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This Journal will not be responsible for the opinions of essayists or contributors, unless indorsed by the Association.

COMPARATIVE ACTION OF ABSINTHE AND
ALCOHOL.*

BY M. MAGNAN, PHYSICIAN TO ST. ANNE HOSPITAL, PARIS.

IN the service of the commission nominated for the study of the toxic power of divers alcohols, I have the honor to repeat the experience upon the comparative action of absinthé and alcohol; and thanks to the help of M. Marey, we have been able to get a faithful reproduction of the convulsive attack, on all points comparable to the common attack of delirium tremens. These experiences have the advantage of lightening up certain points which the clinic in the complexity of its elements leaves obscure or doubtful. However, in some exceptional cases there are some observations free from all complication, from all accessory phenomena, and reduced in some sort to their simple elements, and consequently easily comparable. I will recall two facts of this kind; I will speak of two men of the same age, without bad hereditary antece-

* Paper presented before the International Temperance Congress at Paris, August 28, 1878, by M. Magnan, and contributed to the QUARTERLY JOURNAL OF INEBRIETY by the author. Translated by T. D. C.

dents, without cerebral exhaustion, without particular predisposition, habitually sober, but abandoning themselves sometimes to the excess of drink. The one takes wine and brandy, the other, wine, brandy, and absinthe. Both present the habitual symptoms of alcoholic delirium; they have hallucinations of a painful nature; hallucinations which recall their every-day life and their predominant preoccupations, which are brought forward in a most active manner. These hallucinatory troubles, together with some other mental forms, seize all the senses. The alcoholic patients hear abuse, threats, provocations, shootings, etc. They see dogs, cats, rats, animals of all kinds, flames surrounding them, armed people attacking them; they smell sulphur, and suffocating, unpleasant odors, the food and drink are unsavory, they feel the blade of a knife traversing the flesh or penetrating it deeply, serpents crawl and slide over the skin, etc. The sight, hearing, smell, taste, and touch, and all the senses are disagreeably affected; besides, these two individuals have tremblings, they both have bad digestion, and they have a nausea in the morning. So far, everything is similar; but suddenly the one turns pale, utters a scream, loses consciousness, and falls; his features contract, his head turns slightly, the jaws tighten, the pupils dilate, the eyes are carried upward, the members stiffen, and the urine escapes in jets, accompanied with gas and fæcal matter. At the end of three or four seconds, his face is contorted, his eyes strongly convulsed in all directions, and the jaws chatter, and the tongue is projected between the arcades of the teeth and severely bitten; a bloody saliva covers the lips, the face is injected, becomes streaked with violet, the sphincters are relaxed, and both urine and fæcal matter are expelled; respiration is stertorous, then exhausted, but the patient remains for a quarter of an hour stupefied. Coming back to his senses, he remembers nothing, the hallucinations begin again with the same intensity, the trembling is not more marked, the attack has changed in no respect, and shows itself independent of all other symptoms.

Why this attack with this patient? In what does he

differ from the other man? They are both in the same condition of age, strength, and temperament. One thing distinguishes them. The one, as we have said, has been drinking brandy; the other, brandy and absinthe. Sometimes the manifestation is less noisy, and the individual has vertigo, turns pale, stops, and for an instant remains an entire stranger to everything around him. Sometimes yet another symptom distinguishes the drinker of absinthe from the simple drinker of alcohol. It is the premature appearance of delirium, without trembling. On the whole, the epileptic attack, vertigo, premature delirium, are the distinctive phenomena of absinthe intoxication. The clinical observation furnishes, therefore, important proof for the support of these facts; but as the demonstration might leave some doubts, the physiological experiments will end all hesitation.

The liquor of absinthe sold in commerce is a very complex drink. Formerly, after having infused in alcohol for a long time with the branches, leaves, and flowers of divers plants, the mass was distilled in order to obtain the essential part of the liquid; to-day, in order to go faster, the greater part of the distillers prepare these liquids without distillation. They content themselves with putting into it several essences, which they mix in a quantity of more or less alcohol. The receipts most commonly used contain with alcohol the essence of absinthe, of angelica, of anise, of China anise, calamus aromaticus, organ, fennel, malise, and mint. Excepting alcohol and absinthe, the physiological phenomena obtained from other essences are but of little importance, even with enormous doses, such as from fifteen to twenty grammes; introduced into the stomach of a dog from ten to twenty kilogrammes in weight, his respiration in general is quickened, the pulse becomes more frequent, but the dog changes in nothing; he eats with appetite, does not seem to be troubled. During several hours, even two or three days, the special odor of the substance introduced is breathed out by the lungs, the excretions are equally impregnated with the same odor; but in no case are there any epileptic or epileptiform convulsions. Two substances remain to be examined—alcohol and the essence of absinthe.

Two dogs are placed on the table, both having a canula fastened in the right femoral vein. Into the one whose weight is twenty kilogrammes are injected thirty grammes of alcohol, at fifty degrees of the alcoholometer of Gay-Lussac. At the end of two minutes, without passing through the prodromic phase of excitation which accompanies a slower absorption of alcohol, we see the animal promptly paralyzed, and entirely anaesthized, without motion of the head or limbs, hanging as soon as he is raised, letting himself fall like an inert mass; reminding us at every point of an individual dead drunk. Respiration is slow, the cardiac beatings feeble and rare, and the central temperature lowered. At the end of an hour the animal begins to raise his head, then gets up on his forelegs, tries to advance, dragging under him his hind legs; then at last he raises entirely, staggers on his legs, especially the hind ones, which cross and remain longer weakened than the front ones. Into the other dog, weighing twelve kilogrammes, were injected twenty centigrammes of the essence of absinthe, and at the end of a minute the head bent slightly forward, the neck stiffened, and the eyes turned upward, the jaws tightened, and the fore paws were unequally contracted, the tail slightly raised gave to the back an arched form; a jet of urine was vigorously expelled, and also much gas with faecal matter. At the end of five seconds, the jaws are chattering, the ears, eyes, and muscles of the face are contracted in all senses, the eyelids wink, some saliva on the lips, the shaking members present convulsions more and more extended but slower, the sphincters are relaxed, and the ejections pass slowly. The respiration is accelerated and becomes stertorous, all convulsions stop, and the animal is panting and stupefied. At the end of five minutes he looks around him with an astonished air, and goes off to lie down in a corner.

These two experiments, so different the one from the other, show in a striking manner the different action of alcohol and absinthe. Sometimes, outside the epileptic attack, absinthe produced delirium: thus in an experiment, twelve minutes after the attack, we see all of a sudden with provo-

cation the dog get up on his paws, with his hair standing on end, with an angry air; with eyes injected and brilliant he turns them towards a point, bends upon his front paws, with his neck extended ready to jump; he advances, retrogrades, successively barks with rage and is having a furious fight, clashing his jaws, and changing positions suddenly as if to seize an enemy, he shakes his head latterly, tightening his teeth as if to tear a prey. Little by little he gets calm, looks several times growling towards the same direction, and gradually quiets down.

This delirious access so promptly developed, explains the premature delirium of the drinkers of absinthe. It develops promptly, as after the administration of certain poisons, such as opium, belladonna, datura stramonium, haschish, and this rapidly develops into intellectual troubles, establishing a new difference between the action of absinthe and that of alcohol; the latter we know must prepare in a certain way the ground, and it is not until the lapse of several days that delirium is developed. The attack and the delirium are the most complete manifestations of the poisoning through absinthe; but taken in small doses, this poison produces phenomena which we have heretofore described. We observe, indeed, after muscular shiverings, more or less marked, little sudden shocks, similar to electrical discharges; they are repeated several times in the muscles of the neck, and give place to rapid and very peculiar movements of the head backward and upward. These contractions appear successively in the muscles of the shoulder and back, provoking sudden shocks in the anterior of the body; the animal doubles himself and seems to resist with all his might these shocks which make him jump. These shocks precede sometimes the great attack, and denote by their seat in the anterior part of the body, the more special action of the absinthe upon the bulbular cervical region of the spine; which is the more remarkable since the alcohol acts in an inverse way. This one indeed first brings about paraplegia before paralyzing the anterior parts of the body; absinthe on the contrary provokes shocks in the anterior part before causing general convul-

sions. Sometimes under the influence of weak doses of absinthe the dog stops all of a sudden, stupefied, his head drops and the tail falls between the legs, with a sinister look, a stranger to everything happening about him; he is then under the influence of the epileptic vertigo. In order better to determine the character of the absinthe attack on all points comparable to the epileptic attack, I have repeated, in the presence of the commission, with the help of Dr. Franck, an experiment which has given a double result. We received, during the attack, with the help of M. Marey's polygraph, the simultaneous record of the circulation of the heart and of the active muscles relating to it. An injection of twenty-five centigrammes of the essence of absinthe is made into the right femoral vein of a dog weighing fourteen kilogrammes. A tube filled with a solution of the bicarbonate of soda in order to prevent the coagulation of the blood adapted to the right carotid and put in connection with the manometer and one of the inscribing levers, this one inscribes the carotid tension and the arterial pulsation or the cardiac beatings of which they are the representations. The second lever, in communication with the left posterior paw, which has remained free, records all the convulsive movements with their particular characters. The two levers begin to play simultaneously and transmit faithfully at the different epochs of the attack the circulatory disorders and the troubles of mobility. The first lever connected with the carotid indicates a carotid tension, making an equilibrium to a mercurial column which rises from fourteen to seventeen centimeters. At the same time the cardiac beatings become more frequent, the modulation of the tracings are shorter and indicate a certain tetanic action of the heart, whose systolic and diastolic movements have become more rapid and short; the heart remaining partially contracted through the whole tonic period. The second lever gives simultaneously during the first period the tetanic contraction of the active muscles of the heart. The movements are so rapid that the line finally scalloped appears straight; the muscular shocks become larger, lengthened little by little, and the convulsions become clonic, the tracings

show their perpendicular striking lines more and more extended, like the clonic convulsions, to the end of the attack. Rest succeed the convulsions, and is indicated by a straight, regular line. During the clonic period, the carotid pressure lowers from seventeen to seven centimeters, then it rises again to fifteen and falls to fourteen, which is equivalent to the normal pressure. Besides, the cardiac beatings slackened to the point to accomplish a cardiac revolution in a space of time seven or eight times longer than the normal state, then the heart takes up again its normal rhythm, or else it is a little faster. These opposite conditions of the heart at the time of the tonic and clonic period provoke two different mechanisms of death by the heart during the epileptic attack, in case of fatal termination coming on suddenly without appreciable lesion. During the tonic period it is the tetanus of the heart which suspends circulation; during the clonic period it is the syncope which ought to produce the same result. The intra-venous has been chosen as an experimental proceeding because it is the quickest way of introducing the poison into the economy, and that one obtains most promptly the toxic phenomena of the body; but whichever may be the road, stomach, rectum, mucus, pulmonary, cellular tissue, veins, through which the poison penetrates, the result is always the same, providing sufficient doses are absorbed. In no case, in no experiment, has one ever signaled the epileptic attacks after the administration of alcohol, not even after it had been prolonged during several months. If in man in chronic alcoholism one sees sometimes convulsive accidents, these are, under the influence of material lesion, readily produced in the nervous centers; they are epileptic attacks analogous to those which one sees in patients attacked with general paralysis, with senile dementia, tumor in the brain, and there exists a sufficient anatomical cause outside of any form which provokes convulsions.

ARE INEBRIATES AUTOMATONS?*

BY GEORGE M. BEARD, M.D., OF NEW YORK.

The phrase, involuntary life, is one that I have often used during the last four years to express that part of our natures that is independent of volition or of consciousness or of both. It refers to the action of mind and body in their reciprocal relations, both in health and disease. This is the side of physiology and of pathology that has been least studied, and is least understood, even among physicians and physiologists.

It is, however, the most important part of physiology and pathology, both in its relations to many diseases, and in relation to modern delusions. It is a department of science in which great advances are destined to be made,—in which advances are already being made,—and in proportion to this advance will many of the dark problems of the nervous system in health and disease be triumphantly solved. It is because of the backwardness of this side of physiology that so many of the great problems have thus far been the opprobrium of the human mind.

As an illustration of the involuntary life in disease, inebriety is one of the most interesting, as well as most difficult to comprehend. So long as a man is merely a drunkard, or a victim of the vice of drinking to excess, he has it in his power to reform if he have a good endowment of will and can keep out of temptation. But in the disease of inebriety the sufferer has little or no more volitional control over his drinking symptoms than has a sufferer from neuralgia, or from sick-headache, or from hay-fever. All the influence he can exert over himself in the way of reform must be *indirect*,—

* Read before the American Association for the Cure of Inebriates at Boston, October, 1883

through the avoidance of the exciting causes whatever they may be; and in order to do this, it is oftentimes necessary for him to have the aid of outside parties. When his environment is bad, when temptation is before him, he has, practically, no will in this special relation, but is as truly an automaton as a patient in the horrors of tic-douloureux or small-pox, subject to the varying influence of weather, of wind, of diet, of medication, of mental influence in every form; the inebriate is, indeed, not himself but somebody else. In perfect health man is a bundle of reflex actions, with a very small margin of volitional life; but in a disease of the nervous system, like inebriety, this small margin of what we call volition is swept away, and the man is an automaton so long as he is in the face of environment that excites the morbid desire and has no other mode of exhibiting his manhood than by changing his environment, which he is oftentimes powerless to do without external aid; for the very effect of the environment is to take away the power of changing it, which is the very thing desired. Periodical inebriates, in the intervals of their attacks, often put themselves under charge of some friend, or enter an asylum, or leave the vicinity of temptation, and this infinitesimal fraction is all that is left of their volition.

The best way to study such cases of disease, is to compare them with the lower forms of life; for example, with the venus (fly-trap), which has been so well studied by Mr. Darwin and others. This plant, according to Darwin and other experimenters, feeds on meat and other substances that may be given to it. It is so sensitive to external irritation, that when irritated by so small an object as a particle of hair weighing only $\frac{1}{1000000}$ of a grain, the tentacles sweep through an angle of about 180° ; less than a millionth of a grain of phosphate of ammonia in solution, causes movement. It is shown that these plants do all that animals can do in the way of catching, digesting, and absorbing food. In the light of these studies, the ordinary distinctions between plants and animals break down. These plants have no demonstrable nervous systems, and yet they respond to irritation as intelligently

as even the higher orders of animals. Conscious responsibility none would claim for these plants ; but their actions are as orderly as many of the phenomena that are all the time taking place in the human system. If these plants were endowed with mind they could not perform these special functions any better than they now do. If, then, there is no conscious responsibility in the movements of these plants, there is no reason for attributing conscious responsibility to many of the constantly occurring phenomena of the human organism. Through the varied phases of nervous disease illustrations of human automatism are seen. Thus, no one would think of attributing responsibility to the phenomena of typhoid-fever, or small-pox ; after these diseases are once contracted, these maladies take a definite form uninfluenced, to any great extent, by the mind of the sufferer. In other words, the phenomena of these maladies move on automatically as though the patient were a plant, or even a lower form of life. Whatever responsibility belongs to the patient applies to the period before the symptoms of the disease appeared ; while yet there was opportunity and ability to avoid exposure.

Such is the philosophy of nearly all the functions of the human body in health and in disease ; the phenomena of life, physiological and pathological, those relating to the body and those relating to the mind, take place automatically ; all that we can do is to control, so far as possible, our environment.

Certain diseases connected with the sexual organs illustrate automatism in a most remarkable way, and assist us in obtaining a clear and correct idea of the true philosophy of inebriety. Dr. J. N. Hyde of Chicago, has lately published some cases of a most striking character in their bearings on this subject of automatism in disease, thus :

A young man had the habit of masturbating in the morning a little while before rising, and while asleep and unconscious of his acts ; a severe pain in the head would attend the act and follow it. The habit being entirely beyond the patient's direct control, was only broken up by the cooperation of his brother, who woke him up half an hour or so before

the usual hour of rising, and thus saved the involuntary performance. Another case yet more remarkable cited by the same author, was that of a young man who one day after a hearty dinner, arose from the table, went into his room and locked himself in, where he was seen to be engaged in the act of masturbation. On being subsequently reproved for the habit, he expressed contrition and promised to reform; but again he was detected in the act, going away by himself from a picnic that he was attending. He stated that the attacks were preceded by violent pain in the head, and that what he afterwards did was utterly beyond his control. The next time he had the premonitory symptoms, he was taken in charge by his parents and his hands were tied behind his back, on which he at once went off into convulsions; his hands being released, he began to masturbate furiously. After this, as after the other attacks, he fell into profound sleep. The history of the case shows that the act of masturbation took the place of an attack of epilepsy, being in a degree vicarious to it—a safety-valve for the disturbed brain. The accompanying symptoms—pain in the head, and sleep, peculiar expression in the face, etc.,—make this point quite clear.

A patient under my care at one time became so debilitated in this function, that he would perform, or attempt to perform, the sexual act while asleep. In all such cases the phenomena are automatic—independent of the volition of the individual, and so far forth irresponsible acts. Whatever responsibility there may be for such sufferers, belongs to the time when the habit was not yet formed. During the crisis, these persons are no more responsible than the venus fly-trap, and for the reason that they have at the time no more volitional power.

