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THE JOURNAL OF INEBRIETY

PUBLISHED BI-MONTHLY

OFFICIAL ORGAN OF THE AMERICAN MEDICAL SOCIETY FOR THE STUDY OF
ALCOHOL AND OTHER NARCOTICS. EDITED BY T. D. CROTHERS, M. D.

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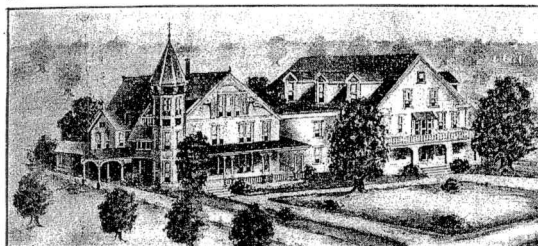
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Protein. When constipation is caused by the protein it is usually due to the casein of the milk not being properly digested. The stools are hard, dry, friable, and easily broken down. The odor is often foul or putrid—sometimes very offensive. Distention of the abdomen, gas, colic and general discomfort after eating frequently accompany this condition.

50

Constipation (Continued)

To overcome this form of constipation, an increase in the amount of Mellin's Food, because of its softening effect upon the casein of the milk, is usually sufficient (see high carbohydrate formulas commencing on page 22). Where the difficulty is pronounced, it may also be necessary to reduce the proportion of milk temporarily. The use of top milk is sometimes beneficial, more especially with young babies (see top milk formulas commencing on page 29).

Fat. When constipation is due to the fat not being properly digested the stools are light gray in color, greasy, shiny and soap-like. The odor is sour, and not particularly offensive. The urine often smells ammoniacal. Repeated regurgitation or spitting.

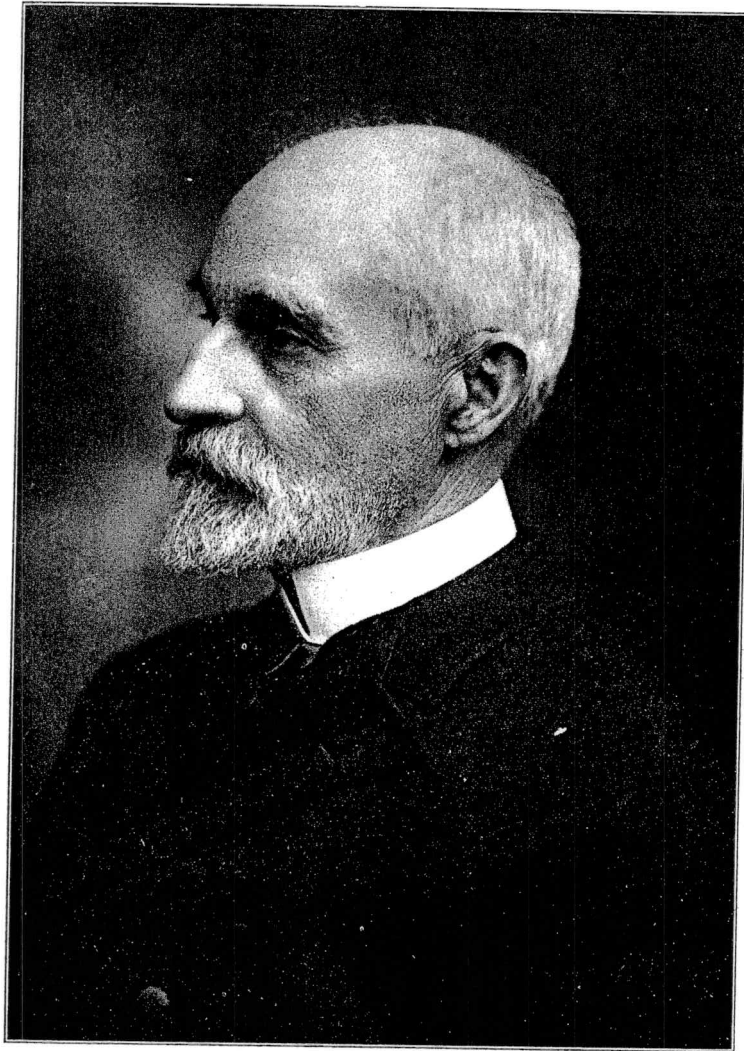
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THE JOURNAL OF INEBRIETY

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NO. 4

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All exchanges, contributions, reports and matter pertaining to the Journal should be addressed to the Editor, Dr. T. D. Crothers, Hartford, Conn.

Editorials

OUR ANNUAL MEETING.

The 43d annual meeting at Philadelphia last month is the most memorable one in the history of our association.

Thirty-five papers were recorded in the programme and two more submitted, making thirty-seven. Of this number twenty-two were read by the authors. Others were sent on to be read by other persons, the authors being unable to be present.

These papers were all of an unusually high character, and contained a rare assemblage of facts, many of them unusually graphic and clearly stated. Statistical statements, emotional appeals and sensational arguments were entirely absent. Each author seemed to realize that the facts were of more importance than his personal opinions or conclusions. Many of the papers carried the subject beyond the frontiers of the present into new fields of research, which were fascinating in their possibilities and realities.

To the older members of the society, there came a consciousness of growth and attainment in the scientific world, that was pleasing and indicated clearly the turning point of a wider and more exhaustive study of this subject.

These papers will appear in future numbers of the Journal, and the readers will realize that a great tidal wave is coming in, bringing with it new men with contagious enthusiasm in the study of the great drink and drug problems.

PSYCHOLOGICAL INFLUENCES OF INEBRIATE HOSPITALS.

While the number of inebriate hospitals in this country is very small, there are some very obscure influences which have been noted

and are unexplained. In one place after the first week of treatment there is great unrest and continuous disaffection and the patients want to go home, and the management has great trouble in restraining them.

In such places where locks and bars are not available, chemical restraint by drugs is used. This is unsatisfactory.

In another institution where the appointments and management are substantially the same, the opposite spirit is manifested, patients are quiet, give little or no trouble, and do not require chemical or physical restraint. Patients remain a stated time and go away as they would from a hotel, or their own homes, with a reasonable degree of satisfaction.

In other places, after a period of great unrest and disturbance, objecting to all sorts of control, the patient becomes apathetic and contented, gives little or no trouble.

Evidently these conditions are not due to the Superintendent or his staff alone. There is something beyond this. It may be the house, its location, depressing surroundings, jarring, unsightly buildings, rooms that are devoid of physical comfort, noise, dust, winds, monotony, unattractive exteriors, or interiors that antagonize the disturbed condition and provoke the desire to escape at once.

In one institution it was the opinion of the doctor that the water contained some disturbing mineral atoms which broke or disturbed the chemical elaboration of foods. In another place the proximity of a railroad and trolley with dust and noise disturbed the psychical relations. In a third place, old and unsightly in buildings and cramped in room, there were the most cheerful surroundings, and patients were found to remain here contented. In some unknown way there was a psychical influence in the hills and forests and a dashing stream of water. Patients were greatly impressed with the water, and drank it in large quantities. The manager was rather an inferior man, and often irritable, but the surroundings overcame and neutralized his defective personality.

This fact has been noted in the many consumptive homes built during the last few years, and the wide difference in mortality in different places, apparently the same otherwise.

Inebriates, like consumptives, are often hyperaesthetic or anaesthetic to the surroundings. There is a new field in this direction for psychical treatment that is not recognized at present. Inebriate hospitals are put down anywhere, in any sort of building, governed by

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Places on the seashore or in sight of large bodies of water seem to lack many things that appeal to the eye and to the senses, places in the mountains, surrounded by trees, present other conditions that are not always helpful. Places on elevated table-lands commanding wide views of the country, have undoubtedly influences which appeal in a very marked way to the disordered brain and senses.

The psychology of hospitals demands a study, and is capable of adding new forces and powers in the cure and restoration.

WINE ADULTERATIONS.

A discussion on the new tariff law in Congress has brought out some very curious facts concerning wines and their adulterations. A clause requiring all alcohols made from fruits and used for fortifying sweet wines to be taxed \$1.10 per gallon brought out some sharp debate, and some information that was not well known before.

It seems that the ordinary wines on the market have to be fortified with alcohol to make them drinkable. As they come from the press they are called "sweet wines," but by adding alcohol, fermentation is set up and they secure what is called "body," and become pleasing to the taste. It has been the custom in this country, particularly in California, to manufacture the alcohol out of the refuse that comes from grape canneries. This means that the skins, seeds, and other substances are thrown into vats with sugars and allowed to ferment, or they are distilled into a cheap, inferior alcohol, which is used to fortify the grape juice and give it strength.

Curiously enough, a bill went through Congress a few years ago, permitting manufacturers of wines to make their own alcohol used for this purpose, and pay the Government 3 cents per gallon as a tax. Others who did not have wineries and carried on this manufacturing process in one place had to pay \$1.10 per gallon for the spirits used. Of course they objected. It was found that over 100 wineries in the United States were ranked in this class, made their own alcohol, paid the Government 3 cents per gallon, while several hundred manufacturers outside had to pay \$1.10 for the same substance.

It was on this question that a debate took place in the house, in which several very interesting facts appeared; among them were these.

All French and Spanish wines are mixed with distilled spirits and this is called fortification, and gives strength and sharpness. The

object is to correct the variations in grape juice. In some there is too much sugar. In others too little acid or too much acid, and these conditions cannot be corrected, except by adding spirits.

Years ago Spain used to import large quantities of spirits from England to make what was called their celebrated wines. Later the trade was monopolized by Germany, who furnished a cheaper grade of spirits made from beets and potatoes, and these are now used in large quantities in all great wine factories. In California and in northern New York many of the factory men manufacture their own alcohol, and where they do it on the premises it is exempt from the \$1.10 per gallon duty. Others finding this more expensive, buy neutral spirits and by changing the contents and by increasing the alcoholic percentages, secure the same results.

Grapes are bought at the wineries from \$10.00 to \$15.00 per ton, and wine from them varies from 80c. to \$2.50 per gallon. A great deal of it is sold for \$1.00. It was brought out in the discussion that there was a great deal of wine used and made by what was called brick-vinyardis. This last term describes wines that came from all sorts of fruit substances, fortified by spirits from woods, saw dust, shavings, cornstocks, beets, and almost any substance that will produce alcohol. These wines were made anywhere in the cellars, garrets of manufacturers, and were simply judged by their flavor. Tartaric acid in large quantities was used, as well as all kinds of alcohols, to bring this flavor up to a certain point.

It also appeared that in some of the great wineries the refuse was used to the last degree by repeated pressing, mixing with sugar, acids and fermenting at different stages, and then fortified with alcohol. The evidence before the tariff committee was a startling revelation of the deception in calling any wine pure, and it revealed a degree of duplicity that was startling. One of the speakers declared that it was absolutely necessary to fortify wine, and that no wines made anywhere could be made stable without alcohol.

Another declared that there was no such thing as pure, natural wine, and that grape brandy had practically disappeared, because of the expense in manufacturing it.

The wine manufacturers are having trouble, and while the profits are enormous and the adulterations are universal, there is great doubt whether they are sending out a more dangerous beverage than the distiller of whiskey.

The California grape growers, finding the restrictions becoming more and more strenuous on wine making, are turning their grapes into raisins and grapejuice, and other less harmful substances.

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TWO NOTABLE CONVENTIONS.

A self-appointed committee of 100, comprising leading temperance men from all over the country, met to organize an effort along educational lines at Columbus, Ohio, Nov. 13 and 14, 1913. After some very enthusiastic speeches, resolutions were endorsed demanding constitutional legislation, and a very ambitious plan of recommendations, urging the compilation of statistics concerning alcohol, and the efforts of teachers to acquaint their scholars with the facts, also posters, window exhibitions and public health campaigns, call attention to the degeneracy, disease, and death which followed from this source.

