PART III.—PSYCHOLOGICAL RETROSPECT.

English Retrospect.

Asylum Reports for 1887.

Belfast.—There is a deficiency of accommodation, especially for males. How this is to be met is still under consideration. The Lunacy Inspectors recommend an addition for at least 300 persons, and that the new building should not be erected in the grounds of the present asylum, but in the country, and be reserved for the treatment of chronic cases.

Dr. Merrick reports :—

The 627 cases given above as the total number resident includes 82 harmless and chronic cases resident in the Ballymena Workhouse.

It may be thought that such a sentence could only come from Ireland, though, to be strictly just, the grammatical error cannot be regarded as purely national.

Cheshire. Chester.—The average weekly cost is only 7s., and the charge to the unions 6s. 5d. per head. We hope that a considerable increase in the charge will be made next year. Although the asylum appears to be in excellent order, Dr. Davidson would probably be the last to maintain that it has reached perfection. Any real advance in asylum administration must cost money.

In 10 out of a total of 61 deaths phthisis pulmonalis was either the primary or secondary cause.

Cheshire. Macclesfield. Although the weekly cost was only 7s. 10d., complaint has been made by a Board of Guardians as to the excessive cost. Dr. Sheldon devotes some space in his report to this most uncalled for discontent. We most earnestly hope that he will not be intimidated by such proceedings, but will administer his asylum in a liberal and intelligent spirit, always remembering that asylum management must be progressive, and that no real advance can take place if the one idea (and it is unfortunately the chief one in this gold-worshipping country) is to do everything as cheaply as possible.

The deaths numbered 49, and of these 16 were due to phthisis pulmonalis.

Earlswood.—This great institution appears successfully to continue its good work amongst a very helpless section of the community.

Large additions to the sanitary arrangements have been made; and that they were necessary is evident from the fact that a serious outbreak of diphtheria occurred, affecting 42 males and 16 females.

Many changes occurred in the staff. These include the resignation of Dr. Cobbold, who has been succeeded by Dr. Robert Jones, a former assistant medical officer.

Kent. Barming Heath.—A male attendant was prosecuted and

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fined for stealing food provided for the patients. Concerning this occurrence Dr. Davies says:—

This case is noteworthy, as the most important witness was and is a patient here. Though hopelessly insane upon many points, upon others this man's word is, in my opinion, perfectly reliable. I gave my evidence upon this point at the local Petty Sessions, and the Magistrates being satisfied that the patient understood the nature of an oath permitted him to be sworn. But for this I do not think we could have obtained a conviction in this case.

The deaths numbered 131, and of these 17 were due to some form of phthisis.

Kent. Chartham Downs.—A detached hospital has been erected. Of it Dr. Spencer says:—

It is well suited for its purpose, being independent of the main building, and complete in itself, containing its own kitchen, detached laundry, fumigating closet, and mortuary, day-rooms and dormitories, apartments for attendants, etc. It can be divided into two distinct parts for the two sexes; it is very cheerful in position and arrangement, and, when not required for its special purpose, it is intended that it should be occupied by men engaged on the garden and farm.

Of the 73 deaths during the year 15 were due to phthisis pulmonalis.

Limerick.—During the last three years the number of admissions has gradually decreased. Dr. Courtenay directs attention to the extreme mental depression which is nowadays characteristic of so many cases of derangement, and so different from the wild excitement of former years. He also remarks on the comparatively small number of cases suffering from the grosser forms of cerebral disease in the district, if not in all parts of Ireland.

In former years a distinguished editor of this Journal used to ridicule the inelegancies and grammatical blunders to be found in the official reports of the English Commissioners. No doubt his sarcasms were in very many cases richly deserved; but what amount of ridicule can sufficiently chastise the extraordinary blunders to be found in the reports made by the Inspectors on this asylum? !!

Forty-seven deaths occurred during the year, and of these 23 were due to phthisis.

