

THE QUARTERLY JOURNAL

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The Quarterly Journal of Inebriety

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CURE OF INEBRIATES, and will contain the transactions of the
Association, with various other contributions from all specialists
in this new field.

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review should be addressed,

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SECRETARY,

BINGHAMTON, N. Y.

THE
QUARTERLY JOURNAL OF INEBRIETY.

No. 1. DECEMBER, 1876. Vol. I.

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ANNIVERSARY ADDRESS.

BY THEODORE L. MASON, M. D., PRESIDENT.

MR. CHAIRMAN, GENTLEMEN OF THE ASSOCIATION, LADIES AND GENTLEMEN.

Convened this evening in this historic city, in connection with the Seventh Annual Meeting of "The American Association for the Cure of Inebriates," it seemed to me to be in harmony with the objects of our meeting, and with the surrounding circumstances, to request your attention to a simple *historic sketch* of the *rise* and present *status* of *Asylums* devoted exclusively to the treatment and cure of Inebriates; and of the *Association* formed for their promotion and advancement.

These institutions, distinctively American in their conception, are the outgrowth of the latter part of that centennial period, whose completion this city and this nation are engaged in celebrating with so much zeal and with so much success; and have, therefore, their place, humble though it may be, among the products of American civilization.

VOL. I.—1

HISTORIC SKETCH.—More than three quarters of a century have passed away since one of the most honored of the citizens of this great city, one of the most distinguished physicians of his times ; published to the world his deliberate opinion on the doctrine which lies at the very basis of American inebriate asylums.

The magnitude of the moral and of the physical evils which result from the habitual use of alcoholic potations, could not fail to attract the notice of so careful and so interested an observer as Dr. Rush ; nor to excite his philosophic mind, and earnestly engage his philanthropy and his patriotism, in an endeavor to investigate its character, and to devise measures of relief for the unfortunate, or even the depraved, victims of the terrible *malady* which was thus induced.

The mooted question of *disease* which has caused our Association no little embarrassment, and which we had disposed of, as we thought, early in our history, but which has returned from time to time to plague us, Dr. Rush comprehended as by intuition. Others, I am aware, in after years, adopted and ably vindicated this view,* but so far as the record goes, or at least so far as I have been able to search it, the honor of *detecting* the *nature* of this terrible malady of *Inebriety*, and of recording in unmistakable terms his opinions as to its *treatment* and *cure*, clearly belongs to that illustrious philanthropist, physician, patriot, and Christian statesman, Dr. Benjamin Rush, who declared, not only that “intemperance was a *disease*, but that *hospitals* for its *exclusive treatment* should be established in *all the principal cities* of our land.”†

* Among these the name of Dr. Woodward of Massachusetts is conspicuous.

† “Inebriety was recognized in the second century of the Christian Era, by

These views, published as early as 1809, are to be found in the fifth edition of Rush's Medical Inquiries, page 151 et seq., and as the essay in which they are contained partakes very much of a popular character, and is remarkably free from those technicalities which have little interest to even the most intelligent, non-professional hearer, I propose to give a brief *resumé* of the leading opinions therein set forth.

In his inquiry into "The Influences of Physical Causes upon the Moral Faculty," he says: "Fermented liquors when they are taken in excess, or when they are of a *bad quality*, and taken even in a moderate quantity, seldom fail of rousing every latent spark of vice into action." The last of these facts is so notorious, that in Portugal when a man is observed to be ill-natured or quarrelsome it is common to say "he has drunken *bad wine*."

Again he remarks that, "while occasional fits of intoxication produce ill-temper in many people, *habitual drunkenness* (which is generally produced by distilled spirits) never fails to eradicate veracity and integrity from the human mind."

These quotations are but incidental, yet are valuable as indications of the opinions of Dr. Rush on this subject of inebriety.

But in his essay entitled "*An Inquiry into the Effects of*

Ulpian, the great Roman jurist, in his Digest of Laws; it was eleven centuries later, during the reign of Alonzo the Ninth of Spain, studied and treated by the State as an affection requiring special laws and management. Three centuries farther down, many of the German States endorsed these views, and enacted laws based on them. Then (in 1790) came the observations of Dr. Rush in this country, Prof. Platner of Leipsic in 1809, and Salvator of Moscow in 1817, and many others who boldly advocated that inebriety was a disease and could only be reached by special means." Dr. T. D. Crothers in the Medical and Surgical Reporter, June 10th, 1876.

Ardent Spirits upon the Human Body and Mind," he is outspoken and utters no *uncertain sound*.

After remarking that fermented liquors, wines, &c., if moderately partaken of, are generally innocent, and often have a friendly influence on health and life, Dr. Rush proceeds to divide the *disease* produced by ardent spirits into its acute and chronic forms, to describe their *symptoms*, and to recommend the *remedies* appropriate to each.

Of the *Acute Form* he thus commences the description :

"This *odious disease* appears with more or less of the following symptoms, and most commonly in the order in which I shall enumerate them." Here follows a most graphic description of a fit of drunkenness, including the enumeration of eleven distinct symptoms, each indicative of a progressive degree of intoxication, until it becomes complete, and the unconscious victim "lies an object of pity and disgust to his family and his friends."

The paroxysmal and periodical character of drunkenness is also noticed, as annual, quarterly, monthly, weekly; and the tendency to that condition "in which there is scarcely any remission either during the day or the night." The *disease* has assumed the *chronic form*, the man is a *dipso-maniac*. The question about him now is, not, "does he not sometimes get drunk?" but, "is he not sometimes sober?"

The *Heredity* of this disease is next thus noticed: "I have known it to descend from a father to four out of five children." Again, he says: "I have heard of its spreading through a whole family composed of members not originally related, and these facts should not be overlooked by parents in deciding upon the matrimonial connections of their children."

Of the *Chronic Effects* on the body, he says: "They dispose to every form of acute disease, they excite fevers;

(exposed to *yellow fever*, hard drinkers seldom escape and rarely recover,) decay of appetite, obstructions of the liver,* jaundice, dropsy, consumption, diabetes, eruptions on nose, face, &c., spontaneous combustion, epilepsy, gout and lastly *madness*. He estimates that one-third of the cases of insanity in the Pennsylvania Hospital, in his day, arose from alcoholic intoxication.

Dr. Rush further adds this most important statement: "Many persons are destroyed by ardent spirits who *were never completely intoxicated* during the whole course of their lives."

Having thus carefully studied the effects of this dire agent on the body during life, with a true professional zeal, the Dr. examines into its ravages after death.

The post mortem appearances, he says, are "of a *peculiar nature*. The fibers of the stomach and bowels are *contracted*, abscesses, gangrene, and scirrhi are found in the viscera. The blood-vessels are more or less *ossified*, and even the *hair of the head* possesses a *crispness* which renders it *less valuable to wig-makers* than the hair of sober people."

The *Third* portion of his essay Dr. Rush devotes to the notice of the remedies for the alcoholic disease—and mentions, *First*—"Those which are proper to cure a fit of intoxication."

Second—"Those which are adapted to prevent its recurrence, and destroy the desire for ardent spirits, and thus cure the *Chronic* form of the disease."

The remedies for the *Acute Form*, he thus enumerates:—

1st. To loosen the collar, and all ligatures from the dress, and raise the head and shoulders.

* The fable of Prometheus, in whose liver a vulture was said to prey constantly, as a punishment for his stealing fire from Heaven, was (says the Dr.) intended to illustrate the painful effects of ardent spirits upon that organ of the body.

2d. To provoke vomiting, by thrusting a feather down the throat. This often relieves immediately, by *causing vomiting*.

3d. To apply cold water by a napkin to the head, or pouring a stream of it on the head, or the more heroic plan of dragging the patient from the gutter to the *pump*, and pumping water upon the head for ten or fifteen minutes.

This seems not to have been an infrequent practice in those days, and the doctor naively testifies to its efficacy, remarking that he had seen it done with *decidedly good and prompt* results.

Several other measures are noticed, and the doctor concludes by recommending his favorite instrument, the lancet, when from long continuance it is apprehended that material injury may be done to the *brain*.

The *Chronic Form*.—Dr. Rush then proceeds to speak of the means best adapted to destroy the morbid appetite for ardent spirits, and thus to cure the chronic form of the disease, and treats of them under three heads: Religious, Metaphysical, and Medical.

In accordance with his well-known regard for religious principles, he places:

First, a *practical* belief in the truths of *Christianity*; and declares that examples of the divine efficacy of Christianity for this purpose have lately occurred in many parts of the United States; many drunkards have been thus cured. In passing, I may be permitted to add as my testimony (from personal knowledge) to the fact that this power is not lost, that men are cured in this very way *now*; and I will venture to add that I fear that some of us, to whom is committed the care of these unfortunates, have availed ourselves too seldom of it in the treatment of our patients. By some persons this may be doubted, but it would seem that the man must needs be a poor philosopher, and but very imperfectly in-

structed in the reciprocal influence of mind and body, who should be unwilling to admit that the mighty influence of religion upon the emotional portion of our mental frame, the fear, the hope, the joy that are attendant, or consequent upon the commencement and continuance of a religious life, should work this change in *certain stages and forms of this affection.*

Perhaps, as our acquaintance with the natural history of drunkenness becomes enlarged, and our pathology more accurate, we may be less ready to doubt. In treating still farther on the management of this diseased condition, Dr. Rush dwells at length, and minutely, on the remedial measures to be employed, suggesting several with which it would be well for his successors of this day to make themselves familiar. I will however detain you no longer, (interesting and profitable though it might be, still farther to consider Dr. Rush's statements and opinions,) but will ask your attention to the more recent history of the

RISE AND POSITION OF INEBRIATE ASYLUMS IN THIS COUNTRY.

Dr. Rush lived in advance of his generation. The importance of his views does not appear to have been appreciated by his cotemporaries, and for a series of years no practical results followed the promulgation of his opinions. At last, however, the hour and the occasion arrived.

The idea assumed a *practical form*, and commenced to work out its beneficent destiny.

The theory of *Disease* gained acceptance. The means of cure were at last instituted, and inebriate asylums were established; so that now the prospect is, that ere long no State in the Union shall be without its hospital devoted exclusively to the cure of inebriety.

THE NEW YORK STATE INEBRIATE ASYLUM, BINGHAMTON,
NEW YORK.

The first public institution for the cure of inebriates ever established, had its origin in the efforts of Dr. I. Edward Turner, a physician residing in the city of New York, who seems to have been led to move in the matter by the miserable fate of an early friend, whose history he narrated in an address, delivered at a public meeting, in connection with this subject, held in that city, in November of 1855.

This friend was a young man whose natural abilities were seldom excelled, of thorough culture, and varied and solid learning, of whom high expectations were formed by his friends and teachers ; yet who, in the short period of two years, became a wandering, homeless, and friendless inebriate ; and died notwithstanding the earnest and well-directed efforts of his early companion, Dr. T., who failed to save him, for want of that *power of restraint* to be found only in an asylum. The disease in its acute, and in its chronic form, as described by Dr. Rush, was fully recognized by Dr. Turner, to whose indefatigable exertions, and persistent agitation of the subject, the first institution in this country, or, as is claimed, in the world, was undoubtedly owing.

In the progress of this work the clergy, and the physicians, and prominent officials, including the Governor of the State, and the Mayor of New York city, were consulted by Dr. Turner, and their coöperation and approval secured. Some \$35,000 were collected from private contributions, and on April 7th, 1854, an act of incorporation was passed by the Legislature of the State of New York, a Board of Trustees, composed of gentlemen of high social and political position, was appointed, and the "United States Inebriate Asylum" had a legal existence.

It was located, by its charter, in the city of New York, but it having been decided to remove from that city, the charter was amended in 1858; the name changed to the "New York State Inebriate Asylum," its location fixed at Binghamton, and the erection of buildings commenced.

In 1859 ten per cent. of the excise moneys in the several counties of the State was set apart by law, for the institution. The first inmates were received in 1864, but a portion of the edifice was destroyed by fire in that year, and the buildings went into disuse. The buildings were re-constructed, and the institution, partially rebuilt, was re-opened for patients in 1867.

