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TRUTH AND FACT,

BEING A PAPER READ BEFORE THE

AMERICAN ASSOCIATION FOR THE CURE OF INEBRIATES,

At their Ninth Annual Meeting, held at Boston,
Mass., September, 1878,

BY THE

REV. J. WILLETT,

Superintendent of the Inebriates' Home, Fort Hamilton, Kings County, N. Y.



Fort Hamilton:

PRINTED AT THE INEBRIATES' HOME FOR KINGS COUNTY.

1879.

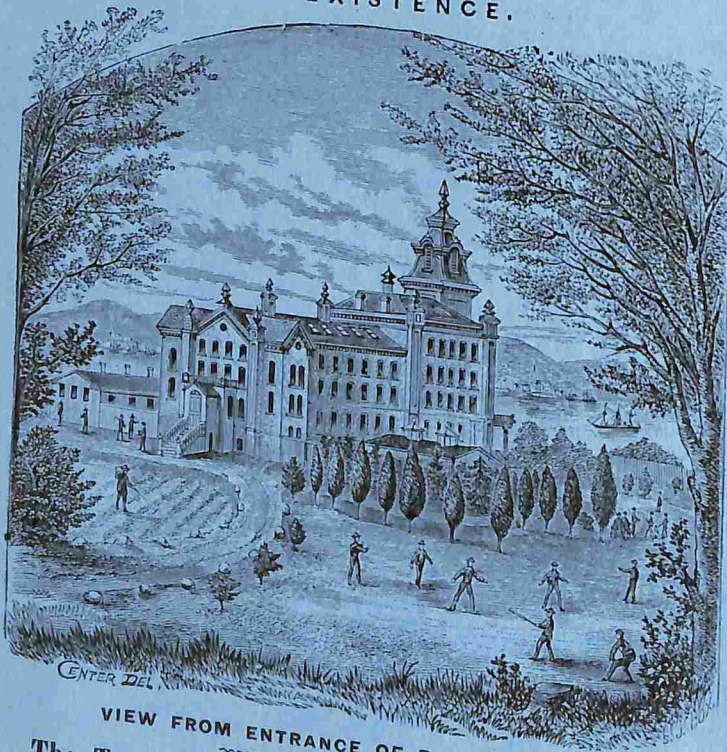
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THE INEBRIATES' HOME, FORT HAMILTON, N. Y.

This is the Best Constructed and the Best Furnished Institution
for the Care and

Treatment of Inebriety and the Opium Habit
IN EXISTENCE.



VIEW FROM ENTRANCE OF PARK GROUNDS.

The Treatment of the Opium Habit a Specialty.

President and Consulting Physician—THEODORE L. MASON, M. D., President of
the Collegiate Department of the Long Island College Hospital. Attendant Phy-
sician—L. D. MASON, M. D. Superintendent and Secretary—REV. J. WILLETT.

THE design of the Institution is to treat patients, men and women, who
have contracted the habit of inebriety, from whatever cause, whether from
the use of alcoholic, vinous or other liquors, or opium, or other narcotic or
intoxicating or stupefying substances, with a view to cure and reformation.
Persons suffering from the infirmities of age, or chronic affections, or other
diseases than those immediately produced by inebriety, are not received
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TRUTH AND FACT.

Read by Rev. J. WILLETT, Superintendent of the Fort Hamilton, N. Y. Inebriates' Home, before the American Association for the Cure of Inebriates, at their Ninth Annual Meeting, held at Boston, Mass., September 10th and 11th, 1878.

THE words "truth" and "fact" are not synonymous terms, although they are sometimes carelessly interchanged both in speaking and writing. There are a thousand things which we believe to be true, but nevertheless they have as yet no foundation in fact.

The inventors of the steam engine believed in the power of that vapory element to propel machinery long before they developed the fact. When Galvano was making his crude experiments with his primitive battery, how little he dreamed that it possessed a power of utterance almost divine, and that "in a moment, in the twinkling of an eye," it could transmit the germs of thought and the news of the world from sea to sea and from land to land.

The ten thousand times ten thousand and the myriads of thousands of believers in the divine authority of the Bible have from age to age recognized the scriptural fact "that the worlds were framed by the Word of God, so that things which are seen were not made of things which do appear." They also have ever believed with the same unwavering faith in the yet unaccomplished Bible truth that "the heavens and the earth, which are now, by the same word are kept in store, reserved unto fire against the day of judgment and perdition of ungodly men."

Some years ago a cloud "no bigger than a man's hand" was seen to arise on the social horizon and rest in the heavens above this Athens of the new world in which we are assembled. It did not attract much attention from the gifted savans or theoretic philosophers of this city of culture and



home of modern learning; but nevertheless, like the Star of Bethlehem, it was carefully scanned by wisemen and shepherds of the people from afar, and they came to inquire concerning the new truth which has now become a well developed fact. This little cloud heralded the establishment of the first Inebriate Asylum on this continent and in the world.

