The PRESIDENT said that members of the Association would feel very much obliged, and he personally would have been glad to have heard Prof. Westerman-Holstijn a little longer. He hoped that when that gentleman paid another visit he would be prepared to read a paper to the Association. Possibly some scientific papers were on the dull side, but he was sure such a paper from such a source would be listened to with a smiling face. The foreign delegates were very welcome, and he hoped they would be seen at these meetings again.

THE ANNUAL DINNER.

The Annual Dinner took place at Claridge's Hotel, Brook Street, W. 1, and was very largely attended. The guests included: The Rt. Hon. Lord Macmillan, *K.C.*, LL.D. (Lord of Appeal), The Rt. Hon. Lord Wakefield of Hythe, The Rt. Hon. Lord Blanesburgh, *G.B.E.* (President, Child Guidance Council), Sir Claud Schuster, *G.C.B.*, *K.C.* (Clerk of the Crown), Sir Arthur Robinson, *G.C.B.* (Permanent Secretary, Minister of Health), Sir W. J. Collins, *K.C.V.O.*, M.D., Sir C. F. de Salis, *K.B.E.* (Chairman, Springfield Hospital Committee), Surgeon Vice-Admiral Sir Reginald Bond, *K.C.B.*, F.R.C.P. (Medical Director-General of the Navy), Sir Stanley Woodwark, *C.M.G.*, *C.B.E.*, F.R.C.P., Sir Francis Fremantle, *M.P.*, Sir Laurence Brock (Chairman, Board of Control), Sir Squire Sprigge (Editor, *The Lancet*), Sir Ernest Hart, Prof. M. Laignel-Lavastine (representing the Société de Neurologie de Paris), Dr. Jacques de Busscher (representing the Société Belge de Neurologie et Psychiatrie and the Société Belge de Médecine Mentale), Dr. Jens Chr. Smith (President of the Association of Danish Alienists), Dr. R. Largeau (representing the Société Médico-Psychologique de Paris), Prof. Rüdin (President of the German Association of Psychic Hygiene and Eugenics), Dr. Westerman-Holstijn (representing the Association of Psychiatrists of the Netherlands) and Mrs. Westerman-Holstijn, Prof. William McDougall, S. P. Vivian, Esq., *C.B.* (Registrar-General), Lt.-Gen. J. A. Hartigan, *C.B.*, *C.M.G.*, *D.S.O.* (Director of Medical Services, Aldershot), Lt.-Col. B. T. Hodgson, *C.M.G.*, *D.L.* (Commissioner of the Board of Control), Dr. Charles S. Myers, *C.B.E.*, D.Sc., F.R.S., Major J. H. Hebb, *C.B.E.*, M.B., Mr. Alderman Button (Chairman, Middlesex County Council), Dr. A. Salusbury MacNalty, M.D., F.R.C.P. (Chief Medical Officer, Ministry of Health), S. J. Fraser Macleod, Esq., *K.C.* (Senior Commissioner of the Board of Control), J. Kirkland, Esq., *O.B.E.*, F.R.I.B.A. (Architect, Middlesex County Council), Miss Ruth Darwin (Senior Commissioner, Board of Control), F. W. Rattenbury, Esq. (President, Institute of Municipal Corporation Treasurers), A. H. Evans, Esq., *O.B.E.*, F.R.C.S., Miss E. D. Vickers (Secretary, Mental After-Care Association), Dr. Robert Hutchison, LL.D., M.D., F.R.C.P. (President, Royal Society of Medicine), Col. Hayes Newington, Dr. S. A. Kinnier Wilson, M.D., F.R.C.P., Surgeon-Captain A. D. Cowburn, R.N.V.R. (President, Coroners' Society of England and Wales), Dr. S. Watson Smith, M.D., F.R.C.P. (President, British Medical Association), Dr. G. C. Anderson (Medical Secretary, B.M.A.), Dr. N. G. Horner (Editor, *British Medical Journal*), John Lea, Esq., M.A. (University of London Extension Registrar), Prof. E. D. Adrian, M.D., B.Sc., F.R.S., G. Gibson, Esq. (Secretary, Mental Hospitals and Institutional Workers' Association), A. Seabridge, Esq. (President, Incorporated Association of Clerks and Stewards of Mental Hospitals).

Prof. D. K. HENDERSON, M.D., in proposing the toast of "Mental Health", said: I wish, in the first place, to say what peculiar pleasure it is to me to have been asked to propose this toast, and to say how much I feel honoured by having been invited to do so. This topic which I have to propose, "Mental Health", is a topic which is very comprehensive, very general in its application, and extremely important. Psychiatry, the technical name which we use to describe the study and investigation of mental health problems, has often been described as the Cinderella of the medical sciences. She is a Cinderella who is gradually getting on more easy terms with her step-sisters medicine and surgery. Psychiatry cannot claim brilliant epoch-making advances such as have marked the progress of her sister sciences, the advances which appeal so much to the popular imagination. But psychiatry, too, has been making advances in the way of becoming reconstituted, and has become a vital factor in the life of the community. The maintenance of the mental health is one of the greatest, if not the greatest problem of the age, and if we fail to deal with this problem adequately, it means an individual, a family and a racial wastage which is enormous, a social and economic burden which is becoming more and more overpowering. It will not avail us much to control physical disease, to increase the expectation of life, to improve the environmental conditions under which the people will live, unless, at the same time, we can see to it that we are going to have a well-constituted, a well-balanced race. If we are unsuccessful in this respect, it means that by our improved physical and environmental conditions we shall merely increase the potentiality for the development of nervous and mental illness. Under these

