2. *American Retrospect.*

By D. Hack Tuke, F.R.C.P.

The Curability of Insanity.

The Curability of Insanity. A Series of Studies by Pliny Earle, A.M., M.D. Philadelphia: J. B. Lippincott and Company, 1887.

We have so frequently taken notice in the pages of this Journal of the valuable researches of Dr. Pliny Earle in regard to the results of care and treatment of the insane, that it is scarcely necessary to do more than to draw the attention of our readers to the collection in one volume of the essays on the "Curability of Insanity," extending to two hundred and thirty pages. The volume forms, as a whole, an important contribution to the study of mental disorders—that branch of it which is, indeed, of radical import, for it grapples with the questions to what degree insanity is curable, whether it is cured to the extent which has been generally believed, and whether the results of treatment are more or less favourable than they were formerly. These essays extend over a period of close upon ten years. There is amongst us a singular and exclusive employment of the word "scientific," which would seem to refuse to comprise within its circle statistical inquiries. This is surely as unfair as it is absurdly unfounded. We have no hesitation in including investigations and carefully-drawn conclusions like those of Dr. Earle, under the head of Scientific Work; and were he in our own country, such work ought to entitle him to the coveted letters granted by the Royal Society as much as minute observations on a drop of water taken from a dirty pond. How such distinctions as to what constitutes the claim to be a successful worker in one department of knowledge rather than another can be made, we have always been at a loss to understand.

In the January number of the Journal for 1886 will be found a brief summary of the chief scientific results arrived at by Dr. Earle; but we may, in conclusion, and with the advice to our readers to possess themselves of a copy of this now classical work, cite from the last page of this book the following paragraphs:—

"The most important general conclusions to be derived from the statistics included in this study are, first, that the old claim of

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curability in a very large majority of recent cases is not sustained, and that the failure to sustain it is more apparent and more striking than at any antecedent time; and, secondly, that the percentage of reported recoveries of all cases received at the hospitals in this country still continues to diminish.

"It is believed that this diminution is, in part, to be attributed to the admission of a larger proportion of chronic cases, and of cases of greater degeneracy from their origin; in part, from the increasing—though, as there is good reason to believe, still far from universal—practice of not reporting, as *recoveries from insanity*, either mere restorations from a drunken debauch or forced temporary suspensions from habitual intoxication; and in part, perhaps, from the adoption of a higher degree of improvement as the standard or criterion of recovery. It may be that there is still another cause of the diminution. Drs. Bucknill and Tuke, in their treatise upon insanity, mention what they call 'cooked' statistics. It is possible that in the United States this class of published results is decreasing, and that the reported statistics are more generally given to the public in the spirit of a conscientious loyalty to scientific truth. In conclusion, I would express the hope that the time is not far distant at which the American Association of Superintendents will so perfect its statistical system as to make a distinction between persons and cases, and enable the reader to learn how many of the reported recoveries are first recoveries and how many subsequent to the first. This improvement was made in the Massachusetts statistical tables, as already mentioned, in 1879; and in those of the British Medico-Psychological Association in 1883. Surely the American Association ought not to lag far behind in the matter. It ought to have been the pioneer."

The Question of Increase of Insanity in Massachusetts.

We have before us the Report of the Massachusetts Board on Lunacy, which treats of the number and accumulation of the insane in Massachusetts for the last thirty years, along with tables in the appendix which relate to insanity and are referred to in the text of the report. They are of great interest, based, as they are, upon returns of the insane much more exact since 1880 than any which have been collected in America for so long a period as seven years. Mr. F. B. Sanborn, the able Inspector of Charities appointed by the State Board of Lunacy and Charity, to whom we are indebted for the report, informs us, in an important letter received from him, that the statistics of New York and Pennsylvania are, perhaps, equally exact now, but for a shorter time. He observes that the Massachusetts figures appear to show that there has been a considerable increase, even in recent insanity, out of proportion to the gain in population. This he ascribes chiefly

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to these causes: the great increase of our urban population and the accumulation in Massachusetts of recent immigrants and their children. The Irish and Scandinavian races, which make up so large a part of this immigration in Massachusetts, are peculiarly liable to insanity in their native country; emigration appears to develop this tendency, and the change of life from rural districts, where they were bred, to crowded cities in this country, intensifies the risk of insanity. Statistical tables have shown for some years a great excess of commitments in cities and large towns over the rural districts; and they also exhibit an increase in the insane of foreign parentage, coincident with the general growth of insanity. According to the reports of the New York State Board, the increase of insanity in that State is *mainly* ascribed to foreign immigration, the result of accumulation, to which the increase of insanity in England is so properly ascribed, not being sufficiently recognized in New York. It appears that it is fashionable in the United States just now to regard the insane of foreign parentage as having been brought directly from Europe, but the Massachusetts figures do not indicate this to any great extent, and Mr. Sanborn cannot believe that things are very different in New York or Michigan.

