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# Pentothal, Postcards and the Journey of a Drug from Life to Death

Why was a drug, which still has a legitimate medical use, made the politico-legal cornerstone of the death-penalty debate in the 20th century?

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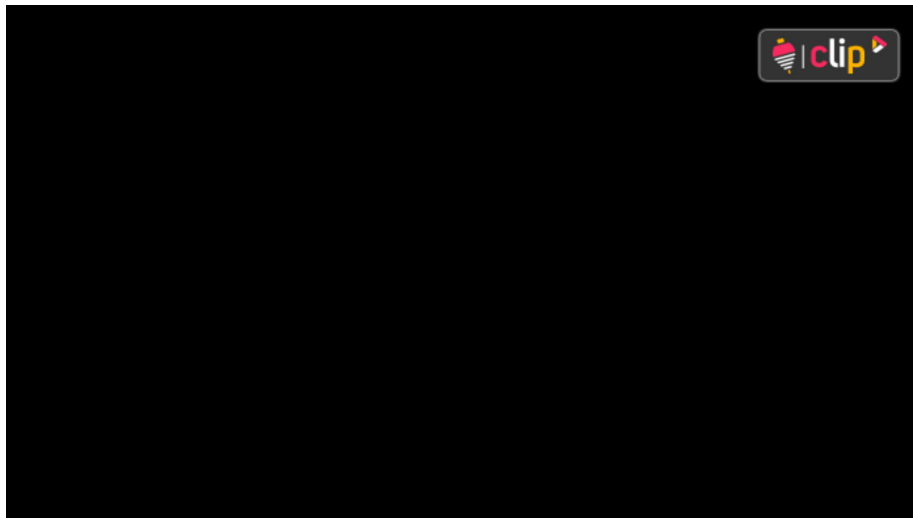
Nikhil Pandhi



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More than a century ago, in 1888, Dr. Wallace Calvin Abbott, a young physician and graduate from the University of Michigan found himself in the rear-room of the People's Drug Store, Chicago. Toying with the idea of using the 'active' (alkaloid) ingredients of medicinal plants and herbs to make remedies, Abbott created tiny pills called 'dosimetric granules' which provided more accurate and effective dosages for patients than other remedies available at that time. Less than six years later, the Abbott Alkaloidal Company was born, a move that would be a landmark in the history of medicine, making Abbott a pioneer of the modern pharmacy.



By the second decade of the 20<sup>th</sup> century, the Abbott Alkaloidal Company established its first European agency in London with fledgling branches in New York, San Francisco, Seattle, Toronto and India. As the grim years of the First World War (1914-19) dawned, paralleled by rapid advances in chemistry, Abbott gradually began shifting its focus from alkaloids to synthetic medicines, an area poised

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(1930), a sedative-hypnotic agent and Pentothal (1936), an induction-anesthetic, were new ‘synthetic drugs’ introduced by ‘Abbott Laboratories’ during this period.

The rumblings of the inter-war period yielded further research in anaesthetics, vitamins and intravenous solutions (miraculously, even during the stolid years of the Great Depression), catapulting the stocks of Abbott Laboratories over 10,000 times. By the onset of the Second World War (1939-45), Abbott became a pioneer in the commercial production of penicillin, discovered in Great Britain in 1928, in the New World. It also began ramping-up the production of Halazone (1942), a water purification tablet shipped by the millions to the expanding warfront; Surbex, a ‘high-potency vitamin’; and Venopac, the first ‘fully disposable intravenous administration set’. In the years to come, Abbott would go on to introduce one of the earliest capsules (1953) for the diagnosis and treatment of thyroid and also go on to market (1985) the world’s first **diagnostic test for AIDS**. Today, Abbott with its distinctly stylized ‘A’ logo (introduced in 1959) is undoubtedly a world leader in pharmaceuticals, nutrition and active healthcare.

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Abbott's own personal history is intriguing and not entirely bereft of **controversy**. What stands out, however, is Abbott's incredible attempt to reach more physicians and establish the company's sales force through the enduring war and post-war years of the 20<sup>th</sup> century. Enquiring into some of Abbott's innovative and fascinating 'strategies' of promotion – particularly the use of postcards – then also becomes occasion for turning a leaf in the visual history of modern medicine.

