occurred in paralytic dementia, and also a great loss of weight in the central stem among all other forms of insanity among males. The greatest loss of weight in the cerebellum was found in epileptics. The author also comes to the following conclusions:—Primary depressed forms are apparently connected with a greater weight of brain than primary excited forms. The successive stages of insanity are associated with corresponding decreasing weight of brain. The smallest collective weight of brain is found in paralytic dementia, the next smallest in alcoholism. Depressed forms of insanity appear to be especially connected with decrease in the central stem, and excited forms with decrease in the convolutions.

[The other papers in the Vierteljahrschrift are all to be continued in following numbers. They will be noticed when complete.]

(To be continued.)

II. American Psychological Literature.

By S. W. D. Williams, M.D., L.R.C.P. Lond., Assistant Medical Officer, Sussex Lunatic Asylum, Haywards Heath.

American Journal of Insanity, Volume XXIII., July, 1866, *to April,* 1867.

July, 1866, No. 1.—"Intemperance and Insanity," by W. S. Chipley, M.D.; "The Care of the Chronic Insane Poor of the State of New York," by George Cook, M.D.; Proceedings of the Association.—Summary: "The Care of the Chronic Insane of the State of New York;" "Hudson River Hospital for the Insane;" "Acknowledgment;" "State Hospital for the Insane in Connecticut."

October, 1866, No. 2.—"The Insanity of Women produced by Desertion or Seduction," by Dr. I. Ray; "The Mental Operations in Health and Disease," translated by J. H. Worthington, M.D.; "Mount Hope Institution—Trial for Conspiracy," by W. H. Stokes, M.D.—Bibliographical: "Traité des Maladies Mentales, Pathologie et Thérapeutique," par W. Griesinger; "Etude Médico-Lègale sur la Simulation de la Folie," par le Docteur Armand Laurent.

January, 1867, No. 3.—"Decisions of English Courts in the Law of Lunacy;" "On Moral Insanity," by Dr. Jules Falret.—Bibliographical: "Review of recent Works on Idiocy;" "Review of recent Works on Mental Disease;" "Lectures on Mental Diseases," W. H. O. Sankey, M.D., London, &c., &c.; "Traité des Maladies Mentales," par W. Griesinger, M.D., &c., &c.; "Review of American Reports."—Summary: "Resignation of Dr. Ray;" "Hudson River State Hospital for the Insane;" "State Asylum for the Insane,

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Kalamazoo, Mich.;" "The Asylums of Ohio;" "Minnesota Hospital for the Insane;" "Asylum for Coloured Insane, Nashville, Tenn.;" "Appointments."

APRIL, 1867, No. 4.—"History and Description of the Northampton Lunatic Hospital, Mass.," by Pliny Earl, M.D., Superintendent; "On Moral Insanity," by Dr. Jules Falret; "Imbecility and Homicide—case of Gregor McGregor."—BIBLIOGRAPHICAL: "Review of American Reports;" "Mental Exertion in relation to Health," by Amariah Brigham, M.D.; "Observations on the Scientific Study of Human Nature," by Edward L. Youmans, M.D.; "Reflex Paralysis, &c.," by M. Gonzalez Echeverria, M.D.—SUMMARY: "Insanity in Great Britain;" "The New Asylum for Eastern New York;" "Michigan Asylum for the Insane;" "Obituary;" "Appointment;" "Meeting of the Association."

Volume XXIV.—July, 1867, *to April*, 1868.

JULY, 1867. No. 1.—"Aphasia," by Dr. H. B. Wilbur; "On Provision for the Chronic Insane Poor," by Dr. John B. Chapin; "Asylums for the Chronic Insane in Upper Canada;" "On Moral Insanity," by Dr. Jules Falret (conclusion); "The Asylums for the Insane in St. Petersburg and Copenhagen," by T. B. Belgrave, M.D., &c. (From the "Journal of Mental Science," April, 1867.)—BIBLIOGRAPHICAL: "Insanity in its Medico-Legal Relations: Opinion relative to the Testamentary Capacity of the late James C. Johnson, &c.," by Wm. A. Hammond, M.D., &c.; "A Treatise on Emotional Disorders of the Sympathetic System of Nerves," by Wm. Murray, M.D., &c.—SUMMARY: "Asylums for Chronic Insane;" "Connecticut State Hospital for the Insane;" "The Destructiveness of Insane Patients;" "Provision for the Insane in Ohio;" "Progressive Locomotor Ataxy;" "Dr. Brierre de Boismont on the importance of Insane Acts for the medico-legal diagnosis of Reasoning Insanity," "American Medical Association;" "Association of Medical Superintendents of American Institutions for the Insane;" "Dr. Maudsley on the Physiology and Pathology of the Mind;" "Appointment."