My friend, Dr. Crothers of Hartford, has placed at my disposal the following cases illustrative of the automatism of inebriates. In these cases, atmospheric influence was evidently the sole exciting cause of the attack, the sea-air being the cause of an attack of inebriety, just as it might be the cause of an attack of rheumatism, or of lung-fever

Cases of this kind have, I believe, never before been published. These four instances of the dependence of the disease inebriety on atmospheric conditions, are of the highest conceivable interest and importance, scientifically and practically; and may help to make those who read this at once more intelligent in regard to the philosophy of inebriety, and more charitable toward those who are its victims.

Cases in which the sea-air seemed to be the exciting cause of Inebriety.

CASE FIRST.

George Chase, a college graduate, was a speculator and traveling man who drank moderately during college life; married unhappily at twenty-four, and two years later was divorced from his wife. For several years he bought and sold Western farm securities, and drank half a dozen times a year to intoxication, then signed the pledge and was sober for two years. His rapid accumulation of a fortune by some army contracts led him into fast life, which lasted four years, when he became reduced both in health and means. Again he signed the pledge, and two years later he speculated in summer residences at Newport, and unexpectedly drank very hard, breaking up his business. The next three years were passed in traveling for an insurance company located West, as adjuster—drinking nothing but lager beer, and that at long intervals, never intoxicated, and never using anything stronger.

He married, and went to Long Branch on a wedding tour. The second night he drank very hard, and continued to do so for a week, then he returned West, reformed, and was very ardent in the temperance cause. Nine months later he paid a visit to a relative on the sea-shore and drank as before, without cause or reason.

Returning home he reformed again, and two months after was down by the sea on business, and complained of painful exhaustion, which terminated in cramps and colic. Alcohol was given with relief, but intoxication followed. His wife began to observe his relapses at this time, and noted that whenever he went down by the sea-shore he drank, but when he was back in the interior he always had command of himself. The only explanation he gave was, that "he could not help it," or, that it was owing to some insignificant cause which was not clear to others. No man regretted more keenly his position, or relapses, and did more to help himself. He never could realize that he drank, only when breathing sea-air. Eight instances of intoxication under these conditions were noted.

Finally his wife died, and he became partially paralyzed from an injury and grief. He is now temperate, living in the interior, and is a Spiritualist.

CASE SECOND.

Harrison Granger, born in Ireland. A book-keeper; a man of much poetic talent and literary tastes; a musician, and of excitable disposition. At one time he was a spiritual medium, and gave private seances with strong faith in this doctrine. Then he became a radical disbeliever in every form of religion; was a leader in several clubs, although a temperance man, rarely drinking anything but wine at long intervals. He was neuralgic, and after any special excitement and exhaustion, would go to bed and rest for a day or more. The first drinking came on during an excursion to Coney Island, where he was profoundly intoxicated. After this he did not drink much for the next two years, but complained of rheumatism and exhaustion; from the failure of the firm he lost his situation, and drank to intoxication for several days after. A year of much irregularity followed, with drinking and general dissipation, then he reformed and began to work as stenographer on a large daily paper. Some months after, he drank very unexpectedly while representing his paper as a reporter, in a sail about the forts of New York with some distinguished visitors. His conduct was such, that he was discharged. Reforming again, another situation was soon obtained. Another year went by, with two relapses under similar circumstances, particularly in the suddenness of the attack, and the unusual adverse occasion.

He went to England, and drank very hard coming and going, but was from his own statement sober when on land. On his return he went into business in Harrisburg, Pa. During the next five years he was not intoxicated, although drinking wine occasionally; he was successful in business, married and lived happily. The same periods of exhaustion and mental gloom, or low spirits, would come on every few weeks. He went as a member of an important committee to examine into the accounts of a failing firm at Charleston, S. C. The second day, he rushed away and drank to intoxication, and was unfit for any further business. The next year he came to New York, and spent the night on Staten Island, drinking early in the morning to intoxication. After this he became an ardent temperance reformer, lectured and worked hard for two years more; then drank again under similar circumstances, always near the sea-shore. Was under treatment at an asylum for four months; after this went to New York city and relapsed; returned to the asylum, remained six months; went West and was sober for eighteen months, until he went to Boston, where he drank again. At present he is in the interior, comparatively healthy, and temperate. He can give no rational reason for drinking, believes it is a wicked spirit, or occult influence, is superstitious about the sea-shore, has delusions of suicide while looking at the waves, is much broken down in mind and body, and is suffering from acute rheumatism.

CASE THIRD.

H—, a Methodist clergyman, aged thirty-four. Mother suffered from epilepsy many years before death, one sister hysterical, a brother afflicted with asthma; during childhood he had St. Vitus dance, and was operated on for strabismus; was a nervous, passionate man, subject to great changes of disposition and mental activity; had dyspepsia and was treated for it successfully by the use of bitters. He was impulsively fond of certain dishes, and manifested much childishness to procure them. He was a radical temperance man, positive and fanatical in his expression of opinion. He attended a sea-shore camp-meeting, and was noted for extravagant enthusiasm, and abject prostration that lasted for a week after the meeting closed. The next year he was even more excited, and to the grief of his friends he was found intoxicated after the meeting closed, and a bottle of whiskey secreted in his satchel. The next year he was a spectator at a sea-shore meeting, and drank very hard again. This time he deplored it deeply, and went back to the interior only to labor more earnestly in the temperance cause. The same year he was again at the sea-shore and drank as before, only procuring the liquor more secretly. He was transferred to a Western conference, and for five years was an active temperance man. He suffered from dyspepsia and melancholia at times, and was more excitable in his manner and actions. His wife dying, he came East for a rest, and went to Long Branch. The second day after reaching this place he drank to intoxication, and kept it up for a week, when the landlord turned him away as a nuisance. His particular delusion was prayer for drinking men, going into the bar-room and urging men not to drink, and praying for them, while he was almost oblivious of his condition. He returned to the West, and for three years more was temperate and worked as usual. He came to New York and went with a friend to Coney Island, and drank hard. He described his drinking as an impulse that he could not resist, coming over him like a pressure which was unbearable, demanding stimulants as a preventive of death. A friend went with him to the sea-shore, as an experiment, and found that after a few hours he became restless, excited, would break out in perspiration, or have a nervous chill; drink large quantities of ice-water, seem to lose all pride or consciousness of his condition. On going a few miles back from the coast, this paroxysm left him, and he was grateful that he had escaped. This man is now in the interior and fully conscious of his danger, and has not ventured near the sea for three years, except once last year, in company with some watchful friends, spending half a day at Ocean Grove, with the same agitation and alarm, and sudden going away and passing off of these symptoms.

CASE FOURTH.

E—, an inventor and practical mechanic, of healthy parentage, who during early life developed a precocious talent for invention, which did not increase after maturity. He was a fine musician and spent much time collecting rare instruments. At twenty-five he suffered from partial sun-stroke, from which he recovered slowly; neuralgia and the usual entailments of nerve derangement followed. At twenty-eight he had invented a machine from which large incomes were received. He changed his living, to one of more luxury and indulgence. He was temperate in drinking, but frequently used food to excess. He was married and lived very happily. About this time he suffered from some form of fever, which was thought to originate in exhaustion from over-work. He went to San Francisco, to rest and for change. With some friends, a small hotel on the coast was selected as a residence. He seemed in perfect health and spirits, when all unexpectedly to his friends and wife he drank to intoxication. He gave as a reason, that the liquor was so agreeable. The next day he drank again, and so on for four days, when his family became alarmed and he was taken to Sacramento. Here he recovered. The tour was continued for six months, during which he manifested no disposition to drink, but became radical in his temperance views. The next year, business reverses depressed him and he went to Newport to rest with some strong temperance friends. A few hours after he arrived his manner was noticed to change; an unusual reserve came over him, he sought to get away by himself, complained of a severe head-ache; a few hours later he drank to intoxication and kept it up for three days, until his friends took him away, when the old desire for alcohol ceased. During the next year he was treated by several specialists of nervous diseases for spinal anæmia, etc. His fortunes improved, and he went over to Europe, drinking all the way over very hard, and abstaining rigidly on the Continent, but using alcohol excessively when he came to the sea-shore and on the return voyage. His health was much broken, and he retired from business, living a quiet, secluded life for a year or more, then he began to invent machinery for perpetual motion, and manifested a childish credulity and general failure of his mental powers. Two years after, he went to the ocean to test some machinery that would get its motive power from the waves, when he drank again and had an attack of delirium tremens. He was sent home, and slowly recovered again. Six months after, he went back and drank again to intoxication. His wife and friends now realized for the first time that he drank always at the sea-shore, and have avoided all exposure to that cause. He is now temperate and suffers from neuralgia and anæmia with weakened mind, and gives evidence of premature old age.

In the above cases the features worthy of note are these :

1. The simple contact with the salt air provoked inebriety with the accompanying symptoms of headache and various depression.

There is clear evidence from these records that the sea-air, on the shore or at sea, without any of the attendant factors, as drinking, or conviviality, or the sight of drinking, excited the uncontrollable desire for alcohol.

2. Relief in these cases could only be obtained by leaving the sea-side and going into the interior. Away from the sea, all other conditions being the same, not only the inebriety, but all the preliminary and accompanying symptoms, as headache, depression, debility, and nervousness, passed off without any effort or treatment.

The analogy to hay-fever, neuralgia, sick-headache, and chorea, is obvious. The best and most striking analogy is found in hay-fever. Those who are familiar with that disease are aware that it may be brought on or relieved almost instantly by any change of atmosphere; a sea-breeze will at once relieve it; a land-breeze will as quickly excite it; going up a mountain or into the woods it gradually disappears; returning to civilization it gradually reappears; the attacks, like those of inebriety, are sometimes preceded or accompanied by headache, nervousness, and depression of an indefinable character.

3. Science thus confirms more and more the instinctive teachings of morality. Resist the beginnings of evil.*

* THE "JUMPERS," OR "JUMPING FRENCHMEN."—During the past year I have been investigating a manifestation of the Involuntary Life of the most novel and interesting character. It is found among the French Canadians, and is there known under the expressions, "*Jumpers*," or "*Jumping Frenchmen*." It appears, according to my researches, that a certain proportion of that people—mingled French and Indian blood—have acquired the permanent habit, which they cannot control, of jumping, or striking out with their hands, when commanded to do so, suddenly and authoritatively, by any one who chances to be near them. The habit appears to have been acquired, in the first instance, by tickling one another, in the winter camps where they cut lumber in the Maine woods. They are a somewhat degraded race of beings; have few resources, very little intellect, and no mental discipline; cannot, usually, read or write, and, in their camps, while away the long winter evenings by playing upon each other's ticklishness until some of them get into a state of abnormal suscepti-

bility that compels them to obey, automatically and instantly, any sudden order, as, to strike, or to catch, or to jump, or even to vomit; they are at the mercy of their companions, and are frequently so much annoyed that they have to leave the camp where they are employed. The more they are played upon the worse they become; for the habit grows with exercise. This condition is not an epidemic, but a fixed and permanent state; and, so far forth, is different from the phenomena so often witnessed in revivals. It is, in fact, as I have elsewhere stated, a liability to be entranced on slight excitation; differing from the allied trance to which all of us are liable only in this, that it follows a very much milder irritation. When these "Jumpers" are excited to jump or strike, or to perform any of their peculiar automatic acts, they present the appearance of entranced individuals; their faces turn pale, their eyes are fixed and glassy, and sometimes their limbs tremble. One of these Jumpers is a waiter, and when told suddenly to "drop it," he at once drops whatever he may have in his hand, though it may be on the head of one of the guests, or on the floor. Another has so susceptible a stomach that he at once throws up his meals when any one but "gags" or makes the motions of vomiting in his presence; thus he has grown thin, and at one time, was almost starved. One Jumper, when told to "strike," struck against a red-hot stove and burned himself. Accidents of this kind are quite frequent in their camps. One man, standing on the shore of a pond with a five-dollar gold piece in his hand, was told to "throw it;" he threw the money—a large sum for him—into the water. Another was standing near a kettle of fish; he was told to "jump," and he jumped into the kettle. When one of these Jumpers is addressed sharply and quickly in any language with which he is not familiar, he, at once and automatically, responds in that language. Thus, in numberless ways, they are abnormally susceptible to stimuli which, in the same degree, would have little or no effect on others.

In its relation to the present subject,—inebriety,—these extraordinary phenomena are of interest as illustrating the power and extent of the involuntary life, showing how varied and complex and subtle are the manifestations of this side of human physiology. These Jumpers, in the acts here referred to, are absolute automatons; utterly without volition or responsibility. Whatever responsibility there may be in these cases, belongs to the time when the habit began to be formed,—their first playing and trifling with themselves and others in the loneliness of their winter camp-life; they are no more to be blamed for their acts than are patients afflicted with St. Vitus' dance, or hysteria, or epilepsy, or with any form of insanity. The treatment, if any is used, should consist in removing the victims from the temptations of camp-life; they should be isolated, or, at least, kept away from those who are similarly afflicted, or who would take pleasure in playing upon, and thereby increasing, their weakness; at the same time, everything that educates and develops their higher cerebral centers will be of service. Indeed, it has already been noticed that they grow worse by aggregation, and better by isolation. Their habit is a real and serious affliction to these people; a source of anxiety and positive torment; they would rejoice to be delivered from it.

On the other side of the world, among the Malays, in the Island of Java, according to the London Medical Record, phenomena precisely similar to those exhibited by the "Jumping Frenchman," are seen. A woman carrying a child and seeing one even pretend to drop any article may at once drop that child. Many other interesting illustrations are given.

Very recently, also, my attention has been directed to some allied phenomena connected with a religious revival now in progress in a certain town in Vermont. The victims of this excitement roll on the floor or ground in most absurd and undignified attitudes; whence they are called "*Holy Rollers.*" Unlike the Jumpers, however, these Rollers are not in a permanent liability to their disorder; when the excitement is over, they will spontaneously recover. Just at present, in the height of the public enthusiasm, they are, on this subject, pure automatons. In the same line are the cases of starving girls, hysteria, and hysterical trance, like that of Mollie Fancher of Brooklyn, which is now exciting so much enthusiasm. I have studied a number of similar and allied cases, and I never share the popular prejudice against them. They are without volition, practically irresponsible, and to be blamed—if blamed at all—for the *beginnings*, not the endings of their disease. Like inebriates, they are to be treated by taking them from their home and friends and giving them a radically new environment.

THE USE OF ALCOHOL MEDICALLY.

Dr. Ristine, in an address before the State Medical Society of Iowa, makes the following very timely caution:

Probably no questions touch us more closely than those concerning the causes of intemperance—especially the form called dipsomania—whose victims, hopeless in the lost balance of their physical and moral organizations, are among the most brilliant and cultivated of our fellows; warmly esteemed and admired, and surrounded by every personal and social inducement to a noble career, I have no panacea or special suggestions. Our inductions must be broader, and include all the causes which tend to injure the nervous system and destroy the delicate balance between the will power and the physical organization, before true conclusions can be attained. Let us use, however, with conscientious care, our privileges in the administration of this remedy, so potent for evil as well as for good. Remember that we are dealing with a poison which, like other poisons, is, when judiciously employed, a valuable remedy; but which, improperly used, is more to be dreaded than they, as moral degradation is worse than physical death. Alcohol, with stimulants and narcotics in general, should, as a rule, be prescribed with the utmost caution, if at all, in all chronic diseases.

PROCEEDINGS OF THE AMERICAN ASSOCIATION
FOR THE CURE OF INEBRIATES.

The ninth annual meeting of the American Association for the Cure of Inebriates was held in Union Hall, on Boylston street, Boston, Mass., commencing September 10, 1878, at 10 A. M.

The President, Dr. T. L. Mason of Brooklyn, N. Y., called the meeting to order, and introduced the Rev. Edward Everett Hale, who offered prayer.

The President then delivered the following opening address:

Gentlemen, Members of the American Association for the Cure of Inebriates:

A few years only have passed away since the institution at whose invitation we are here to-day was the only one of its kind having a perfected organization, and being in successful operation.

Soon, however, others were organized, and in succession, with moderate rapidity, went into operation.

Some thirteen years had elapsed when, in November, 1870, delegates from five public and one private institution, consisting of eight physicians and six superintendents and directors, met in the City of New York, and organized the *American Association for the Cure of Inebriates*. They were the representatives of all the inebriate asylums then known to exist in this country.

To-day we hold our Ninth Annual Meeting, and are permitted to enumerate thirty-two (32) public or private establishments in actual working condition, or in the process of organization, on this continent. They extend from the British possessions, on the north, to Texas, and from New York to California, inclusive.

May we not then at length, with some propriety, appropriate the words of the poet, and say—

“No pent-up Attica confines our powers,
But the whole boundless continent is ours”?

In the British Islands there are known to be thirteen private or semi-public asylums, in which inebriates are received for treatment.

There is one also in Melbourne, in Australia, and all of these have attained a good measure of success.

