Retrospective address, for the year 1893 / by Rustomjee Naservanjee Khory.

Contributors

Khory, Rustomjee Naservanjee. Royal College of Surgeons of England

Publication/Creation

Bombay : Printed by J.B. Karani, 1894.

Persistent URL

https://wellcomecollection.org/works/xh4yv4tb

Provider

Royal College of Surgeons

License and attribution

This material has been provided by This material has been provided by The Royal College of Surgeons of England. The original may be consulted at The Royal College of Surgeons of England. where the originals may be consulted. This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.



Wellcome Collection 183 Euston Road London NW1 2BE UK T +44 (0)20 7611 8722 E library@wellcomecollection.org https://wellcomecollection.org GRANT COLLEGE MEDICAL SOCIETY.

to the Royal Calley of Surger

RETROSPECTIVE ADDRESS,

FOR THE YEAR 1893,

BY

RUSTOMJEE NASERVANJEE KHORY, M.D., M.R.C.P., (LONDON)., L.M., (BOMBAY), HONORARY PHYSICIAN, SIR D. PETIT & BAI MOTLIBAI HOSPITALS, &c.,

PRESIDENT.



20 FEB 94

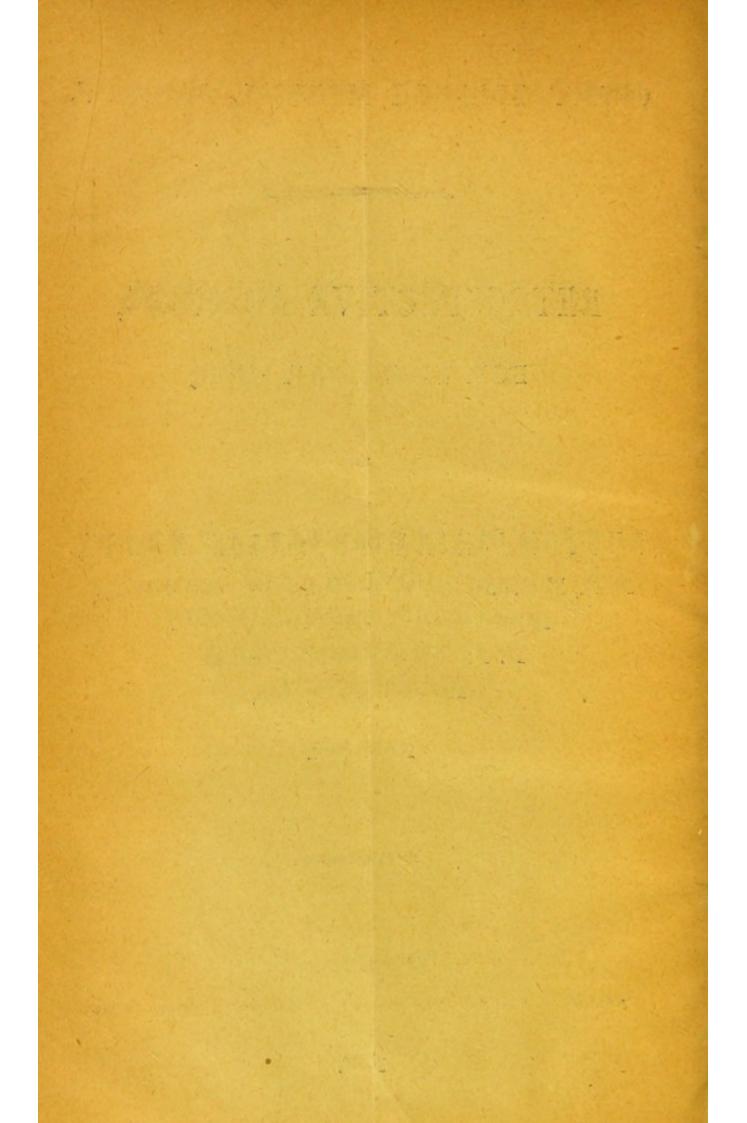
BEA



Bombay.

PRINTED BY J. B. KARANI & CO., LTD., "STANDARD" PRINTING WORKS.

1894.



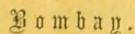
GRANT COLLEGE MEDICAL SOCIETY.

RETROSPECTIVE ADDRESS, for the year 1893,

BY

RUSTOMJEE NASERVANJEE KHORY, M.D., M.R.C.P., (LONDON)., L.M., (BOMBAY), HONORARY PHYSICIAN, SIR D. PETIT & BAI MOTLIBAI HOSPITALS, &c.,

PRESIDENT.