In that year the Trustees transferred the property by deed to the State, but they still retain the control and management of its affairs.

To the State of New York therefore belongs the honor of having first acted upon the idea that inebriety was a *disease*, and that it should be treated in hospitals, apart from the insane; and of putting it into practical operation by the establishment of an inebriate asylum.

Since its re-opening, in 1867, the New York State Inebriate Asylum has been conducted with most gratifying results. Its ample structures, its roomy and well ventilated apartments, its beautiful and healthful situation, its generous supply of whatever is needed for its hospital and culinary departments, its library, its extensive grounds—all these, already completed or in process of completion, afford means for the successful treatment of the unfortunates who may seek relief within its walls, not exceeded by those of any other institution; and I would by no means omit to state the fact, full of encouragement to the friends and promoters of inebriate asylums, that "*it is thought by the Trustees that,*

*when the buildings shall be completed, the institution will be self-sustaining."**

Thus, after a varied experience and prolonged struggle, has the institution first founded attained to its honorable position; not only conferring invaluable benefits on hundreds of inmates, but serving as a pioneer to those kindred institutions which have come into being since its establishment.

It has been a school of instruction not only to our own countrymen, but to the civilized world, and already institutions similar in character have been founded in several other States of our Union, in Canada and Nova Scotia, and across the water, in England, Scotland, and Australia. Concerning it, let us all unite in saying *esto perpetua*, may it live and flourish as long as the sad necessity for its continuance exists, in the continued existence of the malady which it was established to cure.

THE WASHINGTONIAN HOME AT BOSTON, MASSACHUSETTS.

This celebrated institution was organized in 1857, and incorporated in 1859. Its success has been great and constant. Up to May 1, 1876, it had treated about 5000 patients, a greater number than any other institution in existence. The number last year was 400, of which 162 were free patients.

The Washingtonian Home has been the pioneer for that class of asylums located in cities, as those in Chicago and Philadelphia, which, although situated in dense populations, do not profess to use physical restraint as a means of cure, but seek to control their patients by the moral influence of kindness, cheerful associations and amusements, by intellect-

* Annual Report of Board of State Commissioners of Public Charities of State of New York, 1870. Page 26.

ual occupations, and by the powerful influences of religious sentiment.

Their success is undoubted and their confidence strong, that this is the better method. In comparing this with that which embraces the power of legal restraint, and deems it essential, it is well to recollect the different character of the patients, who are the subjects of treatment in these different institutions.

Of the 400 treated at the Washingtonian Home last year, only 87 were natives of foreign countries. It is fair to assume that the great majority of the inmates (189 of whom were from Massachusetts, distinguished for the general education and moral character of her people) were persons of an higher intellectual and moral status than that class, in the large and commercial cities, which sends to these institutions the large majority of their inmates. Is it not reasonable to suppose that this fact renders the influence of moral restraint more effectual and diminishes the need of that legal authority which is deemed necessary in institutions, many of whose inmates are lower in the scale of morals and intellect? A strong argument in favor of this theory is found in the statement of Dr. Day, when he was conducting a private and very select institution, that, "he believed he should cure 70 per cent. of the patients then under his direction." But it is not within the limits of this paper to discuss the important question of the utility and necessity of legal restraint, the modes and limits of its use, nor the philosophy of its success, and I leave it for another occasion or some abler pen. Whilst therefore as an honest chronicler, I am constrained to assign to the Washingtonian Home the second position in the chronological list, as that is fixed by the act of incorporation, I must also state, that the Washingtonian Home went first into active operation, and I may

very confidently declare that her history has been one of unsurpassed progress. *Nullum gradum retorsum* might be most appropriately written over her portals.

From the inception of her career to the present moment her advance has been constant. Under the wise management of her Board of Directors and the skillful and kind treatment of her present Superintendent, who, with the exception of a short interval, has from the commencement controlled and guided her internal affairs, her course has been onward and upward, and her example an inspiration and guide to her younger sisters in our own land, and to the philanthropists of the world.

THE PENNSYLVANIA SANITARIUM.

The year 1867 was memorable in the history of inebriate asylums. In that year the Pennsylvania Sanitarium was opened for the reception of patients, under the charge of a gentleman widely and favorably known, at home and abroad, for his intelligent views and large information on subjects connected with inebriety and its treatment. To the members of this association he is especially commended; as, in connection with our first president, one of its originators and most able and active promoters; for several years its presiding officer; one of its delegates to Great Britain, and, at present its Secretary for Foreign Correspondence.

To him it afforded a field for original research, and the verification of the opinions of others, which he assiduously and successfully cultivated, and in the results of his labors, we, his associates, and the medical profession at large, have most profitably participated.

THE CHICAGO WASHINGTONIAN HOME.

In this same year Chicago opened, for the first time, the doors of her Washingtonian Home to inebriate patients,

and has since gone forward with rapid advances to its present condition of financial and general prosperity.

Dr. N. J. Davis, eminent throughout the land for his large culture, his executive ability and progressive spirit, has been from its inception its firm friend, and for some time and at present the President of its Board of Directors.

In reputation and success, the Washingtonian Home of Chicago holds a high rank among its kindred institutions.

THE INEBRIATES HOME FOR KINGS COUNTY.

The year 1867 also witnessed the opening of the Inebriates Home for Kings County.

The origin of this reformatory is known to the members of this association to have been quite unique. The epidemic cholera, which prevailed in that year, reached Brooklyn and soon attacked the jail, which, at that season, was crowded with inmates committed for smaller crimes, and many of them for the crime of being intoxicated in the public streets. Against them nothing else was charged—this was their sole offense; and yet they were retained at the imminent hazard of their lives. The highest penalty of the law would assuredly be suffered by most of them, unless, contrary to law and by the assumption of a power not conferred by law, the officers in charge released them.

But moved by the representations of the chaplain (the present superintendent of the Home) and yielding to the impulses of humanity, the sheriff, advised by the district attorney, set them at liberty; and they escaped as from a burning dwelling, or a ship on fire at sea. These circumstances led to the serious consideration of the position, before the law, of this class of offenders; and to the honor of these officials it should be recorded, that aided by philanthropic citizens whom they invited to assist them—they succeeded

against no little opposition, in obtaining from the State Legislature a special charter and grants of money, which enabled the directors finally to erect a commodious edifice, amidst extensive grounds, and scenery, which in some respects is unexcelled for beauty and variety.

A fund hitherto secured by diligent care (which though inadequate to its *total* support, serves to give strength and the prospect of permanence) is also in the hands of its directors.

In the reformation of inebriates by medical treatment and moral influences, by the laws of kindness, which not unfrequently take the form of *legal* authority, embracing the power of restraint, it is the conviction of the directors that even with the many unpromising subjects with whom they have to deal, they have not fallen behind sister institutions in the *ratio* of *success*.

Unique in the circumstances of its origin, the Kings County Home differs also from all its predecessors and most of its contemporaries, by the admission of female patients.

From the first it has received females, and has never been without a greater or less number as patients. In the construction of its present edifice, special provision has been made to insure privacy and isolation in their apartments, and their approaches; and in the grounds attached to them for exercise.

Although, at first, it was proposed to restrict the patients to the class for which the Home was more especially designed; numerous applications from persons in the better classes of society, convinced the directors that provision should be made for their accommodation. This was accordingly done; and the institution has ever since had ladies and gentlemen of high social standing among its inmates.

THE FRANKLIN REFORMATORY HOME FOR INEBRIATES.

This flourishing Philadelphia institution, organized in April, and incorporated in December, 1872, has continued to grow in public favor and in the number of its patients, so that it has been obliged to enlarge its premises, from time to time, during the four years of its existence.

The officers report for this year, 210 patients received, 128 reformed (a marvelously large percentage), and six deaths.

The Franklin Home has this peculiarity, that it has enlisted an auxiliary board of ladies, who, with characteristic zeal, have aided its pecuniary interests, and given relief to families of inmates of the Home, during their treatment and convalescence.

The reliance of its directors on the religious convictions of the inmates, has proved, (if proof were needed,) the supreme power of religious truth to deliver men from the thralldom of evil. The Franklin Home has done its good work in its own way, and it has in the success which has attended the labors of its supporters, a great reward and great encouragement to future effort.

In addition to these older institutions, we can enumerate Harlem Lodge, Maryland; Washington Inebriate Asylum, D. C., State Inebriate Asylums in Ohio, Kentucky, Mississippi and Texas. DASHALRAY HALL in San Francisco, California, and PINEL HOSPITAL, Richmond, Va., all in different stages of construction or progress; and last, not least, WALNUT HILL ASYLUM, at Hartford, Conn., chartered by the State, whose Legislature has conferred upon it all needed legal powers. Most of us visited the beautiful site secured for its occupancy, during the last meeting of this body; and can testify to the public spirit and wisdom of our associates

by whose influence the needed legislation was obtained; and by whom the selection was made. These all, or most of them, are wholly or in part supported by State appropriations. Subsequent to these chartered public or semi-public asylums, there have been established several private reformatories.

Prominent amongst these is the Appleton Home, at Needham, Mass., a flourishing institution, under the care of one of our associates; and last of all, established within a few months, the Temple Home for Women, which receives females only, and is wholly under the direction of a female physician and attendants.

To these institutions in the United States, we have the gratification of adding The St. George Inebriates Home, in Montreal, Canada East, one in Quebec, one at Halifax, Nova Scotia, and the Melbourne Retreat for the care of Inebriates, in Australia.

THE AMERICAN ASSOCIATION FOR THE CURE OF INEBRIATES.

The number of these institutions and of the patients treated in them, the magnitude of their operations and of the interests involved in them, had at length become so great that the expediency of creating an organization for their protection and advancement became apparent to their founders and friends. In accordance with this purpose, in the year 1870 a convention consisting of physicians, superintendents, and delegates from the Boards of Directors of inebriate asylums assembled in the city of New York, on the invitation of the presidents of the Asylum at Binghamton, N. Y., and Media, Penn., and formed a permanent association—"The American Association for the Cure of Inebriates." "This Association has for its object the study of the disease of inebriety, to discuss its proper treatment, and to endeavor

to bring about a coöperative public sentiment and jurisprudence."

The wisdom of this measure was soon to be tested, and its advantage to be experienced.

OPPOSITION.

From the first establishment of inebriate asylums they have met with opposition. But soon after the organization was formed an attack of unprecedented violence was instituted, especially on the Asylum at Binghamton. Statements utterly false, perversions of facts and statistics, which it would seem could not have been made honestly, by an intelligent mind, were sent to the religious press; and coming from a source apparently reliable were received in good faith, admitted to their columns, transferred to leading and influential secular journals, and thus circulated through the country far and near. The plan of our institutions was decried, as not only utopian but immoral, and the results of our treatment declared to be complete failures.

To speak of inebriety as a disease was represented as framing an apology for sin and for crime. The theologic mind was startled, and an alarm was sounded, and even the dignified serenity of the judicial bench was not wholly undisturbed; and all this notwithstanding the adoption and publication of a "Declaration of Principles" which, in the language of my immediate predecessor in this chair, was "simple and almost axiomatic"—so plain that those who ran might have read and understood it, if they had been so inclined.

The blinding influence of prejudice, and the error into which even good men may be betrayed by superficial investigation, and excessive confidence in others, was perhaps never more apparent. In this condition of affairs the officers

of the newly-formed Association perceived their duty, and proceeded promptly to meet and repel the attack.

No little confusion had prevailed in the public, and even in the professional, mind, from the careless use of terms in speaking or writing about the moral character of drunkenness.

The use of the word crime to describe the moral wrong of becoming or being drunk, is an instance of this. To so employ this term is to wrest it from the true position assigned to it by the highest authorities, and is contrary to the "*usus et norma loquendi*."

"A crime or misdemeanor," as defined by Blackstone, "is an act committed or omitted in violation of a public law." "Actions contrary to the precepts of religion are called *sins*, actions contrary to the principles of morals are called *vices*, and actions contrary to the laws of the State are called *crimes*," says another celebrated writer, and authority on this point.