This committee declared that its central purpose was educational, to concentrate the work of societies, churches and the press along practical lines, to secure the endorsement of new views and new conceptions of the work. A second meeting was held in Washington in which a permanent organization was effected and the objects reiterated and endorsed with great unanimity.

Our Association has outlined this work many times, and we have repeatedly affirmed that all advances must come from a scientific study of the facts and their conclusions.

This effort shows an advance and deserves the warmest praise and commendation.

A second very notable convention was the Seventh International Purity Congress, held in Minneapolis the first and second weeks in November. This was a gathering of reformers, philanthropists and professional men, and the great question of vice and its influence on civilization, was studied for over six days. Nearly eighty speakers outlined facts and conclusions of great interest.

Dr. Crothers presented the alcoholic side of the problem, and Dr. Kress pointed out the contributing influences of tobacco in the promotion of this evil. Other papers indicated methods and means of legal and sociological work, and altogether it was a most enthusiastic effort to determine with a scientific spirit the means and measures for prevention and cure. These two conventions were really epoch-making in indicating a tremendous revolution that is coming on; a cosmic consciousness of the evils that must be remedied by a study of the causes and their removal.

BEE STINGS FOR RHEUMATISM AND INEBRIETY.

Some time ago, Dr. Walker, a lecturer on Pathology at the University of Oxford, wrote a very striking paper on Bee Stings in the Treatment of Rheumatism. This was based on his own experience and that of others, on thirty persons, in which 24 of these 30, after being stung by bees, recovered.

The conclusion was that bee poison had undoubtedly some striking influence on rheumatic conditions.

Dr. Terc, an Austrian physician of Marburg, gives the result of his experience in the treatment of over 700 cases of rheumatic arthritis. He concludes that bee poison not only checks rheumatism, but gives a certain immunity, not seen in other cases.

Dr. Couch, another author, reports that the use of formic acids in arthritis deformans is a powerful remedy, and that the poison of a bee is largely formic acid and alkaloidal base akin to the venom, and this explains to him, why a bee sting has been found so valuable.

Another writer in the London Lancet, recently reported five cases of rheumatic conditions in which the application of bee stings was followed by perfect recovery. Another application of this remedy is found in the report that several of these persons suffering from rheumatism were inebriates, and that the result of the sting not only cured the rheumatism, but broke up the desire for alcohol. The treatment of rheumatism being the principal thing, the alcoholic craze seemed to be secondary.

Three of the recent writers on this subject have gone over the cases reported and found that the rheumatism as well as the alcoholism of the patients was thoroughly cured. This seems to throw some light on the studies of Dr. Sterns of New York, who declared that formic acid as a therapeutic agent had great unknown powers, and that explains why bee stings relieve the conditions of rheumatism.

A recent statement in one of the Journals affirmed that intoxicated persons became quickly sober when stung by bees, and that persons working among bees were practically immune from alcohol, that the sting of the bee in some way destroys all taste and desire for spirits. If this is confirmed by farther observation, it will be most interesting.

We invite our readers to contribute any facts they may have concerning the effects of bee stings on persons who are drinking.

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INEBRIETY FROM BEEF TEA.

A correspondent in *Good Health* inquires for an explanation of the condition resembling intoxication, which followed from the excessive use of beef tea. The editor in reply, cites Dr. Pavy, who saw a company delirious while eating raw flesh of an ox. This opens a very interesting field of inquiry.

It is a well-known fact that persons who have drunk spirits and recovered, find a substitute in beef tea. Several instances have come to my notice in which such persons were accused of using spirits, having all the symptoms, which were found due to beef extracts taken in large quantities. Of course the stimulus of beef would revive the old states of toxemia and its delirious manifestations. That would be natural, but whether beef extract alone on a healthy constitution would produce symptoms resembling the toxic states from alcohol, is a question. I have seen many persons who showed great exhilaration after using these extracts, and later became stupid.

In one instance, a man drank large quantities of beef tea after a hard day's work, and two hours or more later, fell into profound slumber. Drug takers find beef extracts most effective drinks, but the derangement of the bowels which follows, and congestive conditions, which seem to point to this drug as the active cause, soon cause its use to be discontinued.

There can be no question that beef extracts are poisonous when taken continuously and in large doses, and that the poison symptoms will in a greater or less degree, resemble those from spirits.

The difficulty comes in from separating the effects of beef tea from that of other conditions, and pointing out this as the active or contributing cause. A number of cases have been noted of nerve exhaustion where excessive users of beef extract have seemingly provoked the use of spirits and drugs. There were many indications to sustain this conclusion. Theoretically it is correct, and practically there is no doubt that it occurs in a certain number of cases.

Our readers can no doubt furnish examples along this line that would add much to this new subject.

A very active crusade has sprung up in Hungary to suppress the wedding celebrations which last a week or more, and in reality are a continuous feasting and drinking of wine and spirits. The bride and groom as well as the friends indulge to great excess and the results of these drinking bouts are becoming more prominent, and are the subjects of very startling hygienic studies.

Original Papers

THE RELATION OF THE LEARNED PROFESSIONS TO THE ALCOHOLIC PROBLEM.

Annual Address Before The American Society for the Study of Alcohol and Other Narcotics. Delivered at the Annual Meeting at Philadelphia, Pa., December 4, 1913, by Lewis D. Mason, M. D., President of the Society.

Alcohol is as old as the law of fermentation, and the law of fermentation is as old as the habitable world; and the alcoholic problem is and always has been, world-wide.

As to the historical introduction of alcohol into the world, we have the biblical record of Noah, who planted a vine, made wine, drank of a fermented wine, and became intoxicated, whether accidental or intentional, we are disposed to give Noah the benefit of the doubt. We believe, however, that drunkenness was one of the prominent vices of the dwellers upon the habitable earth before the deluge, and so ante-dated the drunkenness of Noah.

The epochs of the use of alcohol by man included, first, an age of ignorance, in which the action of alcohol on the human body was not only misunderstood, but virtues and desirable qualities were attributed to it which it did not possess. We may call this the experimental stage, and it represents the testing process through which every drug has to pass in pharmacy, therapeutics, or the practice of medicine, this age was long, obscure, indefinite.

During this primal period in the history of Alcohol, we have in time individual, national, and religious protests against the use, or at least the abuse, of alcohol as a beverage, markedly so in the world's religions of that day—Judaism, Mohammedanism and Hindoism, making and teaching total abstinence as a fundamental part of their religious creed.

The pious Jew used unfermented wine, but the strictest sect, the Rechabites, rejected both fermented as well as unfermented wine. The barbarous and semi-civilized nations may have been familiar with the use of fermented liquors, but the fact remains that the universal world-wide use of alcoholic liquors was not developed or perpetuated or propagated by the Semitic or Hametic races, but principally through the Japhetic race. It is the so-called civilized world,

that from time and developed in the world; among the sciences however, it is against a certain manufactured cially true of

The experimental tendency or exclusion or only logical careful study the human body from every individual in

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that from time immemorial down to the present day has perpetuated and developed, by manufacture and exportation, in its own class and in the world at large, the use of alcohol—particularly as a beverage among the semi-civilized and barbarous nations of this globe. Now, however, it is gratifying to note that the leading nations of the earth are making a compact, or have done so, to protect the weaker nations against a certain class who are striving to extend the market for their manufactured alcoholic products among such nations. This is especially true of the restricted Congo districts in Africa.

The **experimental** stage has, therefore, proven to be, in its ultimate tendency, a leaning toward the stage of **limitation**, and final exclusion or **elimination** of alcohol as a beverage or a drug. It is the only logical conclusion that we can arrive at, for it is the result of careful study and practical experience, as to the action of alcohol on the human body in health or disease; and it is the world-wide verdict, from every scientific center, as opposed to adverse governmental and individual interests.

Whether we consider alcohol as a beverage or a drug, as related to the physical, mental, moral, or spiritual well-being of mankind, or from an economic standpoint, the experience of the centuries witness to the fact that alcohol will, in time, have no place as a drug or beverage, but will be relegated to its proper position in the arts and industries, and used principally for combustion to produce power and heat.

It is needless to say that while the world at large, through its various reformatory organizations, has been and is directly or indirectly, interested in this subject, so vital to the interests of individuals and nations, the so-called learned professions that mould and direct and control the lives of the people, are the essential factors that must deal with this serious problem.

In the early history of the world, as in the patriarchal age, authority was vested in the head of the family, then over nations as a theocracy. Before the date of judges and kings, the priesthood combined in their official functions the offices of ruler, legislator, physician, priest, acting as the spiritual as well as the federal heads of the nation, these several functions existing in one individual not infrequently, as is clearly shown in the theocratic form of government of Israel under the Mosaic dispensation. He received from Jehovah all law and proclaimed and enforced it. From his decision there was no appeal; he was the health officer that regulated all sanitary conditions in the interests of the people; and he was their moral and spiritual guide, and teacher and ruler as well. It is questionable whether this

migratory people were tempted by the fruit of the vine, which in a barren wilderness they could neither plant nor cultivate or gather crops from; nor could the wild grape have been sufficiently productive, if it existed at all, to meet the needs of so vast a multitude of people.

Probably this may be true, to a certain degree at least, of all nomadic people.

It is then, for obvious reasons, that we must look to the dwellers in towns and cities. Man is a gregarious animal, and vices are largely the result of example and association, as well as natural inclination. And here our studies must begin and end, not only with regard to our special topic, but all topics that concern the human race as a whole. The urban populations of the globe, as compared with the suburban, the centers of population, from whence go out various controlling influences for good or evil.

The separation of the professions, of medicine, law, and the ministry or priesthood, placed each in the sphere of its own individuality and special administrative functions peculiar to each, to deal intimately with the individual, who constitutes—in the aggregate—the municipality, the State, and the nation.

While the semi-civilized and barbarous nations had a semblance to that which constitutes law, medicine and religion, we must turn to the civilized nations for a higher interpretation of these several relations to society. And so we can now inquire, as time passed on, in what manner the several professions, in their separate and to a certain degree independent capacity, so acted.

And, first, it is interesting to note in what manner the various religions dealt with the alcoholic problem,—Mohammedanism in its creed denouncing not only drunkenness but drinking, casting out the offender from all religious association and privilege, and in certain extreme sects, such as the Kurds, enacting the death penalty, thus enforcing total abstinence; Brahminism or Hindoism acting along similar lines as part of their religious creed. The Jewish religion, conservative and restrictive, advocated non-alcoholic wines, as recorded in the Old Testament (Proverbs, chap. 23), and one of its strictest sects, the Rechabites, were total abstainers from all forms of wine, whether fermented or unfermented. The Christian religion denounces, if not the temperate use, the excessive use of alcoholic liquors. The several so-called Christian denominations, being divided in this particular, while all denounce drunkenness, some allowing the moderate use of alcoholic wines to their members, and regard a fer-

mented wine as essential for sacramental use. Other denominations advocate total abstinence from all alcoholic liquors on the part of their membership, and do not use fermented wine in the administration of the Sacrament; but even in the so-called more liberal denominations of the church in this particular there seems to be a tendency to influence its members to practice total abstinence and to use an unfermented wine in the Sacrament. The Seventh Day Adventist makes such total abstinence an absolutely essential part of the qualifications for membership.

The attitude of the modern Christian church at large, therefore, is favorable, not to the so-called moderate use of alcoholic liquors on the part of its members, or in the celebration of the Sacrament, but to its final and absolute exclusion, under both conditions.

This tendency, which prevails throughout all Christian denominations, is especially marked in the educational influences of the well-organized temperance boards of the Presbyterian and Methodist-Episcopal churches.

