





LIBRARY
OF THE
UNIVERSITY
OF ILLINOIS

✓

THE LEGISLATION

WHICH IS REQUIRED TO MEET THE CASE OF

THE HABITUAL DRUNKARD.

By ALFRED CARPENTER, M.D.

*A Paper read at a Meeting of the Social Science Association,
March 29th, 1876.*

THE RIGHT HON. LYON PLAYFAIR, M.P., CHAIRMAN.

CROYDON :

PRINTED BY J. W. WARD, "ADVERTISER" OFFICES, KATHARINE STREET.

1876.

THE LEGISLATION
WHICH IS REQUIRED TO MEET THE CASE OF
THE HABITUAL DRUNKARD.

At the last annual meeting of the British Medical Association the reformation of the "habitual drunkard" was forcibly brought to the notice of the members by some of the associates in very excellent and practical papers.

The Council of the Association also took up the question and appointed a committee to consider in what way the subject could be dealt with. That committee has had several conferences, not the least important of which was that at which it was determined to invite the Social Science Association to join in the proposed campaign, and to bring to bear upon the work that force which exists in the Association, which this year has the privilege of being presided over by Lord Aberdare. The invitation was cordially accepted by the Executive Council.

As a member of both associations, and also one of the Edinburgh Committee, I most willingly respond to the request made by the Law Amendment Committee of this Association that I should submit some views for consideration and indicate the direction which legislative action should take.

Three questions present themselves for discussion—
1st.—Is further legislation required for the control and management of the habitual drunkard; are not the powers already in operation sufficient for the purpose?

2nd.—Are those powers capable of being used for his reformation ?

3rd.—If not, and if new legislation is required, what direction should it take ?

Let us fairly consider the first question—Is further legislation required? Do the penal clauses now in operation against drunkenness prevent its further increase, or even prevent the victim of the disease repeating the offence almost as soon as opportunity arises ?

I may be wrong in my conclusions, but according to my experience they are inoperative as preventive measures, and have not the least pretence for being considered curative. As a magistrate acting in a thickly-peopled district of greater London, I have seen the same persons charged with being drunk and disorderly, or drunk and incapable, as the case may be, fined or sent to prison over and over again. After seven or fourteen days' imprisonment, they are discharged ; in many instances, determined more than ever to be drunk as soon as they can.

Those who will take the trouble to read the report of, and look into the evidence taken by the Select Committee upon " Habitual Drunkards," which sat in 1872, will soon be convinced that present powers are useless for the purpose we have in view. When thirty, forty, fifty, or even 100 convictions are shown to have been recorded against the same individuals, it cannot be doubted that " small fines and short imprisonments are proved to be useless." The testimony upon this point is overwhelming. When a person is brought up and sent to prison for fourteen days for disorderly conduct whilst under the influence of liquor, the time is just long enough to get rid of the evil effects of the debauch, and to produce a renewed desire for drink, which desire is gratified as soon

as he is discharged from prison. Comrades wait for him outside and carry him off for the purpose. The short time only increases the desire and sends him still further down the abyss from which, at present, there is scarcely any possibility of escape. The fact that a person has been sent to prison two or three times takes away from him all dread of detention. Whilst there he is relieved of the dyspepsia under which he always, more or less, labours; he does not care for food, he has plenty of water, and by the time he comes out his relish is restored, and he goes at the drink again like a giant refreshed, without the least particle of an idea regarding reformation or amendment of life. The maudlin sentiment which is occasionally met with in the early stages of recovery from a debauch is, in ninety-nine cases out of 100, evanescent, and has no time, under present arrangements, to become an integral part of a man's—still less of a woman's—mental condition, and the last state of the victim is worse than the first.

The report of the Select Committee states distinctly that “there is an entire concurrence of all the witnesses in the absolute inadequacy of existing laws to check drunkenness, whether casual or constant.”

The opinion of the committee was most decided that “fresh legislation upon the subject was necessary, and that the law should be made more simple, uniform, and stringent.”

