

Ontario Medical Journal.

SENT TO EVERY MEMBER OF THE PROFESSION IN ONTARIO, BRITISH COLUMBIA,
AND NORTH-WEST TERRITORY.

R. B. ORR, EDITOR. - J. A. CREASOR, ASSOCIATE EDITOR

TERRITORIAL EDITORS:

No. 1.—DR. J. H. DUNCAN, Chatham.
" 2.—DR. M. F. LUCAS, Ingersoll.

No. 3.—DR. W. T. WEEKS, London.
" 4.—DR. JOHN CAMPBELL, Seaforth.

No. 5.—DR. GEO. ACHESON, Galt.
" 9.—DR. A. R. HARVIE, Orillia.

All Communications should be addressed to the Editor, 147 Cowan Avenue, Toronto.

VOL. III.]

TORONTO, FEBRUARY, 1895.

[No. 7.

Contributions of various descriptions are invited. We shall be glad to receive from our friends everywhere current medical news of general interest. Secretaries of County or Territorial Medical Associations will oblige by forwarding reports of the proceedings of their Associations.

Physicians who do not receive their Journal regularly, or who at any time change their address, will please notify the editor to that effect.

Editorials.

ANODYNES IN MEDICINES.

In the February number of the *American Gynecological and Obstetrical Journal*, Dr. Joseph Price, of Philadelphia, has an article on the use of "Opium in Gynecology," in which he emphasizes the danger of the reckless and indiscriminate use of anodynes and narcotics that is all too common. It is the convenient refuge of the inaccurate in observation and the unskilful in diagnosis. Not in gynecology merely, but in all cases where pain is the most marked symptom, and especially in abdominal troubles, the practice of using some form of opium as a "ready-relief," without a careful examination of the true cause of pain, is prevalent. The pain is damped down, while the condition causing it remains; indeed, is often rather fixed and retained, when otherwise nature unaided would have brought permanent relief. For example, we have known of cases of local peritonitis where the patient has been kept for days with the bowels locked up, and the poor victim in a state of semistupor, only to again awake to pain as the effects of the drug disappeared. A notable physician once

said that he always kept a hypodermic syringe, but he always kept it at home. How often is morphine given and the dose repeated again and again without any knowledge of the condition of the kidneys by which it is principally eliminated? "There is scarcely a remedy," says Dr. Price, "used so recklessly and ignorantly, and none doing more general mischief." One form of the mischief is the number of habitués of the drug that results from its indiscriminate use. This is especially true where nervous disturbances are present. Dover's Powders become "dozing" powders, and adepts in the use of the hypodermic become legion in number. Where sufficient skill is not acquired, the mercenary spirit of the physician is tempted, and one or more visits a day are made by them for the "relief of pain and suffering," where he should rather be employed in determining and removing the cause. But its use is often bad practice also, and in common with the experience of many in abdominal surgery, the writer says: "The management of all surgical cases is easy and the convalescence more satisfactory and speedy when opium preparations are not used. I am satisfied that the use of opium in some form, either by injection, suppository or solution, has been largely