Aims  The publication of the Journal of Inebriety (1876 to 1914) chronicled the rise and fall of the first era of organized addiction medicine in the United States.  Methods  Findings from historical research, a content analysis of the Journal’s 35 volumes and 141 issues, and images from the Journal visually illustrate the medical treatment of addiction in the United States in the late nineteenth and early twentieth centuries.  Results  Under the editorial direction of Dr. T.D. Crothers, the Journal of Inebriety published articles and reviews primarily focused on the medical treatment of alcohol and opiate addiction within a growing international network of inebriate homes and asylums.  Conclusions  The history of the Journal of Inebriety mirrors efforts in America to forge a legitimized field of addiction medicine amidst conflicting conceptualizations of the nature of severe alcohol and other drug problems.

Keywords:  Journal of Inebriety, American Association for the Cure of Inebriety, addiction medicine, addiction publishing, history

Correspondence to:  Barbara Weiner, Hazelden Library, P.O. Box 11, 15245 Pleasant Valley Road, Center City, MN, USA 55012. E-mail: BWeiner@Hazelden.org.

Introduction
Interest in the early history of addiction medicine in the United States is increasing [1, 2, 3], as is interest in the role of professional journals in the evolution and dissemination of addiction science [4, 5, 6, 7, 8]. This article reviews the history of the *Journal of Inebriety* (*JI*). The review includes a topical summary of all *JI* issues published between 1876 and 1914 and photographic images that illustrate the history of the *JI* and the professional field it represented.

**The First Journal of Addiction Medicine**

A dramatic rise in alcohol consumption in the United States between 1780 and 1830 and the subsequent increased consumption of opium and morphine spawned a medicalized concept of addiction, a therapeutic temperance movement, and the spread of inebriate homes, inebriate asylums, and private addiction cure institutes across the American landscape [9, 1]. The first of these new specialty institutions that opened in the 1850s and 1860s varied considerably in their treatment philosophies and methods. Under the leadership of Dr. Joseph Parrish and Dr. Willard Parker, fourteen physicians, trustees, and lay leaders representing six inebriate homes and asylums met at the New York City YMCA on November 29, 1870 to found the American Association for the Cure of Inebriety (AACI). In 1888, the Association’s name was changed to the American Association for the Study and Cure of Inebriety. The *Quarterly Journal of Inebriety* (*JI*) became the official communication organ of the AACI. The *Journal’s* name was changed in 1907 to the *Journal of Inebriety* (Volume 29).

The first issue of the *JI* was published in December 1876 at a subscription price of $3 per year, with single issues selling for $1 (Plate One). The last issue of the *JI* was published in March/April, 1914, at a price of $2 per year or $0.50 for a single copy. Over the course of its history, 35 volumes and 141 issues of the *JI* were published, containing 801 major articles and 4,694 minor articles. A few newsletters emanating from particular treatment institutions preceded or were published concurrently with the *JI*, such as *The Washingtonian*, the newsletter of the Chicago Washingtonian Home, and *The Banner of Gold* and *Golden News*, newsletters of the Keeley Institutes. Two such publications—Dr. Robert Parrish’s *The Probe* (Pennsylvania Sanitarium for Inebriates) (Plate Two), and Dr. H. H. Kane’s *Journal of Stimulants and Narcotics* (De Quincey Home)—aspired to compete with the *JI* as the leading addiction medicine
journal, but the *JI* survived as the primary publication focused on addiction treatment throughout the years it was published [7].

The success of the *JI* can be attributed in great measure to the editorial leadership of Dr. Thomas Davidson Crothers (Plate Three). Crothers, who served as the editor of the *JI* through its entire history, was a leading figure in nineteenth century addiction medicine. Born in 1842 in West Charlton, NY, he graduated from Albany medical school in 1865 and worked in private medical practice before accepting the position of assistant physician at the New York State Inebriate Asylum in 1875. The New York Inebriate Asylum had the distinction of being the world’s first medically-oriented addiction treatment institution. Crothers was appointed secretary of the AACI and Editor of the *JI* in 1876 and held these positions throughout the AACI’s history. In 1878, he assumed the position of superintendent of Walnut Hill Asylum (renamed Walnut Lodge Hospital in 1880) in Hartford, CT (Plate Four) and used that position as a platform to advocate the medical treatment of addiction until his death in 1918 [10, 11].

