

of regularity. The danger of another addiction is so great that it is unwise to use any one of the hypnotics except for a brief time. Tobacco should be stopped early in the withdrawal treatment. It always seriously complicates the progress of the case. After the withdrawal symptoms are passed its resumption is very commonly followed by relapse. Beef tea and beef extracts are unsatisfactory, and in most cases are nerve stimulants of decided inferiority, and seriously complicate the progress of the case. Fruit juices and grain products, with milk, are the best nutrients which can be given. Often an abdominal bandage, wet either in cold or hot water, has soothing effect on the sympathetic nerves of the abdomen, checking diarrhea and gastric trouble. Cold water applications to the spine in the form of ice-bags are very serviceable.

The methods of treatment which have become popular both in this country and abroad are one of slow, gradual withdrawal of the drug; the other, that of rapid abandonment within three or four days. The method of treatment which has been found most practical by the author is that of gradual reduction, going from stage to stage—now slow, then rapid—being governed by the condition of the case, the history and present conditions. It may be divided into three stages:

First, the preparatory stage, in which an effort is made to ascertain the smallest amount of morphia which can be taken without discomfort to the patient. This sometimes requires an extended observation of a week or more. Many patients use far more morphia than they imagine, being careless and inaccurate as to the time and quantity taken. Others intentionally deceive themselves and others, boasting that they only take a certain amount, when in reality this is only a minimum. Having secured the proper surroundings and control of the case, the patient's statement of the amount he is taking is accepted, and he is given a like amount for the purpose of testing his accuracy. If this is found to produce marked narcosis, it is evident that it is more than is essential for comfort. If he is restless and uneasy, it is less than his usual dose.

These conditions will vary largely the first two or three days. The fact of coming under treatment in strange surroundings and under new conditions produces a psychical element which will derange the nervous system, requiring more than the accustomed dose of morphia at first. After the patient has acquired a degree of confidence, and become used to the surroundings, an approximate average state can be attained. If it is found that he is comfortable on eight or ten grains a day, this is assumed to be the average quantity necessary to produce reasonable sedation.

Having ascertained the character of the case, the next question