

## Medical Matters.

### THE INFLUENCE OF PARENTAL ALCOHOLISM ON THE PHYSIQUE AND ABILITY OF OFFSPRING.

Dr. T. B. Hyslop, F.R.S. Edin., President of the Society for the Study of Inebriety, and late Resident Physician at Bethlem Royal Hospital, recently delivered an interesting address to the Society on the above subject, reported in full in the *Lancet*, when he spoke, in part, as follows:—

#### THE PROBLEM.

I feel sure it is agreed that the problem we are met to discuss is not to be proved, or even advanced, by rhetoric, and, in my opinion, it is open to question whether it can be solved satisfactorily by statistics. *Does parental alcoholism—apart from parental degeneracy, which, together with a tendency to alcoholism, is heritable—influence the physique and ability of offspring?*

In order to answer this question we must, so far as is possible, first eliminate such sources of error as are due to the inclusion of side issues, indefiniteness of standards of alcoholism, health, and degeneracy, and we must correct our vague conceptions as to what really constitutes heredity. We ought also to equalise or exclude altogether such variations in environment as may possibly affect the germ-plasm of the parents or the offspring independent of the influence of alcohol itself. It is obvious, however, that it is well-nigh impossible to find a definite uniformity of phenomena on which to base statistics which shall be accurate in every particular. We cannot exclude all variations in environment nor can we neglect the possibility of the intensification of degeneracy in successive generations due to a continuance of the same or different environmental defects.

In order the better to define our standards of parental degeneracy and alcoholism, it is important to note the sex, age at incidence, and evidences of inheritance, as well as the nature and degree of the defect. Needless to say, the environmental conditions should also be carefully noted. So far as the parental degeneracy and alcoholism are concerned, the Galton Laboratory researches have served the very useful purpose of bringing into prominence the *association*—in contradistinction to *causation*—of alcoholism and degeneracy; but it must be confessed that the question as to which came first—the mental defect or the alcoholism—has not received such attention as is needed. As an asylum physician I am almost daily confronted with the difficulty of deciding as to which is cause and which is effect, and, if, after

full consideration of all the data available, it is well-nigh impossible to decide such an apparently elementary point, how much more difficult must it be to find sufficiently reliable data on which to base statistics! It is also to be noted that the tendency to degeneracy or alcoholism may be latent in the parent, and one or other of these defects may become manifest, owing to some accidental factor, either before or after the tendency has been transmitted to the offspring. This fact renders the question as to which came first—the alcoholism or the child—somewhat futile. At first I believed that parental alcoholism should invariably precede the birth of the child, but I have now come to see that such a stipulation would lead, not only to the suppression of half the truth, but even provide a source for error unless definite distinction were made between parental alcoholism *per se* and parental degeneration plus a psycho-neurotic tendency to alcoholism.

In the last report from the Galton Laboratory claim is made that alcohol is, in its *pernicious* forms, consequent on, and not antecedent to, mental defect. This may be true, and if rightly understood and supplemented by an account of the influence of alcohol in intensifying an already existing nervous defect, it can do no harm to the cause of temperance. That it is the aim of the previous memoir to prove that alcohol may be taken with impunity no one with any sense of justice will contend; nor need it be imagined that alcohol is in any sense regarded as being capable of aiding the onward and upward trend of biological evolution. Referring as it does to pernicious forms of alcoholism, it is, of course, hardly likely to take cognisance of any statistics based upon the consumption of one glass of beer per day.

“One man’s food, another man’s poison,” refers to alcohol as much as it does to any other article of consumption, and it is indeed difficult to differentiate the degrees of alcoholism. Another matter about which there has been much contention, yet which has not yet been referred to in its true bearings, is the fact that in asylum practice it is comparatively seldom that we find the various lesions so common to alcoholism in the sane. The reason for this may possibly be that alcohol selects for attack the least stable of the bodily systems in a given individual. The system may be, by its inherent weakness, more susceptible to attack, or it may be less able to eliminate from its substance the effects of toxic action. It is difficult to conceive any other explanation of the selective action of alcohol other than by the inherent weakness of the nervous system, as is found in inherited degeneracy.

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