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THE ASIAN COCAINE CRISIS
Pharmaceuticals, consumers and control
in South and East Asia, c. 1900-1945
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INTRODUCTION AND AIMS
Between 1900 and 1945 Asia became one of the world’s largest markets for cocaine—as medicinal substance and recreational intoxicant—and was used as far apart as India and China. The project tackles the questions of why Asians took to cocaine in the early 20th century and what drove governments there to respond so rapidly to the demand for this modern pharmaceutical. In 1900, controls were imposed but officials grappled with the use and supply of cocaine for the next five decades. The project will offer radical new perspectives on the production, consumption and control of medicines and intoxicants.

This project will produce the first study of a drugs crisis forgotten in Asia and by historians of intoxicants and medicines. It aims to: i. explain the growth of the market in the region; ii. shine a light on government responses; iii. trace sources of supply and distribution; iv. identify origins of ideas about cocaine in Asia.

Cocaine Global Timeline
1495/6 The incas operate coca pamanos in the annes. The Spanish take over in the 1500’s and coca goes global. 1700 Coca mentioned in Institutions Medicinae, a materia medica by German doctor and botanist H. Boerhaave. 1855 Coca first extracted from coca leaves. 1880's Coca extract used as a popular anaesthetic in eye surgery. 1884 Freud publishes On Coca; recommends cocaine use. 1886 Merck produces 158,352 pounds of cocaine. 1888 Coca-Cola is introduced by J. Pemberton. 1900's Parke Davis starts to manufacture refined cocaine. 1910 Coca marketing in Asia. Cocaine market grows in Asia, especially India, prompting regulations from local administrations. 1911 Coca-Cola removes coca from their formula. 1914 Cases of nasal damage are reported as snorting cocaine becomes popular. 1915 5,000 cocaine related fatalities reported in USA. 1930s Cocaine is banned in India. 1930s The League of Nations spearheads global regulation. 1930s Japan emerges as world’s leading cocaine producer (23.3%), followed by USA (21.3%), Germany (15%), UK (19.4%) and France (8.3%).

WHERE’S ASIA IN GLOBAL COCAINE HISTORY?

RESEARCH QUESTIONS

CONSUMERS Who consumed cocaine in South and East Asia in this period? Why did they do so?

SUPPLIERS Who was involved in sourcing, distributing and marketing cocaine in these periods? Were they successful in their efforts?

GOVERNMENTS What drove efforts to prevent the consumption of coca in Asia and how successful were the measures taken?

SOCIETY What were the effects of cocaine on society more generally?

APPROACH
The project tackles the questions through archival research in 5 Asian contexts: India, China: the Philippines; Korea: and the former British colonial possessions of Hong Kong, Myanmar and Singapore. Taken together these contexts provide coverage of Asia’s religious and cultural diversity, the varying economic and political developments of the period, and the range of medical and health systems and problems of the first decades of the 20th century. The project will draw on international research networks on drugs and intoxicants and collaborative research in Asia undertaken by interdisciplinary research teams at the Centre for the Social History of Health and Illness (CSHHH).

DISCUSSION
Asian consumers of intoxicants and narcotics have been at the heart of the history of drug use and drug control since the 19th century. Representations of Asians—as passive and helpless drug users—created in the Victorian era are central to understanding addiction as well as regulation. The establishment and development of today’s international drugs regulatory system stemmed from the Asian consumption of local drugs—opium and cannabis—and historians have therefore focused on these. By examining the rapid growth of a market for cocaine, that most modern of pharmaceutical products in 1900, this project promises to produce a more complex picture of Asia’s drugs consumers. It is noteworthy that the initial sources of the drug lay outside of Asia, in Holland and Germany, and answering the question of where produced and transported cocaine into the region will provide important new conclusions about the global circulation of drugs and medicines in general, and of cocaine in particular. By looking at a medicine that arrived in Asia despite the efforts of colonial governments to prevent its use it promises to reshape ideas so that pharmaceutical companies, medical entrepreneurs and local commercial interests are placed at the heart of accounts of the ways Asia took to Western medicines in the early 20th century. Throughout the 19th and early 20th centuries asiologists argued that cocaine was good for the body and opposed to the mind. It is notable, then, that the drug was not taken up in the same way in Asia as it was in the West. The project will provide a wide-ranging and nuanced set of answers to questions centred on consumers and suppliers of cocaine in Asia along with government responses and changing social attitudes to cocaine in the first half of the 20th century. Those would capture local detail and offer a comprehensive and comparative account.

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FINDINGS/GOALS
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