The law has made wonderful progress along humanitarian lines. Up to the present time—only within a few years—the attitude of the law was this: The inebriate was not an irresponsible person, and any form of misdemeanor or crime, under the effect of liquor, did not condone the crime, but aggravated the offence, and did not modify the punishment, but called forth the extreme penalty of the law. This savors somewhat of the severe attitude of the law in the days of Charlemagne, when the death penalty was enforced for drunkenness. But time has radically changed the attitude of the law in this respect. The inebriate has now the sympathy of the law. He is no longer held responsible, but irresponsible; no longer dealt with along the line of punitive measures and penal conditions, but reformatory and humane measures. No longer the club and the pump and the prison, ten days or the fine, and repeated sentence and short-term imprisonment; but the asylum, the farm colony, the probation officer, and the parole,—and these made possible without the impress of pauperism or criminality, and the treatment of the inebriate put on a parity with the modern treatment of the insane; and indeed the analogy is not dissimilar to the condition of this class which prevailed before the days of Pinel, who opened the doors and asylums of France and gave reasonable freedom and light and air to suffering insane humanity, not only to his own countrymen and women, whose condition, by reason of their treatment and environment was hopeless, and to whom Bedlam was a living hell, but thousands of insane throughout the world,

and by his wonderful object lesson stopped that inhumanity of man to man, based on ignorance, it is true, but that made countless thousands mourn. No one will ever know the misery and suffering inflicted upon the inebriate in the centuries past—even comparatively up to a recent date—at least within two or three decades, the inebriate was misunderstood, was socially ostracised, theologically condemned, and legally punished and penalized, and classified, not as a diseased or sick man, but as a criminal.

This session will not be finished before we demonstrate to you the humane, reformatory, practical attitude of modern law and legislation toward the inebriate, as now assumed towards him in most of our states caring for this class, which constitutes so large and important a part of the population of our large towns and cities, and who are naturally and logically the wards of the state.

Now we come to an important phase of the whole subject—probably the most important—the relation of medicine to the alcoholic problem. From time immemorial to the present, we believe that there was not a period in the history of the practice of medicine when there was not some individual protest against the use, or at least the abuse, of the use of alcohol as a drug or medicine—certainly as a beverage. Its almost universal use had prevailed in the treatment of diseases until a comparatively recent date. No marked change occurred until within the period of an ordinary lifetime.

The writer's experience has covered a period of forty-eight years, thirty of which were spent in direct special work among inebriates and the treatment of other forms of narcomania, as visiting physician to an institution for their care and treatment. During this period he has been a close observer and student of the alcoholic problem, having exceptional advantages and viewing the subject from every possible standpoint.

We may divide the relation of the practice of medicine in the use of alcohol into three grades or epochs:

1. The **experimental stage**, or the stage of acquiring knowledge, accidentally or by deliberate research, concerning the supposed medicinal qualities of alcohol. This was a long and dreary period of practice, based on false theories, wrong conclusions and direful results and innumerable fatalities. Everybody drank alcohol in some form, when well. Everybody took alcohol when they were sick. The doctor was everybody's conscience and everybody's excuse. Now and then some one stood up and protested against the universal and indiscriminate use of alcohol as a medicine; but the wave of pop-

ular and professional opinion passed over him, and he eventually disappeared, leaving behind him only his record and his protest, and alcohol continued to be the panacea for all the ills the flesh is heir to.

However, these individual protests were not without effect. This age of ignorance and indifference passed into the period of **limitation** or restriction. Alcohol was not "good for everything." The profession began to realize that the saying, "If it did no good it could do no harm," was not true, but perniciously false and decidedly dangerous to promulgate such a statement. It was also recognized that alcohol had its uses, but that they were confined to certain classes and stages of disease.

This period was succeeded by a third period of **elimination** and **exclusion** of alcohol from medical practice—the period in which we are at the present time. While the practice of the second period still prevails among a certain class, a large majority of the leading and influential practitioners of medicine and surgery in this country and in Europe are excluding from their practice alcohol in any quantity, and also denouncing it in any form as a beverage. The great hospitals of Europe, on the Continent, and in America and elsewhere, every scientific center, reflects their action. Non-alcoholic practices are rapidly succeeding alcoholic practices. Recoveries are more frequent, fatalities less. The "drinking" doctor of the past century is not so much in evidence, and the so-called "temperance" doctor is regarded as safer and more satisfactory. The public is becoming more and more convinced that the new method of practice is safer and more desirable than the old method, and the doctor who does not give alcohol in his practice, is no longer designated a temperance crank. The drinking doctor has become and is becoming a **persona non grata**, and is passing away into a state of "innocuous desuetude."

Economic and commercial conditions, business interests, various occupations, professional life, positions of responsibility and trust, demand, under the teachings of science, the elimination of the drinker of alcoholic liquors; not the drunkard, mind you,—that goes without saying,—but the so-called habitual, moderate drinker. In the more dangerous, extra hazardous employments, even the occasional, moderate drinker has no place. He is, therefore, becoming a thing of the past. The nations of the world are demanding the practice of total abstinence in their armies and navies, for obvious reasons. Practical experience and common sense are rapidly eliminating the canteen and the grog ration from army and navy.

What has brought about all this marvelous change? Undoubtedly the attitude of medical science towards the whole question—comparative and experimental physiology, laboratory research work as to the action of alcohol on the human body in producing functional disturbance and organic change; microscopic or cellular pathology, action of alcohol on the pro-creative and constructive cells, the relation of alcohol to eugenics, clinical experience in the use of alcohol as a remedy; its effect on the cerebro-spinal axis, nerves of special sense, memory, mentality.

Dr. T. Alexander MacNichol, in one of his addresses, says, briefly:

"Fifty years ago men commonly believed that alcohol was food, tonic, and stimulant; but they were excusable for ignorance, as little was known of the physiology and chemistry of the blood and tissues; the action of bacteria upon the functions and life of tissue cells was a sealed book.

"The invention of instruments of precision and the application of more exact methods of examination has revolutionized our attitude toward alcohol. In the light of modern science alcohol is not a food, a tonic, or a stimulant."

In a word, science has rated and classified alcohol as a universal proto-plasmic poison to all forms of organic life.

Sir Victor Horsley remarks: "We cannot estimate what minimal amount we can safely take into our bodies and say that it will not be detrimental to our tissues."

The magic wand of medical science has been waved over direful and existing conditions due to ignorance and error, and their evil results have vanished and are vanishing away, as darkness before light. The whole subject resolved itself, logically, into a physical question to be settled by medical science alone. With this question the law and the ministry, primarily, had nothing to do.

What a privilege to witness the marvelous change the twentieth century has wrought! Formerly the law criminalized and penalized the inebriate. The ministry condemned not the drinker, but the drunkard, and without any consideration or leniency, as a sinner within the bounds of volition and responsibility, and if he did not reform he was consigned to eternal perdition; while medicine stood aloof, indifferent in its attitude, and complacently prescribed alcohol indiscriminately. What could the inebriate do? But medicine, animated by a sense of responsibility, assumed its righteous prerogative of dealing with the alcoholic problem.

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The modern attitude of medical science, conscientiously worked out the problem, irrespective of any adverse influence or wrong conception, but only to know the scientific truth, the whole truth, and nothing but the truth, was the salvation of the situation, and brought about a revelation to itself, which it gave to the world, the consummation of which was this great revolution of thought and action, not only in the learned and leading professions, but in every department of commercial, industrial and social life.

The findings of medical science are now being anxiously sought, Not only the common people, but the intelligent people are hearing gladly what medical science has to say; and the medical profession, along ethical lines, by pen and voice, are gladly and gratuitously giving out what they know.

This society, through its Journal and its members, by popular addresses and the circulation of thousands of pages of scientific literature, has been engaged for forty-three years, irrespective of its other work, in a propaganda of popular education along scientific lines. Nor in this connection can we fail to speak of the admirable work of the scientific temperance federation of Boston, through its popular journal, edited by Miss Cora V. Stoddard, or of the work of Mrs. Martha M. Allen, of the W. C. T. Union, as head of its medical temperance committee. It is needless to add that the British medical journal of inebriety, the medical press at home and abroad, individual action, and the interest of governments have aided largely in stimulating research work.

So, then, primarily and principally as a **physical question** the world looked towards medical science, which assumed the responsibility of unraveling the alcoholic problem, and has demonstrated the fact that alcohol is not a stimulant or a tonic, but a narcotic, an anaesthetic, and depressent—not a food—just the reverse; preventing assimilation and metabolism; does not assist in digestion, but retards it, and seriously injures the process, and is a disease-producing agent, resulting in physical, mental, moral degeneracy; that for good reasons it is being rapidly eliminated from medical use as an unsafe, unsatisfactory remedy. At the present time, at least, its use is being very much restricted, and it would seem, from recent indications, that even this limited use will, at no distant period, be altogether done away with in the theory and practice of medicine.

The present attitude of the medical profession—especially in Europe—is represented by leading scientists, physicians and surgeons of every great scientific center, men who are—without exception—head

and shoulders above the great average of the medical profession; leaders not only in their several specialties, but influential in social life. To medical men of this high class and character this great privilege and duty was in the past as in the present providentially assigned; these are the men to whom the race will ever owe an eternal debt of gratitude.

Since medical science assumed the duty of dealing with the alcoholic problem, let no medical practitioner be ashamed of the Gospel which it has made possible to the inebriate, or imagine that if he enters and follows the path marked out and trod in the past as in the present by these pioneers, eminent not only in this specialty, but in every department of medical science, he will not fail to share with them the duty and privilege and satisfaction of being a benefactor to the human race.

Time would fail me to mention other organizations, and other forms of temperance publications, which find their inspiration and influence in the results of scientific research work. The continued revelations of medical science, whose word is law in this particular, have become the very basis of temperance reform.

And finally, just in proportion as the several professions, and those who are engaged in giving scientific truth in this form to the public, adhere to the revelations of medical science, as shown and corroborated by fact and continuous experience, just in proportion will scientific temperance, which is, in brief, TOTAL ABSTINENCE from all forms of alcoholic liquors, under all conditions that medical science may demand, be a most desirable and accomplished fact, the glorious result of this triple alliance of medicine, law, and the ministry, working in perfect harmony and unity, independently in their several functions, yet dependently in their relations one to the other, animated by the same spirit, actuated by the same motives, and striving for the same end, cannot fail to lead the people from the mists of the valleys of ignorance and vice, along the right paths of hygienic and sanitary living, to the uplands of physical, mental, moral and spiritual attainment, into the higher and perfect life.

Medical science has pioneered and cleared the way and solved the alcoholic problem and demonstrated the true relation of the learned professions to each other, and to the inebriate, and his social status and relation to the State.

During the last session of the Sixty-third Congress thirteen bills were introduced to curtail and abolish the liquor traffic. This gives some idea of the activity of the temperance forces in reform work.

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THE PSYCHICAL TREATMENT OF ALCOHOLIC
INEBRIETY.

By John D. Quackenbos, A.M., M.D., Member of the London Society for Psychical Research; Fellow of the New York Academy of Medicine; Member of the New York Academy of Sciences; Fellow of the New Hampshire Medical Society and the New Hampshire Society for the Prevention of Tuberculosis; Member of the New York Medical Association; Member of the American Medical Association; Member of the American Association for the Advancement of Science.

I have been requested by your Secretary to preface this paper on the Psychical Treatment of Inebriety with an explanation in brief of Mental Therapeutics—as to its philosophy, the source of its power as a controlling influence in mental and moral abnormality, the method of exploiting it, and the far reach of its application. In accordance with this request, I take great pleasure in presenting you with a resume of my apprenticeship to this form of healing, and of what I have found it capable of accomplishing in my practice, which now covers 10,000 experiences.