Notwithstanding that report, which was made in June, 1872, no legislative action has been forthcoming, and we are informed that the Government does not propose the introduction of any measure this year. It was proved before the committee that drunkenness is the prolific parent of crime, disease, and poverty. That in some gaols as many as 75 per cent. of the criminals attributed their condition directly to drink; that at least

20 per cent. of the insanity recorded in Great Britain was produced by the same cause; and that more than one-half of the idiots which excite our compassion are the offspring of drunken parents. It was shown as a natural consequence of these facts that increase of pauperism is inevitable, and that the children of drunkards are placed in positions of the greatest peril, with almost a certainty that they will be worse than their fathers. All this was conclusively proved by that committee which was so ably presided over by the late Mr. Dalrymple, yet, on the face of those facts, Parliament has not grappled with the subject, and has left it precisely where it was before the Committee sat. Mr. Dalrymple introduced a Bill founded upon the recommendations of the committee, which was read a first time, but withdrawn in consequence of the resignation of Mr. Gladstone, and it remains to be seen whether the present Parliament will be persuaded to face the difficulty involved in fresh legislation upon the subject. There is evidence that a very large amount of drunkenness among all classes and both sexes never becomes public at all, and cannot at present in any way be dealt with by magistrates. Private drunkenness, especially among women, is even a more fertile source of misery, poverty, and degradation than that which affects the lower grades of society, and which gives so much occupation to the police. There is no legal remedy whatever for it; the only punishment capable of being inflicted is exposure, and this, because of its inoperative result upon the victim, and its injurious effect on the innocent relatives, every friend of the unhappy creature always tries to prevent. Still the course of the drunkard is downward, and only becomes generally known when ruin stares the whole family in the face, or a suicide, or a homicidal act, has given evidence sufficient to prove that for a time at least

the victim is insane. There could not be a greater proof how easily Parliament may be made to strain at a gnat and swallow a camel, than the way in which Mr. Dalrymple's Bill has been swallowed up and put out of sight without the least regret. The Regent's Park explosion gave rise to a legislative enactment regarding explosive compounds, which contains a much more numerous set of clauses and produced much greater changes in the law, and made us more dependant upon a paternal government than ever need be the case by the details of an Habitual Drunkards Bill. The people constantly cry out for protection against occasional evils such as may arise from a possible explosion, and which can only affect a narrow region. They call for legislative enactments against railway companies because one passenger in a million is killed by circumstances over which he has no control. A new danger from so-called garrotting is quickly put down by a change in the law; but a disease which is only curable in its early stages, which is more or less a "skeleton in the cupboard" of almost every large family circle in the kingdom, is permitted to go on unchecked, and to send every year its tens of thousands into eternity, and leave as many others without hope, either in this world or the world to come, because it is supposed that an alteration in the law (which I shall show presently to be no alteration at all, but a re-arrangement) might interfere with personal liberty: as if personal liberty were not interfered with, and had not been interfered with, in a hundred different ways, in all ages, without serious injury to the commonwealth, when the exigencies of the State required it.

It is not now my intention to take up Mr. Dalrymple's Bill as he framed it, and submit it to you for your approval, because I do not think public opinion is at

present sufficiently alive to the necessity of legislation so complete as that which the chairman of the Select Committee desired, but I will revert to the opposition that Bill met with and which probably led to its withdrawal quite as much as the resignation of Mr. Gladstone. The promoters were stigmatized in a leading weekly review as a set of fanatics ; the Bill was set down as a counterpoise to Sir Wilfrid Lawson's permissive measure, each equally unlikely to be passed. Sir W. Lawson's Bill may or may not be passed, but assuredly, unless something be done to arrest the spread of drunkenness and to diminish the exposure to temptation which now so manifestly exists at every corner of almost every street, the people will some day take the work into their own hands, and a " whiskey war " may not be without its promoters even in our own land. It is true that men cannot be made sober by Act of Parliament, but bad legislation has fearfully tended to produce a race of drunkards, and it is for this bad legislation—this placing of temptation in way of those who are unable to resist it—that we now ask Parliament to provide a remedy. Should the present Parliament choose to leave the matter as it is, it is not improbable that the next House of Commons will close its doors against a majority of the liquor dealers who now sit on its benches ; and then possibly the habitual drunkard and the great promoters of that class, viz., those who sell adulterated wine and beer, may have the requirements of each case met by an appropriate remedy. I cannot think that ministers have been wise in ignoring this subject. The deputation which waited upon Mr. Cross on the 1st of July, of last year, should have impressed him with the belief that it was a matter not to be trifled with. It would be an unfortunate thing for it to be made a political question. Yet when men like Sir Thomas Watson speak

out so plainly as he did at that interview, and the minister ignores the question, there is a fear that it may be made a party one. Sir Thomas Watson said, in concluding his remarks—

