spoonfuls of spirits, all containing about half an ounce of absolute alcohol, are considered such extremely moderate quantities of these beverages that it seems absurd to suppose that any injury can result from so small a dose. The fact that so many millions and so many generations of the human race have taken these drinks, and pronounced them good, is considered by many (even by some who might have been expected to reason better) conclusive proof that they must do good rather than harm. How is this to be settled? Is the declaration of the beer, wine, or spirit drinker, that he feels all the better for his glass, sufficient proof? Is the common custom of millions enough to prove that the drinking of alcohol is beneficial either to the individual or the race? If it be, then the similar declaration of the opium-smoker and the victim of every other narcotic, who all cherish the profound conviction that their particular drug is both necessary and beneficial to them, must be accepted as equally conclusive. And so must the widely spread and extending use of these drugs, and tobacco, be taken to prove that the vitality of the nation by whom they are used is thereby increased.

It is sufficient to state the proposition thus to expose the absurdity of the plea. It is perfectly certain that the use of a narcotic cannot become common and general without injury to the race, and it is equally certain that any one of these narcotics has the power so to alter the nervous system

of the individual who uses it habitually as to cause certain uneasy sensations when it is abstained from, sensations which are relieved directly by a dose of the drug. Hence the existence of a longing desire for a narcotic drug is one of its essential symptoms. The feeling of benefit or necessity, the difficulty, however slight in some cases, of abandoning its use, cannot be absent if we are dealing with a narcotic. Alcohol is no exception to the rule. There are those in whom this desire or craving overmasters every consideration; but there are thousands more in whom this overmastering craving is in process of development, and vast numbers besides in whom it will never reach such a height, but is in its first or second stages. These are the people who "could give it up, you know," but who never want to do so, and who never do. The difficulty in persuading people that alcoholic liquors do not do them good, or in getting them to give them up for other people's sake, arises chiefly from the fact that alcohol is a narcotic, like the rest.

It seems to me useless to attempt to argue with a man's feelings. One can never convince him that he does not feel this or that. The only thing to be done is to convince him that his feelings are misleading him.

As to the influence on the race, the proof of that is being slowly accumulated by the results of life insurance societies. But as to the influence on the individual, experiment can alone settle this question. *The man must be tested*, and if he is equally as good a man, that is, if his powers are quite as great, with alcohol as without it, then we must admit that no immediate harm is produced, and that the only injury is remote and gradual.

I have already published the results of experiments made seven years ago, which showed that the senses of sight, common sensation and of the muscles, are blunted by alcohol in doses of from two to four drachms. These experiments have been repeated and confirmed by others. Dr. Richardson has also found that the hearing is affected in a similar way. It needs no experiment to prove that considerable

quantities of alcohol blunt the senses. That is seen every day, and the observation is as old as Solomon, "They have stricken me, and I felt it not." It is equally obvious that large doses blunt the powers of the mind, and render the brain less able to perform its functions. But the influence of smaller doses has been a matter of much dispute. It is very difficult to bring mental operations to any objective test. And it is very certain that anyone who is experimented upon may, if he chooses to do so, vitiate the conclusion by voluntary delay on either side. A certain test being devised, it is clear that an individual opposed to total abstinence may willfully perform it worse than he could in order to appear better after the dose of the liquor which he loves. The man's own sensations are, as we shall see, no criterion whatever. An alteration in his feelings may be nothing more than a benumbing of uneasy sensations, or a removal of inhibiting currents.

The action of alcohol on the nerve tissue is one of weakening or gradual paralysis from beginning to end. Dr. Hughlings Jackson and others agree in this, that the powers of the mind are gradually developed from childhood to manhood, and that the last to be developed, those parts by which judgment and will are exercised, are the least stable and the first to be paralyzed by alcohol.

Dr. Lauder Brunton\* has published the results of some interesting experiments performed by Kraepelin, in 1882. These are so decisive and so important that they ought to be stock arguments of every total abstainer. The object of the investigation was to discover the time required for the performance of mental functions, and the effect of drugs upon them. Nerve force travels much slower than electricity, and hence it takes an appreciable time for a signal to be seen, recognized, and returned. If the time is longer when under the influence of a drug, it is clear that this drug has interfered with the production and transmission of the nerve current. Kraepelin performed three sets of experiments —

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\*"A Text-book of Pharmacology" (Macmillan & Co.).

(a) to find the time required for simple reaction, that is, for the message to go in and be returned, (b) for discrimination, (c) for decision.

(a.) The time required for simple reaction was determined by marking automatically upon a drum revolving at a uniform speed the precise moment at which a colored flag was exhibited. As soon as the person experimented on perceived this he pressed a key, which, by electricity, made another mark on the drum; this had meanwhile revolved a certain distance, according to the time taken up by the passage of the impulse from the retina of the eye to the brain, its recognition therein, and its transmission to the motor nerves and muscles of the arm which pressed the key.

(b.) The time required for *discrimination* was tested in a similar way, but in this case there were two flags, red and blue, and the signal was only to be given when the flag was shown which had been previously agreed on. The time taken up in considering this point prolonged the interval, and the difference by which this exceeded the time in the previous experiment indicated the time consumed in this process.

(c.) The time required for *decision* was arrived at by having to give a different signal for the red and blue flags respectively. Hence the person had not only to distinguish them, but to decide which key to press.

Several drugs were experimented on, but I wish to call special attention to the fact that alcohol prolonged all these periods. It took longer both to signal, to discriminate, and to decide; in fact, all these mental processes were slower after taking it. This is entirely in accordance with previous observations, and there can be no doubt whatever that the *role* of alcohol is that of a narcotic. But there is one most significant remark which I quote from Dr. Brunton. He says, "The influence of alcohol upon psychical processes is curious; for while it renders them much slower, the individual under its influence believes them to be much quicker than usual." This sentence deserves to be committed to

memory by every abstainer in the kingdom, and quoted as the most rational foundation for abstinence. It shows how able alcohol is to deceive and weaken the judgment, and proves that the feelings and fancies of the individual under its influence are not to be trusted, and do not indicate his actual condition.

As a corroboration of this narcotic action of alcohol, I have made several experiments, chiefly on myself. These consisted in endeavoring to pass a pointed stick through a swinging ring, counting the number of swings between each successful endeavor and adding these together when sixty had been accomplished. A certain dose of pure rectified spirit was then taken, and after fifteen minutes the number of swings required to accomplish sixty more swings was counted. I append the result of the experiments made on myself, because I can guarantee their *bona fide* performance and accuracy, and they were all performed after sufficient skill had been acquired by practice.

Alcohol.	No. of swings before.	No. of swings after.	Percentage of increase.
1 drachm, . . . . .	153	169	10.5
	113	126	11.6
	112	123	9.8
	166	194	16.9
2 drachms, . . . . .	145	156	7.5
	132	154	16.6
	125	146	16.8
3 drachms, . . . . .	134	185	38.0
	115	142	23.5
4 drachms, . . . . .	141	204	44.6

The progressive increase in these figures with larger doses is a good indication of the action of the alcohol, and roughly indicates the comparative amount of injury done. The influence of one drachm is decisively indicated, and I found two drachms quite enough to produce transient giddiness. There were considerable variations in the number at the various sittings, but they are due to many causes, such as time of day, amount of light, condition of brain and body,

*Experiments as to the Action of Alcohol on the Brain.* 67

etc.; but this difference does not affect the relative result with and without alcohol. Each experiment was done on a different day. Several functions of the brain and spinal cord are hereby tested, such as —

1. The steadiness of the hand and coördination of the muscles.
2. The sharpness of the sight.
3. The accuracy of the judgment.
4. The rapidity of thought (perception and decision).
5. The rapidity of muscular action.
6. The power of self-control.

It may be taken as proved that alcohol injures the capacity of self-control, or temperance, which cannot be as great or complete with alcohol as without it. The largest quantity taken, half an ounce, is about the amount contained in half a pint of beer, a small glass of wine, or two table-spoonfuls of brandy and water, and hence these are clearly capable of doing considerable harm to the nervous system.

