

**Alcohol & childhood : the medical and surgical aspect of the question being the report of the afternoon conference held at Sion College, His Grace the Duke of Westminster, K.G., in the chair.**

**Contributors**

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ALCOHOL & CHILDHOOD.

THE MEDICAL AND SURGICAL  
ASPECT OF THE QUESTION.

BEING THE REPORT OF THE

Afternoon Conference,

HELD AT

UNIVERSITY COLLEGE,

HIS GRACE THE DUKE OF WESTMINSTER, K.G.,  
IN THE CHAIR.

*The following gentlemen took part in the Conference by speech or letter:—*

Sir H. W. ACLAND, Bart., K.C.B.,  
M.D., Regius Professor of Medi-  
cine, Oxford.

Dr. BARLOW, Physician to University  
College Hospital and the Children's  
Hospital, Great Ormond Street.

Dr. BERNAYS, Professor of Chemistry,  
St Thomas's Hospital.

Dr. LAUDER BRUNTON, Assistant  
Physician, St. Bartholomew's  
Hospital.

Dr. CHEADLE, Physician to St. Mary's  
Hospital and the Children's Hos-  
pital, Great Ormond Street.

Sir ANDREW CLARK, Bart., M.D., Presi-  
dent Royal-College of Physicians.

J. CROFT, Esq., F.R.C.S., Surgeon to  
St. Thomas's Hospital, and Vice-  
President of R.C.S.

Dr. LANGDON DOWN, Physician to the  
London Hospital.

Dr. DUKES, Physician to Rugby  
School and Senior Physician to  
Rugby Hospital.

The Rev. Canon ELLISON, Chairman  
C.E.T.S.

Dr. HARE, Consulting Physician  
University College Hospital.

Dr. MORE MADDEN, Physician to the  
Children's Hospital, Temple Street,  
Dublin; and ex-President of the  
Obstetric Section of the R.A.  
Med., Ireland.

Dr. STURGES, Physician to West-  
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Hospital, Great Ormond Street.

Sir HENRY THOMPSON, Consulting Sur-  
geon, University College Hospital.

Dr. HACK TUKE, Examiner Ment.  
Physiol., Univ., London.

Dr. WILKS, Consulting Physician to  
Guy's Hospital.

CHURCH OF ENGLAND TEMPERANCE SOCIETY,  
9 BRIDGE STREET, WESTMINSTER.







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CHURCH OF ENGLAND TEMPERANCE SOCIETY,  
9 BRIDGE STREET, WESTMINSTER, S.W.



## ALCOHOL & CHILDHOOD. AFTERNOON CONFERENCE.

A CONFERENCE in the afternoon was held in Sion College, on the Victoria Embankment, under the presidency of His Grace the Duke of Westminster.

The Duke of WESTMINSTER said there was little wonder at the interest shown in the subject they were met to consider; considering the magnitude of the evil which prevailed on every hand, and of the earnest desire which was manifested to consider every means by which to abate the evils which prevailed, and so raise the credit of the country, and save individuals. The Bands of Hope in various parts of the country were doing a great work, without not altogether adequate means; and the C.E.T.S. had come to their aid with a view of seeing what might be done in furtherance of the work which Bands of Hope carried on amongst children. There were many present who thought alcohol as a beverage was neither necessary nor desirable for adults, and many more thought it altogether unnecessary and undesirable where children were concerned—those who were the children of to-day would be the parents of to-morrow. (Applause.) The evidence of the distinguished gentlemen on either side of him would confirm and strengthen them in the opinion he had already expressed, and he was sure they would confirm the opinions entertained outside Sion College in the same direction. He feared they must admit from the knowledge of the subject which they possessed, that to reclaim the old toppers, and the men and women who were drunkards for many years, was very difficult, and it therefore remained for them to so diminish the evil, that the band of drunkards should gradually grow less, and particularly to see that the supply of toppers be not added to from the younger generation in the country. He was afraid that it was too true that there was in various parts of the land a considerable increase in the amount of drinking on the part of women. Many



of them knew that in former times no festival could take place and no merry-making could go on without an ample supply of drink. At his coming of age beer was distributed without stint, and if it had not, he would have been accused of a want of hospitality. When he was a boy at Eton he was a member of a drinking club. One of the forms which had to be gone through was to drink out of a long glass, shaped like a flower glass, with a bulb at the bottom ; and every member had to drink the contents without stopping, and if he did not drink very carefully, the bulb at the bottom would send the liquor all over his face. (Laughter.) The glass was filled with all sorts of liquors, porter, or claret, or anything else ; and he did not know that they were any the better for that part of their training and education. That particular old glass had seen its last days ; it was broken up, and carried off years ago. (Laughter.) The work which was before the Church of England was to systematise Temperance teaching, and to make it uniform throughout the country, and he hoped the teaching would be enforced in all the schools, and especially throughout the training colleges. If they only got at the schools and the training colleges, they would have effected a good deal. This was a special effort which the C.E.T.S. was making, and there would be special funds required. He was sure that the money required would be forthcoming when the necessities of the case were before the country. The Church of England must supplement the number of men who go about the country and give lectures in different centres. But this would require money. The Church of England had been very active in the direction of Temperance in late years. Besides in Africa and other countries, a very great deal of work remained to be done in our own country, in order to reduce the inordinate consumption of alcohol. (Loud applause.)

His Grace concluded by reading the following letter from Sir H. W. Acland, Bart., M.D. :—

*June 10, 1890.*

My Lord Duke,—I regret that at the last moment I am unable to attend the meeting to which I have been invited,



under the presidency of your Grace. Seeing the names of the eminent physicians who will address you, I feel, indeed, that my presence is not necessary. Their large observation and experience will give most valuable information concerning the causation of disease, physical or mental, in children. Careful observation on the life history, derived from asylums, workhouses, children's hospitals, and prisons will throw light on the vexed question of heredity now keenly debated. It will help, too, to assist in putting true views of education. Your speakers to-day will speak with authority, and lay before you facts important for the well-being of the people.

I have the honour to be my Lord Duke,

Your Grace's faithful servant,

HY. W. ACLAND,

The Secretary of the Junior Division read letters explaining their absence from a number of gentlemen unable to attend the Conference. Amongst others were the following important communications :—

SIR H. THOMPSON.

Sir Henry Thompson.—I must deny myself, I confess unwillingly, the opportunity you are good enough to offer me, of expressing in public an opinion concerning the employment of alcoholic drinks in the dietary of children. My opinion may perhaps be recorded here, and it is based on wide experience, that during the earlier years of life the practice in question is invariably undesirable, indeed, more or less injurious. If alcohol be taken at all during childhood and youth, it ought to be under the sanction of high authority, and should be regarded by the child, as well as by his friends, as a medicine, not as an article of diet, under which latter denomination no child should be permitted to regard it. He will learn soon enough that many forms of it are taken as a luxurious adjunct to diet, but he is badly trained if he does not also learn that habitual indulgence in the habit surely produces more or less serious defects in almost all constitutions. Ill-health in later



years is largely due to a life of conformity to the error of regarding alcohol as a necessary article of diet, and one of the first duties of a parent is to secure his offspring from needless evils of that kind. I say nothing of the moral evil associated therewith, not less but more important. I will only add that were it within our power to rear the rising generation with the same view and with the same care we entertain when breeding the lower animals—viz., for the purpose of cultivating all their highest qualities, and thus of improving the race, I am certain that no alcohol would be permitted to enter into the scheme of our dietary, or ever be regarded as either food or medicine suitable to be frequently taken at the caprice of the individual.

SIR ANDREW CLARK.

Sir Andrew Clark, Bart., M.D.—I fully sympathise with you in your view of the supreme importance of Temperance work among children. Religion, Education, and Temperance constitute the three closely related and necessary agents for the building up of a completely developed and healthy human being. There is room for difference of opinion concerning the place, power and use of alcohol in adult life; there is none in respect of the life of children. The habitual or frequent use of alcohol in their diet is a serious and unqualified evil. Society is deeply indebted to the enlightened and philanthropic Duke of Westminster for his interest in this subject, and I regret that the traditions and usages of my office forbid me from taking part at your meeting.

DR. HACK TUKE.