These distinctions, so plain, had nevertheless been practically ignored. But when they were re-stated their correctness was admitted, the religious and theological communities, and the journals which had been misled in the matter, readily acquiesced in our position, as we explained and insisted, that as *sin* was no less *sin* because it was followed by *disease* as its direct consequence, so *disease* was no less truly *disease* because it was caused by a *sin* or a *vice* or by both; or than it would be were it the effect of causes over which the sufferer had no control whatever.

Thus by the simple statement by which the *sin* of habitual drinking was assigned to the position of *cause*, and the *disease* to that of the resultant *effect*, and by the familiar illustrations which we employed, the force and bearing of which, could not fail to be recognized, we gained the assent of our opponents, and relieved the institutions, and their conductors and friends, from the odium of excusing immoral-

ity by making an apology for sin. And when we referred to the prominent place assigned in all our institutions to moral suasion and religious usages, the victory in this direction became complete.

SUCCESS.

But although we thus were relieved from this damaging accusation, there remained another grave charge to be met and disproved, before the leaders of public opinion could be fully enlisted in favor of this cause.

A shrewd diplomat of the last generation is credited with having declared, in reference to a certain political movement, "that a failure was worse than a crime," and our enemies, it may be having this in mind, charged deliberately that inebriate asylums *were a failure*. This was truly a strong point in their position; could they but establish this, that alone were enough to sweep every asylum in the land into the limbo of all wrecked and ruined things.

But the friends of the cause joined issue with them on their own chosen ground. They showed what a careful investigation proved, conclusively, that of the thousands of patients treated, and whose names, residences, and history had been carefully recorded, at least 33½ per centum had been completely cured. This rate was shown to be true of the *least* successful institutions, while in several a *much higher* proportionate number were known to have been fully restored; and they confidently asked, "What institution of an analogous character could show a fairer record?"

In this last conflict there came to our aid men of the best social standing, of the highest intellectual culture, and of unquestioned character, (who seem to have recognized the baseness or the stupidity of the attack,) and voluntarily testified over their own signatures in the public prints, that they "were personally acquainted with men who were now filling

important positions in Church or State or civil life, who had been completely restored through the kind discipline and wise ministration of inebriate asylums."

So that their attacks secured sincere and influential allies to our cause and what our opponents meant for evil proved in the end to be for our good. These assaults have, moreover, given us the opportunity to appeal to their results to prove, that in well managed inebriate asylums the conditions and means of cure are found for cases in which all other known measures fail; and thus to demonstrate the great utility, nay the urgent necessity of such institutions.

To this brief sketch of the rise and early history, and present status of inebriate asylums, (although a volume might be written,) I have only to add, that they have gained steadily during the last five or six years, both in numbers and in the confidence of the medical profession, and of the people at large, and of their representatives in the legislature of their several states.

The *history of our Association* and its labors is so closely identified with that of the institutions with which we are connected, that it is difficult to speak of one without in a measure involving the others. By our success as managers of the several asylums committed to our care, we have in that capacity made favorable impressions on public opinion and gained much public confidence; but in our associated relations, we have also contributed largely to fix and widen both.

We have met from year to year to compare opinions, and to relate the results of our studies and our experiences; and have published and distributed to the medical profession, and others, an amount of information on the special and difficult subjects which have engaged our investigations, which could be derived from no other source.

We have aided in the efforts which have been recently made to restore alcohol to the place assigned it among the poisonous medicines, by the most reliable writers, but from which it had been removed with the tacit consent of the medical profession, and more, with the active, if indirect, co-operation of some of its members.

The comparative uselessness, if not the total inefficiency of alcohol as a nutriment, and the terrible danger attendant and inseparably attendant, upon its habitual use, we have constantly asserted and firmly maintained. And it is a matter of encouragement that so large a number of intelligent physicians are adopting the views we have long held on this point.

At the great International Medical Congress, convened in this city a few days since, this view was most ably advocated, in a paper read by Dr. Hunt of New Jersey, before the Section on Medicine, was not only most heartily endorsed by the Section, but a vote of thanks tendered to the author indicated their appreciation of his able and faithful study and presentation of the subject.

It is quite evident that this important question of the nature, effects, and proper place of alcohol, as an article of human use, has acquired a new interest among thinking men; and who shall say that our studies and conclusions have not had their part in its production?

The estimation in which our labors are held by our medical brethren has been recently shown by the endorsement of our claims to confidence and support by that highly respected and influential body, the British Medical Association, by the American Medical Association, and by the Association of Superintendents of Asylums for the Insane in North America and the British Provinces.

It is certainly gratifying to receive in so public a manner,

the approval and endorsement of so large, influential, and intelligent bodies, composed of men who, above all others, are qualified to decide correctly on these matters, and we may rest undisturbed by the flippant sneers of superficial and self-satisfied observers, who may speak disparagingly of what they do not understand.

In the furtherance of our objects we have kept them before the public and the profession ; not in the rôle of moral reformers alone, but have mainly presented them from our own special position, receiving light from whatever direction it might fall upon them.

While we have diligently engaged in scientific investigation, we have received assistance in our work from the political economists, having demonstrated its value in that direction. We have gained the approval of philanthropists and convinced the reformers that we are their allies and not their opponents. And lastly we have earned gratitude of thousands whom we have saved, and of tens of thousands whose friends we have rescued from impending destruction.

Gentlemen of the Association, we may well mingle our mutual congratulations on the auspicious circumstances under which to-night we are assembled.

The obstacles we have surmounted, the opposition we have met and overcome, the recollections of our achievements in the past, conspire with the promise of the future to cheer us on to yet more faithful labor, to more strenuous endeavor.

The influence we have already exerted in our own land, the effects produced by our labors on popular belief, and on professional opinion, are shown in the rapidly increasing number of institutions rising under the fostering care of state governments ; and in the multiplication of private

retreats, here and there established in various localities of our broad domain.

But our influence has not been confined to our own country. It has crossed the oceans and been active and efficient at the antipodes.

From New York to the British Islands, from San Francisco to Australia, the force of our example has extended, and the philanthropists and scientists of other countries have sought counsel from us, and have profited by our studies and our experience.

In the year 1871, Dr. Dalrymple, a member of the British Parliament and Chairman of a Select Committee of the House of Commons, appointed by that body to "consider the best plan for the control and management of habitual drunkards," came to this country expressly to inquire into the practical working of our institutions, visited several of them, and on leaving for home, addressed a written request to this Association, "to appoint a delegation of at least two of its members to go to England, and give their evidence before the committee of which he was chairman."

Two of our members, of eminent fitness for the task, were charged with this duty, visited that country, and gave, in answer to a prolonged and careful inquiry, an amount of most valuable information, with a precision, a fullness, and a breadth of intelligence, most creditable to themselves and to our Association which they represented.

And when encouraged by the successes of the past, we turn towards the future, the omens are propitious. We have abundant reason to hope that our influence will increase with the progress of events, and be felt more and more on the medical mind of this, and of all countries, until not one intelligent member of the medical profession shall be found advocating the habitual use of intoxicants, under any name

or any plea; but when they all, fully recognizing the awful hazard inseparable from their habitual use, shall join the army of the reformers, and bring the mighty influence of a united professional opinion to aid in the promotion of all wise preventive and curative measures for its resultant evils.

Gentlemen, I can in hardly too strong terms express to you my profound conviction of the great value of a united professional opinion on this momentous question of the cure not only, but of the prevention also of inebriety.

And the signs of the times certainly, I think, afford reason to expect that that influence will ere long be so directed.

I confess that I am not willing to accept the conclusions of a recent writer, who, although fully admitting "that no other agent known to men opens so wide an outlet to life," yet deems it visionary to imagine "that alcohol can ever be brought again under medical control" or restricted to its legitimate uses. On the contrary, I believe that when patriots, physicians, philanthropists, Christians of every nation and of every name, become convinced of the magnitude of this direst of evils, and combine their forces for its overthrow, the grand result will be nigh. One of the greatest obstacles to the welfare of our suffering humanity will be removed.⁴

Then will the battle be fought which shall end in victory, and the triumph be complete. None of us may see that day; yet let not that consideration serve to abate in any of us, one jot of interest, or exertion; but like the Good Samaritan, whose example is immortal, let us go on to raise the fallen and wounded, and heal them; and we shall have our reward. Our work shall not be lost, but like "good seed sown in good ground," bring forth an abundant harvest; and our names shall be enrolled amongst those of the benefactors of our race.

CAUSES OF THE RECENT INCREASE OF INEBRIETY IN AMERICA.*

BY GEORGE M. BEARD, M. D.

GENTLEMEN: In accepting the invitation of your president to address the Association at this annual meeting, it has seemed to me that an inquiry into the causes of the recent increase of inebriety in this country might fitly be discussed.

An inquiry of this kind is of interest, not only to this Association, the object of which is the cure of inebriety, but, as I hope to be able to show, to society in general, or at least to philanthropists and philosophic thinkers everywhere.

The habit of drinking to intoxication is partly a vice, and partly a disease. Drunkenness, as a vice, is very old indeed; it seems to have always existed wherever the materials were accessible. Drunkenness as a disease, inebriety, has been recognized but recently, and it appears to be especially and increasingly frequent in this country.

He who drinks to intoxication for the fun of it, for the sake of the pleasure it gives, or to drive dull care away is vicious. He who drinks because he cannot help drinking, who is borne on *against* his wishes and strivings by an irresistible impulse, is diseased. Drunkenness, as a vice, may and often does lead to drunkenness as a disease, and the two forms are frequently combined. Drunkenness, as a vice, may be and often is stopped by signing a pledge of abstinence, which the victim sometimes finds no serious difficulty in keeping, so long

*An Address delivered before the American Association for the Cure of Inebriates, at their annual meeting, Philadelphia, Sept. 26, 1876.

as he is not surrounded by evil companions. Drunkenness, as a disease, is rarely cured by signing the pledge, or by so-called moral measures of any kind. With such persons life is a constant pledge; they wish to be delivered from their suffering as much as the dyspeptic patient wishes to be delivered from his indigestion, or the neuralgic patient of his pain. The dyspeptic and neuralgic sufferer may pledge himself to abstain from eating those articles and exposing himself to those influences, as cold and dampness, that experience shows to be harmful, but, in addition, positive remedial measures may be needed for the accomplishment of a cure. Likewise the inebriate may pledge himself to abstain from alcoholic liquors, and may put himself into a position where he cannot get them, but to this negative treatment should often be added positive medication, if we expect a permanent or even temporary cure. In a word, inebriety is a neurosis—a functional disease of the nervous system—and should be treated on the same principles as other and allied nervous diseases.

There are two prominent features of inebriety that especially ally it to the neuroses—its hereditary character, and its periodicity. It is a malady that may be inherited; it descends from father and mother to daughter and son, and like other maladies, it is, when hereditary, all the harder to combat. In conformity to the laws of inheritance, it may take the place of other disorders, and may, in turn, lead to them. Abating the many one-sided statements on this point, inebriety, it must be conceded, is oftentimes the door that opens to various forms of insanity.

The periodicity of inebriety is fully as marked as that of neuralgia. Do we not all know of persons, who, at regular periods, every month or six weeks, or perhaps even less frequently, suffer from attacks of inebriety, and who, during

all the intervals, are entirely sober and sane? What is more significant is, that during these intervals they may not be even tempted by the presence of alcohol. On the other hand, on the day for the attack to appear they are impelled by a force against which their own will is as the hand of an infant against the rush of Niagara, to go after alcohol, and they will find it if they can. Many who are subject to these attacks clearly recognize their true nature; they expect and prepare for them, just as for an attack of ague, or tic-douloureux. The phenomena of the nervous system, like those of the heavenly bodies, move in cycles; one can, in some cases, predict the coming on of an attack of neuralgia or inebriety with almost as much precision as the astronomer calculates an eclipse of the sun, or the transit of Venus.