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circumstances it seems fundamental that we should study, very much more than we have done in the past, the quality, the character, the stuff, the personality. How can we do this? How can it be done? It can only be done by developing a programme of mental health, a programme which must start even before the child is born, which provides for the birth of healthy children, and which also is responsible for maintaining both their physical and their mental development. Some time ago Mr. Aldous Huxley, in one of his books, translated a Latin tag, *Mens sana in corpore sano*, as "the soul of an English gentleman in the body of a Greek god". We have heard much about the body of the Greek god; we have not heard enough about the soul of the English gentleman. It is very important and very essential that we should study and take note of nervous and emotional needs, just as much as we take heed of physical development. In the past, nervous and emotional needs have been taken for granted; it has not been realized that those habits and behaviours which are formed in childhood are forerunners of later maladjustments. If we look at the problem in this way we shall see it is not a problem for our mental hospitals, but one which should be considered long before our hospitals and institutions are thought of; it should be tackled in its incipiency.

I do not want to dilate on this further; if I were to enter at all fully into such a problem it would take hours, not minutes, and I wish to present these remarks to you in as tabloid a form as I can. We have to recognize that we are dealing with large heterogeneous groups, we are dealing with people who are mentally disordered and disturbed, and with the mentally defective, with people who are called neurotics and social misfits, with people who, for some reason or other, cannot fit into the social problem. And yet they have one feature in common—the feature of showing disordered behaviour. But, more than that, all these people we are attempting to deal with are men and women who are in need of medical help, and that is the important point to realize. We have got into the habit of accepting all such conditions as inevitable, as something to be borne patiently, to put up with, not recog nizing that these disordered states are reactions of our disturbed personalities who are trying to meet life's difficulties in a somewhat inadequate way.

There are a variety of ways in which this problem can be dealt with. I only want to engage your attention for a few minutes, but the important points we have to keep in mind are these: (1) We have to educate the medical profession; (2) we have to gain the goodwill and the co-operation of the public by judicious propaganda, not promising more than we can actually accomplish; (3) we have to develop research. If I may be allowed a minute, I should like to discuss these three.

As far as the first is concerned, we all recognize that our Universities and our medical schools have had an obligation with regard to mental health which has never been fulfilled. I am not referring to Great Britain alone when I say this, but to every country in which medicine is taught. At the present time, as most of you know, there is a special committee of the General Medical Council which is considering the problem of medical education, and I think I can say that every medical faculty of the country is giving earnest consideration to how that curriculum can be improved. It is heartening to know that psychological medicine is receiving consideration. We are all hoping that a great deal more systematic instruction will be given, both clinical and general, with regard to this subject, and should include such things as applied psychology and psycho-pathology, and the principles governing the care and treatment of these various groups which I have mentioned. None of us want to manufacture specialists at once; the student probably does not want to become a specialist at once; the idea is that by teaching this subject in an intelligent way—and it can be taught in an intelligent, stimulating and persuasive way—we should gradually educate a group of broad-minded physicians—I would rather put it in that way—who will recognize that this subject is not merely a specialty, but one which comes into touch with every physical disease, medical or surgical. The doctor who is most successful in general practice is the doctor who understands the psychological needs of his patients. In the last few weeks I have been listening to a series of lectures on the subject of who should teach medical students to care for nervous patients. The lecturer, a very distinguished psycho-therapeutist dismissed the claims of various groups; he dismissed the psychiatrist, the neurologist, and the psycho-analyst, but in their place, I am sorry to say, he had no very constructive suggestions to put forward. And as one listened to him one began to feel that the psychiatrists should begin to stand up for their rights—(Hear, hear)—that we should take up a more definite position than we have done in the past, and that we should be thoroughly convinced that the person who has had an adequate psychiatric train-ing and has a working knowledge of neurology and psycho-therapeutic principles, is the person who should continue to teach psychiatry to our medical men. The difficulty about this is that we have too much criticism from the other fellows, and we have not, in our own ranks, enough co-ordination, and therefore, instead of patients coming to consult us, they go to the pastor, or the educationist, or the lay psychologist, or to anybody else who professes to have an understanding of these delicate and difficult matters.

With regard to the second point I mentioned—to educate the public—the difficulty in the past

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has been due more to professional apathy and to public prejudice than to anything else, and the public prejudice has been dependent on the professional apathy; and if we can get such a group as I have been mentioning, I hope we shall be able to dispense with much of the public prejudice. I hope it will be imbued with some of the spirit of the National Council of Mental Hygiene and the Institute of Industrial Psychology, and other organizations of like nature. It is only a little over twenty-five years since the National Mental Hygiene movement was inaugurated in the United States by that energetic man Clifford Beers, a man who, in this particular branch of medicine, has brought more blessing on humanity than anyone since the days of the illustrious Pinel. I hope this movement will go on and that it will prosper.

The third point which I mentioned is that of research. We need, in this matter, to have far more workers; we need to have more money and we need to come anew to many of the problems which are awaiting solution, both in relation to personality, and to all sorts of technical topics, the nature of which I need not go into here. It is absolutely essential we should attempt to pool the resources of the community in dealing with this big problem of the care and treatment and the understanding of those who are suffering from disorders of their mental health. It is a huge scheme, and I hope that it may—some of it at any rate—with the help of the Ministry of Health, be brought to fruition. It is very important and very gratifying that we have with us this evening Sir Arthur Robinson, the Permanent Secretary of the Ministry of Health, and I have great pleasure in coupling his name with this toast. (Applause.)