The *JI*’s first (December, 1876) issue of 5,000 copies was printed and distributed from Hartford, Connecticut. The *JI*’s central proposition that inebriety was a disease was immediately greeted by what AACI leaders later characterized as “violent opposition”, “adverse criticisms and bitter condemnation”, and “hysterical denunciations”. Most of these reactions were from religious leaders who viewed the journal as excusing crime and dignifying vice [12, 13, 14, 15]. Adding to animosity toward the journal was Crothers’ rejection of papers submitted for publication in the *JI* by clergy and temperance advocates on the grounds that the papers lacked scientific merit. To the chagrin of those on both sides of the temperance question, Crothers was adamant: The *JI* was about science, not temperance dogma [13]. Similar reactions were elicited from papers submitted by the heads of treatment institutions that were in Crothers’ view nothing more than “concealed advertisements” [15, p. 145].

The rising strength of the American Temperance Movement fueled debate over the use of alcohol in medicine and led to the founding in 1891 of the American Medical Temperance Association (AMTA), an association organized by Dr. Nathan Davis that advocated the legal prohibition of alcohol and a ban on the use of alcohol in medicine. AMTA published a competing journal, the *Bulletin of the American Temperance Association*. Crothers provided the connecting link between the AACI and this new association, serving as secretary of both groups.

As AACI membership peaked at 500 members [16], Crothers predicted a future “radiant with promises of greater progress” in the
acceptance of the medical treatment of inebriety [14, pp 93-94], but forces were coalescing to threaten that vision. In the first two decades of the twentieth century, America’s response to alcohol problems shifted from a focus on the vulnerability of the individual (alcoholism) to the universal perniciousness of the product (alcohol)—a shift reflected in the final drive for national prohibition of alcohol. The founding of the Scientific Temperance Federation in 1906 and its publication of the *Scientific Temperance Journal* (Plate Five) to compete with the AACI and the *JI* reflected that shift [7].

In 1904, the AACI and AMTA merged under the name, the American Medical Society for the Study of Alcohol and Other Narcotics (AMSSAON). Three years later, the *Journal of Inebriety* and the *Archives of Physiological Therapy* merged under the former’s title [16]. The AACI struggled to sustain itself as the field it represented collapsed in the policy shift toward the legal prohibition of alcohol and the legal regulation of opiates and cocaine. Cultural pessimism about addiction treatment and the prospects for long-term addiction recovery grew amidst glowing optimism about the prospects of prohibition. In that cultural environment, treatment institutions seemed to be an anachronism [17].

In 1907, publication of the *JI* was transferred to the Gorham Press in Boston and was transferred again in 1913 to the Therapeutic Publishing Company of Boston, at which time it was announced that the *JI* would move from quarterly to bi-monthly issues. The March/April 1914 issue of the *JI* announced that the *Journal of Inebriety* “passes into the hands” of The Journal of Inebriety Publishing Company headed by T. D. Crothers, but no other issue of the *Journal of Inebriety* was ever published. AMSSAON collapsed some time in the 1920s, and only a handful of nineteenth century treatment institutions survived the 1920s. A small number of private addiction treatment institutions rose amidst the collapse of the old, but several decades passed before Americans witnessed a renewed field of addiction medicine and new specialty journals that carried forward the legacy of the *Journal of Inebriety*.

**International Connections**

Over the course of its existence, the AACI’s *JI* was quite international in its orientation. AACI leaders were very cognizant of the birth of inebriate asylums in Europe and the founding of counterparts to the AACI in England, France, Germany, Switzerland, Belgium, and Italy. Leaders of the association regularly participated in meetings of the International Congress
of Inebriety; the *JI* published articles written by authors outside the United States, and *JI* articles were frequently translated into German, French, and Italian [13]. The *JI* reported on trends, laws, and treatment methods in other countries. Our analysis of major and minor articles published in the *JI* between 1876 and 1914 reveals a total of 427 articles originating from or focusing on events outside the United States, with most of these articles coming from England (153), France (64), Germany (37), Canada (17), Austria (12), China (10), Prussia (10), Russia (9), and Scotland (9). Of the 801 major articles published over the course of the *JI*’s history, 101 were authored by individuals outside the United States with the majority of these coming from England (48), France (11), Canada (8), Scotland (7), Belgium (5), Germany (5), and Austria (4). The English inebriety pioneer Dr. Norman Kerr (Plate Six) exerted a particularly important influence on Crothers and the American inebriety treatment movement. There was no direct counterpart in the nineteenth century to today’s International Society of Addiction Journal Editors, but there was considerable international contact between the inebriety leaders in America and Europe.

