

Busted: How Cocaine Went from Friend to Fiend in the 19th Century

Rebecca Kheel

“Great things were at first anticipated from the use of cocaine in internal medicine, and more particularly in the management of certain nervous and mental derangements. From the known stimulating action of the leaves, whether chewed or given in the form of tinctures or elixirs, it was confidently hoped that the much more powerful alkaloid would prove proportionately efficacious, notable as cocaine when sprayed upon the expectations have not been fully realized.”

—Dr. J. Leonard Corning, New York neurologist²⁰¹

Cocaine is one of the cornerstones of today’s war on drugs, but in the latter part of the 19th century, physicians jumped on this newly synthesized drug as the solution to most everything that ailed. Need surgery? Eliminate the pain of the incision with a dab of cocaine. Bothered by throat cancer? Drink up a cocaine tonic. Feeling depressed? Cheer up with three glasses of coca wine per day.

Though Andean peoples have chewed coca leaves as a stimulant for centuries, the Americans and Europeans did not co-opt the drug until the 1860s, when the active alkaloid was first extracted from the plant. Cocaine experiments began, but excitement did not truly burst until the 1880s. In 1884, Carl Koller, an ophthalmologist in Vienna, successfully used cocaine as a local anesthesia. “It is probable that to no living man does humanity owe a greater debt of gratitude than to Dr. Carl Koller, the discoverer of the application of hydrochlorate of cocaine as a local anesthetic,” *Harper’s Weekly* exalted.²⁰² That same year, before he became famous for his theories of psychotherapy, Sigmund Freud, published an extensive treatise on the therapeutic uses of cocaine.

In America, one disease in particular seemed to plague the middle class, and cocaine’s stimulating effects were a natural fit to become the cure de jour. American middle-class men – and eventually women and lower class men – increasingly suffered from something called neurasthenia. Physicians with few tools at their disposal to figure out why someone might feel impotent or constipated crafted the proto-psychiatric diagnosis of neurasthenia, a catch-all disease said to be caused by modernization and most often characterized by exhaustion or nervousness. Cocaine joined the ranks of the various recommended cures. Doctors and researchers issued reports hailing cocaine’s effectiveness. Drug manufacturers concocted new, popular tonics using the drug. Newspapers ads shouted at consumers that all their afflictions can be cured with the new drug or a tonic containing it.

But newspaper articles, editorial cartoons and scientific research on the dangers of cocaine soon followed the initial enthusiasm. Reports of overdoses, crime, insanity and addiction flourished. People feared the drug was moving from a middle-class cure to an African-American indulgence. Cocaine was lumped in with the other social ills of the day, the alcohols and opiates temperance movements sought to eradicate. In a few years, the drug would be regulated.

²⁰¹ “The Growing Menace of the Use of Cocaine,” *The New York Times* [New York] 2 Aug. 1908: SM1.

²⁰² “DR. CARL KOLLER,” *Harper’s Weekly* 24 May 1890: 412.

Americans, desperate to make sense of the ever-changing society of the late 19th century, clung to an uncertain disease and dubious cure. However, the negative aspects of cocaine were too much to ignore. As with most fads, cocaine's path was not to remain uncut.

Neurasthenia

In the 19th century, there were no MRIs. There was no such thing as Zoloft or Ambien. People did not sit down on couches and unfurl their problems on their psychiatrist. The 19th century may have been on the cusp of many scientific and technological breakthroughs, but medicine was still relatively rudimentary. Instead, doctors relied on the limited tools they had before them to make sense of the changing world around them and those that seemed to fall ill because of those changes. Neurologists were no different. As F.G. Gosling explains in *Before Freud*, "The neurologists of the late nineteenth century had little in common with their present-day namesakes. There were a curious blend of physician, psychiatrist, and anatomist, and...they were much nearer to being the forerunners of twentieth-century psychiatrists than our modern neurologists because of the emphasis on emotions and the social origins of stress."²⁰³ One result of that was the popular diagnosis of neurasthenia, a term coined in 1869 by New York neurologist George M. Beard. But neurasthenia was not a particularly steadfast concept. Neurasthenia was a disease of loosely defined symptoms and treatments that reflected physicians' own views of society, as well as the gender, racial and class divides of the time.

Despite Beard's work to pin down what ailed the American populace, neurasthenia encompassed a wide array of physical and psychological symptoms that were treated in an equally varied amount of ways. According to Beard's seminal works on the disease, neurasthenia resulted from a deficiency of nerve force, or stored energy that every person had inside him or her. This deficiency was caused by five specific 19th century innovations: steam power, the periodical press, the telegraph, the sciences and the mental activity of women.²⁰⁴ Though Beard did not believe neurasthenia was exclusively an American disease, he thought it was more prevalent here because of "dryness of the air, extremes of heat and cold, civil and religious liberty, and the great mental activity made necessary and possible in a new and productive country under such climatic conditions."²⁰⁵ Those who were most struck by the disease were the "brain workers," or middle class professionals. Once this peculiar affliction of the late 19th century middle class was put in concrete terms, "neurasthenia was used to characterize practically every nonspecific emotional disorder short of outright insanity, from simple stress to severe neuroses."²⁰⁶ Beard separated symptoms into seven categories – digestive, vascular, motor, sexual, mental and sensory. This encompassed manifestations ranging from indigestion to palpitation to polyuria to twitching to impotence to headaches.²⁰⁷ Though the list of symptoms was nearly all encompassing, "physicians of all types, in major cities and smaller communities across the country, were in agreement as the symptomatology of neurasthenia. Although it might be difficult to diagnose, because it could involve any or all of the body's functions, the key lay in the recognition of mental distress."²⁰⁸

²⁰³ F.G. Gosling, *Before Freud: Neurasthenia and the American Medical Community, 1870-1910* (Urbana: University of Illinois Press, 1987) 17.

²⁰⁴ George M. Beard, *American Nervousness* (New York, NY: G. P. Putnam's Sons, 1881) vi.

²⁰⁵ Beard vii

²⁰⁶ Gosling 9

²⁰⁷ Gosling 81

²⁰⁸ Gosling 82-83

Despite the agreement on the main symptom, there was no agreed upon treatment of neurasthenia. One discussion of the New York Academy of Medicine recommended patients drink hot water as the heat “increased activity of the skin, warmth of the extremities, the circulation became more uniform, and it was believed the viscera became disengorged,”²⁰⁹ among other improvements. Hydrotherapy like that was among the top ten most prescribed treatments, according to Gosling.²¹⁰ Another top treatment was drugs. Strychnine, today known to be a poison, was often used in small doses to stimulate the central nervous system.²¹¹ But the most popular treatment was physician Weir Mitchell’s rest cure, which involved “total isolation of the patient from all but the doctor and a trained nurse.”²¹² Ultimately, though, a doctor’s analysis of the symptoms and course of treatment – and at the root, why the term neurasthenia came to be – depended upon the doctor’s own values and how society viewed gender, race and class.