Mavisbank. Edinburgh.—The following paragraph is from Dr. Keay's report:—

Voluntary patients are not registered as lunatics. They are admitted without certificates or Sheriff's order, and can discharge themselves at any time on giving the Superintendent three days' notice. The extent to which voluntary residence has been taken advantage of is good practical evidence of comfortable quarters and liberal treatment. By this simple mode of admission many persons avail themselves of asylum treatment, in whose cases registration as lunatics would be inexpedient or disagreeable. A noteworthy case occurred last spring in that of a gentleman suffering from mental depression, who came to the institution accompanied by his wife and daughter. They were all admitted as voluntary inmates. The two ladies assisted to nurse the patient, who made a good and rapid recovery. When the family party left the asylum it was with many expressions of thankfulness. Although it is, as a general rule, of the first importance to remove the patient suffering from mental derangement early from home, and to place him in a well-ordered asylum, yet I am convinced that

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there are many cases, especially of melancholia of a mild type, occurring in men of middle-age, in which the separation from loving friends is a very severe trial, and that the assistance of such friends, if properly directed and guided, might be made a valuable aid in treatment.

Every effort seems to be made to induce the men-patients to employ themselves.

Monmouth, Brecon, and Radnor.—The estate is about to be enlarged by the purchase of 60 acres of land.

Only three of the 56 deaths during the year were due to phthisis.

Montrose Royal Asylum.—Provision is being made for an infirmary for 100 patients, quite distinct from, and to the west of the main building, and between the latter and the Physician-Superintendent's house. Through the courtesy of Dr. Howden, we shall be able to give a reduced plan of this building in the next number of the Journal.

Mullingar.—In his report Dr. Finegan says :—

I much regret that three cases died within one month of coming under treatment; two of these, however, who sank a few days after admission, might be deemed in a dying state on arrival at the asylum; and it is a grave question whether their transfer here under the circumstances was the most judicious procedure. No doubt (mens insana in corpore insano) the majority of cases sent to an institution of this kind are in feeble health, but magistrates or certifying medical men ought, when at all feasible, to draw the line of demarcation in the interest of humanity, and spare their delirious patients the additional pang of dying within the portals of a lunatic asylum.

We trust that Dr. Finegan will forgive us for pointing out that his advice to magistrates and medical men would have been much more valuable if he had strongly urged the necessity of sending cases, and especially delirious ones, in the early stage of the disease. Acute cases die, as a rule, from exhaustion largely due to want of food, and such cases, if sent in time to an asylum, are amongst the most favourable for treatment.

The staff has been increased by the appointment of five attendants, including a chief attendant, and a plumber. That is a decided step in the right direction.

An unfortunate occurrence, the birth of a child by a woman who had been three years in the asylum, shows how carefully the relation of the sexes should be guarded. Although it was sworn that at no time was the woman alone for more than ten minutes with the father of the child, we all know how much mischief can happen in that time, and it cannot be denied that proper discipline forbids the possibility of such accidents by never allowing a female patient to be left alone with one of the opposite sex. A nurse neglecting strict obedience to this rule should be instantly dismissed.

This asylum is much over-crowded, and additions and alterations are under consideration. The proposals made by the Committee seem insufficient in the circumstances.

It is very creditable to the energy of Dr. Finegan that the cause of death was verified in every case by post-mortem examination.

Murray Royal Asylum, Perth.—Dr. Urquhart is doing excellent work in erecting additional buildings for the acute cases and the sick

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of both sexes, for which, in his opinion, there exists clamant need. That this need is met by the rooms so carefully and skilfully planned by this æsthetic Physician-Superintendent, will be acknowledged by all who inspect them. At a future time we shall describe them in detail. The rooms are built on one side of the corridor only. They are heated by steam, with modern improvements, which meet the objections urged against this system.

Newcastle-upon-Tyne.—The recently built wards are now occupied. The asylum is now in telephonic communication with the city fire brigade station.

Concerning general paralysis Dr. Wickham remarks :—

> There is thus no diminution in the number of cases treated here as suffering from this disease. There is, if anything, a tendency to increase amongst women, and the cases generally speaking seem to be assuming a more violent and unmanageable form. There is perhaps no more difficult case to control than an excited general paralytic. I have been making some observations recently on a kindred subject, and I have been much struck with the readiness with which they are marked when an effort is made to hold them; and this is especially the case when the syphilitic taint may be suspected. It is difficult, however, to get the relatives to understand this.

The total deaths numbered 20, and five of these were due to phthisis.

Northampton.—A new block for idiot children is nearly completed. The estimated cost is £3,500. A detached hospital has been furnished, and is at present occupied by 25 harmless and convalescent patients.