You all, gentlemen, have been made aware through the columns of the *Journal* of the promising state of legislation in the British parliament, in which a bill has passed to its second reading, with a good prospect of its final enactment. Much of this is to be attributed to the influence of our example. And notably the clear and full testimony of the committee of this Association who testified before a special committee of the House of Commons, greatly tended to this end, and we may justly claim the success thus far obtained by the friends of the cause in England, as one of the results of our labors. I may here add that on the continent of Europe attention has been awakened to this important subject.

In *Germany*, two institutions are proposed; one in *Rome*, Italy, and one by the *Norwegian* government.

At our meeting in Philadelphia, two (2) years since, the subject of changing the form of our publication (which had heretofore taken the shape of a single issue of our “*Proceedings*”), was referred “with power,” to the officers of the Association. And after careful deliberation the establishment of the *Journal of Inebriety* was decided on. The *Journal* has reached the close of its second year. Its influence has been marked, and most beneficial. It has been in wide demand in this country and in Europe, has spread more extensively than heretofore a knowledge of our work, and has well sustained the reputation of our associates, as the *first not only to establish on a true basis, HOSPITALS for the treatment of inebriety and opium addiction, but also for the*

scientific study of these terrible and heretofore almost intractable scourges of our poor humanity.

Encouraged, gentlemen, by the success of the past, and sustained by the brightening prospects before us, we may most confidently address ourselves to the duties of the present hour.

We have undoubtedly inaugurated a most important movement; a movement fraught with vast benefits to our countrymen and to our race.

Our success has been seldom exceeded by any enterprise against which *honest ignorance, religious prejudice, and great pecuniary interests* have arrayed themselves. The light has nevertheless at last, through our agency, shone on many a vision on which it had never before fallen; and our opponents have in not a few instances become our friends. *Religious teachers*, and the *religious press* have fallen into our ranks and become our allies. The *medical profession* is daily sending recruits to our numbers, and patients to our *hospitals*. The *ratio of perfect cures* is certainly not less. I am convinced it will on careful investigation be found to have grown larger than in the earlier years of our labors. Public opinion thus influenced is with increasing rapidity inclining in our favor, and all well-conducted institutions are receiving larger numbers of patients than ever before.

Convened under these auspicious circumstances, we shall, I think, find it expedient, if not indeed necessary, to consider certain questions bearing upon our future prosperity. Agreed with an almost entire unanimity in the *fundamental* principles on which, with hardly an exception, the institution-in connection with this Association are BASED; on which the legislature which has supported and directed them has proceeded, and which have been influential in these respects, not only in our own, but in foreign countries, it becomes a grave question whether heretical views on these points should not hereafter exclude institutions and individuals from membership in this *Association*.

This question should, I think, be submitted to a judicious committee for careful consideration and report.

A standing committee should, I think, be appointed, whose duty it shall be to recommend candidates for election to honorary or ordinary membership, after careful inquiry into their views on the subjects embraced by this Association, and into their professional standing. To this committee all nominations for membership should be referred for consideration and report. To it also the important matters of finance, and of a more perfect form of organization of By-laws and Rules of Order might be committed, with directions to report at the next meeting of the Association.

I cannot conclude these brief remarks without reference to the loss this *Association* has sustained by the death of Dr. DANIEL E. DODGE, a former Vice-President, Recording Secretary of this Association, and one of its Commissioners to the Special Committee of the British House of Commons in 1872. He served the cause in which we are engaged with earnestness and success, and was ever true to the cardinal principles of this Association. But whilst others older, and who, by reason of impaired health, seemed to human view likely to precede him, still survive, he has *passed away*, at an age in which "his eye had not become dim, nor his natural force abated." It seems to me eminently proper that at this our first meeting since the occurrence, we should take appropriate notice of this solemn event.

At the conclusion of the President's address, Dr. Parrish rose and asked permission, before proceeding to the regular business of the Association, to add his testimony to that of the President, to the value of the labors of our late friend and colleague, Dr. Dodge. Dr. Parrish said that the deceased was probably better known by him than by any member of the Association then present. Dr. Dodge had been his associate in the mission to Great Britain in 1872, and had given testimony before the Commons Committee with himself, and as they had necessarily been thrown much together, he wished to say that their intercourse had been most harmonious and fraternal. Dr. Dodge performed his duty with great credit to himself and to the Association. He was, when intimately known, a genial friend and companion. His papers, read

before the Association from time to time, and his faithful report of the commission just referred to, were evidences of both his ability and fairness as a writer, and it seemed eminently proper that the Association should make a record of their remembrance and appreciation of his services.

Dr. Parrish moved that a committee be appointed to prepare resolutions on the death of Dr. Dodge.

Drs. Parrish and Day were appointed on that committee.

Dr. Day, from the Business Committee, announced that invitations had been received from the Massachusetts General Hospital, the City Hospital, the Danvers Insane Hospital, and the Boston Medical Library, inviting the members to visit these institutions.

On motion of Dr. Crothers, these invitations were accepted, and a vote of thanks passed to these institutions for their courtesy.

Drs. Mattison, Parrish, and Rev. Mr. Willett, were appointed a General Business Committee.

The Secretary, Dr. Crothers, read letters of regret from Dr. George L. Burr of Binghamton, N. Y., Dr. Joseph T. Howard of Washington, D. C., Dr. T. H. Everts of Rushford, Minn., Dr. E. M. Snow of Providence, R. I., and many others.

Several gentlemen in the audience united in requesting the President to make a general statement of the principles of the society.

The President replied by saying it was not a moral reform society, but a medical society; that they believed that by abuse of intoxicating liquors men become unable to resist the temptation to drink, and that this condition should be treated like a disease, and not as a crime; by medical treatment, and not by criminal process; and that to promote this treatment was the object of the society, etc.

Dr. Joseph Parrish, Secretary for Foreign Correspondence, made a full report of the progress of legislation in England during the past year, particularly of the efforts for the passage of the Habitual Drunkard's Bill in the House of Commons to the second reading (see No. 4, of Vol. II, of Quarterly Journal of Inebriety; also the bill published in No. 3, Vol. I, of same

journal). He read numerous extracts from Dr. Cameron's speech before the House of Commons, in relation to the history and progress of public sentiment regarding inebriates in Great Britain, giving many very interesting facts, clearly indicating that a great advance is going on, etc.

The Committee on General Business reported a paper entitled "Criminal Inebriates," by Dr. T. D. CROTHERS of Hartford, Conn., which was read.

In the discussion of the paper which followed, Dr. Cornell of Boston, remarked that he had recognized the powerful influence of heredity, and in his experience he was convinced that the criminality was always the most prominent, and the inebriety was more or less accidental. The class of patients mentioned were always recognized as criminals, and should be treated as such; it was a dangerous sentiment to regard them otherwise. They are usually of defective and imperfect brain-power, and closely allied to epileptics, etc.

Dr. Day said, in his experience this class was very rarely represented in our asylums, and when they came, did not stay long. He was sure they could not be mistaken, and should always be separated by themselves; the jail and prison was probably the best place for them at present. He believed all these cases were inherited, and could not conceive of a person growing into this condition who did not inherit a bad organization, etc.

Rev. Dr. Thompson remarked, that he had never met with many persons of this class, and he thought they were not common. Most criminals drink, and he was not sure that inebriates could combine both vices to a great extent for any length of time. He gave at some length his experience among the lower classes as a missionary.

Dr. Parrish had seen many cases of this description, both in and out of asylums, and had studied this phase of the subject some years ago, reaching the same results. He suggested that the title of the paper should be reversed, for in his experience the criminality predominated in nearly every case.

Rev. Mr. Willett remarked against the treatment of crim-

inal inebriates by our courts of law as inhuman to an extreme degree. He could show instances where the cases had been made worse, and the possible curability was removed beyond all hope. Persecution built up and intensified all the disordered elements of their nature. He cited the history of the gypsies of Europe as an historical example of the growth of the dangerous classes through persecution, and ignorant, unkind treatment, etc.

Dr. Crothers remarked, by way of explanation, that in his paper, he simply wished to call attention to a class of inebriates which were often referred to by persons not acquainted with the work as types of all others. Many of the most violent opponents of our views evidently based their opinions on cases of this class. His object was to show that this class of criminal inebriates should not be treated in our asylums with other inebriates, and that no theories or studies of this subject could be authoritative or complete that was based on the study of this or any particular class, etc.

Dr. Day moved that the evening session he held at the Washingtonian Home, on Waltham street. Carried.

The next paper reported by the Business Committee was on—"Alcoholism in Relation to Other Diseases," by Dr. ELISHA CHENERY of Boston, Mass.

After the reading of which the Society adjourned until 2.30 P. M.

AFTERNOON SESSION.

Association convened at 2.30 P. M., the President in the Chair.

The discussion of Dr. Chenery's paper was the first business in order.

Dr. Parrish remarked at some length on the pathology of alcoholism, concluding that there was but few special pathological changes following alcoholism that are not produced by other causes. The changes of tissue frequently seen in these cases were not necessarily the result of alcoholism. Alcohol in many cases acts as an exciting cause, developing a long train of diseased conditions whose germs are dormant in the system. He doubted very much

the possibility of showing the relations of disease, or tissue-changes, to alcoholism, in all cases; but he was always ready to welcome any studies in this direction, and as such, Dr. Chenery's paper was a valuable contribution, etc. He moved that a copy of this paper be requested for publication. Carried.

Dr. Cornell affirmed that in his experience he considered inebriety and alcoholism closely allied to epilepsy; here the cause was in the blood, and in many cases gave no indications of tissue-change under the most careful examination. He would expect in many cases of inebriety no special change that could be traced to the alcohol alone, but he was sure there was always strong evidences of vitiated blood, etc. He believed that heredity was the most potent cause, and alcohol simply acted as an agent to bring on diseased conditions more rapidly than other causes, etc.

Rev. Mr. Thompson had noticed the extreme fatality of inebriates when afflicted with other diseases, and the prevalence of other diseases in all these cases, giving confirmatory facts, etc.

Dr. Willard Parker said we did not go back far enough in our studies of these cases. We stopped to examine physical lesions and coincident diseases which were only the results of long trains of accumulated causes. We should go back to the parents and grandparents, and there we shall find the first growth of the diseased impulse, which comes to maturity long after in the children. The disease of drinking follows the same law as other diseases; its latent germ develops under special conditions with much certainty. When we shall go back to these early causes, then we can trace the progress and connection with disease downward, etc.

The President remarked that there was frequently associated with inebriety a species of morbid impulse which is always accompanied with a train of mental symptoms difficult to understand. In his experience no study of the relation of these cases to other diseases could be complete unless we could understand the influence of environment and heredity, etc.

Dr. Chenery replied that he sought to indicate in his paper the most common pathological conditions following and accompanying alcoholism. He had no doubt that there was a train of predisposing causes which especially developed certain conditions. How far this was peculiar to alcoholism he could not show. But in his opinion there were many strong hints of a very close relationship which were yet to be described, etc.

A general discussion followed, after which the committee announced a paper entitled

"A New Method of Treatment in Opium Inebriates," by DR. J. B. MARRISON of Brooklyn, N. Y.

The discussion which followed was mostly of a categorical character, relating to the action of bromide of sodium in opium cases, and its possible advantages in inebriety; its value being conceded by all who took part in the discussion, and a general desire was manifest to study it more practically, in the future.

Dr. Parrish moved that a committee of three be appointed to revise the constitution and by-laws. Carried.

Drs. Parrish, Parker, and Day were appointed.

The Association adjourned to meet at 7.30 P. M., at Washingtonian Home.

EVENING SESSION.

The Association met in the chapel of Washingtonian Home, which was well filled with a large, intelligent audience. The President occupied the chair.

The committee reported a paper entitled "Are Inebriates Automats?" by DR. GEORGE L. BEARD of New York, and read by the Secretary.

Dr. Parker remarked that this entire subject was one of much mystery, and of not much importance practically, because we have not gone far enough in our general studies to be able to particularize this special phase of it. He would have a more thorough study into alcohol, its nature, and effects upon the race. We should understand that it is a dangerous poison, and cannot be given without peril. Our Association is not a temperance society, in the general sense; it is devoted

to study of the causes and conditions which make men drunkards, etc.

The President said that the cases mentioned in the paper were curious, and indicated the presence of some agencies not well understood. . . .

Dr. Day remarked that it has been noticed that certain people will always meet with a return of the appetite for strong drink upon going to the sea-shore or the mountains, but this is not because of the effect of the sea-breeze or the clear mountain air. It may be true that the party so affected has inherited a low degree of vitality, a weakened nervous force from an intemperate parent, but the cases are very rare where the drinking habit itself is entailed upon the child. A low, debilitated organism, peculiarly susceptible to the effects of alcohol, may be his inheritance, but it will not do to say that the son is irresponsible for his acts because of the taint in the blood.

The fact is, that the healthfulness of the summer resort, whether at the sea-side or the mountains, contributes of itself to restrain the appetite, but the thought of former indulgences under the same circumstances, brought to the mind by the power of memory, arouses the appetite. The man had been in the habit of drinking at the same resort before his attempt at reformation, and when he returns upon his annual visit perhaps the familiar scenes have in his mind a powerful association with the drinking habit to which he was formerly accustomed, and for the time being he becomes a mere automaton, acting without force of will, completely under the control of his morbid appetite.

Another man, after long periods of sobriety, found himself unable to maintain his reformation upon his return to the city of his residence, owing to the effect produced upon his mind by the scenes of the noisy streets and the bustling sounds of city life. In this case the man had been accustomed to frequenting the streets while intoxicated, and the effect of a return to these scenes, on his mind, was such as to overbalance his reformatory purposes, and he was led captive by his morbid appetite.

It is well that reformed men should know that they are very likely to fall, through this power of association of material things with the ideas which controlled the mind while the drinking habit was continued. For instance, a reformed man who was formerly in the habit of getting drunk on account of domestic troubles, will very likely be powerfully tempted to drink when the first breeze of domestic infelicity passes over his hearth-stone. There are many other things that will bring the reformed man's mind to this morbid or automatic condition, where the party apparently without volition or force of his own will is carried along by his old habits, almost unresistingly.

All these things should be thoroughly considered by the man who is attempting to reform, and all associations which will have the least tendency to awaken the old morbid condition of mind must be utterly avoided.

Drs. Cornell, Chenery, Parrish, Otis Clapp, and others discussed this subject at some length.

The next paper reported was entitled "Truth and Fiction," by REV. J. WILLETT of Fort Hamilton, N. Y.

Before this paper was completed the hour of adjournment arrived, and a motion to complete it next morning was carried, after which the Association adjourned to Wednesday at 10 A. M., in Union Hall.

SECOND DAY'S SESSION.

The Association convened at 10 A. M., Dr. Mason, the President, in the chair. Rev. Mr. Willett continued the reading of his paper on "Truth and Fiction." A very general discussion followed the reading of this paper.

Dr. Day introduced Mr. H. K. Neal, from Dartmouth, Nova Scotia, the superintendent of an inebriate asylum, who remarked as follows :

Our institution has been in existence for three years and a few months. In that time we have had two hundred and thirty-six patients, some of which have been very severe cases to deal with. As far as we can say with a degree of

certainty, about twenty and one-half per cent. of the whole are faithful landmarks of the good resulting from our institution.

Many of our patients have been from that class who have been completely broken down by their inebriate habits, and who at last have found their way through the police to prison. We have interceded for such, and out of seventy-five so rescued, only twelve have been back for the second time.

We have had some few interesting female cases, and from seven such we can look upon four as completely restored to their womanhood and to society.

We have had but one death in our whole number of patients, and we feel persuaded to say that if friends had not made misrepresentations to us of such case, we would still be without any death rate.

Our chief difficulties are the want of suitable grounds large enough to make agriculture the main feature of exercise and labor for patients ; we need, too, a proper building, so that we could classify our patients, and as well restrain those who we often find need it.

We have had no subscriptions raised for our work since its commencement, when our committee raised some three thousand dollars ; the government giving one thousand dollars for two years and eight hundred dollars for the rest. So it will be seen that we have been economical in our expenditures, or else our Home must have been shut ere this.

We are looking forward to the passage of an act by our provincial legislature this winter appropriating a part of the license, and a part of the fines from drunkenness. With these aids we expect to have a large building commensurate with our wants, etc.

DR. CORNELL read a short paper on the "Relation of Inebriety to Epilepsy," which was discussed by Drs. Parker, Chenery, and Day.

Dr. Parrish moved that all other papers be announced by title, and the reading deferred. Carried.

The papers so read were as follows :

"Mental Strain and Heredity a Cause of Inebriety," by
DR. B. N. COMINGS, New Britain, Conn.

"Psychological Nature and Significance of General Paralysis Induced by the Use of Alcohol, and its Pathology," by
DR. E. C. MANN, Sunnyside, N. Y.

"Advantages of Hospital Treatment in Opium Cases," by
DR. C. T. WIDNEY, St. Louis, Mo.

"Hygienic Treatment of Inebriety," by DR. ALBERT DAY,
Boston, Mass.