Truths do not always originate in seats of learning, neither are great men of necessity born in kings' palaces. It does not detract from the majesty of the Man of Nazareth that He was brought up at the carpenter's bench, nor from the nobility of Paul that he earned his own living by working at his trade as a tent-maker, nor from the blessed memory of John Bunyan that he was a journeyman tinsmith; nor yet from the merits of his Pilgrim's Progress that the green mould of a damp cell in Bedford jail grew over his locks and covered his eyelids and the feathers of his pen when writing that immortal book. The writer of this paper lived in the days before total abstinence societies had an existence, and was a member of the Antecedent Temperance Society of England, with its pledge to abstain from spirituous liquors and to drink wine, ale and beer only in moderation. It was the clergy of those days who in their wisdom framed that antiquated pledge, but, like unto the old Mosaic institute, it failed by reason of the weakness of the flesh. What the clergy failed to accomplish the habitual drunkards wrought out for themselves. An old stuttering, stammering inebriate, in the town of Preston, England, struck the key-note of the drunkards' salvation when, after the utter failure of the then temperance pledge to meet his case, he stood up in a meeting to say that "Mo-mo-moderation was bo-bo-botheration, and n-no-nothing s-s-short of te-te-to-to-talism w-will d-do f-f-for m-me;" and on that rock the total abstinence societies of the world have been built up.

Neither the lawyers nor the physicians nor yet the parsons of this city can claim the merit of originating this

Boston Inebriates' Home, the first the world ever saw. All the credit is due to reformed drunkards, or "Washingtonians." They had learned from sad experience that the drunkards' downward path was paved with good intentions, and that personal restraint as well as abstinence pledges were essential to their redemption.

All honor to Dr. Day, the first and the present Superintendent of this noble institution, for he has persistently, through evil and through good report, devoted his life to the demonstration of the fact that inebriety is a disease, curable just as other physical and mental diseases are curable; and he will reap the large reward due to those, and only those, who have saved many souls from death. Through this and kindred instrumentalities the truth which had been hidden from ages has been developed into a great fact—that what prison cells, pillories, whipping-posts and the stocks have failed to accomplish, can be secured through the instrumentality of humane institutions established for the care and treatment of the helpless inebriate. Similar institutions are constantly growing up in all parts of the civilized world; the power and the support of legislatures have been successfully invoked in America and Australia, and even in England, Parliament, just before the close of its last sessions, unanimously passed the second reading of a bill legalizing inebriate asylums and making provision for the detention of patients therein.

Since there is nothing which convinces like success itself, I have thought that I could not better serve the interests of these institutions than by presenting a few accomplished facts in the cure and reformation of inebriates in connection with the Fort Hamilton Inebriates' Home, which I have the honor to superintend.

I refer to cures which have been effected at the Fort Hamilton Home, not because other kindred institutions are one whit behind us in this respect, but because these cases have come under my own observation and I can therefore vouch for their accuracy.

In presenting these accomplished facts of cure and reformation, I propose to classify the cases under the several heads to which they belong; and here let me remark that there is considerable misapprehension in the public mind on this subject. When we speak of an inebriate, it is generally understood that the condition of all the persons so designated is one and the same; and the vague idea floats in the mind of the superficial observer that all habitual drunkards are in this respect precisely alike—that is, they are purely and simply habitual drunkards. A few years ago the same mistake prevailed with regard to lunatics. The outside world, and even the keepers of Bedlams, were content to know that their patients were mad, and the poor wretches were scourged and shackled accordingly.

And so it is to-day concerning the habitual drunkard; for, in the eye of our present laws and the impress of the public mind, the drunkard is as much associated with the jail or the penitentiary as the murderer is with the gallows.

The first class of inebriates to which I propose to call your attention I will designate as—*Drunkards void of the appetite for strong drink.*

Dwelling on this subject in a paper which I read at our annual meeting last year, I remarked as follows:

“A person may become a drunkard notwithstanding the fact that the palate revolts at the taste and the stomach rises in rebellion at the reception of intoxicating drinks. This is often the case with young men who have not the moral courage to say “No!” with the overworked thousands who are engaged either in mental or physical labor, and are compelled to continue their toil when the powers of mind or body cry out for repose; also with those who nerve themselves with stimulants for the purpose of engaging in daring acts of crime.”

I propose to illustrate this statement by reading a portion of a letter which I have recently received from a former patient of our Home, who is a representative of the overworked class “who are engaged in mental or physical labor, and are compelled to continue their toil when the powers of mind or body cry out for repose.”

NEW YORK, August 23d, 1878.

REV. DR. WILLETT—DEAR SIR:—My gratitude to the institution under your charge for the inestimable benefit I gained by being some five months one of its inmates, prompts me to write you in regard to the radical change effected in my case—in my entire physical and mental constitution.

I had for years been indulging in stimulating and intoxicating drinks, with the habit so increasing upon me that I became powerless and helpless to either arrest the habit or control myself until, at last made totally unfit to transact business, I had to yield to the solicitations of friends and, as a last resort, put myself under your charge. For two years before I came to your asylum I had been leading a life of perfect misery—a continual struggle in vain to overcome the habit, and with all the desire on my part to do so, and during that time I can not point out more than thirty days in succession that I was not more or less under the influence of intoxicating drinks. I ridiculed the idea of “drunkenness being a disease,” but must now honestly acknowledge that I firmly believe it IS a disease, and one of which the patient can be surely cured.

In my case I cannot claim the credit accorded to many who have been benefited by the institution of exercising their “restored will-power” in resisting temptations to again indulge in stimulants, because I never feel the least inclination or desire for them; therefore, not having the desire, I am absolutely free from all temptation, and cannot claim the credit of resisting any. And it is just in this entire freedom from any desire or want of stimulants that I feel and see “a mysterious cure.” And in meditating on this subject (and I often do,) the question arises, “How has this wonderful change I find in myself been brought about when, for two years, I struggled in vain with myself to bring about the same results?—how is it that I now enjoy life again as I did before I ever tasted liquor or knew anything of its effects?” The truth is, when I came to you my system was so under the influence of alcohol that I was suffering from a malady that seemed to have mastered my entire constitution, mind and body; and I believe the true secret of my restoration lies in the fact that I implicitly obeyed the rules of the institution while one of its inmates and, above all, that I remained long enough to have my entire constitution, nervous system, body and mind thoroughly freed from alcohol and all its hidden influence—until no vestige remained to take root in my nervous system again. And when I went forth from the “Home” I entered the world again, as it were, in the same physical and mental condition (for, get the nerves free and the mind will surely follow right) I enjoyed before I ever indulged in strong drinks.