Sir Arthur Robinson (Permanent Secretary of the Ministry of Health), in responding to the toast, said: I feel that I am here to-night perhaps under rather false pretences. The person who should have answered this toast is not the Permanent Secretary of the Ministry of Health, but the Minister of Health, and I should like, first of all, to express to the Royal Medico-Psychological Association and to its President the regret of the Minister of Health that he is not able to be present personally on this occasion. Unfortunately, changes of Government cannot wait even upon the banquests of the Royal Medico-Psychological Association. Ministers change, and they try to fit in their engagements with a certain modest pride. I think that the present Minister has fulfilled all the engagements of his predecessor except this particular engagement, and I express in a double sense, my sympathy with the Association for that unfortunate incident. I am reminded of the immortal work of Mr. James Boswell on Dr. Johnson. A lady—in those days called a woman—had delivered a public speech, and Dr. Johnson was called on to applaud the speech. He replied to this effect: "Sir, if you see a dog dance, you do not wonder that the dog danced well, you wonder that the dog danced at all." Sometimes I think that is applicable to the oratorical efforts of a permanent civil servant. (Laughter.) Prof. Henderson, with his expert knowledge of mental health, has covered a very wide field. I am a poor layman, and I feel that I ought to have taken off my shoes before entering into this presence. I confess that I cannot follow Prof. Henderson in these great matters; but I would ask Prof. Henderson to take courage; I would ask him to reflect that it may not be without significance altogether that the person who is very imperfectly endeavouring to respond to the toast of mental health is the Permanent Secretary of the Ministry of Health and Local Government, and if one wants evidence of progress in mental health, I would ask Prof. Henderson to spend a little time reflecting upon that fact. What Prof. Henderson is doing, as I understood him is saying that mental health, although it is mental health, is also health, and that it has just the same claim to consideration, to support, to research, to assistance, as has any other branch of public health. (Hear, hear.) Looking back on some fifteen years at the Ministry of Health, I suppose that on this side there has been more progress in the removal of mental questions from the art of position of banishment, or isolation, of the idea that it is the sort of thing that you must not mention or must not talk about, and placing them in the sphere of problems which have got to be faced and can be tackled, than in almost any other sphere of public health. I cannot, as a layman, pretend to be able to assign a causation for this. I think purely as a layman, that one of the things which has appealed most to me is all this research into what Prof. Henderson referred to, what I may call the question of the physical causation, or the physical relations, of mental disorders. Of course it is limited, but the more you can consider it from that point of view, the stronger is the bridge which you establish between mental health and the other parts of health.

Prof. Henderson talked about the essentials of progress. I have, on my right, Lord Macmillan, who, before long, will entertain you with very much more effective and appealing oratory than I can possibly do myself. But when I see Lord Macmillan I do remember that of all the things with which at the Ministry of Health I have been associated, I think one of those which I shall remember most is the Mental Treatment Act of 1930, partly because of the conditions under which that Act was passed. It required, for example, I think, all-night sittings, and all-night sittings are the kind of thing that, when a civil servant gets into a position of greater freedom and less responsibility, he will love to include in highly injudicious memoirs. (Laughter.)

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Now let us look at some of the things in the Mental Treatment Act. You say, in ordinary medicine, that you must get your cases soon, and the Mental Treatment Act embodies that principle, and, for the first time, authorizes local authorities to start out-patient clinics for incipient mental cases, and since then 140 such clinics have been established. You say it should not be necessary for a person to be certified before he could go into a public mental hospital; and, of all the things, that, to me as a layman, appealed most in that Act. And I think that made the strongest impression, because what it did was to say that the poor man should have the same privileges as the rich man. (Applause.) Under that particular clause there has been enormous progress. I want you to realize that in the last year, 1934, 20% of all the direct admissions to public mental hospitals were admissions without certification; that, to me, is progress indeed. There are many other things that could be quoted as signs that mental health is coming into its own. We have travelled very far from the bad old days, but we have not travelled the whole distance. Prof. Henderson says that what is required is more education of the public; I wholly agree with that view. After all, the essential basis of democracy is that if you make the people understand what is the right thing to do, you can rely on the people to do the right thing. In the sphere of mental health I quite agree that more education, more enlightenment as to the possibilities of progress, is badly needed. Then there is required, I think, a development of what Prof. Henderson referred to—closer relations between those who are learning to practise mental medicine and those who practise other forms of medicine. As a layman, I will not specify in what particular directions that closer relationship should take place or take effect, but I am sure that the closer relation must be there, and that if the will to secure it is present, the results will readily and rapidly follow. Because I am sure that so far as those who are responsible are concerned, bodies like this Association, so far as these bodies responsible for mental medicine make their approach to the great bodies who are responsible for general medicine—the physicians and surgeons, the Public Health Service, the British Medical Association—this approach will be readily received, and effect will be given to it in the spirit of statesmanship which I, at all events, after fifteen years at the Ministry of Health, have learned to associate with the medical profession.

