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A CLINICIAN'S ESTIMATE OF ALCOHOL AS A THERAPEUTIC AGENT.¹

BY F. C. SHATTUCK, M.D., BOSTON.

I SHALL preface the brief remarks which I can make now on this important subject with the statement of two premises, which seem to me sound:

(1) We cannot reason directly from the effects of alcohol in health to those in disease.

(2) There are facts clinical as well as facts chemical, physiological or pathological.

Under each of these heads I permit myself a few remarks. What experience of life I have had leads me to believe that the healthy man, under ordinary conditions, in this climate, does not require alcohol, although he can use it moderately and habitually for years without any apparent harm. Its use may, indeed, afford him a legitimate pleasure, especially if it is taken in a dilute form and at only one period of the twenty-four hours, preferably with food. Wine, in moderation, maketh glad the heart of man today as it did in King David's time. In excess it has the same disastrous effects as it did upon Noah of old.

At the same time the great difference in individual toleration of this, as of any other potentially harmful agent, should be always remembered.

And I should like to call attention to what I believe to be a fact—that while a single moderate dose of whiskey or sherry, for instance, is

pretty sure to taint the breath of a man in health, much larger and repeated doses may be given in acute or chronic infectious diseases without tainting the breath at all.

Is there anybody here present who has not seen an amount of alcohol taken in disease without any obvious ill or toxic effect, which, if given in health, would have produced more or less profound intoxication?

Among many personal observations I will cite only two:

A boy of seventeen with pneumonia, not wonted to alcohol, takes a bottle of brandy and two quarts of champagne during twenty-four hours with no more toxic effect than if it were water. He recovered and acquired no fondness for drink. A lady of seventy, always temperate, prostrated with grip, takes for several weeks whiskey at the rate of a bottle every three days, with benefit, to the best of her and my knowledge and belief, certainly without a suggestion of any toxic effect. Such facts as these cannot be blinked. And so numerous are they, derived from so many sources, that very convincing counter-evidence must be brought by those who maintain that alcohol is under no circumstances consumed in the system, and consequently useless or harmful.

I think I have seen persons take alcohol with avidity and benefit for a time, and become instinctively unwilling to take it as the indications which led to its use have passed away. If this observation be true it tends to show that alcohol may be useful as a drug. The difference between its use as a drug and as a beverage should be kept more clearly in mind than is always the case.

As physicians we are under responsibility to see that its use as a drug does not lead to its abuse as a beverage.

Its use as a drug in acute disease, in my opinion, involves small risk of the establishment of a vicious habit. The case is far otherwise in chronic disease. Here also it may be very useful, as I firmly believe, but its administration should be carefully guarded by a realization of its dangers.

I recall the case of an old butler of one of my families. He was of English birth, and, as a young man, had used alcohol to excess. His master made a strong appeal to him which elicited a promise of total abstinence. This promise was faithfully kept. In his old age a senile heart and other infirmities seemed to me to indicate moderate doses of alcohol. My suggestion that he should take a tablespoonful of whiskey three times a day met with absolute refusal from him. I then had the druggist "doctor" whiskey for him, and he took his dose thrice daily for the rest of his life, apparently never suspecting the nature of his medicine, but telling me, whenever I went to the house, how much good my medicine did him. I have not had time to run to earth the author of the saying that "wine is the milk of old age." Sir James Paget quotes it in advising his aged father to drink five or six glasses of port wine daily.

¹Remarks made in connection with the Discussion on The Value of Alcohol as a Therapeutic Agent in Medicine, Clinical Section, Suffolk District Medical Society, Dec. 18, 1901.

Secondly. There are clinical facts, the result of bedside observation, for which the textbooks and the microscope afford no explanation as yet. Among such may be cited the influence of potassic iodide on gummatous syphilis, of opium and the coal tar products as general, of cocain as a local anesthetic.

We can easily call up many clinical beliefs which passed as facts in their day, but which are now known not to be facts. And there can be no doubt that some of the clinical facts of the present day will be removed in the same way. One of these may be the belief of the great majority of clinicians the world over for thousands of years, that alcohol is a valuable remedial agent in disease, a belief which rests on an infinite number of observations made under the most varying conditions. This belief has so far withstood the spirit of skepticism and the demand for proof which for, roughly speaking, fifty years has animated and guided students of natural phenomena.