**Authorship Analysis**

Over the course of its history, the *JI* published articles authored by 230 individuals. Nine individuals published ten or more articles in the *JI*: Drs. T. D. Crothers (71), Lewis Mason (26), Norman Kerr (22), T. L. Wright (21), N. S. Davis (12), Winfield S. Hall (12), Albert Day (11), Edward Mann (11), and Joseph Parrish (11). Physicians authored more than 90% of the articles published in the *JI*. Professors, lawyers, and members of the clergy were most visible among those authors who were not physicians. Of American authors who published major articles in the *JI*, most were drawn from the Northeast (particularly New York, Massachusetts, and Pennsylvania) and the Midwest (particularly Illinois and Ohio). Women authored only seven major articles in the history of the *JI*. Drs. Louise Robinovitch (Paris, France), Lucy Hall (Sherburne, Massachusetts), and Agnes Sparks (Brooklyn, New York) penned articles that called attention to the special needs of addicted women. In light of the fact that single authorship of scientific articles in the addictions field has become rare [18], it is interesting to note that only three major articles and one review were co-authored in the entire history of the *JI*.

**Content Analysis**
The early format for the *JI* remained constant through most of its history. Each issue consisted of major papers, proceedings of the AACI (papers and reports appearing in the issue following each meeting), abstracts and reviews, editorials, clinical notes and comments, and advertising. Evaluation of the topical content of the *JI* first required assembling originals or photocopies of all volumes and issues of the *JI* from various addiction studies archives and libraries. It took four years of searching to fill in missing issues and pages from such resources as the National Library of Medicine, Connecticut State Library, Center for Research Libraries, UMass Medical Center Library, College of Physicians of Philadelphia, and the New York Academy of Medicine. In a world where so much information is digitized and electronically stored, easily accessible, and fully searchable, it is noteworthy that the social, scientific, and historical information in the *JI* is not indexed in any electronic database. Once all issues of the *JI* had been collected, a content analysis was conducted using the following steps.

1) A topical list was independently prepared by each author based on sample issues from three different decades of the *JI*.
2) The topical categories and subcategories were merged into a single list and then sample issues were reviewed together to identify missing topics and to establish norms for topical placement.
3) The lead author conducted the topical analysis of all articles appearing in the *JI* using the revised list and the established placement norms.
4) Placement was based on the article title and, where necessary, a review of the article content.
5) When completed, the number of entries within each category and subcategory were tabulated and charted.

Highlights of that topical analysis are presented below.

**Major Topics:** Between 1876 and 1914, there were 14 broad topical areas that generated 25 or more main articles in the *JI* (Table 1).
Occasional *JI* topics sound tantalizingly familiar to contemporary issues: teachers not allowed to smoke on school grounds during school hours (1902); reports on the need for institutional aftercare (1902); and calls to teach about alcohol and addiction in medical school curricula (1907).

**Patterns of Use/Addiction:** The *JI* was quite eclectic in its interest in intoxicants, noting more than 38 intoxicating agents in its major and minor articles. Alcohol, opiates, and tobacco dominated the subject matter of the *JI*, accounting for 88% of the major and minor articles that focused on a particular intoxicating agent. The rank ordering of these substances was alcohol (57%), opiates (21%), tobacco (9%), coca and cocaine (5%), caffeine (coffee and tea) (4%), and, each with less than 1%: tonic stimulants (e.g., arsenic and strychnine), chloral, hashish (cannabis), and chloroform. Although intoxicants other than alcohol find press throughout all the years of the *JI*’s existence, only years 1908-1914 have this subtitle printed on its title page: “First and only journal devoted to spirit and drug neurosis”.