It is a good example of the way in which men reason, or rather of the way in which they abstain from reasoning, on these subjects, that in almost all that is written on inebriety, for the profession or for the laity, it is assumed, and not unfrequently stated, that intemperance and rum-drinking are on the increase among us; and the weighty statistics of the revenue department are brought in support of this assumption. The reality is that there never was a time, in the history of our race, when, in proportion to the population, there was so little intemperance and so little drinking among the higher classes, as to-day. The idea of abstaining from alcohol when it is accessible, either for example sake, or for our own sake, is, outside of Mohammedanism, almost entirely a modern and pre-eminently an American idea. Abstinence, total or comparative, has been of late years forced upon us by the necessities of the nervous system; we cannot bear alcohol as our fathers could. Even in England, also, as I was told by Prof. Huxley, several years ago—and other competent observers confirm the statement—there has been

among the leading classes, a similar advance in the direction of temperance. This progress, in both countries, is due, in part, no doubt, to the special efforts of reformers, but mainly to the general progress of culture, and perhaps, most of all, to that heightened nervous sensitiveness that makes it impossible for many to partake, even moderately, of wine without showing, instantaneously or speedily, the evil effects therefrom.

Temperance, indeed, is mostly a nineteenth century virtue, and the vice of intemperance is a survival of savagery in civilization. Going back yet farther, we find that with certain savage tribes, drunkenness is the rule, sobriety the exception. In these tribes every event of real or supposed importance, a birth, a funeral, the going to or return from battle, is celebrated by hard drinking. Reprove an Angola negro for being drunk and he will reply "my mother is dead," as though that were excuse enough. Even as recently as the beginning of the present century, the custom of drinking at funerals yet survived with our fathers. At the present time both culture and conscience are opposed to such habits. It is among the depressed classes, who yet retain the habits, and the constitutions of the last century, that intemperance abounds; they drink as everybody drank, in the eighteenth century. It is often claimed that we, of this generation, are more injured by drinking than our fathers, because of the adulterations of liquors. The reply to this is, that analyses show that most of the adulterations are, so far as their effect on the nervous system is concerned, comparatively harmless, and that few or none of them produce intoxication or inebriety. It is through the alcohol, and not the adulterations, that excessive drinking injures.

Drunkenness, as a vice, among the better classes of

civilized lands, is then decreasing,* while drunkenness, as a disease, inebriety, is increasing.

My general proposition is that inebriety has increased for the same reasons that other and allied nervous diseases have increased, and *pari passu* with them.

As this proposition has been disputed by some, it is necessary to give in detail the arguments that sustain it. This course seems to be all the more proper because those writers who up to the present time have incidently referred to this subject have assumed that nervous diseases have increased, without analyzing the reasons for their belief. This subject, it will be seen at once, bears not only on inebriety but on other nervous disorders of our time and country, and must shed light on various problems in sociology. It can be shown, I think, that the increase of nervous sensitiveness on which inebriety depends, is a matter not of opinion, but of demonstration. The question of the increase in nervous susceptibility and of the number and variety of morbid nervous symptoms must be answered by deductive reasoning, with the aid of general observation and comparison. Comparative statistics on the subject are beyond the bounds of possibility.

There are powerful *a priori* reasons why nervous diseases should increase with the increase of civilization. Over use of any organ or part of the body is liable to induce special diseases of that organ or part. The arm of the blacksmith grows large, and firm, and strong up to a certain point, but

* This remark as applied to this country is perhaps subject to certain geographical restrictions. In the extreme west, as good observers inform me, one who refuses to drink is liable thereby to lose position and social influence; the day is long gone by when this was the case in the eastern part of the country. And yet, at the Centennial Exposition, patronized by visitors from all sections, there was scarcely any intemperance.

if over used a condition analogous to writers' cramp may arise. The hammer palsy, so called, has a like explanation. The cramp of the milkmaid, of the sewing girl, of the dancing girl, of the telegraph operator, and of the pianist, are all illustrations of the same law. In tropical climates the liver is over worked and frequently diseased. The excessive use of drinks that stimulate the kidneys may excite maladies of those organs, just as over eating gives rise to dyspepsia. Excessive muscular strain invites diseases of the heart and arteries; the use of the voice in public speaking is superb exercise, and tends to strengthen the vocal organs, but when carried beyond a certain degree leads to various laryngeal disturbances. The nervous system ought to follow the same law; we shall find that it does follow it.

It is also a law that under strong and constantly acting temptations to over use any part or organ, average human nature yields. In savagery the great objects sought for are sensual pleasures; in civilization the ambition is for wealth, fame, and social standing. The result is that the savage over uses his lower, and the civilized man his higher nature. This point can be most vividly seen by contrasting ancient Greece with America,—the one the highest type of the old, the other the extreme type of the work and worry of modern civilization. Three great inventions—the printing press, the steam engine, and the telegraph, are peculiar to our modern civilization, and they give it a character for which there is no precedent; they make it possible to concentrate an enormous quantity and intense quality of work in a short time. It is difficult to bring mathematics to bear on these indefinite questions, but surely it cannot be far from the truth to say that the average American has ten times as much work and worry as the average Greek of the olden time.

Compare the life of the Athenian boy with that of a typi-

cal lad of the better classes of New York. All that the world has done for two thousand years—all the history it has made, all its art, science, religion, politics, morals, and social life, the Greek boy could know nothing of, could not even anticipate; the world to him was young, and Greece was all the world. No scholar can graduate with even a moderate stand from one of our public schools, without mastering in a certain way, and after years of labor, many of the good or evil thoughts and deeds that have occupied the human race since the time of Socrates and Aristotle. From all these events of history, which every year are rolling up as an increasing burden for the future, the Athenian scholar was joyously free; education was to him but a delicious union of poetry, philosophy, and art. The New York boy works harder in vacation than his Athenian prototype in term time. What they called work, gymnastics, competition games, and conversations on art and letters, is to us recreation. The contrast in the life of Athenian and American adults is equally striking. We have our occasional holidays, and a picnic or other pleasure party is cautiously allowed, or some anniversary is celebrated; but the Greek's life was a long holiday, a perpetual picnic, a ceaseless anniversary. Consider the elements of seriousness and intensity in American life. How much cerebral force is expended in trying to convince and reform the world. What vast numbers of societies, boards, institutions, and organizations of science and mercy. Consider the enormous and perpetually recurring excitements of politics and religion, the stress and fever of endless elections and revivals. Diffusion of knowledge and of freedom are followed by diffusion of care and responsibility; in America every man is king, and bears the burden of the republic.

The close connection between religion and morals which is peculiar to modern faiths, gives to our lives a soberness,

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and oftentimes a somberness that draws severely on the nervous force.* The character of a people may be learned from their idea of heaven, for it is natural to make the future a glorified image of the present state. The elysium that the Greek imagination loved to picture was an idealized Greece, when amid flowers, and games, and pleasant converse the hours of the blessed passed merrily by. In the Roman civilization an element of greater sternness appeared, a deeper and sadder feeling of responsibility which seems to have reached its culmination in the Anglo-Saxon race, of whom Froissart remarked "they take their pleasures sadly."

Note also that in modern days the means of transmitting news by the telegraph, railroad, and daily press, makes the distress of every region, every country, every city, the distress of the whole world. Thus we are kept in ceaseless liability to excitement and trouble, exhausting emotions are constantly called into play; every man must feel the sorrows of every other man.

Contrasts of environment between Greece and America, Athens and New York, should also be noticed. In a mild and equable clime, in which the temptation to keep out of doors was as strong as it is with us to keep in doors—where the theatres were on the hill-sides, and plays were acted in the day; where the needs of man were few and work was done by slaves—life to the cultivated Greek was a delightful poem.

But most striking of all is the contrast in the lives of

*Of the millions who visited our late Centennial Exposition, the majority, especially of country people, went because they believed it to be their duty to go. While there they conscientiously worked themselves down to a condition of exhaustion if not disease, and if by mistake they were occasionally happy, they would have hardly dared to confess it to their neighbors or even to themselves.

the Athenian and American women. The Greek wife was half a doll, half a slave. Save a few of the more brilliant among the *etairae*—the *demi monde* of the time,—they had no more voice in the interests of state, or art, or learning, or even of social life, than the children of to-day. The mental activity of woman is indeed almost all modern. The American mother is not only the acknowledged queen of society, but also aims to lead, and oftentimes with the highest success, in literature, on the platform, in the pulpit, in philanthropy and reform, and in the practice of the medical art.

The offspring of those whose brains are thus kept in constant activity must be affected for better or for worse, sometimes in both ways. If the brain of the average American is ten-fold more active than the brain of the average Athenian, the contrast in the cerebral activity of the women must be even greater. But waiving all attempts to bring the subject under mathematical law, these contrasts make clear, and bring into strong relief the fact that in every direction the modern brain is more heavily taxed than the ancient. In accordance with all analogies, therefore, nervous sensitiveness and nervous diseases ought to increase with the progress of modern civilization; and inebriety being a nervous disease would naturally be more abundant in the present than in the last century.

It might theoretically be objected to this reasoning that the capacity of the brain for work, and of the nerves for endurance, would grow with the growth of culture. This consideration is surely one of great force. Up to a certain point work develops capacity for work; through endurance is evolved the power of greater endurance; force becomes the parent of force. But here, as in all animate nature, there are limitations of development which cannot be passed. The capacity of the nervous system for sustained work and

worry has not increased in proportion to the demands for work and worry that are made upon it. Particularly during the past quarter of a century, under the press and stimulus of the telegraph and railway, the methods and incitements of brain-work have multiplied far in excess of average cerebral development. It is during this period that inebriety has been forced on the attention of philanthropists. It is during this period that various functional nervous disorders have multiplied with a rapidity for which history gives us no analogy.

Leaving deductive and coming down to inductive reasoning, we find that the question whether nervous disorders, including inebriety, have increased with the advance of civilization can be answered in several ways.

1. By comparing the higher and lower classes of the present day.

The race does not advance with uniform step, and those that are in the rear are very far in the rear. A great city like New York covers about an equal amount of civilization and semi-barbarism. The so-called lower classes in this country, and in England, are in much the same state as the higher classes a century or more ago. We have therefore right at our very doors, materials for a study of the effect of modern civilization on the nervous system; it is as though the eighteenth and nineteenth centuries were side by side. In the city of New York there are at least a quarter of a million of the lower classes, without education, without money or social standing, and without ambition, and they are all muscle-workers, living from hour to hour by manual toil or charity. They are exposed to all sorts of evil influences, physical and moral; they have almost all sorts of diseases, except functional nervous diseases. In the dispensaries that are patronized mostly by patients of

this class, one rarely finds, for example, a case of sick headache, which is one of the best representatives of functional nervous disorders, and cases of neuralgia are mostly confined to the women. At one time I was engaged with others in the effort to organize a department of nervous diseases in one of our largest dispensaries. There was at first great difficulty in getting a sufficient number of cases; and even after the department was established, it was filled largely with cases of rheumatism, and the nervous cases were chiefly of a structural and not of a functional character. All similar attempts to found hospitals or wards for the exclusive treatment of nervous maladies, are apt to meet the same difficulties and must be patronized mainly by cases of paralysis, epilepsy, and other grave disorders. On the other hand, hospitals for diseases of the eye, and for all febrile, inflammatory, and surgical disorders are easily established, and are crowded by patients from the humbler walks of life.

Among the higher classes—those who live in-doors, and live by brain alone—sick headache, and neuralgia, and allied symptoms appear almost in every family; and in this country there are thousands of families, all of whose members suffer from some of these afflictions. Hay-fever, which, as I have shown in my work on that subject, is a neurosis, seems to be almost unknown among the abjectly poor and ignorant classes. Though not exclusively an aristocratic malady, as some of its victims would believe, and by no means restricted to persons of great intellect or culture, it is yet, it must be allowed, a disease of ladies and gentlemen, those who inherit mental, or mostly mental occupations, and highly sensitive organizations; it is frequently found among those who have, or are liable to have, sick headache. There are probably a thousand cases of hay-fever in New York city, and scarcely

any of these, are, so far as I can learn, found in the tenement houses.

From this one we may learn of all. Among the lower grades of social life the *vice* of drunkenness abounds in its most revolting aspects, but not to the same extent the disease inebriety.