—*Medical Temperance Journal.*

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**COCAINE EPILEPSY.** — Dr. C. Heimann relates the case of a man thirty-seven years of age, who had been in the habit of taking morphia. His druggist advised him to break the habit off by taking cocaine. He commenced by reducing the morphia to two grammes daily with eight grammes of cocaine. Six months after commencing this quantity his mind became affected, and three months later he was seized with a convulsive fit, which was repeated for several days. After recovery he was dismissed from hospital and two months later he had a subcutaneous injection of cocaine, which again threw him into fits. After being dismissed from hospital a second time, he took another large dose of cocaine, and immediately was seized with similar convulsions, and expired. Dr. Heimann considered this a case of cumulative cocaine poisoning. —

*id.* Press.

## Abstracts and Reviews.

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### THE ACTION OF MERCAPTAN OR SULPHUR ALCOHOL.

Dr. Richardson has lately published some very suggestive studies of the above compounds, that open some new fields of research of unusual interest. Mercaptan or sulphur alcohol is chemically  $C_2 H_5 S H$ . It is one of the sulphuretted organic compounds, and is made by distilling a solution of potassa saturated with sulphuretted hydrogen with a solution of calcium ethyl sulphate. It is a colorless fluid of penetrating and peculiarly offensive odor. These odors may vary widely, but they are so unlike any other that they can never be mistaken. Often they are identical with the odors met with in many forms of disease as emanating from the skin and breath. In testing the diffusion of mercaptan through the blood at blood heat, odors similar to those emanating from persons suffering from dyspepsia, from alcohol, delirium tremens, typhus, and small-pox, are readily detected. Most striking of all from one degree of dilution was the odor of the air of the ward, in which a number of insane persons have long been retained, an odor which is amongst the most definite and tenacious of all the odors generated in the bodies of diseased persons and thrown off by them. In an inquiry into the effects of mercaptan from inhalation, Dr. Richardson found, that in the human subject "it produced drowsiness and a sense of desire for sleep, attended with a strange mental sensation of an overpowering kind as of some actual or impending trouble. This was succeeded by a feeling of muscular fatigue as if the limbs were too heavy to be lifted by the ordinary natural efforts, and that rest was impera-

tively demanded. There was no anaesthesia, but a distinct conscious nervous weariness and oppression, during which the mind is never obscured to the degree of not being fully aware of all that was going on—but was burdened to an unnatural extent. While in this state, the pulse fell, becoming both feeble and slow, and continued in that state for all the time that the other effects were noticeable, usually about two hours. If the inhalation was prolonged, a decided group of symptoms tending towards narcotism, mental depression, and melancholy followed, that were alarming. Life became a great burden, a mental cloud or veil seemed to overshadow the mental surface, and a true melancholia, bordering on absolute despair, held overpowering sway. This very rapidly ended in suicide. Often after exercise in the open air, and a brisk purgative brought relief, the peculiar odor of mercaptan was distinctly detected in the excretions as long as the symptoms remained. Upon the lower animals, mercaptan was found to act as a narcotic. In frogs it acted as a cold, and the animal seemed in a state of trance or catalepsy, and seemed temporarily dead. Taken to the open air, they would slowly recover, with this peculiarity that the voluntary muscles would recover first, then the respiratory muscles, and finally the heart. The symptoms from mercaptan connect themselves closely with those which follow from inhalation of carbon bisulphide; and when we recall how readily under a perverted zymosis in which albuminoid compounds are broken up, sulphuretted products would be set free, it may be fairly inferred that in a large number of diseases attended with mental disturbances, depression, and narcotism, these compounds play the leading part as producers of the phenomenon. For instance, the synthesis of melancholia from mercaptan is so true a synthesis that a patient under the influence of mercaptan would be diagnosed by a physician ignorant of the cause as melancholic.

On synthesis of disease from perverted zymosis, I offer the following brief propositions:

"I. Zymosis in the living body is a vital and natural



process which, in states of health, is completed like good combustion of fuel, itself a perfected zymosis, by yielding water and carbonic dioxide as products, with liberation of heat.

"II. The blood, naturally in its own ferment, and requires nothing more than itself to sustain the zymosis of the fermentable material which it receives in the form of food.

"III. The natural zymosis perverted by the influence of various agencies may be intensified, producing fever, or reduced, producing coldness, narcotism, and collapse.

"IV. Under perverted zymosis attended with fever, the primary dangers incident to increment of heat, or fever, are the most formidable, and may be directly fatal from the physical changes — coagulation — induced in the blood and other colloidal structures.

"V. During perverted zymotic conditions, new diffusible or volatile products are evolved, which, acting on the brain and nervous centers, produce narcotism, aberrations, and deliriums.

"VI. The inference is sound that every delirium has its origin in the generation within the body and diffusion through the nervous centers of a foreign volatile or an easily diffusible fluid or solid product, which product acts specifically in inducing the mental perversion called delirium.

"VII. From the similarity of the symptoms of some well-known states of disease with the symptoms produced by synthesis from the diffusion of volatile and diffusible substances through the body, we can approach very often closely towards a definition of the agent causing some deliriums of disease. For example, the delirium of delirium tremens is almost certainly a modified form or derivative of ethylic alcohol. The delirium of small-pox and of typhoid fever is almost certainly a sulphuretted product in which sulphur may be playing vicariously and falsely a part like that played by oxygen. The narcotic delirium of catalepsy is probably due also to a sulphur compound, but one of a heavier type. The delirium of melancholia is due to a similar product like mer-

captan. The delirium of somnambulism is most likely due to a hydrocarbon amylic product like amylic. The delirium of hysteria is possible due to some other product of the same class as amylic. The delirium of scarlet-fever is due, most likely, to a product of the nitrite series, not very far removed from amylic nitrite.

"VIII. I think it based on the fairest possible inference that ordinary sleep is due to the formation in the body of a narcotizing compound generated by muscular exercise, which product accumulating in the nervous centers until it exerts its narcotic effects, passes away, and is eliminated upon repose, just as chloroform, methylene, or ether, or as the narcotic alkaloids, like morphine, pass away when they cease to be supplied to the nervous organism.

"IX. If this last-named suggestion, derived from experiment, be true, we shall in time, by further experiment, discover the natural producer of sleep, and govern, by our then more accurate knowledge, the whole art of anaesthesia and narcotic influence.

"X. The generation of the various products of perverted zymosis may occur directly in the peripheral system, that is, in the minute circulation during the animal combustion, or in the digestive canal, from whence, by absorption, they find their way into the circulation.

"XI. The products of perverted zymosis generated in the minute circulation being directly derived from the blood, lead to the cutaneous eruption, delirium, and other acute true pyrexias of contagious type, such as scarlet-fever.

"XII. The products generated in the alimentary canal being limited in regard to source, and acting only so long as they are being absorbed, lead to the more temporary eruptions and deliriums of acute non-contagious affections like urticaria."

## PRACTICAL LAWS RELATING TO INEBRIETY.

We quote the following from the *Union Signal*, and especially commend it to our Prohibition friends, as the nearest approach to the solution of the great problem they would solve by force:

More than half of Arkansas is under prohibition. The State has probably the most complete and satisfactory law that can be framed upon the subject of regulating the liquor traffic. Every two years, or at every election for State officers, the question is submitted anew to the qualified voters in each county in the State. As the voter casts his ballot for the State ticket, he at the same time votes "for license" or "against license." No previous petitions are necessary, as under the local option laws of many States. No special campaigns, engendering strife and bitterness, are conducted. But the voter, as he casts his ballot for the officers, also indicates whether he wishes liquor selling licensed or prohibited in the county for the next two years. It is a straightforward, simple provision for the expression of the will of the majority.

Whenever the majority of votes cast upon the question in any county is "against license" that ends the matter for two years. It is expressly declared unlawful for the county court in such a county to issue a liquor license until after the general state election. But when a county goes "for license" the way of the liquor seller is hedged about by stringent restrictions. The applicant for a license is required to pay \$400 as a county tax and \$300 as a State tax, and the license is only good until the 31st of December succeeding the issue. There is no loop-hole which permits the saloon-keeper to lap over beyond the end of the year. Besides the \$700 taxes and some small fees, he is required to give a bond, with two sureties, in the sum of \$2,000, that he "will pay all damages that may be occasioned by reason of liquor sold at his house of business." But this is not all. The liquor seller is bound under this bond of \$2,000 to "pay to

any person all such sums of money as may be lost at gaming in his saloon or in any room or building attached thereto under his control."