### **Modern medicine, colonial subtexts**

Waiting expectantly for my monthly ebay stash, I received the first of many cards from an assiduous collector of the 'Dear Doctor' postcard series. The '**Dear Doctor**' series is exceedingly popular among deltiologists (postcard collectors) and philatelists (stamp collectors) even though precious little has been written about the postcards themselves. The one I received (laminated, ostensibly to preserve it's authenticity) had the image of Abbe Faria, a 19<sup>th</sup> century Goan Catholic Monk known among other things for his practice of hypnotism. I was immediately reminded of the statue of Faria hypnotizing a woman next to the Old Secretariat of the Goan capital, Panjim, which indeed was the image on the card. The statue was sculpted in 1945 by Ramachandra Pandurang Kamat, perhaps a decade or so before the postcard was sent to a "Dr. Martin J. Bukowski, Children's Hospital, Philadelphia" (the actual postmark is unclear).

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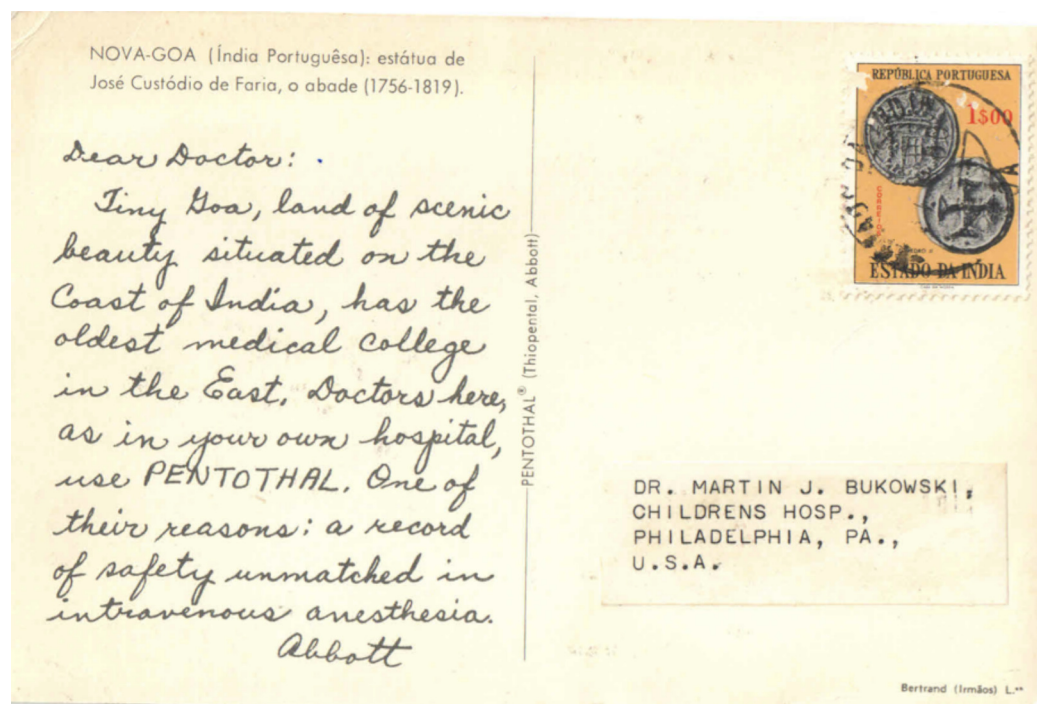


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own hospital use PENTOTHAL. One of their reasons: a record of safety unmatched in intravenous anaesthesia”, signed, “Abbott”.

The reader is immediately inundated with a vast colonial history having its roots in the Indian Ocean. The postcard becomes a fascinating material, visual and textual source all in the same. What also stands out is the visual organisation of the writing, stamp and other postal insignia bearing the distinctive mark of the Portuguese ‘Estado da India’ (the name for the Indian unit of the Portuguese Overseas Empire before Goa was completely lost to military intervention by India in 1961). The stamp depicts the martial insignia of the Estado da India and bears a microprint of the *Correios, Telégrafos e Telefones*, the former name of the postal administration.



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The ‘oldest medical college’ being referred to is most likely Goa Medical College built in 1842 as the Escola Médico-Cirúrgica de (Nova) Goa (Medical-Surgical School of Goa). The manner in which Abbott draws on the legacy of the college to legitimize the effectiveness of its ‘wonder-drug’, Pentothal (Sodium Thiopental), is both fascinating and ironic. Did Abbott realize that by doing so it was subtly also giving its assent to the Portuguese Overseas Empire (then in its high-noon)? Or was the legacy of colonialism ‘immaterial’ to the tangible present and palpable future of Pentothal, the wonder anaesthetic? Was the colonial undercurrent ever anything more than that, a passable premise? Or was it being utilized (as in the pointed reference to “the East”) to service the political project of a western history of medicine? My guess is as good as yours.