PRINTED BY J. B. KARANI & CO., LTD., "STANDARD" PRINTING WORKS.

OFFRO

1894.

Digitized by the Internet Archive in 2015

https://archive.org/details/b22320799

ADDRESS

DE RUSTOMJI NASARVANJI KHORY, M. D.,

M. R. C. P., (LONDON.)

PRESIDENT

OF THE

GRANT COLLEGE MEDICAL SOCIETY

DELIVERED AT THE

ANNUAL MEETING January 23rd 1894.

GENTLEMEN,

It gives me great pleasure to address you once more at the close of another year in the existence of our Society and it is the first year after the change in the constitution of the Society and the third of my stewardship as your President. You will no doubt agree with me that we have reason to congratulate ourselves on the marked progress our Society has made in every direction.

Last year when I had the honour of addressing you, I expressed a hope that with the change in its constitution the Society would be in a better position to carry on its useful work and I rejoice to see that the hope has not been disappointed. In the short space of 12 months it has been its good fortune to secure the sympathy of two of the most enlightened Princes of India, namely, H. H. the Maharaja Saheb Sayajirao, G. C. S. I., Gaekwar of Baroda and H. H. the Maharaja Saheb Takhatsingjee G. C. S. I., of Bhownuggar, who have done the Society the honour of becoming its Patrons and thus strengthened its financial position and added to its status and usefulness. We have also done a graceful action in doing honour to some eminent workers in the cause of medical science in India by making them Honorary Members of our Society, namely, Dr. H. V. Carter, Sir W. J. Moore, Sir G. Birdwood and Sir W. G. Hunter.

During the year under review two events of some importance and of a somewhat unique character have taken place in connection with the Society, marking a distinct epoch in its existence: I mean the report of the Quinine Committee and the series of special meetings of the profession convened under the auspices of the Society to discuss the question of Fever as a whole. As for the report of the Quinine Committee I hope you will all agree with me that its importance cannot be overrated, as it is of the utmost value to medical men to determine the true properties of such a useful drug in a notoriously malarial country like India. I am sorry to observe that the younger members of the profession and even some of the older ones, relying on individual experiences gained in a few solitary cases feel nervous and hesitate in using this important article. Now this report, embodying as it does the collective experiences of a larger number of medical men, having had many opportunities and facilities for forming an opinion in course of their practice will, even if it did not convince, at least supply them with ample materials for guidance. One peculiarity of the report is that more than two-thirds of those whose opinions were asked are in favour of using Quinine during pregnancy, while of the remaining third nearly one-half are doubtful or vacillating in their opinions. This clearly shows that the danger, if any, of this practice was greatly exaggerated and that the hesitation on the part of some members of the profession in using Quinine during pregnancy was due more to tradition than to actual experience.

The report having placed this matter in its true light will enable us to try the drug with less nervousness and more confidence and a few years hence perhaps a similar inquiry will place us in a position to learn the exact truth from actual experience gained by a larger number of medical practitioners and thus free us from traditional fears and prejudices. SurgeonMajor H. P. Dimmock the Chairman, and Dr. H. K. Tavaria the Secretary, of the Quinine Committee deserve the thanks of the Society for their trouble.

The second important event to which I have just referred is the series of special meetings convened to discusss the question of Fever as a whole. Of all the events of this year or for the matter of the previous years in the history of the Society, I attach the greatest importance to these professional meetings which will be memorable not only in the history of our Society but also in the history of the medical profession in India, both on account of the length of the period during which the discussion was continued, and on account of the character of such discussion. The question is really a very wide one and admits of a considerable difference of opinion, though recent researches both clinical and experimental have advanced it many steps. It is however in such an unsettled state yet that it leaves ample. scope for differences of opinion of the most contrary character. There are so many varieties of fever and so prevalent is the disease that we are liable to jump to definite conclusions from. experiences gained during a limited period from a few stray. cases, but those of us who have had a larger and longer expe-. rience of this disease are struck with the fact that the more we study the question, the more difficult and complicated becomes the problem ; hence all our knowledge and conclusions must be regarded as merely provisional. The difficulty of the problem will be evident from the fact that our ideas about the disease have not only been modified from time to time, but in many cases we have had to retrace our steps and come to regard our older and discarded conclusions with favour. Hence in approaching this question either with a view to discuss or investigate it for ourselves, we must do so with an open mind and with due regard to the opinions of others. Extremes should always be avoided in every concern of life, but in no case are they to be condemned, so much, as in the discussion of the fever question. It is therefore with a feeling of great regret, and after a good deal of reluctance that I am obliged to refer to a circumstance, which however much I should have liked to avoid, I feel bound as President of the Society to bring

to your notice. I mean the remarks made against our profession in a communication which has appeared in the Indian Medico-Chirurgical Review of November 1893 under the heading of "Fever and its Rational Treatment."

