

Cannabis Indica as an Anodyne and Hypnotic

BY J.B. MATTISON, M.D.

Indian hemp is not a poison. This statement is made, just here, because the writer thinks a fear of its toxic power is one reason why this drug is not more largely used. This mistaken idea lessens its value, because it is not pushed to the point of securing a full therapeutic effect. This is a fact. One of the best pharmacologists in this country not long since expressed a very touching solicitude lest the writer's advocating robust doses of this valued drug might cause a decrease in the census that would seriously imperil his professional good repute.

There is not on record any well-attested case of death from cannabis *indica*. Potter says: "Death has never been produced." Hare asserts: "No case of death from its use in man is on record." Bartholow affirms: "Cases of acute poisoning have never been reported." Stillt states: "We are not acquainted with any instance of death." Wood declares: "Hemp is not a dangerous drug, even the largest doses do not compromise life. No acute fatal poisoning has been reported." A prolonged personal experience, compassing the history of many cases—men and women—and hundreds of doses ranging from thirty to sixty minims of the fluid extract, has never brought any anxiety along toxic lines.

Having thus brushed aside this **bugbear**, we may note, en *passant*, the statement, on high authority—Potter—that "cannabis was formerly much employed as an anodyne and hypnotic. It is now somewhat out of fashion." Why this early repute has not been continued, is due to a cause cited, coupled with non-reliable products, and doubtless, the coming of other analgesic-soporifics. The first cause need no

longer obtain; the second can be removed by careful choosing and trial; while the last should not preclude the use of a drug that has a special value in some morbid conditions, and the intrinsic merit and superior safety of which entitle it to the place it once held in therapeutics. Digitalis, for a time, was in disuse. So, too, codeine, which my experience has proved a valued anodyne—one worthy a wider use than it has had, and which I think it will surely get—and impelled me to present the American Medical Association, at its last meeting, with a paper thereon, that I trust you have done me the honor to read.

There is a consensus of opinion among writers on therapeutics as to the anti-agryptic, analgesic and anaesthetic power of Indian hemp. For the latter it was used prior to ether. Wood, testing it in himself, asserted “marked **anaesthesia** of the skin all day.” **Stillé** says: “Its anaesthetic virtue is shown in allaying the intense itching of eczema, so as to permit sleep.” And that a similar seemingly trivial disorder may have a serious outcome is proven by the fact that a well-marked case of triple addiction, under my care last year—a medical man who took daily fifteen grains morphine with thirty-five grains cocaine, subcutaneously, and fourteen ounces of rum—had its rise in a morphia hypodermic taken to relieve urticaria.

Stillé says: “Its curative powers are unquestionable in spasmodic and painful affections.” Noting the latter in detail, its most important use is in that opprobrium of the healing art—migraine. In a paper by the writer, eight years ago, “Opium Addiction Among Medical **Men**,”—**Medical Record**, June 9, 1883—in reviewing the causes, this was asserted the most frequent. Enlarged experience has not changed that opinion. A case from such cause, woman, ten years morphia taking, thirty grains, by mouth, daily, is now under my care. A sister, so situated, from the same cause, awaits similar service; and the mother took morphia for headache till death ended her need.

Ringer says: “No single drug have I found so useful in migraine.” He thinks it acts well in all forms, but seems most useful in preventing rather than arresting. He deems it specially effective in attacks due to fatigue, anxiety, *or* climacteric change. Dr. E. C. Seguin, in 1877, commended it highly.

Dr. Wharton Sinkler, in a paper on migraine, gives first place to cannabis, and thinks it of more value in this form of headache than any other. Richard Green, who first commended it in this complaint, thinks it not only relieves, but cures; in nearly all cases giving lasting relief.