* * * * *
Respectfully, Yours, etc.,

You will observe that the writer had contracted a habit which eventually he failed to control, and that for two years previous to his entering the Home he led a life which he designates as one “of perfect misery.” The fact was that from time to time he had to increase the quantity of liquor in order to keep up the necessary stimulation until his whole system was permeated with the poison; and, as a necessary consequence, loss of appetite for nourishing food ensued, followed by sleeplessness, and the end either for weal or for woe drew near.

Nevertheless, as I know, this gentleman did not drink because he relished the taste of the liquor itself, but solely on account of the stimulating effect which it produced on his diseased physical and mental organization. Hence, to quote his letter, when his "entire constitution, nervous system, body and mind (were) thoroughly freed from alcohol and all its hidden influence until not a vestige remained to take root again," in his case all the desire for liquor passed away or, as he very forcibly expresses it, "I never feel the least inclination or desire for stimulants; therefore, not having the desire, I am absolutely free from all temptation, and cannot claim the credit of resisting any." This gentleman is perfectly candid in his confession that he owes his cure and reformation to the care and treatment which he received in the Home.

He does not boast, as many others do, that his change was brought about by his own will-power, neither does he, in a spirit of self-righteousness, claim any merit for continuing to abstain.

How frequently do we meet with reformed inebriates who, as he expresses it, are "absolutely free from all temptation" (to drink), and yet they are continually proclaiming this abstinence as a great virtue. These boasting Pharisees are to be seen and heard also on temperance platforms, at church experience meetings, etc.

As a rule, they have no sympathy whatever for the debased drunkard who probably has either inherited or acquired a genuine appetite for liquor, which medication and restraint may control, but which no power on earth can eradicate. This class of self-righteous reformed drunkards go strutting about and, pointing to themselves, are everlastingly exclaiming "Look at me! Look at me!! Look at me!!! for I am a reformed drunkard; but I thank God that I am not like those miserable sots who are to be found signing the pledge one day, joining the church on the next, and on the third rolling like swine in the gutter."

It is this class of egotistical and self-righteous men who are the first to condemn Inebriate Asylums, and who frame so-called temperance laws to consign persistent inebriates to a felon's doom and a felon's cell.

The second class of inebriates to which I desire to call attention embraces all those who are afflicted with—*A diseased appetite for strong drink.*

This appetite is often acquired but more frequently inherited; and, as a rule, the craving goes in the direction of the national or family liquor, wine, beer or other beverage which the party has been accustomed to imbibe over a series of years, or from earliest childhood.

In England and Wales, especially in the rural districts, there are thousands of habitual drunkards to be found who are afflicted with an uncontrollable appetite for ale and beer, but have no craving for alcoholic liquors. The same remark applies to a large proportion of our German population. Lager beer and wine are their national beverages, while the Scotch and Irish are proverbial for whiskey drinking. There is a very prevalent mistake abroad that only the habitual drinkers of spirituous liquors are subject to the diseased appetite of which we are speaking, and that wine, ale, porter, cider, lager, etc., even when drunk to excess, are comparatively harmless. While it is true that the excessive drinkers of wine and malt liquors rarely wind up with an attack of delirium tremens, it is nevertheless a fact that the blood is so permeated with the poison, that comparatively trivial injuries as bruises and slight lacerations often result seriously and sometimes fatally.

The excessive drinkers of malt liquors are frequently brutish in their habits, and there is also a marked tendency to general paralysis, insanity and suicide. I must confess that I have less hope of the cure and reformation of the ale and beer-barrel sot than I have concerning the generality of the excessive drinkers of spirituous liquors.

The distinction between the drinker for stimulation and

the one who imbibes because he is controlled by an unquenchable appetite for and love of intoxicants is generally very well marked. The former often sips the intoxicating fluid or else swallows it with a rush—just after the peculiarity of different patients when taking nauseous medicine—frequently rinsing the mouth with water in order to remove the unpalatable taste, while the latter will roll it around his tongue, “as a sweet morsel,” for the purpose of securing all the luxury of the, to him, delicious taste before making the final swallow, and then pause to realize the grateful sensation as, by intuition, he allows it to pass slowly down his throat and take up its abode in the stomach.

I have frequently watched this process, and now recall to mind the case of a man who, having drank a large glass of whiskey in the manner described, placed his right hand on his throat and slowly drawing it down in the direction of the pit of his stomach exclaimed, “that’s good, and just enough to reach the spot;” and then looking me full in the face added, “I only wish that my throat had been two miles long, and that I could have tasted the whiskey all the way down.” That man possessed a burning and almost unquenchable appetite for liquor, somewhat akin to the condition of the rich man when he lifted up his eyes in torment and prayed that Lazarus might be commissioned to dip the tip of his finger in water in order to cool his burning tongue. This man sought and obtained admission to the Home and, after a long and severe struggle, was enabled to keep his passion for liquor in subjection but never to extinguish it.