As to the merits of the contentions and opinions contained in that article I feel that I am not justified in giving my individual opinion. We are all entitled to hold and express our own opinions individually and I am not directing my remarks against that part of the communication. It is against the extreme intolerance and the almost offensive language used against those members of the profession who do not happen to agree with the views expressed therein that we must protest. To show that I am not doing an injustice to the writer of the article in condemning its tone I shall with your permission read a few extracts.

"I trust that it has been made sufficiently clear that the present day treatment of fevers by antipyretics of the tar products and heroic doses of quinine with blind stuffings with extracts and extractives is irrational, injurious and altogether unjustifiable. Humanity and the honour of the profession alike demand that no conscientious physician should stoop to use such dreadful blood destroyers and constitution shatterers, just because his less scrupulous or more ignorant neighbour prescribes them, to snatch his patient and keep an hold over him by pleasing him with the false breaks in his fever which the antipyretics give".

" Is it not, then, incumbent on the physician not to meddle with his patient, and to be rational and human enough to stay his hand from poisoning the patient's blood by such detestable anti-'s as the derivatives of tar products, and from doing the hacking and homicidal work of stunning the neuromuscular system generally and the neuro-muscular apparatus of the heart, the very pump of life, with his false panacea of quinine on the pretence or in the false belief of battling the germs with his heroic doses! Heroic thought and heroic work, indeed, to interpret a revolt and kicking of the system against quinine into a call for subduing and smothering it with dead weights of his so-called sheet anchor! "What skeletons and pale ghosts these antipyretics and stuffing processes make of our fever patients, and what a large, and appalingly large number of them are sent on to join the majority."

"Which essences and extracts but putrify and resolve themselves into poisonous gases, liquids, and solids in the dirty gutter of the unhealthy slimy alimentary canal of fever patients,—shows not only a most deplorable ignorance of the essential conditions of resolution and repair, but is guilty of neglect to save the blood and circulation, and of actually doing his best to poison the blood and depress the circulation by the powerful chemical poisons administered by him under the guise of antipyretics, and engendered for him by the rotting essences and extracts."

From the above extracts it will be seen how objectionable is the language used, more especially as this Fever question is still in such an unsettled state and in face of the fact that the statements and opinions expressed therein have been called in question and in my opinion proved to be untenable. I think the profession will agree with my remarks when they will have before them, the transactions of the Society which will contain the whole discussion on Fever.

In discussing medical questions it is our first duty to bring to its consideration and discussion a calm and unbiassed scientific spirit and an absence of intolerance and vehemence of language. As scientific men we are bound in discussing a question to weigh all its pros and cons with moderation and in this way alone can we advance the cause of science. I need hardly say that you will all agree with me in discouraging as much as possible any acrimony or bitterness in the discussion of scientific questions lest the well-known complaint that—" Doctors differ" be converted into ' Doctors abuse.' I hope my remarks will be taken in good part as they are meant to deprecate a practice which is objectionable in itself and calculated to do harm to our profession.

Again although I would rather be silent, my position as President of the G. C. M. Society and as a medical practitioner, compels me to say that some of our medical men are too free in criticising the treatment followed by their professional brethren. We know that the question of the treatment of diseases is in an unsatisfactory state, and to express an adverse opinion as to the plan of treatment followed by a professional brother especially in the presence of the patients as is often done is calculated to produce a great amount of mischief. It has manifold disadvantages. In the 1st place it unsettles the mind of the patient and shakes his confidence in the efficacy of the treatment followed and consequently in his medical man, with the result that the treatment does not produce the desired effect. 2ndly, it places the medical man following a different plan of treatment in a very awkward position and at times brings about his professional ruin, and lastly, if the case proves fatal as sometimes it must happen with all our skill, the patient's family naturally carry away the idea that such fatal result was due to a particular line of treatment, a circumstance which always adds to the grief and wretchedness of the situation. If we were to reflect on the mischief produced by such thoughtless criticism my remarks ought to be taken in good part, instead of being resented.