OCTOBER, 1867. No. 2.—"The Psychopathic Hospital of the Future," by Pliny Earl, A.M., M.D.; "History of the Founding and Development of the First Hospitals of the United States," by D. G. Thomas, M.D.; "Statutory Law of New York regarding the Insane;" "Epilepsy and Homicide," by Dr. I. Ray; "Feigned Insanity: Case of Derozier."—BIBLIOGRAPHICAL: "Reports of American Asylums."—SUMMARY: "Testimony of Experts;" "New York State Board of Commissioners of Public Charities;" "Thermometry in Insanity," by S. W. D. Williams, M.D. (From the "Medical Times and Gazette"); "Proceedings of the Association;" "Journal of Psychological Medicine;" "Dr. T. S. Clouston on Tuberculosis and Insanity." ("Journal of Mental Science.")

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JANUARY, 1868, No. 3.—"Psychologic Medicine: its importance as a part of the Medical Curriculum," by Pliny Earle, A.M., M. D.; "Imbecility and Insanity," by A. O. Kellogg, M.D.; "Proceedings of the Association: Provision for the Chronic Insane."—BIBLIOGRAPHICAL: "The Physiology and Pathology of the Mind," by Henry Maudsley, M.D., &c.; "De la Folie Raisonnante, et de l'Importance du Delire des Actes pour le Diagnostic et la Medicine Legale," Par. A. Brierre de Boismont; "Joseph Guislain: sa vie et ses ecrits," Par. A. Brierre de Boismont."—SUMMARY: "Responsibility of Epileptics;" "Treatment of Progressive Locomotor Ataxia;" ("Journal of Mental Science," July, 1867); "Model Dwellings for the Insane;" "The Retention of Memory in different Forms of Insanity;" "Bromide of Potassium in Cases of Mania;" "Appointments."

APRIL, 1868, No. 4.—"Junius Brutus Booth," by A. O. Kellogg, M.D.; "Introductory Lecture at the Re-opening of the Psychiatrical Clinic, at Berlin," by W. Griesinger.—BIBLIOGRAPHICAL: "Reports of American Hospitals for the Insane, for 1867;" "Hysteria, &c." by F. C. Skey, F.R.S., &c.—SUMMARY:—"Starvation and Insanity;" "Drunkenness and Crime;" "Monomania;" "Digitalis in the Treatment of Mania, Recent and Chronic;" "Bromide of Potassium in Epilepsy," by S. W. D. Williams, M.D. ("Journal of Mental Science," January, 1866); "Treatment of Cerebral Congestion and Hallucinations by Arsenious Acid;" "Pathology of Cerebral Softening;" "Meeting of the Association."

With but a very limited space placed at our command, it will be quite impossible for us to do justice to the many able papers above recorded; we shall therefore confine ourselves to a notice of such as may seem to us most likely to be of interest to the readers of this Journal.

The first number (July) in Vol. XXIII. is double the size of any of the others, owing to its containing a lengthy notice of the "Twentieth Annual Meeting of the Association of Medical Superintendents of American Institutions for the Insane," held on the 24th of April, in the city of Washington, under the Presidency of Thomas S. Kirkbride, Pennsylvania Hospital for the Insane, Philadelphia, Pa.

The proceedings of the Association are commenced by the Secretary reading a letter received from Dr. Wood, President of the Medico-Psychological Association of Great Britain, in answer to the resolutions in regard to Dr. Luther V. Bell, adopted at the last meeting of this Association, and also his answer, which, on motion, were directed to be entered on the minutes.

The following papers were then read:—

"On the late trial of the Physician and Sister Superior of Mount Hope Institution before the Circuit Court of Baltimore county on a charge of conspiracy," by Dr. Stokes.

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"On the Insanity of Women produced by Desertion and Seduction," by Dr. Ray.

"On a review of an opinion given by the Court of Appeals of Kentucky, defining the legal relations of inebriates, and recognising the doctrine of moral insanity," by Dr. Chipley.

"On Provision for the Insane Poor in the State of New York," by Dr. Cook.

The reading of these papers, and the discussions that ensued, lasted over a period of five days, there being a morning and afternoon session each day.

Intemperance and Insanity. By Dr. Chipley.—The abuse of intoxicating drinks is so common, and so frequently leads to the violation of law, and to serious disturbances of public order, involving both life and property, that the medico-legal relations of inebriates becomes exceedingly important, and present numerous intricate questions of responsibility. The doctrine of moral insanity offers still more vexed and unsettled questions; nevertheless, we cannot doubt but that there are decidedly instances of derangement of the affective functions, which should free its subjects from legal responsibility for unlawful acts, notwithstanding the intellectual faculties remain intact. Dr. Chipley, however, in the above paper, holds this doctrine to be incorrect. "I regret," he writes, "that I have not been able to perceive its truth, and that I closed my investigation with a still more thorough conviction that it is false in fact, and extremely dangerous in practice. We cannot admit," he continues, "the existence of disease as an excuse for crime while the act bears all the marks of moral depravity, and while there is no evidence of unsoundness of those faculties on which alone man's accountability is founded."