There is, perhaps, just one thing more that I ought to say. The Ministry of Health is a Ministry of Health, and it is also a Ministry of Local Government, and, for good or evil, mental medicine is inseparably associated in this country with local government. You can hold your own views as to local government, you can criticize it—I, with fifteen years' experience of it, could probably criticize it with extreme skill—but I think you have to remember that local government is with you, and that if local government does not remain with you, you may have with you something a great deal worse, and that is—low be it spoken—government by bureaucrats. Therefore I myself remain a strong believer in local government, and I should like the Royal Medico-Psychological Association to consider carefully that there is a mental side to their problems, and that there is also a local government side to their problems, in the handling and the administration of the work of mental medicine in the areas. Sometimes I see rather too strong a tendency to assume that mental medicine is a thing entirely apart and by itself, that it requires to have an isolated or special committee or organ in the area of the local authority, and that if that is not recognized it is not fair to mental medicine. As a person who has had a good deal of experience of local government, I should like the Royal Medico-Psychological Association to consider that particular proposition very carefully before they commit themselves to it. To my mind it is entirely inconsistent with the other theory that mental medicine must be closely allied with the other branches of medicine; for what is the consistency in saying that mental and other medicine are allied in theory, but in practice must be dissevered? I should like the Medico-Psychological Association to think that problem over very carefully, because I am perfectly satisfied that in proportion as, in the local areas, mental health keeps close touch with public health in the Public Health Committee of the local authority as a whole, and does not go on its own lonely way—I speak purely as a practical man—I think that, from that point of view, the interests of mental medicine will not, in the areas, suffer.

I fear that I have made a long and rather dull sort of oration, and that what I said at the start has been fully justified by the course of my remarks. I am always reminded of the experience of the wretched civil servant—myself—who spends weary hours in the House of Commons waiting for the business of the Ministry of Health to come on, and who goes to that unrivalled professor of psychology, the policeman outside, behind the Speaker's chair, and who says to him, "When is the Ministry of Health business coming on?" and on this particular occasion the policeman replied, "They are still talking about foot-and-mouth disease; often I wish some of them had it". (Laughter.) I do not wish, Mr. President and Prof. Henderson, that a kindly wish of that sort should be expressed at my expense. Therefore I will remind you again that I am here as responsible for the Ministry of Health, which has got a considerable number of interests, so many interests at a time, that one is apt to forget some of them; and I will only remark further that mental health in this country now occupies a stronger and better position than I have known, at all events in my time at the Ministry of Health. It requires combination—I

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will not use the word " co-ordination "—it requires sympathy, it requires research and knowledge, and so far as those at the Ministry of Health are concerned, such assistance as we can give will readily and always be forthcoming. (Applause.)

Sir WILLIAM JOB COLLINS, M.D., F.R.C.S., in proposing the toast of " The Middlesex County Council ", said : I have been asked to submit to you the toast of the Middlesex County Council, and, as an old municipal hack myself, I am delighted to have that honour imposed upon me. It may have been given to me because I am an Honorary Member of your Association—a position I highly prize. My association has been not so much with Middlesex as with its little neighbour London, with its Lieutenancy and its County Council, of which, since the death of Lord Rosebery, I am the oldest living ex-Chairman. My acquaintance with Middlesex is a neighbourly and nodding acquaintance, and it has earned my deepest respect. I had the privilege of opening the North Middlesex Hospital fifteen years ago, and sometimes I have distributed prizes at some of your council schools. But my memory goes back to the year 1888, when the Local Government Act of that year set up the London County Council for dealing with London administration, when Lord Rosebery facetiously called it an incident in rural administration. The London County Council was carved out of the side of Middlesex, much in the same way that Eve was taken out of the side of Adam. I do not know whether Middlesex suffered greatly from the operation, but I think that both the London County Council and Middlesex County Council have put on a good deal of " side " since that time. I think the Middlesex County Council has the advantage, because the population of London has been falling since the first year of this century, whereas that of Middlesex, which was little over half a million, is now 1¾ millions, and I understand that its rateable value has increased proportionately. But its county rate is one of the lowest in the Kingdom. The death-rate, 9·7 per thousand, is one of the lowest in England and Wales. It has been said that Middlesex has become the dormitory for London, and that " green belt round London " which some of us dream about seems to be receding into the distance. It has not yet come into existence, but it may possibly surround the police area of London.

Middlesex possesses three very fine mental hospitals, with four thousand beds. When I first joined the London County Council in 1892, and afterwards on an Asylums Committee, I was impressed with two things. The first of these was the need for more pathological research, and the second was the need of pensions for asylum officers. With regard to the first of these, I started the laboratory at Claybury Mental Hospital, and got my friend, the late Sir Frederick Mott, to be the pathologist there ; and I wrote the Preface of the first *Archives of Neurology*, which is still carried on up to the present time.

With regard to the second matter that I have mentioned, I felt the great need there was of pensions for asylum officers, and I had the audacity to introduce into the House of Commons a Bill to give effect to the need ; and in that I was largely assisted by the late Dr. Shuttleworth, whose name should always be held in reverence by this Association. I had some trouble in getting for that Bill a Second Reading, because my friend Lord Banbury habitually blocked it. And at last I said I would not oppose his Dogs Bill if he would allow my Bill to go on. I think the Dogs Bill never got beyond the Second Reading, and I was able to accept some amendments suggested by Banbury, in the hope, which turned out successfully, that many of them would be modified when the Bill got to the House of Lords, when the late Lord Monk Bretton kindly took charge of the Bill. That Act of 1909 is greatly to the benefit of those officers, for they have to perform duties which are sometimes repellent, and are always arduous, and I am glad that their later years are now provided for.

When I sent a questionnaire round to the superintendents of London asylums, I was told by one of their number, a distinguished man, that there had been so much pathological research into insanity that he did not think any more was necessary. The same gentleman, in his lectures, defined insanity as a disease of the brain which necessitated putting the patient under restraint. So things were rather crude in those earlier days.