“I conceive that the sanctioning, by some legislative measure, of retreats or reformatories wherein, at the instance of his relations or friends, or by his own wish, or by the sentence of the magistrate, such a sufferer could be legally detained for a time, which has been estimated to be between three and twelve months (though in my judgment three months would be far too little) . . . could scarcely be regarded as anything less than a national blessing.”

Mr. Cross, in reply, stated that there were “great practical difficulties” in the way. Surely practical difficulties are not to be allowed to prevent the enactment of that measure which the grand jury at Leeds (following an example which has frequently been set before), in their presentment to the judge last year, showed to be absolutely necessary.

The Leeds grand jury invited the judge’s attention to the fact that in nearly all the cases of crimes of violence which had come before them the exciting cause had been strong drink. The judge fully agreed, and added that the sufferers had in many cases been associated in intoxication with the criminals. The judge promised that the matter should be brought to the notice of the Home Secretary. The Home Secretary, however, is not prepared to make any change in the law, but is prepared (he says, in a communication to our committee) to consider and assist any well-digested measure which may be brought in by a private member. I shall be sorry if no private member attempts it. Still I do think, and in that I believe the majority of this Association will agree with me, that it is a matter of such vital importance to the well-being

of the State that it ought to be a Government measure, and not liable to those impediments which naturally beset a private Bill.

Suppose we now look at the difficulties which appear to have appalled the Home Secretary. One objector asks, "Do you propose to lock up every drunkard? if so you will require enormous establishments." The definition contained in Mr. Dalrymple's Bill disposes of this objection—"the person must be habitually incapable, injurious to himself or others, and unable to manage his affairs." The mere fact that a garrotter could be subjected to the lash did more to prevent garrotting than was effected by the actual infliction of the lash itself on the culprit. The knowledge that the habitual drunkard can be deprived of his personal liberty will assist in preventing many from rushing headlong down the path of destruction before they have entirely lost their power of self-control. It is the class of drunkards who have lost that power to whom we wish to apply the proper remedy. The diagnosis of such cases is as well known to medical men as is the difference, which we now know to exist, between typhus and typhoid fever. The loss of self-control, the determination to have drink at all hazards and any cost, the changed mental state, the restlessness, the depression, the loss of all sense of duty, of truth, of honour and affection, are more or less present in every case, and tell the tale, when pointed out, but too clearly even to the uninitiated.

Another difficulty which is started by our opponents is the fact that we cannot speak very positively as to the result of treatment in a given case. We are required to show that there will be a reasonable probability of cure, and that also within a reasonable period of time. The experience which has been gained in other countries—

notably in the United States of America—gives us every hope that if the remedy is applied in the early stages of the case a cure will be effected in a large majority of those treated. Dr. Peddie says, “There is a link which connects, and a boundary line which separates, intemperance the disease from intemperance the vice.” Here is the difficulty? we do not ask for power to deal with the vice, but for power to prevent the development of the disease, and, if it be developed, to have power to cure it. It was for the enactment of this power that the medical men of London asked the British Medical Association, through the Metropolitan Counties Branch, to take up the subject and to press it upon the attention of the Home Secretary. It was the desire for this result which led the most eminent medical men in London to sign a requisition pointing out the great want of an institution specially devoted to the treatment of Dipsomania, and urging its establishment. And yet, as the law now stands, there is no real power to establish such an institution as Mr. Holthouse has proposed; that is to say no real power to make it effectual.

Neither are the medical men of London alone in their remonstrances. Birmingham has been for a long time loud in its outcry; all the great cities of the empire have spoken through some channel or other, and at Edinburgh, where those who had to carry out the law did connive a little in the way of treating such cases as lunatics proper, a powerful cry has arisen for help, which found its natural outlet at the British Medical Association Meeting. Sir Robert Christison, the President, after thanking Dr. Peddie and Dr. Boddington for their excellent papers, moved the following resolution:—

“That excessive intemperance is in many cases a

special form of insanity which requires special treatment, with a view, first, to the recovery of those affected, and second, to the protection and advantage of them and of society. That in the present state of the law such treatment is not attainable, and that it is desirable that legal provision should be made to render it attainable."

