his friends might be communicated with and he might be taken away. The forty-eight hours' detention was simply to protect the man himself or the community from a possible murder. He impressed upon the House the great importance of giving everyone a chance who was attacked, as any of them might be at any time, with incipient mental disorder to get well. The only alternative, as the law at present stood, was that any person suffering from incipient mental disorder must go into a lunatic asylum. A rich person could fit up his house as a private lunatic asylum, with nurses and doctors, but the poor could not do that. They had no alternative but to be certified and put in an asylum. In the case of a person who was certified as a lunatic there was the very greatest difficulty in getting employment again in any capacity, and the object of this clause was to try and first of all cure insanity in the earlier stages so as to prevent it becoming incurable, and to prevent the stigma of lunacy falling on persons who had unfortunately been attacked with incipient mental disorder. He impressed upon the House the great importance of passing this reform, which would be of enormous benefit to the community.

Dr. ADDISON said that though this question did not apply only to war cases, during the war this method was used particularly for the treatment of these mental disorders, and the evidence became overwhelming as to the necessity for encouraging this class of treatment. There was the greatest necessity for these men not being labelled lunatics. With regard to the forty-eight hours' notice, that was the maximum time detention might be made, except in the cases mentioned by Dr. Raw, and the regulations provided for in Paragraph 4 of the clause, which had to be laid on the table of the House and be approved by the House, would set down the conditions clearly.—Major HAMILTON: Could not the right honourable gentleman insert some such words as these: "if fit to leave, or, if not so fit, if he delivers forty-eight hours' notice"?—Dr. ADDISON said he would give that suggestion careful consideration.

On a division, the motion to leave out clause 8 was negatived by 88 votes to 24.

Col. L. WILSON moved an amendment enabling anyone in the institutions for the treatment of incipient mental disorder to come out at any time on giving notice in writing, except that where a person, in the opinion of the superintendent, or other person aforesaid, was not in a fit state to leave he might be detained for a period not exceeding forty-eight hours from the date of the notice.—The amendment was agreed to.

Major ENTWISTLE moved a new subsection to provide that, except in cases of homicidal mania, no person should be certified as a lunatic under the Lunacy Acts. 1890 to 1911, while detained in any institution, home, or house under the clause, He said it was important that there should be no suspicion that these homes were an easy way to get into a lunatic asylum. This safeguard was the most important that could be inserted in the Bill.—Mr. RAWLINSON seconded.—The amendment was rejected on a division by 81 votes to 23.

HOUSE OF LORDS.

December 14th: Ministry of Health Bill.—Lord STRACHIE moved the rejection of the Bill. After a commendably brief discussion, the second reading was rejected by 57 votes to 41.

EDUCATIONAL NOTES.

Maudsley Hospital.—Part II of the second course for a diploma in psychological medicine, as announced in our last issue, will commence in January, 1921. The syllabus is as follows:

Six Lectures on the Pathology of Mental Diseases, including Brain Syphilis, its Symptomatology and Treatment. By Sir Frederick Mott, K.B.E., M.D., LL.D., F.R.S., F.R C.P. On Mondays at 2.30 p.m., commencing on January 3rd, 1921. Disordered function with no changes in the brain, the psychoses and psychoneuroses, *e.g.*, epilepsy, neurasthenia, psychasthenia, manic-depressive insanity—mental diseases with macroscopic and microscopic changes in the brain—amentia—idiocy and imbecility—primary dementia—dementia præcox—secondary dementia—injury—tumours—abscess—meningitis—lymphatic infection—syphilitic brain disease—parenchymatous syphilis—general paralysis and tabes dorsalis—arterio-

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sclerosis—arteritis—hæmorrhage and softening—alcoholic dementia—lead encephalitis—deficiency diseases—chronic insanity and epilepsy.

Eight Lectures on the Psychoneuroses. By Bernard Hart, M.D., Lecturer on Mental Diseases, University College Hospital. On Mondays at 5 p.m., commencing on January 3rd, 1921. Nature, causation and relationships of the psychoneuroses—classification of the psycho-neuroses—historical review of the subject—hysteria—psychasthenia, anxiety, compulsion neurosis, etc.—general principles of treatment—relationships of the various schools of treatment—treatment by suggestion, persuasion, and the various analytical methods.

Eight Lectures on the Practical Aspect of Mental Deficiency. By F. C. Shrubsall, M.D., F.R.C.P. On Wednesdays at 2.30 p.m., commencing on January 5th, 1921. The concept of mental deficiency—classification, causation and morbid anatomy of mental deficiency—moral deficiency—methods of testing mental capacity—differential diagnosis—the laws of mental deficiency in relation to ascertainment and treatment—the principles of treatment and training.

Six Lectures on Crime and Insanity. By W. C. Sullivan, M.D., Medical Superintendent, Broadmoor Asylum. On Wednesdays at 4.30 p.m., commencing on January 5th, 1921. Definition of crime—biological and sociological factors in different forms of criminality—theories of punishment—concept of responsibility—evolution of ideas as to criminal responsibility of the insane—crime in particular forms of mental disorder—crime in relation to epilepsy—mental deficiency and crime—moral imbecility—the relation of alcoholism to crime and to insanity—social and individual causes of alcoholism—prophylaxis of alcoholism—characteristics of alcoholic crime.

Twelve Clinical Demonstrations in Neurology. By Sir Frederick Mott, K.B.E., M.D., LL.D., F.R.S., F.R.C.P., and F. Golla, M.D., F.R.C.P., Physician, St. George's Hospital. On Thursdays at 2.30 p.m., commencing on January 6th, 1921. The first six demonstrations will be given by Dr. Golla at the Hospital for Paralysis and Epilepsy, Maida Vale. An announcement will be made later regarding the six clinical demonstrations by Sir Frederick Mott.