Neurologists like Beard drew from their personal experiences to develop their theories on neurasthenia. As Barbara Sicherman notes in her article, “The Paradox of Prudence: Mental Health in the Gilded Age,” “George M. Beard...clearly illustrates the continuity between personal experiences of depression, religion, and childhood fears, and an interest in preserving mental health...it is apparent that the restrictive model of mental health was a metaphor that helped physicians make sense of their own professional and personal experiences.”²¹³ Doctors in the late 19th century needed to reconcile their conservative, religious upbringings with the changing world, one that increasingly valued self-determination and science over self-restraint and religion. For example, Sicherman points out the medical community of the late 19th century was the first to work under the notion of evolutionary theory, as Charles Darwin’s *Origin of Species* was published in 1859.²¹⁴ Beard’s life particularly fits the trend of trying to reconcile a conservative upbringing with his medical practice. Beard’s father was a Congregational minister, “ever mindful of the temptations of earthly life.”²¹⁵ After he graduated from Yale in 1862, Beard experienced many of the symptoms he would later describe as neurasthenia. Among his concerns was the conflict between his success and spirituality. This conflict was revealed in journal entries such as “How long will it be before I shall be humbled and crushed?” something he wrote even after he decided to become a physician and cast off his father’s expectations.²¹⁶ Thus, when he tried to help his patients, he drew on his own troubles and experiences with nervousness. As Sicherman concludes, physicians and neurologists like Beard,

who had experienced the social and personal strains about which they wrote, prescriptions for health may variously have reflected satisfactory personal solutions to their own problems, attempts to remedy the perceived errors of their own upbringing, and perhaps even goals for others that they themselves could not, perhaps did not wish to, achieve...Bolstered by the growing prestige of science, mental hygienists contributed to this quest by providing a secular rather than a religious context for evaluating the good life.²¹⁷

²⁰⁹ “New York Academy of Medicine,” *Philadelphia Medical Times* 15 Nov. 1884: 136.

²¹⁰ Gosling 109

²¹¹ Gosling 116

²¹² Gosling 110

²¹³ Barbara Sicherman, “The Paradox of Prudence: Mental Health in the Gilded Age,” *The Journal of American History* 62.4 (1967): 891, 899.

²¹⁴ Sicherman 892

²¹⁵ Sicherman 902

²¹⁶ George M. Beard, Private Journal, 203, in Sicherman 903

²¹⁷ Sicherman 911-2

Neurasthenia was a physical and mental illness, but it was equally a way for scientists and doctors to explain their own fears and tribulations. Bringing in personal values also influenced the views of neurasthenia as relating to gender, race and class.

Neurasthenia was also a way for middle-class men to solidify their status in society as it changed and legitimize their seeming failures to keep up. Class and political issues arising in the late 19th century threatened to displace middle-class white men from their authoritative status in society. A greater number of immigrants in the work force, as well as the beginnings of the labor movement in socialist and anarchist movements, contributed to men's fears, according to Gail Bederman in *Manliness and Civilization*.²¹⁸ At the same time, women were pushing farther out of the home and for greater rights, exasperating men's fears. Men explained their falling behind with neurasthenia. Immigrants and the lower classes were able to push ahead because of their unrestrained, primitive aggression. The middle-class white men were expected to remain restrained and civilized in Victorian culture. They felt weak, and "'Neurasthenia' was in part an effort to construct the *cultural* weakness of self-restrained manliness as a *bodily* weakness, and to 'cure' it."²¹⁹ Physicians were able to step in and help men define their roles in society because, according to Gosling and Joyce M. Ray in their article "The Right to be Sick," "members of the medical community took advantage of the increasing prestige of science in general and medicine in particular to establish themselves as experts eager to counsel Americans on a wide range of personal issues."²²⁰ Thus, physicians provided white middle-class men with the opportunity to justify their exhaustion and apprehensions at trying to outpace the lower classes, other classes and women by saying they had a physical ailment that could hopefully be cured.

Because neurasthenia was primarily considered a diagnosis for white middle-class men, when women, lower classes and other races exhibited signs of neurasthenia, they were treated differently and sometimes with less respect. Middle-class white men had a right to be sick because they were legitimately overworked. For other patients, physicians "also sympathized, though to a lesser degree, with those biologically predisposed to nervousness (women of all classes), but expressed little sympathy for those believed to be guilty of vices such as sexual excess or other bad habits (most often lower-class men)."²²¹ Women developed neurasthenia because they tried to fight against their nature of domestication. Thus, when someone like prominent writer Charlotte Perkins Gilman complained of neurasthenia, she was advised, "And never touch pen, brush or pencil as long as you live."²²² As Bederman explains, women diagnosed with neurasthenia were done so under the presumption that "while men must have their nervous forces recharged so they could return to the demanding intellectual pursuits of civilization, nervous women were advised to recognize their biological limitations and devote themselves exclusively to domesticity and the home."²²³ Lower class men who exhibited neurasthenia were also seen to develop the disease because they broke societal rules. But in their case, it was because they acted like degenerates. Lower class men were often diagnosed with sexual neurasthenia, a less respectable form of

²¹⁸ Gail Bederman, *Manliness & Civilization: A Cultural History of Gender and Race in the United States, 1880-1917* (Chicago: University of Chicago Press, 1995) 14.

²¹⁹ Bederman 84

²²⁰ F.G. Gosling and Joyce M. Ray, "The Right to Be Sick: American Physicians and Nervous Patients, 1885-1910," *Journal of Social History* 20.2 (1986): 251.

²²¹ Gosling and Ray 253

²²² Charlotte Perkins Gilman, *The Living of Charlotte Perkins Gilman: An Autobiography* (1935; Madison: University of Wisconsin Press, 1991) 96, in Bederman 131.

²²³ Bederman 130

the disease. "The strong cases are those in which the irritation of masturbation or excessive coition, re-acting upon the brain for many years, has eventually, in the very prime of life and apparent physical development, produced something more than a mere functional disease," a Washington, D.C., doctor described of sexual neurasthenia.²²⁴ Again, while middle-class white men with neurasthenia were victims who needed help to return to their rightful role in society, lower class individuals inflicted the disease upon themselves through degenerative actions. Thus, even when others got diagnosed with neurasthenia, the disease was still used as a vehicle to promote the status quo. Neurasthenia was a reflection of society's lesser views of women, lower classes and other races and the middle class' desire to remain in control.

In addition the reflecting white middle-class men's worries, neurasthenia mirrored physicians' own fears and confusion over the changing world. Without advanced medical technology, doctors and patients needed to draw from their own lives and societal norms to understand what ailed them. Almost any physical debility could be a symptom, and there were almost as many cures to match. As the century progressed and new drugs were discovered, one cure would rise in popularity and fascinate the nation.

The High

The effects of cocaine are well known today. It increases the levels of the pleasure-inducing neurotransmitter dopamine and causes users to feel energized and alert. Looking back, it seems like a natural solution for anxious and depressed neurasthenia patients. The benefits of the drug were not lost upon on doctors, who began recommending it to their patients and conducting research on its effectiveness. Often, the research was conducted on themselves. Cocaine tonics flooded the market. Though the one tonic to outlive the era, Coca Cola, is most famous now, it was an imitation of Vin Mariani, a coca and wine mix that helped make its founder, Angelo Mariani, "the world's first cocaine millionaire."²²⁵ Prominent people from Ulysses S. Grant to Pope Leo XIII drank Mariani. Imitators popped up. On the recommendations of doctors and with its addictive properties, coca wine surged in popularity to treat enfeebled neurasthenics.

In 1881, a New York physician named William Searle linked cocaine's effects with the potential to cure neurasthenia. A book describing his take on neurasthenia, *A New Form of Nervous Disease*, was capped off with an essay in which he detailed his experiences with cocaine. Searle wrote that "no drug has so baffled all investigation into its effects upon the healthy human system,"²²⁶ but still went on to try to explain cocaine's effects. By his own account, Searle first encountered coca leaves in 1865 when he had them shipped from Peru. The journey had damaged the leaves, but he chewed them anyway. He felt some loss of appetite and a little increase in physical endurance, but was unimpressed. In 1878, he found a better specimen, but experiments still yielded unsatisfactory results. Still, Searle asserted that "we have the testimony of an entire nation, employing it constantly during centuries of time, as well as many who have used it by way of experiment, that it does in some way obviate the necessity for food and sleep to a remarkable degree."²²⁷ In other words, Andean peoples and others who travelled to South

²²⁴ Gosling and Ray 256

²²⁵ Howard Markel, *An Anatomy of Addiction: Sigmund Freud, William Halsted, and the Miracle Drug Cocaine* (New York: Pantheon Books, 2011) 58.