I have the honour to couple with this toast the name of Mr. Alderman Button. For some time he served in the House of Commons for the Wrekin Division of Shropshire, and he thought it better not to associate with those who suffered from foot-and-mouth disease, but considered it better to associate with mental health.

I will not detain you longer, Ladies and Gentlemen, but will, with all enthusiasm, give you the toast, " The Middlesex County Council ", coupled with the name of County Alderman Howard Button. (Applause.)

Alderman BUTTON, Chairman of the Middlesex County Council, in responding to the toast, said : I am very proud to reply to the toast which has been submitted to you by no less a person than Sir William Collins. And I am very proud that that toast is the Middlesex County Council, of which body I have a very high opinion. This feeling of pride is fortunate for me, because I am deeply conscious of another feeling which is running through me at the present time. To-night as an ordinary man, a business man, a local government administrator, I am standing

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before an assembly of mental experts and scientists, and feel conscious that after having spoken to you for exactly two minutes, you all know me through and through; you know my secret faults, my unworthy ambitions, my inmost thoughts, and even my criminal tendencies. Having made a clean breast of this dreadful business, may I say a few words in reply to the toast of the Middlesex County Council which has been submitted to you?

I am one of the people who regard the County Council as comprising not merely so many members, but possessing a close alliance and sense of co-operation between those members of the Advisory and Administrative Staff of that council, in which respect Middlesex is outstandingly fortunate. We have with us to-night, in the person of Sir Ernest Hart, who retired from our service three days ago, a man who for many years has held the highest position in his professional association as President of the Society of Clerks of the Peace; we have with us a gentleman, in the person of Mr. Rattenbury, of the County Council, who is at present President of the Institute of Municipal Corporation Treasurers and Accountants; we have Mr. Harvey, who is President of the Society of County Valuers, and in yourself, Sir, who has been elected to the Presidential Chair, we have yet another member of our staff who, by virtue of that exalted position, has brought added lustre and distinction to the County of Middlesex. (Applause.) On behalf of the County Council, which I represent, I extend most hearty congratulations to you, Sir, and I hope your year of service may be a very happy and successful one, and very beneficial for the county.

From Sir William's speech it will have been gathered that Middlesex is pretty well equipped in every way, and that the county has always been willing to take up any scheme for the benefit of the ratepayers. That has been very successful, judging by the number of people who have come to live in our county. With the exception of Rutland, we are the smallest county on the map, of an area of some 230 square miles. Yet, compressed into that area, we have a population equal to half that of the whole Kingdom of Denmark. That is the important area over which this County Council has the privilege of ruling. A phenomenal increase in our population in the last few years has brought many problems in every direction, perhaps in every service of the County Council, but there is no service which has received more consideration, and I hope been more improved, than that of the medical and the hospital service.

During the last year two very important outstanding events have taken place. A year ago we opened Shenley Hospital. The importance of that event was signalized by the fact that that hospital was opened by His Majesty the King, accompanied by the Queen. The hospital will ultimately provide some two thousand beds, and adjoining it there is to be a colony for mental defectives, consisting of a further two thousand beds. That will give you some idea of the way Middlesex has tackled the problem of providing for those who are afflicted mentally.

Another very important incident has taken place in the very close liaison between Westminster Hospital and that hospital over which you, Sir, have the honour to preside. It is true that Middlesex paid a certain sum—I think it was £10,000—by way of providing ground for rebuilding Westminster Hospital; but you will remember, Mr. President, that Middlesex got for that an adequate return in that six beds are reserved to us in it in perpetuity. There is something even more important than that. We have come to an arrangement whereby in exchange for certain services provided by Middlesex, Westminster have given us the call at all times for the free services of their expert staff. In that connection there is another incident which I hope may interest you, and that is, that our own Public Assistance Committee and Mental Hospitals Committee have been in close conference throughout the year—and this is on the lines of Sir Arthur Robinson's speech—and there will be established, and they will be open within the next three weeks, at our county hospitals, out-patient departments whereby the people who are attending and the people in the wards of the general hospital too, who have any tendency towards mental maladies or breakdown, will be watched over and their cases will be noted by specialists. That is one way of bringing the services of those who help the physically sick and the mentally sick into closer co-ordination.

We were very proud to learn that your Association propose to visit two of our mental hospitals —to-morrow Springfield, and the next day Shenley. Those two will be entirely open for your inspection; you will be able to go where you like and when you like, and I only hope that what you will see will meet with your approval, and that you will conclude that if the whole of the services of Middlesex County are administered as they are in connection with the mentally afflicted, I feel that we shall be perfectly satisfied. I hope you will get some benefit from the visits. You may have suggestions to make to us; it may be you will take ideas from them. I am sure that conference and inter-communication of this kind can lead to nothing but good results.

I thank you very much indeed for the way you have proposed this toast, and you, Ladies and Gentlemen, for the way in which you have received it. (Applause.)

Dr. W. G. MASEFIELD, in submitting the toast of "The Visitors", said: That high legal authority and humorist, A. P. Herbert, has told us that the habit of after-dinner speaking is a

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pernicious one, and a totally unnatural one. He has pointed out to us that human beings, alone of all the animals, are wont to give tongue after a satisfying meal, instead of indulging in a natural somnolence. I regret it is my duty to postpone your repose for a few more minutes.