Dr. D. Hack Tuke.—I am unable to attend your meeting, in consequence of numerous engagements. I heartily sympathise, however, with the work in which you are engaged among the juvenile population, and am strongly of opinion that, while alcohol may properly be employed for even the young under medical direction, it is highly undesirable to allow it to be used in any form, as a beverage, by the young of either sex. I have acted on



this principle in my own family, and should suppose there is not much difference of opinion in the medical profession as to its propriety.

DR. LAUDER BRUNTON.

Dr. T. Lauder Brunton.—I find it will be quite impossible for me to attend your meeting. Personally, I feel very strongly that the use of alcohol, in any shape, is inadvisable for healthy children or healthy youths. In disease, even in children, it is sometimes invaluable as a remedy, but I think that great care is required not to continue its use beyond the time when it is absolutely necessary. I have hitherto seen no reason to change the opinion I expressed many years ago, that healthy men, as a rule, are better without it; and this applies still more strongly to children and youths.

DR. STURGES.

Dr. Sturges.—I am very sorry to say I am obliged to go to Cambridge on the day of your meeting, and I fear I may not return in time for your Conference. I regret it because for completeness I should have been glad if all the physicians of the Great Ormond Street Hospital for Children had been present in so excellent a cause. If I had ventured upon any remark at all at your meeting, it would be to protest against the vile decoctions of port wine, and "malt extracts" or some other stuff, which are so extensively advertised and sold, not only for purposes of secret drinking among adults, but also, as is within my personal knowledge, as a tonic for children. If your meeting were to unite in a protest against this one detestable practice, the authority of the well-known physicians attending it is surely weighty enough to send forth a salutary and much-needed warning to mothers of all classes alike.

P.S.—Of course it will be understood that I am not attacking any "mixture" in particular, but the practice of mixing alcohol with reputed "tonics," especially in the case of children.



The Secretary, Junior Division, then mentioned that he had on the previous Saturday addressed reply post-cards to 500 members of the medical profession, asking whether they agreed with the following declaration: "I fully agree with the principle that alcohol is not necessary or desirable for children as a dietary, but should only be used by them under medical advice." He had already received in reply about 300 answers in the affirmative. (Applause.)

MR. J. CROFT.

Mr. J. Croft.—I am summoned into Sussex (seaside town) to see a case of severe head injury and must go this afternoon. I entirely agree with the printed form which I have signed and returned. The lessons in total abstinence should be taught in childhood. Children should be made to look upon stimulants as temptations to be avoided. The mid-day Sunday glass of beer or wine should be particularly attacked. Boys go almost straight from the table to Church, under such circumstances the effect of the stimulant is, morally, most injurious. The harmless, as it is often called, glass of beer, becomes the cause of impure thoughts. Make another attack upon the example set by men and parents in taking stimulants between meals; that habit is physically and morally (or spiritually rather) most disastrous. My experience as a Surgeon of surgical diseases in children, traceable to alcoholic parents, is very limited. I have seen children who are the subject of stone in the bladder, nearly ruined as regards the chances of cure by the gin given them by their parents. The parents meant kindly, but acted under a grievous misapprehension. We at St. Thomas's Hospital do not make stimulants integral parts of the dietary of children. Stimulants (wines) are only given in exceptional cases. I wish every success to the efforts of the Conference.

A telegram from Dr. Cheadle, Senior Physician, The Children's Hospital, Great Ormond Street, stating his inability at the last moment to attend and speak, was read.



## ON ALCOHOLISM IN CHILDHOOD AND YOUTH — ITS CAUSES, RESULTS, AND PREVENTION.

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In the absence of Dr. Thos. More Madden, the following paper was read by the Rev. J. Dennis Hird, M.A.:—

THE prevention of the great evils arising from the abuse of Alcohol, and more especially of those thus occasioned in childhood and youth, is an object which all Christian men of every denomination must earnestly sympathise with and approve of. Nevertheless, when your secretary was good enough to ask me to make some observations on this subject to-day, I ventured to express my doubt as to whether one who is himself neither a member of the Church of England or of any Temperance Society could well take part in the proceedings of this meeting. As, however, he has kindly assured me that there is no question to be now discussed in which those of other communions may not equally co-operate, I feel it a privilege and a duty, although myself a Roman Catholic, and not a professed abstainer, to here contribute whatever feeble assistance may be in my power, by word or pen, to a cause so laudable and unfortunately so urgently pressed on those conversant with the subject as this. Several years ago I brought the present question before the British Medical Association, at a meeting in Belfast in 1884, and since then I have referred to some of its aspects in articles in medical journals, as well as in "Dr. Quain's *Dictionary of Medicine*," and in the recently published American "*Cyclopedia of Diseases of Children*." These communications were, however, confined to a professional circle, and hence, as the only apparent means of arresting the evils in question, is to arouse public atten-



tion to their existence and importance, and thus to stimulate public opinion into action for their prevention, I may, without further preface, briefly recapitulate what has been impressed on myself by upwards of a quarter of a century's experience as a Physician in hospital and private practice with reference to the appalling and far-reaching ills occasioned by Alcoholism in youth. . . .

Many of the consequences of the increasing intemperance of both sexes, and of all classes of modern society, are now as well recognised in medical practice as others are on the popular Temperance platform, or in the daily proceedings of our criminal tribunals. Largely as it has been discussed from all these points of view, this many-sided topic still, however, unfortunately appears inexhaustible; and its importance is very distinctly evinced in certain developments of Alcoholism in childhood, which have come under my observation in the hospitals with which I am connected, and which, as far as I am aware, have not been previously noticed by other writers. Elsewhere I pointed out that something like a fourth of all the children born in these countries die within the first year, and of those who outlive this period, another fifth die before the completion of their tenth year. Nor does this terrible death-rate by any means represent the full consequences of the hygienic mismanagement of infancy and childhood, which are as obvious in the causation of many of the non-immediately fatal diseases by which the fairest portion of existence is too often embittered, and to the mitigation of which our hospital is subservient. These facts surely call for consideration as a matter of public and social, no less than of medical, interest; this mortality being such, that in the words of an old writer: "It is impossible to conceive it may not be traced to some mismanagement, since it is utterly inconsistent with the uniform goodness of the Creator to suppose that so many children are brought into the world only that they may die at an early period of their existence."

I may therefore here again briefly refer to one of the most frequent and preventible factors of child death disclosed by experience in my hospital. Of these causes, the most important are strumous and tubercular



complaints, arising from faulty hygienic, dietetic conditions, and cerebro-nervous disorders, in many instances occasioned by premature or injudicious mental stimulation, or over-pressure in early childhood. In a large moiety of the cases that there come under observation, the *fons et origo malorum* is distinctly traceable to the strumous diathesis. The prevalence of this cachexia is, I think, largely ascribable to the great physical deterioration arising from inherited intemperance, and consequent toxicological effect of Alcoholism on the wretched offspring, who further pay the penalty of their progenitors' excesses by the development of scrofula and tuberculosis as the result of semi-starvation and neglect during the first years of life. Moreover, the period of childhood has of late years become so abridged in too many instances, by the necessity of entering on the struggle for existence before the moral, mental, or physical powers are sufficiently developed, that a premature breakdown in any of these is no longer exceptional.