The Care of the Chronic Insane Poor of the State of New York. By George Cook, M.D.—The paper with this title, which appears in the July number of the *Journal*, will attract attention, as the first laboured effort in defence of separate establishments in America for the chronic insane, and is, moreover, of interest just at present to English psychologists, as giving an American view of a question which has lately been largely discussed in England, viz.: the desirability of building cheap supplementary asylums for the chronic insane and imbecile.

The main argument of the writer is founded upon an assertion, the truth of which, he thinks, he finds in the history of American legislation, that New York is unable or unwilling, or both, to build sufficient hospitals for her insane; and, therefore, some other and cheaper method must be devised for the care of this unfortunate class of her children. He does not contend that the system of separate asylums for the chronic insane is the best in itself, but that is best only under all the circumstances. He acknowledges that, were it feasible to secure enough hospitals, on the existing plan, for all the insane of the State, he would not advocate a change; but this he believes to be impracti-

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cable, because "for fifteen years efforts have been made, without success, to secure the passage of a bill through the legislature of the State of New York, for one or more state hospitals of this character;" therefore, he asks, "is it not wiser to take it (the scheme of providing for the chronic insane in separate institutions) rather than adhere to the unattainable, and get nothing?"

Dr. Cook's views do not appear, however, to be endorsed by either his *confrères*, or by the editors of the "American Journal of Insanity." It seems to be the general opinion in America that the erection of *Incurable* and cheaper hospitals for the chronic insane, apart from the Curative Establishments, is pernicious, and would be anything but a wise economy. It is true, they argue, that the history of legislation in the State of New York during the fifteen years ending with 1865 supplies but one example of *well-planned, well directed*, and *strenuous* effort in behalf of the insane of the Commonwealth—viz., in 1857 when the neglected condition of the poor insane, and the necessity of further state provision, were brought to the attention of the Legislature by the forcible report of the Select Committee on Charitable Institutions, Poor Houses, &c. The report was, however, accompanied by a bill providing for the immediate erection of two State Hospitals. This bill passed the Senate. "In the Assembly it passed a third reading, when its further progress was arrested by the premature adjournment of the Legislature."

The subject was not again called up, until two years ago, when, almost in the midst of a civil war of unprecedented magnitude, and with an accumulated debt of vast proportions, the Legislature of the State responded at once, without discussion or dissentient voice, to Dr. Willard's appeal, and the Willard Asylum was created. And in further evidence that the State is *potens et volens*, and that there is no disposition to evade or ignore the just claims of the insane, the Legislature, last winter, authorised the Governor to appoint a Board of Commissioners to select and contract for the site of a third State Hospital, to be located on or near the Hudson River, below the City of Albany.

The proposition to erect special asylums for the chronic insane met similar disapprobation and defeat in Kentucky, Ohio, and Connecticut, the first two making liberal grants to enlarge existing hospitals: in Ohio to the extent of doubling the capacity of two of her state hospitals, while Connecticut has just passed a law, authorising the construction of a General State Hospital for the insane, at a cost of 200,000 dollars.

In this connection, we may call attention to *recent* legislation in New Jersey, Iowa, Indiana, West Virginia, Nova Scotia, and Canada West, where liberal appropriations have been made to enlarge or complete existing hospitals, and to Minnesota and Kansas, at present engaged in the establishment of state hospitals for their insane.

In California, the assembly committee on state hospitals, to which

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was referred the Assembly Bill, creating a state hospital for *curables*, at some point to be determined by a board of directors, and proposing to make the asylum at Stockton an institution for incurables, reported the bill back with a recommendation that the subject be indefinitely postponed.

A Case of Progressive Locomotor Ataxy, treated by Bromide of Potassium and Bark.—This case was originally published in the "New York State Medical Society Transactions," and has been reprinted in the "American Journal of Insanity." It occurred in the practice of Dr. S. O. Vanderpoel, of Albany, N.T. The patient's replies, as to the early period of his affection, are condensed as follows:—

The first indication of any trouble in the feet was about two years since, when he found himself daily taking a seat in an omnibus or car, instead of the usual walk to business; but thought little of it at the time. Soon he could not sit comfortably with the feet resting on the ground, having an inclination to raise them; this feeling continued until he always sat with the feet on a chair before him, and the knees raised. About this time he began to feel a heaviness in the soles of the feet, and a want of sensation, which was followed by a prickling, tingling feeling. In walking he invariably stopped at a street crossing, and hesitated which foot to use in stepping off the kerb; and if a hydrant or lamp-post were near, always put out his hand to assist himself. From that time he always used a heavy cane. The heavy, numb feeling now extended to the legs, and soon after entering the house he found the sofa or bed the most convenient place. He experienced trouble in washing, as when leaning over, and happening for the moment to close the eyes, he found himself staggering backward and forward, not being able to keep his balance. He also had trouble in going about in the dark, and suffered from pain in the legs and joints, always wanting to see his feet when he had occasion to use them. In reply as to the opinion expressed by his physician in New York, he stated that it was considered the commencement of paralysis, which must be gradually progressive. Recognising that the tableau of symptoms presented in no way answered to the diagnosis, I instituted a closer scrutiny. The intellect showed no impairment, nor were there any indications which induced me to suppose this condition imminent, as would be were it progressive paralysis. His sleep was sometimes broken from sudden, and sometimes prolonged, pains, in different parts of the body, chiefly, however, in the lower extremities. Vision had not been affected, either from temporary paralysis of the muscles of the eye, or of the retina itself. The other bodily functions were normal, or nearly so.

