

habit"—that is a mistake. While it is of great value in relieving the varied symptoms of lessened nerve tone, it is *not a specific*. Patients, long used to opium cannot abandon it and trust to coca alone, to carry them over the crisis. This, save in mild cases, it will not do, but, conjoined with other measures, it is strong for good. Of a reliable fluid extract, we give it sometimes before, and always after the acute restlessness, in 4 to 8 drachm doses, every two hours, or less often as required, and continue in these full doses, at increasing intervals for several days. As need for it lessens we decrease the dose to one or two drachms, and this amount, *ter die*, combined with other tonics may sometimes be continued with advantage for weeks. As a rule, however, its use is quite abandoned within a fortnight. Its effect, while noted in from three to twenty minutes, seldom persists more than two or three hours, so that, when the demand for it is active, it is best given at this interval. To remove the mental and physical depression, the minor neuralgiæ, and the occasionally occurring desire for stimulants observed in these cases, nothing equals it, being in this regard more nearly a specific than any drug at command: and capsicum, in doses of one-half to one drachm of the tincture, with the coca often adds to its value. For details of this drug and its uses, see "a Case of Coca Addiction," reprint of which can be had of the writer.

Another agent of much service is general faradization, 20 min. seances daily, the feet on a plate to which the negative pole is attached, while the other electrode, encased in a large sponge well wet with warm water, is applied to the entire surface, with a current strong enough to be thoroughly felt, but not painful. This imparts a grateful sense of exhilarating comfort, and is the most effective tonic at command. Thus applied or with anode to cervical spine it may be used daily so long as indicated, taking care not to overdo, for a current too strong or prolonged works mischief, overstimulating and exhausting to the extent, it may be, of several days discomfort, which nothing but time will remove. Very exceptionally, faradism disagrees and has to be abandoned.

Alternating with or following we may use the galvanic current. This is a general tonic of special value in these cases. Our method is, positive pole to nape of neck, and negative to epigastrium for five minutes; then the former behind the angle of

each jaw for one or two minutes, making the entire seance of 7 to 9 minutes.

Next to the electric tonic ranks the cold shower bath. It certainly is a great invigorator, and many a patient who dreads it at first, soon comes to appreciate it most highly. If agreeing it should always be taken. With some it acts as a hypnotic. We recall one instance, in particular, of a medical gentleman, who, still somewhat insomniac, after sleeping two or three hours and awaking with no prospect of further sleep, would take a shower, followed by vigorous rubbing, and soon fall into a refreshing slumber lasting until morning.

Internal tonics of course have a place in the roborant regime, varied as the case may demand. In some cases we employ them from the outset, and the use of *tinct. ferr. murr.* in large doses, 15 to 20 min. thrice daily, has seemed in virtue of its tonic-astringent effect, to serve a doubly good purpose, in lessening the tendency to alvine relaxation. After the opiate disuse, an excellent combination *fld. ext. coca* with *syr. hypophosphites iron*, strychnine and quinine, two drachms of each after meals. Another, Fowler's solution or *tinct. nux vomica* with dilute phosphoric acid or acid phosphate. If anemic, ferric tincture or Blanchard's pills. *Digitalis* is often useful in many cases, cod-oil is of value, and may be continued for months. We make choice, as required, of emulsion with pepsin and quinine, emulsion with phosphates or plain oil.

Some degree of anorexia is always present, yet it may not prevent the regular meal, and need never occasion anxiety, for probably it will soon give place to a well-marked reverse condition, which may be encouraged to fullest feeding short of digestive disaster. The appetite often becomes enormous, and sometimes, restraint and digestive aid are demanded. If it be slow in returning, rousing measures will suggest themselves. In such cases it has seemed a good plan to stir up the alvine system, once or twice a week for a time, with a mild cathartic at bedtime, or a full morning dose of *hunyadi*.

One result of the opiate quitting and the régime noted is often a greatly improved nutrition, as shown by a notable increase in weight. One physician, not long since dismissed, gained a pound a day, and another convalescent has lately been adding to his *avoirdupois* at the rate of twelve pounds a fortnight.