Concerning the open-door system Mr. Greene reports :—

> Of late years, what is known as the open-door system of asylum management has been highly praised by Medical Superintendents of Scotch Asylums. It is stated that this system conduces to the contentment of the patients; that the possibility of easily getting out of the asylum does away with the wish to escape, and that it removes the last of the many forms of restraint common to a by-gone age. The system was begun very cautiously in this asylum three years ago, and since then it has been gradually extended, until at the present time all the day-rooms, except one on each side, are left unlocked by day. The escapes were fewer than in former years. Probably this is a mere coincidence, but certainly no inconvenience has resulted from the unlocked doors. There is always something prison-like in the grating noise of a key in a lock, and to banish everything prison-like from an asylum must ever be a change for the better if it can be carried out with safety. Without expecting too much from the innovation, it is reasonable to suppose that many patients, especially the more sensitive ones, dislike being locked in their sitting-rooms, even if they never complain of it; and the more the asylum can be made to resemble a home the greater will be the probability of such cases settling down and deriving benefit from the treatment.

Of the 86 deaths during the year 11 were due to phthisis.

Northampton. St. Andrew's Hospital.—The estate has been enlarged by the purchase of 40 acres. This hospital continues its benevolent work, and we are glad to find that Mr. Bayley perseveres in his endeavours to find suitable employment for patients of each sex. We only wish a larger proportion of patients were indigent.

Northumberland.—The additions to this asylum are now occupied, and are favourably reported on.

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In his report Dr. McDowall says :—

In connection with the nurses and attendants and their duties, I may mention that, adopting a plan followed by the superintendents of some other asylums, I have formed weekly classes at which I have explained in detail the special character of their work, the things they should attend to, those they should avoid, and have done my best to impress on their minds the responsibility of their work. I hope and believe that these meetings have not been fruitless, but that both men and women have profited by the advice and instruction given them. Following up this I intend to instruct them in ambulance work and a few in nursing.

In former reports, and frequently on other occasions, I have dwelt on the special trials, difficulties, and temptations of attendants, and have pointed out how some of these might be removed. I have always maintained that the first step for the amelioration of their lot is the shortening of their time on duty, the provision of means of rational and innocent amusement, and increased attention to their comfort. From time to time some minor changes have been introduced here, and these have doubtless proved beneficial; but the more important matter—diminution of hours on duty—has not advanced as far as I hope to see it do. This urgent reform in asylum administration can only be carried out when public opinion has been educated up to it, and it is of infinitely more importance than all the so-called reforms contained in the proposed Lunacy Act.

We commend these remarks to the serious attention of asylum superintendents. Anyone who will devise a method by which the amount of leave accorded to attendants is increased will have introduced a most important improvement in asylum administration.

Thirty-two deaths occurred during the year, and of these nine were due to phthisis pulmonalis.

Norwich.—In their report the visitors say :—

We have always laid down as a principle that the attendants should work with the patients, and not stand over them as taskmasters.

This is as it should be, and as it is in all well-managed asylums.

This asylum is still without an assistant medical officer, but it is stated :—

In deference to the expressed wish of the Commissioners in Lunacy, your Committee have made provision whereby the Medical Superintendent is enabled to take more change and temporary rest from his onerous duties.

Thirty deaths occurred during the year, and of these only two were due to phthisis.

Nottingham (*Borough*).—A new wing is in process of building, and 20 acres of gardens have been added to the estate. The new buildings are to be ventilated and warmed by Blackman's "propellors." These are in use at Broadmoor, and are said to be successful.

No death was due to phthisis.

Nottingham (*County*).—In connection with a suicide, the Commissioners say :—

We have learnt that the actively suicidal patients, though they sleep in the supervision dormitory, are not by day placed together in the same ward, as is frequently, if not generally, done. We think this the safer practice, as the attendants of the selected ward have thereby their attention quickened, and are, when properly chosen, more careful and watchful.

Eight of the forty-eight deaths during the year were due to phthisis.

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Nottingham Lunatic Hospital.—At a cost of £350, the building has been further protected from fire by placing an 8-in. main with hydrants, etc.

The Commissioners recommend that actively suicidal patients should sleep in observation dormitories, and not in single rooms with an attendant on duty outside.

Oxford.—The kitchen and laundry arrangements have been improved, and some sanitary defects remedied.

Fifty-one deaths occurred during the year, and of these 23 were due to "disease of lungs." With much advantage the various forms of pulmonary disease might be given.

Portsmouth.—There is really nothing calling for notice in this report. Mr. Bland's contribution consists of barely four pages, and of these nearly two are occupied by tables showing the chargeability of the patients in the asylum, and the causes of death. A less instructive report it would be difficult to imagine.