Dr. Parrish offered the following resolution :

Resolved, That a committee, consisting of the President, the two Secretaries, and two other members be appointed by the President, to be called a Standing Committee ; who shall arrange for an adjourned meeting of this Association, to be held in New York City on the third Tuesday of October, 1878, and that said committee proceed at once to secure the coöperation of physicians and others in the prosecution of the work, on the basis of the declaration of principles, and submit plans for the better organization of the Association.

Carried.

The President appointed Drs. Parker, Day, and Comings on that committee.

Dr. Parrish, from the committee on resolutions relating to the death of Dr. Daniel G. Dodge, reported as follows :

"Mr. President and Gentlemen of this Association:

"In the death of Dr. Dodge we have sustained a great loss. He was associated with us from the beginning of this Society, and present at nearly every meeting. He occupied many places of trust and responsibility during his life, both as a superintendent of the Binghamton Inebriate Asylum, and as member of the legislature of his State, and as a representative of our Association abroad, etc., all of which he filled with honor to himself and friends. Born in April, 1825, he died Dec. 30, 1877, in the fifty-third year of his age, honored and respected by all.

"I therefore move the following resolutions :

"Resolved, That in the death of Dr. Daniel G. Dodge, this Association has lost a most valuable co-laborer and friend.

"Resolved, That the services which he rendered to the cause both in this country, and as a commissioner from this body to England, are

worthy of suitable commemoration and record, and that the standing committee be requested to cause such commemorative record to be made.

Resolved, That it is due to the stricken family of our late friend and co-laborer, that they should receive from this Association a full expression of the warm sympathy and regard which is hereby most freely communicated to them."

Carried.

The President appointed Drs. Day, Crothers, and Rev. Mr. Willett, a nominating committee.

Dr. Parker made some remarks on the purposes and object of the Association.

Dr. Day, in behalf of Washingtonian Home, invited the members and their friends to an excursion to Nahant and dinner, also to a reception in the evening at the Home.

Accepted.

The committee reported the following officers for the year, all of which were unanimously elected :

For *President*,—Dr. Willard Parker of New York city ; for *Vice-Presidents*,—Dr. Albert Day, Boston, Mass., Dr. B. N. Comings, New Britain, Conn. ; for *Secretary*,—Dr. T. D. Crothers, Hartford, Conn. ; *Secretary for Foreign Correspondence*,—Dr. Joseph Parrish, Burlington, N. J.

Dr. Parrish moved that the thanks of this Association be given to Dr. T. S. Mason, our retiring President, for the able and impartial manner in which he has presided over the deliberations of our Association, and the earnest interest and zeal he has ever manifested in our welfare.

Carried by a rising vote.

The President replied in a feeling manner, expressing regrets that he could not have done more, and assuring the Association of his determination to serve them as well in the future, etc.

Dr. Mattison moved that a vote of thanks be extended to the press and Washingtonian Home for the courtesies extended to us.

Carried.

Dr. Parrish moved that the Association adjourn to meet in New York city, the third Tuesday in October.

Carried.

At 2 P. M. the members and friends, under charge of Dr. Day and Mr. Otis Clapp and others, took the boat for Nahant. The ride down the bay, past the forts and other objects of interest, was exceedingly pleasant, and enjoyed by all.

The dinner at Nahant afforded opportunity for some capital speeches from several of the members, and the ride about the place, and over to Lynn and return by the narrow-gauge railroad, were events that will not be soon forgotten.

The reception at Washingtonian Home was exceedingly pleasant, and consisted of music and speeches from both inmates and friends, on various topics relating to inebriety and its curability, etc., etc.

ADJOURNED MEETING.

The adjourned meeting of the American Association for the Cure of Inebriates convened in the parlors of the Young Men's Christian Association, New York city, October 15, 1878.

The President, Dr. Willard Parker, presided. A number of very prominent physicians were present. On motion of Dr. Parrish, Dr. T. L. Mason was appointed member of the Standing Committee.

A general conversational meeting followed, after which the Standing Committee reported the following preamble, statements, and by-laws which were read and unanimously adopted, and referred to the publication committee :

PREAMBLE.

The *American Association for the Cure of Inebriates* have held nine annual meetings from the time of its organization, November 30, 1870.

At these meetings the disease of inebriety and its relations to individuals, to society, and the state have been freely discussed ; carefully prepared papers have been read, reports and statistics of asylums have also been presented, embracing

the results of practical investigations and studies by numerous observers, all of which have been published, either in full or in part, in the Transactions or Journal of this Association.

This mass of evidence, having been issued in detached parts and at intervals, is not readily accessible to the public; hence it is deemed important that a condensed statement of its conclusions, with the purposes and objects of this Association, be made at this time.

The first declaration of principles of this Association is most emphatically reaffirmed, based on the studies and experience of over thirty different asylums in this country and Europe.

These principles are presented as authoritative, representing the aims and objects of our Association, and also the established facts which will serve as a guide in further research.

PRINCIPLES.

1. Inebriety is a disease.
2. It is curable as other diseases are.
3. The constitutional tendency to this disease may be either inherited or acquired; but the disease is always induced by the habitual use of alcohol or other narcotic substances.
4. Alcohol has its place in the arts and sciences, but as a medicine it is classed among the poisons, and its internal use is always more or less dangerous, and should be prescribed with caution.
5. All methods hitherto employed for the treatment of inebriety that have not recognized the disordered physical condition caused by alcohol, opium, or other narcotics, have proved inadequate to its cure; hence the establishment of HOSPITALS for the specific treatment of inebriety, in which such conditions are recognized, becomes an urgent demand of the age.
6. In view of these facts, and the signal success of the treatment in inebriate asylums, this Association urges that every large city should have its local and temporary home (or hospital) for both the reception and care of inebriates; and

that every state should have one or more hospitals for their more permanent detention and treatment.

7. Facts and experience indicate clearly that it is the duty of the civil authorities to recognize inebriety as a disease, and to provide means in hospitals and homes for its scientific treatment, in place of the penal methods of fines and imprisonment hitherto in use, with all its attendant evils.

8. Finally, the officers of such hospitals and homes should have ample legal power of control over their patients, and authority to retain them a sufficient length of time for their permanent cure.

BY-LAWS AND REGULATIONS.

The officers of this Association shall consist of a President, two Vice-Presidents, a Recording Secretary, Treasurer, and a Secretary for Foreign Correspondence.

All of these officers shall be elected annually, and their duties shall be the same as those which appertain to similar offices in other scientific associations.

MEMBERS.

The members of this Association shall consist of physicians, superintendents, and delegates from boards of directors of inebriate hospitals, and reputable physicians; also, all others who may be interested in the study of the disease of inebriety, and of all proper efforts to bring about a coöperative public sentiment and jurisprudence.

PERMANENT MEMBERS.

Permanent members must be proposed to some member of the Standing Committee, and by such member to the chairman of that committee, at least two months before the annual meeting. The person so nominated must receive a majority of the votes of the committee before he can be presented for election to the Association, which election shall be by a majority of ballots. When elected, each member shall affix his name to the declaration of principles and by-laws, and pay to the treasurer of the Association five dollars annu-

ally, which will entitle him to a copy of the QUARTERLY JOURNAL OF INEBRIETY for the year in which the dues were paid.

MEMBERS BY INVITATION

may be made at any regular meeting by vote of the Association, and such members may participate in the discussions, and, by permission, read papers, but may not vote.

Delegates shall be entitled to the same privileges, but shall be accepted on presentation of proper *credentials* without vote of the Association.

Failure to pay the annual dues three months after the regular annual meeting in each year will forfeit the membership of all who so fail.

COMMITTEES.

The President shall appoint annually two regular members of the Association to act with the officers as a Standing Committee.

To this committee the credentials and names of all nominees for permanent membership shall be submitted, together with such other general business as may be referred to them by the Association.

The President shall appoint, from this committee, two members, who shall, with the secretaries, constitute a *Publication Committee*, and have the full charge and management of the QUARTERLY JOURNAL OF INEBRIETY.

The President shall also appoint from the Standing Committee a Sub-committee of Arrangements, who shall arrange for the time and place of the Association meetings, and such other business as may be referred to them from time to time.

The Standing Committee shall have the power to organize *Branch Associations*, and arrange all matters pertaining to their representation in the Association.

MEETINGS.

A regular meeting of the Association shall be held annually, at a time and place appointed by vote of the Association.

The President, with consent of the Standing Committee,

may call a special meeting at any time for the consideration of any business that may be deemed necessary—notice of the business being given in the call.

Papers to be read at any of the meetings of the Association shall be submitted to the Publication Committee at least one *month* in advance of the meeting at which they are to be read, for the purpose of classification and arrangement.

Such papers are to be considered the property of the Association until published in the JOURNAL, and are to appear in no other form before publication in the JOURNAL, unless by vote of the Association.

The President appointed on the Publication Committee, to act with the secretaries, Dr. T. L. Mason and Dr. B. N. Comings.

Dr. Mattison moved that Dr. T. L. Mason be appointed delegate to the British Medical Association; also, that the President have power to appoint a substitute. Carried.

The President, in some remarks on the necessity of preparing papers in advance, submitted a list of topics, which he invited members to select from for future meetings.

A paper by Dr. B. N. Comings of New Britain, Conn., "On mental strain and heredity a cause of inebriety," was read by Dr. Parrish in the absence of the author.

A very general discussion followed the reading of this paper, which is omitted for want of space.

Mr. Willet moved that this Association hold its annual meeting in New York city. Carried. The President appointed Drs. Mattison and Mason on the Committee of Arrangements.

Dr. Mattison moved to adjourn to the second Tuesday of May, 1879. Carried.

T. D. CROTHERS, *Secretary.*

A medical writer of some note has lately endeavored to show that the greater prevalence of general paralysis in England was due to the use of beer, while the immunity of the Irish people was due to their preference for good whiskey.

THE PROCEEDINGS OF THE FRENCH MEDICAL
TEMPERANCE SOCIETY.

This association has organized itself into an international congress, and had five different meetings, in which the clinical questions relating to alcohol and its effects on individuals and the race, have been discussed at length, illustrated by experiments, etc.

The last meeting was held in Paris, August 27 and 28, 1878. The French government appointed delegates from the Departments of State, of Finance, of the Army and Navy, and from that of Public Instruction. Foreign delegates were present from Belgium, Spain, Egypt, Rome, South America, and Col. Gerard, of the United States Army, represented America.

Most of the topics to be discussed were announced previously, so the work of presenting them was greatly facilitated.

The first topic *was a study of the experiments made upon animals, testing the toxic power of different alcohols and brands commonly used.*

These experiments have been going on a long time (sustained by the liberality of one of the members), and have given rise to very interesting discussions, in which many points have been tested again by other and confirmatory experiments.

These experiments have been chiefly conducted by *MM. Dujardin, Beaumetz, and Magnan*, and the conclusions which they point out may be re-stated thus :

1. That all alcohols have noxious properties.
2. That in the series of monoatomic alcohols, the intensity of the toxic action depends: *a*, on the origin of the alcohols and their atomic constitution; *b*, on their greater or less solubility; *c*, on the decomposition which they undergo by their altera-

tion either in free air or in the economy of the body; *d*, on their mode of administration.

The practical conclusion was, that alcohol made from wine is less dangerous than that from potatoes and other substances; the former represents ethylique, and the latter beetylique or amylique, alcohol, etc.

Dr. Magnan read a paper on *the action of absinthe and alcohol*, which he has very kindly contributed to this number of the JOURNAL.

In the discussion which followed by *MM. Hoeck, Rabuteau, Bergeron*, and others, opinions were divided as to the frequency of these accidents, in the more wealthy class, compared with the poor. Many interesting facts were elicited, which we hope to publish in future numbers of this JOURNAL.

The second topic *discussed the means and methods for recognizing the nature and quality of the alcohol contained in the brandy in common use as a beverage.*

This question could not be decided, although many experiments, by a large number of physicians and chemists had been made to throw light on this subject; yet it was determined by the congress to take up this subject in special meetings in September and October next.

The third topic presented for discussion was *the comparative statistical researches of the extent and danger to both state and nation, from the abuse of different kinds of alcohol.*

This topic was discussed at great length. M. Lunier, whose valuable studies in this field have been published in this journal, repeated his conclusions, which were, principally, that the kind and quality of the alcohol consumed in France could be traced in the statistics of insanity, criminality, and deaths from suicide, etc.

This was confirmed by the observations of M. Baër of Berlin. M. Barella of Brussels, also confirmed this testimony. He urged that a stricter sanitary control be given, and that education was a great means of prevention; he observed that the use of alcohol was growing in both Prussia and Belgium, but that in France, according to army statistics, it was diminishing.

The last day's meeting was *devoted to the means proper to prevent and repress the abuse of alcoholic drinks.*

The following statements were unanimously adopted :

Seeing that it is demonstrated in many ways, beyond doubt, that the abuse of different kinds of alcohols produce toxic phenomena, augmenting or diminishing, depending on the presence of certain alcohols ; seeing that these questions demand a long and profound study, the international congress convened for this purpose desire to express the following as its wishes : 1. That the governments have a duty not only to repress by legislative measures the abuse of alcoholic drinks, but also to make the brandies for consumption as pure as possible. 2. That a commission be nominated for the purpose of gathering all the facts relating to the study of alcoholism, and the means for treating it successfully.

Also to call a new congress, which shall be represented by all countries, whose time of meeting shall be fixed hereafter.

Acting on this suggestion, an international congress was appointed, to meet in Stockholm next year.

NOTE.—This congress should be represented by our government, and this effort to have international conferences be encouraged. This subject has become one of national importance as a sanitary and economic measure, and the time is not far distant when it will be universally recognized.

It should never be forgotten that a large number of cases of inebriety come on insidiously, and for a long time pursue a silent course before any alcoholic poisoning is manifested. Then unexpectedly they become intoxicated, and throw off all disguise.

On the first evidence of moderate drinking, they should come under medical care and surveillance, then curability and prevention is comparatively easy and certain.

Abstracts and Reviews.

PSYCHOLOGICAL PROGRESS OF INEBRIETY.

How often, for instance, one sees a truly brilliant man undergo a series of painful mental changes directly due to excessive and injudicious indulgence in alcohol! The ready writer, the bright and witty talker, the man of natural æsthetic tendencies, with a powerful memory and a gift of ready application, has the higher mental faculties in constant operation. He is swayed by changing emotions, and the influence of all forms of excitement, whether emotional, social, or alcoholic, is to intensify, for the time being, the activity of his naturally unstable intellect. When brought into contact with others who manifest the same intellectual tendencies, he has a natural pride in the superiority which secures for him the admiration of persons whose judgment he values; and when exhaustion follows effort, he succeeds in stimulating his weakened powers by alcoholic drinks. For a considerable time, perhaps, while the digestive system remains in such a healthy state as to insure the supply of proper solid nutriment, this course is pursued with an appearance of success; but soon the urgent symptoms of indulgence begin to manifest themselves. The mind, unaided by artificial stimulus, becomes barren and unproductive. Sentences are written that appear to have no point, and jokes are uttered which are destitute of humor. The man who was accustomed to write with speed telling criticisms and pointed epigrammatic sentences, has a consciousness that his mind has become incapable of sustained effort, and that his writing is dull and insipid; a feeling which contrasts strongly and painfully with his previous cheering sense of power and fitness. Under the influence of an alcoholic stimulant, he finds that, for a time, at least, he can command his intellect. But the control

is only a temporary one, and is followed by a greater sense of exhaustion than otherwise would have been experienced. Memory, not so much for passing events as for facts, passages, and references which had been readily acquired, begins to become weakened, and the misery resulting from the loss of a reputation for, and consciousness of, intellectual power supplies a new incentive to excess. Not unfrequently "petit-mal" and attacks of simple vertigo ensue, still showing that the most highly specialized regions are as yet alone affected. At this stage no one could, as yet, be regarded as insane, though as great a change of function has relatively taken place as leads, in the more lowly-organized mind of the pauper, to the display of delusions of suspicion and hallucinations of the senses. After this, however, if alcoholic indulgence is continued, the ordinary symptoms manifest themselves. Irritability passes into suspicion; voices are heard, illusions experienced; and the mind, becoming prone to reverie, finds for itself a new and insane sphere of existence. Intellectual helplessness and physical changes advance. One limb may become weak, one pupil may dilate, and, if excessive, or even moderate, drinking is still indulged in, the victim has no other prospect than to end his days in a state of degraded dementia and muscular paralysis from progressive brain-softening.

DR. LAWSON, "IN THE BRAIN."

ALCOHOL PHYSIOLOGICALLY.

Sober reason would tell us that alcohol, largely used, would destroy health and life, if we had never seen a single instance of health and life destroyed by it; because, in our observation, we know of no element necessary to the health of the human body which would not subvert that health if used largely, or exclusively, in its concentrated form. Sugar, its hydro-carbon, is essential to life, and more or less of it is found in every article of food; the same with starch; but either of these articles, alone, or in aliments mainly made up of them, will not sustain health long, and why should we

suppose alcohol would be an exception to an otherwise universal law?