Whatever the future may have in store I, personally, can see no sufficient proof of the, to say the least, uselessness of alcohol in disease to warrant us in running counter to the mass of evidence on which the belief in its value rests. The burden of proof rests on those who deny its value.

In conclusion, I subscribe to and quote the words of Osler: "We are still without the agent which can counteract the gradual influence of the poisons which develop in the course of acute febrile diseases, such as typhoid fever, pneumonia," . . . "the chief effect of which is exercised upon the circulation, increasing the rapidity of the pulse and inducing a progressive heart failure. To meet this indication the general experience of physicians still points to alcohol as the most trustworthy remedy. Although some hold that alcohol in this condition is not indicated, I believe that it is in many instances the only remedy capable of tiding the patient over the most dangerous period."

THE THERAPEUTIC VALUE OF ALCOHOL.¹

BY E. N. WHITTIER, M.D., BOSTON.

I ENTERTAIN profound convictions of the therapeutic value of alcohol. I do not mean the alcohol of the shops, notoriously an impure article, with a percentage of 2 or 3 of fusel oil, nor the brandies whiskies, rums or wines of legion name and nature, having from 45 to 85 of harmful or, to say the least, useless diluents; but rather that form of absolute alcohol known as cologne spirits, anhydrous, deodorized, defuselized alcohol, widely known formerly as "Atwood's Alcohol," guaranteed by Squibb, and of late in this vicinity manufactured by Graves, under the Atwood process of rectification by manganic and hypermanganic acid.

My convictions of the great therapeutic value of alcohol are based on both personal and pro-

fessional experience in high, or, perhaps better, in extreme degrees of sickness. Professor Shattuck's admirable paper strengthens and confirms the views I have long held and been governed by. I am not disturbed in the least degree by the arraignment (highly authoritative and fully appreciated) of the methods that obtain in the practice of a very large percentage of physicians and are advocated in the writings of many of the most eminent authorities.

Personally, I am very much opposed to the use, but particularly to the abuse, of alcohol. Professionally, I shall continue to be guided by influences which during earlier years were, to be sure, relatively formative, but in later days and with increased experience and wider knowledge have become competent to establish rules governing safely and advantageously the therapeutic administration of this agent.

Tolerance—an objectionable word, I grant, but corresponding to that of opium when pain is present, and to arsenic in the treatment of various pathological blood states—is particularly true of alcohol, in the profound constitutional disturbances arising in the severe forms of acute infectious and contagious diseases.

Professor Shattuck's experience corresponds with that of many other observers of like large opportunities and freedom from prejudice, regarding the quantity borne by children and adults, in the gravest conditions, and without any of the pernicious effects quoted in laboratory work on subjects in their normal state of health. I do not apprehend that the pharmacological and "physiological" status of alcohol can displace the clinical, or, if I may so describe it, the pathological. Conclusions drawn from laboratory work are not in harmony with bedside observations in the matter under discussion. Toxicity, for a long time recognized as easily induced in a state of health by alcohol C. P., is almost unknown in the pathological conditions requiring the utmost endeavor to maintain life, and wherein this form of alcohol is employed.

I am firmly convinced that the distaste, the nausea, the almost incoercible disinclination on the part of patients to take the various forms of alcoholic stimulants most frequently given, arise not at all from the alcohol, but from the various useless and, because useless, harmful diluents which make up the distinguishing features of odor and taste in the rums, brandies and whiskies given to patients when alcohol is considered needful. I speak in this matter from a personal experience of extreme gravity, and from professional observation during many years.

Standardizing remedies (a process of extreme difficulty) is nevertheless strenuously advocated. The modern synthetical group, with its formidable and lengthening array of symbols, is evidence of the part pharmacology bears in the preparation of remedies; the separation of the active principles from crude drugs, the demand for chemical compatibility of all compounds, the rapidly increasing subcutaneous method of administering

¹ Remarks made at the Clinical Section of the Suffolk District Medical Society, Dec. 19, 1901.