Fifty patients died during the year, and in eleven the death was attributed to phthisis.

Richmond District Asylum.—Although the death-rate has been much reduced, the sanitary condition of this asylum is far from creditable. It is, therefore, satisfactory to find that Dr. Norman has obtained the consent of the Board to most extensive alterations and improvements in the drains, etc., at an estimated cost of £12,000. One hundred and twenty-three deaths occurred, and included 15 from dysentery, 3 from diarrhœa, 47 from phthisis, 2 from typhoid fever, 2 from acute tuberculosis, 1 from erysipelas. No fewer than 136 cases of dysentery were under treatment during the year.

The male side is much over-crowded, and immediate consideration must be given to the means of providing accommodation. Other subjects requiring attention are brought under the notice of the Board by Dr. Norman, who is to be commended on the manner in which he exposes the structural defects of the building.

The schools, which have been so long a distinctive feature in this asylum, have been carried on as usual during the last year. There can be no doubt of their beneficial effect, but greatly increased advantage could be obtained if industrial occupation were introduced as part of the school organization. Some trials have been made in that direction, and further developments will be attempted.

We are much pleased to learn this, for we have always been of opinion that for an incurable lunatic it is as important for his own happiness and health that he should be able to delve in the garden or even black his boots as that he should be able to enumerate all the capitals in Europe.

St. Luke's Hospital.—The drainage, which was reported to be very defective, if not actually dangerous, has been entirely reconstructed on the most modern and approved sanitary principles, at a cost of upwards of £520.

The following paragraph is from the medical report:—

In our last annual report we referred to the fact that there seemed to be a steady diminution in the number of admissions, doubtless referable to the un-

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willingness of the friends of patients, as well as their medical advisers, to assume the responsibility of executing the forms required by law before treatment can be adopted. We have to record the continuance of this unwillingness, as evinced by the still further reduction of admissions, and cannot but lament that further difficulties are contemplated in the way of prompt treatment by more stringent laws in reference to the admission of patients.

Salop and Montgomery.—We cannot conceal the opinion that the Visitors have not earned our respect by their conduct in connection with the improvement of the sanitary arrangements of this asylum. As the result of most painful experience, Mr. Field was consulted. He made certain recommendations, and his report was forwarded by the Committee to Quarter Sessions. It was referred back to the Committee with the request that the Visitors should ascertain whether the objects in view could not be obtained without so large an expenditure. "In deference to it, the Visitors decided to abandon Mr. Field's plan for the reconstruction of the drains, owing to the large estimated expenditure." This cannot be regarded otherwise than as a most foolish and damnatory admission, and the Commissioners express unqualified disapproval of the action of the Visitors.

No fewer than 260 patients are usually confined to the airing-courts. This number should be decreased, and the number of examinations after death increased.

The following paragraph occurs in Dr. Strange's report:—

Among the patients who in an asylum are non-workers there are a certain number who are willing, but are not generally to be trusted, by reason of their melancholic and suicidal tendencies, with a large gang of men. I have instituted a small party of this class, never more than six, placed under the care of a trustworthy attendant, and sent them out to work by themselves. I think the effect has been good; they are generally good workers, and certainly benefit by the occupation. I should be very glad, if the staff permitted of it, to increase the number of these small gangs, as I am sure there is no class who benefit more by employment than those suffering from melancholic or acute insanity. I need scarcely say that the selection of these patients requires great care.

The very next paragraph is a singular appendix to the above. It is as follows:—

It is a matter of congratulation, both to the Visitors and to myself, and must be so to the ratepayers, that we have been able again to reduce the rate of maintenance. In December, 1886, it was reduced from 8s. 9d. to 8s. 4d., and now from the 1st of January we have been able to make a further reduction to 8s. This is the lowest weekly cost ever attained at this asylum.

What do these paragraphs mean? Shortly, this—and we congratulate Dr. Strange on his honesty in committing to writing what many other men do but are ashamed to acknowledge—that in order to effect an economy, the staff is not sufficient to attend to the employment of patients who would be benefited thereby. Is this right? Is it even economical in the end? No; and words cannot too strongly condemn such a system. We would urge Dr. Strange at once to obtain the necessary number of attendants, so that all patients capable of employment in the open air may not be denied that form of treatment.

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Sixty-nine deaths occurred during the year; of these 12 were due to phthisis pulmonalis and one to tubercular peritonitis.