²²⁶ William S. Searle, *A New Form of Nervous Disease. Together with an Essay on Erythroxyton Coca* (New York: Fords, Howard & Hulbert, 1881) 99.

²²⁷ Searle 117

America could testify to cocaine's effectiveness. For example, Searle described a doctor's walk up a 3,000-foot mountain, where he felt "so fatigued that it required much determination to get over the last three hundred feet." At lunch, the doctor chewed coca leaves, so "he experienced no fatigue while going down, and after returning home felt no hunger, nor thirst, nor weariness."²²⁸ Though his own experiences with coca and cocaine proved substandard, Searle still believed that with so much mounting evidence of its benefits that it would be the perfect cure for neurasthenia. He concluded his essay by recommending:

If, then, my philosophy and physiology be correct, and if Coca is and does what is claimed, and what I believe it will be proven to be and do, the introduction of this substance into general use is a matter of exceeding importance, and its employment should be fostered by every true physician.

The rest cure and other drugs like strychnine were already been used to treat neurasthenia, but in cocaine, Searle believed he found the key to the widespread affliction. Other doctors and drug manufacturers would agree and push cocaine onto the American population.

While Searle's recommendation of cocaine for neurasthenia was mostly based on intuition of its effectiveness, other physicians began testing it on themselves and prescribing it to patients with seemingly positive results. Doctors came to the conclusion that "The use of cocaine in neurasthenia is a valuable addition to the treatment."²²⁹ For example, an article in the *American Journal of Pharmacy* describes the experiments of Italian neurologist Paulo Mantegazza, which amounted to him taking the drug himself. After taking an infusion of the drug for several days, Mantegazza noted how he felt: burning skin, heart palpitations, headaches, vertigo, roaring in his ears. But eventually he began to feel that "an apparent enlargement of the intellectual horizon indicated that the specific influence upon the brain commenced."²³⁰ He concluded that "the individual intoxicated by coca feels but a gradually augmented vigor, and a desire to spend this newly acquired strength in active labor...The most prominent property of coca, which is hardly to be found in any other remedy, consists in the exalting effect it produces, calling out the power of the organism without leaving afterwards any sign of debility."²³¹ If someone needed to complete hours of hard labor or rigorous mental activity without feeling exhausted afterward, Mantegazza recommended cocaine. In other words, cocaine could prevent neurasthenia. But aside from aiding those before they needed to work, doctors also found cocaine worked in reversing the effects once a patient was neurasthenic. For example, Dr. J.J. Caldwell details his trials with sexually neurasthenic patients in an article for *Medical and Surgical Reporter*. One of the patients, Mr. K, was a 33-year-old athletic man who had lost his "color and vivacity."²³² Mr. K was worried about becoming impotent, and Caldwell found Mr. K suffered from all typical the factors of neurasthenia: "prolonged an arduous mental work, neglecting the regularity of sleep, diet and recreation."²³³ Caldwell prescribed a tonic of coca, vanilla and sandal. Caldwell wrote that Mr. K

²²⁸ Searle 102

²²⁹ D. R. Brower, "The Effects of Cocaine on the Central Nervous System," *Medical and Surgical Reporter* 54.5 (1886): 135.

²³⁰ Paulo Mantegazza, "On the Dietetic and Medicinal Properties Erythroxyton Coca," *American Journal of Pharmacy* (1860): 419.

²³¹ Mantegazza 419-420

²³² J.J. Caldwell, "The Erectile Tissues: Their Physiology, Pathology, and Treatment," *Medical and Surgical Reporter* 70.3 (1894): 101.

²³³ Caldwell 101

gradually improved, and Caldwell was sure “a case neglected long enough undoubtedly might have ended in some permanent pathological lesion.”²³⁴ Thanks to Caldwell’s judicial administration of a coca tonic, Mr. K was able to continue living a neurasthenia-free life and more medical proof of cocaine’s benefits was added to the canon.

Of all the coca and cocaine preparations, many doctors pointed to coca wine as the most effective. One reason coca wine theoretically worked best for neurasthenia was because wine helped correct digestive issues, a common symptom of neurasthenia. Years after Mantegazza’s initial experiments with cocaine, *The Atlantic Medical Weekly* reported that Mantegazza recommended coca wine over other forms of the drugs, especially if using cocaine to treat neurasthenia. The wine was more suited to cure neurasthenia, he said, because “it seems to directly stimulate the process of digestion, and by its action upon the muscular tone and vasomotor system to increase peristalsis and remove circulatory congestion.”²³⁵ In layman’s terms, wine complimented cocaine’s effects on neurasthenia symptoms, especially poor digestion. A few years earlier, neurologist Graeme M. Hammond came to a similar conclusion in the *Journal of Nervous and Mental Disorders*. Digestion is hampered in neurasthenia because digestive juices are not secreted in the proper proportions or there are changes to the juices’ chemical composition, Hammond said. He thought that “wine of coca is the best, as it seemed that the tonic and stimulating effects of coca on the nervous system, together with the gastric stimulation from the small quantity of alcohol, had generally a very beneficial effect.”²³⁶

But coca wine’s benefits extended beyond curing digestive issues of neurasthenia. U.S. Surgeon General and founder of the American Neurological Association, William A. Hammond, experimented on himself with coca wine for various ailments. Hammond drank a glassful at the close of each day and found that “it certainly had a decidedly restorative effect without being followed by a feeling of depression.”²³⁷ He decided he would use it “generally when he wished in any case to produce a powerful therapeutic effect.”²³⁸ Dr. E. R. Palmer, who would later become the president of the American Medical Association, employed coca wine in treating patients with fatigue. While attending a race one day in 1884, Palmer noticed one of the runners limping with dark circles enveloping her eyes as a result of little rest, pitiable living conditions on the road, bad food and travel. Palmer approached her trainer to ask if he could treat her, and provided the runner with a glass of coca wine. After two doses, “her step was quick and elastic, and with head up she moved easily around the track humming the air the band was playing, and declaring that she felt like a new woman.”²³⁹ Palmer spent the next few days with her until she was back in full health. He concluded, “To my mind the experiment was both striking and conclusive, in every way favorable to the vaunted efficacy of coca wine in physical fatigue.”²⁴⁰ Coca wine seemed to be the solution to the tired, overworked populace, and one brand in particular would rise above the rest.

²³⁴ Caldwell 102

²³⁵ Paulo Mantegazza, “The Use of Coca Wine,” *The Atlantic Medical Weekly* 8.21 (1897): 334.

²³⁶ Graeme M. Hammond, “Alcohol, maltine, and coca wine in neurasthenia,” *Journal of Nervous and Mental Disorders* (1894) in *The Year-book of Treatment for 1896: A Critical Review for Practitioners of Medicine and Surgery* (Philadelphia: Lea Brothers & Co., 1896) 88.

²³⁷ William A. Hammond, “Remarks on Cocaine and the So-called Cocaine Habit,” *Medical and Surgical Reporter* 55.22 (1886) 684

²³⁸ Hammond 684

²³⁹ E.R. Palmer, “Coca in Fatigue,” *The American Practitioner* (1885) 71.

²⁴⁰ Palmer 73

One of the proponents and pioneers of coca wine was a Frenchman, Angelo Mariani. Mariani produced a mixture of ground coca leaves and Bordeaux wine he called Vin Mariani. The company was headquartered in Paris, but had a production branch in New York. The recommended dosage was one glass a half hour before or immediately after each meal. Children were supposed to take half the dosage. A pamphlet Mariani produced in 1884 that accompanied wine sales claimed Mariani was able to overcome people's hesitations about cocaine's effectiveness and create a popular drink because of "the importation and careful selection of leaves, and the superiority of his preparation of Coca."²⁴¹ The 1884 pamphlet, the third edition, reveals that Mariani wanted his drink to be more than a recreational enjoyment; he wanted it to be the go-to cocaine tonic for physicians to recommend and patients to want to cure them. The 53-page book starts off with a description of cocaine's history and scientific properties. Testimonials from doctors and customers fill page 21 onward. Typical of the praise was a reprint of an article that originally appeared in the *New York Medical Journal* written by a Boston doctor, H.D. Hicks. According to the doctor, Vin Mariani cured him and his patients of "backache accompanied by high-colored urine...palpitations of the heart...It renews the vigor of the intellect and relieves mental exhaustion...It dissipates the 'blues,' leaving the mind calm."²⁴² Hicks was describing symptoms typical of neurasthenia. Though the word is not used in the pamphlet, Mariani set his drink up to be a prime remedy for neurasthenia.