**Concern with Health Complications:** A total of 750 major and minor articles in the *JI* addressed medical complications associated with inebriety. Of all articles dealing with medical complications, 174 provided a broad discussion of the physical complications of inebriety while the remaining articles focused on particular ailments. Those complications that drew 20 or more specific articles focused on the brain and nervous system (other than epilepsy) (74), the respiratory system (particularly concerns related to tuberculosis) (46), delirium tremens (42), visual impairment and blindness (41), heart (27), epilepsy (27), digestive system (23), and sexual dysfunction (20).

**Medications:** The *JI*’s preoccupation with medications marked both the ongoing search for medicinal specifics that could cure addiction and the search for medicinal solutions to particular treatment dilemmas, e.g., the management of withdrawal, the suppression of craving, and the treatment of collateral medical problems. The *JI* exposed the ineffectiveness of a wide variety of alleged cures, including sodium calcium, wine of antimony, snake root, cinchona, and the secret ingredients of the various “gold cures”. Of the 625 articles that specifically focused on drug-based treatments, 101 articles provided a broad discussion of medicinal treatments while the remaining focused on the effectiveness or ineffectiveness of particular substances: phosphates (100), opiates (39), anti-ethyllic serum (30), bromides (29), Celerina (21), coca/cocaine (15), Bovinine (14), Beef Tonic (13), and strychnine (12).

**Other Treatment Techniques:** A total of 185 articles in the *JI* addressed non-pharmacological techniques used in the treatment of
inebriety. Those methods garnering focused articles included hypnotism (suggestion) (40), hydrotherapy (34), electrical stimulation (33), hygiene (20), muscle vibration (13), light therapy (8), psychotherapy (5), and hot air baths (5).

Treatment of Women: Over the span of its existence, 54 articles appeared in the *JI* on the special needs of and treatment approaches for female inebriates. This special focus reflected the growth of specialized treatment institutions in the United States for the treatment of addicted women between 1860 and 1900.

Core Ideas and Language

When the AACI first met on November 29, 1870, its founders established a set of founding principles that guided the AACI and formed the ideological foundation of the *JI* throughout its existence. These propositions declared that 1) *Intemperance is a disease.* 2) *It is curable in the same sense that other diseases are.* 3) *Its primary cause is a constitutional susceptibility to the alcoholic impression.* 4) *This constitutional tendency may be either inherited or acquired* [12, p. 192]. The founding principles further posited that all past remedies for intemperance (e.g., fines and jail) had failed and called for the establishment of temporary homes for inebriates in every large city and the establishment of inebriate asylums in every state. Although the disease nature of inebriety was debated early in the history of the AACI, the association and its *JI* maintained fidelity to these propositions throughout their existence.

The *JI* also reflects the early competition for terms to characterize excessive alcohol and drug use, terms such as habitual drunkenness, inebriety, ebriosity, dipsomania, narcomania, oinomania, alcoholism, and addiction [19]. In an attempt to identify the rising popularity of the latter two terms, we tracked their appearance in the titles of articles appearing in the *JI*. The term *alcoholism* first appeared in *JI* titles in 1877-1878, peaked in 1903 (with a total of 18 appearances in the titles of major and minor articles), and declined in frequency of appearance between 1903 and 1914. The term did not gain cultural or professional prominence in America until the mid-twentieth century. The term *addiction* in the *JI* referred primarily to dependence upon drugs other than alcohol. It first appeared in 1890 in reference to chocolate, but appeared less frequently in titles than did the term *alcoholism*. *Inebriety* continued as the professional term of choice throughout the *JI*’s history to communicate dependence on a broad spectrum of psychoactive drugs.
Advertising Analysis