Somerset and Bath.—Several new workshops have been built; some are occupied, others nearly ready, and others are about to be begun.

Dr. Wade reports a pronounced increase in the number of general paralytics admitted. During 1887 there were 16 males (not including two doubtful cases) and three females. In the ten years previous to 1881 such admissions only averaged five per annum of both sexes, but during the last seven years they have averaged twelve.

In connection with the death of a patient from injuries sustained previous to admission, Dr. Wade makes some remarks worthy of attention. He says:—

J. S. was taken to the workhouse under the provisions of the Lunacy Acts Amendment Bill, 1885. By this Act, a constable, relieving officer, or overseer may take a lunatic without any order, under certain conditions, to a workhouse, where he may be detained for three days, before the expiration of which time the alleged lunatic must be taken before a Justice of the Peace. Such Justice of the Peace has, by the same Act, power to remand the lunatic to the workhouse for a period not exceeding fourteen days. Now the points to be observed are these: 1st, when the alleged lunatic is, under Sec. 2 of this Act, first brought to the workhouse by the constable or other officer, the Master of the Workhouse is only bound to take him in if *there is proper accommodation* for such alleged lunatic; and, 2nd, the Justice of the Peace who remands the alleged lunatic to the workhouse, under Sec. 3, is bound to satisfy himself that there is proper accommodation in that workhouse.

Now, it is not too much to say that there are outside the Bath Union not more than one or two other workhouses where such proper accommodation exists in the county of Somerset.

Clearly, then, the Act of 1885 can only be used to a very limited extent in this county. And care must be taken both by Masters of Workhouses and Justices of the Peace that lunatics are not received into or remanded to workhouses when such proper accommodation is not provided, and it is, I think, the duty of masters to refuse to admit lunatics when the conditions of the Act are not complied with.

But whether the Act should not have gone further, and compelled the Boards of Guardians to make some provision in each workhouse for the temporary detention of lunatics is another matter. Undoubtedly there is the great question of expense; but on the other hand, when it is remembered that some patients have to be brought a distance of over 60 miles to this asylum, it is most important that in each locality there should be some place where a lunatic could be detained under treatment for a few days, either in case of the patient's health being in such a state as to render removal inadvisable, or when a delay may have taken place, as must often be the case in country districts, in obtaining a Justice's order.

Eighty-five deaths occurred during the year; of these ten were due to phthisis pulmonalis and one to acute tuberculosis.

Staffordshire. Burntwood.—It is not often that we hear such views expressed as in the following sentences by Dr. Spence, and we heartily agree with them:—

The admissions from the workhouses of helpless chronic cases requiring much special care were not few. Complaint is frequently made that asylums should be hampered with these cases, but, for my part, I rejoice to think that the means placed at our disposal for nursing and caring for such poor and afflicted sufferers are happily and beneficially employed in lightening the burden of their troubles,

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and soothing their last days in a world that has not, as a rule, proved a very tender stepmother to many of the class from which these patients are usually derived.

Concerning suicidal patients, we do not see the subject as he does. Whether a patient should be considered suicidal is one of the most responsible subjects to be decided by an asylum medical officer; but it should be decided on its merits, and no one can object to extreme caution being exercised in such a case, but caution should not degenerate into cowardice.

How we are to provide facilities for the continuous day and night supervision of patients with suicidal tendencies is becoming a matter of serious consideration, owing to the number of those who are returned by the Relieving Officers as disposed to self-destruction, the foundation for the statement being in many cases merely a desire on the part of the union official to cover himself in case of any casualty occurring. That this is the only ascertainable ground for attributing suicidal tendencies to many of our patients is frequently found to be the case when we come to make close inquiry into the previous history of our admissions from those who are in a position to know all the facts relating to them. Once suicidal always suicidal seems to be a necessary rule as long as a patient remains in an asylum, if one desires to avoid the hackling usually administered when—as will occasionally happen—a successful attempt at suicide is made by possibly one of the most unlikely of the branded individuals.

There is much truth in Dr. Spence's remarks as to the reported number of recoveries.

