He proceeds to enumerate a few out of many examples of such actions—irritation of the nostrils exciting sneezing; irritation of the mucous membrane of the windpipe exciting coughing; the closure of the eyelids when the eye is threatened; and the retraction of the limbs during sleep, when they are slightly pricked or pinched.

"As, therefore, the principal function of the sensorium commune consists in the reflection of sensorial into motor impressions, it is to be observed that this reflection takes place, whether the mind be conscious or unconscious of it. . . . . All these actions arise from the organisation and physical laws proper to the sensorium commune, and are, therefore, spontaneous and automatic."

At the time when Prochaska wrote, the function of the spinal cord as ministering to reflex action had not been specially discriminated, as was afterwards done by Marshall Hall, so that he includes under the sensorium commune the spinal cord. But it is evident that he clearly recognised and illustrated the reflex or automatic action of the lower nervous centres. When we consider, too, the acquired acts, or "secondary automatic" acts, as Hartley designated them, to which the spinal chord ministers, their complex nature and the definite ends which they accomplish, though we may not be disposed to agree with Pflüger that it possesses sensorial functions, we cannot but admit the exceeding difficulty of physiologically discriminating the reflex and the sensori-motor acts. Dr. Carpenter has been most successful in this country in making and illustrating ths distinction. But those who are interested in the functions of the nervous centres, and desire to lay the foundations of just conceptions respecting them, should, above all things, study Prochaska's work, and the works of others who followed him in Germany.

Prosecutions by the Lunacy Commissioners.

Not a year passes in which the Commissioners in Lunacy do not find themselves compelled to institute prosecutions against persons who have systematically violated the lunacy statutes. It is much to be regretted that medical men should so often be the culprits and the victims. But they have only themselves to blame; they wantonly violate a law most necessary for the protection of the insane, and it is the duty of the Commissioners in Lunacy stringently to enforce the provisions which the Legislature has ordained for the protection

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of those who cannot protect themselves. We fear that those persons who have suffered from prosecutions constitute but a very small proportion of those who have sinned. At the different sea-side places, and especially in the Isle of Wight, at various hydropathic establishments and in their neighbourhood, and in all the suburbs of London, there is too much reason to believe that insane persons are systematically under control without proper certificates. The difficulties in the way of vindicating the law, when the discovery of such a case is accidentally made, are very great. It must be proved, not only that the patient is of unsound mind, but that he is received for profit by those who have the charge of him, and it is not easy to obtain evidence of the payments made on account of the patient. The friends are naturally unwilling to supply such evidence, and those who have received the patient illegally are not likely to criminate themselves if they can help it. Medical men, too, sometimes exhibit a disposition to screen offenders, by pronouncing an opinion that the patient is not really of unsound mind, but only a little weak in mind, or a little peculiar. There are, therefore, many difficulties to be overcome before a conviction can be obtained; and there can be no doubt that frequent violations of the law take place with impunity for one that is discovered and punished.

How, then, is a better state of things to be brought about? We believe that some hold the opinion that the lunacy law should be so modified as to enable the prosecution to be directed against the medical man who attends a lunatic placed under control without proper certificates, as well as against the person who receives him into his house as an inmate. There are grave reasons to doubt whether that would be a wise procedure; any legislation, to be effective, must have the feelings of the medical profession and the public with it, and the consequence of making the law so stringent would soon appear so intolerable as to necessitate its repeal. In order to carry out proper treatment in a case of recent insanity, it is of the first importance to remove the patient from the surroundings of his own household and the company of his relatives, and this would never be done until it was too late to be of any use if the medical man in attendance must lose his patient or incur the danger of a prosecution. But, it may be said, he will run no risk whatever if he simply insist upon having the proper forms filled up before removing his patient. Why not, then, adopt so plain a course? As a

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matter of fact, it is very difficult, and sometimes quite impossible, for the practitioner to induce the friends in a case of recent insanity to consent to fill up forms which look so formidable. He must get two medical men, strangers probably to the family, who are anxious to conceal the terrible affliction which has fallen upon them, to examine his patient separately, and then certify that he is a lunatic; and he must get some distressed relative to sign the order, and fill up a statement containing a series of painful questions, and amongst others the name of the person to whom notice of death is to be sent. There is naturally the greatest repugnance on the part of friends to do what seems to them like treating the patient as a hopeless lunatic, and to be equivalent to shutting him up in an asylum; and even if under the pressure of the moment they are induced to comply with the due forms, it is not at all unlikely that they will regret it in the course of a few days, and seek other medical aid. It is a question deserving consideration whether a less rigid series of forms than those necessary for sending a patient to an asylum might not be adopted with advantage in cases of recent insanity treated in private houses—whether, in fact, a system admitting of some elasticity might not be wisely sanctioned by the Legislature. If it were enacted that the medical attendant should send notice of such a case to the Commissioners in Lunacy, with a statement of its nature and duration, might not the regular forms and certificates be dispensed with for a certain period, for three or six months from the commencement of the disease? The opportunity of official inspection would prevent abuses, and many insane persons would be brought to the notice of the Commissioners of whom they now hear nothing. The lunacy statutes have been jealously and stringently framed, to prevent persons being improperly shut up in asylums; this purpose they answer effectually; but the regulations ordained in them certainly do not apply equally well to recent cases of insanity which do not need to be sent to asylums. It would be better to have an elastic rule which should be operative, than a rigid rule which is constantly evaded. However, as the law stands, it is the bounden duty of the Commissioners to enforce obedience to it, and those who infringe its enactments do so at their peril. There is no shadow of an excuse for medical men who systematically receive chronic cases of insanity into their houses without certificates. And yet numbers do so.

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