In view of the failure of the several modes of treatment hitherto recommended for ataxy, Dr. Vanderpoel ordered in this case a scruple of bromide of potassium in two drachms of Huxham's Tincture of Bark, three times daily. Under this treatment the general health improved, and the severity of the pains was very much mitigated—so much so that after walking a short distance, and gaining a better control of his limbs, he could walk off half a mile and return.

Becoming impatient to reach New York, where his business interests were urgent, he contracted pneumonia, and was for some weeks sick in that city. On his return, Dr. Vanderpoel found that the inflammation had awakened a latent tubercular deposit, and rapid softening was going on. From this period he gradually sunk, and died in about six months. The ataxic symptoms were little marked in the later stages of the malady.

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Junius Brutus Booth. By A. O. KELLOGG, M.D.—There are individuals whose career in life to the superficial observer of mental and moral phenomena has ever appeared most strange and anomalous, and whose motives and mainsprings of action have been but little understood or appreciated by the world at large, or even their own friends, however intimate, and the members of their own family.

By the latter they are regarded as warped, eccentric, strange, and their caprices are submitted to in silence, as incident to persons not governed by the same laws which sway ordinary individuals, but who are moved, by curious and unaccountable impulses, to a conduct and course of life not easily explained on ordinary principles.

The world on the other hand, ever ready to judge hastily, and often with unrighteous judgment, and to put the most uncharitable construction upon the conduct of these unfortunates, is too apt to regard them as moral perverts, and hold them to a strict accountability on the established principles of ethics.

To the student of psychological science these characters are of peculiar interest, for while they cannot be regarded as insane, in the ordinary acceptation of the term, he is forced to recognise in them an element which, if not of disease, is so nearly allied to it as, in many instances, to make the line of distinction exceedingly hard to mark. In fact, these persons are apparently life-long denizens of that strange border land which divides the realms of sanity and insanity; sometimes seemingly on one side of the line, and again on the other, as they are impelled by some strange impulse within them which, whether of health or disease, is stronger than the will, and which it would seem impossible for them to overcome, in the very nature of their physical, mental, and moral organisation.

There are forms of insanity, as is well known, that assume a marked periodic character, and persons so afflicted will appear for months to be in a state of complete physical and mental health. This condition is perhaps followed by as many months of marked intellectual disturbance, generally of an exalted or maniacal character, but at times of a depressing or melancholic type.

Such a case evidently was that of Junius Brutus Booth, the great American actor.

He was a man of genius, if ever actor or artist was. He stood, confessedly, in the very foremost rank, if not at the head, of delineators of the higher drama in the first half of the nineteenth century. His career was strange, brilliant, and in many respects unique. Moreover, if any doubt exists in the mind of anyone as to his affliction with positive insanity at periods during his whole career, such doubt will be dissipated by a perusal of the following words, quoted by Dr. Kellogg from the memoirs of Booth's daughter:—

"The calamity," says his daughter, "seemed to increase in strength and frequency with maturer years, and sometimes assumed very singular phases. In the records of his youth, when his profession held out every incentive to ambition energy, and indefatigable labour, when his habits were most temperate and

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abstemious, we occasionally trace those slight aberrations of mind which mark the exquisite turning point between genius and madness. To those accustomed to the intense excitability of peculiar minds, who witness how the mind of the actor is wrought upon by the assumption of harrowing thoughts and fictitious scenes, and who feel how frequently a delineator of the passions thinks, dreams, exists in a sphere of ideality, it is neither strange nor difficult to comprehend how such minds are overthrown by the reaction, and oft-times ruined utterly. Thus from childhood we learned from our mother, the devoted and unwearying nurse of him who endured these periodical tortures of mind, to regard these seasons of abstraction with sad and reverent forbearance."

Upon his characteristics as an actor, Dr. Kellogg thus writes :—

"When he appeared as Richard, he did not seem to us as one merely acting the character, but as Richard he 'lived, moved, and had his being;' and the same may be said of his Lear and Shylock. It is well known that in enacting Richard, so complete was his self forgetfulness, and so 'cunning of fence' was he, that most of his fellow actors were fearful of facing him as Richmond in the last death struggle, lest he should really put an end to them upon the stage; and frequently he had to be reminded that he was merely personating a character, and must suffer himself to be slain—at times, indeed, no light task.