2. By a comparison of the present time with a quarter or half a century ago.

A comparison of this sort can only be made by physicians pretty well advanced—those who have been in practice, and have been accustomed to study symptoms and diseases during a long professional career. Specialists aside, many of the best men of this class agree in the general view that these functional nervous maladies have increased greatly during this period. Certain affections, now common and popular, as functional neuralgia, and hay-fever, may be said to be new diseases, peculiar to the nineteenth century, unknown by name or symptom seventy-five years ago.

A comparison of this kind embraces, not only positive and special diseases, but nervous sensitiveness in general. Thus our fathers could sit in cold churches, through long sermons, go all day with wet feet, wear flannels or leave them off, as might be convenient, without getting cold. Fifty years ago the average American was comfortable in a room where the thermometer stood at 60°, it is now necessary to keep it at 70°. Even more suggestive is the increasing sensitiveness in regard to certain articles of food. Our fathers lived largely on pork, and could digest it without difficulty ; but in our days, among our brain-working classes, this form of food is becoming historic. In fact pork, like the Indian, flees before civilization. The modern methods of cookery show a similar development of sensitive-

ness ; the frying-pan has given place to the broiling-irons, because the civilized constitution demands it.

Increasing susceptibility to various drugs, is a fact quite often noted. There are thousands of people in the higher walks of life, in our great cities, who are kept awake instead of being put to sleep by opium ; indeed, but for the discovery of the hypnotic effects of hydrate of chloral, and bromide of potassium, the lot of the present generation of sleepless invalids would have been severe enough. Half a century ago opium was all that was needed to give rest to the majority of sufferers. In physic, generally, small doses are taking the place of large doses, in part because large doses are not needed, and are not borne as formerly.

The number of those in this country who cannot bear tea, coffee, or alcoholic liquors of any kind, is very large. There are many, especially in the northern states, who must forego coffee entirely, and use tea only with caution ; either, in any excess, cause trembling nerves and sleepless nights. The susceptibility to alcohol is so marked, with many persons, that no pledges, and no medical advice, and no moral or legal influences, are needed to keep them in the paths of temperance. Such persons are warned by flushing of the face, or by headache, that alcohol, whatever it may be to others, or whatever it may have been to their ancestors, is poison to them.

Idiosyncrasies, in certain directions, to special substances and influences, likewise seem to be multiplying. The human system is a harp of ten thousand strings, and every year new strings seem to be added. A few illustrations will make my meaning clear. I have lately seen a young man, otherwise in fair health, who cannot hear a lecture on physiology ; anything that suggests topics relating to this branch of knowledge, causes nausea and faintness ; his father was

similarly sensitive. A medical friend told me, the other day, that in his childhood he never could go into a room where there was a strawberry, without experiencing nausea, and general distress ; in later years, he once ate a piece of raspberry pie, and at once suffered so severely in his neck and face from inflammation and pain, and from difficulty of breathing, that he apprehended death. He tells me that nothing could tempt him to repeat that experience. A gentleman whom I know well, has a daughter who cannot take a cat in her lap and stroke it, without exciting symptoms of hay fever. The history of hay fever is crowded with analogous facts. I have known large numbers of persons so sensitive to the approach of thunder storms that they are attacked with nausea, faintness, vomiting, and sometimes are thrown into convulsions, with great subsequent prostration ; this idiosyncrasy, like all others of a similar character, is likely to run in families.

A lady whom I have lately seen, cannot bear to have a cat in a room ; even when introduced without her knowledge she is made ill by it. Dr. Brown-Sequard once publicly stated, that if he touched a piece of chocolate to the side of his tongue, the face on that side at once became red, hot, and covered with perspiration. Such peculiarities have long existed, but they appear to be more abundant now, and more marked also ; new and unsuspected forms of susceptibility are constantly arising, and, through the stern operation of hereditary descent, are spreading in society.

All this is in harmony with the grand law of evolution, to which disease, as well as health, is obedient. As the growing tree is continually putting forth new leaves and branches, so the nervous system, in its development, under high civilization, is ever manifesting new varieties of suscep-

tibility. Modern nervousness is the cry of the system, struggling with its environment.

3. By a comparison of the present time with the middle ages, and the few centuries preceding the nineteenth century. So far as can be learned from all the accessible sources of knowledge on these themes, not only were many of the nervous maladies so prevalent, now quite unknown, three centuries ago; but those which are common to those eras and ours were far less abundant then than now. Allowing all that is just for the want of observation on the part of the medical men of those dark days,—allowing also for the imperfectness of records, and the uncertainty of tradition, there seems to be no possible way of avoiding the conclusion that there has been an enormous development of nervousness since that time. And in regard to the incapacity for observing, which has been so often charged upon all the physicians who were so unfortunate as to be born prior to the last half century, I may say, that even conceding the general truth of the charge, as applied to the mass of the profession, it certainly does not apply to all the great leaders in medical thought. The greatest medical minds of the last century were, to use the most measured language, the equals of those who lead the profession of our day, and were capable of observing, and did observe, and they recorded their observations; some of the grandest discoveries of all time were made by them.

True enough functional nervous diseases of various kinds were recognized in the times of which we speak; chorea and insanity existed, and in the middle ages, the wide-spreading epidemics were complicated, to a considerable degree, with the emotional form of hysteria. But the types of hysteria and chorea, that were the basis of these epidemics, were almost entirely psychical, the result, not like the

majority of the cases of these disorders of our day of nervous impoverishment, but of untrained and superstitious minds, acting on strong and healthy bodies. This type survives even to our time, and is known as "servant girl hysteria."

Concerning the special forms of nervous trouble commonly called insanity, the evidence that it has been and is increasing, although it has existed for ages, seems to be overwhelming. The increase of population, better observation, and the greater philanthropic care of our time, are considerations insufficient to overcome the evidence of general observation or the more exact deductions of statistics.

4. By comparing the nervous status of the women of our time with that of her sex in past times.

A comparison of the most superficial kind demonstrates the generally conceded fact that the civilized woman of to-day is more sensitive nervously, more liable to multiform functional disorders than her predecessor in the same station in life fifty years ago. On this subject there has been not a little exaggeration, and therefore unjust conclusions have been derived; but the general fact cannot rightly be questioned. The infinite army of aches and pains that follow in the path of the modern woman needs no statistics to prove its presence, even if statistics could be obtained.

This excessive exercise of the nervous system, with a corresponding neglect of muscular exercise, is in part the cause of the diminution in the increase of population in the better classes of American society. The able researches of Dr. Nathan Allen have made this point abundantly clear. Dr. Allen's labors in this department of vital statistics, I may remark, will be better appreciated by and by than they are now; they will be justified by future research, and his general conclusion will be accepted by those who do not accept

all his inference or share all his fears. The difference between an average of a half dozen children in a family, which obtained fifty years ago, and an average of less than four which obtains now, is very great, and, abating certain obvious qualifying facts, pretty accurately measures the child-bearing and child-rearing power of the woman of the past and the woman of to-day. But on this subject statistics are scarcely needed. Consider the large number of childless households, the many families that have but two or three children, or but one, and with them contrast the families that prevailed at the beginning of this century. The contrast, also, between the higher and lower orders in this respect, cannot, it would seem, be entirely explained by excess of prudence on the one hand, or want of it on the other. In women of culture, it should be noted, drunkenness, after it exists, is usually a disease, quite rarely a vice. Female inebriates, though not so abundant as reports would have us believe, are yet frequent enough, both in England and America.

This method of argumentation seems to drive us without chance of escape toward the conclusion that modern civilization, particularly since the time of the railroad, the telegraph, and the newspaper, has tended to develop new forms of nervous disease, as well as general nervous impressibility, among all the brain-working and indoor classes.

This effect of civilization is most conspicuous in the northern and western part of the United States. The reasons for this are manifold. When one is cast away on an unknown land, the first inquiry is, not what is the geology of the region, but what shall be had for breakfast, and until the first meal is made sure there will be much work and worry. For over two centuries the American people have been trying to get something to eat, and, as is natural, there has been great fear lest the pursuit would fail. The nervousness of our people,

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which is unprecedented in the history of nations, takes its root in this fact, and is nourished by a complex variety of influences. The peculiar dryness of our climate as distinguished from that of Europe, a feature which is common to nearly every section, and is particularly noticeable in California, together with alternations of extreme heat and extreme cold, tend by excess of stimulation to produce the condition of exhaustion which is so common among us. A moist atmosphere, and a climate uniformly hot, have a directly opposite or sedative effect ; hence we find far less of nervousness in the south than in the north. Hay fever, for example, a good type of functional nervous disorders, diminishes by quite regular gradations as we go south, until in the gulf states it is comparatively rare ; and sufferers from this disease, like nervous victims in general, are likely to be benefited by a residence south. The southerners can drink more alcoholic liquor without at once feeling or showing the effects of it, than the northerners ; and throughout the south coffee can be used much more freely than here. Among the better classes of the south there is more of drinking, but less inebriety, than among the same classes in the north. In New York there is more of total abstinence and more of inebriety than in New Orleans.

In opposition to all this course of reasoning, it may be urged that brain workers are much longer lived than muscle workers, and that longevity increases with civilization, and is highest among the most civilized classes. These points must be admitted ; they seem to me to be established absolutely by researches which I made years ago, and which I have published elsewhere (*Trans. Am. Public Health Asso.*, vol. 1) ; but longevity is only one element of health ; it may consist, as all observers know, with manifold diseases, and with the highest nervous impressibility. Sensitiveness of

constitution is indeed an aid to longevity, and in various ways: it compels caution, makes imperative the avoidance of evil habits, and early warns us of the approach of peril. Bulwer wisely says that it needs a strong constitution to be dissipated. Another compensation of these nervous disorders is, that they act, or seem to act, as antidotes to many acute and inflammatory disorders which are likely to prove fatal, and some of which seem to diminish in frequency as nervous troubles increase. Probably no great class of people in the world live longer than the professional and business men of America—the very class among whom these nervous disorders are so often found, the class that supplies the victims for our inebriate asylums.*

* I know not where to find a better demonstration of the lack of logical and scientific training among educated men, than in the published reports of the discussion on this question of the increase of nervous diseases, at the recent meeting of the International Medical Congress. While the weight of opinion, so far as that goes, was in favor of the views advocated by this paper, yet the speakers—men of ability and distinction—nearly all illustrated the very common habit—and with the laity quite excusable—of looking at one side of a subject. Thus, one declared that there were no new diseases; another that nervous diseases had only appeared to increase through the mistaken observations of specialists. One said that alcohol did not produce insanity; another declared that it did, and that in connection with it, tea, coffee, and tobacco caused more disease than brain work. "Wickedness" was gravely assigned as the cause of the increase of nervous diseases, as though wickedness were a modern discovery. One man wildly declared that "the idea that a man could hurt himself over books, was preposterous." But one of the strongest objections made was, that longevity had increased, and that intellectual men are generally long lived. To me this objection was of special interest, from the fact that when a number of years ago I first published my investigations on the longevity of brain workers, showing that they lived longer than muscle workers, and that great men, on the average, lived longer than ordinary men, and that longevity had clearly increased with the progress of civilization, I stated that nervous diseases of the functional variety had increased *pari passu* with this increase of longevity, and that the facts, so far from being inconsistent, really explained each other, and for the reasons above noted. At that time, and subsequently, my

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To find the cause of a disease is not of necessity to find the cure, but the cause indicates the direction where we are to look for a cure. Specifics for constitutional disorders are only looked for by those in whom survive the superstitions of our ancestors. There can be no specific for inebriety; there is no special antidote that will remove it from the nation. Even if the alcoholic liquors of the world were annihilated, a vast array of stimulants and narcotics are ready to take their place; already, indeed, chloral inebriety is becoming sufficiently common to excite attention.

The first step in the treatment of inebriety is the confinement of the patient in some institution where alcoholic liquors cannot be obtained; this is the object of this Association's Confinement does for the inebriate even more than it does for the insane; in many cases of inebriety it is more indispensable than in many cases of insanity. As the neuralgic sufferer sometimes finds it of advantage to go to some climate where he shall not be exposed to dampness and cold, so the inebriate often needs to put himself where alcohol cannot reach him; the sight of it, or the smell of it, will excite all the symptoms.