This, in one of its most terrible aspects, is exemplified by the painful exhibitions of juvenile drunkenness now so frequently witnessed in the streets of any of our great cities, and still more by the diseases consequent on it which are brought under clinical observation in hospitals. For illustration of this statement, I may again refer to the following cases of juvenile Alcoholism :—

J. L., aged eight, was admitted into St. Joseph's Hospital, Dublin, January 8th, suffering from Delirium Tremens. His mother was an habitual inebriate; his father, who was of sober habits, therefore as soon as possible sent this child to be brought up away from her example in the country. Returning home, when but six years of age, the propensity for alcohol soon manifested itself; for then discovering a bottle of whisky secreted by his mother, he helped himself freely to its contents, became stupidly drunk, and thenceforward tiddled, whenever he could, for two years. A few days before admission to the hospital he abstracted a bottle of port wine, which he had finished all but a glass or so, when discovered. After this bout he fell into a drunken coma, in which he nearly died, and subsequently becoming delirious, was brought to the hospital. He then exhibited all the usual symptoms



of Delirium Tremens, understood perfectly what was said to him, but shook like an aspen leaf on being spoken to, and tried to hide under the bed-clothes; complained of imaginary annoyances, and showed abject terror of the other children in the ward. His glance was distant and staring, pupils dilated, skin cool and clammy, tongue moist and furred, abdomen tumid, temperature sub-normal, pulse 140—weak and somewhat irregular. He was ordered beef-tea with capsicum, milk and soda-water, and a mixture with tincture of digitalis, bromide of potassium, and aromatic spirits of ammonia in suitable doses. On the following day he was slightly better, having some sleep during the night, and he continued to improve gradually for a week, at the end of which the delirium and tremour had nearly disappeared, although he remained excitable, restless, and debilitated. On the 15th, a crop of furunculi commenced to show themselves on the face, and then spread over the whole surface of the body, causing great constitutional irritation for nearly a month, during which he remained as weak in mind as in body. At last, however, under the influence of tonics and generous dietary, he began to recover again, and *pari passu* with the regainment of his physical strength, his mental condition also improved, so that by the middle of April he was discharged from the hospital as convalescent. He was then sent to a Reformatory school near Dublin, and is now there, going on very well.

*Case No. 2.*—In an adjoining bed, we had at the same time another juvenile victim of Alcoholism—viz., G. R., a newsboy, æt. 8, suffering from Blood Poisoning, Marasmus, and Eczema. Before admission, this boy had been in the habit of going out to the public-house for his drunken mother's daily supplies of whisky, and on each occasion was rewarded by a sip of the ardent spirit, until its taste and use had become second nature to the unfortunate child, who then afterwards invested his own little earnings as a newsvendor in the same way. I need not enter into any detailed account of this case, and shall only add that, having been for some months under treatment, he left the hospital in perfect physical health, and apparently free from any drink craving.



*Case 3.*—A still more pitiable instance of the consequences of Alcoholism was at the same time in another of my beds in the same institution, in the case of a very attractive little girl, aged five and a-half years, who was brought in suffering from acute Traumatic Meningitis, the result of a savage blow on the head, inflicted some time previously by her drunken mother. This case was one of the few recoveries from an advanced stage of well marked Meningitis that I have met with in the course of a long and sad experience of this most fatal of all the diseases of childhood. During her ravings in the course of the disease, and afterwards even during her convalescence, this poor child babbled continually, and craved earnestly, to use her own words, for “a drink of porter from the gallon”; and, we subsequently learned, that from the time she could totter under its weight, she was sent to the public-house for a can of porter, out of which she was accustomed to take a little taste on each occasion.

*Case 4* was that of another child in hospital, suffering from injuries consequent on her parents' Alcoholism. In this case, the little victim was a girl about three and a-half years of age, whose right femur was fractured by a furious kick from her mother, when in drunken frenzy.

*Case 5.*—In the same ward was an additional instance of a wretched infant, irreparably injured by a kick over the hip-joint, from the drunken brute who claimed to be her father.

*Case 6.*—At the present time there is a case under the care of my colleague, Dr. Nixon, in the Mater Misericordiæ Hospital, of a girl aged sixteen years, an habitual drunkard, the child of drunken parents, whose two sisters and little brother, all under ten years of age, evinced the same tendency, and, since the death of their mother, from the same cause, have been sent to a Reformatory school, by the exertions of a charitable lady, within the past few days.

*Case 7.*—I have now, in one of my beds in the Children's Hospital, an instance of Alcoholism, in the case of a poor little creature only two and a-half years old, who refuses every suitable nutriment, constantly imploring the



good sister who presses this on her, for a drink of porter, instead of the milk or other food presented to her.

To the foregoing cases may be appended the notes of another instance (Case No. 8) of a similar character, for which I am indebted to my distinguished colleague, Dr. Cruise, ex-President of the College of Physicians in Ireland; in a recent letter from whom it is thus referred to:—

“93 Merrion Square, West Dublin,  
“*May 29th 1890.*”

“Dear Dr. More Madden,—Referring to our recent conversation, I am sorry to say that I, like yourself, can quote cases of well-marked dipsomania in children, even under ten years of age.

“One boy (Master E.), who was not quite eight years of age, and slowly dying of spinal disease, was in process of being made an habitual drunkard by a drunken father and drunken mother, but was rescued with much difficulty by a conscientious nurse, who followed my instructions. This case is one of many which have convinced me that stimulants should never be given to children except as a medicine. The opinion I entertain on this subject is accentuated by the fact that children like stimulants, and take them readily, often greedily, in a wonderful contrast to what we see amongst animals.—Ever faithfully yours,

F. R. CRUISE, M.D.”

In the great majority of these, and of the many other similar cases which I have met with during my long experience in connexion with the Children's Hospital, the tendency to Alcoholism seemed to be of hereditary origin, and was most marked in children whose mothers were inebriates. Some reference may, therefore, be made in this connexion to the increase of intemperance now so noticeable amongst women, as influencing the tendency to Alcoholism amongst their children. In many of these instances of Alcoholism in women, of which the toxicological effects are thus transmitted to their children, the craving for stimulants is traceable to some of the disorders that come before us in gynæcological practice. Oftentimes it results from the too general custom of administering



stimulants for the relief of dysmenorrhoeal pain. In such cases "this unkind Nepenthe" is frequently employed in gradually increasing doses, until the victim of dysmenorrhoeal Alcoholism eventually becomes an habitual inebriate, and possibly the future mother of children cursed by the inheritance of the same awful proclivity. In this matter the Medical profession, by its influence, can do much to lessen this source of hereditary Alcoholism. Even yet, however, we have hardly sufficiently emancipated ourselves from the influence of the teachings of those eminent authorities who some twenty years ago, in leading the reaction against the antiphlogistic treatment then in general vogue, went to an undue extreme in the opposite direction. Under ordinary circumstances, the use of alcoholic liquors should be resorted to only when therapeutically necessary, and in doses regulated by the special exigencies of each case. Had we, therefore, to deal with the ideal hale and happy inhabitants of Dr. Richardson's fancied City of Hygiene, we might, with great advantage, adopt his views as to the total prohibition of all intoxicants. Unfortunately, however, we live on earth, and not in Utopia; and medical practitioners have to consider the condition of those enfeebled by disease or age, or of those who have been prematurely broken down, physically as well as mentally, in sustaining the battle of life with sinking heart and failing strength: and to such stimulants may or may not be necessary. But in the case of children their use can never be justifiable, save when required as a medicine, and then only in the form and definite doses of other remedies, just as a dose of senna or rhubarb, for instance, might be administered to them.

The vexed question as to whether the total prohibition of the sale and use of all intoxicants would, in view of the evils just referred to, be desirable or not, is one far too wide for consideration on the present occasion, and is a subject on both sides of which much might perhaps be said.

But though the possibility of thus ever successfully stamping out all intemperance in men or women is, to say the least of it, very dubious, there can be no question that, even by mere legislative or police measures, much



might be done to arrest or diminish the deplorable increase of Alcoholism now observable in youth. The recklessness with which intoxicants are supplied by some publicans to all who can pay for them, even when their customers are mere children, as well as to persons already drunk, obviously calls for inquiry and reform on medical as well as on other grounds. On one occasion, and that unfortunately not an exceptional one, to which I have elsewhere referred, I saw three children, all under ten or eleven years of age, reeling drunk out of a public-house in one of our leading thoroughfares on a Sunday afternoon. One was unable to stand unaided. Another was vomiting at the door of the gin-palace, and was using filthy imprecations. This sad scene, and those obscene words, uttered in what should have been the gladsome and innocent voice of childhood, appeared to me the strongest possible appeal for legal interference with the traffic of which such were the results. Surely something might at least be done in that way to lessen the growing evils of Alcoholism amongst the young. Thus, with this view, the existing Licensing laws should be more rigidly enforced, or, if necessary, be amended, so as to effectually prevent the sale of all intoxicating liquors, not merely to children, but also to those obviously within the period of adolescence. In connexion with the increasing prevalence of Alcoholism in the young at the present day, and of its consequences as observed in medical practice, I would venture to question the correctness of that yearly chorus of glorification of modern progress—physical, moral, and social—supposed to be evinced in the improved condition of the population, which is chanted each autumn in the meetings of different Congresses, scientific and social, with a regularity as inevitable as the fall of the leaf at the same season. Reiteration of statements does not, however, constitute any proof of their accuracy; and if our people have thus improved, as is alleged, how comes it, may we ask, that insanity, as shown by the official reports of the number of lunatics under supervision in England, Ireland, and Scotland, is now nearly thrice as prevalent as was the case forty years ago? Or, how will those above referred to, explain away the increasing proportion of



strumous and tubercular diseases which we now observe in hospital practice? The answer to these questions, and the chief cause of these ills, is, I believe, to be found in the great and increasing prevalence of Alcoholism in all classes, in both sexes, and, I regret to add, at all ages, coincidentally noticed.