In connection with this discussion on Fever any words from me will be superfluous. When the transations are ready, the mass of information contained in them will be found of the greatest use and importance to the profession at large, and I hope that the Committee appointed to continue the investigation will by hitting upon some really useful method be enabled to clear some of the difficulties of the subject. I will only content myself with saying a few words about the small pamphlet of Dr. N. N. Katrak and the part he took in bringing about this discussion. However much, one may differ from the opinions expressed in that brochure, there can be no doubt that the subject has been handled in an able manner and a great deal of matter has been given in a very concise form. The language is clear and free from ambiguity and whenever the writer has occasion to differ from others such difference of opinion has been expressed in a language and tone free from acrimony. The brochure is not only valuable as containing a mass of matter in a condensed form, but as suggestive of the various directions in . which further

inquiries and investigations might be made. This part was fully elaborated in the exhaustive reply which he gave in closing the -debate and the Committee would do well to take into consideration the various suggestive queries with which his reply abounds in deciding upon a particular course of action. We hope the transactions when published will be in keeping with his former efforts and be worthy of the Society and of the character of the professional meetings. The Society and the profession are indebted to Dr. N. N. Katrak for such a very valuable contribution as well as for bringing about these meetings and carry ing them out to a successful issue. Before I proceed to review the regular work of the Society, I beg to offer a personal explanation. You remember, gentlemen, that in March last I left Bonibay to take part in the Medical Congress at Chicago as a delegate of the Society. I am ordinarily a very bad sailor. But during my voyage I had rough sea and that left me so weak that I could not proceed to America in time, and hence was forced to forgo the pleasure and honour of taking part in that Congress. It is certainly a matter to be regretted, but none regret it more than myself. Coming to the regular work of the Society we have every reason to be proud of the work done during the past year. The communications as usual were of a high order and I am glad that old practitioners like Dr. A. P. de Andrade still keep up their interest by contributing valuable communications to the Society.

FEBRUARY.

The first paper was by Dr. L. P. Dhargalkar, namely, Notes of a Case of Hepatic abscess. These cases of Hepatic abscess are of peculiar interest to us in India. In one sense this disease is peculiar to this country and whatever light is likely to be thrown on its pathology and treatment must be derived and expected from practitioners in India. Our idea as to its treatment has been considerably modified since the last decade, and the marvellous results of antiseptic surgery now encourage us to open such abscesses freely. There can be no doubt that free incision generally gives the best results, but with regard to the details of conducting cases after the incision there is some difference of opinion. However this is a triffing matter and had best be left to the experience of individual practitioners and to the peculiarities and necessities of the case. The Society is greatly benefited by having such cases brought before it as it enables members to compare notes, and to keep themselves in touch with the knowledge of the various modifications that are ad opted in the details of their treatment. The paper of Dr. Dhar galkar is as usual very full and carefully prepared and you will join with me in congratulating him in having had opport unities of treating such cases.

MARCH.

Notes of 2 cases from Dr. M. H. Bhatwadekar. I am glad that mufossil members continue to keep up their interest in the good work of the Society. In my opinion the opportunities for observation there, are greater than they are here, because medical men in the mufossil are in sole charge of Dispensaries and Hospitals and are thus in a better position to keep a careful watch over their patients, throughout the course of their sickness and disease. These two cases were very interesting but no discussion took place, as the question of Fever as a whole was intended to be discussed separately.

APRIL.

I had the honour of reading a paper on 2 gynæcological cases treated in the Sir Dinsha Petit Hospital. They were (a) amputation of the cervix for elongated cervix and (b) a case of a tumour of the anterior wall of the uterus by operation. In both cases recovery was the result.

JULY.

Notes of a case with a tendency to protracted gestation, the successive periods being 18 months, 21 months, and 54 months (communicated) by Dr. H. K. Tavaria. Such cases are more interesting than useful, and as generally they are not observed and followed with that amount of care necessary for scientific purposes, hence they are generally without any practical results. There was another paper by Dr. Ismael Jan Mahamed, name-

There was another paper by Dr. Ismaer ban mananer and ly, Notes of a Case of Tetanus. Cases of Tetanus are rarer now than they were some years ago; and this is due to our better knowledge of sanitation. Hence it is always good to have such cases before the Society from time to time to keep ourselves in touch with the knowledge of this disease. From the discussion I find that there was a considerable difference of opinion, even with regard to the diagnosis of the case in question. Still the case was sufficiently instructive and interesting and there can be no doubt that there was something special about it and consequently room for considerable discussion; and Dr. Ismael deserves the thanks of the society for bringing it forward.