After trying Vin Mariani on themselves and their patients, physicians' published research corroborated the claims in Mariani's pamphlet. An article in *Medical Times and Register* said of Vin Mariani, "There is no doubt whatever that this preparation has proven itself a boon to mankind."²⁴³ Those who wrote the article said they had prescribed it many times to businessmen who felt rundown from work. Almost immediately upon trying Vin Mariani, "the cares and worry entailed by business and the physical flaccidity brought on by overwork, all seemed to give away completely...despite the fact that subjects continued uninterruptedly at their usual occupations."²⁴⁴ The authors were even more impressed that the effects were everlasting, though they added to get everlasting effects, one needs to regularly drink the coca wine. Though the article does not specifically mention how Vin Mariani compares to other coca wines, the implication from the astonishment is that Vin Mariani works the best. Prof. Marius Odin, writing in *New York Medical Monthly*, likewise found that Vin Mariani was the best cure for neurasthenia after trying a number of other typical remedies. Odin was treating a 25-year-old Austrian woman, Madame de G. Madame de G. suffered from a catalogue of neurasthenia symptoms:

I was stuck at first by her pallor; her skin, the mucous membranes of her eyelids and lips were quite colorless...This young woman complained of weakness and general atony, cephalalgia, dizziness, vertigo, tendency to lipotynie, caused by sorrows, sitting up late at night and generally depressing influences. There was gastralgia, with alternate constipation and diarrhea. Menstruation was irregular, and an abundant leucorrhoea was accompanied by gastralgic exacerbation. Her pulse was weak and depressible; there was a blowing sound with the first heartbeat; very accentuated in the carotids. On auscultation I found weak respiratory murmurs, much prolong expiration; dry

²⁴¹ Mariani & Company, *Coca Erythroxyton. (Vin Mariani.) Its Uses in the Treatment of Disease: With Notes and Comments by Prominent Physicians* (3rd ed. New York: Mariani, 1884) 20.

²⁴² Mariani 39-40

²⁴³ "Vin Mariani in Exhaustion," *Medical Times and Register* 38.7 (1900) 244.

²⁴⁴ "Vin Mariani in Exhaustion" 244

jerking and cough. There was insomnia and a tendency to night sweats.²⁴⁵

Nothing seemed to work to cure that long list of symptoms; Odin tried some of the popular treatments like arsenic and hydrotherapy to no avail. Then he tried Vin Mariani. He prescribed a glassful at morning and night, 15 minutes before meals. Finally, there were results: "Appetite appeared, food was taken, and the digestive functions were becoming more regular – day by day...Madame de G., who has since resumed her daily occupations, tells me that thanks to the medicament, taken at proper times, she can bear, without fatigue, long conversations, and, at the same, her vocal powers have acquired ampler development."²⁴⁶ Madame de G. was on the road to recovery. Where other cures failed, Vin Mariani combated a battery of symptoms. As research like Odin's showed, Vin Mariani was most effective in curing neurasthenia.

Soon, ads across various types of newspapers and magazines proclaimed to customers the virtues of Vin Mariani. The ads, like the pamphlet provided with the wine, were normally flanked by celebrity or medical endorsements. Blurbs like actor Richard Mansfield's in an ad in *The World* were typical: "When fatigued a small glass of Vin Mariani works wonders."²⁴⁷ According to the ad, that is one of 8,000 endorsements sent to Vin Mariani by celebrities or doctors. Aside from the endorsements, the ads also provided the company's own claims of what Vin Mariani was capable of. One ad on the front page of the *New York Evening Post*, told readers that "If overworked bodily or mentally, if the system is run down by any cause whatsoever, if everything fails, try effects of the popular French tonic, 'Vin Mariani,' since 30 years recognized by the entire Medical Profession as uniformly reliable and beneficial."²⁴⁸ Such claims again attempt to both align Vin Mariani with medical expertise and assert its benefits as a cure for neurasthenia. Other ways the company proved its value was by listing its awards. An advertisement in *Puck* magazine said Vin Mariani won the following awards in 1895: A gold and silver medal from the Academie Nationale de France, a gold medal and diploma of honor from the Wine Exhibit of Bordeaux, France, and a gold medal and diploma from Leamington, England.²⁴⁹ The ads were also very concerned with keeping up Vin Mariani's reputation. The same ad that Mansfield's endorsement appears in contained a promise of a reward for anyone who provided information leading to the arrest or conviction of people slurring Vin Mariani; a notice that the company has copies of all the endorsements and is willing to provide them to anyone who asks; and a warning to avoid imitations.²⁵⁰ Whatever elements Vin Mariani advertisements included the message was the same: Vin Mariani is both medically and popularly the best treatment for neurasthenia.

With the popularity of Vin Mariani, coca wines and similar tonics appeared to try to replicate Mariani's success. The most well known of these imitations today is Coca-Cola. Coke started life as creator John Pemberton's French Wine Coca. In an interview with the *Atlanta Journal*, Pemberton touted the benefits of cocaine and noted that Vin Mariani was an increasingly popular tonic. But, he added, "I have observed very closely the most approved French formula, only deviating therefrom when assured by my own long experimentation and direct information from intelligent South American correspondents that I could improve upon...I believe that

²⁴⁵ Marius Odin, "An Interesting Observation," *The Cincinnati Lancet-Clinic* 18.4 (1887) 157.

²⁴⁶ Odin 157

²⁴⁷ "Vin Mariani: The World Famous Tonic for Body, Nerves and Brain," *The World* [New York] 27 Nov. 1898: 12.

²⁴⁸ "If overworked bodily or mentally," *The Evening Post* [New York] 25 Jan. 1894: 1.

²⁴⁹ "Among many awards to Mr. Mariani," *Puck* 18 Dec. 1895: 319.

²⁵⁰ "Vin Mariani: The World Famous Tonic for Body, Nerves and Brain" 12

I am now producing a better preparation than that of Mariani."²⁵¹ So while Pemberton may have been inspired by Vin Mariani, he claimed he did more than recapitulate it; he improved it. Ads for French Wine Coca displayed similar hyperbolic claims as Vin Mariani. One promised French Wine Coca was the "the ideal nerve tonic and intellectual beverage...One trial will charm and excite your enthusiasm."²⁵² Like Vin Mariani, the ad also said a book on coca would be provided with purchase of French Wine Coca. Pemberton's direct imitation of Vin Mariani was to be short-lived, though. Atlanta passed an alcohol prohibition law that took effect in 1886, forcing Pemberton to change the formula and name to today's more recognizable Coca-Cola.