It was in the hope of establishing an inductive principle as regards the applicability of suggestive therapeutics to the eradication of criminal traits, hereditary and acquired, that a series of experiments were begun by me, during the winter of 1899, in the Borough of Manhattan. In one of the New York lodging-houses for boys, the only institution of the kind to which access was accorded, a number of intelligent young fellows, representing the newsboy, bootblack, and gadabout class, were found desirous of being freed from practices prejudicial to their physical and moral health. The cases there encountered included cigarette addiction, kleptomania, moral perversion, and low or misdirected intelligence. The results obtained not only justified the conclusion that psychical suggestion was a potent agent of reform, but stimulated investigation in a hundred and one novel directions, so that for fourteen years I have devoted my professional life almost exclusively to the study and practice of mental thereology.

In default of a more perspicuous philosophy, I have been accustomed to explain the phenomena of suggestion on the supposition of self-manifestation in two distinct spheres of consciousness described by psychologists as the objective or supraliminal (the every day waking life), and the subjective or subliminal (the life outside or extra-planetary). The subliminal, superior, or Better Self, constitutes the

"inner or spiritual man." The objective self is the expression, imperfect at its best, of this subliminal personality through organs of body and faculties of mind. The objectively conscious man is thus continuous with a higher spiritual self, through which, Professor James contended, "saving experiences come." The possibilities of subliminal control are boundless in the objective existence, and the whole purpose of suggestion—which is a straightforward, heartfelt, dynamic appeal to the sub-conscious mind—is the establishment of such control, either where it has become relaxed or in fields where it has not before been exercised. Where organs are sound, all defects or irregularities in the fulfilment of their functions may be remedied by assumption of the natural psycho-physical control, and so diseases that are not organic are curable through impulse of the subliminal self. Still further, all attitudes of the objective mind—its trends of thought, opinions, beliefs, desires, propensities, tendencies, emotions and passions—are controllable and alterable by this higher human personality, **exclusively along lines that are moral and wholesome.** In every human being there exists a store of unused force, which has been called soul power or supernormal faculty, and the object of the suggestionist is to incite the action of this psychic force and impel the subject to exploit it. In other words, there is in every man something more powerful than the man we see and know—that is not God. Appeal is made to this something. And a willing subject will always act in response to that "touch of explosive intensity," as Professor James has designated it—that suggestional force which awakens ethico-spiritual activities in the earth-life and subordinates the lower tendencies of the carnal nature, when imparted by one who is in genuine sympathy with the subject and operates with the courage of conviction.

The transfer of spiritual energy from the higher to the lower nature is possible to every man who is disposed to come into rapport with a qualified suggestionist. The talisman is Personality. The patient is awakened to a consciousness of his own sufficiency, and in the light of a rational explanation is stirred to exercise power that inheres in him. There is no personal domination. The will may be the ring upon which are strung all the keys of our objective nature; but the will bends and breaks before the force of impulse launched in the cause of truth and righteousness from the subliminal plane of spontaneous absolute command of the objective man by the man subjective. No man's will can withstand such impelling force projected from his better Godlike nature. The secret of suggestion is to stimu-

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late that output of spiritual energy which overwhelms the antagonism of the will and automatically compels in the intelligent creature adjustment to the law of right. Life, is indeed, always greater than the frail objective man that lives it. Thus the theory that one man's will can be forcibly (that is, without his consent and approval), subjected to another man's will either in or out of sleep, or that his objective will can, in actual conflict, prevail against the divine potency in the man, is inconsistent with an exalted conception of the inherent moral excellence of human nature.

Will power, then, has nothing to do with the result; the subject is not the tool of the operator. It is not the will of another than constrains and regenerates. It is not God compelling worthy action. It is the free man himself that has come to his own assistance, that has wrought an objective character change in response to an appeal, rendered irresistible by its conformity to expedience and truth. The Inner Man, or spiritual personality, never fails, if wisely instigated, to exalt the earth-life, to raise humanity to a level all but divine.

Some of you may already be asking the question: How far is finite man justified in employing the instrumentality of suggestion for the betterment of human souls?—for it has been caluminously said of me (and by a clergyman) that I am claiming to do what the Almighty has failed to accomplish in two dispensations.

Early in my psychic practice, intractable cases of moral and spiritual diseases were referred to me for treatment. I heard the tongue that all men speak when fear, heart-hunger, remorse, despair—constrict the throat. I listened to the wail of disconsolate lips that refused to be silent. I saw the iron of the new-made grave penetrate the agnostic soul and wring from it the cry, "Give me your faith!" I was thrilled by the petition of sweeter personalities, spiritually starved, for conviction by the grace of God—and asked myself your question:—How far is man justified in efforts to extend spiritual aid through these suggestional channels? How much dare he promise to the enthralled soul, or seek to do for its relief, without incroaching on the sphere of divine functions?

And this is my answer:

Human life, at its best, is but an imperfect expression, through brain and nerve organs, of the Superior Spiritual self. But let this inner spirit be inspired to assume supremacy, and the heart will be immediately opened to conviction. Since by mental suggestion a given individual may be rendered responsive to good impulses, it is incontestably right to use this instrumentality as a means even of

conveying to the soul ideas of sin and grace. We do not thereby regenerate the soul, or claim any such intent; we simply place it in a position to receive that which can regenerate it. If suggestion be backed by prayer and faith and spiritual insight, the man subjected to it may be carried into the very presence of God who alone can renew the incorporeal energies of the higher self. Not that prayer and faith can make the word of God more powerful; but they certainly reinforce with phenomenal efficiency these higher aspirations, and tend peculiarly to spiritualize the earth-life of him for whom we put forth effort. Faith, then, is not creative in the sense that it can regenerate by or of itself; but it is productive in that through it, God and man, his agent, may inspire both to will and to do.

The secret of inspiration is first to make the subject conscious of his resources and then instigate the output of force essential to regeneration. Surely, this is justifiable. And special emphasis is laid on the fact that it is no reproach to manhood, no derogation from dignity or self-respect, to seek aid through suggestional methods, as the subject is merely impelled to exploit inherent power, which is his individual property.

Let the brain be sound, and the immediate output of control in response to suggestion is little short of the miraculous. Assured of emancipation, the subject is sent forth into the world susceptible only to good impressions and high interpretations. In the words of a close observer of these effects in Dr. Wetterstrand's office: "Drunkards, drug-slaves, and derelict natures enter the chamber of peace with a fiend's expression on their faces, to come out in an hour with an angel's smile."

It happens to be a psychological fact that in a state of sleep, natural or induced, when the objective consciousness is in shadow, and the individual is practically excarnate by reason of suspended sense-activity, and hence subliminally focussed in all the phases of his personality and all the infinity of his powers, the dynamogenic touch may be imparted—

By a fellow-being who, owing to the existence of mutual sympathy and confidence, is in rapport with the sleeping subject.

In extreme cases, where the brain, the transmitter of moral force from the higher spiritual self, is supernaturally alert, we are most certainly justified in temporarily deadening with a harmless hypnotic the activity of the cells, in order that sleep may be induced. This is the daily practice of many European scientists. It is a recognized fact that the subject must be wooed into the appropriate sleep, with

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the use of an innocent sedative, where there is no alternative. Provided there be rapport, suggestions given during sleep so induced are post-hypnotically fulfilled. Years ago, I became convinced that light sleep is the most highly suggestible state.

Inspiration communicated in this negative condition of animal being calls forth adequacy dormant in the ego, to regulate physical function, enhance faculty, or modify character. The directions imparted by emphatic declaration may not be objectively heard by the sleeper; but in some mysterious way they pass the sentinels of his world-consciousness unchallenged, to rivet the attention and launch the spiritual energies of the subliminal man.

It is readily comprehensible that inspirational power is measured absolutely by quality of soul. Success depends on the worth of the practitioner. If he be not an earnest and sincere believer in his suggestions; if he sees not a brother in the evil-doer, nor "finds in love the heart's blood of his song;" if he withholds that best gift one can offer to his neighbor—viz., himself—he can expect no return from the personality he addresses. Magnetism is nothing more than earnestness and sincerity, coupled with insight, fellow-feeling, patience and tact. These essentials cannot be bought and cannot be taught. They are "born by nature," they are dyed with "the red ripe of the heart." Given the indispensable qualities of a perfect suggestionist; given desire for reform on the part of the subject, with the induction of a congenial passiveness—and regeneration may be effected in a single hour—regeneration that is radical and lasting.

The beautiful feature of such suggestional treatment is its unequivocal naturalness. It has naught to do with mesmerism, odylism, hypnotism as popularly understood, in which a low stratum or fallible phase of the personality is addressed, and the subject may willingly accept the deception implied in a comedy. In natural sleep the higher personality is reached with its keen insight, inflexible principle, limitless capacity.

Suggestion, as I have explained it, has proved peculiarly applicable in the restoration to perfect fulfillment of functions that are disturbed or half-performed, through its regulation of the ordinary processes of digestion, metabolism, circulation, and innervation; in general. Errors in assimilation may be corrected, and nutrition made perfect in fields where it is defective. Pain is controllable, childbirth may be robbed of its pangs, and minor surgical operations have been successfully and painlessly performed on hypnotized subjects.

My time limit forbids anything more than mere mention of the appositeness and potency of suggestion in the treatment of delusions, exaggerated worries, and hallucinations; of remorse for supposed unpardonable sins; of morbid fears, apprehensions, and doubts; of unlawful infatuations and uncontrollable impulses; of hauntings by phantoms, persecutors, and preposterous notions; of psychoneuroses and incipient insanity. It is generally conceded that asylums for the insane are filled with inmates who might have been saved from such entombment had they been thus opportunely treated.

My own experiments have had largely in view the application of suggestive treatment in cases of moral obliquity and in the development and exaltation of mind power. The cases of moral import successfully dealt with through the influence of unused power include:

Cigarette addiction, and the disturbed mentality of nicotine poisoning.

Drink habit.

Kleptomania, habitual falsehood, pseudomania, hopeless dishonesty, mania for swindling, pawning, and gambling.

Secret vices and sexual aberration.

Disobedience, viciousness, and degeneracy in children.

Spiritual inability and general moral impotence.

The readiness with which these conditions yield to the power of suggestion—the fact that human character may be transfigured in a single hour by a human instrument—is most remarkable. And it cannot be too often insisted on that the possibilities of sub-conscious crime dance upon nothing. **There is no such thing as a sub-conscious criminal.** No proof exists that a crime has ever been committed through the instrumentality of suggestion, which is valueless as an agent of temptation in the honest and clean. Thus, fortunately, the power of suggestion for evil doing is limited, while its influence for good is without horizon. Whereas, for instance, it is easy to restrain a kleptomaniac, it is hardly possible to make an honest man steal by urging him in hypnosis to do so. Criminal acts, if suggested, will not be posthypnotically committed by persons of balance and principle. All suggestions out of harmony with moral convictions, common-sense, and the wholesome life habits of the subject, are likely to be futile.