Ten Lectures or Demonstrations on Differential Diagnosis and Treatment of Mental Disorders: Legal Relationships of Insanity, by C. Hubert Bond, D.Sc., M.D., F.R.C.P. On Fridays at 2.30 p.m., commencing on January 14th, 1921. (Demonstrations at Hanwell or Claybury on February 4th, February 18th and March 4th.)

Eight Lectures on the Symptoms of Mental Disease. By E. Mapother, M.D., M.R.C.P., F.R.C.S. On the following Fridays at 4.30 p.m.: January 7th, 14th, 21st and 28th, February 11th and 25th, March 11th and 18th.

If sufficient applicants are forthcoming, Part I of the Third Course of Lectures and Demonstrations will be commenced in April.

Will all intending applicants please communicate as soon as possible with The Director, Pathological Laboratory, Maudsley Hospital, Denmark Hill, S.E. 5.

Tavistock Clinic for Functional Nerve Cases.—Two courses of lectures are announced.

A course of five lectures on Mental Deficiency will be given by Dr. W. A. Potts, M.A., M.D., at 5.15 p.m., on Mondays, beginning January 17th, 1921.

General Introduction: Nature of mental deficiency, causation, pathology—classification of the various forms and grades, and clinical types—sociological aspects: work-houses, reformatories, prisons, rescue homes, etc.—diagnosis—mental tests—certification under the Mental Deficiency Act (1913) and the Elementary Education Acts (Defective and Epileptic Children, 1899 and 1914), and other means of treatment.

A course of five lectures on Analytical Psychology will be given by Dr. Maurice Nicoll, B.A., M.B., at 5.15 p.m. on Mondays, beginning February 21st, 1921.

The nature of the present conflict over the significance of the unconscious and its bearing on the future of analytical treatment—symbolism of the infantile orientation (the first psychological orientation)—symbolisms of rebirth in dreams—the intermediary stages between the first and second psychological orientations—symbolism of the "soul" orientation (the beginning of the second psychological orientation, and the movement away from the mother)—definitions of that psychological function which appears in the unconscious and can be termed

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soul or *anima*—suggestions on the prospective or synthetic significance of Freud's *Irma* dream, as distinguished from its reductive interpretation—the importance of the manifest content.

Fees for each course—medical practitioners, £2 2s., medical students, £1 1s. Owing to limited accommodation it is particularly requested that tickets for the course be taken in advance from Miss A. O. Trotter, 18, Eaton Place, S.W. 1.

THE INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS.

THE first number of this journal has recently been published, with Dr. Ernest Jones, President of the International Psycho-Analytical Association, as editor. The journal will rank equally with the *International Zeitschrift für ärztliche Psycho-analyse* as the official organ of the Association. The journal is to be devoted to psycho-analysis and kindred studies, but its scope is to extend beyond the clinical sphere, and will include the application of psycho-analysis to literature, education, mythology, philology, sociology and anthropology. The aims and purpose of the journal are indicated in an introductory editorial article, and it is made clear that its policy is the development and maintenance of the concepts of Freudian psychology, as distinct from "those disruptive and reactionary tendencies which necessarily accompany psycho-analysis."

Dr. Ernest Jones contributes a sympathetic obituary notice of Dr. James Jackson Putnam, the American neurologist, who, in his later years, was largely responsible for the development of the principles of the Freudian school in his own country. The most noteworthy contribution is that by Prof. Freud, a reprint of which is included in the present number of the *Journal of Mental Science*. Mr. Flugel writes an article on "The Character and Married Life of Henry VIII," and concludes his study by emphasising the value of the application of psycho-analytic theories for the understanding of historical personalities. Dr. Douglas Bryan furnishes an elementary didactic article on "Freud's Pyschology," and it is proposed that each number shall contain a contribution of this kind. Dr. Stanford Read writes a review of the English and American literature during the last six years bearing upon psycho-analysis.

The journal is to be issued quarterly, and the subscription per volume is £1 10s.

UNCERTIFIABLE MENTAL CASES.

"HOMES OF RECOVERY."

A MEMORIAL signed by 104 Members of Parliament has been forwarded to the Minister of Health urging the provision of hostels or "homes of recovery" for uncertifiable mental cases, to be run by local authorities on a purely hospital footing and be kept wholly apart from any connection with the Lunacy Board or lunacy administration, so that these early cases may not be deterred from entering them voluntarily. The memorial adds: "We would urge the primary importance of dealing with the early and most curable stage of mental instability in a way which shall dissociate it from confirmed or dangerous insanity, and afford a reasonable prospect of speedy recovery under the appropriate influence of exhilarating and hopeful surroundings, combined with interesting and congenial forms of occupation. The immediate provision of such homes or hostels necessitates no proposal for change in legislation, since borough councils are already empowered by the Public Health Act, 1875, to run such hospitals (free from detention and without any claim for profit), and an extension of these powers to other county councils could be readily obtained. The inmates of such hostels would be controlled during their stay by the rules of the place, but be free to leave on giving a specified notice. Under no circumstances except those of extreme urgency should any inmate be certified while in a hostel; the patient's friends must be summoned to remove him first, and certification effected (if necessary) after his departure by an independent doctor. No form of detention by irregular means must be countenanced, so that the hostels may not come to be regarded as in any sense 'half-way houses' to licensed or public mental hospitals.

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