What comes through, however, is the fascinating use of (oriental) visual and textual tropes to deliver a glowing recommendation to Pentothal that by the 1950s had become a popular anaesthetic for short procedures. The fact that ‘doctors there (in the East) and in your own hospital (Philadelphia) use Pentothal’ becomes a moment of

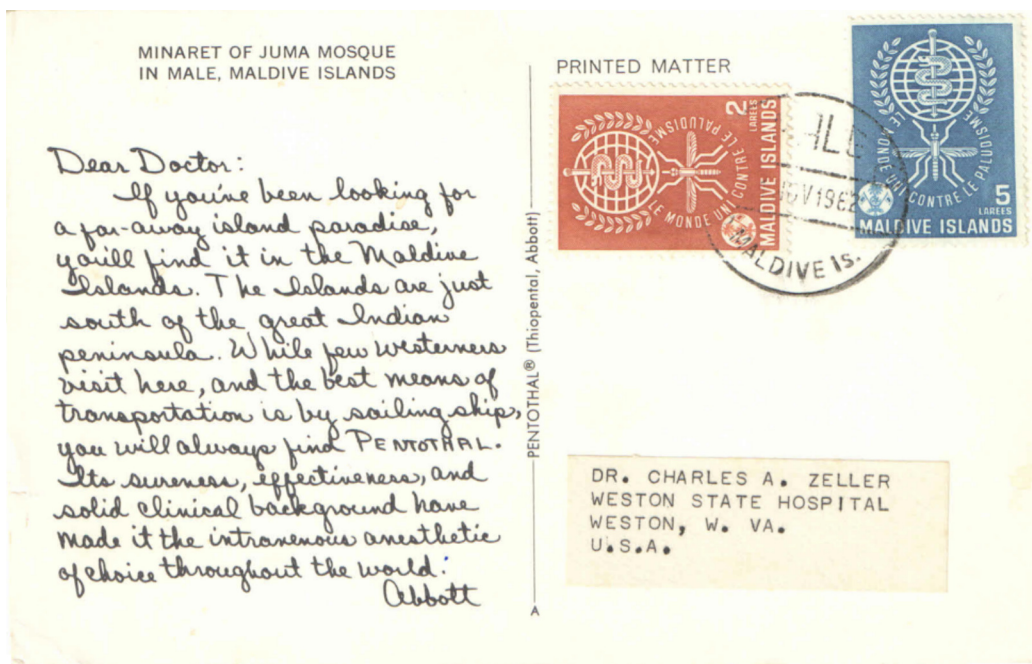
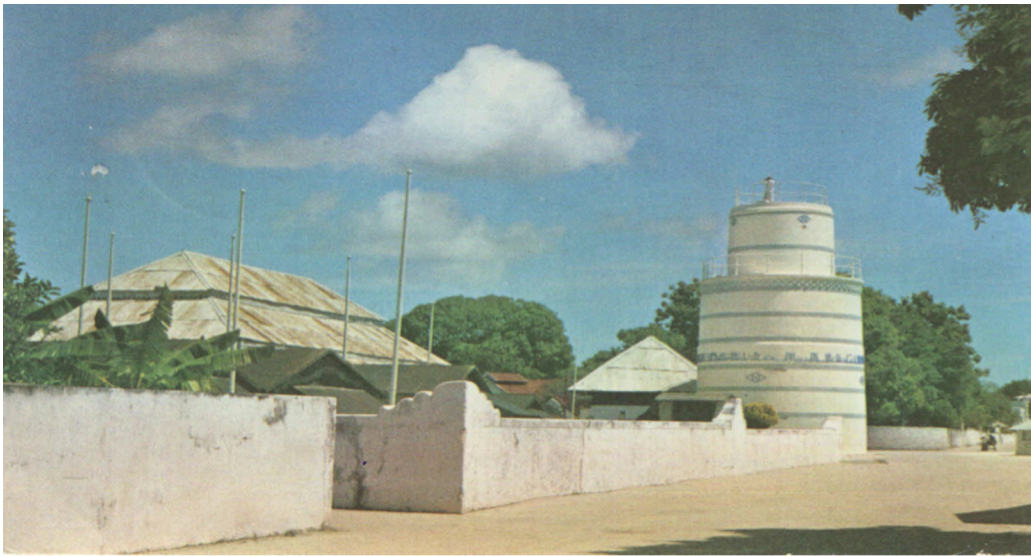
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One doesn't quite know what Dr. Bukowski did with the postcard. Indeed, one can only guess that he received it (if the fading postmark were to be believed) and was encouraged to use Pentothal. Like Dr. Bukowski, by the mid-1950s there were several doctors and nurses in the United States who began receiving colorful postcards from exotic locations around the world from Abott Labs advertising Pentothal. Soon, this expanded to doctors and medics in other parts of the world. All the postcards follow the same visual and textual tenor and invoke the same colonial imagery.

