

ways. The imbecilic look gave place to one of increasing intelligence; the power to converse rapidly returned, and within six weeks all mental aberration had vanished. Meantime, the physical condition gradually improved, though not so speedily as the mental. The appetite was slow in returning, but her muscular strength, especially in the lower limbs, the loss of which for two and a half years, had prevented exercise, increased steadily, so that at the end of eight weeks she was able to take walks, drives, go shopping, attend church, etc., in fact, more out of door exercise than she had enjoyed for years. Her improvement in every way was notable and persisted with little interruption until March 4—nearly eleven weeks from the date of her coming—when she left our care. Tidings, direct and indirect, of late received, report her doing well.

This case presents several points worthy of detail. Its origin affords added proof in support of views expressed in "The Genesis of Opium Addiction," *Detroit Lancet*, Jan. 1884. But it must also be said that, in our judgment, the course of the medical gentlemen in supplying this patient with a hypodermic syringe and solution of morphia, with instructions for self-taking, unless absolutely unavoidable, was—to put it mildly—exceedingly indiscreet. Such action and advice are almost certain to end in addiction; the effect, even under professional attention, is, too often, disastrous, and the chance of escaping, when left to caprice of the patient, is small indeed. We believe that patients should *never* be allowed to give themselves injections, if at all possible to avoid it.

When her initial illness ended, this patient was an opium habitué. A much more limited time than that will often suffice. We have repeatedly known as many weeks to beget addiction, and the most marked examples of this were among those in whom it might be supposed the least likely to occur—physicians. Increased experience serves only to strengthen the writer's opinion, as expressed in a paper on "Opium Addiction among Medical Men," that "any physician using morphia, daily or oftener—especially hypodermically—for four weeks incurs great risk of becoming an habitué; indeed we think a still shorter usage might, with some, prove a snare." This case adds another to the instances in which addiction to one narcotic tends to excess in another. While these are infrequent

as compared with those in which one is used, they are sometimes quite notable. We recall that of a Canadian gentleman who some time ago consulted us, who had taken for several years 10 to 20 grains of morphia subcutaneously, 60 to 90 grains of chloral, and 1 to 2 pints of whiskey, daily. Physical examination disclosed organic heart lesion, and care of his case was declined. As a rule, the ruinous results exceed those of a single addiction, while the prospect of permanent cure is always less hopeful. In our patient the pernicious effect on the brain was notable—more so than we have ever seen. While deviations from normal cerebral action are sometimes observed in cases of confirmed opium taking, it is rare that they are so pronounced as in this instance. Doubtless they were aggravated by the alcohol, yet morphia was the main factor. And it is of interest to note that the attempt at renouncing the narcotics intensified the mental disorder. Obersteiner—*Brain*, Oct., '82—demurring to Levinstein's statement that the psychical disturbances caused by morphia cease within a few hours, affirms that "mental diseases arising in the course of morphinism are of the most intractable kind when once fully developed. Not only do they not disappear on depriving the patient of morphia, but they then usually get worse."

This case tends to prove the latter part of his statement. As one medical gentleman informed us—"The condition in which you saw her was the result of the addictions aggravated by the attempt to quit them." But the mental disorder was *not* of the "most intractable kind," for improvement was prompt and progressive, much more so than anticipated, as it was thought several months rather than weeks would be needed to repair the damaged brain.

Regarding alienation caused by opium, Obersteiner thinks it frequent, asserting that "a man who consumes large quantities of morphia during a number of years will display many nervous symptoms, and that the continued intoxication attacks the psychical much more constantly than the somatic life." He further states: "The degree of mental aberration arising from protracted use of the drug is very variable. There may, indeed, be individuals who retain their power of mind in spite of it, but the number is much greater of those who betray a marked alteration of their intellectual and