To make this peculiar feature of the law more binding, there is a section which says: "Any person aggrieved by the keeping of said saloon, or who may have lost any money or other valuable thing at gaming in said shop, may have action on said bond against the principal and securities thereof." And finally, as if all this was not drawing the lines closely enough on the liquor seller, there is a concluding section which says: "No debt shall be recoverable for ardent spirits sold at a drinking saloon or dramshop." In other words, a drink once "hung up" becomes only a debt of honor.

Besides this biennial submission of the question of prohibition in every county and the restrictions upon licensed saloons, Arkansas has what is called the three-mile law. Under this law something very like woman suffrage is recognized. The three-mile law enables the majority of adults residing within that distance of any school-house, academy, college, university, or other institution of learning, or any church-house, to enforce prohibition within the limit. All that is necessary for the majority to do is to sign a petition against the selling of liquor within that distance of the school or church. Women, as well as men, are competent to sign and must be counted. The County Court, on being satisfied that the majority of the adult inhabitants within the limit have signed the paper, must issue an order in accordance with the petition, and for two years following the order no liquor can be sold or given away within three miles of that particular school or church. Any person who violates the three-mile law can be convicted before a justice of the peace, and the fine for each violation is from \$25 to \$100.

Liquor sellers have tested these various provisions of the Arkansas law time and again, even going to the United States Supreme Court with the question of constitutionality, but the provisions stick every time. It is said that the

temperance people, in bringing the liquor laws of Arkansas to their present state of perfection, have had the benefit of the legal knowledge of Judge Caldwell. The judge is not only an able man in his profession, but he is a strong temperance man. It has been the custom to submit to him proposed liquor legislation, and let him trim and remodel the bills before turning them into laws. In this way Arkansas has come into possession of statutes which have proven very effective in regulating the liquor traffic. The temperance people of the state believe they have the best working temperance code in existence.

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OUR BOOK. BY REV. W. FROTHINGHAM, and C. TOWER,  
Esq. G. W. Dillingham, Publisher, New York City,  
1889.

This work contains a choice collection of the most interesting sketches of a veteran newspaper correspondent. The second author seems to have been the financial creator of the work. Rev. Mr. Frothingham, the author, has been noted for over a quarter of a century as one of the most suggestive and graphic writers of New York matters. His inquiries into the personalities of historical events and leading men have attracted great attention and been widely discussed by the literary world. This book goes over these neglected fields of history in the most charming way, giving the reader new views and new conceptions of leading men and their influence on the world. The title of the work, unfortunately, gives no intimation of its real value, or the fact that it will live when most of its cotemporaries are long forgotten. Every reader will thank the author most heartily for this contribution to the living thought of the age, thought that makes one better, and leaves a pleasing impression ever afterwards. To the medical reader the author's sketches of the famous poets, literary men, and leading benefactors of the world, are invaluable as graphic pictures of the personalities and influences of these men. Combined with a very

graceful style, there is a hurried bustling movement of thought that makes it charming for all readers. This work will well repay a close reading.

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ANCIENT CITIES: FROM THE DAWN TO THE  
DAYLIGHT. BY THE REV. DR. W. B. WRIGHT.  
Houghton, Mifflin & Co., Publishers, Boston, Mass.,  
1889

This volume of nearly three hundred pages contains fifteen lectures or essays on the ancient cities of the world. This work will be of special value to our readers for the vast amount of information grouped in a most pleasing, suggestive way about each topic. To busy men who have no time for detailed historical reading such works have an inestimable value. They bring outline pictures of the leading facts in the history of these great cities, now nearly all in ruins, and the lessons from their rise and fall are always fresh and new. The reader will find this one of those rare books that are laid down with regrets that the author had not gone on further. The style is good and intensely interesting, and the work shows the marks of the well-known publishers, rare taste in book-making. This work is sent postpaid for \$1.25 by the publishers.

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SUGGESTIVE THERAPEUTICS: A TREATISE ON  
THE NATURE AND USES OF HYPNOTISM.  
BY H. BERNHEIM, M.D. G. P. Putman's Son,  
Publishers, New York City, 1879.

This work has been before the public for over a year, and is practically the leading text-book on this subject. There is no work published which gives the reader a clearer idea of hypnotism and its practical uses in medicine. To the specialists in our field this book has a peculiar interest. It has been urged that hypnotism was of great value in the

treatment of inebriety ; that this is true, is clear from these pages. The possibilities of treating the mind as easily as the body is controlled, and the practical uses to which hypnotism may be applied, is a constant surprise to the reader. There are facts in this work which every medical reader should understand if he would be successful. Some of the cases mentioned are striking illustrations of the unreliability of human testimony as witnesses of facts. The mystery which surrounds this subject gives it a peculiar fascination which this work increases, and the reader realizes that he has come to a new land of science, where the possibilities of the influence of mind over matter exceed the wildest dream of the imagination. This work is a treasure to the physician of mental diseases. It is issued in fine form, large type, and with a full table of contents. Send to publisher for a copy.

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The *Medical Mirror* has arrived direct from St. Louis, Mo., loaded with choice freight, a large proportion of which are necessities for the profession. Some spirit commodities and a few luxuries fill up the vacant spaces, but, on the whole, this craft is finely freighted. The Captain, I. N. Love, M.D., deserves notice. He may be fairly called a nineteenth century skipper with some twentieth century notions. In the language of seamen he has knocked round the world a good deal, and made a great many friends, and managed several medical ships with success. From appearances it looks as if the *Medical Mirror* and its veteran skipper, Capt. Love, was going to monopolize the rich freights that go to the hard-working physician monthly. *A bon voyage* to the cheery captain and his good ship.

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The *Physician's Visiting List*, by P. Blakiston, Son & Co., of Philadelphia, Pa., for 1890, is a marked improvement on the former excellent editions, and is one of the best pocket books for accounts in print.

HYPNOTISM: ITS HISTORY AND PRESENT DEVELOPMENT. BY DR. BJORNSTRÖM. Humboldt Publishing Co., New York City.

This little volume of one hundred and fifty pages has reached the fourth edition, and has been most favorably reviewed by the medical press. As a handy volume it is exceedingly practical, and will well repay reading.

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CHRISTIANITY AND AGNOSTICISM, published by the same firm, is a series of discussions by Prof. Huxley, Dr. Wace, and other prominent leaders of thought, that is very stimulating to all scholars and thinkers. We again call attention to the Humboldt library on psychology noted in our advertising pages as being the cheapest and best series of works published.

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*The New England Magazine*, published at Boston, Mass., is an illustrated historical and literary monthly of very attractive popular form. Rev. Dr. Hale is leading editor. This is peculiarly New England in tone, culture, and spirit, and its special object is to popularize American History, and encourage study of historical subjects. To all medical men, hospitals, and libraries this monthly is of great value. It is really one of the best monthlies that is published for students and scholars.

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*The Popular Science Monthly*, D. Appleton & Co., New York City, is the great American science monthly; that is as much a necessity as the daily paper for physicians and scholars. The January and February numbers contain some excellent articles of special interest to physicians. This is one of the few monthlies that is never dropped by the subscriber, for the reason that it becomes a necessity that cannot be given up.



The *Homiletic Review* begins the new year with a rich table of contents, including papers from many of the ablest pulpit writers in America. This is a most excellent journal, and one that should be taken by every scholar in the land. Funk & Wagnals, of New York city, are the publishers.

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*The Scientific American* should have a place in every dwelling, shop, office, school, or library. Workmen, foremen, engineers, superintendents, directors, presidents, officials, merchants, farmers, teachers, lawyers, physicians, clergymen, — people in every walk and profession in life — will derive satisfaction and benefit from a regular reading of *The Scientific American*.

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DR. RIDGE of London recently addressed circulars to two hundred and seventy-nine work-house medical officers, asking, "Under what circumstances are alcoholic liquors allowed to the inmates of the work-houses under your control?" Two hundred and forty-four answers were received, in which it appears that seventy-five per cent. gave alcohol only to sick persons, eight per cent. to the aged and infirm, twelve per cent. to the aged for extra work, and five per cent. did not get any. In relation to the health of paupers, seventy-three report no effect from the use of spirits. Nineteen assert that life is prolonged, and in twenty-nine cases it was shortened. It is evident that a great difference of opinion prevails, and the use of spirits is certainly falling into disuse.