This resolution was supported by a gentleman from America, who detailed his experiences there, and it was carried by acclamation in one of the largest meetings of the profession ever held in the United Kingdom.

Mr. Cross's "great practical difficulties" were not explained to the deputation which waited upon him, therefore, we have to imagine them. He, and Parliament with him, may be fully assured that medical men, in dealing with cases of this kind, and advising friends as to treatment, will not be likely to make mistakes. When the symptoms are pointed out, as pointed out they ought to be in all cases, the committing authority will be equally able to judge from the corroborating evidence given by other witnesses, which evidence should in every case be forthcoming. I am fully satisfied that the medical evidence should only be supplementary, and not the main authority for proceeding; the lay evidence should come before the medical opinions.

There is another difficulty, which was probably in the mind of the Home Secretary, viz., the fear that innocent persons might be incarcerated by designing relatives. This fear is ever uppermost in the minds of men who, taking Charles Reade as their authority, look upon lunatic asylums with suspicion and horror. The imagination of the novelist has helped to seriously impede the progress of reformation as applied to drunkards. It is said that it is better for a hundred criminals to escape than for one innocent person to be punished, but I contend that the measure we propose is not a penal measure, but a

reformatory one, and that as committal is for a definite time alone, and it is not one or two, or a dozen instances of yielding to the temptation of drink which will lead to committal, it will not be to the interest of friends to perjure themselves to act in the way suggested, for it can only be for a time. It will not be in their power, if the committing authority understand its duty. I am of opinion that no case should go into the proposed reformatory until after inquiry by the local authority. Another difficulty is said to be the expense such institutions would entail upon the rates. This is not the time to deal thoroughly with this objection, but to my mind it is based upon fiction, and not fact. As regards the upper and middle classes, such institutions would be self-supporting. Let the power to detain be given, and commercial enterprise will do the rest. As far as the cost of habitual drunkards among the lower orders is concerned, they cost the State more under present circumstances in police and prison charges alone than it is at all likely they will do when placed in reformatories.

The last great difficulty is the "liberty of the subject." It is said that a man may gamble or waste his means with impunity if he so determines: why, say they, may he not drink away his inheritance? The answer is that the "drunkard's waste leads to a disease which may engender crime," and we have already adopted the rule that "we have a duty, as fellow citizens, to care for one who cannot care for himself," and a duty neglected is sure to bring retribution on those who are parties to the neglect. Surely it is time to face that duty, and not to leave it longer unperformed.

Having determined that further legislation is needful for the control of habitual drunkards, and it being clear that the powers now capable of being employed are totally

useless for their reformation, it becomes necessary to consider the kind of legislation which is required.

There are three distinct phases to be reviewed before we can determine the best course to be pursued so as to obtain a successful result.

We have to consider the subject under the head of—

(1.) Drink as a vice.

(2.) Drink as a disease which has been induced by indulgence in vice.

(3.) Drink as a disease inherited from those parents who did indulge in the vice.

The whole subject has been so ably grappled with in an article in the *Quarterly Review* (Oct., 1875) on "Drink, the Vice and the Disease," that I should be scarcely doing right if I did not ask all those who are here present, and who have not read that article, to do so as soon as they can, and after reading it I feel assured that they will be wiser as well as sadder men. It appears, from incontrovertible evidence, that upwards of 60,000 persons are annually slaughtered in this kingdom by vicious drinking. It is the vice which produces the disease, and the question at once arises as to whether we shall take steps to cure the disease, after it has begun, or shall prevent its establishment? The nation has spoken out and determined that, as regards fever, cholera, and the like, they shall be prevented, and prevention of epidemic disease is established as the law of the land. The nuisances which arise from excremental pollution are great, the destruction of life which they produce is enormous; but there the evil stops. Dirt is destructive, but except as an indirect cause of drunkenness, it does not destroy body and soul together, it does not breed idiots and imbeciles, fill our gaols with criminals and our asylums with lunatics; it does not destroy the peace and

