in other words, these deductions from or perversions of his normal power were the symptoms of his mental derangement. It is difficult to say in what class of insanity Torquato Tasso should be placed. The older physicians treated it as melancholia, and this is so far correct that the affective faculties seem to have been the first to be deranged and the most disturbed. Corradi makes it to be alternating or circular insanity, and Roncoroni finds in Tasso all the marks of paranoia. This is to me by no means clear. Hereditary predisposition seems wanting, and the marks of degeneration are rather hastily assumed; there does not seem to have been a progressive increase in the malady after the first years of his imprisonment in St. Anne's. Nevertheless some of the symptoms, the exaltation, the delirium of persecution, and the hallucinations and delusions are such as go to make up the picture of paranoia as described by Italian alienists.

The main cause of so prolonged a controversy no doubt was that Tasso's mental derangement never was accompanied by such a complete submergence of the intellectual faculties as is looked for in the vulgar idea of madness. He was subject to fits of delirium which, when they passed away, left him in possession of much intellectual power, and this enabled Manso to say that his infirmities never passed the bounds of delirium occasioned by melancholy. Thus his friend Manso considered him to be sane, though subject to melancholy and occasional illusions; but he lets us know that Tasso's enemies called him mad.

In the life-course of this gifted but unfortunate man the mingling of great talents and great sufferings, high honours and deep humiliations, constitutes the most pathetic biography known to us in the whole history of literature.

CLINICAL NOTES AND CASES.

A Case of Recurrent Mania. By John G. Havelock, M.D., Senior Assistant Physician, Montrose Royal Asylum.

The following case of recurrent mania presents many features of unusual interest. The patient is a merchant, who in the course of the last thirty-four years has had twenty attacks of acute mania, and in the intervals has successfully managed a large business. At the present time he is perfectly well both mentally and physically, having

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had a long period of immunity from the disorder. This improvement is ascribed by the patient himself, with some degree of probability, perhaps, to his having taken most enthusiastically to bicycling, or, if we may so term it, "become affected with cycling-mania."

First Attack.—Mr. A. B., a merchant, was first admitted to Montrose Asylum in 1862. He was then in his twentieth year, had received a good education and was actively engaged in business. He had always shown an excessive literary ambition, and for some time had been composing poetical effusions of a socialistic tendency, making this the sole recreation of his leisure moments. His habits were strictly temperate in all respects, and the family history was good with the exception that three sisters had died of phthisis. On admission he is described as a tall slender lad of delicate appearance, but with no evidence of bodily disorder. He was labouring under a mild form of excitement, but was able to control himself with an effort. Soon, however, he became acutely excited, walking about in a restless manner, holding his head with his hands, staring at himself in the glass, singing, and repeating verses of Psalms for hours on end, though at times he was unduly taciturn. In the course of a few weeks the excitement abated, and he made an excellent recovery after five months' treatment.

Second Attack.—Patient kept quite well after the first attack until eleven years afterwards when he had reached the age of thirty. Since his former attack he had continued his literary pursuits, chiefly in secret, employing every spare minute he had with them. His writings had consisted mainly of poetical effusions advocating schemes for effecting some great social reforms. On admission he laboured under suppressed excitement, would speak to no one, and would allow no one to meddle with him. Gradually became restless and talkative as in the former attack, and continued so for several days. Recovered in the course of three weeks.

Third Attack.—In November, 1884, he came as a voluntary patient. Was excited, verging on acute mania, abrupt and flighty in manner, conversation spasmodic and disjointed. When alone he recited poetry and danced about, but restrained himself in company, though it evidently cost him a great effort to do so. Was perfectly conscious of his own state, which he termed "hysteria, brought on by over-work." Continued excited for some days and returned home at the end of a month.

Fourth Attack.—Five weeks after the end of the last attack Mr. A. B. again sought admission as a voluntary boarder. He turned up at the Christmas ball evidently labouring under suppressed excitement, and in the course of the evening became much worse, continuing excited and restless for some days afterwards. After this improved rapidly, and returned home at the end of the month.

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Fifth Attack.—This came on in March, 1885. On admission he was restless, incoherent, refusing to answer questions, wandered about aimlessly, fingering pictures, and making odd gesticulations with his hands, singing and repeating verses of Psalms. Gradually recovered after two months' treatment.

Sixth Attack.—This began in November, 1885. Was admitted as a voluntary patient, and after passing through an attack similar to the one last described, was well enough to return home after two months' residence.

Seventh Attack.—In May, 1886, again came as a voluntary patient. When admitted was able to control himself, but soon became excited as on former admissions. A few days afterwards the attack had reached its height, and he was extremely excited, making extraordinary gestures, throwing himself on the ground and rolling about, shouting and speechifying incoherently, holding his head, blowing, and going through innumerable antics. Had bad nights, was destructive, and too restless to take his meals. In the course of a month had quite recovered.

Eighth Attack.—This was a comparatively mild seizure in the winter of 1886-87, which was treated at home with the assistance of a trained attendant.