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## Editorial.

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1890.

The first number of the *JOURNAL OF INEBRIETY* appeared in December, 1876. Its special object was to gather and formulate the literature on this subject, and lay the foundation for a new field of scientific research. The American Association for the Study and Cure of Inebriety had been established six years, and its five annual reports of proceedings had attracted but little notice except contemptuous silent opposition. The few asylums then in existence were uncertain and empirical in their plans and methods, and the few earnest and far-seeing managers were struggling against almost insurmountable obstacles, opposed by public opinion without legal support, and the centers of doubt and suspicion. The very first article in the *JOURNAL* was a review of the asylum movement and the evidence of the disease of inebriety.

From that time to this the question of disease has been presented over and over again from many different points of view, until it would seem to have been established beyond all question. Yet every few months some specialists complain that the *JOURNAL* has not settled the question of disease, and wants to open the controversy as to where inebriety is a vice and where it is a disease. Other specialists complain that the *JOURNAL* fails to show the pathology of inebriety, and that all the discussions and papers in its pages lack scientific accuracy, and are unsupported statements of this or that phase of the subject. For these thirteen years the *JOURNAL* has been presenting the facts of the disease of inebriety almost exclusively; for, until this could be fully established, here would be no accuracy in the attempt to mark out its pathology. Notwithstanding the sneers and doubts, we have

abundant evidence that the JOURNAL has literally settled the questions of disease and the curability of inebriety. Although the ætiology is not fully established, and its symptomology is even yet disputed, yet the fact of disease is practically assured beyond all doubt. Following along this line of clinical research, the JOURNAL has taken up the *medico-legal* relation of inebriety to crime and its questions of responsibility, opening up a field of startling interest.

The study of inebriety scientifically is yet in its infancy; it is not possible to attain scientific accuracy in all of the conclusions reached at present; the data on which they are founded are not wide enough, or based on sufficient statistical studies. Beyond the fact that inebriety is a disease, and curable, there stretch vast realms of research that are scarcely occupied. The JOURNAL was started in the very twilight of the subject; and although the dawn is rapidly approaching, the full day has not yet come. We can see the vast ranges of this subject emerging from the darkness of superstition of the past, and in every direction appear possibilities that promise the most practical results in the near future. For the thirteen years past the JOURNAL has been simply clearing the ground and preparing the way for more accurate and thorough scientific work. Every year brings with it a larger array of facts, supporting the principles we have maintained, and more thorough endorsement from the world of science. The year we have entered upon is white with the coming harvest, and the call for accurate laborers comes up on every side.

The JOURNAL wants accurate studies of cases, — studies made in the homes of inebriates, studies of the varied forces and influences which make up the history of these cases; facts first, then generalizations and conclusions from them. Criticism is often stimulating, but not generally profitable. Assistance to make the JOURNAL more scientific will be welcome always; this is what we need, and this will make the new year prominent in the struggle to grasp the new truths and new facts of this realm.

## SKETCH OF THE LATE DR. TURNER.

In this number we conclude a brief sketch of Dr. Turner's life. The object has been to give an outline view of the history of the great leader of the inebriate asylum movement. In the future a more accurate study of this remarkable man will be made from the ample materials which he left. At present we can only note the fact that a man has died in body who will live in a far wider sphere, and whose real life has just begun. Dr. Turner concealed, in the garb of the human, a heroic spirit and a deathless ambition that cannot die, but will go on as long as the inebriate needs the physical aid and help of scientific measures in asylums. All censure and condemnation has passed away, and Dr. Turner and his work will now be seen in their true light. We can now realize the spirit and influence of his ceaseless journeyings and perils by night and day, of the mockings and scourgings, of the weary watchings and fastings, of the persecution and misrepresentation which he endured, having faith in that which is to come. All these he esteemed as nothing, compared with the satisfaction of opening a new field for the cure and prevention of inebriety.

## SALOONS AND ILLITERACY.

From the internal revenue report of 1887 it appears that a license was issued for the retail selling of spirits for every 329 people in the country. Of fifteen States showing more than an average number of illiterates, that ratio was only exceeded in the State of Louisiana, while the lowest average in the country was to be found in Mississippi, which, with  $49\frac{5}{10}$  per cent. of its inhabitants returned in 1880 as illiterate, supported but one saloon for every 1,695 persons. Even the prohibition States of Maine and Kansas secured licenses for the sale of intoxicants at retail to an extent only equaled by four of the fifteen super-illiterate States. The proportion of

saloons to population throughout the super-illiterate States is one for every 700 inhabitants, while of the other States California heads the list with one to every 99 persons. New Jersey comes next with one to every 171, followed by New York with one to every 179.

The following figures are very significant. In fifteen of the most illiterate States, where the illiteracy was over forty per cent., there was one saloon to every 700. In the States west of the Ohio, where illiteracy was only seven per cent., one saloon was found to 308 persons. In the Northern States east of Ohio, where five per cent. were illiterate, only one saloon was found to every 227 persons. The unmistakable inference is that ignorance and saloons are not so closely associated as has been supposed. — *Dr. Reeve.*

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#### HOW FAR IS INEBRIETY A SOURCE OF CRIME?

Judge Gildersleeve of New York City, in a letter to the *Express*, writes as follows:

“Contrary to the doctrines so fiercely preached by the Prohibition orators, the relationship between crime and drunkenness is very vague and indefinite. There is no necessary connection between the two. Drunkards have neither the energy nor brain power to violate the law to any serious extent, and, on the other hand, criminals of any ability are as temperate as men in the honest walks of life. It may be questioned if the percentage of drunkenness, delirium tremens, and alcoholism is any greater among professional law-breakers than in society at large.”

An examination of the records of police courts, where a large per cent. of all the cases under arrest are inebriates, fully sustains this statement. The most frequent charge is assault and petty larceny. Forgery, burglary, and crimes that require coolness and mental courage are very rare.

The oft-repeated statement that inebriates have taken spirits for the purpose of giving them coolness and energy

for the commission of crime, is flatly contradicted by the facts. Crime committed under the influence of spirits is never characterized by coolness and premeditation, and is never executed with caution or apparent consciousness of the surroundings and results. Alcohol is so markedly a paralyzant and narcotic that the entire organism is lowered and more or less incapacitated to act on any rational plane of thought. Frenzied murders that are impulsive and unreasoning occur among inebriates, and other crimes that are accidental, and the result of circumstances that were unforeseen and uncontrollable. Hence the inference that inebriety is the cause of only petty criminality and violations of the peace and good order of society, and not a prominent cause of general crime in the community, is fully sustained by all the facts.

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An influential business man in a state of alcoholic frenzy shoots his partner, and puts fire to the building, and boasts of the crime at the police station. A lawyer, formerly prominent and reputable but wrecked by alcohol, kills his wife in a similar frenzy of alcohol. Both of these cases happened in an eastern city, and at once a spasm of indignation went up from the pulpit and press, calling for the speedy execution of these monsters of depravity. The crimes and the criminals were clearly maniacal and the acts of madmen, and yet clergymen, lawyers, and physicians joined in the cry of crucify them.

The stupid ignorance that failed to see that false public sentiment was responsible for these tragedies was startling in this age of advance. This stupid sentiment permits men to use spirits freely and without restriction until they become insane, and then punishes them as sane and responsible. This same stupid sentiment insists on *free will* and freedom of act, no matter what the consequences are; insists that inebriety is a vice and free moral act, and the victim is ever held always responsible for it. Such a dogma is more fatal than the saloon, because all sense of danger is concealed

until the victim is beyond help. A correct public sentiment would have interferred and stopped both of these men long before the tragedies occurred. They would have been treated as dangerous and confined if necessary. No man has a right to destroy himself and endanger the interests of others. These poor men will die as imbeciles and maniacs, perishing as victims of the false dogma of the dark ages.

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ONE of the tables in the last *Census Report* shows that where the extremes of poverty and wealth prevail, as in the Eastern States, there is found a maximum of moral and mental derangement as exhibited in insanity, crime, and vice. Where wealth is more evenly distributed, as in the Western States, there are noted less insanity and crime, but almost as high a ratio of saloons as in the East. In the Southern States, where a low ratio of wealth prevails, and where the mental and moral forces of development are more nearly in adjustment with the material environment, the average of crime and vice is relatively low.