*Influence of Hereditary Predisposition in Causation of Alcoholism.*

In considering the causes of the increasing tendency to Alcoholism noticeable amongst the youth of the present time, it must be held in view that, as already mentioned, this proclivity is commonly inherited in such cases, and is one of the results of the prevailing intemperance of women as well as men, in all classes of modern society. For although persons of good position no longer drink as much wine after dinner as formerly, still, even amongst the better classes, as well as in the lower grades of life, a vile habit of tipping or sipping ardent spirits or liquors in small quantities at a time, repeatedly throughout the day, has become prevalent. In this way, and by all classes far more alcohol is now consumed in small quantities, and at short intervals, and with far worse effects, than ever resulted from the post-prandial excesses of a former generation. Can it then be wondered at that children of parents who, if seldom absolutely drunk, are as seldom perfectly sober, should in their earliest years manifest the proclivities and diseases of Alcoholism?

The influence of hereditary predisposition in the causation of tendencies to Alcoholism and other diseases is as unquestionable as the transmission by descent of the outward physical conformation and mental or moral characteristics of our progenitors. As was long since well observed by an eloquent writer on this subject, "Parents live again in their offspring." In physical aptitude, and in mental power and tendency, in complexion and the shape of nature, children resemble their progenitors, as a general rule, in a remarkable manner. The salient points of a strongly marked character, whether derived hereditarily or existing as a cognate variety, unfolded and invigorated by favouring influences, are renewed and



strengthened in succeeding generations, becoming at length the distinguishing attributes, difficult to be effaced in after-time, of a numerous progeny. We read in Tacitus, in his history of the manners and customs of the Germans—a people remarkable in his day for their virtuous lives and athletic frames—that “the large limbs and muscular forms of the parents were expressed in the shape of their children. The subject has been dwelt upon by Horace and Lucretius, and Hippocrates had previously noticed it at some length, and appears to have been fully aware of the difficulty to change the nature of the transmitted peculiarity, especially when the tendency was to the reproduction of disease.

“Admitting this,” says Mr. Whitehead, “that peculiarities of healthy structure are in accordance with the certain physiological laws, liable to hereditary transmission, it cannot be matter of surprise that pathological conditions, which are in many instances mere exaggerations of such peculiarities, should be found in like manner subject to continuation and even to further exaggeration in transition. It appears tolerably certain that the condition most liable to reappear in the offspring is that disposition of organic arrangement, which we denominate temperament, and the more prominently this is educed in the parent, and more especially if both parents happen to possess the same caste (or tendency), the more decidedly it may be expected to manifest itself, as a general rule, in the offspring.”

The most obvious instances of hereditary morbid predispositions are those afforded by scrofula, tuberculosis, gout, and the protean varieties of cerebro-nervous disease, and insanity, of which, perhaps, the most common form is that met with in a large proportion of these cases of apparently uncontrollable craving for alcohol, or dipsomania, which come before every physician. With regard to insanity generally, and to dipsomania in particular, there can be no question of the fact that, as Griesinger has shown by uncontrovertible statistics, in the greater number of cases hereditary predisposition lies at the bottom of the malady, and there is no circumstance more powerful in its condition than this.



In connexion, therefore, with the prevention of Alcoholism in childhood and youth, it may not be superfluous to allude to some of the practical lessons derivable from our knowledge of the influence of hereditary predisposition as, perhaps, the chief factor in the causation of this condition—conclusions, unfortunately, which are only very partially practicable. Thus it would obviously be desirable to prevent the marriage of all habitually intemperate men and women, as it would also be to prevent every woman who may bear and nurse a child from transmitting the poison of alcohol to the infant, by her own indulgence therein at that time. These views, however, can only be suggested, and cannot be enforced. A more generally feasible deduction is, as was pointed out more than half a century ago by Dr. J. Brown, that the descendants of those who labour under any hereditary proclivities such as this should be shielded as far as possible from their exciting causes. The predisposition is of various degrees: in some so intense, that at a certain period the disease occurs by the spontaneous act of the constitution; but in others so slight, that the co-operation of noxious agents is required to render it manifest. Hence the descendants of even the occasionally intemperate should observe the most rigid temperance, whilst, above all, the offspring of the habitual drunkard, as well as of the maniacal dipsomaniac, should be guarded as much as possible from the potent morbid action of all alcoholic causes of cerebro-nervous irritation, and from all habits of life calculated to call their inherent tendency into action.

It should never be forgotten that although such tendencies may be inherited, it by no means follows that they must therefore necessarily be developed; and to hold otherwise would, in my opinion, be a negation of all free-will, and a blasphemy. On the contrary, by a fore-knowledge and timely recognition of the existence of inherited proclivities to Alcoholism and other diseases, we may be enabled to bring into operation those means which a merciful Providence has placed at our disposal for their prevention. Thus the hereditary predisposition which, if unchecked, will eventuate in struma, tuberculosis, gout, and other inherited constitutional taints, may oftentimes



be warded off by suitable hygienic and remedial preventive measures ; and, in like manner, similar proclivities to moral and mental maladies may be held in check by appropriate religious, moral, and physical training and hygiene.

The evil resulting from the prevailing intemperance of the young as well as the old should induce us to warn those whom our counsel would influence against that custom of giving alcoholic stimulants as a *bonne bouche* to children, which is so general in its practice amongst all classes, and so calamitous in its results. Even in those exceptional cases in which such stimulants may be necessary for children, I would repeat that we should never sanction their administration save under the guise and in the defined doses of other remedial agents—my long experience in hospital and private practice, at home and abroad, having amply confirmed the view expressed in a work of mine published many years since, that it is physiologically wrong, as well as morally unjustifiable, ever to allow a healthy child to taste alcohol in any form.

The early removal of the children of the habitually intemperate from the contagion and evil influence of their parents' example to a very different moral atmosphere affords the best means to prevent the development of their inherited taint. Hence, in my opinion, the State should, in such cases, provide for the compulsory separation and training with due regard to their distinct religious education, and under approved teachers of their own creed in each case, of the children of those who by habitual drunkenness are themselves unable to discharge the primary duties of parents. In this way would, unquestionably be soon, and largely, diminished those evils, moral and physical, now arising from Alcoholism, by the consequences of which the wards of Hospitals and Lunatic Asylums are crowded, and by which the ranks of the criminal classes are recruited ; and thus, too, might be lessened the appalling results at present evinced in the premature destruction of life from diseases consequent on Alcoholism in youth. (Applause.)

THOS. MORE MADDEN, M.D.