Whether men accept or reject the scriptural dogma of a future place of torment reserved by a righteous God for the abominable of the earth, one thing is certain; and that is, that all inebriates, especially the drinkers from appetite, carry about them and within them a consuming furnace which is fed with a far more potent and intensely heating fuel than that given in reference to the bottomless pit. The

consuming appetite of the inebriate represents the worm that dieth not, while the unquenchable fuel of alcohol is continuously poured into the burning furnace. The longer I live, and the more of the intense sufferings of the inebriate classes I daily witness, the more am I moved with compassion for them and with a strong desire to aid them.

In illustration of the condition of inebriates from diseased appetite I offer the following case: About seven years ago a Scottish lady belonging to one of the first families of New York, highly educated, accomplished and intellectual, a member of a Christian church and possessed with a profound reverence for religion, was brought to the Home in a most humiliating and distressing condition. Several years before that time she had been a great sufferer from some peculiar affliction, and spirituous liquor had been freely administered by her physician in order to alleviate her distress. The result was that a latent, and in all probability, an inherited appetite for brandy was developed, and from time to time became more irresistible until, at length, all attempts to control her, either at her own home or with distant friends, proved futile. She would escape through windows during the night and dispose of almost every vestige of clothing for liquor. At length her apparel had to be removed every night after retiring to bed and the room securely fastened; but this was of no avail, for she succeeded in removing locks and all other guards against her escape, and would wander away in the depths of winter through storm and snow and bitter cold, in her night clothes, begging every passer by and knocking at the door of every tavern imploring liquor. For some weeks subsequent to her admission to the Home these distressingly earnest importunities continued, sometimes made on her bended knees, and often assigning reasons of the most delicate character which had no foundation in fact. At length a favorable change was noticeable. Though the same passion for liquor was in full force, there was evidently an inward struggle going on to resist the temptation. Her

appetite for nourishing food was daily improving, and this resulted in a renewal of physical strength and will-power until she finally obtained the complete mastery; and, although the appetite has not left her, she continues to this day master of the situation.

The great apostle of the Gentiles was probably all his life long subject to some terrible infirmity; and though its precise character is not revealed, it was of such potency that he was led to say, "I keep my body in subjection lest, having preached the Gospel to others, I myself should become a cast away." This experience precisely represents the unquenchable desire for alcohol which many reformed inebriates have to resist to the day of their death.

Having dwelt on the characteristics of the two distinct classes of inebriates, I shall now proceed to observe that inebriety, whether induced for stimulation or impelled by the cravings of a diseased appetite, is the germ or causation of many diseases both mental and physical, and one of the first in order is—*Moral debasement*.

The first generation of inebriates, as a rule, belong to a class who are social, generous and benevolent to a fault. They do not belong to the various tribes of jail-birds, neither do they emanate from the back slums of our cities. They come from what is termed "good society," and all their social relationships are of unquestioned respectability. All the professions are represented, not excepting judges and clergymen. Their names are thickly strewn on the registers of church membership,—some of them have been recognized as pillars of the House of God,—and they have been numbered among the excellent of the earth. But drunkenness is a debasing vice. It blunts the moral sensibilities, and every downward step leads to deeper degradation. Our almshouses, hospitals, prisons and lunatic asylums are thronged with men and women who are the lineal descendants of this very class. Indeed it often happens that the first generation of aristocratic drunkards end their days

in one or the other of these abodes of wretchedness, and make their graves in Potter's Field.

The case of the Scottish lady, which I have already cited, goes far to illustrate the debasing influences of inebriety.

In ladies of culture and refinement the debasing effects of inebriety, as a rule, succeed each other with greater precipitancy than what is usual with the other sex. Take a case in point: A lady of wealth and culture, the wife of a New York merchant, and the mother of several children, who for years had occupied an enviable position in society, where she was honored and respected by all who knew her, while thus situated, and surrounded by everything that could make life pleasant, yielded to the allurements of wine, became intemperate in its indulgence, and finally sank to the lowest condition of confirmed inebriety. While in this state she would wander from home and be gone for days at a time, to be found at last either in a prison or some wretched hovel, surrounded by drunken women, robbed of her jewelry and good clothing, and covered with filth and rags. It was from a prison cell that she was twice brought to the Home, and her case appeared to be an utterly hopeless one. But her noble husband, in the greatness of his love for her, would not despair, and his constancy was finally rewarded by the most happy results. She left the Home nearly five years and a half ago, and has abstained from stimulants since that time.

Polite society may inquire "What became of her?" and will doubtless conclude, with its accustomed lack of charity in such cases, that she can never resume her former position with her sex. Fortunately her husband was above such considerations. He omitted to consult the views of polite society, but did a wiser thing—he sold his city property and purchased a beautiful tract of land in the country, where he erected a suitable residence; and his wife, who had been accustomed to country life in her childhood, is delighted with the change and, with her restored health, she is enabled to find amidst the beautiful surroundings of her country home

a society more grateful than that of her uncharitable and unforbearing sex.

Out of this condition of moral debasement *overt acts of depravity* often protrude themselves in the presence of friends, and too frequently before the public gaze.

Gambling hells, houses of assignation and other kindred resorts of infamy do most abound and flourish where the liquor traffic is subjected to the least restrictions. The public courtesan plies her brazen calling with the greatest success amidst blocks of groggeries and dancing establishments, filled with wine and fired with lust, he becomes the willing victim of the vile charmer. "He goeth after her straightway, as an ox goeth to the slaughter, or as a fool to the correction of the stocks, till a dart strikes through his liver; as a bird hastes to the snare and knoweth not that it is for his life." Would to God that these Bible truths were proclaimed from the pulpit, and rung in the ears of our young men by the religious and secular press; for they are hastening to destruction and there is none to cry aloud, "escape for your life."