Nature has formed no element in its purity which is necessary to physiological life; and we have no reason to suppose that such pure element would contribute to human health, when artificially fabricated. . . . If any elementary substance, in its purity, destroys life if used alone, it is reasonable to conclude that the only safe method of using any elementary substance is, in using it in the proportion in which nature has combined it with other materials; therefore, that however essential to existence hydro-carbon may be, it is not healthful or safe to use it in its concentrated, artificial combination; but only healthful and safe in deriving our supplies of it, as contained in our natural food. Therefore, we consider that alcohol is not essential to health; that it is not promotive of the health of those who are well; and that in proportion as it is used, largely or alone, in such proportion is it, like all other elementary concentrations, certainly destructive of health and life together.—*Hall's Journal of Health.*

INEBRIETY AND CANCER.

In a recent discussion by the St. Louis Medical Society of the relation of cancerous to other diseases, published in the *St. Louis Medical and Surgical Journal*, Dr. Hughes remarked: In families in which insanity is hereditary, in which almost all the members manifest a tendency to epilepsy, inebriety, or mania, where one member escapes these, it is not infrequent to find him attacked with cancer. Dr. Richardson of London, regards it as plausible that the cancerous diathesis is in some way connected with neuro-pathology, and it is not by any means improbable. In the etiology of certain nervous diseases, there is much that is similar to that of cancer. The children of eccentric parents may evince a decided tendency to insanity; these manifestations will, possibly, not be developed by the next generation, but break out in decided mania, incited by some slight strain which an ordinarily healthy person would resist.

In looking forward or backward in the study of the insane diathesis, and failing to find any neurotic derangement in either the ancestry or posterity, we may discover some form of cancerous affection.

If it were true, as has been stated, that cancer is a blood disease, why is it that children, in whom this fountain source is poisoned by descent from tainted parents, so often escape, whereas this is a characteristic of disease of the nervous system?

HEREDITY OF DIPSOMANIA.

The passion known as dipsomania, or alcoholism, is so frequently transmitted that all are agreed in considering its heredity as the rule. Not, however, that the passion for drink is always transmitted in that identical form, for it often degenerates into mania, idiocy, and hallucination. Conversely, insanity in the parents may become alcoholism in the descendants. This continual metamorphosis plainly shows how near passion comes to insanity, how closely the successive generations are connected, and, consequently, what a weight of responsibility rests on each individual. "A frequent effect of alcoholism," says Dr. Magnus Huss, "is partial or total atrophy of the brain; the organ is reduced in volume, so that it no longer fills the bony case. The consequence is a mental degeneration, which, in the progeny results in lunatics and idiots." Instances are many—our space will only furnish mention of few. A Russian family, father and grandfather, died prematurely from effects of strong drink, the grandson at five years of age manifested a liking. An educated gentleman charged with important functions concealed from the world his drinking predilections; he had five children, only one lived to maturity, and he at the age of nineteen was sent to an asylum.

A man from the laboring classes died of alcoholism, leaving seven children, the first two of which died at an early age of convulsions, the third was insane at twenty-two, the fourth fell into the lowest grade of idiocy, the remaining

members were sufferers from hysteria and intermittent attacks of insanity, etc.

Dr. Morel speaks of a family, the great grandfather died from effects of intoxication, the grandfather died a maniac; he had a son subject to hypochondria, and of homicidal tendencies, and his son was idiotic.

Quite recently, Dr. Morel proved the hereditary effects of alcoholism in the "children of the Commune." Out of 150 children from ten to seventeen years, most of them taken with arms in their hands behind barricades, on their depraved physiognomy is impressed the threefold stamp of physical, intellectual, and moral degeneracy.

RIBOT, *on Heredity.*

INEBRIETY A DISEASE, NOT A CRIME.

Let us examine how the law treats the drunkard. By permitting the manufacture and sale of vilely adulterated liquors, poisonous mixtures, and treating the victim of alcoholic disease as a criminal! It is a well proven fact that the drinker is a diseased person; that in its course it tends to destroy the functions of the nervous system especially, and thus undermine the whole system; above all, the mind. The poor unfortunate drunkard is arrested for the boisterousness and pugnaciousness produced by the diseased state of his cerebral circulation due to alcohol; and, if he be sufficiently fortunate to escape a clubbing, is thrown into a cell to await either soberness, fine and discharge, or other punishment, or death from cerebral congestion or hemorrhage, instead of being taken to the hospital and treated as a sick person.

We notice the subject of drunkenness is being seriously considered in England in relation to its prevention and treatment by the law. To us the answer seems very simple—education of the rising generations and legal regulation of the purity of the liquors manufactured for the first; while care of the inebriate as a diseased person will surely meet the second indication in a humane and philosophical manner. Prohibitory laws and severe penalties can only work harm at every point.—*Med. Record.*

PHYSIOLOGY OF DELUSIONS IN INEBRIETY.

The principle is, that in all cases where the brain-tissues, while retaining, to a considerable extent, their integrity of function, do not receive their proper and sufficient supply of nourishment, delusions of suspicion are apt to occur. Take, as a typical case, the conditions of the mental functions in old age. The advanced senile dementia has no delusions of suspicion; but the patient in whom brain-wasting has made less progress, and in whom the physiological tendency to decay is supplemented by privation, shows marked delusional suspicions. He thinks that his friends are "against him;" that they drug his food, lay plots for the subversion of his interests, or long to be free from the responsibility of his maintenance. The pathological condition, in such a case, is one which is the result of a physiological diminution of cerebral nutrition. The heart's action fails, the vessels lose their elasticity, the cerebral tissues participate in the general diminution of functional activity and the diminished *a fronte* combines with the diminished *a tergo* force in reducing the supply of blood. To a certain extent, the same pathological condition exists in chronic mania from alcohol. The heart's action is often weak, the abdominal organs often fatty, and the cerebral vessels, especially the smaller branches, are atheromatous, tough, and unyielding. A general tendency to connective-tissue degeneration not unfrequently leads to increase of the neuralgia to the detriment of the proper nerve elements. Similarly, where degraded habits have led to anæmia and cerebral irritability, the same symptoms of mania, of suspicion occur; and even in simple cerebral exhaustion, as from over-work, timidity, irritability, and suspicion are apt to show themselves as representatives of the mania which might ensue if proper precautions were not taken. Frequently, also, in the earlier stages of general paralysis, when alteration of character is first observed, ungrounded suspicions of relatives and friends are manifested. The method of production of these delusions of suspicion seems to be that the modifications in the nature and regularity of the nutrient supply of the brain-cells keep them in a state of excitability,—in a con-

dition, so to speak, of dissatisfaction. Now what are the proverbial effects of hunger, regarded as a general condition? Irritability, excitability, a tendency to put the worst interpretation upon men's motives and actions, and a propensity to hallucinations of the special senses. The very symptoms occurring during sound bodily health are evidently due to the state of the brain-centers as modified by want of food, and by reflex excitability. Consequently, it is natural that an exaggeration of this condition should result from such an habitual existence of mal-nutrition as accompanies the organic changes consequent upon the prolonged abuse of alcoholic stimulants.

I have spoken of this condition of chronic alcoholic mania as one which remains almost stationary; but it must be remembered that one condition absolutely necessary for the arrest of the progress of such a disease is abstinence from the stimulation which induced it. It unfortunately happens that, in many cases, the first signs of the accession of this mania are not regarded, and the alcoholic, scarcely recognized as being in a critical state, continues his excesses. The pauper patient,—usually of comparatively low mental capacity and meager education,—when he begins to manifest symptoms of alcoholic mania, soon develops them to such an extent as to render his recognition as a lunatic imperatively necessary. It is different, however, with the professional man, the artist, the journalist, and the intelligent man of business. The working man's animal propensities usually lie near the surface; his mental operations are less highly specialized than those of the man of refinement, consequently alcoholic changes in cerebral nutrition develop in the latter an initiatory series of symptoms which are not present in the former.—DR. LAWSON, *The Brain*, No. 11.

OPIUM MANIA.

The term "opium-mania" should be restricted to those cases where mental aberration has resulted from long indulgence in opium, its preparations or salts. Even here some

doubts exist as to the propriety of its use, since the insanity which it causes is not a specific form. It consists more in moral, emotional, and impulsive perversion, than in marked intellectual derangement. . . .

There may, undoubtedly, be found exceptional cases of habitual alcoholic indulgence for many years without apparent harm to the organism. But it has not been proven that the descendants do not suffer in impaired nerve-stamina; on the contrary, insanity, idiocy, epilepsy, hereditary inebriety, and other forms of nervous disorder, are the common congenital entailment of alcohol. I am inclined to believe that similar disorders of the nervous system, but more especially chorea, hysteria, and various intellectual eccentricities in the offspring, may have their starting-point in the acquired nerve degeneracy of the parent who has indulged long in opium; but the data are too meager on this point to make its further discussion profitable. I feel safe in saying, from what I have observed of chronic opium-poisoning during the past ten or twelve years, that its effects on the organism of the habituate and his descendants, are not usually so profoundly structural as those of alcohol.

The dominion of opium is much like that of alcohol. There are those who, by reason of a perverted system, founded far back, it may be, in ancestral disease, take to this drug, after having once felt its effects, as an aquatic animal seeks water. There are others who, after long indulgence and gradual damage to their system, come, by degrees, to feel the need of it as they would of an anodyne or an anæsthetic for neuralgia. The gratification of the desire after the morbid state of the system is established is as natural as the withdrawal of the hand which, unawares, gets into the fire, and almost as instinctive. The disordered brain and sympathetic system cry out for help, and any relief, in whatever shape it may come, is welcome. The victim of opium will, in a case of necessity, take alcohol in lieu of his favorite drug, and the drunkard will exchange his accustomed drink for opium. Anything in the shape of a stimulant will, for the moment, suffice, so that it be in sufficient quantities to

appease the morbid feeling and give a temporary tone to the unstrung system. . . .

The morbid changes which take place in the nervous system in consequence of slow opium-poisoning are rather inferable from symptomatic evidence than demonstrable by discovered pathological changes of structure, and they appear not to be so great or permanent as those of alcohol. Recovery takes place sooner after long use of opium than after confirmed inebriety, and is generally more permanent. Alcohol is undoubtedly more destructive to the bloodvessels and structure of the brain, and to the structure of the stomach and liver, than opium. I never heard of a consumer of pure opium dying of apoplexy or cerebral softening. . . .

The withdrawal of opium has revealed, in different persons, almost every conceivable lesion from cancer, neuralgia, gastralgia, and other painful affections preceding its use, to ulceration of the bowels, insanity, convulsions, and dropsical affections which had not existed before. . . .

Many a drunkard has abandoned alcohol for laudanum and valerian, and made in consequence, for a brief time, a more agreeable and useful member of society; but it was but the exchanging of a miserable reality for an agreeable delusion; the delusion proving in the end a snare and a mocker.

The imperious character of the thralldom of opium, in the advanced stage of the habit, has an important medico-legal significance which it is the duty of physicians to understand. . . . DR. HUGHES, *St. Louis Medical Journal*.

A moderate drinker who exhibits disregard for external appearances, and increasing confidence in his power of self-control, is in the incipient stage of inebriety, and growing worse every day. Such persons should be removed at once from all associations and surroundings which may foster this morbid condition.

The Brain: a Journal of Neurology. McMILLAN & Co.,
20 Bond Street, N. Y.

This is a strong, vigorous journal, that gives promise of occupying a very important position in the future. The editors are among the most distinguished Alienists in England, and the articles of the first two numbers fully confirm the reputation of the authors. To the student of Neurology, this is evidently a quarterly that must be read by all who would keep up with the researches in this field.

The following are the titles of some of the papers in the July number:

"Reflex Action as a Cause of Disease and a Means of Cure." By Dr. T. L. BRUNTON.

"Symptomatology of Alcoholic Brain Disorders." By Dr. ROBERT LAWSON.

"Neurosal and Reflex Disorders of the Heart." By Dr. J. M. FOTHERGILL.

Other important papers are presented in the October number.

Temperance in Politics, and Politics in Temperance.
By Dr. ALBERT DAY, Boston, Mass.

This is an important contribution to this topic, which was read before the Massachusetts Total Abstinence Society, October 3, 1878. We commend it to our temperance friends, as worthy a careful perusal.

The National Quarterly Review. D. A. GORTON & Co.,
Publishers, New York City.

The October number is before us, and its contents are, as usual, solid and instructive. We commend this Quarterly for its independent liberality; it should be on the table of all who would keep up with the times.

Delire des Persecutions. LECON DE M. MAGNAN, d l'Asile Sainte-Anne, Paris.

This Brochure is a curious and valuable contribution to the subject of delirium ; many of the cases mentioned came from the use of alcohol, and consequently are of great interest as studies of particular phases of inebriety.

POPULAR SCIENCE MONTHLY FOR DECEMBER, is an excellent number. Many of its articles are exceedingly valuable. There is no other journal published which maintains so uniformly a high standard of excellence in the solid character and attractiveness of its contents. Such a journal as this has become a necessity to every thinking man, as much so as the daily newspaper, and cannot be dispensed with.

Nova Scotia Inebriate Home, Dartmouth, N. S., 1878.
H. K. NEAL, Superintendent.

The third annual report of this asylum indicates a very prosperous growth, both in numbers and finance, during the year. Seventy-eight patients have been admitted, most of whom were sent from the police station, and fully twenty-two per cent. of this number have been cured or restored, and a large per cent. of the balance greatly benefited.

The Board of Charities and Correction for New York city report twenty-one thousand commitments for drunkenness and petty crimes during the past year. These commitments represented only four thousand persons, showing an average of four commitments to each person, and over two-thirds of which were inebriates.

The cost to the city of these commitments was over four hundred thousand dollars, estimated at twenty dollars each ; and this represents the economy of the penal treatment of inebriates.

Editorial.

FOURTH REPORT OF THE SELECT COMMITTEE OF THE HOUSE OF LORDS ON INTEMPER- ANCE.

The fourth report of this very important committee was laid before the House of Commons August last, and ordered to be printed. Like the third report, which we noticed in the JOURNAL of March last, it contains the testimony of many eminent physicians and magistrates on the cause and prevalence of inebriety, but is less valuable scientifically than the other reports.

The testimony of Sir Henry Thompson, Drs. Bernay and McCulloch, contributes but little that is new to the subject.

Dr. Richardson's testimony is, as usual, full and explicit, and is chiefly a re-statement of his views and the reasons for them. Other evidence details the views of non-professional men, all valuable as a whole, separately of but little interest.

THE BOSTON MEETING.

The ninth annual meeting of our association at Boston, was replete with interest, and indicated a decided advance in many important phases of this subject.

Several very carefully-prepared papers were read, and the discussions which followed were clear and suggestive. Dr. Beard's paper, which we publish in this number, opened up a new field, and attracted much attention. Dr. Chenery's paper grouped in a pleasing way much of the late researches into the action of alcohol on the body. Dr. Mattison discussed very clearly the action of bromide of sodium in opium cases, making many valuable suggestions. Dr. Crothers's paper

"On Criminal Inebriates" brought out a very general discussion on this topic. Mr. Willett's paper on "Fact and Fiction" grappled fearlessly with some of the objections to the treatment of inebriety as a disease. The remarks of the President, and report of Dr. Parrish, were of unusual interest, as exhibiting what had been done in this country and Europe during the present year.

Speeches by Drs. Parker, Day, and others, at the reception given by the *Washingtonian Home*, were excellent and elicited hearty applause.

The social event of the meeting was the excursion to *Nahant*, given by the officers and managers of the *Washingtonian Home*. The ride down the bay, the dinner at Nahant, and the delightful carriage drive over the romantic beach to Lynn, and back to Boston, along the shore of the bay, were keenly enjoyed. To Dr. Day and Mr. Clapp, the Association are under many obligations.

The adjourned meeting at New York, to arrange a more permanent basis of organization, was prominent in the earnest work, and determination of the Association to enlist a wider general interest of the public in the study and scientific management of inebriety.

The statement of the principles of this association was deemed expedient, although re-affirming what had been declared many years ago. The regulations and by-laws were changed to meet the demands for a more permanent organization, and the price of the *JOURNAL* was reduced to two dollars a year, with a view to a larger general circulation.

Dr. B. N. Comings's paper "On Mental Strain a Cause of Heredity" was a very thoughtful, suggestive one, and drew out many commendations.

The election of Dr. Parker, and the clearer statement of our principles, with a more thorough organization, is a promise of greater usefulness and study in this field; and altogether the Association may be congratulated on having gone on steadily through good and evil report, working out this problem, until it is now recognized as one of the great forward movements in the humanitarian progress of the age.

CORRESPONDENCE.

Some person signing himself "A Friend," has sent us Dr. Bucknill's book on Habitual Drunkenness, and a short article by Dr. J. J. Ridge, entitled "The Habitual Drunkard's Bill," inquiring if we *can, or dare, answer these satisfactory objections*. We answer, neither. The subject is too important, and life too short, to go back to establish what is so apparent to all who will examine the evidence at command. Dr. Bucknill's book requires no answer, because it is based on statements that are without foundation. Dr. Ridge's article is equally unworthy of any comment. Any one anxious to understand this subject can find ample evidence in the pages of the QUARTERLY JOURNAL OF INEBRIETY, or in the reports of the different asylums. If they are not satisfied, let them visit any one of the twenty or thirty institutions in this country and study the practical workings on the ground; then they will be able to estimate the value of the statements and arguments used by Drs. Bucknill and Ridge.