But there were many more coca wines and tonics besides Coca-Cola that history have forgotten. Leibig Coca Beef Tonic combined sherry, coca and beef, a variation on popular beef, wine and iron tonics. Leibig's ads went the route of Vin Mariani, amassing an array of medical endorsements. Leibig snagged the praise of one of the original proponents of cocaine, Searle, who in an ad said, "Your preparation of coca is the best I have ever seen."²⁵³ There was also Restorative Wine of Coca, which advertised itself as being used "for nervous prostration, brain exhaustion, neurasthenia, and all other forms of mental and physical debility."²⁵⁴ Restorative Wine of Coca claimed it was better than all other coca wines, as it did not contain superfluous ingredients that hinder effectiveness. This company garnered the endorsement of William A. Hammond, who is quoted as saying, "It gives a feeling of rest and relief...I have discarded other wines of coca and use this alone."²⁵⁵ Metcalf's Coca Wine highlighted the various demographics that could benefit from drinking its product. Public speakers, singers and actors could eliminate stage fright and strengthen vocal cords. Children would enjoy the taste. Athletes could perform better during games. Metcalf's was also apparently trying to build up its reputation, as it promised \$1 sample bottles of the wine to medical professions and clergymen who sent in their identification.²⁵⁶ Those are just a few of the many coca wines that flooded the market after Vin Mariani, all vying to be the go-to coca wine to cure neurasthenia.

The Come-Down

As the nation drank up copious bottles of coca wine and cocaine's popularity rose, people began to notice some peculiar side effects. Though cocaine undoubtedly alleviated neurasthenia, it brought its own whole host of issues. Doctors started second-guessing their initial praises of the drug, and those who had experimented on themselves fell to addiction. People were getting addicted, overdosing or becoming crazed to the point of committing a crime. Some started worrying that cocaine was being used for illegitimate reasons, specifically for recreational purposes by African-Americans. What was once seen as miracle became a threat to society, associated with drugs already seen as dangerous, such as opium. Druggists became entangled in legal battles. Legislatures debated how to curb the downfall of decency. After years of reports of theft, murder, suicide and insanity brought on by cocaine, the drug began to be regulated. Cocaine's heyday was over.

²⁵¹ "A Wonderful Medicine," *Atlanta Journal* [Atlanta] 10 March 1885: 4.

²⁵² "Pemberton's: The World's Great Nerve Tonic," *The Anderson Intelligencer* [Anderson] 5 Nov. 1885: 2.

²⁵³ "Prepared Only by the Liebig Laboratory," *The New York Times* [New York] 26 Feb. 1882: 10.

²⁵⁴ "Restorative Wine of Coca," *Philadelphia Medical Times* 19.12 (1889): xiii.

²⁵⁵ "Restorative Wine of Coca" xiii

²⁵⁶ "Metcalf's Coca Wine," *The Century Illustrated Monthly Magazine* June 1888.

Even as doctors praised cocaine's effectiveness, inklings of its dangers snuck into reports and research. The same doctor who concluded, "The use of cocaine in neurasthenia is a valuable addition to the treatment," D. R. Brower, worried about the effects of too much cocaine in the same paper. "Cocaine, as mentioned in the beginning of this paper, is as powerful for evil as for good, and it requires no special prophetic gift to say that more disastrous results will be experienced by the laity from its indiscriminate use than have been known from either opium or alcohol," Brower warned.²⁵⁷ Brower agreed that cocaine was effective in treating neurasthenia, but in 1886 he already saw one patient for whom "the ten days' use of cocaine has incapacitated him for four months from the practice of his profession, and the probability is that at least three months more will be required to complete his restoration."²⁵⁸ Dr. J. K. Bauduy expressed similar worries about cocaine being more dangerous than opium or alcohol. A brief in *The Evening Post: New York* explained Bauduy believed a patient treated with cocaine will become an "object of pity, contempt, or solicitude" unless the drug is administered "by the hand of the physician himself. The drug should not be known to the patient, nor the amount of the alkaloid being given."²⁵⁹ In Bauduy's view, cocaine was still an important enough medicine to continue its use, but dangerous enough that it should not be readily available to anyone who wants it. Refuting William A. Hammond's statement at a New York Neurological Society meeting that there is no such thing as a cocaine habit, Brooklyn doctor J. B. Mattison replied he had already seen seven cases of cocaine addiction, five in physicians and two in druggists. The addicts, who suffered from hallucinations and delusions, "had acquired the cocaine habit gradually, making comparatively small injections several times a day."²⁶⁰ Despite observing cocaine addiction, Mattison, who a few years later founded the Brooklyn Home for Habituees for drug addicts, still agreed with Hammond about the positive effects of the drug. Though much of the medical community saw cocaine as a boon to medicine, there was definite hesitation about its effects.

While all forms of cocaine – powder, injections, tonics – were being questioned, some research focused on the dangers of coca wine. Coca wine proved to be no safer than other forms of cocaine, researchers concluded, because there were no set guidelines, rules or labels that defined what was in coca wine. "Some kinds are made from the coca leaves themselves, others from the liquid extract of coca...whilst another variety is not made from coca at all, but from hydrochlorate of cocaine," Dr. William Snow explained.²⁶¹ Because patients did not know specifically what they were drinking, they easily fell victim to the cocaine habit. Coca wine drinkers also displayed a naivety in thinking coca wine was safer than plain wine. For example, Snow said it would not be uncommon for a mother to think, "I never allow my girls to touch stimulants of any kind, but I give them each a glass of coca wine at 11 in the morning, and again at bedtime."²⁶² If alcohol can be considered dangerous, then mixing in a dubious drug logically cannot be considered safer. Thus, coca wine drinkers' illogical thinking left them vulnerable to addiction. Furthermore, though coca wine was intended to cure neurasthenia, Snow believed a drinker became "nervous, tremulous, sleepless, and without appetite, and finally drifts into a condition of pitiable neurasthenia."²⁶³ Still, some doctors continued to contend that it was only certain coca wines that were ineffective and dangerous. As

²⁵⁷ Brower 135

²⁵⁸ Brower 135

²⁵⁹ "Various Notes," *The Evening Post* [New York] 19 Oct. 1885.

²⁶⁰ Hammond 685

²⁶¹ William Snow, "The Dangers of Coca Wine," *The British Medical Journal* 2.1927 (1897): 1666.

²⁶² Snow 1666

²⁶³ Snow 1666

previously mentioned, Vin Mariani ads warned against imitators. In addition to probably wanting to protect his sales from competition, Mariani was also referencing some doctors' belief that Vin Mariani was the only safe coca wine. *Medical Times and Register* warned against "spurious and dangerous preparations" because, like Snow said, the ingredients are ill defined and can include any amount of cocaine and low-quality wine.²⁶⁴ Also similar to Snow's argument, *Medical Times and Register* believed Vin Mariani imitators did not cure neurasthenia and actually brought "unpleasant or dangerous after-effects."²⁶⁵ As in the general discussion about cocaine, merits of coca wine existed, but the pitfalls became more apparent.

As the century progressed, newspaper articles detailed the growing cocaine habit doctors initially debated. According to *The World*, there were 60,000 victims of opium, morphine and cocaine habits in New York in 1895, 15,000 of whom were solely addicted to cocaine.²⁶⁶ The figures came from a New York City druggist. The article blamed the current problem on the initial excitement by doctors and the media, saying, "The papers were filled with cocaine stories and the soothing effects of the drug were widely proclaimed but unfortunately with a correspondingly earnest that its use was full of peril."²⁶⁷ As a result the initial hype of cocaine, *The World* said people were now "slaves to the cocaine habit" to the point that "there literally was not an unpunctured spot on his body where he could introduce a hypodermic syringe."²⁶⁸ The "he" *The World* was referring to was a doctor, and it seemed that many doctors who experimented on themselves became addicted to cocaine. *The New York Times* reported on Dr. A. S. Hazen and his daughter, both cocaine addicts. Hazen had experimented with cocaine on himself and his daughter, and "their brains had undergone slow but sure poisoning," according to the reporter, who witnessed their "wild ravings."²⁶⁹ The only time Hazen and his daughter appeared stable was when they were high from cocaine, "which they used constantly to keep them braced up."²⁷⁰ Hazen's story reads like an almost textbook example of an addict. Where initial research might have been murky on whether cocaine could be a habit-forming drug, news reports cleared up the debate in the public eye.

