

action with an abnormal capacity for mental and physical exertion, wakefulness, loss of appetite, and apparently little or no necessity for food; bright and glistening eye with dilated pupil, which will not contract under the stimulus of light; the secretions are not dried up as in opium addiction, but the reverse usually obtains. As the disease becomes more established, most of these symptoms are accentuated: but, unless the stimulation is kept up by larger and more frequently repeated doses, intense physical and mental depression set in, leading to severe nervous agitation, fear of impending death frequently accompanied by lachrymosis; nutrition soon becomes impaired, accompanied by emaciation and anemia; sunken eyeballs with dark areola round the eyes, prominent cheek bones and general pallor make the subject a most ghastly spectacle. As the malady becomes more chronic, mental symptoms in the form of hallucinations and delusions supervene. Persons seen or heard at a distance are construed into bands of enemies plotting to rob, physically disable, or murder, and as a result the patient makes complaints and lays charges against innocent persons. All sorts of firearms and other deadly weapons are secreted within easy reach as a protection, and are apt to be used with serious results. Apartments are barricaded to prevent imaginary enemies pouncing in to do bodily harm or carry him off to a prison or dungeon. The key-hole and other small apertures or crevices are chinked to prevent anyone from seeing into the room or forcing noxious gases at him. Aural and visual hallucinations are also present. Added to all this we have what has been termed the "Cocaine microbe," not the material microbe met with in other diseases, which can be demonstrated under the microscope, but an imaginary body which the patient believes to be real, usually assuming the form of minute worms and insects situated under the skin, so that he will mutilate his body, especially his hands and fingers, trying to dig them out with the point of a penknife or other suitable sharp-pointed instrument.

When the hypodermic syringe is used as the means of taking the drug, the skin where the needle is inserted soon becomes indurated and its texture changed so that, in course of time, it becomes leathery—almost impossible to force the needle through—and with the constant dosage, the skin on the arms, fore-arms, legs, thighs and hips becomes so thickened, hardened, discolored and altered in its texture that it is almost impossible to find a suitable point to insert the needle, upon the withdrawal of which the skin, lacking contractile power, fails to close the puncture, and much of the fluid injected is apt to spurt out, causing considerable loss and the necessity for another injection. When a strong solution of Cocaine is used the skin becomes disorganized, ulcers form, varying in size from a small pea to large areas of integument. I have seen ulcers so caused measuring six inches in length by an average of two in diameter without a particle of skin being present. It is quite true that the habitual use of morphia, hypodermically administered, will produce a similar induration, but the action of morphia in this respect is mild as compared with that of Cocaine. The Cocaine habituate is totally unfit for his ordinary avocations; his work, if done at all, is performed in a most erratic and unsatisfactory way and much neglected.