I claim to be something more than a theorist. From the age of fifteen I commenced to labor in the night asylums, cellars and garrets of the back slums of large cities, first as a tract distributor, then as a court preacher. I was engaged in this work in Liverpool, England, when the cholera broke out there in 1832, visiting one hundred tenements in the worst infected districts every Sunday morning; there I learned how much good an earnest youth could accomplish in nursing the sick and consoling the dying; from that time to the present a large proportion of my time has been spent in almshouses, hospitals and prisons. Viewed in the light of a minister of religion, and as the friend of the sick and afflicted and of earth's outcasts, unbounded confidence has been reposed in me. What revelations of depravity and crime have from time to time been whispered in my ears, dating

back almost invariably to that first drink—not as is generally supposed in some low groggeries or bucket-shop, but in some very respectable hotel, and not unfrequently at the soda-water fountain where ardent spirits can too easily be obtained by stealth. I have traced their history down from the lowest slums to the felons' prison—from the condemned cell to the foot of the gallows. A convicted murderer once said to me as I stood by the door of his cell in the Kings County Jail, "Mr. Willett, it was women and wine that brought me to this;" and the next day the poor despairing wretch cut his throat with a razor from ear to ear.

So far I have been viewing inebriety from its demoralizing aspects, and will now turn to the physical debasement which it entails. Passing over such diseases as those of the liver, the kidneys, dropsy, epilepsy, apoplexy, general paralysis, etc., which are representative of the last stages of the drunkard's career, I will turn attention to the more ordinary conditions which follow in the wake of persistent inebriety, beginning with—*Delirium Tremens*.

This condition is the culminating point of a series of long continued debauches, and is more likely to occur to drunkards of the second generation, although cases sometimes occur where there is no trace of an inherited predisposition to imbibe. A great deal depends on the power of the constitution to resist the continuous strain. A very powerful seafaring captain was brought to the Home about eight years ago by his sister, and that lady informed me that her brother had averaged five bottles of brandy daily for the previous twenty years. She added that he had drunk four bottles that day and had brought one, the fifth, (a regular three half-pint bottle) with him to finish the day out. Though it was slightly evident that he had been indulging, he was not in the least intoxicated. That man never had an attack of delirium tremens. He belonged to the class described by Solomon as "men of strength to drink strong drink." On the other hand, we have numbered with our patients at the

present time a lady and gentleman, either of whom half a pint of whiskey would make reeling drunk. Both of these patients have passed through this fearful ordeal of delirium tremens.

The next condition to which I propose to advert is that form of alcoholic mania known as the *Mania of Suspicion*.

In some cases this mental affliction precedes but more generally follows directly in the wake of delirium tremens; in others it occurs unaccompanied by tremor. Occasionally, this derangement is traceable to profligacy or self abuse in addition to inebriety, and in almost every instance the suicidal tendency is strongly developed. In some cases this condition of mania both precedes and follows an attack of delirium tremens. In one instance a patient was brought to the Home laboring under peculiar delusions and suffering from intense mental depression. Before leaving his home he had ground an old jack-knife and brought it to a very sharp edge. He then effectually concealed it in some portion of the clothes which he wore and, seizing a moment when the nurse in attendance had his eye turned away, he managed to open the knife, but by so doing arrested the attention of the nurse, who immediately got hold of his arm, but failed to prevent him from making a great gash in his throat. No sooner was the wound sewn up than the man drifted into a very severe attack of delirium tremens, and between each succeeding paroxysm he would implore the nurses to give him a knife in order to complete his suicidal attempt, or to put him out of his misery. When the paroxysms had finally subsided, this mania of suspicion returned in full force. He imagined that we had conspired and were preparing to emasculate him, and his prayers and entreaties to be spared that operation were most piteous. By skilful medication and judicious care he soon recovered. He left the institution about two years ago, and is now leading a sober life.

Another young gentleman from a Western State was

brought to the Home quite demented. Between excessive drinking, morphine and chloral, together with sexual and self-abuse, he appeared to be a complete wreck both physically and mentally, and he had the same suspicion in regard to emasculation which possessed the last cited patient. Being more refined and intelligent than the other, he was exceedingly sensitive to the humiliation and shame that would follow, and from day to day urged these as reasons why he should be spared. As the light of reason slowly began to return, I observed that he was becoming more or less philosophical in his attempts to discuss the question of the sad infliction which he continued to suppose we were about to perpetrate upon him. At length on one bright sunny morning he for the first time admitted that he knew it was a delusion, but still he could not shake it off. I called his attention to the fact that these delusions were always more intensified on cloudy and rainy days, and this he admitted. I then explained to him that on fine days, when the sky was perfectly clear, there was a pressure on the surface of the earth and all other substances, including the human body, of nearly fifteen pounds weight on every square inch of surface, which would be equal to from thirteen to fourteen tons weight in his case, and that all of that pressure was necessary in order to sustain him in a healthy condition. I then went on to show that when certain disturbing causes were at work there was a lifting up of a portion of that pressure, sometimes equal to half a pound or more on every square inch, and that resulted in the moisture of the atmosphere being precipitated in the direction of the surface of the earth and forming into clouds, &c.; and that these disturbing elements affected the whole animal creation, liberated noxious pent up gases, and was always more or less felt by every living creature, more especially the human family. That from a corn on the toe, gout in the foot, rheumatic attacks, broken limbs, to lung disease, the weak and tender place suffered most. That in his case, the brain being affected, those delusions would at such times become stronger.