Beside this negative measure, positive treatment is oftentimes required. Sedatives and tonics and nutritious food may be needed, as in the case of allied disorders, to build up the system after the wonted stimulus has been withdrawn.

Inebriety has been especially observed in America, be-

theory of the longevity of brain-workers and of the inherent healthfulness of mental labor, was almost universally discredited. Curious indeed it is to see at the present time the theory accepted as a fact in a scientific body, and used as an argument against the possibility of the increase of nervous diseases. Those who are now advocating a course of logic preliminary to a medical education, will find a strong argument for their position in the discussion here referred to. The world's great want, now as ever, is an increase in the number of men who can hold two ideas in the brain at the same time.

cause, like other nerve maladies, it is especially frequent here. It is for this reason mainly that asylums for inebriates were first organized in this country. England, however, is feeling the same need, and is beginning to follow our example.

As a means of prevention, abstinence from the *habit* of drinking is to be enforced. Such abstinence may not have been necessary for our fathers, but it is rendered necessary for a large body of the American people on account of our greater nervous susceptibility. It is possible to drink without being an habitual drinker, as it is possible to take chloral or opium without forming the habit of taking these substances. In certain countries and climates where the nervous system is strong and the temperature more equable than with us, in what I sometimes call the temperate belt of the world, including Spain, Italy, Southern France, Syria, and Persia, the habitual use of wine rarely leads to drunkenness, and never, or almost never, to inebriety; but in the intemperate belt where we live, and which includes Northern Europe and the United States, with a cold and violently changeable climate, the habit of drinking either wines or stronger liquors is liable to develop in some cases a habit of intemperance. Notably in our country, where nervous sensitiveness is seen in its extreme manifestations, the majority of brain-workers are not safe so long as they are in the habit of even moderate drinking. I admit that this was not the case one hundred years ago—and the reasons I have already given—it is not the case to-day in Continental Europe; even in England it is not so markedly the case as in the northern part of the United States.

For those individuals who inherit a tendency to inebriety, the only safe course is absolute abstinence, especially in early life. To combat the nerve-exhausting tendencies of our time, all good hygienic influences are to be recom-

mended. The best cure for civilization is barbarism, and the nearest approach to barbarism that is practicable for civilized man is found in camping out. This method of spending vacations has three advantages over ordinary hotel or home life. First, the air of forests, without regard to elevation, is both negatively and positively more healthful than the air of cities or even of cultivated country districts. Forest air is usually cool and dry,—is comparatively free from vegetable irritants and abounds in ozone. Secondly, life in camp compels us to breathe out door air all the time, night and day. Thirdly, it gives freedom from even the apprehension of telegrams, correspondence, society, books, and especially from newspapers, with their accounts of public and private excitements, and their daily or hourly drafts on the vital forces. Camp life is, however, a trade, and is only to be learned by much experience under good instruction. The increasing love of out door sports of all kinds, the habit of taking long yearly vacations, and of traveling frequently and at great distances,—these influences are all acting as antidotes to the evils of civilization, and are so far forth preventives of inebriety. Vacations and travel are largely modern institutions.

In closing, I would guard against possible misinterpretation of my language and argument by the suggestion that the increase of inebriety and other forms of nervous disorder should not give us undue alarm. The facts I have brought forward should awaken thought and vigilance, but not a feeling of despair. The American people are not going to physical destruction. Increase of nervousness is but one side of a complex story. Here, as so often in doubts and difficulties, the principle of evolution may come to our rescue. We have seen that in obedience to this law, under the new conditions of recent civilization,—such as the telegraph, the railway, the printing press, free institutions, an intense theology, an

aggressive philanthropy, and a stimulating climate,—amid such an unprecedentedly intricate environment, new phases of nervous disease have arisen, and are arising; but in conformity to the same principle, the weakest are weeded out and the strongest survive; consequently the very tendency toward nervous debility must tend to its own elimination. It is a part of the law of hereditary descent—which in its turn is a part of evolution—that after any qualities, good or bad, attain a certain stage of growth, they cease to reproduce themselves; development in that special direction is suspended. Thus genius, though as transmissible as any element of mind or body, appears to be so only up to a certain point. The very greatest geniuses—as Socrates, Goethe, Napoleon, Shakspeare, Milton—are never the parents of geniuses. Likewise, improvement in the racing qualities of horses along any one line of stock reaches a point where it is arrested. Conversely, degeneracy in any direction cannot go on indefinitely, but must be stayed sooner or later by the operation of the same law. Great evils evolve their own cure. During the coming century these principles must be brought into play in the development of the American people. The excessively feeble and nervous must perish; and the fight for existence must be kept up between the less feeble and less nervous and the well balanced and strong; and thus by a process of successive eliminations a race may be developed that shall be thoroughly acclimated and in every way adapted to the complex conditions of a high civilization. The question may fairly be raised whether this process is not already visibly going on before our eyes; whether the present generation is not, on the whole, better developed than its immediate predecessor; whether the men and women in the higher classes of America of to-day are not on the average healthier, handsomer, and sturdier than

their ancestors in the same class twenty-five years ago. Many years of careful study of the physical appearance of our higher classes, in those places where representative types from all parts of the country are constantly seen—in our leading churches and concert halls, on Fifth Avenue and Broadway—have convinced me long ago that the combined influences of wealth and culture, of better manners and better diet, are already bringing fullness and freshness to the angular cheek of the traditional Yankee; the American race is filling out; we weigh more than our fathers; the next generation, as the experience of the late war gives us reason to hope, may equal our European ancestors in strength, in solidity, and endurance, as our women have long surpassed them in personal attractiveness and beauty. If this view be sound, then the problem of inebriety and of other conditions to which it is related is being slowly solved for us by forces of almost infinite potency, in comparison with which all our associations and organizations, our institutions of science and of charity, are but as the chips and the foam on the bosom of the ocean tide.

Society Proceedings and Reports.

PROCEEDINGS OF THE AMERICAN ASSOCIATION FOR THE CURE OF INEBRIATES.

The seventh annual meeting of the American Association for the Cure of Inebriates was held in the hall of College of Physicians, in the city of Philadelphia, Pa., on Tuesday, September 26, 1876, at 10 A. M.

The president, Dr. T. L. Mason, of Brooklyn, called the meeting to order, and prayer was offered by the Rev. J. Willett.

The president offered a few remarks, congratulating the society on the renewed interest in the work; particularly among medical men, and in medical societies, where numerous papers on this subject have been presented and discussed, during the past year.

Also several new asylums have been organized, and some of them have gone into active operation.

Constant inquiries from medical men and State authorities are being made, relative to our work and its success.

The principles we advocate are recognized by the leaders of the medical profession, and the day is not far distant, when inebriety shall be understood by all, and managed with the same success as other diseases are.

The following persons were registered and present:

Dr. T. L. Mason, Brooklyn.

Dr. D. G. Dodge, Supt. of N. Y. State Inebriate Asylum.

Dr. Albert Day, Supt. of Washingtonian Home, Boston, Mass.

Dr. Joseph Parrish, Burlington, N. J.

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- Dr. T. D. Crothers, Asst. physician, Binghamton, N. Y.
 Dr. John Graff, Supt. Franklin Home, Philadelphia.
 Prof. Daniel Wilkins, Supt. Washingtonian Home, Chicago, Ill.
 Mrs. Daniel Wilkins, Washingtonian Home, Chicago, Ill.
 Dr. Susan J. Tabor, Supt. of Temple Home, Binghamton, N. Y.
 Rev. John Willett, Supt. of Kings Co. Home, Fort Hamilton, N. Y.
 Dr. George F. Foot, Stamford, Conn.
 Dr. Jos. T. Howard, Supt. of Washington City Inebriate Asylum, D. C.
 Dr. T. H. Everts, Director of Minn. State Asylum, Rushford, Minn.
 Dr. E. C. Mann, Supt., State Emigrant Hospital, Ward's Island, N. Y.
 Dr. Geo. M. Beard, New York City.
 Dr. John Morris, Trustee of Maryland Inebriate Asylum, Baltimore, Md.
 Wm. T. Wilkins, Director of Franklin Home, Philadelphia, Pa.
 Dr. Robert P. Harris, Attending Physician Franklin Home, Phil.
 D. Banks McKenzie, Supt. of Appleton Home, Mass.
 Dr. Geo. B. Hawley, Trustee of Walnut Hill Asylum, Hartford, Conn.

The following physicians were invited to take part in the meeting.

- Dr. Wm. B. Atkinson of Philadelphia.
 Dr. Isaac Dezouch of Philadelphia.
 Dr. Henry Gibbons, San Francisco, Cal.

On motion of Dr. Parrish, the reading of minutes of last meeting were dispensed with, as they were already before the members in print. Carried.

Dr. Day moved that Mrs. D. Wilkins, matron of Washingtonian Home, Chicago, Ill., and Dr. Susan J. Tabor, Supt. of Temple House, Binghamton, N. Y., be invited to participate in the proceedings. Carried.

Dr. Parrish moved that a committee on business be appointed by the chair to fix the hours of the sessions, and arrange the order of papers. Carried.

The president appointed Dr. Parrish, Mr. Graff, and Dr. Harris.

This committee reported that the association hold two sessions a day, commencing at 10 A. M., and lasting until two P. M., and an evening session beginning at 8 P. M. Also that the first evening session be held at Franklin Home in response to invitation, and the next meeting in the evening be in this hall, at which the president's address be delivered.

Also that a paper entitled "Mortality, Duration, and Prognosis of Inebriety," by Dr. T. D. Crothers, asst. physician, of Binghamton, N. Y., be read.*

In the discussion following the reading of this paper, Prof. Wilkins remarked, in his experience, no age or period of life was more favorable for recovery than any other; he had seen inebriety at all ages and periods, and thinks all are affected alike at different times, and recovery follows the means used, with equal facility.

Mr. McKenzie is satisfied, from his experience, that no age, or time of life, is of importance in the prognosis.

Dr. Harris has never noticed any difference in age, but thinks that there may be certain indications in the preponderance of the passions and emotions.

Dr. Day has had from four to five thousand inebriates under his care, and he is positive that certain conditions of age are more favorable than others; he thinks that from forty to fifty, the most permanent recoveries take place. Has noted many instances where men drank up to this age, then stopped, seemingly to recover, and obtain mastery over their appetites; the desire for drink seems to disappear at this time, or take another form.

Mr. Graff remarked that he did not regard education as

*This and all other papers read will appear in full, in future numbers of the Quarterly.

any barrier to the continuance of inebriety, or any aid in the process of recovery, and gave some instances which seemed to confirm this statement. He would like a fuller discussion of the points of the paper, and wants explanations of many of the ideas advanced.

Mr. McKenzie spoke of the element of faith and hope, and its influence in such cases.

Prof. Wilkins believes that labor is an important element in the prognosis, and should enter into all treatment.

Dr. Parrish fully agrees with the ideas advanced, about particular times of life being more favorable to recovery than others. Also he has noticed that education furnishes additional resources to divert the thoughts and imaginations into other channels, and in many cases he has traced the very influences mentioned in this paper.

The president remarked that the facts and conditions governing the prognosis, mentioned in the paper, were very important, and in many cases exerted a wide influence. He believed a more careful study of these elements would throw much light on the future of every case, and its treatment.

The committee reported a paper, by Dr. E. C. Mann, Supt. of Emigrant Hospital, N. Y. City, "On Epilepsy, and its relations to Inebriety."

In the discussion of this paper, Dr. Crothers remarked that the relation of epilepsy and inebriety was very intimate in many cases, mentioning a case where drinking followed the cessation of epilepsy, and ended when epilepsy re-appeared.

The president inquired if epilepsy had been noticed in the children of inebriates? The answer was, only in adults had epilepsy been noticed to follow from parents that were drinkers.

The committee reported a paper by Dr. D. G. Dodge,

Supt. of New York State Inebriate Asylum, "On Inebriate Asylums and their management."

Following the reading of this paper, Dr. Harris spoke of the plan of treatment in cases of gastritis following inebriety, by which water was withheld, to the great advantage and success of the case, referring to the general methods mentioned in the paper, and the different plans of management which had been tried at Franklin Home.