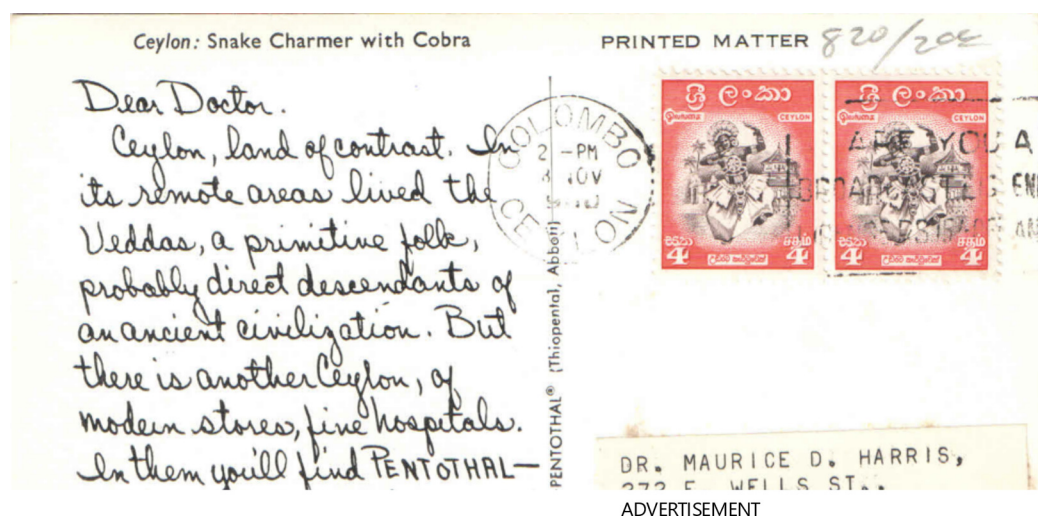
Thus, "Dr. Charles A. Zeller" of Weston State Hospital, Virginia, was sent a postcard of the minaret of the Juma Mosque in Male, the Maldivian capital, in the early 1960s. "Dear Doctor", it began, "If you're looking for a far-away island paradise, you'll find it in the Maldiv Islands. The Islands are just south of the great Indian peninsula. While few westerners visit here, and the best means of transportation is by sailing ships, you will always find PENTOTHAL. It's sureness, effectiveness, and solid clinical background have made it the intravenous anaesthetic of choice throughout the world", signed, "Abott", postmarked "1962".

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In a similar vein, “Dr. Maurice D. Harris” of “272 E. Wells St. Milwaukee, Wisconsin” received a postcard on “8 Nov 1960 (?)” informing him of the seminal role of Pentothal in the modernization of a country. “Dear Doctor, Ceylon, land of contrast.” (On the obverse a picture of a snake charmer with a cobra). “In it’s remote areas lived the Veddas, a primitive folk, probably direct descendants of an ancient

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## Visions of the ‘modern medicine’

This visual and textual trend of the ‘Dear Doctor’ postcards remained largely the same for the near 200 varieties of cards posted by Abbot Labs between the 1950s-70s. There is usually the profiling of an exotic locale with a careful selection of images- ‘settlers’, ‘natives’, sublime ‘landscapes’, the ‘wilderness’, ‘ruins’, ‘tombs’, ‘harbours’, ‘ships’, colonial ‘riverfronts’ etc. The treatment of these images and the tenor of the postcards cannot be treated as entirely separate from the strategy of drug promotion being pursued by Abbott Labs.