This process of reasoning at once interested him, and he immediately began to test the correctness of my statements. When he felt gloomy he would look out for clouds, rain, etc. until he finally recognized the fact that his delusions were to a greater or lesser extent attributable to the state of the atmosphere. This mode of philosophizing was worth weeks and months of medical treatment, for he learned to reason himself out of his delusions and was returned to his home a sane and reformed man.

The last phase of this question of inebriety which I propose to refer to is that which relates to the *Opium Habit*.

This drug, though excellent in its place and invaluable to the physician, is nevertheless a most potent poison, and is annually silently destroying human life in untold numbers. It produces a peculiar form of intoxication far more intensified than that resulting from the use of alcoholic liquors, and sometimes culminates in very marked and violent attacks of delirium tremens.

A lady patient of the Home safely passed through no less than forty-eight spasmodic convulsions in forty-two hours. The greater part of these spasms were of a very violent character, the muscles contracting and relaxing in quick succession, the patient requiring from three to six able-bodied women to restrain her on the bed. A few of the attacks were of a rigid character, the muscles remaining contracted and the patient sinking into an almost lifeless condition. These attacks were of a longer or shorter duration, some lasting only a few minutes, while others continued from fifteen to thirty minutes. In the intervals the patient was sometimes delirious, sometimes unconscious or in a state of exhaustion, and sometimes conscious of her situation and would speak rationally.

Contrary to all expectation she recovered, and as in nearly every case of delirium tremens treated in the Home, the patient demanded her immediate and unconditional discharge, and in no measured language charged her mother, sisters

and the officers of the Home with having entered into a conspiracy to deprive her of her liberty. Her relatives on witnessing her excited condition resolved to remove her and did so. Some time subsequently she resumed her former vicious habits of drinking laudanum and whiskey, for she indulged in both, and her mother applied to have her readmitted, but for reasons not necessary to state we refused to comply with her request.

Another case of a similar character will, I think, be listened to with interest.

On the application of friends we admitted a physician as a patient of the institution. He had been practicing in his profession on ocean steamers for several years. During this time he had become the slave of two hard masters, viz: brandy and morphine. The latter, being the more potent, gradually to a great extent took the place of the former. He used morphine or opium in some other form whenever he could obtain it, or brandy in its absence. We soon found that he was afflicted with a peculiar form of convulsions which were difficult to define. He had from one to two attacks daily, lasting from two to four hours. During the attacks the symptoms very much resembled the condition of a patient suffering from delirium tremens. The spasms were at intervals very violent, and it required from four to five men to restrain him. Then he would sink into a condition resembling coma until the returning spasm aroused him again and again from his stupor. As in attacks of delirium tremens, the patient was evidently fearfully exercised to make good his escape from some imaginary object or impending danger, but differed in these respects, 1st, in the extraordinary length of each attack and 2d, that when the convulsion subsided the patient became rational. Having from time to time observed his violent efforts to escape from some unseen object, on one occasion I shouted out at the top of my voice, "Why, Doctor, what is the matter with you?" He cast his glassy eyes towards me, then pointing with his finger in

a certain direction began to mutter "de-de-de-de." I replied by saying, "Why, Doctor, is the devil after you?" and he answered in the same sepulchral voice, "Ya-ya-ya." I continued by saying, "Now, Doctor, let us clear out of the city and get away from that old devil," and he replied "Ya-ya-yes-yes." Pausing for a few moments I said, "Now, Doctor, we are on the quarter-deck of the steamer and she is on her passage to China, and he answered, "Yes, yes, Mr. Willett." I then called his attention to a sick lady down in a state-room and sent him to attend to her. I followed up the conversation by asking him if he had attended to the sick lady, and he said that he had and that she was all right. I then pointed in a certain direction and called his attention to a sick infant lying on the forward deck, and he immediately had it in his arms hugging it. Then I sent him down the steerage cabin to see a lot of sick Chinese passengers. Having done so, he told me that some of them would die and he would be required to embalm their bodies, for which service the Chinese government would pay \$37 each, and that his portion of the fee amounted to \$14. At this moment I was suddenly called away, and in a few minutes a messenger was sent to inform me that the Doctor had relapsed into his former condition. I returned and found him very violent, but soon succeeded in renewing the conversation, and finally he talked himself into a state of consciousness. At the expiration of three months he was restored to a sound condition of health, and in the course of three weeks he gained twenty pounds in weight; altogether he gained forty-six pounds. He left us in excellent condition and commenced the practice of his profession.

The following case is not unlike the one just cited in some respects: A physician who was once of high standing in his profession, unfortunately contracted the habit of using opium, and it grew upon him to such an alarming extent that he was rendered unfit to attend to his professional duties, and was subject to spasmodic attacks followed by stu-

por. He had taken from two to three ounces of the tincture of opium daily, occasionally increasing the dose to an unknown quantity. He was admitted to the Home about five years ago, and, after remaining three months, left us entirely weaned of the habit. When admitted to the Home he was in an emaciated condition, his clothing hanging loosely upon him, and looking as though they were made for another and a much larger man. When he left he was in excellent condition, and was rounded out so as to fit his clothes. He returned home to the place of his nativity, got married, and is now successfully practicing his profession.

