## THE ENGLISH REVIEW

common among the lower classes, in consequence of exposure, bad air, and other insanitary conditions. One of my own patients is a most brilliant exponent of electrical science, endowed with a creative genius which would have enriched the world in a thousand ways had he not been hampered all his life by spasmodic asthma. This man cannot live and work at all unless he has a supply of heroin in case he is seized by a spasm. His ill-health has prevented him amassing a fortune; he is, in fact, extremely poor. Now what is the effect of the Dangerous Drugs Act on him—and he is only one of probably 100,000 similar cases in these islands? Only this—that he must trudge round constantly to his doctor to obtain a new prescription: this means time and money which he can ill afford. Also, it might mean danger to life, if he happened to forget his supply of the drug, and were seized with an attack; for he could hardly explain—in the violence of the paroxysm to a chance-summoned doctor that heroin, and heroin alone, would relieve him.

Nor does the mischief end here. (It is, to begin with, infernally un-English and unsportsmanlike to spy upon professional men, the pharmacist as well as the doctor.) All prescriptions for dangerous drugs are retained by the dispenser. He can obtain drugs as he requires them from the wholesale houses, and the transfer must be reported to the Central Spy Station. Detective-inspectors then drop in at all hours on the pharmacist, weigh what he has in stock, and see if the amount dispensed tallies with the amount prescribed. Woe to the wight who cannot account for the eighth of a grain! (It is not my business, but it is very much the business of the public, to inquire into the cost of conducting this elaborate infamy.)

And this microscopical meddling with reputable and responsible druggists, while the stuff is being sold all over

England in wholesale quantities!

But it does not stop here, even. The spies note the quantities prescribed by each physician, and sherlock him home. The statistics show that Dr. Black has prescribed 2 ounces 3 pennyweights 1 scruple and 2\frac{3}{8} grains of morphia during the last month, while Dr. White has only prescribed 4\frac{1}{6} grains in the same period. As Dr. White happens to be a kidney, and Dr. Black a cancer, specialist, the anomaly