UNLOCKED DOORS.

Dr. Batty Tuke makes the following remarks in the last report of the Fife and Kinross Asylum :—

"Finding that the open door system worked so well in the new buildings, I was led to extend it gradually to the main Asylum. First of all, the doors between the various wards and corridors were left unlocked, and, subsequently on the male side, the outer doors have stood open. I have had no reason to regret this step, on the contrary, I believe that it has conduced materially towards the welfare of my patients; only one escape has occurred in consequence in four months, and that one of no moment. My conviction is that the locked door and grating key induce a desire to abscond from the very irritation caused by their constant obtrusion on the sight and hearing. For many years I as an asylum physician have applied a key to every door I had to open; it has ever and always grated on my ear—how much more must it have grated on the ears of those confined through its influence. Few, whether sane or insane, can overcome the loss of personal liberty; but when it is restricted from necessary causes the subject of detention benefits from the absence of mechanical restraint. The result of my experience in the management of men, sane or insane, is that the more one trusts in their sense of honour the more easily and pleasantly are they guided. By placing the very large proportion of my patients on *parole* I enhance the value of the comfort and pleasant surroundings of the Asylum, of the kindly treatment and good food, of the amusements and healthy employments; and by inducing a friendly and honourable relationship, founded on a mutual trust in each other, a degree of contentment results as to their lot in at least 95 per cent. of the Asylum population. The odd 5 per cent. desire to escape; but why should I punish the 95 in order to confine the small balance of irreconcilables, the nature of whose disease is such as to render them erratic? Few such cases exist at the present moment in your Asylum, and I trust that they will soon disappear altogether under the "open door" system; they are provided for either by special supervision, or in the case of females, in number 6, which is lockfast. I hold it to be cruelty to apply to the contented majority the maximum of restraint, in order to confine the minority who require its application. Whatever induces self-respect, individuality, or responsibility is productive of a healing or ameliorating influence on the insane. I trust your Board will see the way clear to assist me in developing this system of treatment further, by substituting common handles for locks in the dormitories, as it may from time to time seem expedient.

"I may mention here another modification in the treatment of *recent* cases, which has been adopted with considerable success during the past year—it consists in discharging, on Lunacy Board sanction, or, on a month's leave of absence granted by myself, patients who,

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although convalescent, are by no means mentally sane. When the physical health has been re-established, and the patient evinces a desire for home, or when he or she seems to be lapsing into a demented condition, I believe the proper course to pursue is to try the influence of a return to home. The result of my experience is that such cases have recovered much more rapidly and satisfactorily than others of the same class who have passed their term of convalescence in the Asylum. It may occasionally fail, but a greater degree of harm may be expected from too long, than from too short, detention.

"In conclusion, I beg to thank you most heartily for your undeviating and kindly support in the management of the Asylum, and trust that you see good reason for still maintaining the general principles on which it is conducted, viz., that its chief function is that of a *curative* hospital for a special class of nervous diseases, to which is superadded the care of chronic cases which cannot fitly be set at liberty; that, being a public establishment, it should exist under the eye of the public, and accordingly is open at all times to the inspection of those who take interest in the general subject of insanity or in particular cases; that the freest communication is permitted between friends and patients; and that the utmost degree of liberty is given to the inmates compatible with their own safety and that of the public."

OBITUARY.

CALEB WILLIAMS, M.D., F.R.C.S.

On the 5th inst., after an increased illness of a few days, died Dr. Caleb Williams, in the seventy-third year of his age, the oldest member of the medical profession in York. His early professional education was under Dr. Travis, of Scarborough, with whom he remained till he was twenty-one. He afterwards attended the schools of Guy's and St. Thomas's, in London, and spent a short time in those of Paris. At the age of twenty-five he commenced practice in York; in the same year he was chosen as visiting medical officer to the Friends' Retreat, where, assisted by the late Mr. Tuke, he was one of the earliest advocates of the non-restraint system, and more generally enlightened treatment of the insane. On the ground of declining health he resigned this appointment in April, 1871; after having filled it uninterruptedly nearly fifty years. In 1864 he succeeded Dr. Thomas Simpson as consulting physician to the York County Asylum. In 1832 the terrible epidemic of cholera broke out in York. In common with some of his fellow-practitioners, he was faithful to his trust in this severe visitation. For twenty years he occupied the chair of Materia Medica and Therapeutics in the York School of Medicine. This post he resigned in 1858. The school has since been closed. In addition to his connexion with two institutions, already mentioned, Dr. Wil-

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