We members of the Royal Medico-Psychological Association, in our capacity as medical superintendents, resident licensees and medical officers, give our guests a most hearty welcome. They have come here, on a temporary basis, to our care—(Laughter)—on the recommendation of no less a person than our President, a person specially approved for this purpose by our Association ; and if any second medical recommendation is required, I have the honour to endorse our President's recommendation. But I regret I must hastily add that I am not the regular medical attendant of our guests. However, possibly by now they have got used to their surroundings and their treatment, and they may be expected to have attained the blessed state of volition, and therefore we may ask them to remain with us for the rest of the evening, on a purely voluntary footing.

I am confident that in the annals of our Association we have never had a more distinguished company of guests at our annual dinner. It would be, of course, mere impertinence on my part to endeavour to sing their praises, but I feel that it is necessary that we should express, as an Association, the honour that they have conferred upon us by coming here ; also, may I say, I feel they have paid a tribute to the *worth* of our President. (Laughter and applause.) But you would all wish me, in the first place, to express on your behalf our great pleasure in having with us to-night such a number of distinguished guests from overseas, distinguished psychiatrists, neurologists, psychologists, from sister associations and societies in a number of countries. We have here representatives from Belgium, Denmark, France, Germany, Holland. and the United States of America. Medicine knows no boundaries ; it recognizes no frontiers at all. We have a common aim. We would wish to our friends from overseas, a most pleasant and profitable stay with us. We trust that the impressions they form of our hospitals and our work —and perhaps, I may add, of ourselves—will be favourable ; and we would ask them to take back to their own societies and countries the most sincere greetings from the members of our Association. (Applause.)

The first distinguished guest is Sir Arthur Robinson. You have already had the pleasure of hearing him, and he has expressed regret that the Minister of Health is not here himself. We know that the Minister of Health has lately set all the telegraph and telephone wires buzzing and humming, both by day and by night ; we anticipate now, in the Ministry of Health, that there will be a mass reaction to continuous stimuli from that Minister of Health. We have also among our distinguished guests Sir George Schuster, Permanent Secretary to the Lord Chancellor, whose Visitors we know so well, and to whom so much correspondence is forwarded of a more or less useful type during the year.

Then I come to our especial chiefs and advisers, the Board of Control : Mr. Brock—I think that is the correct title, so soon to be changed to Sir Laurence Brock—we congratulate specially upon his honour. Some months ago I was surprised to see, in a much-read evening newspaper, the startling headline, " Old Mr. Brock wakes up ". Mr. President, Ladies and Gentlemen, I have never looked upon the Chairman of the Board of Control as either senile or somnolent, very much the reverse in fact, so it was distinctly a shock. But I read down, and I found that the article had nothing to do with the Board of Control ; it was of a most interesting nature, an article concerning hibernation. We have known for a long time that Brock fireworks go with a bang, and therefore none of us were surprised when we heard the great Report—(Laughter)—it is still reverberating throughout the country.

We have here other members of the Board of Control as our guests, old and tried friends —sorely tried at times, I am afraid, by all of us. I hasten to omit Miss Darwin from the " old " friends, but, nevertheless, she is a friend to us all. The House of Commons is represented by our friend Sir Francis Freemantle. (Hear, hear.) Upon Sir Francis, for years past, we have looked in the House of Commons as the champion of the medical profession, and we have never looked to him in vain.

With regard to the officials of the Middlesex County Council, the last speaker needed no pressure to extol, and rightly so, his own high officials in the county, but, on behalf of the Association, I express our great thanks for the hospitality they have extended. Already we have received the hospitality of the Guildhall, and we are looking forward, to-morrow and the next day, to the great pleasure of experiencing the hospitality of the same body at the great mental hospitals of the county. The Chairman of the Council has told us that Middlesex County is very small geographically, and that accounts for what is otherwise extraordinary—that they never find a spot in their own county upon which to build a mental hospital. We welcome the gratifying fact that there is such a close association between the work of the Springfield Mental Hospital and Westminster Hospital, and we are delighted to have with us eminent representatives of the medical school and the medical staff of that hospital.

I am now going to dare to disagree with Prof. Henderson in regard to his family medical

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tree. I know that psychiatry and psychological medicine have been termed in the past, somewhat disparagingly, a Cinderella. It is a picturesque name, and there is no reason why we should not accept it, but I do not accept from him that the step-sisters, the ugly sisters, are surgery and medicine. I think those ugly sisters are other forms of so-called medicine, which wild horses would not compel me to mention by name. Why not accept the name "Cinderella" for the specialty? She was a shy, unassuming lady, quietly getting on with her routine work, and doing her best all the time to adjust domestic stress and strain, and modestly awaiting the fulfilment of her destiny; and I feel that her destiny is now at hand, that psychiatry and psychological medicine taking them as one, may now, by the presence of so many distinguished guests to-night who represent general medicine, consider this dinner is the nuptial feast between the gallant, virile general medicine, and shy, timid psychiatry, and we shall all look forward to the twelve months following this union in the hope that it may be fruitful, and we shall look forward to the offspring with hope and expectation.