In the *Brit. Med. Jour.*, July 4, 1891, Dr. Suckling, Prof. of Medicine, Queen's College, Birmingham, writes: "I have during the last few years been accustomed to prescribe Indian hemp in many conditions, and this drug seems to me to deserve a better repute than it has obtained." He calls it "almost a specific" in a form of insanity peculiar to women, caused by mental worry or moral shock, in which it clearly acts as a psychic anodyne—"seems to remove the mental distress and unrest." After commending it in melancholia and mania he says: "In migraine the drug is of great value; a pill containing one-half grain of the extract, with or without one-quarter grain of phosphate of zinc, will often immediately check an attack, and if the pill be given twice a day continuously, the severity and frequency of the attacks are often much diminished. I have met with patients who have been incapacitated for work from the frequency of the attacks, and who have been enabled by the use of Indian hemp to resume their employment." In a personal note from the doctor he wrote: "I have used Indian hemp as an anodyne and hypnotic, and find it most useful in both ways. I have never seen any ill results."

Anstie commends it in migraine and the pains of chronic chloral and alcohol taking. In his work on neuralgia—the best ever written, and one which I advise every one to read—he says: "From one-quarter to one-half grain of *good extract* of cannabis, repeated in two hours, if it has not produced sleep, is an excellent remedy in migraine of the young. It is very important in this disease that the *habit of long neuralgic paroxysms should not be set up.*"

Russell Reynolds thinks that in neuralgia, migraine and neuritis even of long standing, it is by far the best of drugs. Mackenzie has used it with success in constant all-day headache, not dependent on anaemia or peripheral irritation. Bastian and Reynolds commend it in the delirium of cerebral softening, and the latter says it calms the head pain and unrest of epileptics. In cardiac tumult, in senile insomnia and delirium, and the night unrest of general paresis, it acts well.

In some diseases common to women, hemp works well. Graily Hewitt says, that in many cases of uterine cancer it allays or prevents pain. Ringer asserts it sometimes signally useful in dysmenorrhoea. West commends it here. Potter states that its anodyne power is marked in chronic metritis and dysmenorrhoea; and Hare thinks it of great value in chronic uterine irritation, and nervous and spasmodic dysmenorrhoea. Donavan and Fuller claim' it of value in migraine and chronic rheumatism; and Mackenzie in hay fever and hay asthma.

In genito-urinary disorders it often acts kindly-the renal pain of Bright's disease; in vesical spasm; retention of urine, and **chordee**; and it calms the pain of clap equal to sandal or copavia, and is less unpleasant. The distress of gastric ulcer and gastrodynia are eased by it, and in other and varied neuralgias it serves one well. In some cases of phthisis and other cureless disease it will bring euthanasia by allaying pain and unrest.

My experience with hemp covers more than a decade, many cases and several pounds of fluid extract. It is proper to state that these cases have been solely habitues or ex-habitues of opium, **chloral** or cocaine. In these, often, it has proved an efficient substitute for the poppy. Its power, in this regard, has sometimes surprised me. Both sexes took it, and with some no other drug anodyne was used. One of these-a naval surgeon, nine years a ten-grains daily subcutaneous morphia taker-recovered with less than a dozen doses. My oldest female patient-sixty-four-found its service complete. Its action has varied, as some cases respond more fully. This during the early abstinence time. Later it has done good in the post-poppy neuralgia, especially the cranial kind, and it has calmed mental pain and unrest.

As a hypnotic, Fronmueller gave hemp in 1,000 cases. Success, 5 30; partial success, 2 15; no success, 25 3. As such in delirium tremens, Potter declares it "the best." Anstie thought it better than opium when the pulse is feeble. Phillips asserts it "one of the most useful." Tyrrell and **Beddoe** say the same. Suckling's opinion has been given. McConnell commends it in the insomnia of chronic cardiac and renal disease. Oxley lauds it in the insomnia of severe **chorea**, especially in children; the tincture "more effectual than any other hypnotic."

My own results prove it a satisfactory soporific, even oftener than as an anodyne. And this, too, under conditions that test thoroughly the power of any drug in this regard, for the insomnia of ex-poppy habitues finds its equal only in the agrypnia of the insane. With many, no other hypnotic was used. The sleep has been sound and refreshing. Many cases showed a notable influence to it as regards time-somewhat akin to sulfonal. Two hours sufficed. The first, pleasant stimulation; the second, increasing drowsiness, ending in sleep.

Again, I admit my special cases may involve a condition making them more easily subject to hemp hypnosis, but these do not preclude the wisdom of its trial with other patients in whom it may act equally well.

