commendable, but in order to direct public attention to the serviceable functions which are being performed by the institution.

Some Irish District Asylums.

Down District.—Dr. Nolan notes that influenza has been very virulent, causing many deaths through an insidious form of pneumonia. Phthisis, on the other hand, is a decreasing factor, thanks to the vigorous steps that have been taken for some years in combating its spread. The same success has attended prophylactic measures devised against colitis, which was a great scourge at one time. Dr. Nolan maintains that in the area a lessened occurrence of tuberculosis means less lunacy, so intimate is the connection of the two diseases in his view. The following remarks on the inspection of asylum laundries appear to be appropriate:

The Asylum Laundry has also been inspected by H.M. Inspector of Laundries. This inspection is necessitated by the extension to asylum laundries of the recent Factories and Workshop Act. While it is, of course, desirable that even more than the usual mechanical safeguards should be in use in asylum laundries, it must be obvious that the general hygienic considerations in an asylum laundry should not require lay inspection, inasmuch as the employment of the patients is regulated with a view to their medical treatment and not for profit.

With a maintenance rate of £22 11*s*. per annum there must be some skill required to justify the comments of the visiting Commissioner.

In this Asylum, certainly due care appears to be taken that the men's clothing and their persons generally are properly looked after. This refers not only to the patients who are able to look after themselves, but also to the helpless and demented. Amongst the women, efforts are made to minister to the natural pride in their personal appearance, and so to maintain habits of self-respect.

Special clothing is supplied for wear on Sundays to both male and female patients, thereby maintaining the customs of their early home life.

In the dining-hall the behaviour of both sexes was excellent. Both men and women entered and took their seats at their respective tables without confusion, and left the hall in proper order. The service of the meal was conducted with due regard to decency and comfort. The dinner was excellent in quality, and appeared sufficient in quantity, and the provisions which I saw could not be found fault with.

Limerick District.—With the exception of heredity, which was found in nearly one quarter of the admissions, fright and nervous shock supply the greatest amount of causation, being returned in eighteen (six male, twelve female) cases out of 113 admissions. This is quite an unusual proportion. Intemperance was found in only ten cases, all male. Active mania accounted for more than two thirds of the admissions, active melancholia accounting for nearly all the rest. In fact only three chronic cases were admitted. General paralysis was entirely absent.

For many years past I have repeatedly drawn attention to the fact that insane prisoners are sent in from the Limerick prison although not belonging to the Asylum District. Act 38 and 39 Vic., Cap. 67, Sec. 10 entails that persons "from and after the expiration of sentence must be regarded and treated in all respects as if admitted to the Asylum as ordinary cases." The local gaol being the prison for the Counties of Clare and North Tipperary, lunatics from these counties committed here, become, on expiration of sentence, chargeable to the City of Limerick. Also, lunatics from these districts "found incapable of pleading" at Assizes are committed. No doubt the cost of maintenance of the latter class is paid for by

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the Executive, but the accommodation required for the Asylum District is thus encroached on. In January last a strong resolution was passed by the Committee calling on other asylums similarly circumstanced to take action in the matter. A copy of the resolution was sent to the affected asylums, the local M.P.'s and the Irish Party. I would again strongly urge on the Committee the necessity of seeking redress from this injustice.

Report of the Inspector-General of the Insane, New South Wales, for the Year 1906.

Dr. Eric Sinclair reports the number of insane under cognisance as 5,525 on December 31st, 1906. These were mostly provided for in the hospitals of the State, but a few were in licensed houses or South Australian hospitals. The increase during the year was 248, while the average annual increase for twenty years was 131. The variation in these numbers from year to year is difficult to explain. The proportion of insane to the general population was 1 to 277. Twenty-four were reported as arrivals from other places to permit of recovery of cost of maintenance. The recovery-rate was 38·11 *per cent.*, while the death-rate was 7·51 *per cent.* There were sixty cases of general paralysis, which is stated to have increased out of proportion to the increase of population. Phthisis caused sixty-one deaths, although the patients have been treated by separation in the open air. It is indicated that suitable buildings for the tuberculous should be erected in the hospitals for the insane.

Dr. Sinclair reports that further provision is being made for non-certifiable patients within the grounds of the Reception House at Darlinghurst. He hopes that the general hospitals of Sydney will, in time, admit such cases to their wards. It is interesting to observe that the Metropolitan Reception House, long ago established by the late Dr. Norton Manning, has fully justified its maintenance, whereas the house for the smaller district of Newcastle, however useful, is necessarily expensive in management. Dr. Sinclair deprecates the detention of these cases in gaols. The scientific work of the department has made progress and good results have been obtained.

The annual cost of the insane has somewhat increased, but the rate per head has been lessened, the weekly charge, deducting collections, having been 8*s.* 8½*d.*

Report on the Hospital for the Insane, South Australia, for the Year 1907.

Dr. Clelland reports on the progress of the Parkside Asylum, which contained private, pauper and criminal patients to the number of 1,019 on December 31st last. That represents an increase of twenty-five during the year. Twelve years have elapsed since the total number was 900, contrasted with four or five years previously required for a similar increase. Dr. Clelland believes that the latent insanity in the community is not increasing, but aged and infirm cases arrive in greater proportion than formerly. The percentage of recoveries reached the satisfactory figure of 47·8 *per cent.*, while the deaths represented 8·5 *per cent.*

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