 NEW VOLUME.

This number begins the third year of the existence of the QUARTERLY JOURNAL OF INEBRIETY. Beginning in a new field, without precedent, or sympathy, except from a few workers in asylums, it has built up a large constituency of friends and subscribers, representing nearly every State in the Union, and many of the cities of Europe.

The indications are unmistakable that scientific men everywhere are turning to the study of inebriety as a disease, for a solution of the complex problems growing out of the use of alcohol in society and nations.

In this field, the JOURNAL OF INEBRIETY stands alone, with no other purpose or object but to present the results of the increasing studies going on all over the country.

To our friends we present many thanks for their continued favors and kindness, and assure them that with this new volume the subject will be presented from a wider and more practical standpoint.

Clinical Notes and Comments.

INEBRIETY FROM CAVA.

This new remedy, the root of the *Piper methysticum*, according to Prof. Gubler, possesses remarkable inebriating properties. It is formed by maceration of the root, from which follows glucose and an aromatic liquor of sweetish and sugary taste.

The principal symptoms after the mental excitation, is erotism, without priapism. The nervous centers controlling the reproductive instinct seem to be in a condition of genesaic excitation. It is at the same time a diuretic.

The form of alcohol which has this peculiar effect is unknown, but it probably comes from a neutral crystalloid called *kawahine*.

The mind and nervous system seem to be under the control of the sexual organs, particularly filling it with obscene delusions and low thoughts.

The circulation and secretion of the genito-urinary system are profoundly altered, and diseases of these organs, most commonly ending in death, follow.

CURABILITY OF INSANITY.

Dr. Granville remarks, in his "Papers on Mind, Management, and Morals," that—

As a matter of simple fact, however, there can be no more mischievous impression than that which is called "mental derangement," pure and simple, may not be readily prevented, and cannot be easily and safely cured. In six cases out of ten insanity might be prevented at the outset if only there were a little more intelligence exhibited by those who are

beginning to feel the tokens of a weakening power of self-control, which generally takes its rise in some moral delinquency unacknowledged, perhaps unperceived. Eight out of every ten cases of actual insanity may be cured if taken at the very first outbreak of the malady.

NOTE.—The same general remarks very aptly apply in the case of inebriety.—*Ed.*

LEGISLATIVE TREATMENT OF INEBRIATES NECESSARY.

Dr. J. Murray Lindsay, Superintendent of the Derbyshire County Lunatic Asylum, England, in his last report, remarks: That for the proper treatment of dipsomaniacs, insane drinkers, habitual inebriates, or whatever term may be applied to this class, there is a growing and strong conviction on the part of the public and of the medical profession, that some effective legislative provision is necessary for the establishment of retreats, inebriate asylums, or other special institutions for the enforced and prolonged detention of this class, so dangerous to themselves and the cause of so much misery and trouble to all connected with them. In this respect Colonial legislation is in advance of British. In Victoria an act has been in successful operation for the last five years, for the care and treatment of habitual inebriates by granting licenses to *retreats* or *inebriate asylums*.

HEREDITY.*

Thus we have at present at least 3,000 persons in Michigan, in a direct line of insanity alone, whose inheritance, which they leave to their children, is some obscure cerebral change from a perfectly normal and physiological type, which may, on some occasion calculated to bring out the heretofore latent element, or to test the hitherto obscured deficiency, crop out

*From Dr. Hitchcock's Address to State Board of Health of Michigan.

as actual insanity, or, by a metamorphosis of diseased developments analogous to the correlation of forces, give rise to hysteria, epilepsy, idiocy, intemperance, immorality, or crime.

Intemperance may be considered in this connection, both as an effect and as a cause. An inherited neurosis engrafted upon the parent-stock in any one of many ways may give to a person such a sense of exhaustion, such a demand for some nerve stimulant, as to draw him into indulgence in alcoholic drinks with almost or quite irresistible power. On the other hand, a deliberate, habitual, or excessive indulgence in these stimulants will often unquestionably "produce a modification of the *nutrition* of the nervous system, which engenders a physical want, when they are withheld, comparable to that of hunger or thirst," and which results in an inebriate diathesis.

DR. DRYSDALE'S VIEWS ON THE DISEASES OF TOBACCO.

Nicotine, which is contained in infusions of tobacco, is a very deadly poison; and hence chewing, which introduces small quantities of nicotine into the blood by means of the absorbents in the mouth, is likely to cause more rapidly any of the diseases produced by tobacco than smoking. On one occasion, while attending the practice of the London Ophthalmic Hospital, I saw within a short time two cases of atrophy of the disc, of which the origin, in men under thirty, seemed clearly due to the fact that both patients had been continually in the habit of chewing tobacco. Then, with respect to smoking, Melsens, a chemist, collected 30 grammes of alkaloids from 4,500 grammes of tobacco-smoke passed through water. Alkaloids are almost as poisonous as nicotine, and are used by gardeners to kill insects, who fumigate their plants by burning tobacco in closed houses. The effect of smoking is to act on the nerves by absorption of the alkaloids mingled with the saliva of the mouth, and to cause dilation of the small vessels by the paralyzing effect of the drug on

these. Dogs may be killed by giving them quantities of tobacco—of course larger as compared with that taken by persons who chew or smoke. Men who smoke are often plagued with palpitation of the heart, etc. I once made inquiries concerning two hundred patients at the Metropolitan Free Hospital, who were great smokers, consuming at least half an ounce of shag daily, and found that most of them were more or less chronic invalids.

Dr. Kestral, physician to the Royal Tobacco Factory at Iglau, near Vienna, tells of 100 boys, from twelve to sixteen, recently entering the works, 72 fell sick in the first six months. Most of them had symptoms caused by tobacco-poisoning. The work-girls are frequently subject to amenorrhœa, or chlorosis. When pregnant, abortions, caused by the tobacco-poisoning, are frequent among married women; and of 506 births, 206 children soon died, the majority at from two to four months of age, when their mothers returned to the factory and breathed the air charged with nicotine, which poisoned their milk.

The intelligence of young men is greatly affected by tobacco. Bartillion's statistics of the Ecole Polytechnique in 1855, show that 108 of the scholars smoked and 52 did not smoke. Yet, of the first twenty who obtained honors at the school, fourteen were non-smokers and six smokers. This caused the Minister of Public Instruction in France, in 1861, to prohibit the use of cigars and pipes among young students.

GERMAN TEMPERANCE LEGISLATION.

The *Allgemeine Medical Central Zeitung*, August 21st, tells us that the Association of German Alienists have come out squarely in favor of fighting the misuse of alcohol by legislation.

They say sanitary warnings and voluntary combinations, such as temperance societies, have proved inadequate; they have taken measures to bring the subject before the proper governmental authorities, and urge special legislation against "steady drinkers" (*gewöhnheitstrinker*).

Their definition of the term is, "Steady drinkers are those who constantly or periodically yield to intoxication, to the extent of losing, to some degree, their self-control and their capacity of attending to their business; who neglect their duties and become dangerous to themselves and those around them."—*Med. and Surg. Reporter.*

TEMPERANCE SOCIETY AGAINST OPIUM.

The missionaries of Hong Kong and other cities of China, have organized a Temperance Society to combat the evils of opium taking. Already they are publishing and circulating tracts, and attempting to help on the work which the authorities have determined upon. The prohibitory edict of the government to take place in three years, creates but little impression, on either the traders or consumers. It is said that in the city of Soochou, there are over five thousand opium lamps burning in public places of resort, and these are frequented by an average of from ten to fifteen persons daily. If this be true, and represents the use of opium in other cities, we cannot wonder that the government will take active steps to suppress it.

OPIUM-TAKING.

The Richmond Academy of Medicine discussed this subject recently, eliciting many very practical points.

A case was related of a young lady who began to use opium after the prescription of a physician for dismenorrhœa, and continued it until she was hopelessly addicted to its use.

Other cases were related where ovaritis was the starting point; opium being found of value in these cases, was continued by the patient, either with or without the consent of the physician, until they became diseased. Cases of inebriety which had merged into opium-taking, or on the cessation of opium, had begun to use alcohol. Dr. McCaw said restraint in asylums was the only sure treatment for these cases. He

believed a state law should be made for the forcible imprisoning and detention of these classes in proper asylums. Chloral hydrate was recommended to overcome the disorder. Milk and purgative doses of calomel were also urged. The sudden withdrawal of the drug was urged by one physician, and another thought this a great mistake. Cases were cited to prove each theory. Many interesting facts were elicited, after which a committee was appointed to continue investigations in this field.

EARLY CAUSES OF INEBRIETY.

The agents exciting the emotions, and exhausting the nerve forces, and so causing inebriety, are everywhere present in the tremendous activities of our American civilization.

The atmosphere is full of psychological germs, calculated to infect the nervous system, and produce disease. "Hopes and fears, appealing to the deepest motives of our nature; political excitement, producing tumults of passion, and bitter feeling; commercial waves of good and bad fortune, causing alternately intense joy, and as intense disappointment and chagrin;" these are some of the dangers breaking up the healthy mental equilibrium, and increasing the perils of every life. It is in this atmosphere that *inebriety* begins and goes to full development, standing out in lurid relief with our boasted civilization.

Ninety-six replies were received from inquiries addressed to prominent physicians in Michigan, by the State Board of Health, which indicated that there were thirteen hundred and thirteen confirmed opium-eaters in the State that were known. This included both sexes, and represented all conditions and ranks of society.

This, in all probability, does not include every case; and if it be taken as an indication of the prevalence in other States, the disorder of opium-eating has assumed great proportions.

MEDICAL USE OF ALCOHOL.

Medical men who have become enthusiastic as to the possibilities of alcohol, have not unfrequently prescribed it for every condition of exhaustion for a long time. The results, in many cases, have been a possible transient good at the expense of propagating another disease more intractable and disastrous than the one they sought to relieve.

The frequency of inebriety arising from such causes has brought out a special medical declaration in England, signed by most of the leading physicians and surgeons of the kingdom, calling attention to the belief that the inconsiderate prescription of large quantities of alcoholic liquids by medical men, for their patients, gave rise to intemperate habits, asserting that alcohol, in whatever form, should be prescribed with as much care as any powerful drug, and that the directions for its use should be so framed as not to be interpreted as a sanction for excess, or necessarily for the continuance of its use when the occasion is past. Bad results are not always clearly traceable, and do not follow in every case, or even in a progressive order, and hence are doubted. . . .

The disease of inebriety may be compared to malaria, which having once pervaded the system, leaves a peculiar predisposition, which only awaits a train of exciting causes to spring into activity.

Inherited conditions of organism may exist which give direction to weakened functional activities, exploding in inebriety, with great certainty. The medical prescription of alcohol, to such persons, becomes the exciting cause, awakening and fixing conditions which may not break out at once, but sooner or later will be manifest.

It is a fact well established in medicine that certain not well-defined states of the bodily organism decidedly contraindicate the use of particular remedies. This is manifestly so in the use of alcohol in many cases, particularly when there exists in the history indications of neurosal degenerations, or decided inebriate tendencies, or conditions of functional disorder, which are susceptible, and likely to take an organic disease. Anæmia, neurasthena, and neuralgia,

and some conditions of rheumatism, also asthetic diseases, belong to this class, and are often developed into diseases by alcohol. Where alcohol is given medicinally any length of time, the danger is greatly enhanced. T. D. C.

THE CARE OF INEBRIATES.

It is the duty of every community to provide means to suitably care for and protect the inebriate; and in order to secure this end and the greatest relief to community, it is indispensable that institutions for their exclusive care and treatment be provided.

It is a great injustice, except from extreme necessity, and as a temporary arrangement, to confine such persons in almshouses or institutions with those afflicted with disease, or confined for misdemeanors. A very large majority of all inebriates can nowhere else be so successfully cared for and made comfortable, if not cured, with equal protection to both the community and the patient, as in well-arranged asylums provided for their especial treatment. It is a measure of the most enlightened economy, and one that will be felt by every tax-payer, to provide and maintain such asylums and hospitals in every city and State of the Union.

I think that inebriates who have gone so far as to have lost all self-control, and in their downward career hinder their usefulness in life, make shipwreck of the happiness and the material welfare of their families, disgrace their relatives, and are hastening their own deaths, should be shut up as imbeciles in reformatories.—*Dr. Ogston.*

The peculiar nature of inebriety, afflicting both mind and body, renders it necessary to provide asylums or hospitals especially adapted to meet the wants and claims of this class; the arrangement of such hospitals, their management and discipline, will vary from all others.

FATALITY AMONG INEBRIATES DURING
EPIDEMICS.

The recent outbreak of cholera in Asia, with its extreme fatality, recalls the distinctive mortality among inebriates which has characterized the march of this and other epidemics in modern times.

We select illustrative statistics of the cholera epidemic of 1832. In St. Petersburg, out of 10,000 deaths only 145 were known to be temperate; in Moscow, only 2 out of 6,000 cases were temperate. This fact so alarmed the citizens that nearly all the population ceased to use alcohol; of 30,000 victims in Paris, nearly every one used alcohol, in some form, to excess; nine-tenths of those who died in Poland, were of this class. In some towns *every* inebriate was swept away. In Tiflis, *every* drunkard died. In the Park Hospital of New York city, only 4 persons were temperate in 200 fatal cases. In Albany, there were only 7 out of 326 fatal cases who were not inebriates. In the late epidemic of yellow-fever in the South, the percentage of victims among inebriates was nearly as large. These are not extraordinary facts, but follow, naturally, the degeneration produced by alcohol, and are readily explained by the low vitality and lessened power of resistance to toxic forces and agents present in every inebriate. Most unfortunately, this condition is not realized by either the patient or friends until it is too late. The continued use of alcohol keeps up the delusion of strength and vigor; but with the onset of disease all is thrown off, and only the physician and surgeon can realize their hopeless condition.

Dr. Myers, in the *Medical and Surgical Reporter*, says of dipsomania, that there is no form of nervous exhaustion more severe in its character than that which is induced by the abuse of stimulants. A sudden and violent fit of drinking of course shakes the nervous system very much, and if frequently repeated, reduces the nervous power materially; but, bad as these effects are, they are slight compared with the profoundly exhausted state of both the cerebro-spinal and sympathetic systems which the continuous use of stimulants in excessive quantities produces.

ON TOBACCO DEAFNESS.

Tobacco must be classed with alcohol. Like it, even in small quantities, it causes marked functional disturbance in the organs of hearing. Often deafness depends entirely on its use. Its effects are most marked on the middle ear, the muscles of the palate, and on the nerves of these regions. Smoking is, in this respect, more injurious than chewing or snuffing. Those who expel the smoke through the nostrils bring it in direct contact with the Eustachian tubes, so long as they remain unclosed. If the smoke be forced through a cambric handkerchief, the solid particles it contains will form on it a dark stain. These particles adhere to the mucous membrane, as is proved by the fact that the odor remains in the breath long after the person has ceased to smoke.

The angina of smokers is characterized by swelling, redness, dryness, and insensibility of the mucous membrane of the palate and the pharynx. The redness is not that of an acute affection; it is a congestion, rather than an inflammation. The dryness of the throat is marked, and the epithelium is smooth and glossy. The patients suffer no pain; they generally seek to be relieved from the ringing and deafness. Patients fix the origin of their trouble at a very remote period, so that we may conclude that it is the continued use, rather than the abuse, of tobacco, that is its cause. The disease is always curable in the early stages; but never when there is permanent thickening of the ligaments of the muscles of the ossicula, or a sclerotic condition of the membrana tympani. A cure is never effected unless the use of tobacco is abandoned.—DR. LADRIET DE LACHARRIERE, *Annales des Maladies de l'Oreille*, etc., in *The Proceedings*.

“Every man is more or less the property of the state. The state protects him in the enjoyment of life, liberty, and the pursuit of happiness. For these blessings and privileges she looks to him for such physical and intellectual assistance as it is in his power to give in return for her care and protection. It seems to me a matter of great importance that the state should have a careful eye to the development of both body and mind, and possess power to dictate and enforce that mode of life and action best calculated to perfect both physical and intellectual powers.”

Inebriety is a common instance, where the state should interfere and assist to save the drunkard and avert the evils which follow.

We would call the attention of physicians to an advertisement under our "Table of Contents," "Vitalized Phosphates," as prepared by Mr. Crosby according to the formula of Dr. Percy, in his "Prize Essay" to the American Medical Association, in 1872. This has been more largely used by physicians and with better success than any other hypophosphite, as it never changes or becomes decomposed into inert phosphates, as many other forms do. It is in a dry powder, and if kept dry is changeless. Neither is it a laboratory compound, but prepared from the living plant and animal, so that it is truly a Vitalized Hypophosphite. The formula is published—it is not a secret preparation.

LACTOPEPTINE.—This valuable aid to digestion has been before the public for several years, so long, in fact, that there are probably few physicians practicing in cities who have not already tested it thoroughly. To these it is unnecessary to say anything in commendation. To the country practitioner, however, it may be well to again refer to it.

