Temperance

The Voice of Science in Regard to Alcohol.

(Concluded.)

Then again, the red corpuscles of the blood itself have the important mission to fulfil of combining with oxygen in the lungs and of carrying this oxygen to remote parts of the body where it is given off as required, coming back to the lungs with dark purplish hue indicative of diminished oxygen. Alcohol acts in a very marked way on these corpuscles, 'even so minute a quantity as one part of alcohol in five hundred of blood,' says Sir Benjamin Richardson, in regard to his experiments, 'proved an obstacle to the perfect reception of oxygen by the blood.' It follows, therefore, that in spite of pure air and plenty of it, the blood of a person taking alcohol into the system cannot get the proper amount of oxygen, and consequently cannot properly perform its mission. This is emphatically supported by Dr. J. J. Ridge in his 'Addresses on the Physiological Action of Alcohol,' and by Dr. Alfred Carpenter, former President of the Council of the British Medical Association in his 'Alcoholic Drinks,' and many other physicians.

In support of the injurious effect of alcohol on the heart directly, much valuable testimony might be adduced, but space forbids quoting more than one. Dr. T. D. Strothers, of Hartford, Conn., in the 'Transactions of Second Annual Meeting of A.M.T.A., says:—

'On general principles, and clinically, the increased activity and subsequent diminution of the heart's action bring no medicinal aid or strength to combat disease. This is simply a reckless waste of force for which there is no compensation. Without any question or doubt, the increased heart's action, extending over a long period, is dangerous. The medicinal damage done by alcohol does not fall exclusively upon the heart, although this organ may show it more permanently than others.'

It would be impossible to go into greater detail here in regard to the effects of alcohol on the other organs of the body. Suffice it to say that there is abundant testimony of the first quality to be had, that lays very serious results to the charge of alcohol, even moderately used. The recent speech of Sir Wm. Broadbent at a meeting of the National Association for the Prevention of Consumption, held at the Mansion House, London, is very striking, as bearing upon the connection between the alcohol habit and consumption, that disease upon which is being now focussed so much attention, both professional and non-professional. Sir William declared that deficient food, overwork, stuffy rooms and alcoholic excesses were the principal factors in the progress of the disease, and then, in impressive tones, he emphasized his belief that the greatest and most potent of these was alcoholic excess.'

The extent to which alcohol is still used by the medical profession is, of course, a great stumbling block to many people. But it is an indisputable fact that more and more are reputable physicians openly denouncing such use as a great mistake, and that many who make no comment on the changing attitude of the profession, yet consciously or unconsciously, are turning to alcohol far more seldom than they once did.

Sir Frederic Treves, King Edward's surgeon, in a recent temperance address, declared that alcohol is distinctly a poison, and that its use ought to be limited as strictly as any other poison. He denied that it is an appetizer, and said that even a small quantity hinders digestion. Its stimulating effect only endures for a moment, and when this is passed the capacity for work falls enormously. Its use is inconsistent with work requiring quick, keen and alert judgment. Reviewing medical practice for a quarter of a century, he declared that the use of alcohol in hospitals and by physicians generally had greatly diminished, and continues to diminish.

Comparative death rates in groups of cases treated with alcohol and those treated without give abundant support to the opinion that alcohol is not the sheet-anchor it was once considered.

There are to-day not a few hospitals where cases of all kinds are treated most successfully without resort to alcohol at all, or, at least, with no more than the same cautious, restricted use that is given to arsenic, strychnine, and other such powerful poisons.

The London Temperance Hospital is one of the best known of these. Started in 1873 with the avowed object of testing thoroughly the non-alcoholic treatment of the sick, prejudiced donors and directors making it impracticable to carry on such experiments in existing hospitals, its wonderful record has gone far towards changing hospital practice along this line. During all the years of its existence, its average death rate has been only about 6 percent from the beginning, which is about 4.5 percent lower than that of any other general hospital in London. It has had connected with it such men of eminence as Dr. James Edmunds, Dr. J. J. Ridge and Sir B. W. Richardson.