But there greater worries than just developing a cocaine habit. Evidence started to mount that people were dying from cocaine poisoning. Dr. Charles Wilson Ingraham of Binghamton enumerated the trend in a report in an 1896 issue of *Medical News*. According to Ingraham, cocaine "ordinarily possessed of no immediate danger to life," but cocaine poisoning was on the rise because of "the increasing, promiscuous use of this drug among the laity for the relief of various affections."²⁷¹ People had no idea how to administer the drug to themselves and so were inadvertently poisoning themselves. Even some doctors "have not solved many important questions relative to its safe administration,"²⁷² Ingraham said, and so were accidentally killing patients. Death by cocaine overdose was apparently widespread enough that *Harper's Weekly* mocked the medical profession with a cartoon. The text of the illustration read:

²⁶⁴ "Dangerous Spurious Imitations – So-Called Coca Wines Which Are a Source of Danger," *Medical Times and Register* 33.8 (1897): 29.

²⁶⁵ "Dangerous Spurious Imitations – So-Called Coca Wines Which Are a Source of Danger" 296

²⁶⁶ "New York's 60,000 Slaves to the Cocaine Habit," *The World* [New York] 6 Dec. 1895: 28.

²⁶⁷ "New York's 60,000 Slaves to the Cocaine Habit" 28

²⁶⁸ "New York's 60,000 Slaves to the Cocaine Habit" 28

²⁶⁹ "Slaves to the Cocaine Habit: The Pitiabale Condition of Dr. Hazen and His Daughter," *The New York Times* [New York] 26 May 1886: 3.

²⁷⁰ "Slaves to the Cocaine Habit: The Pitiabale Condition of Dr. Hazen and His Daughter" 3

²⁷¹ Charles Wilson Ingraham, "Cocaine Poisoning, With Report of a Case," *Medical News* 68.8 (1896): 203.

²⁷² Ingraham 204

Doctor: 'It was the most difficult case I ever saw. I exhausted every resource on him, and at last I was successful with a very complicated system of injections of cocaine.'

Layman: 'But, doctor, he died.'

Doctor: 'I know very well he died, but he died cured.'²⁷³

Harper's Weekly was joking about medicine's stubborn use of cocaine, however effective it may be, in the face of growing evidence that it can be deadly. But it wasn't just a joke; it was reality. For instance, *The New York Times* reported on the death of Dr. Edward J. Sherow, who had become addicted to cocaine. Sherow, who the Times described as a "prominent young physician," started taking cocaine to cure a nasal catarrh and struggle to stop taking it, becoming a "cocaine fiend."²⁷⁴ The coroner concluded he died from "an overdose by accident, or was killed from his customary dose, as he suffered from a derangement of the heart."²⁷⁵ The article does not make it clear if the cocaine caused Sherow's heart issues or if he already had heart problems. If he already had heart problems, it is possible Sherow's death could be looked at as exceptional. But with other reports of cocaine overdoses, it is clear Sherow's death was part of growing, disturbing trend.

If the cocaine habit didn't kill its users, it seemed to drive them criminally insane. Cocaine fiends' crimes ranged from petit theft to murder. Some believed cocaine turned the users delusional enough the accidentally commit a crime, as in the case of Dr. Charles K. Stickney, who was arrested for shoplifting. According to the *New York Herald*, Stickney was in treatment for neurasthenia and cocaine and opium habits at Mattison's Brooklyn Home for Habitueés. While in the city one day, Stickney went to a trinket store on Broadway, took a silver snake ring and placed it in his pocket. When Stickney was arrested, he claimed "he had simply placed it in his pocket through absentmindedness and had walked across the store to look at something else."²⁷⁶ The *Herald* concluded – though Mattison said it was unlikely – that "the use of drugs may have led to temporary hallucination or loss of memory."²⁷⁷ Thus, cocaine could turn even the most well meaning individual into a criminal without the user even realizing. There were also reports of much more clear-cut crimes – the traditional image of an addict stealing to feed his habit. Twenty-year-old John Penrose came from what *The New York Times* called a respectable family. He began taking cocaine and opium to cure nasal issues, and became addicted. A 2:45 one morning, Penrose broke into a home, but accidentally woke up the resident. The resident attracted nearby police by shooting a revolver out the window. Penrose hid in the bathtub, and when police found him, he jumped out of the second-story window of the home. Police searched the neighborhood and found Penrose hiding under the stoop of his own house two doors down wearing a black mask and with a bottle of chloroform in his pocket. This ordeal unfolded because "when [Penrose] was denied money and could no longer purchase the drugs, he decided to turn burglar, but was caught in his first attempt," the *Times* reported.²⁷⁸ With cocaine fiends on the loose, people were not safe to sleep in their own homes. One way or another, cocaine was going to turn its users into thieves – or worse, murderers.

Several murders or attempted murders reported in the 1880s and 1890s eventually were linked with cocaine use, both pointing to cocaine's already

²⁷³ "A Marvelous Cure," *Harper's Weekly* 30 May 1891: 412.

²⁷⁴ "Cocaine Kills a Doctor," *The New York Times* [New York] 2 Jan. 1898: 11.

²⁷⁵ "Cocaine Kills a Doctor" 11

²⁷⁶ "Cocaine May Have Caused It," *New York Herald* [New York] 25 Dec. 1893: 9.

²⁷⁷ "Cocaine May Have Caused It" 9

²⁷⁸ "Driven to Crime by Cocaine," *The New York Times* [New York] 29 March 1897: 4.

tarnished image and further destroying the goodwill held toward the drug. William J. Koerner was convicted of second-degree murder for killing his fiancé, Rose Redgate, in 1896.²⁷⁹ Redgate's parents prohibited the engagement because of Koerner's "dissolute habits."²⁸⁰ Koerner threatened to kill Redgate if he was not allowed to marry her, and on Sept. 23, Koerner chased Redgate from the steps of a house and shot her three times.²⁸¹ During the trial, Koerner pleaded not guilty by reason of insanity caused by cocaine and other drugs. The arresting officer testified that Koerner "seemed dazed, as though under the influence of drugs," when he caught him.²⁸² Koerner could not have believed he had a chance of getting off by blaming the murder on cocaine unless the public held an increasingly negative view of the drug. Likewise, the arresting officer immediately thought Koerner could be on drugs, even though there was no proof other than demeanor. Koerner's story is relatively tame compared to other wild, violent crimes blamed on cocaine. One sensational story that swept the media was that of Eva Ray Hamilton, "alias Mann, alias Steele, alias Parsons, and alias a half a dozen other things."²⁸³ Hamilton, who *The National Police Gazette* called "one of the vilest conspirators on record,"²⁸⁴ stood accused of tricking former New York state legislator Robert Ray Hamilton into marrying her by pretending to be pregnant from him. In reality, Hamilton carried on an affair with another man, Joshua Mann, and hatched a plot with Anne Swinton to purchase a baby to claim to be Mr. Hamilton's. The entire convoluted conspiracy was publically uncovered after the baby's nurse, Mary Ann Donnelly, figured out the truth and confronted Hamilton. In response, Hamilton "attempted murder in carving her nurse girl."²⁸⁵ According to *The World*, the stabbing, which Donnelly survived, was committed in a "cocaine frenzy."²⁸⁶ Hamilton obviously had greater mental and moral issues than cocaine use, but the role the drug played in the attempted murder provided more fodder for cocaine detractors. If such a deranged woman as Hamilton, who brought about a "wretched scandal,"²⁸⁷ used the drug, then what good could it possibly do?