Rev. John Willett mentioned rest as all essential after the inebriate was admitted, and later when he became stronger, to engage in suitable labor, or occupation. He thinks that labor of inebriates can not be made a source of profit to the asylum, from the very short time they remain; but with skillful management it might be made to pay expenses.

Farther discussion was participated in by Dr. Day, Prof. Wilkins, and Dr. Foot.

The committee reported a paper by Dr. George M. Beard of New York city, "On Causes of Increase of Inebriety in America."

A general discussion followed the reading of this paper, after which reports were in order.

Dr. Parrish, foreign corresponding secretary, reported a long list of letters* from distinguished medical men abroad, relating to inebriety and its effects; including a very interesting account of the opium hospital in China, organized by medical missionaries, selections of which were read, indicating great interest in this subject.

Dr. Day offered the following resolution, which was carried:

Resolved, That the foreign corresponding secretary be

* Abstracts of these letters will appear in a future number.

requested to open communications by letter with the representatives of this government in foreign lands, and with such missionary stations in heathen countries, as he may be able to address, requesting answers from them concerning the kinds of liquors or drugs used as intoxicants, with such other questions as he may ask. Also the laws, if any, that may exist on the subject of their manufacture and use, with the results of such use upon the moral and physical conditions of the people.

The president remarked that Dr. Bucknil's statement in the London Lancet, about inebriate asylums in this country, was of such importance, and so notoriously the reverse of the facts, as to demand recognition and correction from this association.

Prof. Wilkins offered the following resolution :

Resolved, That a committee, consisting of the president, secretary, and Dr. Dodge, be requested to prepare an answer to this statement of Dr. Bucknil's, and that every institution be required to furnish facts from which to date such report, and that it be published in the leading medical journals of this country and the British Isles. Carried.

Dr. Crothers reported a barometrical record of one month at the N. Y. State Inebriate Asylum, with a statement of the condition of the patients, showing that at the time of lowest area marked by the barometer, the most difficulty and restlessness was manifest, and the care and management necessary was increased to a large degree. He remarked that this record covered too short a time to be conclusive, but it was indicative of the atmospheric influences which farther observations might confirm.

Rev. Mr. Willett thinks a positive influence may be traced between the paroxysms of inebriety and the weather. For years he has observed more difficulty in controlling

patients before a storm, and thinks the cravings for stimulants more intense at these times.

Prof. Wilkins has noticed this element in college, and also in asylums, and believes a close relation exists between the mental conditions and the changes of weather.

Dr. Day has noted certain times when delirium and restlessness were more intense and difficult to manage, which corresponded to sudden changes of weather. He has also observed that at certain times of changeable weather he had more admissions, more persons coming for help to the asylum. And he is positive that future studies will show the intimate dependence and relation between them.

The association then adjourned to meet at Franklin Home at 8 P. M.

Here the meeting was of an informal character. General addresses being delivered by Mr. Godwin, Prof. Wilkins, Drs. Mason, Day, and others, and an inspection of this asylum, and its admirable workings followed, after which they adjourned.

WEDNESDAY MORNING.

The association convened at the hour to which they adjourned, the president in the chair. Minutes of last meeting were read and approved. The president announced the following committee on nominations :

Prof. Wilkins, Rev. John Willett, and Mr. Graff.

Dr. Harris moved that the office of treasurer be combined with that of secretary. Carried.

The following committee on new members were announced : Drs. Harris, Morris, and Day.

The committee on nominations announced the following, which were unanimously elected.

President—T. L. Mason, Brooklyn.

Vice-presidents—Albert Day, Boston ; N. S. Davis, Chi-

cago; R. P. Harris, Philadelphia, and B. N. Comings, New Britain, Conn.

Secretary and Treasurer—T. D. Crothers, Binghamton.

Foreign Corresponding Secretary—Dr. Joseph Parrish of Burlington, New Jersey.

Dr. Parrish called attention to the fact that the society has been meeting for several years, but has never had any organized system for the collection of funds, and that the association is now in debt.

Drs. Parrish, Morris, and Wilkins were appointed a committee of three to devise some plan for collecting a revenue to meet expenses.

A committee on resolutions, consisting of Drs. Day, Parrish, and Wilkins, were appointed by the chair.

Prof. Wilkins offered a resolution that this association meet at the Washingtonian Home, Chicago, Ill., next year. After some debate, Dr. Day moved that when we adjourn it be to meet in Chicago the second Wednesday in September, 1877. Carried.

Mr. McKenzie made a report of the Inebriate Asylum in Halifax, N. S.

The committee on new members reported. We have examined the credentials of the following persons, and recommend that they be elected members of this association:

Dr. T. E. Everts, Rushford, Minn.

Dr. Joseph T. Howard, Washington, D. C.

Prof. Daniel Wilkins, Chicago, Ill.

Dr. Morris offered the following resolution, which was carried unanimously.

Resolved, that the thanks of this association are due the College of Physicians of this city, for the gratuitous use of their building for the sessions of this body, and that the secretary be instructed to communicate to the college this

expression of our thanks, with a copy of each years' transactions to the library of the college.

Dr. Harris read a report of the Franklin Home, with statistics.

Dr. Howard read a report on the work of inebriate asylums, in Washington, D. C. The committee on business reported a paper, by the Rev. John Willett, "On the Dogma of Human Responsibility, as it relates to Inebriety."

A very general discussion followed this paper, in which the points made in the paper were re-affirmed.

The committee reported a paper by Prof. Wilkins, on "The Causes, Effects, and Cure of Inebriety."

The question of the sinfulness of inebriety was discussed, and cases were cited in which men had tried with all their strength of will to fight their love for intoxicating liquors, but without avail.

Extended remarks were made on this point by Drs. Morris, Crothers, Parrish, Harris, and Profs. Wilkins, Graff, and others.

The president remarked that the apparent difference of opinion was more a difference of terms, and the meaning we attached to them. He never knew a man who did not think drinking to excess a sin, in one sense, at the same time in many cases it was a positive disease. But when we understand the subject more clearly, no difference will exist on this point.

The Committee reported a paper by Dr. Parrish—"On Insanity and Inebriety Contrasted," a verbal abstract of which was given by the Doctor, with a request that the manuscript be completed and referred to the Committee of Publication.

THE COMMITTEE ON RESOLUTIONS

presented the following report

Resolved, That the following propositions, adopted with such unanimity by the Section of Medicine, and reported to the International Medical Congress recently held in this city, on the subject of the uses of alcohol, be accepted by this Association.

1. Alcohol is not shown to have a definite food-value by any of the usual methods of chemical analysis or physiological investigation.

2. Its use as a medicine is chiefly that of a cardiac stimulant, and often admits of substitution.

3. As a medicine, it is not well fitted for self-prescription by the laity, and the medical profession are not accountable for such administration, or for the enormous evils arising therefrom.

4. The purity of alcoholic liquors is, in general, not as well assured as that of articles used for medicine should be. The various mixtures used as medicine should have definite and known composition, and should not be interchanged promiscuously.

Resolved, That, in the opinion of this Association, the involuntary commitment of inebriates to asylums for the insane for compulsory and protracted treatment, is a violation of personal liberty, which is discountenanced by the people, and should be prohibited by law.

Resolved, That in the various forms of effort in the conduct of inebriate institutions, whether under the name of reformation for moral treatment, or asylums for the study and treatment of the subject of inebriety as a disease, this association recognizes the same good work and most seriously recommend the multiplication of such institutions in every city and State throughout the land.

Resolved, That we who have charge of the victims of strong drink do most solemnly and respectfully call on all who have the care of the young or old, to remember that the ministrations committed to them are no less than this—that they are

the educators of man, a creature dear to God, and that it is their solemn duty to impress on their minds by precept and example the great danger of touching in any form, alcoholic beverages, and that while we have devoted our time and means to save those who have fallen, and have been successful to a large extent, we ask you to aid us by endeavoring to prevent others from falling into this terrible vice.

The report was adopted.

The committee on finances reported that each member of the association, not an officer of any inebriate asylum, shall pay the yearly tax of five dollars to meet current expenses, and those members who neglect to pay, be dropped from the roll; also that the usual assessments be made on the asylums. Carried.

Moved that all papers and reports be placed in the hands of the secretary to await the action of the publication committee. Carried.

Reports were made by Dr. T. E. Everts, of Rushford, Minn., on the progress of the State Inebriate Asylum.

Dr. Day presented a report of the Washingtonian Home, Boston, Mass.

Rev. John Willett reported the work done during the past year, at Kings Co. Inebriate Home.

Dr. D. G. Dodge reported the work of the New York State inebriate asylum, Binghamton, N. Y.

Dr. T. D. Crothers made a report of microscopic and chemical work done at the New York State Inebriate Asylum, Binghamton, N. Y.

After which, the association adjourned until 8 in the evening.

THE EVENING SESSION.

A large number of physicians, and others interested, gathered in the hall to listen to the annual address, by the

president. Dr. Parish, as chairman of the Committee of Arrangements, made a few opening remarks, and invited Dr. Day, Vice-president, to the chair, who introduced the speaker with a few appropriate remarks.

After the delivery of the address, Dr. Henry Gibbons, of San Francisco, Cal., was introduced, and made some impressive remarks on the necessity and duty of more active work in this field, by the profession, enforcing his views with some very clear illustrations, which elicited hearty applause.

Dr. Morris, of Baltimore, a delegate from this association to the British Medical Association last year, made an interesting verbal report.

Dr. Parrish offered the following resolution of thanks to the Press of this city, for their very intelligent reports of our proceedings.

Resolved, That the thanks of the Association are due to the Reporters of the Press of this city for their faithful attention to, and daily report of the proceedings.

Carried.

After which, Dr. Morris moved that we adjourn to meet in Chicago, the second Wednesday of September, 1877.
Carried.

T. D. CROTHERS, *Rec. Secretary.*

SENILITY FOLLOWING INEBRIETY. Some cases of inebriety are marked by general and positive indications of premature senility, manifested in degenerations, such as indurations of the liver and spleen, atrophy, fatty degeneration, calcification, and softening.

The hair turns white prematurely, and the vertebral column begins to curve, persistent and changeable neuralgia comes on. Swelling of the joints, called rheumatism, eccentric habits, with a morbid degree of excitability, or depression. In these cases a degree of chronicity exists, that is very unfavorable, and usually ends fatally.

Editorial.

The "QUARTERLY JOURNAL OF INEBRIETY" is offered to the public, as the exponent of the principles of the "American Association for the Cure of Inebriates," a faithful and authoritative history of which is contained in the late annual address of its President, which may be found in this number, and to which the reader is referred. The JOURNAL is under the supervision and editorship of a publishing committee, and will be issued, as its name indicates, quarterly. Each number will contain a portion of the proceedings, and each volume of four numbers will be a complete record of the annual transactions of the Association, together with a variety of original and selected articles, on the specialty of which it treats, by both home and foreign correspondents.

We can but hope that the importance of the subject to be discussed, in the JOURNAL, will commend it to the patronage of scientists and philanthropists who may desire to investigate inebriety from a new standpoint. The Association does not antagonize any other form of effort, in the direction of reform, but is encouraged in its own work by every other means, by whomsoever employed, the tendency of which is to enlighten public sentiment, improve public morals, and restore the inebriate. It hopes to procure, and profit by, information from all sources, and will gladly contribute the result or its own researches for the common good. It will seek to furnish the results of the asylum treatment of inebriety as a disease, and also of the study and management of inebriates in reformatory homes; both of which methods are distin-

gished by singular success. It believes the public are entitled to whatever has been, and may yet be learned in these several institutions, and disclaiming all mere partisanship and rivalry, enters upon the publication of a journal that shall represent the most advanced scientific observations, and the most earnest and praiseworthy reformatory efforts, as they are severally made in the different institutions that are embraced in its organization. With this brief statement of its objects and plan, the publishing committee have the assurance that their labors will be duly appreciated and that the JOURNAL will meet with hearty support.