happiness of every one connected by ties of blood with the dirty person or the owner of that dirty property. Yet we have determined that the evil consequences of filth shall be prevented, and I must confess that in my opinion we ought to prevent the disease induced by drink. It will be, however, only by "the formation of a sound public opinion as to the enormous evils of intemperance and the necessity of raising a practical and united protest against drunkenness" that it will be possible to take any effective steps against the cause of the disease. Our object, therefore, this evening will be, whilst advocating inquiry in the direction I have indicated, to keep well before us the principles which will ensure the power of treating the disease, a power which does not now exist in this country, and the effect of which, as far as we are concerned, we have no direct means of knowing. In other countries it has been tried, and as might be, *a priori*, expected, it has been found to answer, though in America the number of cures has not been so great as increased experience in treatment will probably show to be the case in the future. The expectations have not all been realized because the remedy has been frequently applied too late. Like every other disease the drink disease ("drink craving" it has been styled by Mr. Alford) must be treated early if the cure is to be certain, but in spite of late attempts and of release from treatment at too early a date, the result has been most satisfactory, sufficient, certainly, to justify permissive power being given to carry out the same treatment in our own land.

The establishment of *industrial reformatories for inebriates* has become a necessity, and despite the sneers of the *Saturday Review*, I hope to see them take their place side by side with our Reformatories for young criminals and our Industrial Schools for the children of criminals and the destitute and wandering Arabs of our streets. Any one

unacquainted with the subject, and reading the remarks of writers who are opposed to fresh legislation, would certainly conclude (as large numbers of people have done) that some vital change was contemplated in our statutes, some deadly attack upon the so-called liberty of the subject which must be steadfastly repelled. The review already quoted says that the proposals contained in Mr. Dalrymple's Bill are so absurd that they do not demand serious attention : the writer concludes a powerful philippic against the Bill by asserting that if Parliament were to pass such a Bill the Court of Queen's Bench (now High Court of Judicature) would set it aside. "Happily," says the writer, "the judges of that court have both the power and the will to keep a check upon foolish legislation." I commend this conclusion to the attention of members of Parliament—it tells us pretty plainly that Parliament is not paramount after all, although the writer has missed the spot where power really lies. What if the threat which the prophet used against the people of Israel be realized in our own land, "that the prophets should prophesy falsely"—what if the "people should believe a lie?" their judgment be warped by the effects of neglected duty, and a Parliament be elected which should be imbued with the defective judgment which naturally belongs to the children of the inebriate. I may quote here an extract from the report of the Committee on Intemperance for the Lower House of Convocation, which Committee was presided over by my late esteemed friend Archdeacon Sandford, a report which is full of the most appalling evidence of the results of drink:—

"The evils inflicted on society and the nation at large by intemperance are not only harrowing and humiliating to contemplate, but are also so many and widespread as almost to defy computation. It may be truly said of our body politic 'that the whole head is sick

and the whole heart faint,' and unless remedies be speedily and effectively supplied, consequences the most disastrous to us as a people cannot be long averted. . . . Nor can any sacrifice be esteemed too costly, or any efforts too great, to check and remedy what may be shown by undeniable evidence to be sapping the foundations of our prosperity, blighting the future, lowering the reputation of our country, and destroying both its physical strength and its moral and religious life. . . . The statesman who will have magnanimity and moral courage to grapple with, and wisdom to overcome the stupendous evil, will confer an incalculable benefit on his country and establish a lasting claim to its gratitude."

It may be fairly asked how we should determine when the time for punishment has passed and the time for curative treatment have arrived, bearing in mind the fact that the habitual drunkard has to be considered in two phases, viz., as giving way to a vice and as the subject of a disease. If we are to take up the reformatory side of the question alone, there will not be much difficulty. The first part of the definition of habitual drunkards as contained in Mr. Dalrymple's Bill will suffice :—

"A person shall be deemed an habitual drunkard, who, in consequence of the habitual intemperate drinking of intoxicating liquor, is dangerous to himself or to others, or is incapable of managing his affairs."