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ACCORDING to the best authorities, insanity is steadily increasing. In Massachusetts, this increase is about three hundred a year; in New York, it is more. The temperance agitators believe that alcohol is the most active cause of this, but a careful study of all the causes show it to be only one of many factors, and in many respects of secondary importance. No single cause or group of known causes can explain this increase of insanity; a longer and more exhaustive study of statistics?

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## Clinical Notes and Comments.

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### TREATMENT OF DIPSOMANIA BY HYPNOTISM.

Dr. Hayes, Secretary of the London Hypnotic Society, makes the following statements of the method of treatment by hypnosis:

“The patient is thrown into hypnosis or mesmeric sleep by a vigorous operator, and while in that condition is told with emphasis that on waking he will not only have no desire to drink, but will entertain an insurmountable repugnance to it. When the period of sleep is terminated, the suggested idea is found to be more or less dominant in the patient’s mind, but he has no recollection of the fact that the suggestion was made to him. The process is repeated on several occasions, the number of which varies with the subject from six to a dozen, and eventually the distaste for stimulants becomes permanent and inveterate. A very short time—rarely exceeding half an hour—is required for each visit to the hypnotist, and the treatment may take place twice or thrice a week and oftener according to the circumstances. The patient may afterwards take up and try to swallow a glass of alcoholic liquor, but he positively cannot do it. Not every dipsomaniac can be made the subject of hypnosis.

“But a very few visits of the hypnotist will determine whether the process will result in cure. There is this advantage, it is at all events a preliminary experiment, which can do no harm, and which may make the resort to more troublesome means quite unnecessary. It is impossible to say whether a man will be a good subject or a good operator; but the chances are that every human being can to some extent be both. Clearly, until you make the experiment you will never know to what extent either faculty may be present.



With the post-hypnotic treatment it is practically, though not always, necessary that the subject should be sufficiently susceptible to be thrown into the deepest stages of hypnosis. That may not be inducible at first, but it may very probably be induced with perseverance. Medical men say that it would be dangerous for dipsomaniacs to drop alcohol all at once.

"It may be that, in cases where the continuous presence of alcohol in the system seems to be necessary to the patient's physical comfort, the effect of the alcohol is a reflex one on the nervous system. Therefore, if the nervous system can be directly or indirectly acted upon in a totally different direction, the apparent physical necessity for alcohol will be found to be non-existent. We have no other explanation at present, but this we do know, that post-hypnotic treatment is the only means by which patients develop a pronounced hostility towards drink. In all other methods the patient is still craving for and struggling after the drink which other people are more or less successfully depriving him of. Under the post-hypnotic treatment patients are told with great vigor that they cannot stomach drink, and when they wake it is positively revolting to them. With each succeeding repetition of the process, the impression is deepened and lengthened, until it becomes, as far as we can judge, permanent. I have not met with a case of dipsomania in which the patient has afterwards relapsed, and there is none to my knowledge. To give you an example of the cure, there was recently over here an American gentleman of considerable fortune, who simply drank his money away till he got down to his last five-pound note. He went back to America, practically, to begin life over again, perfectly free from any craving for drink, and positively unable to take it.

"We have had a good deal of correspondence on this subject. Many of the letters are of a distressing character, as showing the prevalence of the habit in its most disastrous form in all grades of society. Of course, I have to look on the bulk of the correspondence as confidential, but it has

been remarkable to find how many people have no apparent alternative. Either the patients are unwilling or unable to leave home to be put under restraint, or their friends simply don't know what to do with them, and in many cases cannot afford to have them watched. Most of the letters are from husbands, wives, and personal friends. I have had no letters from dipsomaniacs themselves. I have scarcely ever heard of a case in which a patient who had arrived at the degree of severity and permanence which could be called dipsomania wanted to be cured. With dipsomaniacs the difficulty is, that the patient will not tolerate being cured, and will not assist the cure if he can possibly help it. Practically, to effect the cure it is necessary that the stage of hypnosis should reach a depth to preclude the patient's recollection on waking that anything has occurred during sleep.

"Take the case of a man who is given to drink, but can scarcely be called a dipsomaniac. Would he be amenable to post-hypnotic suggestion if he knew that he was about to submit himself to it? I do not see why, if such a man came and asked to be cured, the treatment should not be successful. The fact that he had been anxious to be treated would not make any difference. It would only be a logical deduction in his mind after the treatment. It would not be a recollection of the suggestion and the circumstances under which it was employed. What is essential to success is, that the state of hypnotism should be sufficiently deep, and we can only test whether the stage has been sufficiently deep by ascertaining whether a patient has recollection or not of what occurred during sleep. Recollection is, then, not a condition, but a test of success. Clearly, if a man's mental attitude leaves him in any consciousness of the evils of drinking habits or any grasp of the position which his own will occupies towards the question, then you have something hopeful to work upon." — *Temperance Record*.

Dr. Holbrook of New York, in an article in the *Temperance Advocate*, writes as follows on this subject:

The treatment of inebriety is a subject of the utmost im-

portance and beset with many difficulties. The inebriate is a person who has lost control of himself to a certain extent. His will-power has been weakened. He is like a locomotive on a down grade, with a poor brake or none at all. It was suggested long ago that hypnotism might be used as a means of curing this disease, so difficult by other means. We know that when one person hypnotizes another, gains control of his mind, he can by simple command induce him to do many very ridiculous things. It is also equally true he can be induced to do generous and noble deeds. The hypnotized person is completely in the control of the hypnotizer, and not only does as he is told, but cannot do what he is forbidden to do. If the hypnotized state be frequently repeated for some time, it is believed the patient can be permanently cured. At the International Temperance Congress held in Zurich some time ago this question came up. I quote from the summary of Mr. Thoman's report :

Dr. Ladame of Geneva, and Professor Forel advocated hypnotic suggestion as a means of curing inebriates. The former gentleman adverted to the uncertainty which, according to all reports, attended the ordinary treatment of inebriates in asylums, and stated that, while in entire sympathy with the efforts of temperance societies in this respect, his experience as a practicing physician did not permit him to acknowledge the efficacy of total abstinence as a remedy, save when it is accompanied by the perpetual confinement of the patient. In his practice he had, of course, become acquainted only with the failures of the treatment under discussion; *i. e.*, with relapsers, who, after a more or less protracted stay in an asylum, called on him for aid. His own observation was confirmed, however, by the reports of Dr. Norman Kerr and Rev. Hirsch, both of whom placed the proportion of permanent cures at a very low figure. A mere resolution or pledge not to drink cannot eradicate the craving for stimulants, and hence, in the end, it is merely a question of superior power as between the desire to drink and the determination to abstain. By means of the hypnotic suggestion the power of

the pledge in its influence upon the person taking it is so remarkably enhanced that it readily subordinates the craving for drink.

Professor Dr. Forel confirmed Dr. Ladame's theory by citing experiments of his own, and believes that "hypnotism is destined to play an important part in the future of inebriate asylums."

My own experience in this method is only slight, as I have tried it only on one case of inebriety. The patient was hypnotized daily for one week, and then he passed out of treatment, but he refrained from drink between five and six months, when the suggestion wore off, and there was a relapse. I was not situated so as to renew the treatment, so I do not know what results would have followed. The patient told me these five months were the happiest of his life.

