

Despond," being denied for themselves and their similarly unfortunate patients or friends, the very first and most important aid to recovery, viz., hope and confidence in the outcome of correct treatment and its stability. It appears to me that in the justly celebrated work of Dr. Osler, such statements as, "Persons addicted to morphia are inveterate liars and no reliance whatever can be placed upon their statements," are, to say the least, unnecessarily strong. As before stated, the very first requisite in the successful treatment of such cases is securing the confidence of the patient.

Self defence is one of the strongest of nature's laws and the condition of the unfortunate habitue of this kind whose confidence in the good faith and kindness of his doctor is not established, who surrenders all his drug at once would be much like a traveller who hands over his weapons of defence and trusts to the merits and goodness of the bandit.

Further, the pathogenesis of morphinism or other forms of necromania, does not generally or necessarily include a moral depravity. Dr. Osler himself states the luxury of morphia-taking is rare with us, and with this element excluded why should we consider the lowered moral tone a causative element in this disease any more than in typhoid fever. Indeed, there is to my mind a very striking similarity in the origin of what we now know as acute infectious diseases and the origin of the forms of disease under discussion.

We know that the acute infections require a favorable soil and the invading organism. Can it be denied that in neurasthenics, in those other nerve bankrupts who fall victims to these afflictions, that the favorable soil exists; nay, has possibly been as carefully prepared by years of previous overwork and worry, care and care, as a laboratory culture tube, and the first dose is not infrequently the infecting organism, so to speak.

I have known a case in a man of forty, whose youth had been exceptionally clean, who had never even tasted strong drink until in his thirty-fifth year, who had suffered for years from attacks of severe migraine without even touching an opiate, but to use his own phrase, "after a trying time of great money loss, and the extraordinary care while suffering from a severe physical injury," found himself absolutely owned by morphia after an initial dose of $\frac{1}{8}$ of a grain. To a man whose life for years has been pure and clean, whose relations, commercial, social, and family, have been characterized by the highest integrity and unselfishness, the prospect of being received by his physician as an inveterate liar, etc., is certainly not one calculated to bring out of the unfortunate the best that is in him. To obtain first the confidence, next the good-will and last but most important of all the self-aid of the patient toward his own recovery, and with these essentials to successful treatment in view, can we not well afford to draw the veil of a kindly charity over such moral obliquities as an unbalanced mind, a defective judgment, and the dreadful prospect of such severe sufferings as Dr. Osler so graphically describes in this article, appears to this unfortunate absolutely essential to the preservation of life itself.

And it is right here, where the pathology of the disease points to the main therapeutics. From an article read by me, before the section of