As to the drink habit: Inebriates as a rule yield readily to the hypnotic influence, and fortunately so, for as Dr. Brauthwaite contends, a radical cure depends on some change in the mental state. This holds good in the case of true dipsomaniacs or drinkers in whom

an irresistible insane impulse recurs at intervals, and other periodic and chronic alcoholics. Regular daily habitues may be dealt with whenever they can be induced to sober for a few hours. I have usually found it unprofitable to attempt influencing an intoxicated person; although any indulgence that has not stolen the patient's brains, does not imply that treatment is useless. It is questionless the duty of the suggestionist to avail himself of what may be his only opportunity. Periodic drinkers are best treated just before the close of the cycle of sobriety, or immediately after their excesses. Regularly recurring debauches have periods of varying length; and I have satisfied myself that in not a few instances a relationship exists between the accumulation of intestinal toxins in the system (all these subjects have indicanurea) and the oncoming of the irresistible thirst. But the abuse of tobacco explains at least 70 per cent of all cases of inebriety, the depressing effects of the volatilized poisons contained in the smoke, especially when these poisons are inhaled, instinctively suggesting recourse to the antidote, which is alcohol. Periodic drink-storms are usually forecast by significant indications, well known to the family and friends of the victim—irritability of temper, unreasonable suspicion, abnormal restlessness, unaccountable depression. Immediately upon the appearance of these symptoms, the patient should be treated by suggestion, before opportunity is given for indulgence of the craving. Such a subject frequently recognizes his danger, and sincerely wishes to be cured. He is tactfully conducted into the subliminal sphere, and then assured that, in accordance with his own desire, he has lost all craving for stimulants; that alcohol in any form is a virulent poison, and, as a safeguard, that he cannot swallow it, cannot carry the containing glass to his lips. If the patient be an excessive smoker, suggestions having in view the obliteration of tobacco hunger are interwoven—always with his objective consent. The society of dubious companions is tabooed; the pleasures associated with drink and the glamour of the bar-room are pictured as meretricious and placed in vivid antithesis to the chaste delights of home life. The physical, mental, moral, and economic bankruptcy that accompanies intemperance is held up before the view of the sleeper, and he is forced to the conviction that begotten of this apprehension has come into his soul an abhorrence for drink and all that it stands for. He realizes the presence of efficiency within him adequate to the enforcement of radical abstinence as the principle of his life; and he is rendered insensible, for the future, to any such combination of desire and opportunity as has usually consti-

tuted temptation. So he is led instantaneously to scorn recourse to alcoholic stimulants, or to extrinsic exaltation of any kind, for any reasons, and to depend exclusively, under mental or physical strain, on the units of energy legitimately manufactured out of nutritious food, non-intoxicating drinks, air, exercise and sleep.

Constructively, the sub-personal mind is then directed to the vocation or the avocations, or both, as circumstances suggest; the idea that better work can be done under the influence of alcohol is dispelled; and a career of wholesome activities and satisfactory success is imaged as the legitimate result of the abandonment of the compromising habit. The patient is left asleep an hour or more in the atmosphere of these convictions.

It will thus be seen that mental suggestion is of the nature of inspiration. It is a summoning into control of the true man; an accentuation of insight into life and its responsibilities; a revealing—in all its strength and significance—of absolute, universal, and necessary truth, and a portraiture of happiness as the assured outcome of living in consonance with this truth.

Such inspiration, to be efficacious, cannot be mere lip-work or rote-lesson. It implies a belief in the suggestions offered, an eloquent and incisive manner born of the courage of conviction; in short, it is a transfusion of personality. Perfunctory speeches are of no avail, for the mind of the subject is endowed with supranormal insight, at once detects the disingenuous, and rejects the counsel of an uncandid or lukewarm guide.

The physical side is not to be lost sight of in a rational treatment of the inebriate. As there is no disease or condition that is purely mental or purely physical, successful treatment can rarely be given exclusively from the psychic standpoint. It would be immoral to suggest to a patient what the brain and nerve organs are incapable of doing. It would be equally immoral to withhold the drugs that make them capable.

While hypnotic suggestion may regulate a disturbed metabolism in the nerve organs or check atrophic changes in cell protoplasm (alcohol is a protoplasmic poison), it cannot be expected to repair lesions in the blood-vessel sheaths or suddenly atone for the results of an exaggerated destructive metamorphosis in the nerve cell bodies. Fortunately, the damage to the cells is measurably repairable by discontinuance of the poison, and judicious administration of nourishment, general and specific. Therefore, in my treatment, the stimulant is immediately withdrawn; the system is cleansed of the waste and

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toxins which alcohol predisposes it to retain; the diet is adapted to the condition of the patient; the phosphoglycerates are administered with a view to improving the quality of the lecithin, and so accentuating physical energy, restoring enfeebled mental faculties, and exalting the moral tone; for a few days, ordinary tonics to counteract reactionary physical depression, and where necessary, a hypnotic drug to secure sleep.

It is not claimed that the tendency to relapse is obliterated by suggestion. The cure may or may not be permanent, as is the case with rheumatism, quinsy, bronchitis, intermittent fever with its distinct germ and distinct specific. No physician is asked to guarantee a patent against a recurrence of tonsilitis, especially when the patient deliberately exposes himself to the appropriate conditions for a relapse. More cannot be expected of the physician suggestionist, who is not a miracle-monger. The utmost he can do in a prophylactic line is to reject all compromises in his treatment, suggest total abstinence, forbid exposure to temptation, and render insensible to the psychology of the saloon. Courting a conflict with the demon of drink, as subjects impatient of restraint and anxious to test themselves will sometimes do, is playing with fire. In view of such contingencies, my policy is to give at least five treatments covering three weeks or more. After that, I insist on seeing my patient once a month for several months, renewing the suggestions as I deem necessary, and looking carefully to his physical welfare.

The following case of a gentleman who drank whiskey is representative both of the alcoholic disease and its causation, and of the method pursued.

Eight years ago, Mr. A., who had vainly resorted to the popular drink cures, was induced by friends to make trial of psychic treatment. Beginning as a college youth to carouse with his mates, he passed successively through the stages of occasional use for convivial reasons, frequent indulgence to brace him for task or pastime, periodical paroxysms of alcoholic debauchery, until at forty, he found himself a continuous drinker, impelled by an insatiable craving with marked stigmata of degeneration and a growing incapacity for professional duty. His wife and daughters, for years subjected to humiliation at his hands, had come to feel the pinch of want and smarted under the construction placed upon his actions by a merciless society. Affection had died in his heart, and with it both self-respect and religious sense. In such a case months are required to repair the damaged cells and so restore the patient to normal physi-

cal efficiency. But within a week the mental attitude may be permanently changed and the craving for stimulants obliterated, without experience of the nervous exhaustion and unrest that usually accompany discontinuance of the habit. Since his first seance (now eight years ago) Mr. A. has experienced no desire for alcohol. The suggestion was given that he would no longer deceive himself with the thought that he could safely take one drink and then stop (one of the common causes of relapse), but that it was impossible for him ever to want a drink or ever to take a drink for any conceivable reason. He has abstained, not through conscious effort, but spontaneously because of an ingrained disinclination. In this instance, it was further necessary to forbid the use of tobacco. The chain of cause and effect was broken at a blow. The patient neither smokes nor drinks. And he has made amends for the suffering he has inflicted on his family by exalted action meriting their respect and love.

In contrast with this is the following extreme case of chronic poisoning by adulterated spirits, excessively indulged in between the ages of sixteen and thirty-seven. Every Saturday night, W. B. drank to intoxication, and committed other excesses that fill his mind with remorse. He imagines the people riding on the car with him know all that he has done, and that the children on the street are cognizant of his misdoings, and are calling him names significant thereof. He is afraid of everything. He suffers from hallucinations of vision. A woman with a baby carriage is forever following him. Flies attend him everywhere, hovering about. He does not know the difference between a real and imaginary fly, and continually shoos the latter variety. Three separate voices talk to him, coming up the dumb-waiter shaft or speaking through the windows. They never "let up," even while he is at work, and at times seem so real that he looks around to see who is speaking. Three years ago his mind gave way, and he took a flatiron and went upstairs to kill a man who was calling him vile names, the man being perfectly innocent. He rallied from this seizure, but returning to his fusel oil has become subject to melancholy spells and to attacks of amnesia, so that he loses his sense of identity for days at a time. This is not a common case of three-sheets-in the wind, but rather of incurable degeneration of the brain. Mental therapeutics offers no hope for such a dement.

There are multiform intermediate states on the way to alcoholic dementia. A recent patient, a young man of 30, had, according to the report made to me, been intoxicated every day for five years. On three successive occasions, immediately after treatment, he proceeded

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to get drunk, lost all knowledge of himself with the power to orient, and remained for a day or two in a state of helpless stupor. In a long experience, I can recall but two other cases that left my office after treatment to disregard the suggestions and in a spirit of cussedness, to indulge to excess. The psychology of such action is comprehensible on the theory that the drinker exhibits a dual personality, one element of which, in sympathy with a latent craving, violently opposes his cure, and holds the field against the transmission through a brain incapacitated by alcohol and absinthe the impulses that usually control. This subject yielded completely at the next seance, and has since remained straight.

In suggesting to such cases, I have sometimes been interrupted by an alternating phase of the personality under treatment, which replies to my appeal in defiant language, or throws the subject into a convulsive tumult. Not infrequently, as the vital point is touched upon, the patient will fling himself about the bed or out upon the floor, indicating that the effort to make whole is resented by an active discordant element, and suggesting the thought that every man is his own devil. Of this resistance, there is no recollection after hypnosis is over. If the operator undeviatingly persists in his attempts to unrubbish the mind, such manifestations of antagonism eventually come to an end, and the patient accepts the inspiration with perfect composure.

A lady who was referred to me in 1905 by Dr. Frank Miller the laryngologist, received the suggestion that her arm would refuse to obey any impulse to lift to her mouth a glass of spirits or wine. This was silently opposed by some objecting fragment of her personality, but ineffectually; for shortly after, at a dinner with a friend at the Waldorf, she ordered in an attitude of perversity the usual bottle of Champagne. But when it was served, she found herself unable to raise her glass from the table. This was certainly an effectual protest of the higher self. The psychology of such a case opens an interesting study.

A *sine qua non* of success in psychic treatment is generally the consent and acquiescence of the patient. The question has been asked whether it is possible to cure a man of alcoholism by this method against his will. I can answer that inquiry in the affirmative. Apart from the many who are cured despite mental reservation at the outset, there is an occasional case of regeneration in the face of pronounced antagonism. By way of illustration, the head of a Boston firm once sent to my office a valuable salesman who had accepted the

alternative of mental treatment as a choice between drink cure and discharge. The subject was psychologized in the usual manner, and dismissed cured. Two years later, a friend who was casually introduced to the employer mentioned my name in some other connection, and was asked whether she referred to Dr. Quackenbos of New York. "Yes, do you know him?" was the reply. "I know him by correspondence," said the Boston man. "We once sent him our most important representative to be cured of alcoholic intemperance." "And did not Dr. Quackenbos cure him?" "Oh! yes indeed," was the answer, "but the man has been angry ever since." The patient objectively resented the idea of prohibition, but was constrained by the protest of his subliminal, and so automatically forced against his will to abstain. He positively could not go on a spree, although he wanted to.

The views advanced here today are based upon an experience with some 1,000 cases. Of these, 75 per cent have been saved, some having kept the faith for ten or twelve years. Of the remaining 25 per cent a number cannot be traced; a number indifferently submitted to one or two treatments out of deference to the entreaties of friends, and hence there was no objective self-surrender; a few who were brought to me for treatment were found to be alcoholic dements, and hence insusceptible to suggestion; a number were society women who, in my experience, are almost without the pale of hope. If there were no other field of application for psycho-therapeutic methods, this one alone would justify a life devoted to their study and development.

The treatment outlined appears to me to be of a much more elevated nature than that used in the ordinary drink cures, most of which are in reality mere suggestion cures, there being no particular virtue in the drugs administered, as there is no specific for the cure of drunkenness. The temporary success occasionally met with is due entirely to suggestive action on a susceptible patient anxious for relief. The dazzle of mystery plays its part in the process, and thus the mere drug healer differs from the regular physician who operates on the psychic centres with the full consent and understanding of the patient. In the words of Dr. H. S. Jones of Kansas City, a correspondent on this subject to the Philadelphia Monthly Cyclopaedia and Medical Bulletin for October, 1913:

When you think the proper time has arrived, give your patient 1-20 grain of apomorphine. As soon as you have given it, and before the medicine has had time to act, give him a drink of whisky. The resulting nausea he will believe to be caused by the whisky, and for a long time the very smell of whisky will make him sick. In fact.