It is a curious fact that great financial reverses, and upheavals of society, are felt like waves, in the increase of patients in all the larger inebriate asylums.

The Black Friday of Wall street, the fire of Chicago, and the present financial crisis, with its sudden revolutions, have and are still developing thousands of inebriates, all over the land.

The better class of these unfortunates come to inebriate asylums, others suffering more severely appear in insane hospitals, and another class drop to the lowest level and soon disappear.

The constitutionality of the Inebriate Asylum law of Minnesota has been affirmed in the Supreme Court, lately, and we trust the asylum at Rochester will be in operation during the year. Inebriate asulums are as much a necessity as insane hospitals, and the public are fast recognizing it.

Clinical Notes and Comments.

Under this head will be gathered clinical histories, and notes of cases, illustrating the various phases of inebriety and opium intoxication.

ANALYSIS OF ONE HUNDRED CASES OF INEBRIETY, RECEIVED AT THE NEW YORK STATE INEBRIATE ASYLUM, BINGHAMTON, N. Y.—It is proposed to show some general facts from these cases, which will confirm and bring out more clearly many of the opinions entertained by authorities on this subject.

In a general classification, there will always be the constant, periodical, and irregular inebriates.

The first class drink steadily, with no interval of sobriety except from circumstances of necessity. They seldom lose control of themselves, and usually have some reason to justify their course; with unbounded confidence in their strength, and morbid insensibility to danger, they are among the most difficult cases to cure.

The second class of periodical inebriates have distinct periods of sobriety, during which the disorder seems to die away, and health returns. Then, depending on conditions either apparent or obscure, and with or without premonitions, it bursts out again, runs a certain course, and ends. As the case progresses the intervals grow shorter.

The irregular inebriates are not distinctive, only in the uncertainty of their disorders. Usually they are weak-minded and much debilitated, also largely influenced by the circumstances and surroundings.

Of these classes there were thirty-one constant drinkers, and thirty-eight periodical, and the remainder were irregular.

Of the duration of these cases, fifty-four had been inebriates more than five years, and less than ten. Twenty-one had been drinking more than ten, and less than fifteen years. Eight had been inebriates over fifteen years, and seventeen less than five years.

The time from which the inebriety was dated, was generally the first occasion of being under the influence of liquor.

In thirty-four cases, a long period of premonitory symptoms followed, during which cider, soda, beer, and home-made wines were used. In twenty-one cases strong liquor was used from the beginning, and no initiatory period preceded the drinking.

In four cases there was continuous drinking at first from one to four days, followed by long periods of sobriety, then a return of the desire, which was satisfied with beer for months.

The other cases began irregularly, depending upon particular conditions and circumstances. In one case the patient had drunk wine at dinner from childhood up, never wanting other liquors, until he suddenly acquired an uncontrollable appetite, and became an inebriate at once.

In another case, whisky was drunk for ten years at meals, in small quantities, and at no other time. Then unexpectedly it was replaced by beer, which was drunk to intoxication, up to the time of entering the asylum.

(Continued in our next.)

NOTE.—Several important papers and communications are unavoidably crowded out of this number. The foreign correspondence relating to this subject, and reports of asylums, and other matter of great interest will appear in the next number.

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STRONGEST!

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And BEST!

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Respectfully,

SYKES & NEWTON,
ASYLUM STREET, COR. TRUMBULL,
Hartford, Conn.

NEW YORK STATE INEBRIATE ASYLUM,

Binghamton, Broome County, N. Y.

This Asylum is admirably situated, overlooking a fine section of country, and is complete in all the appointments of a first class home, with ample means to meet the wants of every case. It is located three miles from the city, and removed from all temptation. Its management is the same as all other State charities, under the control of a Board of Managers appointed by the Governor. The law provides for the maintenance of indigent inebriates, similar to that of the insane, and whenever a vacancy occurs, patients from other States may be admitted.

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

THE CHARGES FOR BOARD

Will be less to residents of the State, and will include medical care, washing, lights, fuel, etc., with ordinary attention. The exigencies of each particular case will be acted upon, as it may present itself, to those of moderate and limited means as well as the rich.

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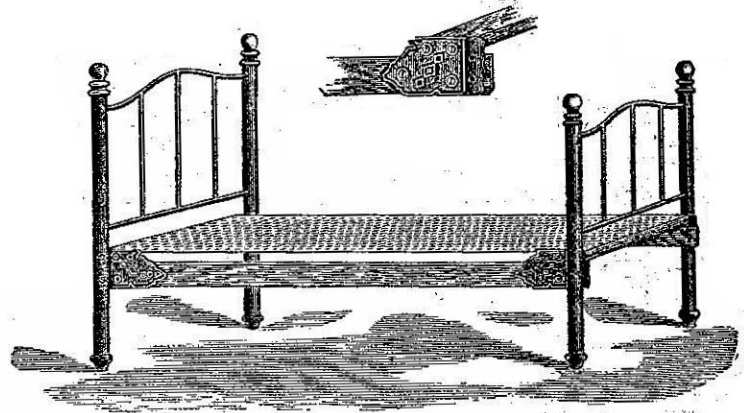
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Who are exclusively licensed to manufacture and sell in the Western States.

[SEE NEXT PAGE.]

WOVEN WIRE MATTRESS CO., HARTFORD, CONN.

Attention is called to the following Testimonials:

FROM THE REPORT OF THE EXECUTIVE COMMITTEE OF THE HARTFORD HOSPITAL, }
April 10th, 1871. }

The hospital is now supplied with the Woven Wire Mattress, with iron frame. There are many reasons why the wire mattress is peculiarly adapted to hospitals. This mattress with iron frame costs less than a good hair mattress. They require no covering but blankets to protect the patient from the wire. They are elastic and yield to the form of the body like a water bed. Every patient can have a perfectly clean bed when admitted.

They are free from vermin of every kind. They are durable, and never settle nor sag. The wire mattress has been in use for a long time in the hospital with perfect satisfaction, and aid much in the recovery of the patients by the cleanliness and comfort which they contribute to their occupants.

FROM THE REPORT OF THE EXECUTIVE COMMITTEE OF THE HARTFORD HOSPITAL, }
April 12th, 1875. }

The Woven Wire Mattress has been in use in the hospital during the last five years. They have exceeded our highest expectations. In order to have the full benefit, in a sanitary point of view, they must not be used with a mattress of any kind. They make a perfect bed in a hospital by placing two double blankets over the wire. In this manner over one hundred are in constant use with perfect ease and satisfaction to its occupant. By so doing, every patient on entering the wards is placed on a clean bed.

INSTITUTION FOR THE RELIEF OF THE RUPTURED AND CRIPPLED, }
NEW YORK, Jan. 8, 1870. }

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

DR. JAMES KNIGHT,
Physician and Surgeon to the Institution.

CONNECTICUT INDUSTRIAL SCHOOL FOR GIRLS, }
MIDDLETOWN, CT., Feb. 24, 1876. }

WOVEN WIRE MATTRESS CO.,

Gentlemen: We last year furnished Eighty (80) rooms with the Mattresses of the Woven Wire Mattress Co., of Hartford, Ct., and find them in every way satisfactory and pleasing.

We expect to provide the same for our new "Allyn Home" when completed.

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BUTLER HOSPITAL, PROVIDENCE, R. I., Feb. 25, 1876.

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INSANE ASYLUM OF NORTH CAROLINA, RALEIGH, N. C., March 27, 1876.

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Gentlemen: The use of the bedstead recently received from the Woven Wire Mattress Co., convinces me of their superiority over any iron bedstead with which I am acquainted for hospital use.

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OFFICE OF THE SOUTH CAROLINA LUNATIC ASYLUM, J. F. ENSOR, M. D., *Sup't.* }
COLUMBIA, S. C., 7th April, 1876. }

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Gentlemen: Your iron bedstead for hospital use, with Woven Wire Mattresses, have now been in use in this institution for several months. From our experience with them I do not hesitate to say that for neatness, durability, and comfort, they are superior to any bedstead ever before presented to the public, for use in Hotels, Hospitals, and all other public institutions.

Yours respectfully,

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AN ASYLUM FOR THE REFORMATION OF INEBRIATES.

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The new building erected in 1875 has a frontage of 106 feet, with a rear or chapel building 45x70. The main building above the stores contains the Superintendent's apartments, office, parlors, dispensary, reading room and library, service room, gymnasium, printing office, 66 sleeping rooms, 45 being double, bath rooms, etc. The rear building contains the dining room, kitchen, laundry, a chapel seating 500, hospital, convalescent room, padded room, amusement room, etc., affording accommodations for over 100 inmates, and being in all respects as pleasant as any institution or asylum in the country.

The Institution is under the immediate oversight and control of the Executive Committee appointed by a Board of thirty Directors. The Superintendent and Matron reside in the Home and give their entire attention to the care and interests of the inmates, aided by the daily visits of the Attending Physician.

A monthly paper of eight pages is published by the Home about the middle of each month, devoted to the interest of the Institution and temperance generally. All communications and subscriptions for the paper should be addressed to THE WASHINGTONIAN, 566 West Madison street, Chicago, Ill.

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

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NEARLY 6,000 PATIENTS HAVE BEEN TREATED,

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The elegant and commodious building recently erected at

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A few steps from Washington Street, embraces every modern improvement and will pleasantly accommodate from forty to fifty patients.

Any man who honestly desires to reform his intemperate habits will find at this establishment every aid and accessory that science, sympathy, and long experience can possibly bring to his relief; and while under treatment, which is simple and pleasant, will at the same time be surrounded with all the comforts of home, and strengthened by congenial associations and agreeable entertainment.

The charges for board, etc., will be moderate—not to exceed the price paid for similar accommodations in any private family. For further particulars, reports, circulars, methods of treatment, etc., address or apply to

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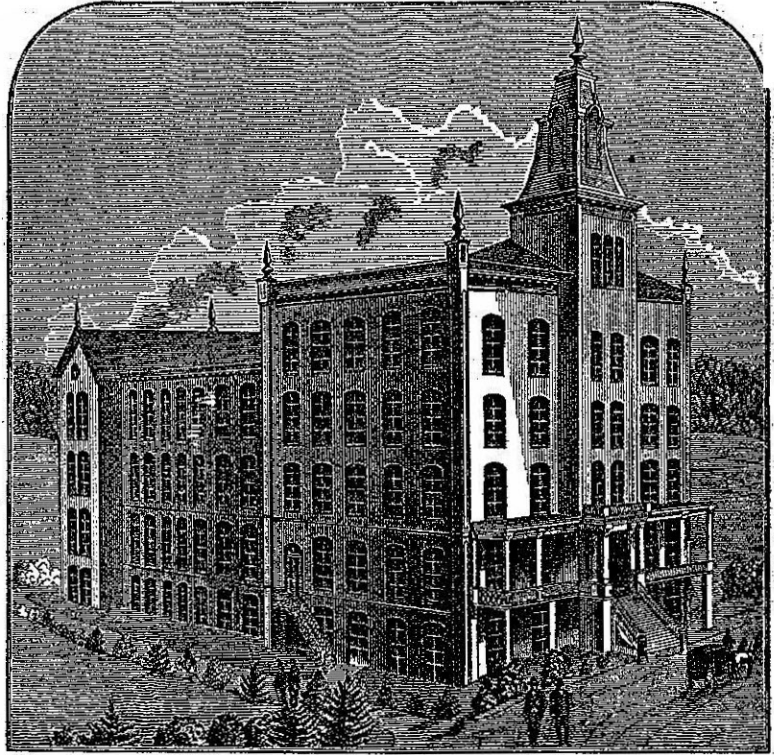
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P. S.—Public Temperance Meetings—always entertaining and instructive, inmates and graduates being usually the speakers—are held in the Chapel of the Home every Tuesday evening at 7.30 o'clock, and Sunday at 6 o'clock, P. M.

THE INEBRIATES' HOME.

Fort Hamilton, L. I., N. Y.

INCORPORATED 1866.



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The Buildings,

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

The Management

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

The Classification

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

Boarder Patients

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

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

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

Patients are received either on their voluntary application, or by due process of law.

The charter confers power to retain all patients entering the Home.

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