Writers on cannabis refer to certain peculiar effects—which, in our thinking, are more often peculiar to the patient—that may here be noted. One is a mild intoxication. I say “mild,” because the hashish, assassin-like, running-a-muck form is less fact than fancy. It is said temperament largely determines the mental effect whether it be grave or gay, merry or mad. Most of my cases—when such—have been in a merry mood. Of the hundreds of times given, only once did it excite to violence. That was a young physician, six years ago, in which it came close to a personal assault on the writer that was warded off only by superior strength. The patient afterward avowed no knowledge of such a situation, was profuse in apology, and stated that once, after taking hemp simply to note results, he routed every one out of the house, including his own grandmother!

Catalepsy is a rare sequence. We have seen it once. A woman, twenty-three, brunette, small but active, took, in early evening, forty minims Squibb’s fluid extract as a soporific. After playing cards half an hour, she began to be very jolly, and it was suggested she retire. Visiting her later, she was found completely cataleptic. It soon subsided, sleep followed, and no after ill-effect.

Failure with hemp is largely due to inferior preparations, and this has had much to do with its limited use. It should never be called inert till full trial with an active product proved it.

Wood thinks the English extracts best. I have used, mainly, Squibb’s fluid extract. To a small extent, Parke, Davis & Co.’s

Normal Liquid. They are reliable. Hare commends the solid extract made by the latter, and by McKesson & Robbins.

Merck has produced two elegant and efficient extracts—cannabine tannati and cannabinone. They are essentially hypnotic. The former has been found by Prior, Vogelsgesang, Mendel and others, a satisfactory soporific. Prior gave it one hundred times to thirty-five persons—the most with success. In hysteric cases not calmed by chloral or opium, it acts specially well. In the small dose of one grain it has brought sleep when one-third grain morphia failed.

Another cause of failure is too timid giving. I am convinced that the dose of books is, often too small. The only true way is, once a good extract, push it to full effect. My doses have been large—forty to sixty minims of the fluid extract—overlarge for the nonnarcotic habitue; but, as we years ago asserted, habitual poppy taking begets a peculiar tolerance of other net-vines, and they must be more robustly given. Both sexes have taken them—women frequently—with no other effect than quiet and sleep. I think, for many, small doses are stimulant and exciting; large ones, sedative and quieting. They are the outcome of an experience with smaller doses that failed of effect desired. They prove hemp harmless, and they add proof to the opinion of most neurologists that, once a nervine needed, it is often better to give one full dose than several small.

The tincture—three grains to the drachm—may be given in doses of twenty to sixty minims. The fluid extract, five to twenty minims. The solid extract, one half to two grains. Tannate of *cannabin*, five to fifteen grains. Cannabinone, one half to one and one half grains. Cannabinone with milk sugar, five to fifteen grains, and each repeated or increased till a full effect is secured. It is said that in women cannabinone acts twice as strongly as in men. In headache, periodical or long continued, one half to two grains solid extract may be given each hour or two till the attack is arrested, and then continued in a similar dose, morning and night, for weeks or months. It is important not to quit the drug during a respite from pain.

I close this paper by again asking attention to the need of giving hemp in migraine. Were its use limited to this alone, its worth, direct and indirect, would be greater than most imagine. Bear in mind the bane of American women is

headache. Recollect that hemp eases pain without disturbing stomach and secretions so often as opium, and that competent men think it not only calmative, but curative. Above all remember the close genetic relation of migraine relieved by opium, to a disease that spares neither sex, state nor condition.

Dr. Suckling wrote me: "The young men rarely prescribe it." To them I specially commend it. With a wish for speedy effect, it is so easy to use that modern mischief-maker, hypodermic morphia, that they are prone to forget remote results of incautious opiate giving.

Would that the wisdom which has come to their professional fathers through, it maybe, a hapless experience, might serve them to steer clear of narcotic shoals on which many a patient has gone **awreck**.

Indian hemp is not here lauded as a specific. It will, at times, fail. So do other drugs. But the many cases-in which it acts well, entitle it to a large and lasting confidence.

My experience warrants this statement: cannabis **indica** is, often, a safe and successful anodyne and hypnotic.