AUGUST.

There were 2 papers in this month also, one by Dr. A. P. de Andrade, namely, Brief Notes of a Case of Heart-disease, with Remarks on the Action of Digitalis. It was a long paper which could easily have been divided into two parts. Dr. Andrade has handled an obscure and difficult subject admirably; and I am glad to find that he takes such a keen interest in diseases of the Heart, which he has made his speciality. Of course it is open to any one to differ from the conclusion he has come to, namely, that *Bruit* can be cured by Digitalis and Iodide of Potassium, but he deserves great credit for having conducted the case so successfully.

The next paper was by Dr. Dh. R. Tata, namely, Notes of Cases of Disorders of the Nervous System treated by Hypnotism. This paper was important in one sense, not because there was anything new in it, but because it was the first paper of its kind read before the Society. Hypnotism was practised some centuries ago, but as it fell into the hands of quacks and charlatans it came into disrepute. If it had been practised by qualified and scientific men, by 'this time sufficient materials would have been forth coming to enable us to decide the question of its practical utility or otherwise. At present it is on its trial, and there is one satisfaction, viz. that it is now being tried by persons best fitted to carry on such experiments and it is to be hoped that in a few years the profession will have ample materials to judge of its merits or otherwise. From what is known of this agent at present, one thing stands out very prominently and that is that it must be used by only conscientious and thoroughly honest and respectable persons, as in the hands of the unscrupulous it is calculated to do the greatest amount of mischief both to the patient and to the society at large. I hope Dr. Tata will continue his investigations in these most abstruse of Pschychological phenomena always remembering that the point to be determined is not that it does a certain amount of good in certain cases but whether the good it does is greater than the mischief it may do. I congratulate Dr. Tata on selecting this subject for further investigation.

SEPTEMBER.

Dr. L. B. Dhargalkar read a short paper on the Mandrake plant. The paper brings into notice a well known, but extremely rare plant; and it was a good idea on Dr. Dhargalkar's part to give to the members of our Society an opportunity of seeing the plant for themselves and of collecting information connected therewith. We hope such plants will be studied not as curiosities, but for their therapeutic value. In the same month there was another paper on the Present Nomenclature of the Heart Sounds by Dr. A. P. de Andrade. Like his previous paper it was also a long communication; but the ability with which he has handled the subject has more than made amends for its length. We hope that old practitioners like Dr. Andrade will continue to take an interest in the work of the Society as they have hitherto done. Since October there were ten meetings, one to consider the report of the Quinine Committee, and nine for the discussion of the question of Fever as a whole, mention of which has already been made.

Many events of medical interest have taken place in the course of the year. The first and most important is the Report of the Leprosy Commission. The results of the inquiry and the conclusions of the Commission are so well known to the whole profession that any remarks at this late stage from me would be superfluous. I will only say, that long before the Commission's report was made public, the profession in Bombay had arrived at very nearly the same conclusion. I hope that the scare and the panic to which this question had given rise sometime ago will now abate, and the attention of the public will be directed to the alleviation of this dire disease. Though compulsory segregation has been proved to be unnecessary, and therefore cruel and oppressive, I hope the public and the Government will not on that account shirk their responsibility by doing nothing in this matter.

The humane work done at Matunga as you know is due to the zeal, perseverance and organizing talents of Mr. H. A. Acworth, our worthy Municipal Commissioner, and clearly shows that without compulsory segregation, much can be done in relieving those afflicted with that disease ; and it behoves every Municipality to take a lesson from what has been done in Bombay. We know that the great philanthrophist of our city, Sir D. M. Petit, Bart., has set apart one lac of rupees for a Leper Asylum to be erected at Trombay. So far as we know, nothing has been done yet; and if my information is correct, Government is going to decline the donation on the ground that it is not sufficient and that unless that amount is supplemented by a further sum of money it is not prepared to take this useful work in hand. Still I hope that Government and Sir Dinsha will not allow such charitable work to fall through for want of a small additional

Last year I suggested that in view of the splendid results obtained by the Pasteurean method of the treatment of Hydrophobia, a Pasteur Institute would be a blessing in India. I am glad to say that a movement has been set on foot in earnest and a committee appointed for the purpose of arranging the preliminaries. In their programme they have included a good many items, though as a medical man I would like to see and encourage researches in every branch of our medical science. Still I hope if they fail to carry out the ambitious programme they have set before them, they will not allow this important part of it, namely, the establishment of a Pasteur Institute, to drop. I think that if the Committee were to direct their sole attention and energy to the establishment of such an institute only, they would earn the everlasting gratitude of the people of this country.