The Frances E. Willard National Temperance Hospital in Chicago, started in 1886, has had about 5 percent of deaths since its opening. The Red Cross Hospital, New York, is another non-alcoholic hospital, or practically so, and its physicians, resident and consulting, men of note in their profession like Dr. A. Monae Lesser, Dr. Geo. F. Shrady, Dr. Gottlieb Steger, while not all personal abstainers have declared themselves in favor of treatment without alcohol.

In regard to special diseases as compared with general practice, some very instructive figures are at hand. The medical superintendent of West Haven Infectious Diseases Hospital wrote in 1894 in the 'Medical Pioneer' that before 1885 he had treated 2,148 cases of smallpox, 'in the usual routine method, with the use of alcohol when the heart's action seemed to indicate it,' resulting in a mortality of 17 percent. Since 1885 he had treated 700 additional cases under similar circumstances without alcohol, with a mortality of 11 percent.

Dr. J. J. Ridge reported about the same time 200 scarlet fever cases treated in Enfield Isolation Hospital without alcohol, and with 2.5 percent mortality, while other hospitals, under the Metropolitan Asylums Board, the mortality with ordinary alcoholic treatment was 6.3 percent.

Dr. Gardner, of Glasgow, some thirty years ago, quoted 12 percent as the mortality of fever patients in that city treated by him without alcohol, as against 25 percent of similar cases treated by others with alcohol.

In 1890 Dr. Nathan S. Davis, of Chicago, for years a leading figure in the American Medical Associations, gave comparative statistics between the deathrate in Mercy Hospital, Chicago, for a term of years during which no alcohol was used in the treatment, in two diseases, typhoid and pneumonia. In Mercy Hospital the mortality in typhoid was only 5 percent; in Cook County Hospital the mortality in typhoid for 1889 was 17 percent; in Cincinnati Hospital for 1886 it was 16 percent; in Garfield Memorial Hospital for 1889 it was 22 percent.

In pneumonia, the Mercy Hospital showed a deathrate of only 12 percent, while in the Pennsylvania Hospital for 1884-1886 it was 34 percent; the Massachusetts General Hospital between 1822-1889, comprising 1,000 cases, 25 percent; the Cincinnati Hospital shewed in 1886 38 percent; the Cook County Hospital for 1889 shewed 36 percent.

It would be beyond our purpose to further enlarge on this mass of testimony. The literature on the subject is now quite extensive, and those who wish to inform themselves in detail on the various phases of the question, can find material of a very forcible kind with very little trouble. It is always well to keep in mind that a few facts like these, thoroughly known and carefully quoted, is worth to an alert and enquiring mind any amount of general information and unsupported statements.

The Gold Competition Award.

The competition giving $200.00 in gold to the one remitting the largest number of subscriptions closed May 31st.

Mr. D. C. McDonald heads the list having remitted $179.40 (net) nearly twice as much as the next largest competitor.

Mr. McDonald in addition secured one of the weekly prizes of ten dollars awarded in December last and a liberal commission on each subscription remitted.

The payment of the two hundred dollars in gold will be held over for two weeks in case of the miscarriage of the remittance from any other competitors during the competition, and also to give the winner time to consider whether he will select one of the prizes or the cash itself.

Fitting Names.

'Many a true word is spoken in jest.' Standing the other day near the entrance of the saloon at a large hotel at the seaside, we saw several young men pass in. As they stood at the bar, one said to another, with a smile: 'Nominate your poison!' He had said a terribly true thing in joke. Yes, name your poison—just the word! And they swallowed the poison and went their way. Soon another party went in. Said the leader to his companion, as they learned against the slab, 'What is your family trouble?'—meaning 'What will you drink?' 'Family trouble!'—rightly named; for what has made such domestic misery as liquor? And we walked away, feeling that we had learned two new and strikingly appropriate names for liquor: 'poison' and 'family trouble.'—Selected.

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