#### DRINK REMEDIES.

Dr. KAINE has a graphic paper in the *Pacific Record of Medicine and Surgery*, of which this is an extract:

"There is a traditional notion that the blood has accumulated an assortment of poisons which must be washed away or neutralized by herb bitters or tonics. The essential element of most of these is alcohol, which they contain in quantities as large as are found in ordinary alcoholic beverages. As 'non-alcoholic blood purifiers' they are a delusion, and as 'substitutes for whisky' they are a snare. The first examination of forty-six samples of tonics, blood purifiers, and substitutes for whisky, gave this result:

Whole number analyzed,	46
Less than 10 per cent. alcohol,	7
Between 10 and 20 per cent. alcohol,	16
Between 20 and 30 per cent. alcohol,	17
Between 30 and 40 per cent. alcohol,	3
Over 40 per cent. alcohol,	4

"To understand just what this means, a glance at the

percentage of alcohol in ordinary beverages, taken for hilarious purposes, is necessary :

	Alcohol.
Bohemian beer, . . . . .	4 per cent.
Ordinary beers, . . . . .	4-6 "
Claret, . . . . .	10-17 "
Champagne, . . . . .	12-14 "
Sherry, . . . . .	18-19 "
Port, . . . . .	19-25 "
Holland gin, . . . . .	45-49 "
Brandy and whisky, . . . . .	45-56 "

"A certain amount of alcohol is necessary to preserve some of the ingredients of the tonics, but if 4 per cent. of alcohol will preserve the elements of beer, 40 per cent. is hardly demanded to preserve the ingredients of any other mixture. The latest reports of the analysts show, for example, that in the weakest specimen of a much-advertised 'cure for inebriety,' there is 35 per cent. of alcohol and a quarter of a grain of morphia to every ounce, and the victim is told to exceed the prescribed dose when an increase is needed. It is a most obstinate toper who cannot find in this mixture of bad whisky and opium a sufficient substitute for the watered whisky of the doggerly. 'Not a rum drink' is the enticing label of another popular tonic, yet it contains three times as much alcohol as beer, twice as much as Edinburgh ale, and fully as much as the Spanish and Italian wines. The maximum dose of this anti-rum drink is equal to a pint bottle of claret a day. Dr. Farquharson, a high authority, fixes the maximum amount of alcohol that the regular drinker may take at about two ounces a day. The maximum dose of a 'German' tonic reaches nearly this, and is equal to three pretty stiff drinks of ordinary whisky a day. A popular tonic that claims to be 'a purely vegetable extract' contains 41.6 per cent. of the extract of corn. It is nearly as strong as the ordinary gin, whisky, or brandy, and yet it is advertised as 'a stimulus to the body without intoxication,' and 'inebriates struggling to reform' are told that they 'will find its tonic and sustaining influence on the nervous system a

great help to their efforts.' In other words, a man whose appetite craves whisky may allay the craving by taking whisky under the notion that it is medicine. When we come to 'tonic bitters,' the quantity of alcohol is found to be ample to make incarnadine the largest town. Here hearty conviviality and hilarity and hiccough are served up by the tablespoonful. The maximum dose of one is as much as the most hardened 'rounder' would care to take, with a decent respect for the condition of his head next morning. Another specimen contains 47.5 per cent. of alcohol. Now, that is the sort of tonic the maximum dose of which is likely to land the victim in the police station. There is a 'wheat' bitters tonic the analysis of which leads to visions of tangled legs, blackened eyes, police court, and the zoological features of delirium tremens."

#### CONTROL AND CURE OF INEBRIATES.

In a paper on this subject in the *Provincial Medical Journal*, Dr. A. J. H. Crespi says: "We must have a simple, quick, and easy method of dealing with these deplorable cases; and what could be better than the following? Let any person who stands in the relation of parent or child, brother or sister, or guardian or trustee to an inebriate—whether the latter is of full age or not—have the power to apply at the nearest police office for a form, in which name, address, occupation, and so on of applicant and of the inebriate, should in due course be set forth. A summons should then be issued in accordance with these particulars, and be served on the inebriate. When the case came on for hearing, the magistrate should have absolute power to ask for and obtain information as to the defendant's history, habits, and circumstances. Of course the application should be supported by proper witnesses and reliable evidence. The magistrates would soon eliminate the cases in which malice or fraud was the instigating motive; moreover, the defendant would have the right to make his defence, and, if pos-

sible, to clear himself. But, unless I am totally in error, I believe that in nineteen cases in twenty the inebriate would express contrition, seem very much frightened, and promise to amend; very rarely indeed would he plead that he was the victim of a conspiracy. Then, according to the circumstances of the case, the defendant should be ordered to be detained from one to six months to begin with; when indigent, the expenses should be defrayed out of the rates; when better off, he could have greater privileges, and be charged a moderate, a very moderate sum. As for places of detention, what could be easier than to provide special departments in jails or lunatic asylums? At first such special departments might only be added to a few prisons or asylums; after a time, if necessary, to more, and finally, special institutions could be built and confined to this class. What I want to make clear is that I am not proposing to treat these persons as criminals or lunatics, but as inebriates detained primarily for the protection and relief of their friends; while in the institution they should have books, papers, and letters, and see their friends, but they should be unable to leave till their sentence had expired. I am certain that were such institutions opened they would soon be crowded, and thousands of families would be relieved from a load of misery."

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#### PRACTICAL STUDIES OF ALCOHOL.

The Bands of Hope (temperance societies) of Newcastle, England, have set the example that all the temperance organizations of the world might follow with profit. They have organized and commenced a course of twenty-eight lectures on *Temperance Physiology*, to be given by the celebrated Dr. Rutherford at the School of Science and Art in that place. The following extract from the first lecture gives the reader an idea of this great advance in practical temperance work:

They believed that the physiology of temperance was a science; that physiology distinctly taught that alcohol should

not be used as a beverage. They hoped to make that point clear. The things which would help them to master it and see whether it was a true position or not were first of all animal physiology, which was the science of bodily function. It taught what were the functions of the various tissues and of the different organs of the human body. Then a little chemistry would be of use to them. Then there was biology, which was the science of living things. The human body, as they had to consider it in its relation to alcohol, was a living organism, and the bearing of foods and all poisons upon the tissues of the body was in itself a very interesting study, and would help very much in mastering some of the questions that had to come before them. The human body was composed of various chemical elements, and chemistry would help them in the study of physiology. The human body really originated in a fertilized cell, and it would be possible for them to have some living protoplasm, and to show the action of alcohol upon that living protoplasm. Protoplasm was the physical basis of life. It was that out of which all the tissues of the body were built up, and it was characterized by life. They were not able very fully or accurately to define what life is, and he would not have them make the attempt. But he would have them to look closely at its phenomena. They hoped in the course of those lectures to show some of those living things, the white corpuscles of the blood. It would be possible to put those white corpuscles under the microscope, and to show the action of alcohol upon them. It was very difficult, indeed, to define disease. They did not get the most accurate ideas of disease from the definition, but from seeing what was the action of certain poisons — of certain elements — upon living things, upon those corpuscles. Dr. Rutherford then gave a sketch of what would be taught in those lectures — the action of alcohol upon the blood, the heart, and respiratory system, the urinary system, the skin, the liver, the alimentary system, the muscular system, the nervous system, the senses, etc. In conclusion, he said the reason the blood corpuscles



died under influence of alcohol was perhaps because a certain amount of water was necessary to secure the life of protoplasm. There was no question that protoplasm could not live — the physical basis of life could not live — without a certain amount of water. It was supposed to be the immense quantity of water running out of the human body that determined death in cholera, and probably a great many other diseases — at any rate, the close of those diseases — were marked by a lessening of the quantity of fluid in the body. Whether that were so or not, it was perfectly clear from experiments that they could make and show to the class that alcohol seriously affected those tissues. Probably the reason was, that it absorbed rapidly a quantity of water, that there was no time to get that water replaced either for the protoplasm or for the organs, and that death followed.

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THE following extract is from Dr. Hayes's address before the Worcestershire Branch of British Medical Association: "Hereditary tendencies to disease, and crime, and alcoholism should be repressed as far as possible. The strict fulfillment of the Inebriates Act would do something to lessen drunkenness, idiocy, insanity, epilepsy, and other neuroses in the next generation. So far as we can, we should discourage the marriage of persons with histories of cancer, consumption, syphilis, and alcoholism. Convicts should be detained in penal servitude during the full terms of their sentences in order that they might have fewer opportunities of transmitting criminal propensities; the cost of this to the taxpayers would be minimized by the adoption of the beneficent industrial system in successful operation in the Indian and Burmese convict service. One of the pressing wants of the community in the prevention of disease is compulsory power to place inebriates of all classes in homes provided for their reception and superintended by physicians. These homes for the middle and lower classes, at least, should be industrial. The Inebriates Act lately passed is a slight improvement on

the Habitual Drunkards Act, but, while thankful for small mercies, we should regard it as only an installment towards wiser legislation, because it does not go far enough. Some of our Colonies and the United States Government are far ahead of us in regard to this legislation. Power is wanted here for the isolation of inebriates for twelve months as a minimum."