The *JI* did not represent all treatment institutions nor would it allow all such institutions to advertise in its pages. Crothers used the pulpit of his *JI* editorial role and books to attack the private addiction cure institutes that promised medicinal specifics as a cure for inebriety and pushed through a *JI* advertising policy that specifically banned advertisements by the “Gold Cure Institutes” [15]. Two types of institutions did advertise extensively in the *JI*. The first claimed to offer specialized treatment for inebriety and constituted a mix of inebriate homes and asylums (Plates Seven & Eight), while the second might be aptly described as sanatoria or convalescent centers (Plates Nine & Ten). Between 1876 and 1914, advertisements appeared for a total of 78 different institutions that offered specialty treatment for addiction or convalescent care. Twenty of these institutions advertised in five or fewer issues of the *Journal of Inebriety*, while advertisements for the following institutions appeared 40 or more times over the history of the *JI*: Inebriate’s Home (New York City), the Washingtonian Home (Boston, MA), Walnut Lodge Hospital (Hartford, CT), Brooklyn Heights Sanitarium (Brooklyn, NY), the Homewood Retreat (Guelph, Ontario), and the Highlands (Minchendon, MA).

In addition to advertisements for treatment institutions, the *JI* carried advertisements for medical schools, addiction texts and journals, medicines, mechanical devices (for massage, electrical stimulation) (Plates Eleven & Twelve), and non-medical products and services (e.g, photography).

Conclusions

The *Journal of Inebriety* served as the primary instrument of communication between those involved in the treatment of addiction in the late nineteenth and early twentieth centuries. The rise and fall of the *JI* mirrors the fate of the larger professional arena that it served and its pages tell us much about the early history of addiction and its treatment in America. Twenty-first century readers of the *JI* will be struck by such oddities as the recommendation for bee stings or syphilis as treatments for inebriety, but readers of the *JI* will also be amazed at the parallels to contemporary interests and debates within the addiction field. We would encourage those writing scientific articles today to use the *JI* as an invaluable resource for setting contemporary issues in historical context.
Acknowledgment: Thanks are extended to Penny Page (Librarian, Rutgers) and Rebecca Rowe (Library Assistant, Hazelden) for their assistance.

Reference


Figure legends

Plate One: Advertisement for the Journal of Inebriety
Plate Two: The Probe
Plate Three: Dr. T. D. Crothers, Editor
Plate Four: Walnut Hill (Lodge) Hospital
Plate Five: Scientific Temperance Journal
Plate Six: Dr. Norman Kerr, British Pioneer in Addiction Medicine
Plate Seven: Washingtonian Home
Plate Eight: The Inebriate’s Home, Fort Hamilton
Plate Nine: Riverside Sanitarian
Plate Ten: Louisville Sanatorium
Plate Eleven: AntiKamnia & Heroin Advertisement, July 1902
Plate Twelve: Gawne Static Generator, October 1902
### Table 1: Journal of Inebriety Topical Analysis: 1876-1914

<table>
<thead>
<tr>
<th>Topic</th>
<th>Mentions in Main Articles</th>
<th>Mentions in Minor Articles &amp; Short Entries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Inebriety</td>
<td>659</td>
<td>1938</td>
</tr>
<tr>
<td>Treatment of Inebriety</td>
<td>177</td>
<td>1095</td>
</tr>
<tr>
<td>Medical Complications of Alcohol</td>
<td>158</td>
<td>750</td>
</tr>
<tr>
<td>Inebriety from Substances other than Alcohol</td>
<td>141</td>
<td>584</td>
</tr>
<tr>
<td>Policy/Laws Related to Inebriety</td>
<td>83</td>
<td>280</td>
</tr>
<tr>
<td>Genetics and Inebriety</td>
<td>70</td>
<td>366</td>
</tr>
<tr>
<td>Psychology &amp; Inebriety</td>
<td>62</td>
<td>229</td>
</tr>
<tr>
<td>AACI &amp; other Association Activities</td>
<td>57</td>
<td>343</td>
</tr>
<tr>
<td>Health Care (general)</td>
<td>52</td>
<td>320</td>
</tr>
<tr>
<td>Psychiatry &amp; Inebriety</td>
<td>51</td>
<td>255</td>
</tr>
<tr>
<td>Facility Profiles / Facility Management</td>
<td>47</td>
<td>371</td>
</tr>
<tr>
<td>Societal Attitudes toward Inebriety</td>
<td>40</td>
<td>155</td>
</tr>
<tr>
<td>Religion/Morality &amp; Inebriety</td>
<td>38</td>
<td>162</td>
</tr>
<tr>
<td>Effect of Inebriety on the Family</td>
<td>29</td>
<td>142</td>
</tr>
</tbody>
</table>