We have with us the President of the British Medical Association and the Medical Secretary of that Association; the President of the Royal Society of Medicine, and the President of the Society of Medical Officers of Health—all thoroughly representative of general medicine. Then we have with us the President of the Coroners' Society of England and Wales. We view that body with awe and reverence, but, at the same time, we recognize that from the members of that Society we receive much courtesy and sympathetic consideration. We have also with us the Registrar-General, but, Ladies and Gentlemen, I dare not say anything about him, because I might be using indefinite and undesirable terms. (Laughter.) Finally, I come to that great figure, Lord Macmillan, who is such a friend of all of us, and who is to respond to this toast. The fact that Lord Macmillan is an Honorary Member of our Association shows what we think of him. Lord Macmillan did our specialty the greatest service when he conducted the Royal Commission on Lunacy and Mental Disorder. We, if we had been given the choice, would not have selected anybody else for that post. During the hearing of the evidence he heard medical superintendents referred to as merely glorified hotel-keepers, and as having so many wickednesses that I think he must feel he is now sitting at meat with publicans and sinners. I think, despite the fact that Lord Macmillan, for some extraordinary reason, did not control the Commission on the Betting and Gambling Laws, that he has earned the title of "Royal Commission Agent". (Laughter.) His business motif should be—"No commission too big; all disputes amicably settled, and absolute fairness when appealed to". (Laughter.) I mean all this; I am completely serious. Lord Macmillan has been a great friend to this Association; he did us a great service when he delivered the Maudsley Lecture to us, and showed us the anatomy of our own minds; he made for us a dissection of the professional mind. That was a service which we, perhaps, needed badly. I have the greatest pleasure in proposing this toast of "Our Visitors", coupled with the name of the Right Hon. Lord Macmillan.

The Right Hon. Lord Macmillan, *P.C.*, LL.D., in responding to the toast, said: At this hour, in this temperature, and after the generous hospitality which you have, as such eminent caterers, provided for us, I rejoice that I have only to reply for the visitors, not to answer for them. (Laughter.) Indeed, even to reply for them is a heavy responsibility, because, looking round on the serried ranks of your guests, I think I have never seen so much "ribbon development"—(Laughter)—and of the most eminent and meritorious order.

Amongst the visitors whom I have to reply for, I am glad there are also some ladies. I shall not follow the ungallant example of the gentleman who quoted Dr. Johnson; rather may I refer to a little story of that prince of after-dinner speakers, Mr. Choate. On one occasion he had to propose the toast of "The Pilgrim Fathers"—naturally a congenial toast. He said: "We have been admonished to-night to bear in our hearts the Pilgrim Fathers. No doubt that is very right and proper, for they endured much and came through great hardships; but I venture to suggest, gentlemen, that to-night we should also have in our hearts the Pilgrim Mothers, for, gentlemen, not only did they endure all that the Pilgrim Fathers endured, but they also endured the Pilgrim Fathers." (Laughter and applause.) That is a sentiment which, in a mixed gathering, is assured of rapturous applause, at least from 50% of the audience.

May I thank you, Dr. Masefield, for your kindly reference to myself? It was a great privilege to be associated with your profession for a time, and I think I learned much from that association, and I also escaped certification. (Laughter.) It was a liberal education, in many ways, and it has brought with it the inevitable reward of public service, that is to say, more Commissions, and, as a result of my special experience, I was thought to be an appropriate person to be made Chairman of the Committee on Income Tax. Could there have been a more appropriate selection? If my labours in that capacity do not make me an inmate, voluntary or involuntary, of one of your delightful retreats, it will not be the fault of the Income-Tax Department of this country.

Some reference has been made to the association of the universities with your special subject. I came across a delightful association, which may be unknown to you. The President of the

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Statistical Society—one of the test words, I understand, in your profession—was delivering a very instructive address to that learned body, in the course of which he said, " Have you ever heard of the University of Dumfries ? " No one had ever heard of it. Then he said he had found it referred to in some early literature at the beginning of last century, but no further trace of this seat of learning was to be discovered. He had inquired and received the following information : A Mrs. Crichton proposed to found a University at Dumfries in or about the year 1831. But the lady changed her mind, or had it changed for her by the Lord Chancellor of that time, Lord Brougham. It was he who raised difficulties in connection with the granting of the Charter. The lady, however, laid the foundation of the Crichton Royal Institution in Dumfries instead, now a very large mental hospital. To the university professor this is a solemn thought. One recollects that when charitable bequests are diverted, the new object must have some affinity with the original scheme. True, this was a living benefactor, so the rule *cy près* might not strictly apply. However, sometimes at university committees, or when reading examination answers, I have wondered whether——but the reflection is too painful to pursue ! So there is a historical association between that famous institution and a university.

One thing only I have noticed by way of omission from your programme ; why have you not decided to have a special committee devoted to the pathology of post-prandial oratory ? I suggest that the next Maudsley Lecturer—I mean of course when another " popular " lecture is due—be exhorted to choose that topic, as it would be a most fruitful one. Think of all the symptoms : the inhibition of secretion in digestion, the nervous irritation which is induced by the anticipation, which makes the speaker such an undesirable companion to the lady who is sitting by his side, and who says, " I will leave you now ; you will be wanting to get your speech ready ". It would, perhaps, make a good topic for a young man who wanted to get an easy Ph.D. degree.

It has been to all your guests to-night a very great privilege to be here. We recognize it is magnificent work that you are doing. Mind, body and estate : we are reminded by the collect that these are the three interesting things in life. You are devoting your energies to one of these ; we lawyers are devoting ourselves to estates, with the desire that we may get for ourselves as much of them as possible. But we do honour and respect the great work which is done in both treatment and research by your Association. And your visitors' best return for the hospitality you have given to-night is to wish you further success in your great task. Many references have been made to the House of Commons to-night ; there is only one which occurs to me as apposite. There was a gentleman in that House—there *are* some, I believe—who had not taken a course in brevity at any rate ; and a Member, who had been out for about an hour, came back and found this gentleman still speaking, and he said, " Hasn't he finished yet ? " " Oh, yes," said the Member asked, " he finished about half an hour ago, but he is still speaking ". That is a distressing pathological phenomenon much exhibited, I regret to say, by after-dinner speakers. I do not propose to exhibit it myself to-night, but I shall show my knowledge of medical psychology if I gauge the feeling of this audience as being unanimously in favour of my sitting down. Therefore I thank you most cordially on behalf of the visitors and myself for your hospitality, and wish you good fortune. (Cheers.)