Dr. SAMUEL WILKS said :—

My Lord Duke and Gentlemen,—Having been asked to attend the Conference on the question of “Alcohol and Childhood,” I have much pleasure in being present, and expressing my opinion on the subject. I have always held to the dictum that children should be brought up without any alcoholic drinks, leaving them to judge for themselves when they arrive at adult age. This rule would no doubt be very largely acceded to ; but it is in another aspect that the question is forced upon the attention of the medical man. It is whether delicate children need the assistance of wine in restoring them to their natural vigour. Now there is a widespread belief in its efficacy in these circumstances, and especially as regards port wine. Amongst the poor if any lady bountiful bestows upon them a bottle of port wine for a sickly child they regard it as a priceless gift, and having a power which is supreme. Now, I have no reason to say that wine is of any value in affording strength to the delicate child. On the contrary, I regard it as hurtful if it be only by deadening the appetite, and neutralising the craving for food which is natural. I especially set my face against the too frequent custom of a child being sent to boarding school, and there treated on exceptional principles. The ill-health may be due, as it often is, to the indulgence or indiscretion of the mother, and, therefore, the more need of the school discipline, where all the pupils are on an equality and the food the same for all. The value of these conditions is entirely lost when a special and artificial method is still pursued, and it is at the same time highly demoralising to the child. A little girl, for example, is sent to school, and marked out as being delicate and requiring, amongst other things, wine for her meals. She incurs the envy or hatred of the other girls. She herself becomes conceited, egotistic, and her moral nature corrupted. Of course I say nothing of the judicious medical treatment by alcohol in acute and urgent cases, where its benefit is often seen ; but I am now speaking of it as a diet, and an assistance to children in



delicate health. The very common cases in which it is useful in adults scarcely occur in children. I allude to cases where the nervous system is unstrung by the cares of life and worries of business. In these alcohol acts as a sedative, and by its soothing influence brings the nerves to an equilibrium. It should always be remembered that alcohol is only to a slight degree stimulant. Its effect is sedative, or, indeed, narcotic. I have seen two children who drank largely from a whisky bottle, and who became collapsed in consequence: that is, insensible, cold, and almost pulseless. It is this narcotic or benumbing effect of alcohol which is sought for by habitual drunkards, especially by women to drown their troubles, and which makes it a useful drug in many circumstances, but one seldom required for these purposes in children. I have had no opportunity of preparing any details or special facts to prove my contention, but merely state the result of a long experience of the ill-effects of the use of alcoholic drinks as a part of the diet of children. (Applause.)

Dr. LANGDON DOWN said:—

My Lord Duke, and Gentlemen,—I am able to speak with authority on the subject of Alcohol and Childhood owing to my having been connected for a great many years with what is practically the largest Children's Hospital in England—viz., the London Hospital, and I have had frequent opportunities of witnessing the baneful effects of alcoholic liquor and alcohol in its administration to children and youth. One cannot be free from the conviction that the medical profession has much to answer for in the mistaken notion of the value of alcoholic stimulants. I remember when I commenced as a student in London, the influence the medical profession had made in regarding alcohol as the remedy for all evils, and we are not even now free from the influence of that teaching. Not only is alcohol not necessary in health, but there are a large number of diseases which can be better treated without it. The Committee of the London Hospital issues a report of the amount of stimulants given by each Physician, and analysing eight years of such reports, the remarkable outcome is that the



Physicians who gave the smallest quantity of stimulants have the lowest mortality, and pass more patients through the Hospital ; that whereas some of the Physicians gave eight ounces of wine per patient, others gave 43·6 ounces to each patient. The mortality of the minor amount is 14·7 per cent. ; of those giving the major amount, 18·2 per cent. The average residence of those taking the minor amount of stimulants is 27·9 ; of those taking the major amount, 31·8 days. My attention was given to the importance of this matter from reading a report on the subject by Dr. Russell, of the Fever Hospital, Glasgow. I quite agree with the remarks which have fallen from Dr. Wilks, that alcoholic drinks should be regarded as pernicious narcotics. Another important aspect of the question is the influence of heredity. Nothing is more clear to my mind than that some cases of feeble-mindedness have their origin in the intemperate habits of their progenitors, and I have known entire families more or less fatuous, whose fathers were never quite drunk and never perfectly sober. I am also familiar with cases having a close resemblance to one another who have been procreated during the period of acute Alcoholism. I have known cases where the first child has come under this category, and then a period of abstention on the part of the father has resulted in a healthy child, and again during a period of relapse another child has been born distinguished by like characteristics to the first. This remarkable fact has been confirmed by Continental observation. Dr. Ruez has observed that idiocy is very common in the miners of Westphalia, who, living apart from their wives, only came home for their holidays, and then generally got drunk. M. Demeaux has also recorded parallel cases. Dr. Delasiauve says that in the village of Carême, whose riches were its vineyards, the inhabitants were forced to be a little more sober in consequence of ten years' vine disease. This, he says, had a sensible effect in diminishing the cases of idiocy. Some years since, when I expressed my conviction that acute Alcoholism produced some distinct forms of idiocy, it was received with some questioning ; but I found from conversation with Dr. Morel, of Rouen, that he had noticed similar effects. Dr. Elam states, in " A Physician's Problem," that on the



removal of the spirit duty in Norway insanity increased 50 per cent., and congenital idiocy 150 per cent. Dr. Lannurieu, of Morlaix, in Bretagne, says: "I do not hesitate to attribute the greater number of the cases of idiocy in this establishment to that cause—viz., Alcoholism." I cannot bear that out by my own experience in England, but amongst the poor and lower classes Alcoholism is a potent cause of idiocy. (Applause.)

DR. THOMAS BARLOW: My Lord Duke and gentlemen,—I hold that in all discussions on alcohol the members of our profession ought to be absolutely honest and unfettered, and for my own part I must say that I should be sorry to be deprived of the use of alcohol in the diseases of childhood. I believe that in certain cases of *acute* disease in children, given for limited periods, alcohol is sometimes very valuable; but the question as to its employment during prolonged periods of delicate health or convalescence from illness, and as an ordinary article of diet in childhood, requires in my judgment, a very different answer. With respect to the first point, permit me to mention certain *a priori* reasons why we should consider the subject with the greatest caution. Our knowledge of the maleficent action of alcohol on adults when taken over prolonged periods but not necessarily in very excessive amounts is becoming wider and wider. We have been long acquainted with the results on the digestive tract, the liver, the kidneys, the heart, and vessels, and with certain disturbances of the central nervous system; but we are becoming daily more familiar with definite changes in the great nerve trunks and their finer ramifications, and we know that these changes explain obscure forms of paralysis described first by Dr. Wilks many years ago. We are also alive to the way in which the chronic use of alcohol plays its part in hindering and complicating recovery from injury and disease. Let us further recall the curious instances of idiosyncrasy shown in respect to the effects of alcohol; some people suffering in one way, some in another. The remarkable frequency of alcoholic peripheral neuritis in women as compared with men is a striking case in point. Now surely when we realise how insidious and



far reaching the effects of the prolonged use of this drug are in adults, we ought to be jealous of it when given over long periods in children lest we initiate morbid processes over and above the chronic ailment which we are treating. For observe the initiation of morbid processes in the organization of a child may prove a vastly more serious thing than in an adult. Let us recognise frankly the tolerance of a considerable amount of alcohol in some people and the possibility of maintaining not only a moderate standard of health, but of attaining a long life even when we are tolerably certain that there must be wide-spread degeneration. I believe that one or more of three conditions will be found in such people: (1) They come of a strong ancestry, and are well built, or (2) their circumstances admit of intervals of repair, or (3) they have not very heavy demands made upon them in the way of worry or undue physical exertion. Moreover, we know, when growth has been fully established in a man who has a good physique, that almost every organ of the body—to put it roughly—seems to have enough for ordinary demands and something to spare for extraordinary needs. It is when the extra strain comes of acute disease or injury or anxiety that the alcoholic subject succumbs, or has a hard fight for it, and then we are often amazed at the way in which an apparently strong man goes to the wall. Now contrasting this with what obtains in children, we are familiar enough with their reparative power.

The way in which acute disease is often “shed,” so to speak, without leaving a trace behind, is very striking. But it is also true that occasionally when a morbid process is started in childhood it seems to run riot in a way that is unparalleled in adult pathology. The morbid products seem to grow with the child’s growth, and indeed the child may be said to grow into its disease instead of out of it. Although a morbid process once fairly established may be consistent with life, yet it may lead to the stunting of the general growth and development in a very striking fashion, and thus slight chronic alcoholism may be to children a much more serious thing than to full-grown adults. There is no better example of the occasional florid development of morbid processes in childhood than



in fibrosis of various organs to which Dr. Dickinson has drawn attention. Whatever may start fibrosis of the liver in children (and I quite believe that several causes may give rise to it, of which alcohol is only one), when once it has started it may assume very grave proportions, and take on, so to speak, an autonomy of its own after the subsidence of the original cause.

Of this I will speak more in detail directly when dealing with actual cases, but at present we are considering the subject on general grounds suggested by adult experience, and by the differences between adults and children in their reaction to disease.