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it is well to encourage this idea, and also to assert that his drinking within a year or so might prove serious. These little deceptions are justified. During the treatment, should the patient become very nervous, somnos can be administered with good results. For several days after giving the apomorphine let the patient get a good smell of the whisky; but do not permit him to take another drink unless you prepare him with the same dose of apomorphine. When the first dose of apomorphine has been given and its nauseating effect produced, the patient should be told that a cure has been effected.

Cures nearer home are equally unethical. No drug treatment *per se* will ever effect a cure. Success in such treatment implies a tricking of the patient. As a rule, about 70 per cent relapse. Hence many such cures have lost their prestige because the psychic influences have gone by the board.

The success of psychic treatment must bear a distinct relationship to the amount of injury already inflicted upon the brain cells and the accompanying mental deterioration. Its advantage manifestly consists in the rapidity of restoration to self-control without the necessity for effort of will, without the physical discomfort of suffering, that usually attends abandonment of the habit, and, most conspicuously, without the breaking of family ties and the enforced absence from professional or business duties that are implied in sanatorium treatment. Moreover, it affects the continuous expression of moral force in the subject, who not only abandons the use of alcohol, but otherwise expresses manliness in all his domestic, social and business relations. Drug cures leave the moral nature uninfluenced.

When the conscientious physician reaches the conclusion that little, if any, good can be derived from the routine treatment of inebriety, the psycho-therapist steps in and rescues by transforming the character, changing the coward into a moral giant, the weakling into a man.

In closing, let me insist on this fact, viz., The failure of a given suggestionist to effect the cure of an alcoholic or drug addict, does not imply that such a subject is incurable through psycho-dynamic influence. The sufferer should make trial of another personality. Especially is this to be considered in Emmanuelism failures, where cures are attempted by unqualified clergymen, who are ignorant of the mental states in which receptivity is at its height, and apply extremely crude methods with faith in their efficacy. The same criticism applies to the tedious methods of psycho-analysis. In the latter instance, weeks may be required to effect the cures accomplished in hours by intelligent mental suggestion.

THE PSYCHIATRY OF INEBRIATES.

By J. T. Searcy, M. D., Supt. Alabama Insane Asylum,
Tuscaloosa, Ala.

The word **Psychiatry** comes from the two Greek words *psuche*,—mind and *iatros* a physician,—or *iatreia*, care or treatment. **Psychiatry** therefore means the care or treatment of persons mentally abnormal; and the **Psychiatry of Inebriates** means the care or treatment of "drunkards"; or, by recent extended meaning of the word *inebriate*, it means the care and treatment of any person, whose mental aberrancy arises from the repeated use of not only alcoholic drinks, but, also, from the use of other narcotic drugs; most frequently the opiates. It is good to have a term to embrace the whole field of "drink and drug habitues"; and the term "**inebriety**" is being, in my opinion, very properly extended in its meaning to embrace all such cases.

There is a long list of drugs in medicine that have chemic effect upon the sentient nerve lines and centres of the psychic department of man, and obtund, in small doses, and entirely suspend, in larger doses, the function or faculty of sentiency, or sensation, or feeling, or consciousness, in these most delicate structures. These drugs range in degree and kind of effects all the way from those of chloroform or ether to those of nicotine or caffein. Small doses of any one of these "narcotics" begets a "pleasurable feeling" in the person; large doses suspend all sensation and consciousness. Three of the mildest of these drugs have gotten entirely out of scientific hands and are generally used in civilized society as luxuries, because of the pleasurable "feeling" they chemically beget. These three drugs are caffein, nicotine and alcohol. Women and children, generally in society, take caffein as a luxury, and men, generally, take caffein, nicotine and alcohol.

While the first subjective effect of any one of these drugs on sentient structures is pleasant, their repeated use begets a condition of increased sensitiveness, so that the result is an unpleasant over-sensitiveness or general discomfort, when the drug is withdrawn. Such a sequel follows the repeated use of any one of them. This is what constitutes "the habit," which is said to be acquired. The **habit** is no more than an acquired over-sensitive condition of the nerve structures,—a neurasthenic hyperaesthesia,—which occasions a constant **general discomfort**, which the habitue knows he can relieve by taking

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more of the drug. In this way he acquires an increasing nervous hyperaesthesia,—a “growing general discomfort,” which requires more and more of the drug to relieve it.

The degree of discomfort the habitue experiences after the withdrawal of the drug is a good indication of the amount of injury done to his sentient structures. The user of any one of these drugs can be called a “drug habitue,” when he experiences the general sense of discomfort, which he recognizes as the condition for the relief of which he takes more.

The chemic anodyne action of any one of the narcotic drugs on the sentient structures is the object sought in their administration as medicines, and is ignorantly sought by the habitue. Their repeated use is always injurious to these structures. The pathology of their use consists in this. They always produce a **discomforting hyperaesthesia**.

The injurious effects of these drugs are, however, not confined to the afferent sensory nerve lines leading to the conscious brain or to the sensory tracts of its posterior region, but are also shown in damage done to the tracts engaged in reason, recollection and execution. There is often very apparent impairment of all the cortical functions. The habitue's memory, judgment and executive volition are not so good. Besides, if there is any inherent or inherited tendency to abnormal action in any of the functions of the psychic-centre, it is rendered more apparent. The so general use of alcohol produces numerous illustrations of the damage done to the whole psychic-centre. Such cases are coming up in all directions in society. Alcohol particularly has a general chemic effect and injures not only the receiving sensating tracts in the posterior brain, but the whole sphere of the cortex,—which produces cases of general psychic impairment.

Alcohol-inebriates, for these reasons, become frequent exhibitors of such grades of psychic abnormalities as render them offensive, troublesome, or dangerous to others, so as to bring them, as insane persons, within the cognizance and jurisdiction of a court. They are numerous offenders in society. Something has to be done with them, for public comfort and safety. Because alcohol particularly has its chemic effect upon the whole cortex, the care and treatment of its so numerous habitues is a live and growing question in public policy. Alcohol is a very active agent in producing psychic aberrancies of all kinds. The peculiarity of the aberrancy produced is generally determined by an inherent tendency or predisposition in the brain of the person to that kind of action. Any inherent tendency to aberrant

action is made to show itself more apparently. All the varied complexities of "insanity" can be shown in alcohol-inebriates,—chemically produced by the drug.

Psychiatrists everywhere are confronted with the care and treatment of alcohol-inebriates. A specialty in medicine has grown up, as a necessity in society, for the treatment of such persons. Private and State institutions for the treatment of inebriety have arisen on all sides. Some differences of opinion have arisen, as they always do, in medical practice, as to methods of treatment; and it has proved a field for much imposition and fraud.

The fact that on the withdrawal of the drug there is much discomfort on the part of the habitue has led him to insist that, in some way, he shall be treated without this consequent pain. A catering to this demand has given rise to many methods of practice,—until the principal subject for discussion in gatherings of these practitioners is whether there shall be an immediate and entire withdrawal of the drug or a gradual diminution of the doses.

The fact that, in private and voluntary institutions, the physicians have not a complete control of their patients, and patronage, to a great extent, depends upon their yielding to the wishes and demands of their patients, has led to many methods, not conformable to the true pathology of the malady. The most obvious indication for treatment is the prompt withdrawal of the toxin, which is occasioning all the trouble. If the patient's wishes are consulted in the matter this cannot be done.

State institutions, where the patient is committed by law, as one who is not mentally capable of prescribing his treatment, and who is under the entire control of the physicians, are the most efficient and prompt in the treatment of these cases.

Notwithstanding the discomfort of the patient and his appeals for more of his drug, the indication is its immediate withdrawal.

When the clinical chart, which record is kept every three or four hours, shows that other functions, such as temperature, respiration, heart's action, etc., are running normally, the complaint of the patient need not be taken into consideration in his treatment. Other substituting anodynes of which I like best, codein and hyoscine, can, in extreme cases, be used, generally unknown to the patient. Strychnine seems to serve a good purpose, regularly administered. Many substituting drugs are in use at this time. The withdrawal promptly of the drug used by the patient should be the principle of practice, and no substitute used, except in extreme cases, when the clinical

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chart indicates them. To place the patient in bed, and use free catharsis, to rid the blood of the other toxins that arise from the digestive tube, is generally indicated,—with such diet as can be readily assimilated.

The Psychiatry of inebriety, in which there is much difference of opinion, is best conducted, where the physician has entire control of his patient, is not influenced by his complaints and appeals, and principally consists in the immediate withdrawal of his drug.

It is often a matter of surprise and of congratulation on the part of the doctor and of the patient how readily he responds to the withdrawal of the drug after a few days, and returns to an apparently normal condition. At this juncture, such cases generally demand to be set at large again; often with an honest purpose to withhold from the use of the drug. This, in the majority of cases, is done before the afferent sensory nerve lines and the sensory tracts of the brain have returned to a stable condition. The inability of the patient to appreciate this is often a thing to be recognized, and frequent relapses occur on account of it.

There are also many cases in which there is a condition, often hereditary and sometimes acquired, of psychasthenic hyperaesthesia, which, like most psychic abnormalities, has a tendency to recur after a longer or shorter normal interval. Not only is there, at that time, a recurrence of the over-sensitive, psychasthenic hyperaesthesia, but also, in the whole cortex, there is a failure in general brain ability or "will power," so there is less ability to reason and less ability in "inhibition," or ability to hold to a resolution. A recurrence to the drug-habit, comes in this way in certain cases, who are very difficult to treat and to insure. Inherent hereditary brain tendency and brain inability affect and determine the prognosis and the security of most cases, which condition is not much amenable to treatment in the individual. It reaches back through ancestry, and is often inherited from parents addicted to such habits.

Relapsing and recurrent cases come in this class, often very disappointingly. Inherent ability to hold to a good resolution is one of the highest tests of an individual's brain strength. Drink and drug cases are generally weak in this particular.

In twenty-six years the deaths from chronic alcoholism in Italy and suicide statistics have quadrupled, and the question become a very strenuous one, how the Government can foster the wine industry and prevent the alcoholism and inebriety that follows.

**SYNOPSIS OF THE FORTY-THIRD ANNUAL MEETING OF
THE AMERICAN MEDICAL SOCIETY FOR THE STUDY
OF ALCOHOL AND OTHER NARCOTICS, HELD AT
"THE RITTENHOUSE HOTEL," PHILADEL-
PHIA, PA., DEC. 3 and 4, 1913.**

The meeting was called to order by President L. R. Mason, M. D., of Brooklyn, N. Y., and the Secretary, George H. Benton, M. D., of Miami, Fla., read an abstract of the papers which were read at the last annual meeting at Washington, D. C., in December, 1912, which was accepted and placed on file.

Resolutions of condolence were sent to Dr. T. A. MacNicholl, and regret to Col. L. M. Maus, U. S. A., both of New York City, by the Secretary at the request of the Society.

At the Executive Session of the Society, held on the 4th of December, the following officers were elected for the ensuing year:

President—Jno. Jos. Kindred, M.D., Astoria, L. I., N. Y.

1st Vice-President—T. A. MacNicholl, M.D., New York City.

2d Vice-President—Alfred Gordon, M.D., Philadelphia, Pa.

3d Vice-President—D. H. Kress, M.D., Chicago, Ills.

4th Vice-President—Col. L. M. Maus, U.S.A., New York City.

5th Vice-President—Tom A. Williams, M.D., Washington, D. C.
Secretary—George H. Benton, M.D., Miami, Fla.

Asst. Secretary—DeLancy Carter, M.D., New York City.

Corresponding Secretary and Editor of the Journal—T. D. Crothers, M.D., Hartford, Conn.