"No nervous organization, however strong and complete originally, can endure the extreme tension necessary for such efforts for any great length of time without having to succumb, and the best reasons that can be given why he did not break down earlier and more completely, are to be found in the irregularity with which he pursued his calling as an actor, his extreme love for retirement into the bosom of his family, and for domestic and agricultural pursuits."

There are forms of insanity in which the individuals will present for months no external manifestations of the disease, when suddenly from some strange illusion respecting those around them they become excessively violent, so much so that it will require the efforts of several strong persons to prevent them from doing serious injury.

The following anecdote of Mr. Booth, related by Dr. Kellogg, will, perhaps, throw some light upon this strange condition of the mind and feelings :—

"Riding with him once, near St. Louis, two Catholic priests crossed the road in front of them. To the utter astonishment of his companion (for Mr. Booth was perfectly sober, and had up to the moment been quite calm and natural), he put spurs to his horse and galloped towards them, exclaiming, '*Gomez* and *Pescara!* ride them down! down with them! down with them!' and it was as much as his companion could do to prevent him from riding over them.

"The two characters, Gomez and Pescara, as is well known, are two chiefs of the Inquisition in a tragedy of Shiel, called 'The Apostate,' and it being the Moorish Sabbath, Booth was doubtless that day 'one of the faithful,' and his blood being up at the sight of the supposed Inquisitors, his mind for the moment was caused to wander."

His ideas of the sacredness of animal life, Dr. Kellogg tells us, were certainly very eccentric, if not positively insane. All animals about his farm were secure from harm; he allowed nothing to be killed, or to suffer in any way, if he could prevent it. He indulged in no animal food himself for years, neither would he suffer it to be used in his family. Upon one occasion he returned home unexpectedly,

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and found his family had been indulging in animal food. Notwithstanding every effort was made to get the roast out of the way, and to prevent his discovery of the transgression, his keen senses caught the odour, and the grief he expressed was painful. If ever they indulged again, it was only when they had the most positive evidence that he was miles from home.

Once, when living on his farm in Harford county, he sent for all his neighbours and friends, far and near, to come to his place and attend a funeral. When they arrived, they found, to their great disgust, that it was the carcase of a favourite horse that he wished to have buried with all due solemnity.

The crowd retired, some in disgust, others laughing at the strange performance. His family, however, understood the meaning of the thing. A physician was sent for, and the "chief mourner" passed through a long and unusually serious attack of disease.

One night when he was to act he did not appear, nor could he be found at his lodgings. He did not come home that night. Next morning he was found in the woods, several miles from the city, wandering in the snow. He was taken care of; his derangement proved to be temporary, and his reason returned in a few days.

We cannot close this very imperfect analysis of the moral and intellectual character of one in whom the elements were so strangely mixed as to lead the world to doubt whether they were of good or of evil, without a glance at his religious convictions.

These, as was to have been expected, partook largely of his native mental and moral characteristics. They were broad, liberal, comprehensive, and founded upon love. With him, indeed, love was the fulfilment of the law, and without it all loudly proclaimed professions were but "sounding brass and a tinkling cymbal."

To the student of psychology this paper cannot fail to be extremely interesting, and the elegance of its diction renders the reading of it truly charming.

The Quarterly Journal of Psychological Medicine and Medical Jurisprudence. Edited by WILLIAM A. HAMMOND, M.D., Professor of Diseases of the Mind and Nervous System in the Bellevue Hospital Medical College.

JULY, 1867, No. 1, Vol. I.—"On Instinct: its Nature and Seat," by Dr. Hammond; "Merlin, and his Influence on the English Character and Literature," by Dr. Hammond; "On Organic Infantile Paralysis" (with nine illustrations), by Dr. Hammond. SELECTIONS AND TRANSLATIONS: "Aberrations of the Sexual Instinct;" "Remarks on Diseases of the Nervous System;" "Locomotor Ataxia;" "On the Treatment of a Certain Class of Destructive Patients;" "Nightmare in Children." REVIEWS AND BOOK NOTICES: "Ancient Punish-

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ments in France" (with illustration); "Idiotcy and its Treatment;" "Insane Asylums in France." CHRONICLE: "The Johnston Will Case;" "Ergot in Diseases of the Spinal Cord;" "The Queen *vs.* Jane May;" "Decapitation."

