furnish copies of this revised classification to all the members, and to put the question on the agenda for discussion at the Spring Meeting.

Dr. MORAN then opened a discussion on the training of personnel for the higher posts on the nursing staffs of mental hospitals. He stressed the importance, in his opinion, of a mental training prior to a general training for mental nurses, and that mental nursing could only be learned from below upwards and not from above downwards. He also stressed the necessity of giving facilities and encouragement to selected mental nurses to obtain general training, so that a supply of the right type of candidate would be provided for the higher executive posts.

The subject was discussed in detail by many of the members present, and very varying opinions were expressed. At the conclusion of the discussion the following two resolutions were drawn up by Dr. MORAN, put to the meeting, and adopted :

(*a*) " That facilities be provided in our mental hospitals for general nurses to get mental training, and that selected members of our mental nursing staffs be provided with facilities for getting general training."

(*b*) " That in selecting persons for executive posts in mental hospitals due regard should be paid to the previous record and performance of candidates in the service."

The Secretary was directed to send copies of the first resolution to the Local Government Department and Mental Hospital Committees, and copies of the second resolution to the Local Government Department and Local Appointments Commissioners.

The meeting accepted with pleasure an invitation from Dr. W. N. Eustace to hold the Spring Meeting at Hampstead and Highfield, Glasnevin, Dublin, at a date to be arranged later.

Dr. C. B. MOLONY, Assistant Medical Officer, Limerick Mental Hospital, then read a most interesting communication on **" Some of the Administrative, Nursing and Research Problems Created by the Extensions to the Irish Mental Hospitals ".**

Dr. MOLONY described in detail the many problems to which the extensive additions to the Irish mental hospitals were now giving rise. He discussed in detail the problems of staffing, supervision, cooking, lay-out of grounds, upkeep, etc. Dr. Molony's paper gave rise to a lengthy discussion, to which Drs. GARDNER, FITZGERALD, SHERIDAN, CASSIN, LEEPER, LOTHIAN, DUNNE and GRACE contributed. Dr. MOLONY replied to the many points raised by the speakers.

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## MIDLAND MENTAL PATHOLOGICAL SOCIETY.

The Midland Mental Pathological Society held its Fifth General Meeting in the Birmingham University on Thursday, October 1. Mr. F. A. R. Stammers, F.R.C.S., B.Sc., M.B., Ch.M., gave an address on " Intra-cranial Surgery ", illustrated by charts, X-ray photographs and a number of cases. The cases also successfully illustrated his own method of rib-grafting into large skull deficiencies. He remarked upon the uselessness of waiting for the classical signs of brain tumour (vomiting, headache and papilloedema), which really indicated impending death, emphasizing the importance of earlier diagnosis.

Sir Gilbert Barling, Bart., C.B., C.B.E., F.R.C.S., then gave an interesting account of his own pioneer work in brain surgery. He showed a large brain tumour successfully removed over forty years ago, and a tumour containing pieces of shrapnel which, even after three years, were surrounded by beads of pus. He also demonstrated a case he had successfully operated upon for brain tumour twenty-six years previously.

There was an appreciative audience of 25 members and 9 visitors.

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THE Sixth General Meeting of the Midland Mental Pathological Society was held in the Anatomy Theatre of the Birmingham University on Thursday, March 18, Sir Gilbert Barling, Bart., *C.B.*, *C.B.E.*, F.R.C.S., President, in the Chair.

Prof. Sir ARTHUR J. HALL, M.D., Hon. D.Sc., F.R.C.P., gave a lecture on "**Some Features of Chronic Epidemic Encephalitis (Lethargica)**". This was illustrated by many lantern-slides and a cinematograph demonstration of the characteristic poise, the gait, the kinesia paradoxia, and the lid movements associated with efforts to overcome ocular gyric crises.

Dr. STANLEY BARNES, in proposing a vote of thanks, remarked on his association with Sir Arthur and his special study of the disease.

Dr. B. H. SHAW seconded the vote, which was carried with enthusiasm.

Dr. J. H. MALLOY contributed to the discussion, and Sir ARTHUR HALL replied in respect to the relationship of the disease to dementia præcox, suicide and influenza.

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## RESEARCH AND CLINICAL COMMITTEE.

### STATISTICAL SERVICE.

At the last meeting of the Research and Clinical Committee the Hon. Secretary reported that he and Dr. Rees Thomas had had correspondence with Dr. A. Bradford Hill, of the London School of Hygiene and Tropical Medicine, in the matter of obtaining the services of a statistician for members of the Association; that Dr. Hill had replied that he (or another member of his staff) would be willing to advise in the matter of statistics of all papers submitted, and agreeing to the suggestion that it be left to him (Dr. Hill) in each case to state his fee, as the amount of work involved on each paper would vary.

This service is now available to members.

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## OBITUARY.

### DAVID MACKAY CASSIDY.

BY the death of Dr. D. M. Cassidy our branch of medicine has lost its senior member and our profession a distinguished colleague.

A dignified and outstanding personality he had long been the Nestor of the Lancashire Mental Hospitals Board.

Educated abroad and at Edinburgh University he began his medical career as Assistant Medical Officer at the Inverness Asylum. At a very early age he was promoted to be Deputy Medical Superintendent at Broadmoor, and about the age of thirty was appointed Medical Superintendent of the County Asylum, Lancaster—a post which he held for fifty years. He retired at the age of eighty and died in his ninetieth year. This longevity was to some extent hereditary, for his father attained the same great age.

Dr. Cassidy belonged to the age of asylum autocrats. He was an autocrat, but with a keen sense of justice, and he was tolerant and kind. He certainly imposed his authority, but it was not vexatious and never resented by reasonable men.

Lancaster is the oldest county asylum in Lancashire, and as old as any in the country. Before its erection the insane had been housed with the prisoners in the Castle; and in 1816, when they were transferred to their new place of refuge, they were accompanied by their straps and chains and trappings of restraint. But the revolving chair and ducking pond were left behind.

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