At first sight, the combination may not appear to be an effective one; it may be supposed that the action of the stomach upon the constituents calculated to aid intestinal digestion, would be such as to prevent any influence being exercised, in any way, upon the alimentary bolus after it has been subjected to gastric digestion; that is to say, pancreatine would probably be *digested* along with other articles of food. Although we might come to some such conclusion *à priori*, yet experience teaches us that fats are more easily and completely digested and absorbed when *Lactopeptine* is taken after meals containing such articles of diet than after taking any of the preparations of pepsin, even when combined with the acids, in connection with food. This fact is of the utmost importance in the treatment of wasting diseases, especially in children.

In the summer diarrhoeas of children we have found *Lactopeptine* of the very highest value. It is probable that weakening of the digestive powers is a very important factor in the causation of Cholera Infantum. We have found *Lactopeptine* a most important help in restoring these cases, when they have passed through the worst stages of that disease, as well as in warding it off when its onset seemed almost inevitable.

In the exhausting Vomiting of Pregnancy, we have found it of very great value in enabling the patient to obtain some nourishment from the food ingested, even if it remained but a short time in the stomach. In the nausea and indigestion

and cardialgia, which causes so much annoyance, even if no great danger, in the later months of gestation, *Lactopeptine* has proved itself almost a specific.

The article used was manufactured by the New York Pharmacal Association.—*St. Louis Clinical Record*, July, 1878.

It is very desirable, in administering medicine, to make it pleasant as well as effective. How many nauseating, unpleasant doses we have all taken to counteract disease. Sickness is unpleasant enough of itself without increasing the patient's troubles. Every means to soothe by administering dainty food are tried, but medicines are given without regard to taste. It has been thought that syrups and aromatics reduce the strength of the medicine, and consequently it loses its effect. The profession and public are very much indebted to Mr. Isaac D. Smith of Hartford, a druggist of many years' experience, for producing a medication known as Smith's MEDICATED PRUNES, a very different article from the Medicated Prune of the Dispensatory. Smith's are very pleasant to the taste, and certain to act as a laxative and cathartic without griping. The prune, in its natural state, is a laxative of considerable strength; combined with the pleasant and healthful medication, makes the most natural, effective laxative known. Several well-known physicians in Hartford indorse them.

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Journal of Inebriety.

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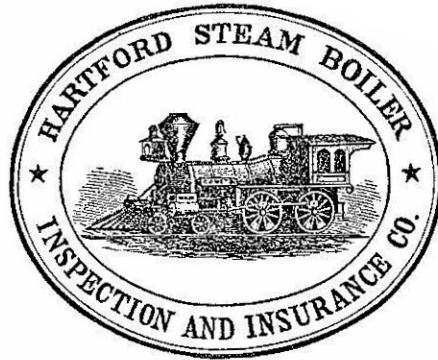
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Journal of Inebriety.

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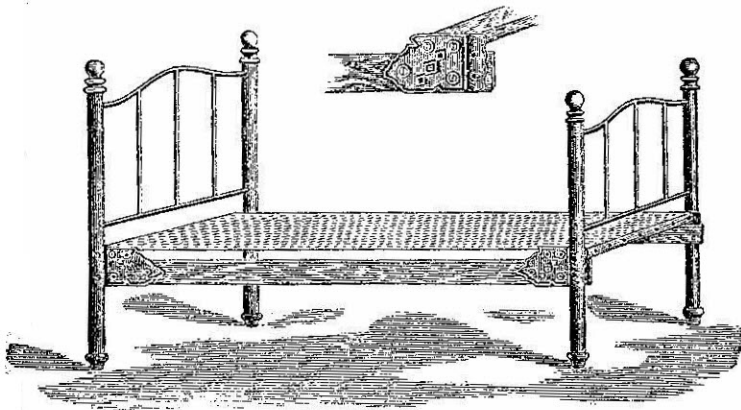
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(SEE NEXT PAGE.)

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INSTITUTION FOR THE RELIEF OF THE RUPTURED AND CRIPPLED, }
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I consider the WOVEN WIRE MATTRESS one of the most invaluable inventions of the day, as it contributes so largely to the relief and comfort of the sick. The wire fabric, of which it is formed, yields uniformly to the body, obviating undue pressure on the prominent parts of the emaciated patient. Two thicknesses of a comfortable are a sufficient protection to the patient from the wire fabric, and is all that is required for warmth in a temperature of sixty degrees. This light covering is readily removed and washed in extraordinary cases, and the facility afforded for changing the bedding obviates the necessity for disinfectants. This information may be used by the Company, wherever it will tend to the comfort of the sick, at home or in the hospital or for family use, as I consider the MATTRESS not only a comfortable bed, but a means of maintaining good health.

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Yours respectfully,

J. F. ENSOR, M. D., *Sup't.*

Journal of Inebriety.

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The experience of this Asylum, for the past nine years, indicates an increasing usefulness and necessity for such institutions, and the original intention of making this an Asylum Hospital, where this disorder may be thoroughly understood and treated on broad scientific principles is nearer realized than ever before. All rules are strictly enforced, and no patient permitted to go beyond the Asylum grounds without permission from the Superintendent, or in the care of an attendant.

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VOL. III.—10

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Journal of Inebriety.

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PERISCOPE

will fairly and fully reflect the progress of Neurological Science in all parts of the world. We are happy to be enabled to state that we shall continue to have the editorial co-operation of the eminent gentlemen whose names appear on its cover, viz., Dr. W. A. Hammond of New York, Dr. S. Weir Mitchell of Philadelphia.

Subscriptions and all business connected with the JOURNAL, may be addressed either to Dr. J. S. Jewell, at 70 E. Monroe Street, Chicago, or to the Eastern publishers, G. P. Putnam's Sons, 182 Fifth Avenue, New York.

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Journal of Inebriety.

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Applications for admission, either personally or by letter, or any further information in regard to the Institution, should be made directly to the Superintendent of Washingtonian Home, 566, 568, 570, 572, West Madison street, Chicago, Ill.

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Journal of Inebriety.

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VOL. III.—11



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Mr. Kennedy became so fully convinced of the value of the Hemlock Extract as a remedial agent, that he determined to make an article medicinally pure, which he has for some time placed in the market. His method and care in making this new remedy will, I am sure, give us an article of uniform strength and purity. He extracts the virtues of the bark by pure distilled water, the temperature of which is never allowed to exceed 150 deg. F. The infusion thus made is evaporated *in vacuo*, from about 30 deg. (by the Barkometer) to 250 deg., which makes a constant and uniform fluid extract, without the addition of acid or alcohol, and which does not ferment in any climate or under any extreme of temperature."

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Manufacturer, Omaha, Neb.

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Journal of Inebriety.

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EXTRACT OF MALT, WITH COD LIVER OIL.

FIRST PROPOSED BY DR. F. H. DAVIS, OF CHICAGO.

(See Transactions of American Medical Association for 1876, page 176.)

Is presented to the medical profession as an efficient, palatable, and very stable combination, consisting of equal parts of the **Extract of Canada Barley Malt** and the best quality of genuine **Norwegian Cod Liver Oil**. Many patients take this preparation who cannot take the oil in any other form. It may be employed in all cases where Cod Liver Oil is appropriate, but is peculiarly adapted to those complicated with disordered digestion.

EXTRACT OF MALT, WITH COD LIVER OIL AND PHOSPHORUS.

Consists of equal parts of Extract of Malt and pure fresh Norwegian Cod Liver Oil, Phosphorus being added in the proportion of 1-100 grain to the dose, and so combined as to be perfectly protected from oxidation. The **Trommer Extract of Malt Company** prepare this combination agreeably to the suggestion of **Dr. Wilson Fox**. It is specially adapted to cases of phthisis, bronchitis, pernicious anæmia, and diseases of the nervous system.

EXTRACT OF MALT, WITH COD LIVER OIL AND IODIDE OF IRON

added in the proportion of one grain to the dose. This combination is intended to meet those cases where the physician desires to add a more energetic alterative and restorative to the treatment with Cod Liver Oil and Extract of Malt. The manufacturers have received numerous letters from prominent physicians referring to it in terms of high praise.

Trommer's Extract of Malt.

The rapidly increasing demand for our IMPROVED EXTRACT OF MALT, during the four years that it has been manufactured and offered to the medical profession in America, justifies the belief that in its production here we are meeting a generally felt want.

Long experience in manufacturing Malt Extract has enabled us to completely overcome the many difficulties attending its manufacture in large quantity; and we positively assure the profession that our Extract of Malt is not only perfectly pure and reliable, but that it will keep for years, in any climate, without fermenting or molding, and that its flavor actually improves by age. Our Extract is guaranteed to equal, in every respect, the best German make, while, by avoiding the expenses of importation, it is afforded at less than half the price of the foreign article.

The Malt from which it is made is obtained by carefully malting the very best quality of selected Toronto Canada Barley. The Extract is prepared by an *improved process*, which prevents injury to its properties or flavor by excess of heat. It represents the soluble constituents of Malt and Hops, viz.: MALT SUGAR, DEXTRINE, DIASTASE, RESIN and BITTER OF HOPS, PHOSPHATES OF LIME and MAGNESIA, and ALKALINE SALTS.

Attention is invited to the following analysis of this Extract, as given by S. H. Douglas, Professor of Chemistry, University of Michigan, Ann Arbor.

TROMMER EXTRACT OF MALT CO.—I enclose herewith my analysis of your Extract of Malt:

Malt Sugar, 46.1; Dextrine, Hop-bitter, Extractive Matter, 23.6; Albuminous Matter (Diastase), 2.469; Ash—Phosphates, 1.712; Alkalies, .377; Water, 25.7. Total, 99.958.

In comparing the above analysis with that of the Extract of Malt of the German Pharmacopœa, as given by Hager, that has been so generally received by the profession, I find it to substantially agree with that article.

Yours truly, SILAS H. DOUGLAS,

Prof. of Analytical and Applied Chemistry.

This invaluable preparation is highly recommended by the medical profession, as a most effective therapeutic agent, for the restoration of delicate and exhausted constitutions. It is very nutritious, being rich in both muscle and fat producing materials.

The very large proportion of *Diastase* renders it most effective in those forms of disease originating in *imperfect digestion of the starchy elements of food*.

A single dose of the Improved Trommer's Extract of Malt contains a larger quantity of the active properties of Malt than a pint of the best ale or porter; and not having undergone fermentation, is absolutely free from alcohol and carbonic acid.

The dose for adults is from a dessert to a tablespoonful three times daily. It is best taken after meals, pure, or mixed with a glass of milk, or in water, wine, or any kind of spirituous liquor. Each bottle contains 1½ lbs. of the Extract.

Our preparations of Malt are for sale by druggists generally throughout the United States and Canadas, at the following prices:

EXTRACT OF MALT, With Hops (Plain),	\$1.00
“ “ “ Pyrophosphate of Iron (Ferrated),	1.00
“ “ “ Cod Liver Oil,	1.00
“ “ “ Cod Liver Oil and Iodide of Iron,	1.00
“ “ “ Cod Liver Oil and Phosphorus,	1.00
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TROMMER EXTRACT OF MALT CO.,
FREMONT, OHIO.

Journal of Inebriety.

TO THE MEDICAL PROFESSION.

MALTINE.

(EXTRACT OF MALTED BARLEY, WHEAT, AND OATS.)

This Preparation contains from three to five times the Medicinal and Nutritive Elements found in Extract of Malt.

MALTINE is a highly concentrated extract of malted BARLEY, WHEAT, and OATS, containing, undiminished and unimpaired, all the medicinal and nutritious principles found in these cereals. By the most carefully conducted scientific process we are enabled to offer to the medical profession a perfect article, possessing from three to five times the therapeutic and nutritive merit of any foreign or domestic Extract of Malt.

In support of our claims we invite the attention of the profession to the following points, viz. :

First : In the manufacture of MALTINE the evaporation necessary to reduce it to its great density is conducted in vacuo, at a temperature ranging from 100° to 120° Fahr. ; while most manufacturers of Extract of Malt resort to "open pan" or low pressure steam boiling, by neither of which processes can the extract be so produced as to preserve the Diastase, Phosphates, and Albuminoids on which its remedial value so greatly depends, and the product is either of a dark color or of low specific gravity, possessing little virtue aside from the saccharine matter which it contains.*

Second : Carbon, Hydrogen, Nitrogen, Phosphorus, Sulphur, Iron, Magnesium, and Potassium are essential elements in the food of man, and it is only in MALTINE, containing the combined properties of malted Barley, Wheat, and Oats that all these principles can be found in the proper proportions; Extract of Malt made from Barley alone is wanting in some of the most important of these elements.

Third : Gluten is the most nutritious principle found in the cereals, and is the only vegetable substance which will, alone, support life for any great length of time. It is composed of three distinct nitrogenous principles, together with fatty and inorganic matters, and is analogous to animal fibrin. MALTINE contains twenty times the quantity of Gluten found in any Extract of Malt.

Fourth : Liebig says, "Wheat and Oats stand first among our list of cereals in combining all the elements in proportions necessary to support animal life. They are especially rich in muscular and fat-producing elements." The only reason we use Malted Barley in the manufacture of MALTINE is that it contains larger proportions of mineral matters (bone producers) and Diastase. It is deficient in all other essential elements.

We believe that any practitioner will readily recognize the superiority of MALTINE, and would request a trial and comparison of merits with any article offered for similar uses.

* As a sure test for Diastase and the Albuminoids, a small quantity should be put in a test tube or small vial, largely diluted with water, and heated to the boiling point when the Albumen, if present, will coagulate, and appear in little flocculent particles throughout the liquid. If the extract remains clear, it is proof that it has already been coagulated by excessive heat, and removed by filtration during the process of manufacturing. Any heat which will coagulate Albumen will inevitably destroy the digestive power of Diastase.

The Nitrogenous constituents of MALTINE have a composition identical with that of the chief constituents of the Blood, and therefore contain nearly every element requisite for the reproduction of the human body.

MALTINE AND ITS COMPOUNDS

Can undoubtedly be used with greater success than any other remedy now known, in cases of general and nervous Debility, Indigestion, imperfect Nutrition and deficient Lactation; Pulmonary affections, such as Phthisis, Coughs, Colds, Hoarseness, Irritation of the Mucous Membranes and difficult expectoration; Cholera Infantum and wasting diseases of children and adults; Convalescence from Fevers, and whenever it is necessary to increase the vital forces and build up the system.

We manufacture the following preparations, the formulas and doses of which are given in our dose books and on the label attached to each bottle:

MALTINE WITH HOPS.

MALTINE, FERRATED:

This combination is specially indicated in Anemia and Chlorosis, and in all cases of defective nutrition where Iron is deficient in the system.

MALTINE WITH PHOSPHATES IRON AND QUINIA:

A powerful general and nutritive tonic.

MALTINE WITH PHOSPHATES IRON, QUINIA, AND STRYCHNIA:

A powerful nutritive, general and nervous tonic.

MALTINE WITH HYPOPHOSPHITES:

This preparation is specially indicated in Phthisis, Rickets, and deficient Ossification.

MALTINE WITH PEPSIN AND PANCREATINE:

One of the most effective combinations in Dyspepsia, Cholera Infantum, and all diseases resulting from imperfect nutrition. It contains three of the all-important digestive agents, Diastase being one of the constituents of the MALTINE. We believe there are few cases of Dyspepsia which will not readily yield to the medicinal properties of the above combination, while the system is invigorated by its nutritive qualities.

MALTINE WITH BEEF AND IRON:

One of the most valuable combinations in cases of general Debility, when there is deficient nutrition and a deficiency of Iron in the system.

MALTINE WITH COD LIVER OIL:

The most perfect emulsion, and most agreeable and effective mode of administering this nauseous but valuable Oil yet discovered.

MALTINE WITH COD LIVER OIL AND PHOSPHORUS:

In this combination the Phosphorus has no irritant effect upon the stomach.

MALTINE WITH COD LIVER OIL AND IODIDE OF IRON:

This is prepared with the tasteless Iodide of Iron, which undergoes no chemical change from contact with the Oil, and does not blacken the teeth.

MALTINE WITH ALTERATIVES:

In this preparation MALTINE is combined with the most valuable Alteratives known, such as Iodides, Bromides, and Chlorides, and will fully meet the requirements of the practitioners in Syphilis, Scrofula, and all depraved conditions of the blood.

Each fluid ounce contains: *Chloride Calcium*, 10 grains; *Chloride Magnesium*, 10 grains; *Bromide Sodium*, 5 grains; *Iodide Potassium*, 1 grain; *Iodide Iron*, $\frac{1}{2}$ grain. DOSE, one teaspoonful to one tablespoonful.

We also manufacture a perfectly prepared EXTRACT OF MALT, from *Barley only*.

MALTINE preparations are sold at the same prices as EXTRACT OF MALT and its combinations, and are put up in amber bottles holding sixteen fluid ounces; each bottle inclosed in a folding paper box.