JANUARY, 1868. No. 1 —"On the Influence of the Maternal Mind over the Offspring during Pregnacy and Lactation," by Prof. William A. Hammond, M.D.; II. "Remarks on the Trial of Calvin M. Northrup, indicted for the Crime of Administering Belladonna to his Wife with intent to Kill," by Prof. C. A. Lee, M.D.; III. "On the Law of Rape," by Prof. Horatio R. Storrer, M.D.; IV. "On Early Education," by Henry Courtney Atwool, M.D., &c.; V. "A Statement of the Aphasia Question, together with a Report of Fifty Cases," by E. C. Seguin, M.D., &c.; VI. "A Case of Obscure Cerebral Disease," by E. C. Hun, M.D.; VII. "The Proper Use of the Mind, an Introductory Lecture," by Prof. William A. Hammond, M.D.; VIII. "The Dynamometer and Dynamograph of Matthieu," by Prof. William A. Hammond, M.D. CONTEMPORARY LITERATURE.—"Pensylvania Insane Hospital Report;" "Alabama Insane Hospital Report;" "Provincial Lunatic Asylum Report;" "Central Ohio Lunatic Asylum Report;" "New York State Lunatic Asylum Report;" "Robertson On Pavilion Hospitals for the Insane;" "Robertson on Care and Treatment of Insane Poor;" "Morel on the Legal Medicine of the Insane;" "Reed on the Growth of the Mind;" "Youmans on the Culture demanded by Modern Life;" "Dalton's Physiology;" "Flint's Physiology;" "Spencer's Principles of Biology;" "Storer on Abortion;" "Hale on Abortion;" "Stillé on Cerebro-Spinal Meningitis;" "Elliot's Obstetric Clinic;" "Skey on Hysteria;" "Dickson's Studies in Pathology and Therapeutics;" "St. George's Hospital Report;" "Beard and Rockwell on Medical Electricity;" "Ruppaner on Laryngoscopy and Rhinoscopy;" "Lea on Superstition and Force;" "Tissander on Occult Sciences." CHRONICLE. *Physiology and Pathology of the Brain and Nervous System.*—"Monamania and its Relations to the Criminal Law;" "Clinical Cases of Insanity;" "Sitiphobia;" "The Opthalmoscope in Diseases of the Nervous System;" "Doubtful Cases of Nervous Disorder;" "Cerebral Embolism," "Cases of so-called Hysterical Disease;" "Hydrophobia, its History, Pathology, and Treatment;" "Case of Facial Paralysis, &c.;" "Paralysis from Exhaustion of the Spinal Cord." *Medical Jurisprudence.*—"Legal Test of Responsibility;" "Trial and Conviction of Charles Anderson;" "Monomania and Testamentary Incapacity." *Miscellaneous.*—"Psychical Character of the English People;" "Hysterical Vagaries;" "Was Luther Mad?" "Extract from Report of British Association for Advancement of Science;" "Mortality of the French Army."

APRIL, 1868. No. 2. Vol. II.—I. "The Law of Human Increase, or Population based on Physiology and Psychology," by Nathan Allen, M.D.; II. "Carnomania," by Charles F. Taylor, M D.; III.

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"Education Anterior to Birth," by H. Courtenay Atwool, M.D., &c.; IV. "Aphasia," by Roberts Bartholow, M.D., &c.; V. "Remarks upon Dr. Storer's Paper, entitled 'The Law of Rape,'" by Simon Sterne, Counsellor-at-Law; VI. "A Case of Epilepsy due to Cerebral Anæmia," by William A Hammond, M.D., &c. CONTEMPORARY LITERATURE. — "Transactions Association of Superintendents of Institutions for the Insane;" "Western Pensylvania Hospital Report;" "Northern Ohio Lunatic Asylum Report;" "Butler Hospital Report;" "New York Institution for the Blind Report;" "Pennsylvania Hospital Reports," Vol. I.; "Dickinson on Albuminuria;" "Marcet on Chronic Alcholic Intoxication;" "Von Niemeyer on Pulmonary Phthisis;" "Beaman on Epilepsy;" "Klob on the Pathological Anatomy of the Female Sexual Organs;" "Hewitt on the Diseases of Women;" "Bedford on Obstetrics;" "Thomas on the Diseases of Women;" "Murray on Emotional Nervous Diseases;" "Hardy on the Dartrous Diathesis;" "Siegle on Inhalation;" "Bouchardat's Annual Abstract;" "Winslow on Light." CHRONICLE. *Physiology and Pathology of the Brain and Nervous System.*—"New Method of Measuring the Volume of the Head;" "Insanity in Switzerland;" "Functions of Different Parts of the Brain;" "The Immediate Arrest of Convulsions;" "Case of 'Le Petit Mal,' with some Observations on the Responsibility of Epileptics;" "On the Connection between the Cerebro-Spinal System and the Sympathetic;" "Glossoplegia."

This is a new and extremely promising American Psychological Journal, edited by Dr. Hammond, late Director-General of the American Army Medical Department, from which office, it will be remembered, he was most unjustly expelled towards the close of the late American War by the machinations of a clique. We hail, with pleasure, the admission of so decided and universal a genius as Dr. Hammond into the ranks of the students of psychological medicine. Dr. Hammond's industry is truly marvellous: besides editing this Journal, there are no less than seven original articles from his own pen in the three first numbers; and it is difficult to pick up an American medical periodical without coming across his name.

It will be noticed with regret that No. 2 of Volume I. is absent, and we fear it has been lost in transmission through the post.