Treasurer—Pitts Edwin Howes, M.D., Boston, Mass.

The retiring president, L. R. Mason, M.D., was elected as an Honorary President of the Society, in token of his many years of untiring work to promote the best interests of the Society.

The Committee to revise the Constitution and By-Laws made the following report, which was accepted and adopted by the unanimous vote of all in attendance.

PREAMBLE.

The declaration of principles of the Society 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 Society, and also the established facts which will serve as a guide in further research.

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 usually 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 dangerous and should be eliminated.
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 a positive need of the age.
6. In view of these facts, and the increased success of the treatment in inebriate asylums, this Society urges that every large city should have its local and temporary 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 asylums 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 asylums should have ample legal power of control over their patients, and authority to retain them a sufficient length of time for their permanent cure.

CONSTITUTION AND BY-LAWS.

ARTICLE I—NAME.

This Society shall be known as "The American Medical Society for the Study of Alcohol and Other Narcotics."

ARTICLE II—OBJECT.

The Object of this Society is to gather and formulate the facts of the disease of Inebriety, and other narcomaniæ, and indicate the means of cure and prevention by every remedial means and measure known to science.

ARTICLE III—MEMBERSHIP.

Section 1. The membership of this Society shall consist of Honorary, Active and Associate members.

Section 2. The Honorary members shall be elected by the unanimous vote of the Executive Committee and shall consist of Presidents—who have been President of the Society and an active member for at least 25 years—and a Vice-President to represent each State of the United States. The Honorary Vice-Presidents may be elected as deemed best for the advancement and interests of the Society. Honorary members shall not have—with the exception of the Presidents—the power to vote or hold office.

Section 3. Active members shall consist of reputable physicians who are actively engaged in the practise of their profession in Asylums, Hospitals or Sanitariums, or who are conspicuously engaged in work along the lines for which the Society is formed.

Section 4. Associate Members shall consist of those persons who are in close sympathy with the work of the Society, and they shall have all the rights of Active members except the right to vote and hold office.

Section 5. Persons desiring to become Active or Associate members shall sign the proper application blank for membership and be recommended by at least one member of the Society. All applications for membership shall be referred to the Executive Committee for approval before being acted upon by the Society.

Section 6. A certificate of membership shall be given each member; said certificate shall set forth the kind of membership in the Society, be signed by the President and Secretary and bear the seal of the Society.

ARTICLE IV—MEETINGS.

Section 1. Annual Meeting of the Society shall be held at such time and place as the Executive Committee shall designate.

Section 2. Special meetings may be held at any time upon a request of a majority of the Executive Committee. The call for such meetings shall state the reason of their being called.

ARTICLE V—DUES.

The dues of both Active and Associate Members shall be Three Dollars per year, payable in advance, and shall include a subscription to the Journal of Inebriety for the year covered by their dues. They shall also receive a Certificate of Membership in the Society; said certificate to set forth the class of membership.

ARTICLE VI—DELEGATES.

Any active member of the Society, desiring to attend the meeting of any other Medical body, shall—upon application to the Secretary—have given to him credentials as Special Delegate from this Society to that body.

ARTICLE VII—QUORUM.

At any regular or special meeting of the Society seven members shall constitute a quorum for the transaction of business, but a smaller number may adjourn.

ARTICLE VIII—OFFICERS.

The Officers of the Society shall consist of a President, one or more Vice-Presidents, Secretary, Assistant Secretary, Corresponding Secretary, Treasurer and Executive Committee, all of whom—except the Executive Committee—shall be elected by ballot at an executive session of the Active members of the Society.

Section 2. The Executive Committee shall consist of the elective officers of the Society and two persons from the Active membership who shall be appointed by the President immediately after his election.

Section 3. All Officers shall be elected for the term of one year or until their successors are elected and assume office.

ARTICLE IX—DUTIES OF OFFICERS.

Section 1. President. The President shall preside at all meetings, appoint all committees, approve all bills and perform such other duties as usually devolve upon a Presiding Officer.

Section 2. Vice-Presidents. The Vice-Presidents shall assist the President in the performance of his duties and in case of his disability to act, take his place in the order of their seniority.

Section 3. Secretary. The Secretary shall keep a correct record of all of the meetings of the Society and the Executive Committee, making a report thereof at the Annual Meeting. He shall also have charge of the records and seal of the Society and such other documents as may be referred to his custody.

Section 4. Assistant Secretary. The Assistant Secretary shall assist the Secretary in the performance of his duties and in his inability to act shall perform the duties of the office.

Section 5. Corresponding Secretary. The Corresponding Secretary shall conduct all the correspondence of the

Society, act as Editor of The Journal and, under the direction of the President, make arrangements for all meetings of the Society unless a part of those duties are assigned to a Special Committee.

Section 6. Treasurer. The Treasurer shall receive all moneys due the Society for dues and from application for membership. He shall pay out the same for bills approved by the President, keep a correct account of all the receipts and disbursements and render an account of his doings at each Annual Meeting of the Society. When deemed wise for the best interests of the Society he shall be bonded for the proper performance of his duties for such sum as the Executive Committee may determine. The Treasurer shall pay the sum of two dollars per year for each active or associate member in good standing to the publishers of the Journal taking a receipt therefor.

Section 7. The Executive Committee shall have charge of all the business of the Society except when it may be in Executive Session. Three members shall constitute a quorum for the transaction of business.

Section 8. Any vacancy occurring among the Officers of the Society shall be filled for the unexpired term by the Executive Committee, with the exception of the President. His place shall be filled by the Senior Vice-President.

ARTICLE X—AMENDMENTS.

This Constitution and By-Laws may be amended at any Annual Meeting of the Society provided that a printed notice of such amendments, with their exact wording, has been printed in the call for such meeting and distributed to the membership at least ten days before the date of such meeting. A two-third vote of all members present and voting shall be necessary for the adoption of such amendment.

At the session on Wednesday, the third, the President delivered his annual address entitled "The Attitude of the Learned Professions toward the Alcoholic Problem." This was listened to with close attention and will be found on page . . . of this number of the Journal.

The following papers were read during the sessions of the Society, all of which were interesting and elicited general discussion from those in attendance.

"Some Sociological Aspects of the Psychology of Inebriety," by Tom A. Williams, M.D., Washington, D. C.

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"The Medico-Sociologic Aspects of Alcoholism," prepared under the direction of H. A. Cotton, M.D., and read by Dr. Edwin Katzen-
Ellenbogen, both of Trenton, N. J.

"Psychical Treatment of Inebriates," by John D. Quackenbos,
M.D., New York City.

"Influence of Longevity of So-called Moderate Drinking," by E.
L. Fiske, M.D., New York City.

"Acute Alcoholic Intoxication, a Direct Cause of Epilepsy," by
Matthew Woods, M.D., Philadelphia, Pa.

"Alcoholism in Relation to Pulmonary Consumption," by T. J.
Mays, M.D., Philadelphia, Pa.

"Public Care and Treatment of Inebriates in New York," by
Charles Sampson, Esq., Executive Secretary of the Board of Inebri-
ety, New York City.

"State Control and Inspection of Public and Private Institu-
tions," by George H. Benton, M.D., Miami, Fla.

"Inebriates and Drug Takers, What can we do for them in Hos-
pitals and Colonies?" by Jno. Jos. Kindred, M.D., New York City.

"Alcoholism as a Factor in Disease, Studied in Hospitals," by
DeLancy Carter, M.D., New York City.

"Treatment of Inebriates in Private Asylums," by T. D. Cro-
thers, M.D., Hartford, Conn.

"Some Conclusions from the Medical Care and Treatment of In-
ebriates in the Oldest Hospital in the World," by V. A. Ellsworth,
M.D., Boston, Mass.

"Prophylactic and Causative Measures against Alcohol," by
Alfred Gordon, M.D., Philadelphia, Pa.

"Some Statistics Regarding the Treatment of Alcoholics," by
A. R. Moulton, M.D., Philadelphia, Pa.

"The Influence of Early Life in its Relations to Narcotic Pre-
dispositions," by Henry Beates, Jr., M.D., Philadelphia, Pa.

"Some Facts about Morphinism," by Ernest S. Bishop, M.D.,
New York City.

"Institutional Treatment of Drug Addictions," by C. J. Douglass,
M.D., Boston, Mass.

"Some Original Studies in the Medical Care of Inebriates," by
Samuel Stern, M.D., Atlantic City, N. J.

"Inebriety in Greece in Ancient Times," by A. Rose, M.D., New
York City.

"The Best and Worst to be said of Alcohol," by J. Madison Tay-
lor, M.D., Philadelphia, Pa.

"Alcoholic Psychosis," by F. C. Tyson, M.D., Bangor, Maine.

"Physiological and Psychological Motives in Inebriety," by Prof. T. W. Patrick, State University of Iowa, Iowa City.

"Inebriate Diathesis and Psycho-Neurotic Thralls of Alcohol," by C. H. Hughes, M.D., St. Louis, Mo.

"Some Psychological and Clinical Aspects of Alcoholism," by Sir Thomas Clouston, Edinburgh, Scotland.

"The Psychiatry of Inebriates," by J. T. Searcy, M.D., Tuscaloosa, Ala.

"Some New Researches on the Effects of Tobacco on Nerve Cells," by D. H. Kress, M.D., Chicago, Ills.

"The Social Glass. What it Means Medically," by H. O. Marcy, M.D., Boston, Mass.

"The Treatment and Cure of Inebriates by the State," by I. H. Neff, M.D., Foxborough, Mass.

"State Care of Inebriates in Iowa," by George Donohoe, M.D., Knoxville, Iowa.

"Habit-Forming Drugs and Their Relation to Physicians," by B. C. Keister, M.D., Roanoke, Va.

"Possibilities in the Medical Treatment of Inebriates," by W. C. Ashworth, M.D., Greensboro, N. C.

"The Half Century Work at the Washingtonian Home of Chicago," by Rev. Dr. Barton, Chicago, Ills.

These papers will prove the nucleus for the good things that are in store for the readers of the Journal of Inebriety during the coming year, and should make its pages of unusual attractiveness.

G. A. BENTON, M. D., Sec'y.

Dr. Romberg has made some recent studies among students in the different universities, young men who have been connected with universities for a period of years, and like many other German students, have been spirit and beer drinkers. He found that over 80 per cent of them were defective, suffering from arterial sclerosis, venereal infection, and functional disorders of the nervous system. Many of them had disfigured bodies, excessive deposits of fat, and were prematurely old in many ways. He concluded that alcohol in the form of beer and spirits was the most terrible menace that could possibly assail students, and unfit them for work in later life.



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Book Reviews

THE ANTI-ALCOHOLIC MOVEMENT IN EUROPE.

By Ernest Gordon, M.D., author of *The Breakdown of the Gottenburg System, etc., etc.* F. H. Revell Co., Publishers, New York City.

The author has grouped in a little over 300 pages a most graphic review of the present status of the alcoholic movement in Europe. The reader will be startled to know that the change in public sentiment and the great temperance wave that is now coming over Europe is limited to less than ten years.

One of the first chapters, entitled *The Day Break in Europe*, is startling in its bare narration of changes in public sentiment, and awakening to the sense of danger from alcohol. In the third chapter of the book on the International Congresses Against Alcohol, the author has very graphically grouped the conclusions from scientific studies concerning alcohol and indicated some of the epoch-making papers, that are changing the current of opinion, regarding it. This chapter is one of the most valuable in the book.

The anti-alcoholic movement in the armies and among continental students and in socialism is really a very fascinating story of great advances that are now in progress. To the American reader the story is most wonderful, and signifies evolution and the death of the alcoholic traffic at its very home and stronghold. The chapter on *Alcoholic Defense* and one for the *Death Sentence*, are equally graphic and startling to the American readers.