There is one other reason why we ought to be especially jealous of the prolonged administration of alcohol even in small quantities to children, and that is the risk of evoking the drink craving in early life. We are all alive to the risks of morphia craving, and of the craving for other sedatives, but the aggregate of mischief induced by all these sedatives is trifling compared with that induced by alcohol. The responsibility of starting in a child the craving for this drug becomes much more serious when we find to our dismay that the factor of heredity comes into play either in the direction of alcoholic proclivities or of the spasmodic neuroses. One of the most striking cases of recurrent dipsomania that I have known was in a young man who, on account of strumous glandular ulceration, had been repeatedly ordered alcohol during his boyhood by several doctors as a regular article of diet. So far from the alcohol being necessary for this scrofulous ulceration, he again and again assured me that he had never been in such good health, general and local, as during the lengthened periods when he became an abstainer. This young man belonged to an epileptic family; he developed alcoholism, which recurred at intervals of many months. In these attacks he became perfectly maniacal. During the intervals he was temperate, and, for a considerable period, an abstainer. After a series of alcoholic outbreaks he ultimately became epileptic also. Some of the reasons which I have urged for jealousy as to the employment of alcohol over long periods in the chronic illnesses of



children apply with equal force to its use as an article of diet. The youngest fatal case of alcoholic neuritis that I have known occurred in a young lady of 22. Her father had died of *delirium tremens*. His attacks were recurrent with long intervals, during which he was temperate. Her brother had also suffered from *delirium tremens*. In spite of all this, as a child, this girl had been encouraged to take small quantities of stimulants until she had acquired a fondness for them. This developed into an insatiable craving for spirits, and when I first saw her she was taking at least a pint of brandy daily. She was suffering from paralysis of both lower limbs, with marked ankle drop, loss of knee jerk, partial anæsthesia, considerable wasting, and the most agonising cramps. There was also double wrist drop and some motor weakness of the larynx, so that she had a muffled cough and feeble voice. Besides this she had some signs of commencing lung trouble, and the most absolute anorexia. Under the all but absolute exclusion of alcohol, and with careful nursing, she so far recovered as to be able to walk again; her appetite came back and her lung signs became quiescent. She was able to be taken to the seaside, and held her own for about two months. Then for some trifling ailment her friends gave her some alcohol, and her old cravings returned and her paralytic symptoms, and she quickly succumbed. In both of these cases that I have quoted the habit of taking alcohol dated as far as I remember from about the age of twelve years, but I propose now to deal with earlier cases. Permit me to read brief extracts from notes made during a period of ten years when I was seeing out-patients at the Children's Hospital, Great Ormond Street. I choose that particular group, because although it included children up to the age of twelve years old, it specially concerned very young children, in whom, at least amongst the London poor, I believe the danger of alcoholism to be a very real one. 1. The youngest case of all was communicated to me by a former colleague who made the autopsy. An infant, otherwise free from disease, died with the symptoms and signs of acute irritant poisoning after having had administered to it some undiluted gin.



This had been given on account of flatulence, from which the mother believed the child was suffering. 2. A well developed boy aged four years, was brought to me by a respectable looking mother on account of enlargement of the abdomen, which had been coming on for six months. The child had well marked abdominal dropsy, and dilated varicose venules on the cheeks and eyelids. Under the influence of diuretics, he improved, and after some of the fluid had been absorbed, it was possible to feel enlargement of both liver and spleen. There was no other disease, and the only cause that I could ascertain for his condition was that beer had been given to the child every day for the last two years. This was stopped absolutely, and after two and a-half months' treatment he was so much better that his mother ceased to bring him. 3. A boy, aged eleven, was admitted as an in-patient under Dr. Dickinson. He had well marked ascites, and the edge of the liver could be felt quite hard. The boy was considerably emaciated, but there was no evidence of disease elsewhere. It was ascertained that he had been in the habit of carrying his father's meals. The father was a cabman, and gave the child a little gin every day. The duration could not be determined accurately. The poor boy improved a little under treatment, but the condition was too pronounced for him to recover. 4. A boy, aged two years, three months, was brought decidedly rickety, but with the liver greatly enlarged and hardened, and also with the spleen enlarged. There was no ascites, and in the absence of post mortem it was impossible to say whether there was cirrhosis, but it was suspected. The child had been given a wine-glassful of beer daily for the last fifteen months, and some gin and water once weekly. 5. A boy, aged four years, pale, thin, and undergrown, weighing only  $19\frac{1}{2}$  lbs. The face showed especially the delated varicose venules to which I have before referred. The liver surface and its edge, were felt about two fingers' breadth below the thoracic margin singularly hard and resisting. The child's mother had been an inveterate drunkard. Fortunately for the child she had died when he was three years old, but when he was between the ages of two years and three years she had



plied him for a certain time with gin and water. For a short time, the kind neighbour who brings the child, testifies that she knows the child had half a tumblerful of gin and water twice daily. Under careful treatment, this child improved considerably, and put on flesh, but when seen last, he was still stunted in growth. 6. Girl, aged one year, nine months. Brought because the abdomen has been increasing during the last ten weeks. During part of this period, she has had jaundice, which has now subsided. The child was pallid and languid; the abdomen was much distended, with some enlargement of superficial veins. The liver was only slightly enlarged. There was no dropsy or enlargement of the spleen. The signs were not conclusive, but suggested a chronic gastro hepatic catarrh. The mother admitted that for the last three months, she had given her child half a quartern of beer twice daily, and said the child had got to crave for it. 7. Girl, aged two years, ten months. Brought on account of intestinal troubles, and repeated convulsions. The liver was enlarged and felt very hard. The spleen was just palpable; there was no ascites. The mother states that when the child was two years, she began to give it a small wine-glassful of wine every night, and that three months ago she substituted half a wine-glassful of beer every other day. 8. A girl, aged three and a-half years, was brought on account of intestinal troubles, and because her urine was thick. She was ricketty and suffering from catarrh, but the abdomen was greatly enlarged with extreme distension of the superficial veins. The liver was enlarged but there was no ascites. The mother said she had been in the habit of giving the child a tablespoonful of beer every day at dinner, and sometimes for supper as well, since it was one year old, that is for two and a-half years. For the last twelve months she had given the child a teaspoonful of brandy "whenever she was bad," at least once a week. 9. Boy, aged one year eleven months, brought because of cough and chronic intestinal troubles. Evacuations white—alternate constipation and diarrhœa. The child was thin and pale; he had an enlarged liver, which was also hard, and there was slight enlargement of the spleen. The mother admitted that she had given the child beer



three times a day since he was six months old. 10. Girl, aged three years eight months, was brought on account of enlargement of the abdomen, vomiting and cough. There was evidence of ascites; the liver was slightly enlarged. There were some râles at the bases of the lungs. She had been given a little beer every day since she was two years old. She improved for a short time on diuretics. 11. Girl, eighteen months, was brought because of vomiting, alternate constipation and diarrhœa, and because her abdomen was getting bigger. The child, though it had been breast-fed for seventeen months, and was the only child of a young healthy looking mother, seemed miserably nourished. The small superficial venules about the eyelids were dilated and varicose. There were some large veins on the abdominal wall. The liver was felt three fingers' breadth below the thoracic margin. It felt as hard as a brick, and there was a suspicion of unevenness on its surface. The spleen was also enlarged. The mother admitted that she had given the child more than a tablespoonful of beer twice daily since it was six months old, and that the child had got very fond of it. She had also given the child one teaspoonful of gin, with an equal quantity of water, at least twice a week since it was nine months old. When seen again at the end of a week the condition was worse. There were then slight signs of fluid in the abdomen. Subsequently there was severe vomiting, and the child died in a convulsion three days later. At the post mortem examination I found the liver much enlarged, yellow, firm, and presenting typical hob-nailed surface. Besides great overgrowth of fibrous tissue there was much fatty degeneration, and there were several peritoneal adhesions. The spleen was also much enlarged and firm. There was only a little fluid in the peritoneum. There were no important changes elsewhere, for although one kidney was congenitally atrophied, the other showed marked compensatory hypertrophy, and was almost certainly efficient. The liver, of which the accompanying drawing\* gives a fairly adequate view, was a remarkable example of cirrhosis in its early stage, and nobody could

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\* This diagram was then shown.



doubt that this had been the main factor in the child's illness. To sum up. I am quite alive to the gaps in the evidence in the cases which I have narrated. There is only post-mortem proof in two out of the eleven cases. Also I quite believe that bad feeding in other directions and faulty hygiene were co-operant factors in some of the cases. It is rarely possible in clinical medicine to get complete and absolutely conclusive evidence. But I believe you will admit from the symptoms recorded and the histories given by the parents, that there is a *prima facie* case in support of the view that the repeated administration of small quantities of alcohol to young children is a cause of disease. This culminates probably in cirrhosis of the liver such as I have shown in this drawing, but varying degrees of gastric and intestinal disturbance and of general atrophy are its slighter manifestations. If this be so, surely as doctors we have a grave responsibility in the matter and we ought to speak out to parents, both rich and poor with no uncertain sound. (Applause.)