Dr. Robert Hutchison, F.R.C.P. (President of the Royal Society of Medicine), in proposing the toast of " The Royal Medico-Psychological Association ", said that when the nght was late and some of them at least were far from home, they would, he was sure, welcome a toast which required little in the way of speeeh to recommend it, namely, the toast of the Royal Medico-Psychological Association. It required little to commend it because it was the toast of themselves, and it did not require much eloquence to drink one's health. Secondly, it required little recommendation, because nobody less needed its health to be drunk than the Association. It was an old Society, one of the oldest of its kind, as it was approaching its hundredth birthday, but it exhibited no signs of dementia or decay. The work which the Association was doing was not for him to praise ; he would only say the proof of its disinterestedness was furnished by the fact that, next to that of His Majesty, the first toast was the toast of " Mental Health ". Were they seeking their own interests they would have had as their toast " Madness ", and would have drunk damnation to the Ministry of Health and all its works.

That evening he had heard their branch of the profession described as the " Cinderella ", and the branch of medicine which he represented described on the one hand as the wicked step-sister, and on the other hand by what was supposed to represent the prince. It was natural for him, as representing general medicine, to consider medicine as the prince, and he welcomed the rapprochement between Cinderella and, for the moment, himself. He thought the rapprochement between psychological medicine and general medicine had still not gone as far as one would wish. It was an ardent flirtation, and he would like to see it go to the length of an engagement, with a view to matrimony.

He congratulated Mr. Alderman Button on establishing psychiatric departments in the general hospitals ; he would like to see in all our hospitals a psychiatric department ; and

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general medicine, on its part, he would like to see represented more in the mental hospitals; he would like to see attached to every mental hospital a visiting physician. He hoped the Association would do more to bring together a closer union between psychological and general medicine, which was so much to be desired. It was in that hope that he asked them to drink, with him, to the health and prosperity of the Royal Medico-Psychological Association, coupled with the name of the President. (Applause.)

The PRESIDENT, in replying to the toast, said: I sincerely thank Dr. Robert Hutchison for the very kind remarks he has made about our Association. Dr. Hutchison has given us to-night some advice which I think should bear fruit. But I would tell him this: that to-day, in the modern mental hospital, we have physicians of very high standing, men who are very highly qualified, and who fortunately have taken up this branch of medicine, and we shall benefit by their advice. There was a time, in my early days, when it was the indifferent student who went into this kind of work. But all that kind of thing has now been changed, and it has become a distinct branch of medicine, where the best qualified and the keenest physicians are beginning to take their part. This is all to the good.

On behalf of our Association, Dr. Hutchison, I thank you for your kind words, and I hope that on some future occasion you will honour us again; there are still some physicians amongst us. (Applause.)

During the meeting, visits were paid to Springfield Mental Hospital and to Shenley Mental Hospital. At each of these members were given opportunities of inspecting the buildings and were entertained to garden parties by the kind invitation of the respective Visiting Committees and Medical Superintendents.

IRISH DIVISION.

THE SUMMER QUARTERLY MEETING of the Irish Division was held at the District Mental Hospital, Sligo, by the kind invitation of Dr. John Dunne, Medical Superintendent, on Saturday, July 20, 1935.

In the forenoon the members and guests were conducted over the Hospital and grounds by Dr. Dunne and his staff, and they noted with great interest the plans already in hand for extensive additions to the Hospital.

Later the members were kindly entertained to luncheon, and guests at the luncheon included Judge Moonan, Mr. W. A. Dixon, F.R.I.A.I., Mr. T. J. McGoldrick, Mr. McDonnell, Mr. R. F. Browne, Capt. W. Campbell, Mr. J. A. McCarthy, and Drs. McCarthy, McLoughlin, Martyn, Swan, Walsh, Moran and Harbinson. At the conclusion of the luncheon Mr. T. J. McGoldrick, Chairman of Committee of Management, extended a hearty welcome to members and guests to Sligo Mental Hospital. Dr. Mills and Dr. Deane replied.

The following members were present: Dr. John Mills, in the Chair, Drs. Stanley Blake, F. J. Deane, Kathleen Dillon, Catherine Daly, John Dunne, L. Gavin, B. F. Honan, P. J. Irwin, J. Kearney, R. R. Leeper, P. Moran, J. C. Martin, Eveleen O'Brien, Alfred Sheridan, R. Taylor, R. Thompson, Hon. Sec.

Apologies for unavoidable absence were received from Sir Jocelyn Gore Booth, Capt. Percival, and Mr. S. C. Berridge, and Drs. J. O'C. Donelan, D. L. Kelly, John FitzGerald, P. Grace, E. N. M. O'Sullivan, Alexis Fitzgerald, and many other members.

The Minutes of the previous meeting were read, approved and signed by the Chairman.

The Secretary then submitted correspondence from Miss E. M. Delany, regarding the formation of an Irish Mental Hospital Matrons' Association. Following upon a discussion it was unanimously decided to express approbation of the movement.

Dr. STANLEY BLAKE, in the absence of the Hon. Sec., Dr. John Fitzgerald, then read the report of the sub-committee appointed at the Spring Meeting to consider

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