This book should be in the hands of every student of the alcoholic problem. It is a veritable encyclopedia of authority which appeals to every reader, and we commend it most heartily.

We shall take pleasure in quoting from this work from time to time, and our readers can see how valuable it is.

PROHIBITION ADVANCE IN ALL LANDS.

This is a title of a well-printed volume of 330 pages written by the Hon. Guy Hayler, President of the International Prohibition Fed-

eration. It is a study of prohibition, the alcoholic question, the means and measures of restrictions in all civilized countries of the world.

The introductory contains a very concise account of the struggle for sobriety, principles of prohibition, different temperance organizations, work among the young, and general appeals to all nations.

Then follow chapters giving a review of the work in different sections of the country, what has been done to restrict and to prohibit, as well as to educate the public concerning the evils from this source. This is the first attempt ever made to give a brief and accurate summary of reform work of this character, and its practical usefulness is evident on every page.

The editor has done great service in presenting this book in gathering facts from most reliable sources, giving dates and legal measures, which is practically a monument to his memory and industry.

Every person interested in this subject should have a copy for the facts which it contains. It is a pleasure to note that the International Federation intends to have a copy of this book in the hands of every leader and person interested. It is printed on thin paper and sold for the very low sum of less than fifty cents postpaid, an amount which barely covers the first cost of publication.

The President and Committee have wisely considered that the distribution of this great volume will make a profound impression on all readers and be one of the most valuable agents in the advance of the cause, wherever it is distributed.

The National Temperance Society of New York City will furnish copies to all interested, and we commend it as one of the most valuable books that has been published.

THE CAUSES AND CURE OF CRIME.

By T. S. Mosby, Esq., Member of the Institute of Criminal Law and Criminology, Author of Capital Punishment, etc. C. V. Mosby Co., Publishers, St. Louis, Mo. 1913.

This well-printed book of ten chapters is a distinct contribution to this great unknown subject. The first chapter, devoted to the Cosmic Factors of Crime, groups a great variety of causes that are seldom recognized. The second chapter on The Social Factors of Crime, and the third chapter on Individual Factors of Crime, are very graphic presentations of facts. Then in part second, one chapter is

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devoted to Prophylaxis, the second to Assexualization; the third to education, and the fourth to Social Amelioration. In part third the therapeutics is considered. Thus one chapter is devoted to the theory of punishment. The other to the intermediate sentence and parole. The fourth to the new Penology. These are all written in a condensed, clear, attractive style, and illustrated with portraits of criminals.

The whole subject is treated in a very open, frank way, and the reader is greatly impressed with many of the facts and the author's views, which seem to be so clear and sensible.

As a small volume for popular and professional readers, it is unequalled. The author should elaborate some of the topics into a larger volume, more exhaustive. Evidently there is a very great change impending, in our present methods of dealing with criminals and their punishment, and every sensible man will welcome new facts in this direction and new conceptions of what we shall do, and how we shall act, in the suppression of crime and the care of the criminals.

ALCOHOLISMUS.

By Dr. S. G. Blabianos, Athenf, Greece.

This book is in many respects one of the most interesting and suggestive which has been published on the alcoholic question in the Far East. Its great value will be to the student of ethnography, in one of the old lands where art and science reached its highest perfection.

The first chapters are devoted to the histories of the drinking habits among the ancient Greeks and Romans, and coming from a Greek physician and neurologist, it would necessarily be of a very high character. It also presents some very remarkable statements concerning the alcoholic question in Greece of today.

He shows how the Greeks learned to use brandy, and how slow and reluctant this grew through the long years up until 1890, before any real drinking places were opened.

The author was a very enthusiastic opponent of the use of alcohol for many years. At one time he addressed a circular letter to all the physicians known in the country, inquiring how far alcoholic beverages were consumed in their communities, and how many drunkards, and what percentage of them to the population; also

what is the acceptable form of spirits used, and what becomes of the chronic alcoholics, and the special effect of alcohol on certain organs? the number of criminals, whose condition is due to alcohol? All these and other questions were answered in part and constitute the basis of this little book.

The author adds a great variety of opinions, describes the country, its population and intelligence, and indicates that Greece can never be an alcoholic country like Central Europe, although grapes are raised. For many reasons the excessive use of spirits is not very attractive, even to the poorer classes.

A translation of this book is to be made, and in all probability it will furnish some very remarkable facts of interest to every student of this subject.

DR. A. ROSE, New York City.

LIGHT THERAPEUTICS.

A practical manual of Phototherapy for the student and practitioner

By J. H. Kellogg, M.D., Supt. Battle Creek Sanatorium, Good Health Publishing Co., Battle Creek, Michigan.

This work of over 200 pages profusely illustrated gives special prominence to the incandescent, electric light bath. It shows to what an extent the study of phototherapy has been carried and how very practical it is when used with skill and judgment.

The author has developed this study more thoroughly than any other one, and with the extraordinary facilities of Battle Creek, has been able to test its efficiency and character to a higher degree than elsewhere. The book is practically a manual describing the uses and possibilities with very little discussion of theories, but is extremely rich in practical suggestions concerning the use of this new power.

Every sanatorium ought to be provided with appliances to use this new force, and first of all, this volume is essential as a guide book, for excursions into this new territory.

Send to the publisher for a copy.

THE NEW ALIGNMENT OF LIFE.

By Ralph Waldo Trine, The Dodge Publishing Co., 220 East 23d St., New York City.

In the flood of books that is pouring through the press every year, books on all imaginable topics, this stands out alone. It is literally a discussion of the newer psychology and laws concerning

mind and body.

The author of books of a profound knowledge of internal powers. This book seen along similar lines studies of religion.

To the scientist that goes far at satisfaction that

Each page a new point of view.

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By Purves Stewart Westminister Publishers, New

This is one French and German meeting voted entirely to nerves, and grow their significance

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mind and body, and dynamic powers that control events.

The author has become distinguished for his previous writings of books of a popular character, going over the questions of faith and internal powers of the mind, and its relation to the environment. This book seems to be the culmination of a large number of works along similar lines, and may be said to convey the best practical studies of religion, and the possibilities of developing this life.

To the scientist there is a ring of exactness and reasonableness that goes far above the glowing pen pictures and brings a degree of satisfaction that is seldom found in other writings.

Each page brings in a new horizon and the old world from a new point of view. The title of the book conveys the idea exactly of a new alignment of life, a new conception of how to make life a success, and whether the reader will agree with the author or not, he will be immensely impressed and startled at the novelty and reality of subjects that he has never thought of before.

The author contends very graphically that the time has come for a new adjustment of old theories, creeds and conceptions, and he makes it very clear that this is one of the cosmic consciousnesses of the present.

Our readers will find this a most stimulating work, and one that cannot be read piecemeal, but must be finished in one reading. Then will come the happy satisfaction that the author has carried us into a new world far beyond our present conceptions and pointed out how it can be made practical.

To the thinking man this work is almost invaluable. Our readers can secure a copy of it at almost any book store. The price is \$1.25.

THE DIAGNOSIS OF NERVOUS DISEASES.

By Purves Stewart, M.A., M.D., Edin., F.R.C.P., Physician to the Westminster Hospital, etc., etc. E. B. Treat & Co., Medical Publishers, New York City.

This is one of the few books that have been translated into French and German and have passed through several editions, evidently meeting a want which other works do not supply. It is devoted entirely to the clinical study and diagnosis of diseases of the nerves, and groups in a very clear, unusual way the main facts and their significance.

There is a certain graphic style that suggests to the reader a

great deal more than it describes. This is one of the very rare books that educate the reader and make him think, and suggest to him so much that often it is re-read, each time giving a new view and conception.

There are twenty-five chapters and about 500 pages; the chapters are divisions of the subject, that while giving a minute picture of each group of facts does not lose sight of the main significance and the order in which they appear.

This book is really a text-book for all students of nervous diseases, and is not likely to grow old or become out of date, for the author has avoided all possible doubtful conceptions and given the main facts in such a lucid way that they are literally unmistakable.

Another fact stands out prominently, that while the specialist will find a great deal here to strengthen his diagnosis, the general practitioner and even the student will find it a most welcome aid to the commonest conditions of disease that relates to the nervous system, hence it is a volume for all practical men in the profession. We commend it most heartily to all our readers.

THE PSYCHONEUROSES AND THEIR TREATMENT BY PSYCHOTHERAPY.

By Prof. J. Dejerine, Prof. of Nervous Diseases, University of Paris,
Translated by S. E. Jelliffe, M.D., Prof. of Diseases of the Mind
and Nervous System in the Post-Graduate School, New York
City. J. P. Lippincott & Co., Publishers, Philadelphia, Penn.

In the translator's preface occurs the following: "In Dubois's excellent book on Psychoneuroses, the central thought was an appeal to the intelligence of the individual. This was incomplete. He did not lay sufficient emphasis upon the instinctive, or more widely speaking, the emotional side of the human machine in its psychical situations." In the author's preface the following sentences give an idea of the purpose of the book. "The influence of the morals on the physique has been known in all ages. It is a popular belief that health may be seriously affected by grief or vexation, but physicians have not recognized this, nor have they thought that any treatment based on a study of the affections was of value." He declares that in his opinion, while reason and argument often change a person's energies,

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volume.

yet when the emotional element appears and is influenced, pronounced changes are effected by it; also that reasoning and acceptance of the reason with sentiment and feeling is a positive field for medical work.

The book is practically devoted to the study of psychoneuroses in which the reasoning, emotions and present states of the feelings are analyzed and made to contribute to health. There are three divisions of the book, one devoted to the study of the symptoms as they appear, the second to the foundation of these symptoms, where they come from and what influences create them. The third is the therapeutic, in which the various means and measures are outlined to neutralize, break up and prevent these neuroses.

Through all these discussions there is a wealth of clinical examples, illustrating the various studies. This gives prominence to facts that would not be otherwise clear. To the reader, this exhaustive study of the emotions from the physical side, is practically a new world with new possibilities, and intensely practical because it can be applied in almost every field of practice.

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In the wealth of books, this is one that covers a new range of study and takes the reader into a field that has been a veritable fog bank before. In many ways, the author gives us solid ground to stand on in his descriptions and successful treatment. In others, the reader is confused, but on the whole there is an impressiveness and fascination to the book that will call for a second reading and more prolonged studies. This is literally a new excursion into the realm of psychopathy and psychic treatment. Persons interested in this field will find a rich mine of interesting facts, which will widen and enlarge their scope and active work.

We shall refer to this book again, and in the meantime, advise our readers who are interested in new frontier studies, to secure this volume.

PUBLISHER'S ANNOUNCEMENT.

We desire to call the attention to both the review and advertisement of Ernest Gordon's latest work entitled "The Anti-Alcoholic Movement in Europe," which are both contained in this number of the Journal of Inebriety. Every subscriber should read this work and we have made such arrangements with the publishers that we can offer the Journal and book at a substantial reduction.

We also wish to call attention to our clubbing offer with the book, "A Clinical Treatise on Inebriety," written by the accomplished editor of this Journal, and urge all of our subscribers who have not given themselves the pleasure of owning this work to procure it at once.

In this connection we desire to announce that Dr. Crothers is busy at work on the preparation of a companion volume to the above book entitled "The Treatment of Inebriety and Alcoholism, From a Clinical Point of View." The contents of this work will be based upon the knowledge gained by the writer during his long experience with patients of this character. A more complete description of this book will appear in the next number of the Journal of Inebriety.

REPRINTS.

We wish to announce to the writers of original articles which are published in the Journal of Inebriety, that we will be glad to furnish any number of reprints of the same at reasonable prices. Requests for reprints should be made at the time the articles are submitted, with the number required.

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