It may be asked whether the definition does not imply that the person is a proper subject for a lunatic asylum. Truly it is an insanity, but it is not an insanity which can be properly treated in a lunatic asylum ; it is a partial insanity which the law does not recognize as fit for lunatic asylum treatment. The proprietors of lunatic asylums are as glad to get rid of such patients as ever the patients are to discharge themselves, and the victims are seldom really the better for the short detention which the law now allows ; like short gaol imprisonments they are useless for curative treatment. The evidence of all those

who are qualified to give an opinion is against detention in ordinary lunatic asylums, as being alike injurious to both the lunatic and the dipsomaniac. The witnesses are all in favour of special houses for their treatment, inasmuch as the victims are not insane in the ordinary interpretation of the term except when under the influence, or suffering from, the effects of intoxicating drinks.

If a man has been the subject of homicidal mania during a drunken fit and has taken or attempted to take another man's life while under the influence of the disease, we do not hesitate to confine him for the rest of his life. What difference is there in the case of the homicide and that of the habitual drunkard. We confine the latter for seven, fourteen, or twenty-one days, as a punishment over and over again. Is there any real hardship in extending the time sufficiently long to reform him? not as a punishment, but as a means of cure; not in a gaol, but in a building set apart from both criminals and lunatics, and where he need not, by confinement therein, be branded as he may be by incarceration in either of the former institutions. We extend the time of confinement without hesitation when we send a boy to an ordinary Reformatory for four years, or a child to an Industrial school; why we should not treat the dipsomaniac in the same manner has yet to be proved. We should then be spared some repetitions of such evidence as that given by the Coroner for Liverpool, who, when describing the effects of free trade in drink in that town, said—

“ That he shared, though unwillingly, in the harvest of death with the publicans, in fees paid to him for inquests held on deaths caused by crime and drunkenness—deaths by falling down stairs or against curb stones—deaths by being run over in the streets while helpless—deaths of infants overlaid by their parents when drunk—deaths by murder and manslaughter, committed under the influence

of liquor; publicly protesting against the prevalence of this drink, this everlasting drink, this unpunished, unrestricted, desolating drink.”

I do not think it is necessary to take up the second part of Mr. Dalrymple’s definition, which refers to three previous convictions in a court of summary jurisdiction within a preceding six months, because I think that if the first part of the definition is adopted the second is altogether unnecessary. I wish also to keep clear of the penal and to take up the reformatory part of my subject only, although it would be right to produce evidence of penalties previously incurred, in proof of the probability of the establishment of the disease.

A clause in the Licencing Act, 1872, gives power to the police to take proceedings against any one found drunk in places of public resort. Let this power be extended to individuals having a *bonâ fide* interest in the reformation of the victim, either as guardian, next-of-kin, heir-at-law, or head of the establishment in which he resides. Let the proceedings be always taken in a court of summary jurisdiction, and let them apply to drinking in private as well as public. Let the magistrates have power, if they think fit, to give costs against the pursuer if they are of opinion that it was not a *bonâ fide* case for inquiry, and let the magistrates determine the time during which the patient shall be under treatment, and we have nearly all the alteration of law that is required.

If to this power some of the clauses contained in the Reformatory Schools Act, 1866, be also combined—viz., those which give authority to the Treasury to contribute, power to justices to sentence, power to compel friends to contribute to the maintenance of the person, power to local authorities to erect local reformatories, power to guardians to contribute to maintenance out of the

rates, with penalties on those who assist inmates to break the rules of the establishment. And if with these are joined the clauses in the Lunacy Acts referring to visitation and control of management by justices, and also the appointment, when required, of a committee or person to act on behalf of patient during his treatment; we shall have all the machinery that is really required to frame an Habitual Drunkards Bill, which shall at any rate be permissive, and will show in the course of a few years how far it may be prudent to travel on the road which tends to cure the disease alone. There should also be an arrangement by means of which a person should be able to be received in such an institution on his own petition, and machinery by means of which the visitors could revise the sentence if they thought fit, and very little else will be wanted to complete a permissive measure for dealing with the disease.

It has been argued that it would be very wrong to allow a person to commit himself to a reformatory for inebriates because he might change his mind. Let us bring this to the test of custom, premising that the committing authority would require evidence that the application was *bonâ fide*; would it be right to allow a man to withdraw from a contract because he had miscalculated his own power, or to give up the purchase of an estate because he found it inconvenient, or to compel a steamer, in which he had embarked for Australia, to turn back because he had altered his mind? He had determined that his was a proper case for treatment, and the committing authority had verified that opinion by proper inquiry, therefore there would be no reason whatever for allowing the plea of change of mind; those who advocate the *statu quo* on that ground show little knowledge of matter.

