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OBSERVATIONS ON A CASE OF "POISONING BY  
TINCTURE OF OPIUM."

To the Editor of the British American Journal.

SIR,—The third number of your Journal contains a Case of Poisoning by the Tincture of Opium, by C. Sewell, M.D." With your permission I will make a few remarks on it.

There are three questions which may be asked:—1st, Is recovery after taking ten drachms of laudanum an extraordinary occurrence? 2nd, What degree of tolerance of opium was in reality shewn by Dr. Sewell's patient? 3rd, Was the treatment pursued such as is recommended by the best authorities?

With regard to large doses of opium, I believe that when remedial treatment has been timely applied, recovery has taken place in a majority of cases in which ten drachms of laudanum have been taken by adults. Two, three, and even four ounces of laudanum have been swallowed, without fatal effects, by persons not habituated to its use. Dr. Christison relates a successful case, in which eight ounces of crude opium were taken. Mr. Taschereau, M.P.P. took, by mistake, when in Kingston during the last parliament held here, nine and a half grains of the acetate of morphia, (equal to 12 times as much as Dr. Sewell's patient swallowed,) and recovered, although it was some time before the mistake was discovered, and remedial treatment had recourse to. To my mind, therefore, there is nothing extraordinary in recovery from ten drachms of laudanum.

With reference to the tolerance of opium displayed by Dr. Sewell's patient, let us judge by what the Dr. himself says:—"I was hastily summoned," says he, "to S. J., ætat 40, a cabinet-maker, who had inadvertently swallowed laudanum for tincture of rhu-

He had taken it about five hours before my arrival. When seen by me he was in bed awake, and perfectly conscious. The pupils were contracted to the size of a pin's point, and immovable; the temporal arteries pulsated with great violence; speech was uttered with difficulty; skin dry; pulse 100, and jerking." Being "in bed awake, and quite conscious, combined with some of the other symptoms is, I must admit, somewhat anomalous, as in general patients require to be roused to show their consciousness. Notwith-

standing this anomaly, (which is not unprecedented Mr. Semple's case, for instance, reported in 1841), there are a sufficient number of symptoms enumerated by Dr. Sewell, to prove that his patient was labouring strongly under the influence of the narcotic when first seen by him. As Dr. Sewell has not informed us how long a time the man had been under its influence before seen by him, we are in a great measure left in the dark as to the degree of tolerance exhibited by his patient. This perhaps unavoidable omission in the history of the case is much to be regretted, as we are thereby rendered unable to judge correctly of that part of the case which might otherwise have been interesting, namely, the protraction of the commencement of the symptoms beyond the usual time, probably half-an-hour or an hour from the time of swallowing the opium.

As proof of the tolerance of the opium, Dr. Sewell advances the fact, that "a large portion of the laudanum swallowed was thrown up, as easily ascertained, from the circumstance of his having taken only a little tea during the day." Reasoning on false premises, and jumping to rash conclusions should be avoided where medical facts are to be ascertained. Experience has shewn that persons may vomit what may appear the entire quantity of the laudanum taken, and yet have suffered from its toxicological effects. That a patient may take an opium pill on going to bed at night, and vomit it next morning, after its narcotic effects have been produced, is a fact resting on observations made as far back even as the time of Van Swieten. And the remark by Tortosa, that opium may act mortally with a very slight deficiency of weight, although questioned by high authority, has never been disproved. I maintain, therefore, that the circumstance of the "matter ejected being coloured with laudanum," is no proof that the laudanum had not acted.

Keeping in view, then, the varieties of idiosyncrasy which exist, and the circumstance that Dr. Sewell's patient had taken the laudanum instead of tincture of rhubarb, for the relief of a "peculiarly severe" colic; reflecting on the possibility of deception, with reference to the quantity and quality of the contents of the phial; and taking into account that no description is given of the state of the patient between the time he swallowed