I will now read a letter recently received from a medical gentleman, and which I think tells its own story in a manner calculated to carry hope to the most despairing, and showing that "What man has done, man may do."

September, 1878.

REV. J. WILLETT—MY DEAR SIR:—There has been so much discussion regarding the merits of the different methods of treating the Opium Habit that I concluded a short review of my own case would not be uninteresting. The fact of my being a Physician, and having tested the Heroic, the Semi-Heroic and the Gradual plan, entitles me I think to speak "Ex-Cathedra." Let me take the Heroic plan first. I was taking from eighty to one hundred grains of Morphine daily, and on June 21st of last year I stopped the habit "short," and took no more until the latter part of November following. For one month my sufferings were really indescribable; but I persisted and conquered, though the shock to my system was of that character that I fell into the habit again without a single physical or mental reason except "pure cussedness." I am perfectly satisfied that the Heroic plan will always result in failure sooner or later. As to the Semi-Heroic, or rapid withdrawal, I made an ignominious failure; and there is nothing more to be said on that point.

At last I entered your institution, determined to test what my reason taught me was the most sensible of the three forms, viz: gradual deprivation. I commenced treatment three months since, when I was daily taking from ninety to one hundred and twenty grains of the Sulphate of Morphia, and on one black day in my calendar I took within fifteen hours, in two doses, the enormous quantity of TWO HUNDRED AND THREE GRAINS (by actual weight). I had no idea nor intention of suicide, but it only shows the degree of tolerance nature establishes to the drug in some systems. To make a long story short, my cure is perfect. I only had one day of real suffering in the three months, and that was caused chiefly by an indiscre-

tion in diet. * * * The unwearied attention, the marvellous skill and judgment with which my case was handled by Dr. L. D. MASON, and, above all, the unvarying kindness of yourself and family shown towards me during the trying time of my treatment can never be forgotten or undervalued by me.

In conclusion, I feel justified in giving it as my personal and professional opinion that there is no institution in the country where the Opium Habit can be so successfully treated and with so little suffering. Of the Heroic, the Gradual, or the rapid withdrawal, the old proverb is as true to-day as when first uttered a thousand years ago—"The medium is the safest course."

Very truly, Yours, &c.,

In conclusion, let me remark that our special work does not interfere with that of the various temperance organizations or of Christian churches. They can and do help and save thousands of drunkards; but, when excessive drinking has culminated in a diseased stomach, or liver, or kidneys, a fountain of poisoned blood, a congested brain, a shattered nervous organization, &c., the victim of the Rum-fiend is dragged beyond the reach of moral suasion, or even religious influences. The days of miracles are past and gone, and the powers of healing are, in the order of the divine dispensation and in the light of science, committed to the ministrations of the good physician. He is God's minister, endowed with powers of healing which are in accord with the natural laws and the physical constitution of the human race.

Inebriate Asylums have developed the FACT that medical skill, when supplemented by needful restraint and intelligent care and nursing, can restore the dipsomaniac to soundness of health, and so far reinvigorate the brain as to enable the will to reassert its dominion over desire and appetite, and bring back freedom to the bound slave of the Rum-demon.

The demonstration of this great FACT sets forth in bold relief one of the most practical advances which medical science has made in this nineteenth century.

The Fort Hamilton Inebriates' Home is, in cases of Alcoholic Mania, fast superseding the Lunatic Asylum. Hitherto the inmates of those abodes of madmen have been

largely increased by the reception of men and women who have been temporally prostrated by delirium which has been superinduced by excessive drinking. In the Lunatic Asylum these conditions have, by association with the violently insane, in many instances been intensified into those of chronic lunacy. In our Home this experience has, in almost every case, been reversed; and the temporally insane patient has been returned to his family and friends with a physically regenerated body and a sound mind.

[CONTINUED FROM SECOND PAGE OF COVER.]

into this institution. Cure and reformation are the only purposes kept in view in the reception and detention of patients.

THE BUILDINGS are constructed for this special purpose, and they are more complete and better adapted for the treatment of Dipsomania and the Opium Habit than those of any similar institution in existence. They are situated on one of the most attractive points on the Bay of New York, and stand on a high bluff within one thousand feet of the Narrows. The sea and land views are unsurpassed in extent and grandeur. The enclosed Park Grounds are extensive.

There are separate dining-rooms, lodging-rooms and parlors, billiard and bath-rooms. There is also a lecture-room for religious services, readings, concerts, etc. All the New York morning and several other newspapers and periodicals are regularly taken.

THE MANAGEMENT is systematic, thorough and adequate. There has been no change in the staff of medical or other active officers since the inauguration of the Home, twelve years ago.

THE CLASSIFICATION of patients originated with and is peculiar to this institution. Being determined and regulated upon a strictly commercial basis, it is made to depend upon the character of the lodging, board and other accommodations which the patients or their friends are willing to pay for, and is accomplished in such a manner as to completely isolate the boarders from the free patients in the County or State wards of the Home.

By this equitable arrangement we are enabled to offer board and medical attendance at rates varying from \$5.00 to \$35.00 per week. Those paying \$13 and upwards, according to size and situation of quarters selected, are provided with a single apartment and a seat at table in private dining-room—the accommodations in the select rooms and the table being in every respect equal to those of a first class hotel. Rooms in suit may be had upon terms to be agreed upon. An extra charge for washing.

REMARKABLE IMMUNITY FROM DEATH.—The total death-rate since the opening has been one-half of one per cent., or one death for every two hundred patients. The total deaths of legitimate cases for treatment in the Home have been only one case in eight hundred during the same period. The rest were dying when admitted.

