drawal to give the morphia at night, and to use the substitute during the day. Tinctures of other drugs should not be used at this time because of the danger of alcoholic narcotism. Certain persons are very susceptible to the paralyzing action of alcohol at this period.

Some of the remarkable cases reported of the painless withdrawal of morphia have been effected by simply substituting some tinctures for the morphia. In the same manner, the withdrawal of the morphia and the substitution of codeia and other alkaloids or laudanum or other preparations of opium, is simply the transferring from one addiction to another. Many of the specific preparations contain some form of opium, the substitution of which for morphia is simply a change in the form of the drug. To abandon morphia, and to depend upon alcohol in its various forms is not curative in any sense. The rule should be that no alcohol should be used in the withdrawal stage.

The acuteness of the insomnia, depression and neuralgia which follow the rapid removel of morphia, should be treated by baths, hot and cold water applications, with massage. When the morphia is entirely withdrawn, many drugs may be used to lessen the acuteness of the symptoms, prominent among which are valerian, asafatida, hyoscyamin, cannabis indica, and the coal-tar derivatives. As a rule they should be given in large doses, frequently repeated until several doses are taken; then abandoned. No one drug should be given more than two or three days at a time unless its effects are so marked as to demand its continuance. The vegetable narcotics seem to be valuable in many cases, but do not all act alike. In some cases they are very powerful; in others they are of no value. The phosphate of soda is a valuable remedy, and can be used continuously during this period.

The rapid withdrawal stage should not last more than six or ten days. In some instances a much shorter time is practicable. The reduction of the morphia to four or five grains the first day and the third day after its still further reduction to three grains taken at night, will be found most practicable. Then, if possible, substitute deodorized tincture of opium, in proportionate quantities, the fourth night. The sixth night this can be reduced still further, and then the morphia can be abandoned on the eighth or ninth day. After this time narcotics which have been found effective are to be given at night. These can be abandoned after one or two weeks without special suffering. Strychnia, quinine, and other active tonics are very valuable at this period. Faradism, massage, and confinement in bed, all act with good effect.

This method of rapid withdrawal will tax the therapeutic resources and skill of the physician to the utmost. Each case will vary widely in both physical and psychical symptoms. In one