and "Die Wacht am Rhein," he answered, "It first goes high then low, then again high," without recognising the tunes.

Dr. Bernhardt observes that this is a good instance of the word-deafness of Kussmaul or the sensorial aphasia of Wernicke. It is quite uncomplicated, the intellect appearing to be intact. No paralysis remained save a slight slowness of the right side of the face. The man's spelling was peculiar; but it was doubtful whether this was not owing to an imperfect education. Dr. Bernhardt is inclined to believe that there is an embolic softening of the left hemisphere, probably of the first and perhaps of the second temporal convolutions.

The Professor gives a shorter account of another case of a similar kind.

Dr. N. Weiss ("Centralblatt für Nervenheilkunde," 31 August, 1882) gives the lesions found in the brain of an old man who died after having had for three months aphasia, word-deafness, and paralysis of the right side. There was degeneration and softening of the parts supplied by the artery of the Sylvian fissure on the left side. As in all cases of word-deafness there was a lesion of the first temporal gyrus.

---

2. *English Retrospect.*

Asylum Reports.

(Concluded from p. 304.)

Eastern Counties Asylum for Idiots, Essex Hall, Colchester.—This institution, which is still under the assiduous care of Mr. Millard, is being enlarged, the demand for admission being much greater than the accommodation could supply. Provision is, or is about to be, made for about 50 more cases; a new steam laundry; a gymnastic and recreation hall combined; bath rooms, lavatories and water-closets; the outlay being estimated at about £12,000. At the last annual meeting a powerful appeal was made for funds. Dr. Bateman stated that there are in the Eastern Counties 3,000 idiots, of whom at least 1,000 needed the benefit of such an asylum, whereas there was accommodation for only 99, and he justly describes the inmates of the cottages where an idiot dwells as doomed to constant association with the most repulsive features of humanity, and obliged to breathe an atmosphere of moral miasma. No doubt the appeal of the committee will be responded to, but doubtless the efforts required to obtain subscriptions and donations involve much labour and anxiety.

Kent County Asylum, Barming Heath, Maidstone.—Dr. Pritchard Davies has, we are glad to observe, adopted the proposed tables of the Association. Although unable to go back so far as the opening of the asylum, he has given the figures from 1875. The result as regards recoveries is as follows:—Persons admitted during eight years,

https://doi.org/10.1192/bjp.29.127.432 Published online by Cambridge University Press

2,412 ; persons discharged recovered, 910, being 37·72 per cent. of persons admitted. Of these 302, or one-third, relapsed, leaving 608 persons still sane. Further of the relapsed persons 249 were again discharged well, leaving the net recoveries 35·53 of the number of persons admitted. The statistics of recovery are in this way brought out in a most interesting manner. Had the calculation been made in the old-fashioned way on cases instead of persons the number corresponding to 37·72 would have been 40·5.

The crowding of the asylum with patients who might have been just as well in workhouses is referred to. It appears that the Commissioners in their last report commented upon the unreasonable use of wards. Dr. Davies observes—I am convinced that, apart from over-crowding, these patients exercise an injurious influence upon those whose disorders are of an acute and consequently more curable nature. I think, therefore, that in the long run it would be cheaper for the Guardians to provide suitable accommodation for them in the workhouses, and forego the present advantage of the grant in aid when in an asylum. It is, however, almost impossible to get this view adopted in the right quarters, so that the only hope left is that the Government will, at no distant date, re-consider this grant, and dispose of it in a less objectionable way. If a change of some sort is not made soon, the question of providing increased asylum accommodation will once more force itself upon your notice, as despite every care upon my part we are unduly full."

Two striking cases of "homicidal impulse" are chronicled, a male attendant having in each instance been murderously assaulted. "Each patient had been previously regarded as harmless, and the attacks were absolutely unprovoked, and must have been the result of that sudden homicidal impulse we but too frequently meet with in asylums ; and which, from the impossibility of predicting its advent, renders every person of unsound mind a source of danger."

We are very glad to observe that Dr. Davies is pushing the employment of patients to the greatest extent compatible with the strength and health of the patients. The latest addition to the workshops is a carpenter's shop. There is great force in the remarks made in this connection. "Worshops where the artizans are not attendants may be necessary for some purposes, but an asylum cannot be regarded as satisfactory if no provision is made for the suitable employment of all classes of patients, under the constant supervision of responsible attendants. Where such workshops do not exist it must of necessity happen that some patients, who are skilled workmen, are unable to follow their handicrafts on account of the undue risk that would be run in sending them to shops where only ordinary mechanics can give them but intermittent care. Already skilled painters, basket makers, and carpenters, not formerly employed here at their trades, have been set to congenial work in these new shops, and derived great benefit from the change. Not only are shops of this kind valuable for the

https://doi.org/10.1192/bjp.29.127.432 Published online by Cambridge University Press

class of patients I have just named, but they serve another purpose, viz., that of schools, where patients can be taught some interesting work, and be roused out of the misery of an idle life. I hope to develope this system more in the future, as I regard work, and more particularly skilled work, as one of the most potent remedial agents we possess."