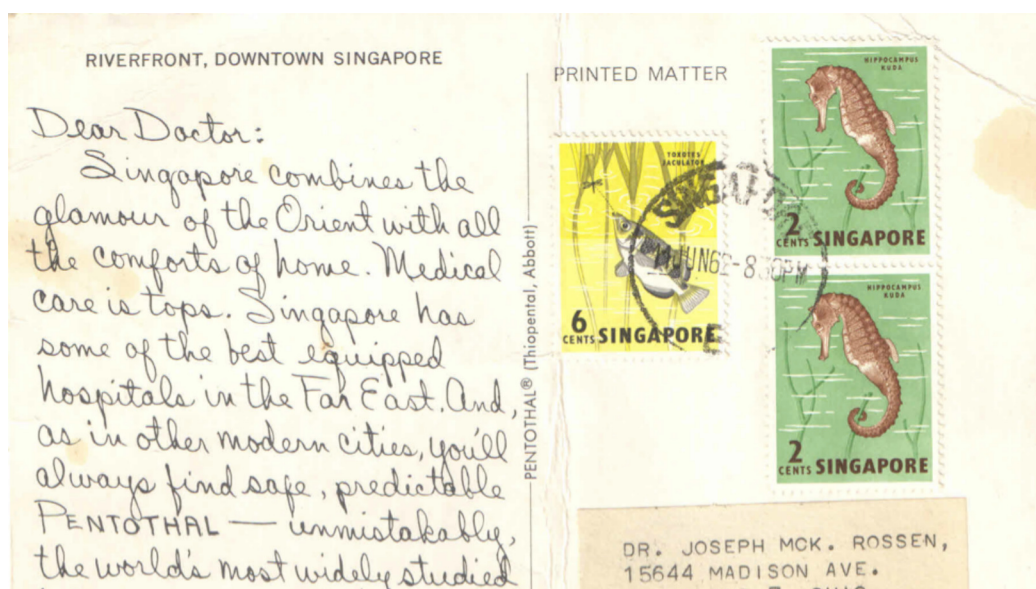
Pentothal and its wondrous prospects are set up either as the predestined gifts of the West, markers of modernity, or as internalized symptoms of order (healing) fostered by their ‘effectiveness’, ‘safety’, ‘authority’ and ‘dependability’. Pentothal serves to both undo and underwhelm the intended trope of the (exotic) ‘Other’ while reifying its own magical, medicinal properties.



Behind all this is the obvious project of commercial drug-

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has some of the best equipped hospitals in the Far East and as in other modern cities, you'll always find safe, predictable PENTOTHAL- unmistakably, the world's most widely studied intravenous anaesthetic", signed, "Abbott". (This was addressed to Dr. Joseph Mck. Rossen, 15644 Madison Avenue. Cleveland 7, Ohio.)



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Mexico (without a visible postmark) reads “Dear Doctor,  
Here in the land of the Mayas, archaeology goes back to  
pre-Columbian days. But medicine is up to the moment...  
and PENTOTHAL an anaesthetic of choice. Smooth  
induction, moment-to-moment control, swift recovery.  
You’ll like it too!”



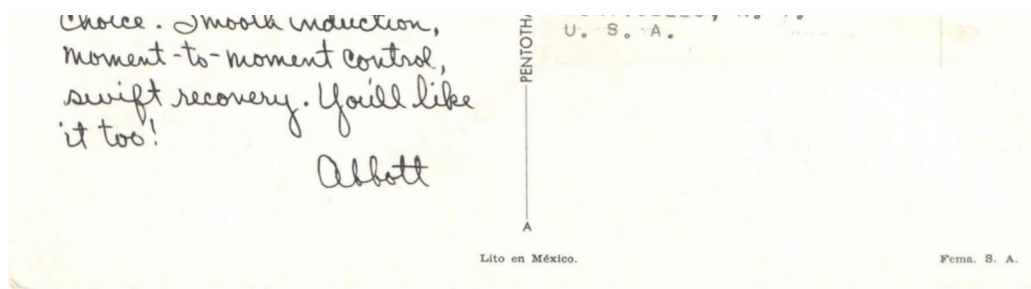
El Castillo y las Mil Columnas, Chichén Itzá.  
Mérida, Yucatán, México

Dear Doctor,



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Reminiscent of earlier examples, the ancient is pitted against the modern, the old against the new, the Mayas against the Medics and prehistory against Pentothal. It is likely, one may take the liberty of assuming, that ‘Dr. Hector J. Curiel’ of ‘Monticello Hospital, N.Y.’ who received this knew of the Mayas or their ancient capital. He may have found the historical analogy overly messianic (or not). But to doctors sitting in the others ends of the world, postmarked scenes from Antarctica, French Polynesia, Panama, Spanish Sahara, Latin America, Africa and Asia may have meant all that, nothing or something entirely new. Who knows how history struck a chord in their present.