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#### ENCOURAGING SCIENCE.

The Vermont Microscopical Association has just announced that a prize of \$250, given by the Wells & Richardson Co., the well-known chemists, will be paid to the first discoverer of a new disease germ. The wonderful discovery by Prof. Koch of the cholera germ, as the cause of cholera, stimulated great research throughout the world, and it is believed this liberal prize, offered by a house of such standing, will greatly assist in the detection of micro-organisms that are the direct cause of disease and death. All who are interested in the subject and the conditions of this prize, should write to C. Smith Boynton, M.D., Secretary of the Association, Burlington, Vt.

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#### TO MEDICAL MICROSCOPISTS.

In behalf of "the American Association for the Study and Cure of Inebriety," the sum of one hundred dollars is offered by Dr. L. D. Mason, vice-president of the society, for the best original essay on "The Pathological Lesions of Chronic Alcoholism Capable of Microscopic Demonstration."

The essay is to be accompanied by carefully prepared microscopic slides, which are to demonstrate clearly and satisfactorily the pathological conditions which the essay considers. Conclusions resulting from experiments on animals will be admissible. Accurate drawings or micro-photographs of the slides are desired. The essay, microscopic slides, drawings, or micro-photographs, are to be marked

with a private motto or legend, and sent to the chairman of the committee on or before October 1, 1890. The object of the essay will be to demonstrate: *First*, Are there pathological lesions due to chronic alcoholism? *Secondly*, Are these lesions peculiar or not to chronic alcoholism? The microscopic specimens should be accompanied by an authentic alcoholic history, and other complications, as syphilis, should be excluded. The successful author will be promptly notified of his success, and asked to read and demonstrate his essay personally or by proxy, at a regular or special meeting of the "Medical Microscopical Society," of Brooklyn. The essay will then be published in the ensuing number of THE JOURNAL OF INEBRIETY (T. D. Crothers, Hartford, Conn.), as the prize essay, and then returned to the author for further publication or such use as he may desire. The following gentlemen have consented to act as a committee:

*Chairman* — W. H. BATES, M.D., F.R.M.S., London, Eng.,  
 (President Medical Microscopical Society, Brooklyn.)  
 175 Remsen Street, Brooklyn, N. Y.  
 JOHN E. WEEKS, M.D.,  
 43 West 18th Street, New York.  
 RICHMOND LENNOX, M.D.,  
 164 Montague Street, Brooklyn, N. Y.

#### BRITISH JUDICIAL DICTA ON DRINK.

The Edinburgh *Journal of Jurisprudence* says: "Almost every crime has its origin more or less in drinking." — *Judge Gurney*.

"Ninety-nine cases out of every hundred are caused by drink." — *Judge Erskine*.

"If it were not for drink you (jury) and I would have nothing to do." — *Judge Pattison*.

"If all men could be persuaded from the use of intoxicating drinks, the office of Judge would be a sinecure." — *Judge Alderson*.

"Three-fourths of the cases of crime have their origin in public houses and beer shops." — *Judge Wightman.*

"Intemperance has destroyed large numbers of people, and will, at its present rate of increase, in time destroy the country itself." — *Justice Grove.*

"I can keep no terms with a vice that fills our jails and destroys the comfort of homes and the peace of families, and debases and brutalizes the people of these islands." — *Chief Justice Coleridge.*

To which we might add the recent decision of Lord Young at the Glasgow Circuit, in the case of Eliza Short, (whose drunkenness and neglect had resulted in the death of her child,) refusing to hold her criminally responsible, because there could not be inferred intention to commit the crime, and refusing to hold her condition, though caused by her own act, sufficient to make her criminally responsible for the death of the child. — *Clark Bell in Medico-Legal Journal.*

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MEDICAL THOUGHTS OF SHAKESPEARE. BY  
B. RUSH FIELD, M.D., member of the Shakespeare  
Society.

This is one of those rare little works that appreciative lovers of Shakespeare will prize very highly. It is a grouping of all the leading thoughts and sentiments of Shakespeare on the physician, the practice of medicine, surgery, obstetrics, physiology, anatomy, and pharmacy, together with similar thoughts from many of the old poets. It deserves a place in the library of every scholar, and the profession are under a great debt of gratitude to Dr. Field for his study of this great bard. Andrews & Clifton are the publishers, at Easton, Pa. Send for a copy.

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The special work of treating rheumatic and neurasthenic cases by the Turkish and Russian baths at Dr. Shepard's

sanitarium in Brooklyn, New York, is meeting with great success. Some most remarkable results have followed. In the near future inebriety will be treated largely by these means.

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Whatever may be the physical effect of opium-smoking on the white race it has certainly been demonstrated by Dr. Ayres, the colonial surgeon of Hongkong, that a Chinese may be a confirmed smoker of the drug and yet enjoy good health. In his latest medical report he sums up his observations made upon a large number of prisoners in the Hongkong jail. He found that the opium-smokers enjoyed immunity from cholera, although other prisoners succumbed to the disease. His conclusion is, that the opium-smoker seldom has other vices, and that if he indulges in moderation he may be industrious and healthy, although he smokes opium every day. The opinion of Dr. Ayres is worthy of respect, because he has had the best means of studying the subject; but those who have watched the influence of opium on white men know that moderation in its use is the exception, and that the drug is responsible for nearly all our petty crime. Strong drink is less fatal to the physical and mental stamina of white men than opium. The Oriental drug enfeebles the will, corrupts the character, and saps the strength. The American "fiend" does not confine himself to opium, but usually indulges in other vices, so that he is about the most worthless and debased creature the imagination can conceive of. — *Pacific Record*.

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Criminal inebriates are always the most degenerate types of humanity. They are always more or less paralyzed, the entire system is impoverished, and organic and functional degenerations increase steadily. They are abnormal types that cannot be judged as others. The higher mental processes are broken down. Punishment has no influence. A thousand years ago Galen urged that such cases were so degenerate

that they should be destroyed, not in revenge, but as a measure of public good ; destroyed as incurables, as burdens on the world. The most advanced scientific teaching of to-day show that these cases can be housed and made to support themselves under the care of the State. The instincts of humanity are outraged every day by the inhuman punishment of these poor victims as sane and conscious, and able to restrain themselves at will. This will be the great coming field of philanthropic work in the next century.

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Quackery and the endeavor to apply as the cause or cure of inebriety nebulous theories, fine spun sophistries, and other vain speculations, which ought to be relegated to the wards of a lunatic asylum, have had their influence upon those whose convictions were weak, and thrown ridicule upon the whole subject. But while a lion is shaking the forest with his roars, a monkey may be chattering in a tree-top. The fact remains unaltered. Inebriety is a disease, and its treatment should be based on common sense.

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Volume twenty-first of the tenth census of the United States, devoted to the defective dependent and delinquent classes, is received from Dr. Billings of Washington, D. C. This is a most suggestive grouping of statistics of great value to all students of social science.

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The study of inebriety and its relation to the temperance movement is the title of an address by Dr. Norman Kerr delivered before the Birmingham temperance congress in England, which has been crowded out of this issue, but will appear in our next number.

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An inebriate asylum has been organized in Sidney, Australia. This is the fourth asylum of this kind that has been opened in that country.

*Maltine* ought always to be used in nerve-exhausted cases.

*Lactated Food* is a valuable remedy in many cases, and should be used freely.

*Peptonized Cod Liver Oil and Milk* has been found of great value in both diseases of the lungs and the respiratory organs.

*Gardner's special Syrups of Hypophosphates* have a peculiar value in nervous cases, and should be tried thoroughly.

*Lactopeptine*, combined with iron, strychnine, and quinine, is a standard remedy that every physician should use in his daily practice.

*The London Essence of Beef* continues to be the most popular form of beef that can be given for invalids and nerve-exhausted persons.

*Bromida* is the "pick me up" remedy of this country. This is the name given English remedies to be used when breaking away from alcohol and opium.

*Fellows' Hypophosphites* is not excelled by any other tonic in the market. It has an enormous sale in hospitals and asylums as well as among private practitioners.