> One cannot help feeling that perhaps too much has been made of the number of patients said to be cured of their insanity. When the men and women discharged from asylums as recovered are followed to their homes, and their subsequent career carefully noted, it is, unfortunately, too often found to be the case that relapses take place, not sufficient, perhaps, to render confinement necessary, but enough to incapacitate the individual from satisfactorily pursuing the occupation to which he was formerly accustomed. That this occurs more frequently than the statistical tables (which are so abundant and so misleading) would indicate cannot be denied by anyone who takes the trouble to inquire diligently into the matter; and although it may at first sight be a very sad and disheartening view to take of the life-work of those engaged in caring for the insane and feeble-minded, we must
>
> "Be content, in work,
> To do the thing we can, and not presume
> To fret because it's little."

Fifty-seven patients died during the year; in 13 cases death was due to phthisis or some tubercular affection.

Staffordshire. Stafford.—It must be a matter of much regret that Mr. Pater lived so short a time to enjoy his pension. Dr. Christie, his successor, seems to have made a successful beginning in his new sphere of work.

Only 12 were due to phthisis out of a total of 93 deaths during the year.

Suffolk.—The new accommodation provided is reported to be very good; but the asylum is again overcrowded. It is believed that the

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health of patients and attendants has suffered from want of sufficient cubic space.

In his report Mr. Eager discusses at considerable length the removal of harmless lunatics to workhouses. Concerning suicidal patients he most truly says :—

> There has been a large number of suicidal patients treated during the year, and I think we may feel well satisfied that it is finished with only one successful attempt. Indeed, the numbers actively suicidal seem to increase in this asylum year by year. A suicide so often calls down so much blame upon an asylum physician that I think he is often likely to be tempted to take less risk in the management of these cases than is for his patients' good. The suicidal patient very often has almost the normal appreciation of what is agreeable and comfortable, but has not that inward content which enables one to make the best of disagreeable surroundings. If every opportunity of self-injury is taken away from such a person, none of the occupations, amusements, or comforts of life are left, and real woes are added to his imaginary ones, whilst nothing remains for him to do but to brood over them. The asylum, therefore, where there is no *chance* for suicide, for escapes, or such like occurrences, is, I should say, scarcely to be commended.

Forty-six deaths occurred during the year, and 13 of these were due to pulmonary phthisis.

Surrey. Brookwood.— In all the cases of death, 96 in number, the cause was verified by examination. In only seven was the death attributed to phthisis.

Surrey. Cane Hill.—Sixteen cottages, to accommodate twenty married attendants and their families, have been erected, and are found a great convenience.

It has been decided to enlarge this asylum so that it may be capable of receiving 2,000 patients. Plans have been prepared. The new wards will be provided with large day-rooms ; each block may be worked as two separate wards, with not more than 75 patients in each ward.

The plans are excellent, although we deeply regret that it has been found necessary to provide such an over-grown place as this will be when the work is complete.

Dr. Moody reports that a patient having failed to report himself at the expiration of a period of absence on trial, or to send a medical certificate stating that his detention was no longer necessary, was treated as an escaped patient, and brought back to the asylum.

This may be the lawful method of dealing with a patient under the circumstances (and we notice that Dr. Moody indicates 16 and 17 Vict., c. 98, s. 79), but we think that it is unusual.

Only 10 deaths, out of a total of 104, were attributed to phthisis.

Surrey. Wandsworth.—The deaths during the year numbered 92, and of these 29 were due to "disease of lungs and bronchi." We beg to be excused when we remark that Table V., as given in this report, is a very useless return.

Sussex.—The Visitors pay a well-deserved compliment to Dr. Williams on his retirement. They point out that through his efforts the necessity of building a second asylum in the county has been averted.

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The protection of the building from fire is under serious consideration.

Ninety-seven deaths occurred during the year, and of these 19 were due to phthisis.

Warwick.—A patient who suffered from a delusion that a person in Coventry galvanized him, succeeded in reaching his father's house in that town, where he possessed himself of a revolver. The two attendants whom Dr. Sankey sent to apprehend him succeeded in doing so before the lunatic had time to attempt the murder of his supposed enemy. The attendants behaved with great bravery and determination, since they were aware that the patient had firearms. One attendant received a severe wound in the chest, but is now completely recovered.

A nurse rescued a female patient who had thrown herself into a deep pool. She has been presented with a certificate from the Royal Humane Society—a reward she most emphatically deserved.

Fifty-one deaths occurred during the year, and of these only eight were due to phthisis.

Wilts.—During the last three months of the year there have been indications that the sanitary condition of the asylum is not quite satisfactory. Five patients and four members of the staff have suffered from typhoid fever. The water is reported to be of "first-class purity," and the drains are believed to be in good order. No doubt this is very puzzling, but it may be considered certain that further search will lead to the discovery of the mischief.