Dr. BERNAYS said :—

My Lord Duke and Gentlemen,—I find it very difficult to say anything on this question. I do not come here as a medical man, but as a teacher of chemistry and having a great deal to do with the education of the young. Alcohol and childhood is a very difficult matter to speak on, except in this way that alcohol and childhood should have no connexion whatever. When you come to think of what has been said by our medical friends, you will understand that inasmuch as alcohol, as shown by Liebig a great many years ago, has the effect of reducing the appetite, it must obviously be very injurious in childhood to give it in any form at all. The object of a child is to put on flesh, not to do with as little as possible, and to render what they have effete; and it being the case, as has been shown by Dr. Wilkes, that those who abstain altogether have most excellent appetites, we ought to say that if alcohol is only used as a medicine in illness, it is likely to be much more favourable as a medicine than under other circumstances. I should very much like to say to all here, and especially to the younger people present, look with faith and hope to the future. Don't cast your eye on the



nation as if it were all going to the bad. It is nothing of the kind. I can remember a state of things infinitely different from what exists now. It makes me laugh when I hear people say, "Things are bad." When I went to King's College, I never passed certain streets without meeting drunken men and drunken women; and I scarcely remember any time when there was not fighting amongst men and women. I have now gone for six months and nine months through the same streets and I have seen nothing of that kind; and, moreover, how much more moderate is the way of living as compared to what it used to be. Therefore, I say you ought to look with great hope to the future, and not brand the nation as a drunken nation. It is not a drunken nation—not to be compared with some Continental nations. It makes me angry sometimes to hear us run down as a drunken nation. Numbers of the people who are taken up for drunkenness are the same cases over and over again, and not new cases. One other point which applies with reference to the matter in hand, and it applies not only to children, but to adults: the very best thing for those who belong to the general section of the Church of England Temperance Society like myself is not to be in the regular habit of taking alcohol—the weaker, of course, that you take it, the better—but it should only be taken occasionally, and when one wants it. You will feel a perfectly different man then from those who are in the habit of constantly taking it. I can give you an illustration of alcohol in public schools. I knew two boys who were at one of our great public schools, and both were of admirable character. One was taken ill, and died of consumption. The other brother was recommended to take stout, and the quantity given him every day was a pint bottle. It ended in the complete ruin of that boy. This only shows that when people talk of giving stout or any such alcoholic article to use, they ought to know something of the constitution of those to whom they order it, and also ought to say how much is to be taken, and not to leave it to a boy to judge as to what he likes. (Applause.)

DR. CLEMENT DUKES said:—

My Lord Duke and Gentlemen,—I have been asked to address a few words to this meeting on the most im-



portant question of the propriety of supplying boys at school with *beer*,—especially at supper-time. Most of the speakers have naturally discussed the *remote* effects of alcohol, and the hereditary tendencies to disease which it engenders in childhood; my object, on the other hand and in complement to these previous addresses, is to treat the subject at an earlier stage, and to consider the *immediate* effects of alcohol when taken by the young. I desire, *in limine*, to announce the principle which I intend to enforce, that no alcohol should be given to the young of both sexes in any form, or at any time, except as a remedy in disease, when it frequently acts as a valuable drug. This principle, it is obvious, is chiefly to be established through *parents* themselves recognising the evils of giving alcohol to children, although the influence and hearty co-operation of school-masters and doctors are also required. With some parents the prevailing feeling at the present time appears to be that the question of proper feeding is comparatively secondary if the boy can obtain his wine, or stout twice a day. This is their panacea for every ailment, for every constitutional delicacy, and even for any deficiency of food. Yet, without doubt, alcohol is detrimental to the young, both immediately and remotely, and should be absolutely omitted from their diet. At school, however, there are difficulties attached to its omission from the diet, arising from long custom and from the prejudice still existing in its favour. These difficulties, I think, are not insurmountable, although those only can realise their magnitude who have tried to break through any of the long established customs and traditions which adhere to some of our great public schools: schools which have flourished for several centuries, and are, let me say, so justly revered for their antiquity and utility. It is, therefore, with the view of urging parents, masters, and doctors to look this question fully in the face, that I am addressing you to-day. Our great English public schools are among the noblest institutions of this country; and yet words are inadequate to condemn the cruel and pernicious practice which prevails at most of them of supplying supper at 9 p.m., consisting of various stimulating articles of food, from meat



and tarts to cheese and beer. At one school, at least, a cask of beer is always kept within the boys' reach, from which they can themselves draw at any moment and to any amount. It does not seem to be sufficiently realised that the animal instincts of boys are more active and stronger at the public school age than at any other time of life; while, on the other hand, their characters are immature and wanting in the strength necessary to withstand an enemy which approaches insidiously and attacks at their weakest point. Yet, notwithstanding the activity of this instinct, boys are supplied with beer, and partake of it, and that, freely in hot weather, just before going to bed. Now beer is a drug which deadens the will-power and excites the animal instincts of the young: its relation, therefore, to immorality is most momentous. In those schools where supper with beer is provided at 9 p.m., the physical conditions thus engendered at bed time, are such that it is almost a physical—indeed, almost a moral—impossibility for many boys of a certain age, with their troublesome instincts, to continue pure, however far impurity may be naturally removed from their thoughts. Such a mode of living is a very heavy premium indeed on the commission of sin at the age of puberty. It occasions at first involuntary excitement, discomfort, and relief during sleep, which eventually, owing to frequent occurrence, becomes transmuted into a voluntary act of vice. Then a habit is established which is as hard to contend against as is the habit of "drink." But even if beer only thus influenced a boy here and there it would still be baneful in its effects, for it starts a vice which is as infectious as Measles. This impurity of life at school further entails all but certain impurity after school life is over. Are not, then, the national results of this evil far-reaching enough to induce parents to take the matter in hand, and masters to seek by every means in their power to prevent it? Many are the boys at school who commit acts for which they loathe themselves in the morning, but which, under the influence of beer, they are powerless to avoid at night. Surely the sexual instincts of the young of all animals are keen enough, without our adding any artificial stimulus



to them! Now the question arises, What is the *remedy* for this state of things? All head-masters of public schools should pursue the course which the exceedingly able and strong head master of Rugby has taken, and decree that beer shall not be supplied to boys at supper time while he is head-master. But some head-masters, who have not the courage of their convictions, will argue that it would damage their schools to adopt such a rule, owing to the exacting demands of the British public. In the first place, I do not think that damage ever occurs to an individual, or to an institution, in doing what is right,—at all events—for more than a passing moment. But even if temporary damage ensued, the difficulty should be manfully faced; and I am quite sure that that school would soon be full to overflowing where parents felt that the possible frailties of the young were recognised, and that means were sought and taken to help their sons to live pure lives. There is, however, a way out of the difficulty without trying the strength of the head-master, by which even unthinking and unreasonable parents could not assert that masters had deprived their sons of the whole or part of one meal. Where these suppers are supplied, generally a very scanty breakfast is furnished. The remedy therefore is, without increasing the cost, to provide a thoroughly good meat breakfast, a substantial meat middle-day dinner, and, instead of providing a small tea *and* a supper, to give a good meal, without meat or beer, at 6 p.m., and nothing afterwards. If something else is still required before going to bed, let it be bread and butter, or bread and milk in winter, and milk and soda-water in summer. Failing this attention to the subject on the part of masters, *parents* should themselves request the masters of schools on no account to supply their sons with beer at bed-time, or even with stimulating food. Failing again, I would urge the propriety of parents placing the matter carefully before their *sons*, and persuading them to carry out the practice themselves. But the latter is not a good plan, for boys do not like deviating from the majority, as it is regarded as priggish, or swagger, to do so. And failing finally in this suggestion, it seems to me a matter in which the *governing bodies* of our public schools should intercede on the boys'