Though I believe the profession here has made up its mind with regard to the use and abuse of alcohol, the question is al-

ways brought before the public in one form or another by the anti-alcoholic party. Science never fears inquiry, but always welcomes it. In August 1893 the fourth International Anti-alcohol Congress met at the Hague. It was a very representative Congress, and delegates from most parts of Europe were sent there. I am induced to take notice of the fact this year, because of the prominent part played by one of our own profession, Sir Dyce Duckworth. Those who have read the substance of his speech delivered there will be struck with the impressive way in which he marshalled his facts and opinions, and so firm was the ground on which he stood that he actually submitted to the Congress a series of seven propositions embodying his views. We in India have from time to time discussions on this important subjectsometimes started by Temperance Societies and sometimes in connection with the religious customs of the people. We have here an alcohol drinking population and a much larger one abstaining from it altogether; but human nature is the same everywhere; and the high pressure of life, which is the result of modern civilization produces the same effect in Europe as in India. Those who eschew alcohol do not remain without stimulants of some kind, and its place is taken by such drugs as Tobacco, Opium, Hemp (Ganja), &c. To me it seems that stimulation is necessary in some form or another at some period of our life here as well as in other parts of the world. The main question therefore is which of these various articles are required by or suited to a particular people or locality. The Parsees have been taking alcohol in a very moderate quantity from time immemorial; and yet this community has kept up its reputation as the soberest, healthiest and the most intelligent community in India. The Hndus and Musulmans, at least some portion of them who cannot take alcohol on account of religious traditions, take tobacco and when this does not suffice to satisfy the craving for stimulation, they take opium or ganja in one form or another. It is not the use, but the abuse of or over-indulgence in these various articles of stimulation that is injurious; hence to condemn any of these in toto, because it is abused is altogether unscientific and unjustifiable. Medically, we know that alcohol is one of the most useful drugs of our pharmacopœia, and I believe there can be no

two opinions about it. It is only in connection with its habitual use that there can be any room for difference. I for my part am of opinion that the use of this article if taken moderately is beneficial to human health. Unfortunately the stuffs sold in the name of genuine spirits and wines, &c., are not all that could be desired ; and there is an impression which to me appears to be well founded, that these stuffs are in a great degree adulterated and consequently are capable of doing great mischief. Where as the local production of country liquors from Mohwra and Toddy, which formerly could be obtained genuine and of a superior quality and which was the usual drink of the people in India, has been also lately deteriorating in quality. It is not my business to deal with the causes which have brought about this state of things with regard to Toddy and Arack ; but it is to be hoped that some means will be found out, which will rehabilitate in its former purity and vigour, this useful and cheap industry of India. Again I note with regret the disappearance of the continued diminution of the consumption of toddy which when fresh is the most refreshing and healthiest of all drinks. This leads me to the consideration of two very important events which has engaged the attention of England and of the whole of India for the last few months, I mean the Hemp and opium Commissions.

Ganja is one of the few articles which mankind has taken to drinking or smoking for its stimulating properties. Compared with the other drugs, namely. Alcohol, Tobacco, and Opium the effects of over-indulgence in it are the most unwholesome. As a medicine its value is so well known to us that I refrain from dwelling at any length on its merits. It is only as regards its habitual use that there is room for difference of opinion. From my experience as well as from the evidence that is being taken by the Commission it seems to me that even this drug is not so injurious as it has been represented to be, though I would like to see it replaced by the opium or alcohol or even tobacco; but its comparative cheapness is a point which should not be lost sight of. It is true that the habit generally has its origin in its being [taken for its medicinal properties or on some festive or religious occasions as a matter of custom, but if

used in strict moderation I see no valid reason why it should not serve the same purpose as opium does, as far as stimulation is concerned, but this drug requires greater care and its ill effects are manifested sometimes even in medicinal doses. The question to be decided by the commission is not whether it is useful if taken in moderate doses which I am sure you will all admit, but whether those who use it habitually can use it moderately. If the majority of those who use it are found to use it in excess, then by all means Government would be justified in suppressing this practise. If the inquiry be directed towards that end I think a real practical object will have been attained. I for my part am fully of opinion that a moderate use of it is not injurious, and it supplies to the poor classes a drug which satisfies universal craving for some kind of stimulation; its excessive indulgence is injurious. The only question therefore as I have said is, can the majority of the habitual consumers of this article observe strict moderation.

