

# ON THE ABUSE OF HYPODERMIC INJECTIONS OF MORPHIA.

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Now that the hypodermic use of morphia is brought into sensation novels as a melodramatic device, it may indeed be said to have reached the height of fashion. We may thank our stars if one of us be not seen ere long, syringe in hand, between Aspasia and Clodius in the windows of the Burlington Arcade.

It is not for me to say that I do not run this risk as nearly as anyone, for what I have written upon the subject hitherto has been to record the virtues of this admirable remedy, and to extend its applications. At the same time it seems the duty of those who use so potent a medicine, to consider the full bearings of their practice, and to make themselves as well aware of its dangers as of its virtues. For my part, although I have found the hypodermic use of morphia of great value in the relief of the painful spasmodic or inflammatory elements of many and very various diseases; and although I may, therefore, seem to have used morphia very extensively, yet I cannot compare myself with those practitioners of whom the syringe and phial are as constant companions as was the lancet to their fathers. There is another side of the question, however, of which we must admit that we are still very ignorant: that while on the one hand we know the eminent virtues of morphia when administered under the skin, and feel how sadly crippled we should now be without it; on the other hand, little or nothing has been said of any harm which may result from it, or of the evils which may come of its careless use. Among the numerous essays and records concerning the hypodermic use of morphia which have been published of late, both at home and

abroad, I cannot call to mind one in which its possible dangers have been considered; but I feel that the time has come when the attention of the profession will be called to this less pleasant side of the account. Thoughts of this kind have gradually gained a firmer footing in my own mind during the last three years; but while my fears were indefinite, I felt the time had not come for me to speak. Now my experience has been greater, I have a larger number of cases before me, and yet the uncomfortable fear of mischief is growing rather than diminishing. Setting aside the mere obstructive reasoning of those prejudiced against any new thing, especially if it claims much of their attention, I would raise the further question whether the hypodermic injection of morphia which avoids many of those discomforts and evils which belong to morphia taken by mouth, has any special dangers of its own, which may be none the less for being deferred? I ask this question not as one having an answer at hand, nor, indeed, as being able myself to contribute very much to the answer which is to come, but as one having some grounds to be uneasy, and seeking information from those who have it.

Is it not true that we are now often consulted by patients who have been injecting themselves daily or more than daily during long periods of time, for neuralgias which seem, nevertheless, as far from cure as they were at the outset? Such at least is my own experience. I have now nine patients in my mind who are or who have been under my own care, and in whom the hypodermic use of morphia has been constantly practised for periods varying from nine months to three years. These patients suffer from various forms of neuralgia—from abdominal, uterine, facial, cervico-brachial, sciatic and other pains—they seem as far from cure as ever they were, they all find relief in the incessant use of the syringe, and they all declare that without the syringe life would be insupportable. I have been much struck by what seems to me the formation of a new class of patients, patients suffering not monthly, nor weekly, but even daily, from neuralgias which are only kept at bay by repeated injections, which return when the influence of the injection has passed off, and which resist all curative treatment with wearisome obstinacy, but which do not seem in themselves to be necessarily intractable. Not

only so, but there are certain further symptoms which are common to these patients. The ease and recreation which naturally follows the arrest of intense pain, has passed by insidious gradations into a substantive sensation of well-being, of conscious activity, and of cheerfulness which is more than negative; which is more, I mean, than the mere recovery of natural elasticity on relief from pain. It has a certain tonic and stimulant effect which in the course of time is prized for its own sake, and is innocently enough welcomed as the evidence of a renewal of life. Here lies, to me, the anxious responsibility of the medical adviser. Is he to withhold that means which relieves pain, which restores appetite, which encourages activity and promotes ease and cheerfulness? I honestly confess that, during a long period, I could not see my way to forbidding the repetitions of the morphia. Injected morphia seemed so different to swallowed morphia, no one had experience of any ill effects from it, and we all had the daily experience of it as a means of peace and comfort, while pain on the other hand was as certainly the forerunner of wretchedness and exhaustion. Gradually, however, the conviction began to force itself upon my notice, that injections of morphia, though free from the ordinary evils of opium-eating, might, nevertheless, create the same artificial want and gain credit for assuaging a restlessness and depression of which it was itself the cause. Certainly, all the patients I have named fall off in the same way when the morphia fades from the system, and in all there is an indescribable depression and irritability which alone the morphia can relieve, and for which it is accordingly again and again administered. They are all satisfied that without the morphia the pain must return and will keep them in agony, and, when efforts are made to omit the dose, the pains do return until the fortitude of the patient is broken down, and the morphia is called for. At such times I have certainly felt it a great responsibility to say that pain, which I know is an evil, is less injurious than morphia, which may be an evil. Here experience is needed. Does morphia tend to encourage the very pains it pretends to relieve; or if not, does it at any rate induce in those who use it constantly, an artificial state which makes its further use a necessity? Are the subjects of morphia injection, that is, liable to become depressed,

relaxed, irritable, and dependent upon a new habit of constant intoxication? If this be so, we are incurring a grave risk in bidding people to inject whenever they need it, and in telling them that the morphia can have no ill effects upon them so long as it brings with it tranquillity and well-being. With regard to the question of the perpetuation of the morbid condition under the mask of a seeming relief, I have been struck, for example, with the apparently bad results of the hypodermic injection in acute rheumatism and in gout. In consulting practice it must of course be remembered that the cases which do well are not the subjects of consultations, but those which do badly. Still I cannot rid myself of the notion that in three cases of acute rheumatism and one of acute gout, which have come under my notice, the very bad result was due to the treatment by injection of morphia alone. In these three cases, which were followed by visceral complications, and in which an abiding crippling pain seemed to outlive all other changes, the treatment throughout had been by morphia injection alone. The use of this remedy as a solace from pain during the careful use of other therapeutical means can do nothing but good; but I repeat that, in the cases in question, I have much reason to suspect that a reliance upon hypodermic morphia only ended in that curious state of perpetuated pain, of irritability and depression, and of artificial need of a certain stimulant, which I have observed in the nine cases of neuralgia. I now leave the matter open, but I sincerely hope that some one more competent to deal with it than myself will continue the discussion.

There must by this time be a vast amount of experience of this remedy in the profession, and I would inquire whether any of my brethren have met with such cases as I have described, and if so, whether we are to see in them the victims of a treacherous remedy; or whether they are but instances of those cases of inveterate neuralgia which we can now relieve by hypodermic morphia, but which formerly raged unrestrained.

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P.S.—Since the above was written, my friend Dr. Fothergill, of Leeds, has pointed out to me the following passage in Nie-

meyer's *Lehrbuch* :—“ Sind längere Zeit hindurch Morphium-Injectionen gemacht, und ist man mit der Dosis höher und höher gestiegen, so stellt sich bei den Kranken, abgesehen von der Wiederkehr der Schmerzen, ein unwiderstehliches Bedürfniss nach den Injectionen ein. Sie fühlen sich flau, klagen über ein unbestimmtes Gefühl von Schwäche, von Unbehagen, von Zittern. Manche bezeichnen ihren Zustand geradezu als eine Art ‘Katzenjammer.’ ”