

us to believe, instead of the pulse becoming stronger and more regular, and the patient brighter, and evidently better just at the time when the alcohol was having its full effects, the heart's action should have become weaker, the depression more profound, and in these desperate cases death should have been the result.

Dr. Arnott says my statement that "I find a number of conscientious and able medical men who claim that alcohol is not of the slightest use in the cases in which we have been in the habit of prescribing it: that it is not only not a stimulant but a powerful sedative and depressant," is self-contradictory. That in admitting it to be a powerful sedative, I show it to be of use as a narcotic and sedative. The doctor again misses my meaning. I do not say it is held to be of no use, but that they claimed it to be of no use in the cases in which we have been in the habit of prescribing it, viz., in such cases as those which I brought forward, and in which I observe our old friend, my honoured predecessor, Dr. Osler, prescribes it.

The doctor talks about the assured way in which I speak of snatching patients from the grave by alcohol, and says that it would lead young practitioners to think you could save most patients if you only gave brandy enough. I only gave these cases to point my argument against Dr. Arnott's assumptions. I did not advise the universal or frequent use of alcohol. In fact my paper had nothing to do with its use. I do not use it very frequently in my practice. I have never expected it to have, as a stimulant, more than a temporary effect, but in cases of sudden failure of the powers of life, where I feel that if I can keep my patient up for a short time I can tide him over his trouble, or that if the vital functions are pushed to increased action they may give renewed life, I have never hesitated to use it.

If I had in my past years administered it as indiscriminately as Dr. Arnott seems

to have done, so that most of my deceased patients went intoxicated to the grave, I should probably have concluded by this time, like the doctor, that I had better stop its use entirely, as I am quite willing to acknowledge that no alcohol is a great deal better than too much.

THOS. T. S. HARRISON.

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EDITOR DOMINION MEDICAL MONTHLY:

SIR,—It would appear to me that if your correspondents would enquire what function, if any, is fulfilled by alcohol in the animal economy, they would be in a better position to judge of its usefulness. The researches of Bung, Anstie, Dupre, and others prove that alcohol, in moderate quantity, from two to four ounces per diem, cannot be detected in the secretions, from which fact it may fairly be argued that it is either consumed in some of the normal processes, or appropriated as the food of some of the tissues.

Since Bernard discovered the glycogenic function of the liver, many observers have followed in his footsteps, and as the result of their labours we have become familiar with certain facts relative thereto. It appears that, in addition to the glucose formed from the starchy elements of the food by the digestive process, the liver, even in Carnivora, secretes a considerable quantity of sugar from the albuminoid and proteinoid elements, which having done their duty in the system, appear to be utilized in this way, for the purpose of supplying fuel to heat the structure. Liebig estimates the sugar from these two sources at some thirty-five ounces a day, and in the normal condition it is found in the liver, hepatic vein, ascending cava, and right auricle, but scarcely a trace can be found in the lung, or the systemic circulation beyond. What becomes of it? The consensus of opinion seems to be that it is utilized as the source of body heat, but certainly not as sugar. It must undergo