On Organic Infantile Paralysis, by Dr. HAMMOND.—The form of paralysis occurring in young children, which Dr. Hammond considers in the above memoir, is that which Rilliett and Barthez have described as the *Paralysie essentielle de l'enfance*, and to which Duchenne has given the name of *Paralysie atrophique graisseuse de l'enfance.* Duchenne considers this disease to consist essentially of atrophy of the muscles, attended with fatty degeneration. Dr. Hammond admits the former, but affirms that his experience leads him to the conclusion that the conversion of the muscular tissue into fat is not a

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necessary accompaniment—he rather regards it as an affection in which the muscles become atrophied and lose their irritability without necessarily undergoing fatty degeneration. There cannot be any doubt, however, but that there is often fatty degeneration present, and Dr. Hammond admits as much.

Organic infantile paralysis, according to Dr. Hammond, is generally preceded by febrile excitement and pain in the back. This pain marks the seat of the disease of the spinal cord to which the paralysis of the muscles is due. What the exact character of this spinal affection may be cannot generally be determined. In one instance, where Dr. Hammond had the opportunity of making a post-mortem examination and of inspecting the condition of the cord, he found a cicatrix partially filled with a very small clot. The paralysis in this case was situated in the left lower extremity, and had begun four years previously. The lesion existed in the lower part of the dorsal regions, in the left anterior column. In some cases, doubtless, the membranes of the cord only are affected, and the condition may be one of simple congestion, or of inflammation, which generally appears in a chronic form. In others the substance of the cord is diseased. When the disease of the cord or its membranes wholly, or in part, disappears, so long a time has generally elapsed, that the contractile power of the muscles is lost, atrophy is begun, and fatty substitution is often going on. The affection is then entirely muscular. The nerves are not apparently impaired in the integrity of their functions; sensibility is not materially, if at all, lessened. There is simply mal-nutrition of the muscles, not due to any inability of the nerves to transmit impressions, but to the fact that from central disease the proper stimulus has not been sent through the nerves of the affected parts to the muscles for so long a time, that the latter, having lost the power of being excited by their natural motor influence, are incapable of recovering their tone and healthy condition.

Very early in the course of the disease the electric contractility of the affected muscles is abolished. When the poles of an induction coil are applied to a healthy muscle, contractions are produced. But very soon after the appearance of organic infantile paralysis this faculty begins to fade, and in the course of a few months is altogether lost in some of the muscles; not in all, for it generally happens that some one or more can be excited to contractions by strong induced currents. The power of the will is always lost over these muscles in which the electric contractility has disappeared.

Atrophy takes place on account of deficient nutrition, in consequence of the original spinal disease. A less amount of blood flows through the muscles of the affected limb than through those of a corresponding member which may be healthy. The muscles gradually waste away to mere cords of cellular tissue; the muscular tissue is absorbed, or, as is generally the case, is replaced by fat.

Along with these changes there is always a reduction of tempera-

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ture in the affected parts. This sometimes amounts to as much as eight or ten degrees, though generally it is not more than five. If, under the use of appropriate means, improvement takes place, the first indication is shown by the return of the temperature towards the natural standard. It thus becomes important to have some means by which a very slight increase of heat may be noticed. For this purpose Dr. Hammond uses Becquerel's discs, which are placed in communication with a galvanometer. These discs consist of a very thin plate of copper, about the size of a half dime, soldered to a thin rod of bismuth. This latter is contained in a small tube of hard rubber, furnished with a handle. The discs are two in number. One is placed on the sound limb, and the other on the corresponding part of the paralysed limb. Both are in connection, by delicate silk covered wires, with the poles of a galvanometer. If the temperature of both limbs be the same, the needle of the galvanometer remains quiet; if either be warmer than the other the needle is deflected to the north or south, according as one or the other limb has the higher temperature. By this apparatus, very much less than the hundredth of a degree of temperature can be determined with absolute certainty.

It is also exceedingly important to ascertain the condition of the muscles as to fatty degeneration; for if this process has advanced to any considerable extent the difficulty of effecting a restoration is much increased. No means of arriving at a correct conclusion in regard to this point is at all comparable to a microscopical examination of the suspected tissue. Duchenne has devised a small trocar, which admirably answers the purpose of extracting a minute portion of the muscle without causing any more pain or disturbance than that induced by the prick of a needle.

Dr. Hammond illustrates in a series of woodcuts the progressive character of the morbid process occurring in the muscles of a part affected by organic infantile paralysis.

First. Oil globules are seen along the course of the fibrillæ, these latter being irregular and torn, and the transverse striæ may be noticed as becoming dim.

Secondly. The transverse striæ almost entirely disappear, oil globules are seen in large numbers, and fat globules become abundant.

Thirdly. The transverse striæ become lost entirely in a mass of oil globules and fat vesicles.

Fourthly. The fat becomes absorbed, no striæ can be seen, and only a mass of connective tissue remains.