The next natural step for me is to consider the important question of opium. It is a very wide question and a very complex one. It is not only a medical question, but a moral, social and political question ; and it is useless to discuss it in only one of its aspects. Unfortunately this question has been mixed up with religious controversies and hence moderation in its discussion is extremely difficult. To us as medical men the problem presents itself in a very definite form ; and if our profession were to lay their case in a complete form before the Commission, the question would be advanced a great deal towards solution. The questions to be decided by the profession are, 1st can opium satisfy the craving for stimulation; 2ndly does its moderate use when taken habitually in any way produce injurious effects ; 3rdly do excessive doses injure the constitution to a greater extent than does ganja, alcohol or tobacco ; 4thly does its use in any way injuriously affect society atlarge by making its consumers less active, in body, or mind and more troublesome as is the case with alcohol; 5thly does its administration to children in the shape of Balagoli and in a crude form affect them injuriously and 6thly are such children when they grow up, weak in

body and mind from the effects of this drug (taken in childhood) and are they incapable or unfit to discharge their duties as members of a well regulated society.

With regard to this question I may observe that taking into consideration the prevalence of the opium habit, there can be no doubt that it does serve the purpose of supplying the craving for stimulation. In India this drug is of a peculiar value, because religious customs of the Indian community prohibit the use of alcohol or tobacco, hence only two drugs are left, namely, hemp, (ganja) and opium; and there can be no question that opium is by far the better of the two. Again India is admittedly a malarial country. It is the opinion of many belonging to our profession that opium acts as a prophylactic, and that people living in malarial places instinctively resort to this drug. The evidence in connection' with this first question seems to me to be pretty conclusive. Again, the extreme poverty of the people of India must betaken into account. The poorer class of people are said to live on a starvation diet and they take this drug to deaden the agonizing craving for food. Much may be said for and against the use of opium for such a purpose, but we have to deal with facts; and you will agree with me that taken as it is to allay the pangs of hunger it serves a useful purpose. The rich take it as we do alcohol; and it is pretty generally admitted that it does not affect them injuriously, because they live in plenty and comfort, and for such people there can be no objection whatever. Having admitted that opium is capable of satisfying such a craving, the next question is whether in the minimum quantity required for such a purpose it is liable of doing any harm in other directions. This is purely a question of facts and experience gained in a large number of cases and in various localities and conditions of life. Many people are in a position to supply the public with ample materials on this head, but unfortunately the matter is discussed in a controversial spirit and is made a party question; hence the facts and the experiences which are placed before the public are tinged with the bias of partisanship. It therefore becomes a task of the utmost difficulty to find out where and what amount of truth there is in the diametrically opposed statements. It appears to me that the truth lies some where in the middle, *i. e.*, it is neither such a deadly poison as the one party alleges nor such a safe and harmless article as the other party avers, the effects varying with the different circumstances under which it is taken. One individual may be benefited by a particular dose, the same dose in the case of another person might be said to do no harm, while the same quantity in the case of a third person might do positive mischief. Again localities may have some influence on its effects. A moist and warm climate may produce general relaxation of the whole system and consequent proneness to exhaustion and pain. Under these circumstances opium may do some good by bracing up the system temporarily and deadening the pain.

There is nothing to be wondered at in the statement that habitual consumers are none the worse for the drug, because we know that there is in the human system a power of conforming to surrounding circumstances, hence the common observation that "habit is a second nature" is true in this case. People become habituated even to large doses of arsenic without any ill effects. In India we see every day people accustoming themselves to various practices admittedly injurious. We see around us every year people fasting for days together, but they are none the worse for it. The Ghatties and Naoganees as also the Madrassees consume amazing quantities of chillies, a fraction of which would make many of us certainly ill with dysentery, and yet these people are none the worse for it. Such examples might be easily multiplied. Suffice it to say that people can become accustomed to opium with out any ill effects, but it does not follow that because some can take it with impunity all will escape and some may fall victims to its injurious effects. It is however neither fair nor scientific to fix upon one kind of cases to the exclusion of others and set them up as examples of the ill effects of opium.