Abidingly, the agency of visuals was used to create a historical setting and backing for Pentothal, to rejoice in its creation and to remind the reader-recipient of its many benefits, associated both with medicine and modernity. The so-called ‘conviviality’ of the drug (“You’ll like it too”) even goes to the extent of estimating the general acceptance of Pentothal among members of a wide lived-spectrum: medics, natives, settlers, indigenous peoples, modern men and ancient civilizations.

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### ***Pentothal: a politico-legal denouement***

But there is more to the story. Just a few years before Abbott Labs won the approval to market the world's first diagnostic test for AIDS, by all counts a historic feat, the United States introduced a new scar in the history of death penalty – the lethal injection. The first 'lethal injection' was administered in Texas on December 7, 1982. Sodium thiopental, having the trademark name Pentothal, was a crucial element in such injections. According to a report by Amnesty International, '*Sodium thiopental* is a barbiturate which induces general anesthesia when administered intravenously. It can reach effective clinical concentrations in the brain within 30 seconds'. The report also states that in lethal injections a concentration of Pentothal much higher than clinical dosage is used, which may sometimes be as much as 50 times higher.

The Oklahoma regulation (1978), which led to the very first lethal injection legislation in the US specified execution "by means of a continuous, intravenous administration of a lethal quantity of sodium thiopental" combined with other

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electrocution and firing-squads. The representative who introduced the bill into the Texas House, for instance, said that electrocution “is a very scary thing to see.” As a complement to it he “voted for a more humane treatment because death is pretty final. That’s enough of a penalty”. Pentothal thus became increasingly popular both in the ‘three drug protocol’, where it was used as a preliminary anaesthetic as well as the ‘single-drug protocol’ where sodium thiopental itself became the killer dose.

The last quarter of the 20<sup>th</sup> century also saw the growing popularity of ‘truth serum’, a pulped reference to drugs used for extracting criminal confessions and disclosures. The use of barbiturates like sodium thiopental in investigation procedures like narcoanalysis has always produced arguable, at best inconsistent results. A 2012 **report** in *The Guardian* even cites the chairman of India’s ‘first independent forensic service’, Truth Lab, as saying that narcoanalysis was widely used in certain Indian states despite being “unscientific, undemocratic, illegal and inhumane.”

The point to note is that the production of sodium thiopental

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feel that company shares are likely to slump if shareholders realise that its drugs are used in lethal injections, certain producers themselves have taken steps to axe the production of drugs like sodium thiopental. According to TY Alper, a clinical professor of law at the University of California, Berkeley, “As early as 2001, pharmaceutical companies such as Abbott Laboratories and Baxter International publicly condemned the use of their products in capital punishment.” Unable to develop distribution controls to prevent prisons from using the drugs, their production of sodium thiopental has since stopped.

In 2011, the sole manufacturer of sodium thiopental in the USA, **Hospira Inc.**, became the latest to join the ranks by halting it’s production of the drug. Ironically, while the drug shortage has delayed several executions, there is little to suggest that lethal injections themselves have been scrapped. Many states believe it is still ‘closer to humanity’, while other states have simply turned to drugs like *Midazolam*, which one report states ‘isn’t specified for use as an anesthetic’. That some US states eventually **turned to Indian companies** for sourcing Pentothal represents an ironic inversion of the ‘wonder’ drug’s earlier messaging. From conveying a sense of distant life to doctors in the US, the drug had now become the messenger of death.

Be that as it may, when confronted with the ‘Dear Doctor’ postcards, one is merely scraping at the surface of a vast, checkered, historical core. Smudged, scraped, torn, taped and somewhat withered, the postcards which offer glowering recommendations for Pentothal travelling across

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may deracinate the two from each other. Either way, it raises several important questions about the past itself: how is history serviced in the present today and why a drug, which still has a legitimate medical use, was made the politico-legal cornerstone of the death-penalty debate in the 20<sup>th</sup> century.

*Nikhil Pandhi is an MPhil student at the University of Oxford.*

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