This extreme result, however, only occasionally occurs and is necessarily incurable, but in the earlier stages of the disease, especially before there is any great organic change in the muscles, and when the chief symptoms are atrophy, loss of electric contractility, and reduction of temperature, Dr. Hammond has found it very amenable to careful and patient treatment. This consists in the use of general and local means. During the acute state there is nothing of so much efficiency

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as rest in bed. Strychnine is useful, because it is a general stimulant to the nervous system, and a tonic to the muscles. Dr. Hammond uses the following prescription:

℞. Strychniæ, gr. j.
Ferri pyrophosphatis ʒß.
Acid phosphorici dil. ʒß.
Syrup: Zingiberis ʒiiiß.
ʒj ter die S.

The immediately local means of treatment are the causing a greater amount of blood to flow through the diseased parts by heat, frictions, and kneading, and by the persistent use of electricity and active and passive exercise.

Case of Obscure Cerebral Disease, by E. R. Hun, M.D. of Albany. —The following brief *resumé* of a case of hysteria in a male, simulating obscure cerebral disease, may be deemed interesting from its rarity:—W. W. S., æt. 43, married, livery stable man:—Had convulsions twenty years ago, and four similar attacks up to 1863, but during last four years the character of the attacks have changed. Never had syphilis. Ap. 20, 1865, had severe fright, and soon after fell into following condition—was blind, deaf, and dumb, but retained consciousness; wrote on slate what he wished to say, and when his hand was guided by another he understood what was written; could open his mouth, but swallowed with difficulty; very restless; pulse slow and regular. During the night convulsions supervened: body and limbs became stiff; head was thrown back in a tetanic spasm; respiration was not affected nor face flushed, nor tongue bitten; convulsions came on at intervals lasting five minutes; never lost consciousness, and said the spasms gave him intense pain. At the end of twelve hours he regained his usual good health.

In October, 1865, had another attack, lost speech and hearing, but retained his sight. This lasted for several days, when he became convulsed, and on the remission of the convulsions, regained his normal condition.

March 14, 1867. Had a very severe attack—convulsive attacks very severe, beginning with a slight twitching, and ending in strong tetanic spasms; all the muscles of the body were affected in turn, and so sudden and powerful were the changes from opisthotonos to emprosthotonos, that on one occasion four men who were holding him were thrown to the ground. Dr. Hun first tried æther and chloroform, and then a hypodermic injection of morphia, ultimately with a beneficial result, as the patient fell asleep.

March 21. Was up and walking about the streets, communicating with others by means of his slate and pencil; could neither hear nor speak, but otherwise well.

March 26. Had four severe convulsions, after which he remained deaf and speechless until June 6th, when, after a severe head ache, he recovered his voice, but could not hear.

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June 8. Attacked with severe head ache whilst at work; went to bed; had twitching of muscles; used large quantity of chloroform. In the evening commenced to talk, and soon began to hear, but became blind; went to sleep at 3 a.m.; woke up perfectly well. Had other similar attacks Sept. 16th, 1867, and November 16th, but since then has been perfectly well.

Dr. Hun's reasons for ascribing these attacks to hysteria are as follows: 1st—The patient retained consciousness during the attacks. 2nd—Had no spasm of glottis. 3rd—Did not bite his tongue. 4th—Had globus hystericus and dysphagia. 5th—Had increased urinary secretion after each attack. 6th—Had localised analgia, but not anæsthesia. 7th—The restoration to sight, speech, or hearing was always accompanied by convulsions.

On the Influence of the Maternal Mind over the Offspring during Pregnancy and Lactation, by Dr. Hammond.—This is too able a paper for any brief notice to do justice to it. We must, therefore content ourselves with giving the conclusion at which the author arrives, referring our readers who may be interested in the subject to the paper itself for the facts and arguments with which Dr. Hammond backs up his opinion.

"From the facts and arguments," writes Dr. Hammond, "which I have brought forward, the conclusion is irresistible that the mental influence of the mother over her offspring, which begins whilst the germ is still in her ovary, is continued during pregnancy and lactation. The practical value of this physiological truth can scarcely be over estimated as regards its importance to the child, and is so obvious that I refrain from drawing an application which intelligent men and women can readily make for themselves."

PART IV.—PSYCHOLOGICAL NEWS.

Notes on the French Asylums for the Insane under the care of Religious.—The writer of the following notes, being anxious to enquire into the practical working of asylums for the insane as administered by religious, has lately visited several institutions of the kind in France, which, he believes, are as unknown to most English people as they were a short time ago to himself; and he therefore thinks that some account of the religious communities of that country which have devoted themselves to this extremely important work, may not be without interest for the readers of the *Month*. At first sight it seems strange, and very contrary to the ordinary state of French institutions, that in so many places religious establishments, not belonging to the public, should have the care, not only of private patients, but also of the poor who are placed there at the public charge. The reason is that, until the restoration of the Bourbons in 1815, scarcely any provision for the ordinary state existed. At the revival of religion in France, several of the newly-founded or restored religious orders, in their earne

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