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PROHIBITION IN INDIA

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ALCOHOLISM AT
THE BOSTON CITY HOSPITAL
CONTENTS: SUMMER, 1939

Prohibition in India ............................................ 14
Eugene Bleuler .................................................. 20
World Notes—

  Academic Temperance Work in Finland .................. 23
  Alcoholism at the Boston City Hospital ............... 24
  Germany to Study Tobacco Use ............................ 26
  Alcohol as a Thought Stimulator ....................... 26
In order to promote temperance, the Academic Temperance League arranged a course of thirty lectures on the various phases of temperance education in the summer high school in Jyväskylä. Other lecture courses for students and army parsons have been provided. A film is in the process of construction which will present the activities of the league.

Students interested in presenting the temperance cause have formed travelling stock companies which tour the country during vacations, holding temperance festivals for the enlightenment of the rural people in temperance education. Participation in international meetings is taken by the Academic Temperance Society. This same organization is entrusted with the selection of the general temperance lecture activity begun in 1937, the purpose of which is to explain the alcohol question to various social groups in the most effective manner, basing such instruction on the results of research work. A lecture list, containing 500 lectures by 133 lecturers, is published.

Since the repeal of prohibition in Finland in 1932, the idea has grown that "Alcohol legislation must be based on a strong opinion against alcohol and that especially the attitude of the educated people acts as a decisive part in the realization of the legislation against alcohol." By educating the young, the Finnish temperance adherents hope to see the cause of temperance yet triumph in Finland.

"ALCOHOLISM AT THE BOSTON CITY HOSPITAL"

CALLING ALCOHOLISM one of the three major public health problems, a recent editorial in the New England Journal of Medicine states that its treatment as such a problem comes far short of that of tuberculosis and syphilis, the other two. Both adequate prevention and cure seem a long way from attainment at present because only a few people seem to have even a vague idea of what to do about it. The reports of Doctors Merrill Moore and M. Geneva Gray on "Alcoholism at the Boston City Hospital" which have appeared in the New England Journal of Medicine, the first about two years ago, subsequent ones in July, 1939, have brought to light in a clear, statistical form how very little is really done for adequate treatment of alcoholism.

Five papers are presented in the second report, the first showing the inadequate treatment given the alcoholic since it fails to keep him from returning to the hospital. The second paper emphasizes the weak points in treatment brought out in the first paper. The treatment given for delirium tremens at the Hospital, which seems adequate for the condition of the moment but does not go back to the causes behind the present condition, is explained in the third paper. The traumatic complications of alcoholism are enumerated in the fourth paper and in the fifth, the causes of death.

All told, the reports covered 26,340 cases of alcoholism.

Among all alcoholic patients at the Boston Relief Station, the ratio of men to women was 18:1.

Of all male house patients at the Station, the alcoholics constituted a third
(33.6 per cent) while of all female house patients, the alcoholics constituted 13.5 per cent.

The average cost per day per patient for house care was $4.98. Nearly 6 per cent of the total expenditure for the Relief Station was attributable to the care of alcoholics.

Considered by age groups, 26.2 per cent of all patients were between forty and fifty; approximately the same number were found in the group between thirty and forty.

The largest per cent of men were unmarried: 58 per cent of all men and 25 per cent of all women.

In the married group were 30.8 per cent of the men and 53.8 per cent of the women.

The Kent emergency test for mental ability was applied to 279 alcoholic men patients, 67 per cent of whom showed a mental age of thirteen or higher. This would appear to be a very good average in comparison with the public at large, indicating that the cases coming to the Relief Station were not so far advanced as to have reached mental deterioration.

The annual admissions for delirium tremens ranged from 0.4 per cent of all cases admitted in 1924 to 5.0 per cent in 1937. Men were admitted in much larger numbers, the ratio being 19:1. The greater number were unmarried. Most of the patients were between thirty and forty.

Those admitted for delirium tremens were, for the most part, also suffering from other complications, pneumonia and fractures being the most common complications. Conditions of malnutrition, digestive disturbances, and disorders of the nervous system were also common.

There is a deep note of regret through the papers that so far, no well-formulated program to handle this most serious problem has been presented. Its treatment is not limited to the medical field; it must be approached from the economic, social, and spiritual fields as well. Drs. Moore and Gray, through their reports, have presented a good basis on which to build in the medical field. All those interested in the study of alcoholism are indebted to them for their carefully presented reports. However, a perfect program will have to be built by some person or group of persons who can visualize the needs of all the fields affected and unify the treatment needed in them all.

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GERMANY TO STUDY TOBACCO USE

A convention Against Misuse of Alcohol and Tobacco called by the Central Department of Public Health in conjunction with the Bureau of the Reich and attended by 15,000 people, was held this spring at Frankfort on the Main. Its purpose was to discuss the increasing consumption of alcohol and tobacco in Germany which mounted to 7 billion marks in 1938. If this situation continued, it meant danger to the public health, it was pointed out. The National Socialist Party allows adults to choose either abstinence or temperate use but youths are expected to abstain.