behalf. I would put the question still more forcibly. In plain English, a master who allows his pupils to drink beer at bed-time, and a parent who sanctions it implicitly, say to them: "I give you this beer at bed-time, well knowing that it will blunt your intellect, deaden your conscience, and diminish your will-power; and that at the same time it will excite your animal instincts. If these temptations prove too strong for you to overcome, then, on detection, you will be punished, perhaps expelled from school, and your whole character will be damaged for life." Discipline may be good for the young, but not such severe discipline as this. I would ask, who is the greatest wrong-doer? the boy who commits the wrong, the master who supplies the means which excite him to the act, or the parent who often demands the provision of the noxious drug, at all events sanctions its use, and certainly pays for it? To many of the young, the animal instinct, under our present civilisation, is very troublesome even without a stimulus, and causes many a heart-burning in exercising their self-control. How masters can expect boys to lead pure lives under such circumstances, especially where cubicles are in vogue, it is impossible to conceive. They evidently do not know, or totally ignore, boy-nature. Parents and masters seem to me to forget how easy it is to do wrong, even when the will-power is at its best, and how hard it is to do right. And yet they not only allow, but provide, a drink for children at school which will deaden their self-control, at the *most critical time of the day*, so that the animal instinct is *made* to run riot, producing the anguished cry of many a boy, "the evil that I would not, that I do." For it must not be imagined that boys are insensible to their shame. Some time since, a school doctor, not knowing that I was already striving to help boys,\* wrote to me on this subject, seeking to enlist my sympathy in attacking the evil. In his letter he stated: "I had in my study a few days ago a fine intelligent boy, literally crying out to me for help to save his companions from the

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\* The Howard Medal Prize Essay for 1884.



shame and unhappiness which the vice entails." This evil is, therefore, one which needs facing bravely. It is incumbent on parents, masters, and doctors, to strive to remove every cause which tends to promote and increase it. Beer at bed-time, being one of the most powerful incentives, should be dealt with without further delay. Cubicles also must be abandoned, for there is no gain-saying the truth :—

“ How oft the sight of means to do ill deeds  
Makes ill deeds done.”

To ignore the evil, to speak of it with “ bated breath ” is *not* the way to overcome it. It must be plainly and firmly attacked. Remember, too, that virtue does not lie in being too pure, or too ignorant, for temptation to assail us, but in having such strength of character as to be able to resist the temptation, however great, whenever it comes upon us. Few boys, in their early school-days, possess this strength of character. It develops with their bodies and their brains, and if assailed too roughly at first it is weakened rather than strengthened. Boys, therefore, should never leave their homes without being warned of the instinct which will assail them sooner or later, and with more or less force : an instinct which, when uncontrolled, may become a demon which will insidiously and fatally mar the whole of life. They should not only be taught, before leaving home, the virtue of self-control, but that also of self-respect, which will prove a powerful means of defence. *Which* parent shall be the boy’s adviser, must vary in every family. Some time since a clergyman, in a sermon preached in one of our cathedrals, said : “ I owe most of my own character to my mother. My father spoke to me continually of everything relating to my life and conduct but one ; my mother never spoke to me at all of anything but one, and of that she never ceased speaking to me.” It is active advice and help that boys require ; lamentations over the evils of young human nature will not remove them. Now this is not simply a *school* question, it is a *national* one. What are we Englishmen doing to remove this blot from our school escutcheon ? At present nothing, nay, worse than



nothing. We send our schoolboys to bed with a drug in their stomachs which makes it hard for all, impossible for some, to curb their animal instinct. I hear some say, "I thought our English schools were well-nigh perfect. What is it you desire to alter?" In answering this enquiry I would ask a question: How many parents, when parting with their children for school, tell them of the animal instinct that will arise, of its power, of the necessity of control, and of the consequences to themselves and others if it be not curbed? How many schoolmasters have striven to prevent this evil before its commission, instead of punishing it after the fact? In how many schools do the boys go to bed undrugged by beer? How is it that the governing bodies of most of our great public schools provide every facility for the commission of secret vice by means of the covert which cubicles afford? And how is it that head-masters are found who consent to attempt to conduct a school where cubicles are in existence? Why is it that they do not insist on their extinction before taking office? For every man with any experience of life, and sense of responsibility, who thinks on the question must necessarily say to himself, and ought to say it to his governing body, "While these hiding cells are in vogue, how can I have control over the boys, and if I have not such control, what dire consequences must infallibly ensue!"

The piteous cry of schoolboys rises up to Parents, Masters, and Governing Bodies—

"Save us from being tempted,—lest we fall."

(Applause.)

Canon ELLISON said he had a very difficult task to perform in proposing a vote of thanks to the Duke of Westminster, who was in the chair. It was perfectly impossible for him, looking back over the events of the past few years, to do justice to the work which his Grace had done in connexion with the C.E.T.S., and in the promotion of Temperance. He was not going to pain his Grace by going over the points at that time, but the Duke had taken up the work, not as a sort of fad, or as a philanthropist had a right to do, but his Grace went



into the whole question at the time when he was Chairman of the Committee of the House of Lords on Temperance, and no Chairman ever gave himself more thoroughly to master the facts connected with the subject or devoted himself with more assiduity to make the report on intemperance worthy of the House of Lords and the nation. (Applause.) Since that time, therefore, on every great subject, when they had found it necessary for the C.E.T.S. to come to the front, they had found it natural to look, after their own Archbishops and Bishops, to the Duke for help and counsel. They turned to him then at a critical period, which he hoped would be productive, not only of good, but also of great results. Their noble Chairman had said that probably he (the speaker) would be able to tell them something of the proposal they were making, and for the promotion of which they had taken upon themselves to summon the meeting. In the time past they had not been altogether forgetful of the juveniles; but from the time they began, now thirty years ago, they had always had a Juvenile Society as part of the parochial work which had been carried on. But the general work had pressed in upon them from every side at such a pace that they had never been able to give themselves as they had hoped to the independent organisation of the children's work, which therefore went on side by side with the parochial work for the adults. They felt that it ought to be a distinct and recognised part of the teaching of the young children, that from the beginning of school life, no matter whether in public schools, or in ladies' schools, or in the national schools; no matter where, the teaching ought to be carried on. They wanted to systematise that teaching for them. They did want to go to the fountainhead, to go to the teachers. There were very few of the training colleges where lectures were now delivered, or teaching in an organised form. They had not kept up with the spirit of the time; and it would be one great object for them to organise teaching in every one of the training colleges, and to see that they were regularly visited every year, if possible, to maintain the standard of knowledge, and that the teachers took with them the materials for teaching the children. (Loud applause.)



They would never do anything with children until every national schoolmaster or schoolmistress, who was engaged in teaching, had their minds fully possessed with all the leading facts connected with Temperance education. Mention had been made of the necessity of continuing schools. It was here that under compulsory education they always met a void. The most critical period of a child's age was that determining period from 10 to 11 ; and for a youth, from 17 to 18. It was to get hold of the child and the youth in these ages that they were forming their work then under such good auspices. It was only when they came to deal with a great question of that kind that they came to understand what an immense advantage they had in the organisation of the Church. He hoped that in the future a greater effort would be made to use all the appliances of the Church for the promotion of Temperance principles, and in order to combat the terrible evil of national intemperance. In conclusion he mentioned that the work upon which they were embarking was one which would cost a large sum of money, and, therefore, he hoped that those who were present would be inclined to show their interest in a practical way. (Applause.)

The motion was seconded by Dr. HARE and passed ; and the CHAIRMAN expressed his pleasure.

Another resolution was also submitted by Canon ELLISON :—"That this Conference fully agrees with the principle that alcohol is not necessary or desirable for children has a dietary, but should only be used by them under medical direction, with strict regard to quantity and duration."

This was also seconded by Dr. HARE, and carried unanimously, and the meeting then terminated.



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