Mr. Sanborn says that what is most needed in the United States, and he supposes in Great Britain, is an exact registration of the insane, wherever they are brought, in a separate list and easily accessible for reference, when cases present themselves in the hospitals, etc., as "recent." He proceeds:—"Had we such lists we could easily strike off from the catalogue of recent cases those who stood on the register as chronic cases; but until we have such means of correction we cannot escape uncertainty in this matter. The new census of Massachusetts for the year 1885, although it will not give the number of our insane accurately, will furnish us with a register of about 5,200 different persons, who on the 1st of June, 1885, were enumerated as insane, with such particulars that we can readily trace back cases assumed to be recent to this list. I myself established a list of about half this number seven years ago, which I have been watching during the intervening time, with results that may be of interest. The whole number of persons named in this list was 2,598, and these were, on the 1st of October, 1879, actually resident in our four State hospitals at Danvers, Northampton, Taunton, and Worcester, and in the two chronic asylums at Tewksbury and Worcester. Seven years afterwards, 1,230 of these patients were still living in these same establishments, and 119 were known to be living in other asylums and almshouses; so that more than half the original number, after a lapse of seven years, were still insane in public establishments. Of the known deaths in seven years, 752 in all, not less than 711 had died in some one of the six establishments where they were living when the list was made out; 21 had died in almshouses

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and 20 in other places. Of the original 2,598, fourteen have been boarding in families as insane persons (under a new policy), and 12 were thus boarded last October. At that date then, 1,361, or 52 per cent. of the whole number, were known to be living in a state of insanity, which had continued in their case for at least eight years, although in some instances there had been lucid intervals, during which they had gone forth only to return again to the hospitals. All those who died may be said to have died insane; so that no less than 2,113 persons out of 2,598 did not recover during a period of seven years. Of the other 586 the majority were discharged from the hospitals unrecovered, and there is no reason to suppose that more than 200 of them did recover.

"In addition to the figures given on page xciii. of the report, I have collected the figures for a dozen years earlier, as regards first admissions, and I have also tabulated for the same years the number of discharges, *without recovery*, from all the hospitals and asylums in Massachusetts, with the readmissions in each year, and I now send the figures. As the readmissions include a considerable part of the 'discharges without recovery,' and, in particular, include persons transferred by the State Board from one establishment to another during the year, it will be safe to deduct an average of 175 a year from the second and the fourth columns for duplication:—

	Whole number admitted.	First admissions.	Discharged without recovery.	Readmissions.
1868	1021	616	370	405
1869	1142	695	563	447
1870	1324	813	605	511
1871	1344	854	695	490
1872	1372	784	737	588
1873	1282	739	747	543
1874	1321	828	774	493
1875	1255	838	623	417
1876	1350	852	681	498
1877	1310	884	586	426
1878	1754	959	969	795
1879	1297	849	577	448
1880	1388	900	632	488
1881	1445	949	722	496
1882	1605	1005	755	600
1883	1633	1101	736	532
1884	1634	1093	837	541
1885	1642	1100	755	518
1886	1845	1120	1017	677
	26964	16979	13381	9913

"It will be observed that the figures of first admissions, though far from uniform, and varying for reasons which it is a little difficult to explain, do show an increase, in 19 years, of 504 per year; which is about 80 per cent. on the first admissions of 1868.

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Or, if the first two years are averaged, and the same is done with the last two, the increase in first admissions will be from 656 to 1,110, that is, 454, which is an increase of 69 per cent. Now during this period the population increased in the whole State less than 35 per cent., so that the gain in first admissions was double the gain in population. Now observe further that the increase in *readmissions*, if the first two and the last two years are averaged, is only from 426 to 609, or 42 per cent., which is but little greater than the gain in population; from which I infer that the increase of insanity during the period, *beyond the ratio of population*, was mainly in the first admissions.

"I will not comment at present on the discharges without recovery, which in the 19 years aggregate 13,381, further than to say that about 3,500 of these were probably transfers from one institution to another; 1,900 were persons removed from Massachusetts by the State Board, and 1,100 were persons removed to town almshouses and other establishments, corresponding to the English workhouse asylums. This would leave 6,700 (nearly) who remained in the community of Massachusetts subject to readmission; while, applying the same reduction to the aggregate of readmissions, so far as it is allowable, the latter become 6,413 readmissions from the general community. It is to be noticed, however, that what are here called 'readmissions' are persons previously admitted to some other hospital *anywhere in the world*, so that they must include at least 500 persons who were never in any Massachusetts Hospital before. This would reduce the Massachusetts readmissions from the general community to about 5,900, or an average of 311 in each of the nineteen years, while the annual average of first admissions would be 893."

PART IV.—NOTES AND NEWS.

THE MEDICO-PSYCHOLOGICAL ASSOCIATION.

The Quarterly Meeting of the Medico-Psychological Association was held at Bethlem Hospital, on the 23rd February, 1887, the President (Dr. Savage) in the chair. Present: Drs. Robert Baker, T. W. Brushfield, D. Bower, H. Chapman, E. East, C. T. Ewart, J. E. M. Finch, S. Forrest, B. B. Fox, T. D. Greenlees, H. Hicks, W. M. Harmer, M. MacLean, J. D. Mortimer, James M. Moody, P. W. MacDonald, H. Hayes Newington, A. Newington, J. H. Paul, S. R. Philipps, H. Rayner, G. M. Robertson, A. H. Stocker, H. Sutherland, H. Stilwell, D. Hack Tuke, D. G. Thomson, T. Outterson Wood, E. S. Willett.

The following gentlemen were elected members of the Association:—G. Dickinson Symes, M.R.C.S., City of London Asylum, Stow, near Dartford; Rothsay C. Stewart, M.R.C.S., Ass. Med. Off., The County Asylum, Leicester; William Harding, M.B., C.M.Ed., Ass. Med. Off., County Asylum, Lancaster; G. M. Robertson, M.B., C.M., The Palace, Falkland, Fife; John Kennedy Will, M.B., C.M., Bethnal House, Cambridge Road, E.; Fred. W. Melson, M.D., Ass. Med. Off., Durham County Asylum, Sedgefield.

Dr. BAKER exhibited a model of a crib-bedstead which he had seen in the

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