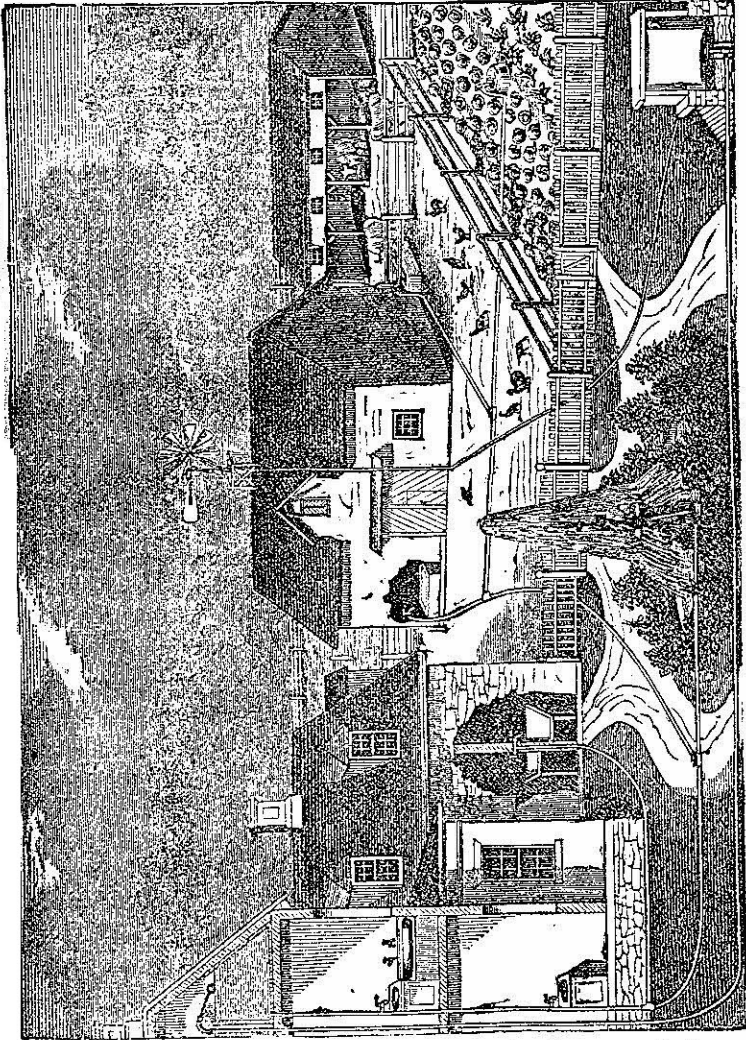
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VOL. III.—12

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Certain to produce the desired effect without griping.
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AND ACT ON THE LIVER.

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Our Commission comes from the Newspaper Publisher and NOT from the Advertiser; thus we are enabled to advertise at *publishers' very lowest rates*.

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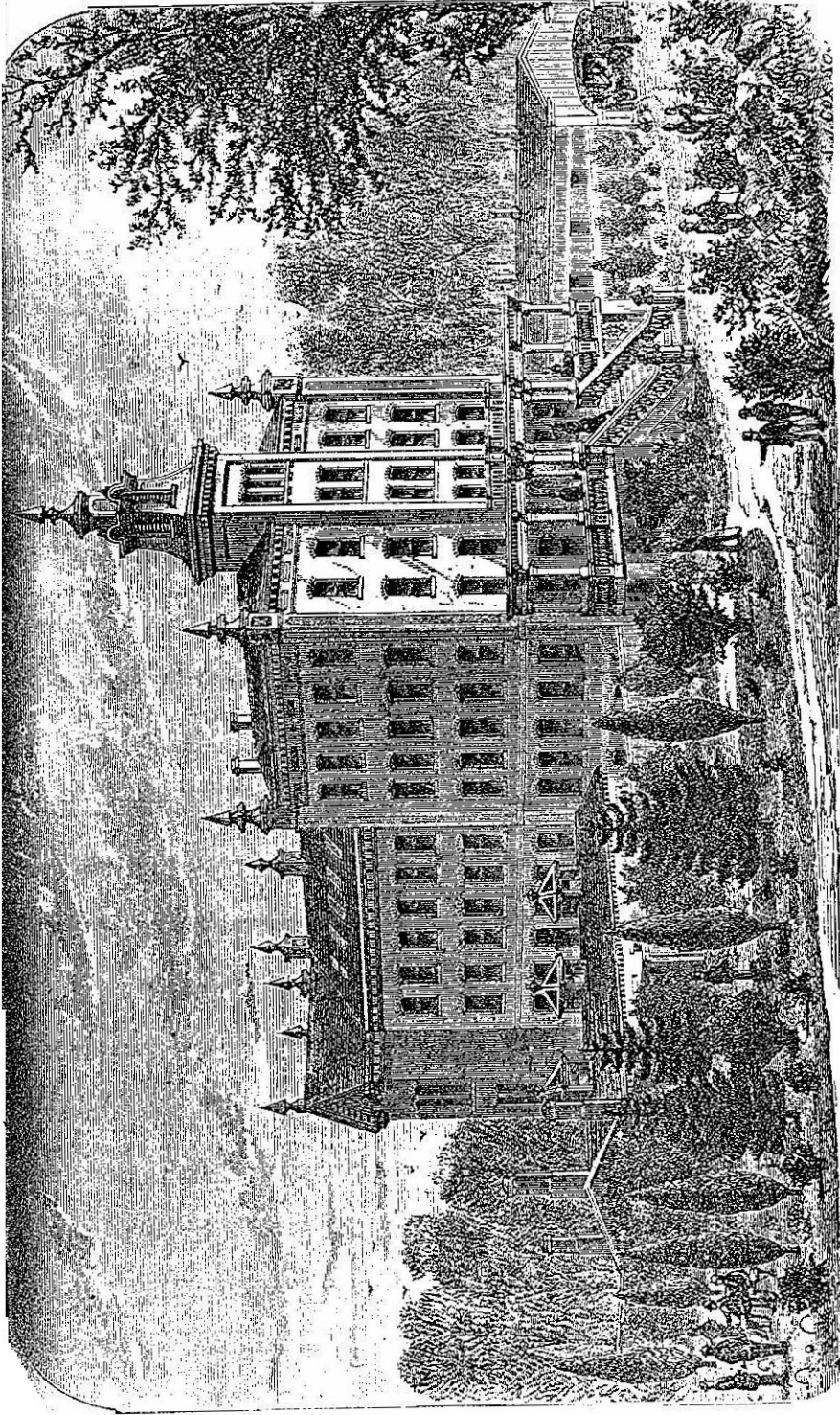
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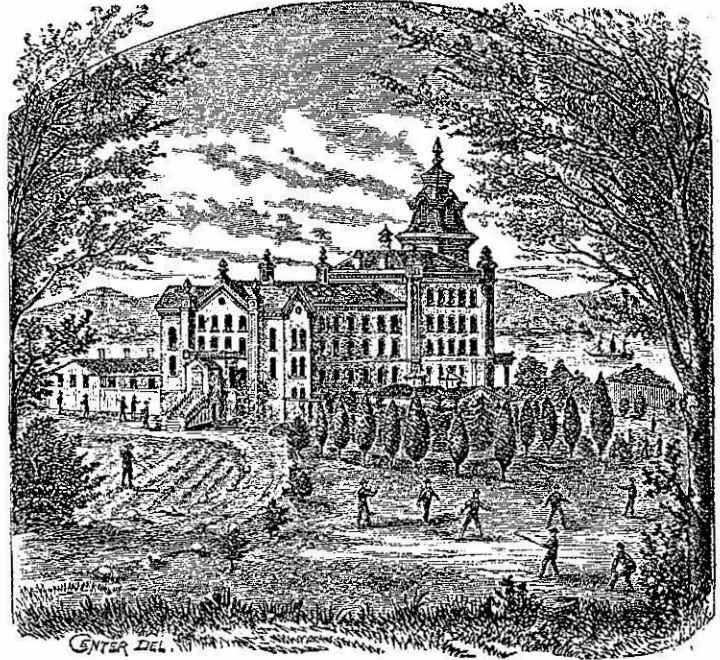
OCEAN VIEW OF "THE INEBRIATES' HOME," FORT HAMILTON, N. Y. (INCORPORATED 1866.)

CENTER

The Inebriates' Home, FORT HAMILTON, N. Y.

This is the Best Constructed and the Best Furnished Institution
for the Care and

Treatment of Inebriety and the Opium Habit
IN EXISTENCE.



VIEW FROM ENTRANCE OF PARK GROUNDS.

The Treatment of the Opium Habit a Specialty.

President and Consulting Physician—THEODORE L. MASON, M. D., also President of the "American Association for the Cure of Inebriates," and the "Collegiate Department of the Long Island College Hospital." *Attendant Physician*—L. D. MASON, M. D., assisted by a staff of resident physicians. *Superintendent and Secretary*—REV. J. WILLETT.

THE BUILDINGS are constructed for this special purpose, and they are more complete and better adapted for the treatment of Dipsomania and the Opium Habit than those of any similar institution in existence. They are situated on one of the most attractive points on the Bay of New York, and stand on a high bluff within one thousand feet of the Narrows. The sea and land views are unsurpassed in extent and grandeur. The enclosed Park Grounds are extensive.

There are separate dining-rooms, lodging-rooms and parlors, billiard and bath-rooms. There is also a lecture-room for religious services, read-

THE TREATMENT OF THE OPIUM HABIT A SPECIALTY.

ings, concerts, etc. All the New York morning and several other newspapers and periodicals are regularly taken. For the treatment of the better class of female patients a floor is set apart, handsomely furnished, having separate approaches, effectually secluding the sexes from each other.

THE MANAGEMENT is systematic, thorough and adequate. There has been no change in the staff of medical or other active officers since the inauguration of the Home, eleven years ago.

THE CLASSIFICATION of patients originated with and is peculiar to this institution. Being determined and regulated upon a strictly commercial basis, it is made to depend upon the character of the lodging, board and other accommodations which the patients or their friends are willing to pay for, and is accomplished in such a manner as to completely isolate the boarders from the free patients in the County or State wards of the Home.

By this equitable arrangement we are enabled to offer board, washing and medical attendance at rates varying from \$5 to \$35 per week. Those paying \$14 and upwards, according to size and situation of quarters selected, are provided with a single apartment and a seat at table in private dining-room—the accommodations in the select rooms and the table being in every respect equal to those of a first class hotel. Rooms in suit may be had upon terms to be agreed upon.

REMARKABLE IMMUNITY FROM DEATH.—The total death-rate since the opening has been one-half of one per cent., or one death for every two hundred patients. The total deaths of legitimate cases for treatment in the Home have been only one case in eight hundred during the same period. The rest were dying when admitted.

TREATMENT OF THE SICK.—One of the essential characteristics of the institution is its ample provision for the isolation, when necessary, of new inmates from the convalescent patients until they are sobered down and the sickness consequent upon their late debauch has passed away. In the treatment of the victims of the Opium Habit the seclusion and repose of our hospital arrangements frequently prove to be essential to present relief and final cure. In connection with this department we have always at command a large staff of careful nurses, who are placed under the direction of experienced officers. Our hospital department is reduced to an exact system, and its discipline is thorough. Our methods of restraint and management in delirium tremens cases are of the most efficient and humane character. There is the absence of the straight-jacket and every other instrument of torture which tends to impede the free circulation of the blood, and thereby intensify the sufferings of the patient, and padded rooms are substituted by a commanding but nevertheless humane system of personal restraint.

THE RESTRAINTS.—Our system of restraint is compatible with the fullest liberty for each boarder patient to avail himself of all the recreation, amusement and enjoyment which the billiard-room, park and ball grounds, readings, lectures, concerts and musical exercises, etc., coupled with the society of intelligent and agreeable fellow-inmates, can impart; but this liberty does not embrace leave and license to go and come to and from the neighboring cities, villages, etc. Many of our boarder patients have consisted of former inmates of other kindred institutions, who have been placed under our care because our system of restraint to the grounds of the Home has commended itself to their friends when those confidential experiments have failed.

THE DISCIPLINE.—The established code of discipline is comprehended in the observance of "THE LAW OF PROPRIETY," as universally understood

by gentlemen and ladies in the guidance and control of well-regulated family and social relationships. The Superintendent and officers lay it down as a rule that they can only govern wisely by avoiding any unnecessary appearance of authority, and at the same time maintaining mild but firm discipline whenever the occasion demands. What is most needed is a method of discipline which will inspire confidence and lead to self-reliance and the restoration of will-power.

HOW TO OBTAIN ADMISSION.

The design of the Institution is to treat patients, men and women, who have contracted the habit of inebriety, from whatever cause, whether from the use of alcoholic, vinous or other liquors, or opium, or other narcotic or intoxicating or stupefying substances, with a view to cure and reformation. Persons suffering from chronic affections, or other diseases than those immediately produced by inebriety, or the infirmities of age, are not received into this institution. Cure and reformation are the only purposes kept in view in the reception and detention of patients.

In order to prevent the reception of improper cases, the consent of the duly authorized officers is in every instance made a pre-requisite to the admission of a patient.

VOLUNTARY APPLICANTS for admission may submit their request in the following form:

To the Superintendent of the Inebriates' Home, Fort Hamilton, N. Y.:

SIR:—Having unfortunately indulged in the use of _____ until such practice has become a confirmed habit, which I cannot control, and which I feel powerless to overcome without assistance, and being convinced that such aid can only be obtained by submitting myself to restraint, I hereby voluntarily apply for admission as a patient to "The Inebriates' Home for Kings County," stipulating that if I am received into said institution, I will remain a patient therein for such time as the officers thereof shall deem requisite for my benefit, not exceeding the term of six months, and pay, or cause to be paid, to said Institution three months' board in advance, at such rate as may be agreed upon; promising to obey all the rules, regulations and orders that may be in force in said institution at any time during my residence therein, and to submit to such restraint and treatment as the Superintendent thereof may deem necessary in my case. (Signed.)

INVOLUNTARY CASES.—In all cases where the inebriate declines to enter the Home voluntarily, the nearest relatives or friends may take action either before any Justice of the Peace having jurisdiction where he or she resides, (within the State of New York,) or by a process of any County Court or the Supreme Court of said State. Where there is no property at stake, summary proceedings before a magistrate are the quickest and least expensive measures to secure removal to the Home. This action is authorized by Section 2, of Chapter 797, of an Act passed June 18, 1873.

Where the case is urgent, the Supreme and County Courts have the power to commit temporarily to the Home while proceedings are pending.

Full directions, with the requisite blank forms, together with such information as may be necessary can be obtained on application to the Superintendent, at Fort Hamilton, N. Y.

☞ Two daily mails, and telegraphic communication to all parts of the country.

HOW TO REACH THE INSTITUTION FROM NEW YORK.

Cross the East River to Brooklyn on Fulton Ferry Boat and proceed either by Court st. or Third ave. Horse Cars: or cross from South Ferry on Hamilton Avenue Boat and proceed by Fort Hamilton Cars.

THE INEBRIATES' HOME,

FORT HAMILTON, L. I., N. Y.,

Is the best constructed and the best furnished Institution for the care and treatment of Inebriates in existence.

The Buildings,

which are new, were erected for and are well adapted to the special purpose of the Home. They are situated on one of the most attractive points on the Bay of New York. They stand on a high bluff within one thousand feet of the Narrows, and the park grounds are extensive.

The Management

is systematic, thorough, and adequate. There has been no change of Superintendent or in the staff of medical or other active officers since the inauguration of the Home.

The Classification

is more perfect, and the beneficial results are fully equal to those of any other kindred institution.

Boarder Patients

are classified according to accommodations required, and the charges are proportionately adjusted. Their department is divided up into several floors, each containing such accommodations as the patients or their friends are willing to pay for. There are separate dining-rooms, lodging-rooms and parlors, billiard and bath-rooms. There is also a lecture-room for religious services, readings, concerts, &c. Several daily journals and periodicals are regularly taken, a library is in process of accumulation, and all the appointments for the exercise and the amusement of patients, and which contribute greatly to their cure, are provided.

Female Patients.

For the treatment of the better class of FEMALE PATIENTS an entire floor is set apart, handsomely furnished, having separate approaches, effectually isolating the sexes, and under the charge of the Matron and Assistant Matron, together with a staff of efficient female nurses.

Remarkable Immunity from Death.

The total death-rate of all the patients who have entered the Home since the opening, upwards of nine years ago, has been one-half per cent., or one death for every two hundred patients, and the average time of residence in the institution has been upwards of six months. The total deaths of legitimate cases for treatment in the Home has been only one-eighth per cent., or one case in eight hundred, during the same period. The average annual death-rate in our large cities ranges from two to three per cent. of the population.

Patients are received either on their voluntary application, or by due process of law. The charter confers power to retain all patients entering the Home.

For mode and terms of admission, apply to Rev. J. WILLETT, the Superintendent, at the Institution, Fort Hamilton (L. I.), N. Y.

THE
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THIS Journal will be devoted to the study of Inebriety, Opium mania, and the various disorders which both precede and follow. The many forms of Neuroses which arise from the action of these toxic agents are increasing and becoming more complex, requiring special study, and, as yet, are comparatively unknown to the profession.

This Quarterly will be a medium for the presentation of investigations and studies in this field; also the official organ of the

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