Another issue that worried the general public was the seeming change in demographics of cocaine users, specifically that African-Americans seemed primed to become addicts. As previously explained, neurasthenia was primarily a diagnosis for white, middle-class men. Therefore, cocaine use by white, middle-class men to treat neurasthenia was considered perfectly legitimate. But if respectable middle-class white men were falling victim to the drug, then surely inferior races were even more likely to become addicted to and deranged from the drug, especially if they were not using it for legitimate medical concerns. As the public feeling toward cocaine tempered, sensational newspaper reports of African-American communities embracing the drug surfaced to further push cocaine out of public favor. According to the *Utica Sunday Tribune*, African-American use of the drug, referred to as "the evil," was so popular that "the average negro walks into a drug store and puts down a quarter or a half dollar without a word and receives a box of cocaine tablet in return."²⁸⁸ One article in the *New York Daily Tribune*, claimed that African-American communities formed "cocaine clubs" to hold nightly "coke parties."²⁸⁹ The *New York Daily Tribune* described what surely would have been troubling scene:

²⁷⁹ "Hughes Releases a Prison Editor," *The New York Times* [New York] 14 May 1910: 20.

²⁸⁰ "For Killing Rose Redgate," *The New York Times* [New York] 16 Feb. 1897: 3.

²⁸¹ "Hughes Releases a Prison Editor" 20

²⁸² "For Killing Rose Redgate" 3

²⁸³ "Amorous Eva," *The National Police Gazette* 21 Sept. 1889: 6.

²⁸⁴ "Amorous Eva" 6

²⁸⁵ "Amorous Eva" 6

²⁸⁶ "New York's 60,000 Slaves to the Cocaine Habit" 28

²⁸⁷ "New York's 60,000 Slaves to the Cocaine Habit" 28

²⁸⁸ "Negroes Take to Cocaine," *Utica Sunday Tribune* [Utica] 1899.

²⁸⁹ "Cocaine Victims Organize," *New York Daily Tribune* [New York] 10 Jan. 1898: 2.

Annie Ramsey, a depraved negress, who is known as the ‘Queen of the Cocaine Fiends,’ sniffed the drug up her nostrils until her nose had swollen and split open. She is the ruling spirit of these gatherings. She is going blind from the use of the stuff, but still takes enough of it into her system daily to kill six men unused to the drug.²⁹⁰

The description invokes an image of a crazed ritual and a woman without control of her own body, enough to scare someone out of using the drug. The gathering of the African-American community to do cocaine – and perhaps force others to do it, too – was of particular worry to the white community. Besides the “coke parties,” people told stories of streets filled with drugs users. For instance, in Utica on Post Avenue, “there are said to be cocaine dives there, operated on a money making basis, where strangers who stray into the avenue are rushed and provided with enough ‘dope’ to send them to the land of nod.”²⁹¹ The story of Post Avenue was of particular worry because it involved an 18-year-old white boy buying cocaine for the African-Americans. The message of the article was clear: African-Americans using cocaine were a danger to the stability and order of society.

With such worrisome trends developing as addiction, overdose, crime and African-American users, people started looking for a cure to the cocaine habit. Some doctors started to test out medicines to see if they would rid patients of their cravings for cocaine. Dr. Isaac Oppenheimer of New York, who later founded the Oppenheimer Institute to cure alcoholism and drug addiction, claimed that he found a tasteless liquid medicine that cures patients of addiction – not just to cocaine, but to morphine, opium and alcohol, too. The medicine was to be taken once every three hours. Oppenheimer supposedly treated hundreds of patients in this method, and “the results of his treatment, he said, have been entirely satisfactory, a complete cure having been effected from one to three day,” *The New York Times* reported.²⁹² Newspaper advertisements, too, promised patients complete recovery from addictions to products that advertising may have gotten them addicted too in the first place. With lofty promises, businesses sought to capitalize on the increasing stigma of cocaine use and the problem of a cocaine habit. One ad for a center called the Empire Institute promised “an improved scientific cure...Not a single failure or unfavorable physical result has occurred. No detention from business is necessary.”²⁹³ While some like Oppenheimer and the Empire Institute concentrated a medical cure for the issue, chatter began over legislative regulation to cure inebriety. The same year he opened the Brooklyn Home for Habitueés, Mattison advised the American Association for the Cure of Inebriety that the only way to cure narcotics addiction is to prevent the public from freely obtaining the drugs. Mattison’s resolution read:

Whereas, A leading cause of morphinism, chloralism and cocainism is the facility with which morphine, chloral and cocaine can be procured from pharmacists; and

Whereas, The refilling of prescriptions containing these drugs is a potent factor in the rise and growth of these disease; therefore, be it
Resolved, As the sense of this Association, that no retail druggist should sell morphine, chloral or cocaine, except on a physician’s prescription; that no prescription containing morphine, chloral or

²⁹⁰ “Cocaine Victims Organize” 2

²⁹¹ “Boy Employed to Buy Cocaine,” *Utica Herald Dispatch* [Utica] 18 Nov. 1902: 4.

²⁹² “Dr. Oppenheimer’s Liquid Cure,” *The New York Times* [New York] 14 June 1896: 5.

²⁹³ “The Empire Institute,” *The New York Times* [New York] 6 May 1893: 3.

cocaine should be refilled, except on the written order of the physician.²⁹⁴

Medication might alleviate a drug habit, but in Mattison's mind, the only true cure was to never become addicted in the first. Addicts were on their way to recovery, and society was on its way to ridding itself of cocaine.

The idea of avoiding of cocaine altogether gained traction as other neurasthenia remedies directly positioned themselves as safer alternatives to cocaine. An ad in 1894 suggested that cocaine may be too strong a drug to use for everyday ailments like a headache. The cocaine may "deaden pain," but once a user forms a habit, it is "almost impossible to shake off."²⁹⁵ That's why, the ad said, headache sufferers should take Dr. Pierce's Pleasant Pellets, a sugar-coated vegetable extract pill. An endorsement attested to the fact that "in the course of an hour my headache is cured and no bad effect."²⁹⁶ Though the text of the ad makes it clear that the pill was meant to be a cocaine alternative, the headline does not mention cocaine. In a few years, products would more directly assert their lack of cocaine. As one 1904 ad promised in its first two lines, "Catarrh cured by herbs and not by cocaine."²⁹⁷ The ad was for To-ni-ta, a mix of herbs and roots that was meant to cure inflammation of the head, throat, lungs and other body parts, a common symptom of neurasthenia. Like most tonic advertisements of the time, To-ni-ta included doctor testimonials about its effectiveness. One doctor is quoted as saying, "I feel quite sure the patient would have died" had the doctor not employed To-ni-ta.²⁹⁸ Capitalizing on the growing fear of cocaine and referencing doctors' theories, the ad emphasized that cocaine may seem to cure neurasthenia, but only "deaden[s] the pain" and "leave[s] dangerous after effects."²⁹⁹ Had cocaine not been proven to be harmful and already been falling out of favor, this ad's strategy would be ill conceived and ineffective. People still suffered from neurasthenia and still needed treatment. So while cocaine was still available and considered a valid medicine, other products stepped in to treat those who grew to fear cocaine.

The stage was set for cocaine to disappear from legitimate medical use. Addiction and crime caused by cocaine was apparent. The wrong types of people were using it. Cures and alternatives were being discussed. The only thing left was to decide the legality of the drug. A court case in Ohio would serve to question the morals of druggists and drug makers and set a path for regulation. Ohio passed an act in 1884 to prevent adulteration of food and drugs. One of the provisions of the law was that the strength of a drug had to comply with industry standards and be accurately labeled. Ten years later, the Ohio Dairy and Food Commission raided numerous druggists to ensure they were complying with the law. One of them, John Keeshan, "one of the oldest druggists and best known druggists in Cincinnati,"³⁰⁰ was charged with selling Vin Mariani that misrepresented its strength. Professor Charles T. P. Fennel, the commission's chief chemist, analyzed the Vin Mariani and concluded, "It doesn't contain any such amount" of cocaine it claims to.³⁰¹ Mariani's lawyer argued that the analysis was not valid and Vin Mariani cannot possibly accurately state how much cocaine is in each bottle because "the crop of coca varies so much that no fixed standard can be made for the percentage of cocaine in Vin

²⁹⁴ "Prevention of Narcotic Inebriety," *Brooklyn Medical Journal* 5 (1891): 356.