Again we know that ailments of the body are not always due to one cause alone. At least when we investigate the origin of diseases we do not attribute 50 any one cause in particular the sole power of producing this or that disease, but weigh the relative share which each of them may have had in bringing it about. It is therefore necessary when we find a shattered constitution in an opium eater to enquire whether there are other circumstances which might have produced similar effects apart from opium. It is possible that in such cases such debilitating causes as excessive venery and drink, late and irregular hours and other depressing factors may be present. It is on some such line of inquiry that the question must be investigated to be of any value. As it is, the evidence on this head is not of a character to enable the Commission to arrive at a satisfactory result.

With regard to its injurious effects in excessive doses the question is whether, there is anything special about this drug. We know that excess in everything is injurious even the excess of healthy food; and that is no wonder if the excess in this leads to the same result. The question is whether the results are so bad or so injurious as those produced by alcohol or bhang. We know that by the excessive use of ganja, insauity results in many cases; that it not only injures the individual physically and mentally but renders him dangerous to society. We know that the excessive use of alcohol produces momentary excitement of a violent character and is so far dangerous to society; but when taken for a long time it produces delerium tremens etc., and a sort of insanity which does no active harm to society. Besides the effects of excess in alcohol are too well known to need any lengthy remarks from me. It gives rise to scirrhosis, hepatic abscess and chronic degeneration of important organs and tissues. Hence the question to be decided is, what are the effects of excessive and what of habitual use of opium. As to the excessive use of opium there can be no doubt that it does shatter the constitution by interfering with the digestive power, whereby a state of inanition is produced. Besides by injuring the nervous system by its sedative and depressent properties it produces low and sluggnish action of the whole system and thus shatters the victim though he does not feel it on account of its analgesic

01

properties. As far as statistics and the opinions of those best fitted to judge of this question can prove, this drug does not render even in excessive doses an individual an active source of danger to Society, as he is too enfeebled in body and mind to do any active mischief. I do not think insanity results even from its excessive use nor does it make criminals of its victims as alcohol and hemp (ganja) do. In this respect opium is superior to these two drugs.

With regard to the influence of its habitual use let us watch its effects on society, both in excess as well as in moderation. The evidence before the Commission is of a definite character and is valuable and reliable. I think both sides take an extreme view of this matter; but those who decry its use, more so, than those who defend it. There is not the least doubt that a very large number of the consumers of this drug appears to all intents and purposes to be physically as active and possess as much enduring power as, if not more than, healthy people, and such persons are useful members of society. Whether the effects of opium are more deleterious on the mind of the consumers, is a question of which there is very little evidence; hence to pronounce any opinion in this direction is not advisable. What percentage of the consumers in general lead a useful life or what number become useless members of society it is difficult to say; but I am inclined to believe that a majority of them remain useful members. I am willing to admit that there may be some impairment in activity, judging from a healthy standard, but practically it can be disregarded as having no influence on society.

Balagoli is a preparation of opium and demands in this connection a separate notice. You will remember, gentlemen, that some time ago you received a circular from the Honorary Secretaries inviting your opinions in this matter in reply to a letter from the Collector of Bombay Land Revenue and Opium (J. M. Campbell, Esquire, C. S.). If the inquiry into the opium question had been conducted on some such basis I think much of the bitterness in connection with this question would have

disappeared. The opinions will be published in the transactions; and I hope they will be placed before the commission as an independent expression of opinion of the members of our society. You will allow me to speak for myself as I had no opportunity of expressing or submitting my opinion in this matter, owing to my absence in Europe. My opinion is that cases of poisoning by crude opium or balagolis are extremely rare; that an habitual moderate dose of this drug in the shape of balagoli given to children is not injurious; that the practice of giving balagoli is widespread and in the case of poor people who have to go to work leaving their children at home, it is distinctly useful and advantageous. In children and in adults, with this as with any other drug, excess does and ought to do harm. With regard to the question, namely, when they grow up, do they remain useful members of Society? I may safely reply it in the affirmative. I do not think persons are less fitted to discharge their duties as members of society, simply because they may have been given opium in childhood.

And now, gentlemen, my task is done. I must thank you for having listened to my address patiently. During the year under review I have received valuable assistance from all the members, and this has lightened my task not a little. I am greatly indebted to the Honorary Secretaries, on whom has fallen the burden of managing the entire business of the Society, and they have discharged it faithfully and well: and I trust you will join with me in thanking them for their disinterested exertions. In conclusion, gentlemen, I wish to our Society a prosperous career in future.