Ninth Attack.—In May, 1887, was again admitted in a state of acute mania, violent and unmanageable. Literally raving, shouting, stamping, declaiming and gesticulating in an extraordinary way. Discharged recovered in the course of six weeks.

Tenth Attack.—This commenced in the autumn of the same year. The exciting cause was the marriage party of a friend, and the symptoms first showed themselves at a crowded railway station, where he began declaiming from the window of a carriage, after the manner of a political orator. Recovered after two weeks' asylum treatment.

Eleventh Attack.—This attack came on in November, 1887. After passing through the usual phases of excitement was convalescent in seven weeks and sent out on probation. Was more violent and unmanageable than usual during this seizure.

Twelfth Attack.—In May, 1888, was again admitted, suffering from an attack of the usual character. Recovered in six weeks.

Thirteenth Attack.—Came on in October, 1888, and he was received as a voluntary patient. Attack the same as usual. Recovered in three weeks.

Fourteenth Attack.—In December, 1888, was again admitted, and, after the usual period of wild excitement, was sent home on probation at the end of seven weeks.

Fifteenth Attack.—Admitted from probation in May, 1889. Convalescent in one month, and again sent out on probation.

Sixteenth Attack.—In July, 1889, again admitted from probation. Passed through a fortnight of acute mania, and was sent out on probation at the end of one month.

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Seventeenth Attack.—Relapsed in September, 1889, and was admitted from probation. Attack rather worse than usual. After two months was again sent out on probation.

Eighteenth Attack.—This came on in May, 1891. As on former occasions, was wildly excited, could not answer questions, raved and gesticulated for days and nights on end. Was discharged as recovered after two months' residence.

Nineteenth Attack.—Came as a voluntary patient in January, 1892, and after a short period of acute excitement was discharged in five weeks.

Twentieth Attack.—The last attack came on in January, 1893. It was similar to those preceding it, and after one month's residence he was discharged as recovered.

Remarks.—Mr. A. B. has continued well since January, 1893, and at the present time (June, 1896) he is in the very best of health, both mentally and physically. He appears to have been at all times a man of an exalted, visionary frame of mind, a superficial reader of abstruse and out-of-the-way books, on the subjects of which he delights to dogmatise, without having any real grasp of them. He is extremely introspective, and likes to analyse the mental condition of himself and those around him. He states that when the attacks came on him he felt very happy and hilarious, with quite a plethora of ideas. He felt as if acting a part, and at the end of an attack remembered everything. He felt as if he had been playing the fool, yet had no feeling of depression in the ordinary sense.

Shortly after the last attack, having been advised that a more active life out of doors would, perhaps, tend to diminish the frequency of his attacks, he purchased a bicycle, and since that time he has been a most enthusiastic cyclist. He sends me the following description of his condition at the present time :—

I am as keen on cycling as ever, and am fully convinced that to it, and it alone, I owe the great improvement that has taken place in my health. I do not remember ever having felt better, or been in better spirits than I am at present, and I give cycling the credit for it. The course and circumstances of my life and conduct have, with the one exception of my indulgence in cycling, in no way altered from what they were before and during the time I had my repeated attacks of illness. You had ample opportunity of judging my condition years before I took to cycling, and the fact that I have enjoyed such excellent mental and bodily health since I took to the pastime goes far, I think, to show you that cycling is entitled to much, if not all, the credit.

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I may add, by the way, that I am not conscious of having experienced any ill effects, even though the bulk of the 6,800 miles I have ridden has been on a solid-tyred machine. With this machine I often do forty miles on an afternoon, and feel quite fresh and active next morning. In fact, the whole of my experience of cycling has been of the most pleasant and enjoyable kind, and I do not anticipate it will soon be otherwise.

I can unhesitatingly corroborate Mr. A. B.'s statements regarding the present state of his health, though he seems to be stating the case for cycling rather too strongly. Physically he is most robust—a man of 54, he looks barely 45—and he appears to be more stable mentally than he has been at any time during the seven years I have known him. It does not seem improbable, therefore, that this new hobby has taken the place of the morbid recreations of former years, and so removed one of the most potent exciting causes of his attacks.

OCCASIONAL NOTES OF THE QUARTER.

The Annual Meeting.

The fifty-fifth Annual Meeting of the Medico-Psychological Association, held in London on July 23rd and 24th, under the presidency of Dr. Mickle, was fully occupied with the business and scientific work provided. Indeed, time did not permit of the completion of all that was intended.

The Presidential Address, which was only delivered in part, is now presented in full; and we congratulate Dr. Mickle on fulfilling the expectations which his honourable position in the world of medicine induced us to form. His careful survey of a field which is of the deepest interest to psychologists, his elucidation of difficult medico-legal questions, and his balanced appreciation of a long series of clinical facts all command our respectful attention. Dr. Mickle has given us of his best, the garnered sheaves of an abundant harvest.

Dr. W. F. Robertson showed a series of microscopical preparations, which again gave ample proof of his skill and patience in elucidating the facts of pathology. Other papers of deep interest were read, and the results of research and reflection were unsparingly communicated, and submitted

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