A Bill, therefore, containing a definition with half-a-dozen permissive clauses, and a reading of certain clauses from the Reformatory Schools Act, 1866, and some of the provisions contained in the laws relating to lunacy, and the requisite machinery would be forthcoming without any further change in the law.

We should require the adaptation of existing laws to the case of habitual drunkards, as defined in the Bill, so that the local authority could deal with each case. There should be power for others than the police to take proceedings against the drunkard ; all the other machinery is already to hand. I commend these requisites to the attention of the Legislature, hoping that some may be found willing to divest themselves of the differences between Tweedledum and Tweedledee, and help those who at present cannot help themselves.



NOTE.—Since the above paper was read, the Author has received a communication from Dr. DODGE, of the New York State Inebriate Asylum, who says :—“ I am informed on reliable authority that the cures in this Institution have been a fraction over 62 per cent. These facts were obtained by a careful correspondence with the friends and guardians of patients who had been under care and treatment in the Binghampton Asylum.”

Dr. LYMAN CONGDON, the late Superintendent of the same Asylum, reports “ That an effort made during the year to ascertain the number of permanent cures of all who had been under treatment, revealed the remarkable fact that about 60 per cent. were cured or remained sober after periods of from four to five years.”

Mr. DAY, the Superintendent of the Washington Home at Boston, Mass., says, "That from general evidence in their possession, of the 5,000 persons admitted since the organization of the Asylum, fully one-third have been permanently reformed."

Dr. HARRIS, of the Franklin Reformatory Home of Philadelphia: "The proportion of cures is not known positively, but from general statistics it is believed to be equal to the failures or hopeless cases."

Dr. CHARLES EARLE, of the Washington Home at Chicago, Ill.: "That out of 970 cases admitted between December, 1863, and January 1st, 1875, about thirty per cent. were permanently cured and reformed."

The Rev. J. WILLETT, of the Inebriates' Home for King's County, Fort Hamilton, New York: "That about two-thirds of all the patients who had been turned out were doing well."

The Superintendent of the Maryland Inebriate Asylum does not believe in making glowing statements about permanent cures. He says: "There have been about 250 inmates, and it is believed that one-third of these are restored to the pursuits of sober and successful industry."

The kindness of Dr. Dodge, in forwarding information from America, enables the Author to append these important statements to his paper.

It appears from the same papers that the Medical Superintendents of American Institutions for the insane, at their annual meeting in June, 1875, passed a resolution endorsing the treatment of inebriety in separate institutions and recommending the establishment of hospitals for inebriates in the various States and in the provinces.

The following letter is from Dr. GEO. WAKEHAM,
Belmont Retreat, Quebec :—

BELMONT, QUEBEC,

March 26th, 1876.

DEAR SIR,—In reply to your letter of 3rd March, I beg to enclose to your address our circular, which, at this moment, is all the printed matter we have. I may here add that the Retreat is a private institution, opened in the fall of '64, and has admitted and treated about 400 patients, of which about 50 per cent. have been cured. The great difficulty with us is, that we cannot keep the patients a sufficient length of time to effect cures in greater numbers. There has been recently an institution of a similar nature as this in Montreal, and another in Halifax, but not of sufficient duration to report progress. We are looking forward in Canada to the time when public opinion will be much more enlightened in reference to the drunkard, and view drunkenness as it really is, a disease; and then we may get legal control of the inebriate, backed up by the authority of law, when a much larger percentage of cures will be obtained than we now can, as long as it is left to the voluntary choice of the patient to leave the institution before a cure has been effected. There are a party who very unwisely are opposed to treatment by compulsion, and are clammering to make and keep it voluntary, and to conduct these establishments after the manner of fashionable boarding houses, and trust to the honour and good behaviour of the patient. My experience, however, with this class of patients has convinced me that there is very little honour where liquors and tobacco are concerned.

Yours very truly,

G. WAKEHAM.

Dr. Carpenter.