*Hosford's Acid Phosphate* has always proved to be of great value with us as a medicine. Hence, we have always taken great pleasure in commending it very warmly.

*Warner's Bromo-Potassa*, which contains one grain of caffeine and twenty grains of bromide of sodium to the teaspoonful, is a most excellent remedy to use when alcohol is discontinued. For a great variety of nervous affections it is almost a specific. Try it.

Get *Park Davis & Co's Pepsin*, the digestive power of which exceeds that of many other preparations in market. This firm have made a special effort to improve this medicine, and it can be said to be the most satisfactory of any now in use. The efforts of this firm to improve the standard of accuracy for toxic and narcotic drugs deserve the special thanks of the profession.

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Physical characteristics. A heavy amber liquid. Delicate in flavor. When placed on ice becomes a jelly. Administered in that form, is grateful and refreshing in fevers. Is taken just as it is from the can. No further preparation needed.

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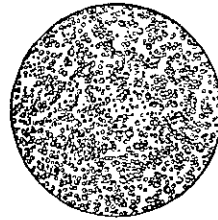
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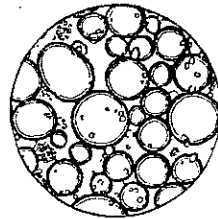


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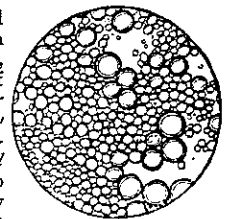


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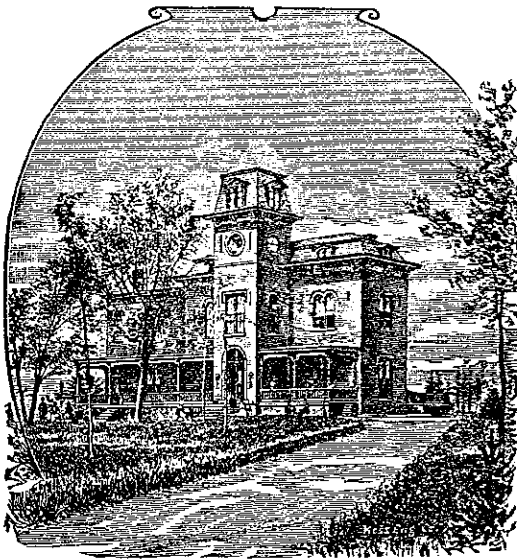
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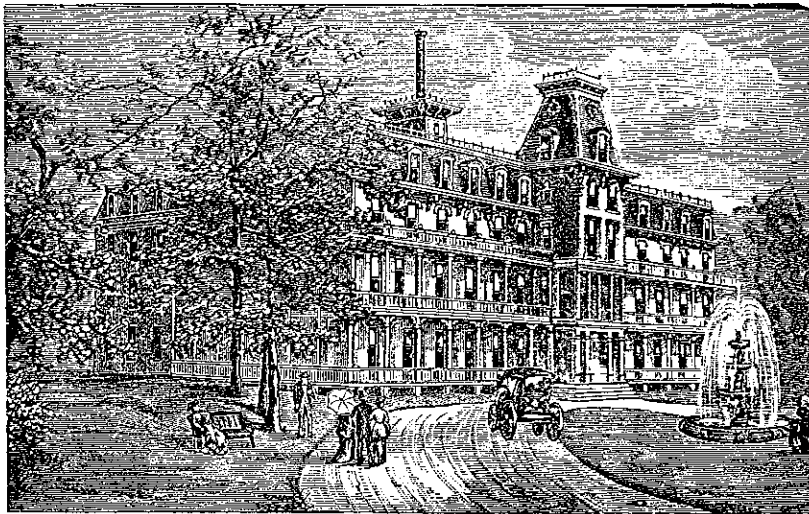
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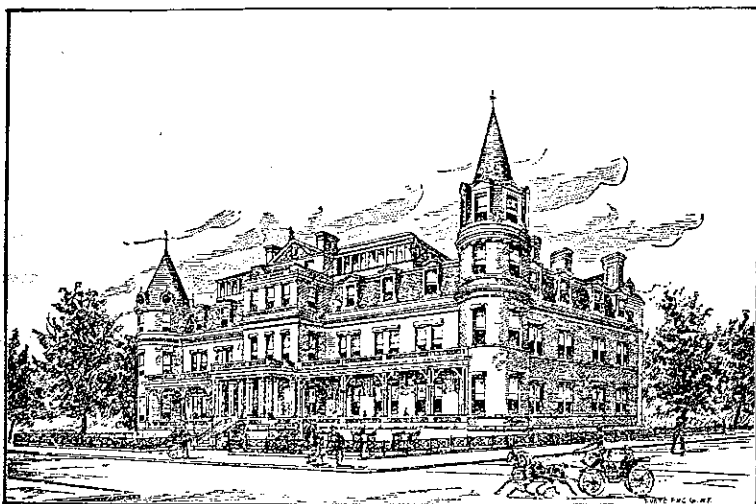
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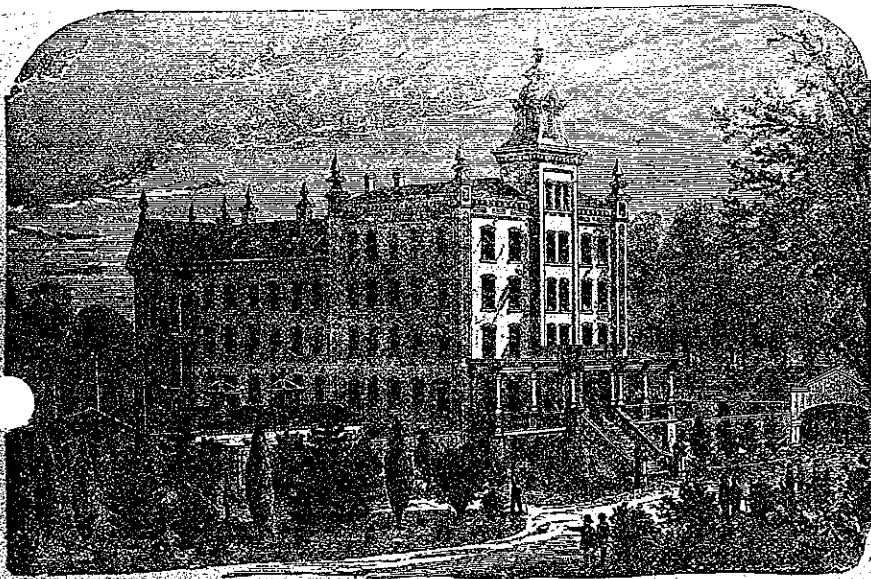
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Our products are to be distinguished from the so-called "insoluble" pepsins by their property of readily dissolving in water. This fact alone is an evidence that certain insoluble matter with which pepsin is ordinarily contaminated has been rejected by our process of manufacture. The contamination here referred to is dried mucus, which possesses no proteolytic power whatsoever, while its presence serves to render the product exceedingly unstable.

Another class of pepsins includes certain soluble forms of the ferment, but these products are invariably of an exceedingly hygroscopic nature and are very prone to deterioration, finally resulting in a total loss of proteolytic power. Aside from the loss in peptic power, the putrescent character of the contaminations above enumerated gives rise to certain products of decomposition, usually evidenced by the pronounced and disagreeable odor, suggestive of incipient putrefaction. This already-existing tendency may favor further changes when a product of such highly complex nature is exposed to influences of warmth, moisture, and other conditions inseparable from the alimentary canal, and leucomaines or ptomaines of a nature harmful to the human subject may be developed. It is therefore evident that pepsin should be free from any obnoxious odor, and that such a product should alone be prescribed by the physician.

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We supply pepsin in the following forms:

Pepsinum Purum in Lamellis; Pepsinum Purum Pulvis; Pepsin, Saccharated, U.S.P., 1880; Pepsin, Glycerole, Concentrated; Pepsin, Lactated; Pepsin, Liquid, U.S.P., 1886; Pepsinum Purum Tablets, 1 gr., Sugar-Coated.

All information desired by physicians as to our pepsin products, our general line of standard medicinal preparations, pharmaceutical specialties, and latest therapeutic novelties and improvements in methods of medication, will be promptly furnished on request.

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