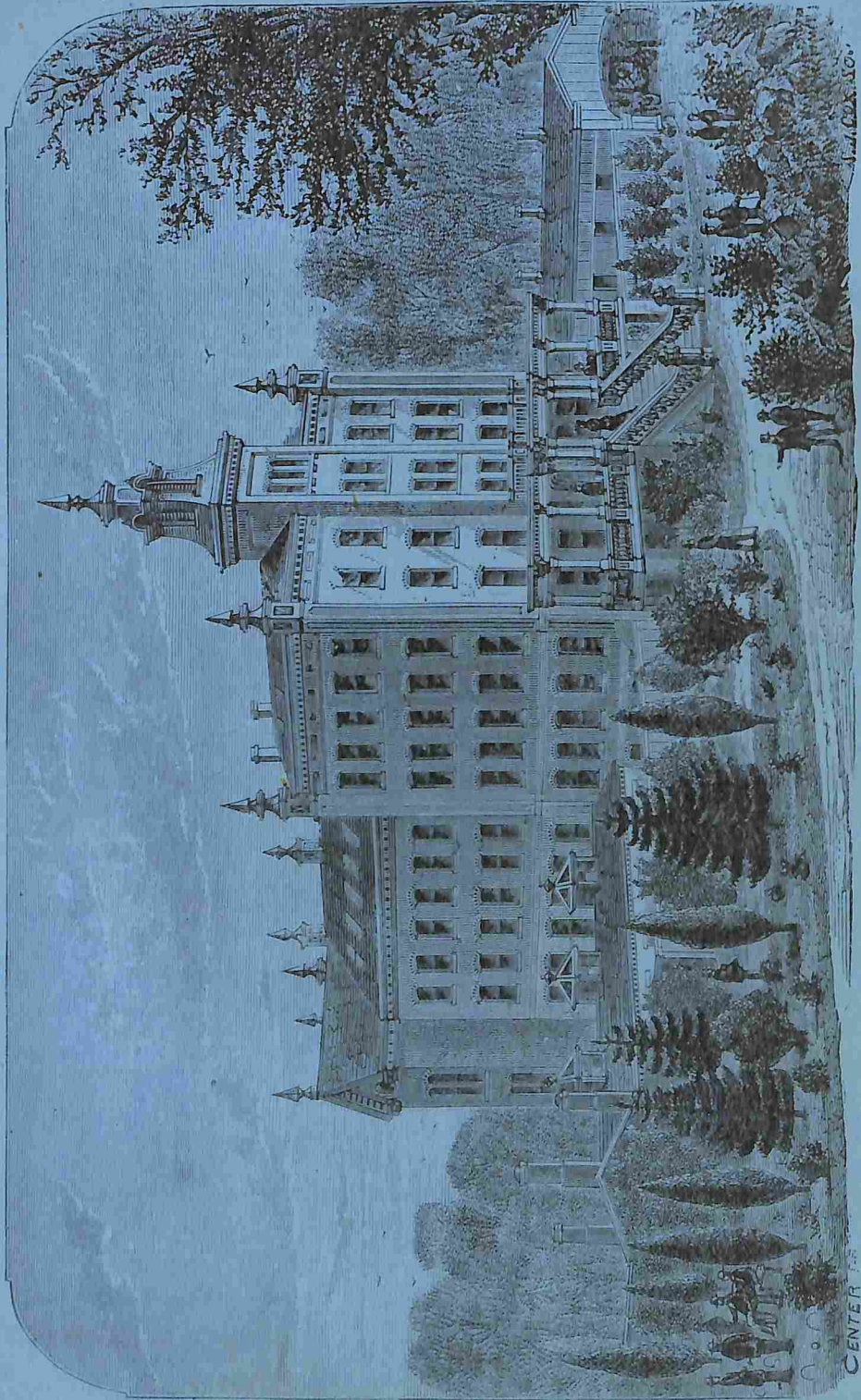
THE RESTRAINTS.—Our system of restraint is compatible with the fullest liberty for each boarder patient to avail himself of all the recreation, amusement and enjoyment which the billiard-room, park and ball grounds, readings, lectures, concerts and musical exercises, etc., coupled with the society of intelligent and agreeable fellow-inmates, can impart; but this liberty does not embrace leave and license to go and come to and from the neighboring cities, villages, etc. Many of our boarder patients have commended inmates of other kindred institutions, who have been placed under our care because our system of restraint to the grounds of the Home has commended itself to their friends when those confidential experiments have failed.

THE DISCIPLINE.—The established code of discipline is comprehended in the observance of "THE LAW OF PROPRIETY," as universally understood by gentlemen and ladies in the guidance and control of well-regulated family and social relationships. The Superintendent and officers lay it down as a rule that they can only govern wisely by avoiding any unnecessary appearance of authority, and at the same time maintaining mild but firm discipline whenever the occasion demands. What is most needed is a method of discipline which will inspire confidence and lead to self-reliance and the restoration of will-power.

Patients are received either on their voluntary application or by due process of law, and the powers of the charter to retain them within the limits of the grounds of the institution are strictly enforced.

Full directions, with the requisite blank forms, together with such information as may be necessary, can be obtained on application to the Superintendent, at Fort Hamilton, N. Y.

Two daily mails, and telegraphic communication to all parts of the country.



CENTER

OCEAN VIEW OF THE "INEBRIATES' HOME," FORT HAMILTON, N. Y.

W. COOPER, N. Y.