²⁹⁵ "Call it a Craze," *The New York Times* [New York] 30 Oct. 1894: 2.

²⁹⁶ "Call it a Craze" 2

²⁹⁷ "Catarrh Cured by Herbs," *Oswego Daily Times* [Oswego] 22 April 1904: 3.

²⁹⁸ "Catarrh Cured by Herbs" 3

²⁹⁹ "Catarrh Cured by Herbs" 3

³⁰⁰ "Ohio Druggists' Cases," *The New York Times* [New York] 25 Oct. 1894: 8.

³⁰¹ "Ohio Druggists Raided," *The New York Times* [New York] 18 Oct. 1894: 1.

Mariani.”³⁰² Additionally, the lawyer “urge[d] that, inasmuch as there has been found no ground for the charge of adulterating their tonic, they are entitled to a more complete recognition of that fact in the public mind.”³⁰³ The case against Keeshan and Vin Mariani was eventually dropped as Fennel came to agree with the lawyer’s argument. But without the “complete recognition” of the public the lawyer urged, the damage was done. The illustrious Vin Mariani, the leader of the cocaine market, was tarnished. The rest of the industry was following, and states would soon turn to regulation more specifically aimed at cocaine.

By the turn of the century, many state legislatures were preparing to regulate the sale of cocaine to curb the social ills that its use caused. A bill to prohibit the sale of patent or proprietary medicines containing cocaine appeared in the New York state Senate as early as 1900.³⁰⁴ Nothing concerning cocaine would be added to New York state law until 1907, and the law did not entirely ban cocaine. According to *The New York Times*, the fight to outlaw – or at least regulate – cocaine did not begin in earnest until Father James B. Curry became involved.³⁰⁵ Curry was a pastor at the St. James Church in the seedy Bowery neighborhood of New York City. Curry witnessed the cocaine habit “reach out toward ‘his boys,’ as he calls the young men of his parish” and “arose to combat it.”³⁰⁶ Curry and others brought the matter before the state legislature, and Senator A. E. Smith sponsored a bill to “prevent the general and indiscriminate sale of cocaine.”³⁰⁷ Drug interests, obviously, opposed the bill. Dr. William Muir of the State Pharmacists Association said the bill “had been so drawn as the meet the opposition of pharmacists” and that it was “too drastic and altogether impractical.”³⁰⁸ Muir, along with several other representatives of the drug industry, testified at a New York state Assembly hearing, saying the bill would ultimately restrict the sale of other medications.³⁰⁹ But the legislature was not swayed by the drug interests’ obviously partial arguments. On March 28, 1907, the Assembly unanimously passed the bill,³¹⁰ followed by unanimous passage in the Senate on May 7.³¹¹ The New York state Penal Code now contained Section 1746 specifically against cocaine:

It shall be unlawful for any person to sell, furnish or dispose of alkaloid cocaine or its salts...except upon the written prescription of a duly registered physician, which prescription shall be retained by the person who dispenses the same, shall be filled but once and of which no copy shall be taken by any person...Any person who violates any of the provisions of this section shall be guilty of a felony punishable by imprisonment of not more than one year or a fine of not more than one thousand dollars, or both.³¹²

Cocaine was still allowed for legitimate medicinal use, but the passage of the New York law and similar laws around the country harkened the beginning of the end for the once-heralded drug. The cocaine habit was now officially “the most terrible vice

³⁰² “Ohio: Vin Mariani,” *American Druggist and Pharmaceutical Record* 25.9 (1894): 342.

³⁰³ “Vin Mariani’s Case,” *The New York Times* [New York] 28 Oct. 1894: 9.

³⁰⁴ “Legislative Notes,” *The New York Times* [New York] 16 Feb. 1900: 5.

³⁰⁵ “The Growing Menace of the Use of Cocaine” SM1

³⁰⁶ “The Growing Menace of the Use of Cocaine” SM1

³⁰⁷ “Fight Anti-Cocaine Bill,” *The New York Times* [New York] 21 Feb. 1907: 4.

³⁰⁸ “Conference on Pharmaceutical Legislation,” *Druggists Circular* 51.2 (1907): 238.

³⁰⁹ “Oppose Smith Bill,” *The Pharmaceutical Era* 37.9 (1907): 209.

³¹⁰ “Anti-Cocaine Bill Passed,” *The New York Times* [New York] 29 March 1907: 5.

³¹¹ “Anti-Cocaine Bill, Amended, Passed by Senate,” *American Druggist and Pharmaceutical Record* 50.10 (1907): 269.

³¹² “Sale of Cocaine or Eucaine,” *Annotated Consolidated Laws of the State of New York as Amended to January 1, 1910* (New York: The Banks Law Publishing Company Baker, Voorhis & Co., 1909): 4031.

ever acquired by a civilized people,"³¹³ and it would not take much longer for the United States to outlaw the drug altogether.

Conclusion

From its synthesis in 1860, cocaine moved from being a miracle cure for neurasthenia to menacing society to being highly regulated. All the initial excitement over cocaine gave way to fear of its dangers and lethality.

In the latter half of the 19th century Americans were afflicted with neurasthenia. Though revolving around mental distress, neurasthenia was a loosely defined set of symptoms and treatments that was as much about societal interpretations as it was about actual ailments. The doctors who defined neurasthenia drew from their own lives to help them explain medicine and illness. Neurasthenia was a diagnosis primary meant for white, middle-class to help them cope with and explain the rise of the working class and other races that modernity brought. The men who suffered from neurasthenia were wronged by society. But if women, other classes or other races exhibited neurasthenia symptoms, they were treated as if they did something wrong. There were already a number of approved treatments for neurasthenia, the most popular being total isolation and rest. Then cocaine swept the scene.

Doctors conducted research, mostly on themselves, showing cocaine's powerful stimulation could help cure neurasthenia. Of all the options in forms of cocaine, many doctors concluded that coca wine was the most effective way to treat neurasthenia. And of all the coca wines that eventually flooded the market, many doctors agreed that the original, Vin Mariani, was the best. With Vin Mariani's success, many other companies produced imitations, the most famous today being Coca-Cola.

But all that excitement and research eventually led to cocaine's downfall. Research on cocaine's effectiveness in curing neurasthenia started to include sections on the possibility of cocaine being addictive. Research also appeared saying coca wine was no less dangerous than other forms of cocaine. The doctors who experimented on themselves appeared in the news for the wrong reasons – as victims of addiction or overdose. Worse than addiction or overdose was the crime that cocaine fiends committed. Crazy by the drug, addicts stole and murdered. People also began to fear that cocaine was not being used for legitimate reasons. Instead, reports surfaced saying African-Americans gathered to indulge in the drug for recreation.

As evidence mounted that cocaine was not all it was cracked up to be, people started looking for ways to curb its use. Doctors experimented with medical treatments to addiction, and products advertising their lack of cocaine tried to replace the cocaine tonics used to cure neurasthenia. Some doctors began suggesting that the only way to cure addiction was to pass legislation regulating its use. The morals and legality of druggists and drug manufacturers like Vin Mariani began to be questioned in court. Finally, governments, like New York in 1907, stepped in with regulation to ensure cocaine was only used for real medical purposes.

Cocaine's saga obviously does not end in 1907. New Yorkers would continually add amendments to strengthen the penal code section about cocaine.

³¹³ "The Growing Menace of the Use of Cocaine" SM1

Seven years later, the United States would basically outlaw cocaine with Harrison Narcotics Tax Act. The war on drugs would start and rage on. Nevertheless, in New York's 1907 Smith bill, there was the sure sign that all the great things anticipated from cocaine were no more.