The heating of the building has been much improved.

The staff has been increased by the appointment of a second assistant medical officer.

Seventy-two deaths occurred during the year; of these 14 were due to phthisis pulmonalis.

Wonford House.—Of the 155 patients treated during the year, 85 received charitable assistance. In connection with this Dr. Deas says:—

> In their report for 1886 the Committee dwelt on the fact that a most important function of the hospital was "to provide for persons of education and respectability in reduced circumstances, treatment and accommodation at moderate rates suited to their former social position." The application of the principle thus indicated has during the past year tended to limit the number of admissions, and led to the removal of some patients from the hospital. This accounts to a considerable extent for the diminution which has taken place in the numbers. I think there can be little doubt that the patients admitted at charitable rates should be drawn as far as possible from the same social strata as the patients who pay the full rates. It is on gentlefolks of limited means that the question of finding suitable asylum treatment for insane relatives presses most heavily, and for them the benefits of such an institution as this cannot be over-estimated. To extend the charitable assistance of the hospital to patients from a decidedly lower social stratum is, I think, unadvisable, both for their own sakes and for the sake of the other patients.

Worcester.—The Visitors report that they have obtained a promise from the Lord Chancellor that he will insert a clause in the Asylum

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Bill giving power to Committees of Visitors to grant to officers and servants on leaving asylums from confirmed sickness, age, or infirmity, or injury occasioned in the performance of duty, a sum of money down instead of a retiring pension.

A large addition has been made to the estate. The wards in the old building are to be heated by steam.

Dr. Cooke records a remarkable attempt at suicide by a young woman. When out with a walking party in the fields, in charge of two nurses, she suddenly started off, jumping the gates and fences with such agility that she managed to outstrip the nurse following closely on her heels; entered the garden of a cottage near by, and jumped down a well some thirty feet deep, with five feet of water at the bottom. She was taken out, having fortunately sustained no injury beyond a few scratches. Up to the time of the occurrence she had been in an extremely desponding state, but from that day she began to improve, and was at the date of writing convalescent.

(To be continued).

PART IV.—NOTES AND NEWS.

THE MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

The forty-seventh Annual General Meeting of the Medico-Psychological Association of Great Britain and Ireland was held in the Hall of the Royal College of Physicians, Edinburgh, on Monday, August 6th, Dr. T. S. Clouston, President, in the chair. Among the members present were Drs. Aitken, Fletcher Beach, Bower, Bramwell, Baker, C. M. Campbell, P. E. Campbell, Campbell Clark, Hearder, Ireland, Carlyle Johnstone, Jepson, Keay, Murray Lindsay, Lyle, Rooke Ley, R. Mitchell, Macpherson, Mould, T. W. McDowall, J. G. McDowall, Mackenzie, Sir Arthur Mitchell, K.C.B., Conolly Norman, Needham, A. Newington, Philipson, Patton, Rayner, J. Rutherford, R. L. Rutherford, Rogers, G. Robertson, Savage, Spence, Sibbald, Sheldon, Stocker, Hack Tuke, Turnbull, Urquhart, Whitcombe, Oscar Woods, Bywater Ward, Wiglesworth, Watson, Yellowlees, etc. Among the visitors were Professor Benedikt, Professor Grainger Stewart, the President of the Royal College of Physicians (Dr. Peel Ritchie), Drs. Lundie, Bruce Bremner, Webster, Young, Rattray Affleck, Church, Greig, Miller, Keiller, and Stearns.

Dr. NEEDHAM (the retiring President) said that his last official duty was that of asking his old and valued friend, Dr. Clouston, to replace him in the chair. Under ordinary circumstances one would express a belief that the man who occupied that position would not diminish its dignity or its honour; but he felt quite sure that in asking Dr. Clouston to take the chair he might say a great deal more, and express the conviction, not only that the new President would not diminish the honour and dignity of his office, but that his acceptance of the office would add honour and dignity to it.

Dr. CLOUSTON, on taking the chair, said that his first duty was to thank the members very heartily for the honourable position in which they had placed him. He should do his best to perform his duties to the satisfaction of the Association, and in accordance with its rules. He was quite sure that their department and their association were of growing importance in the medical profession, and they were all bound to do their utmost to advance the reputation and the usefulness of so important a branch of medicine.

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