Great improvements have evidently been made in this asylum from time to time, and there are several points in the treatment of the patients which render the results of more than usual interest. We referred in the last number of the Journal to the fact that the withdrawal of beer from the dietary had proved satisfactory, as in not a few other asylums, and the practice of the asylum as regards narcotics is already well known.

Wilts.—The sanitary condition of this asylum is evidently much improved. Only three slight cases of typhoid occurred during the year, and no erysipelas. It is believed that this beneficial change is due to improved ventilation of the wards and ventilation of the sewers.

Worcester.—The drainage of this asylum calls for, and is about to receive, immediate attention.

Dr. Cooke presented a very full report to his Committee on beer. He recommends its almost total abolition, and the substitution of milk. His report is thorough and sensible.

Yorkshire, East Riding.—It is very satisfactory to find that walking parties beyond the asylum grounds have become a matter of routine, and that all but six male and two female patients are able to take part in them.

Yorkshire, North Riding.—Dr. Hingston reports favourably of the dormitories constructed for the use of epileptic and suicidal patients. He has introduced an electric clock, by which an unerring record of the visits paid by the night attendants is obtained. The management of the asylum is evidently carried out vigorously.

Yorkshire, West Riding.—Important alterations have been made in the drainage, with markedly good results.

No fewer than 97 patients were discharged "relieved," being handed over to the care of their friends or the Union authorities. In spite of this the asylum remains full.

Dr. Major reports that he has sought to diminish, as far as practicable, the number of patients confined to the airing courts for exercise, and now the patients from the female refractory wards have, equally with others, daily recreation in the walks skirting the estate, to their decided advantage, and with the result of securing comparative tranquillity in the airing court.

Yorkshire, South.—This asylum continues to fill up rapidly. Additional accommodation is to be provided for 150 patients, and the Visitors report that a third asylum is necessary, and must be built without delay. This is a dismal conclusion, and suggests unpleasant reflections. Surely we are on the wrong track.

https://doi.org/10.1192/bjp.29.127.432 Published online by Cambridge University Press

York Retreat.—Amongst the improvements effected during the year not the least important was the warming by hot water of all the rooms on the male side. There has been no lack of zeal or expenditure in the attempt to introduce every comfort and improvement into the institution. Dr. Baker states that the Turkish bath has been in daily use for nearly five years, "with very satisfactory results."

York Lunatic Hospital (*Bootham*).—A very decided difference of opinion has for long existed between the Governors of this hospital and the Commissioners relative to the presence of paupers in the asylum. Whatever may be the legal aspects of the question, it is quite certain that for the success of the institution as a middle-class asylum the pauper should not be there. Witness the Murray Royal Asylum, where the pauper patients were removed with marked benefit. We know that the late Mr. Gill warmly approved of the protests of the Commissioners. The asylum seems fated to get into hot water, notwithstanding the pleasing contrast it presents in its old age to that by which it was characterised in the days of its youth.

PART IV.—NOTES AND NEWS.

THE ANNUAL GENERAL MEETING OF THE MEDICO-PSYCHOLOGICAL ASSOCIATION, 1883.

The annual meeting of the Medico-Psychological Association was held on Friday, 27th July, at the Royal College of Physicians, London, Dr. Orange presiding. The following members and visitors were present:—Drs. C. Aldridge, Alliott, D. Bower, W. Burman, R. Boyd, Blandford, Fletcher Beach, Bucknill, J. Crichton Browne, E. Maziere Courtenay, D. Cassidy, P. E. Campbell, J. A. Campbell, A. C. Clark, F. P. Davies, English, J. T. Hingston, W. W. Ireland, O. Jepson, J. Murray Lindsay, Thos. Lyle, H. J. Manning, Donald Mackintosh, G. Mickley, W. J. Mickle, John Manley, M. D. Macleod, G. W. Mould, H. H. Newington, A. Newington, D. M. M'Cullough, T. W. McDowall, W. Orange, G. H. Pedler, H. T. Pringle, H. Rayner, A. H. Stocker, H. Sutherland, G. H. Savage, Arthur Strange, Edward Swain, J. Beveridge Spence, George Thompson, E. Toller, D. Hack Tuke, C. Molesworth Tuke, John A. Wallis, W. E. R. Wood, A. Law Wade, Francis J. Wright, J. F. Wright, Lionel A. Weatherly, E. S. Willett, H. Winslow, T. Outterson Wood, D. Yellowlees, &c. Also, Dr. Nugent, of Dublin.

Dr. ORANGE, in taking the chair, thanked the Association for the honour they had done him in selecting him to be their President, and assured them that he would discharge the duties of the office to the best of his ability. He was sorry to be obliged to communicate to the Association as the first business that the President for the year that had just expired, Dr. Gairdner, would be unable to be present. In a letter he had received from Dr. Gairdner that gentleman said "You will remember that when it was agreed to hold the Annual Meeting in July, I felt obliged to intimate to the Secretary, Dr. Rayner, that it would be extremely difficult, if not impossible, for me to be present on account of the arrangements connected with our graduation. After due consideration, it was held that my duty in occupying the chair being merely formal, it would not in any way interfere with the business of the meeting were I to be absent. I have therefore only to request that the Chairman, whoever he may be, who shall

https://doi.org/10.1192/bjp.29.127.432 Published online by Cambridge University Press