of general paralysis, but it was because of this element of variation that they had had some of their discrepancies in the past. Supposing these cases were met with clinically, giving a clinical picture of general paralysis, by obtaining the Wassermann reaction, one could establish on the one hand their affinity with the larger or syphilitic group, or, on the other, with the smaller or arterio-sclerotic group. One case at Wakefield was diagnosed as general paralysis, but the Wassermann was negative, and in a little while the condition cleared up, and the patient was discharged as cured. The probable effective agent in that case, he understood, was alcohol, and yet it was possible at one time for the case to simulate general paralysis. Therefore he felt that the conception with regard to these cases which Dr. Robinson had brought forward was very important, and he wished to add, on behalf of both of them, that if any member would like to have pathological tests made on a particular case, or the Wassermann done for them, he himself would be glad to assist them, or, if they would send sections of the brain, Dr. Robinson would examine them and say into which group the case fell. It was by such investigations that they would arrive at fuller knowledge on this important subject.

Dr. H. DEVINE said that this work was really very valuable, because so very recent. One saw the coincidence of two important facts—namely, that in cases where one had a positive Wassermann reaction one was able to discover spirochætes in the brain. This seemed to prove the syphilitic origin of general paralysis absolutely.

Dr. GRAEME DICKSON said that he had had under his care recently three cases of general paralysis clinically diagnosed as such. Two of the patients were still alive, and the other was dead. These cases amply bore out the experience of the two speakers who had addressed them that afternoon. The two cases now alive were the most typical cases clinically of general paralysis he had encountered, and in both of them the Wassermann reaction was positive. In the other case, now dead, the Wassermann reaction was negative, and the examination after death in this case negatived syphilis, whereas arterio-sclerosis was present. He had had these three cases within about eight months, and they bore out in a small way the experiences which had been brought before them from Wakefield.

Dr. SOUTAR hoped that investigation would be continued to determine if further experience bore out the claim which had been made in the paper just read. It was surprising to find that an identical clinical picture was produced by two such dissimilar conditions as syphilis and non-syphilitic arterio-sclerosis—not an uncommon disease. There was room for further inquiry as to the nature and distribution of the arterio-sclerosis which was said to produce signs and symptoms which are clinically identical with those of general paralysis.

Occasional Notes.

Sir Thomas Barlow and "After-Care."

At the Annual Meeting of the After-Care Association, held at the Royal College of Physicians on February 23rd, those present had the pleasure of hearing one whose broad-mindedness, wide outlook, large-heartedness, and genial presence have earned not only the respect of the whole profession, but also of all those who are interested in the cause of the poor and afflicted. He presided with dignity and distinction over the greatest of all International Congresses of Medicine, and spoke with feeling and sympathy at the last annual dinner of the Medico-Psychological Association.

It is not surprising, therefore, to find Sir Thomas taking

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the chair at a meeting of that most worthy of all charities—the After-Care Association. The good work of this Association, as would be expected, appealed to him, and he was not backward in giving his support and approbation.

He said that in the development of modern charities one comes to realise that in all large charitable associations and schemes the State, and municipality, and old endowed charities can do a great deal, but they cannot do everything, and it seemed to him that the more these social problems are studied, so far from favouring what some people are talking about—namely, putting everything on the State, which was a mischievous and shallow proposal—thoughtful people who have to face these problems see that an enormous amount of real charity must inevitably be done by enlightened voluntary effort, not acting sporadically by itself, but joining itself, so to speak, to the State, municipal, and old endowed methods, and supplementing their efforts. Of these there was not one, Sir Thomas ventured to think, that deserved more careful consideration than the After-Care Association, an institution which is the only one of its kind in the United Kingdom.

It seemed to him that the condition of the insane had not been fairly visualised by the average charitable person, who often ejaculated some words of sympathy, but as a rule seemed to want to get the insane person out of sight as quickly as possible, and who did not reflect enough upon what happened to these poor people when they leave the asylums. It was important to try to disabuse the minds of many charitable people of the strong prejudice that sooner or later these unfortunate people will relapse, and that it was throwing money away to spend anything on them, beyond preserving them from penury. So far from this being the case, we know that by properly thought-out means we can do a great deal, when the acute stages proper for asylum treatment are over, by changes of scenes and surroundings, and suggestions of new lines of activity outside.

Sir Thomas put the case none too strongly, for it is deplorable to feel the general reluctance there is to giving work and encouragement to those whose misfortune it is to have broken down mentally and subsequently recovered. In most cases the world was hard and unkind to them before; it is doubly the case when faced for the second time.

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Some excuse can be made for the charitably disposed standing on one side during the time the patients are under care and treatment, (though they little know how they could help in the patients' recovery by a little attention to the loved ones at home); in fact there is little or no call for their efforts, and their interference might be harmful. But when the poor people are again thrown on the world the case is different, and their lot should appeal acutely to those who combine affluence and altruistic instincts.

Even those whose insanity was apparently due to their own fault cry aloud for brotherly help and encouragement, though the means adopted to assist them might be different to the others.

Great care is taken by the medical superintendents in recommending cases, so that there is no waste of the energies and means of the Association.

We hope that much good will be the outcome of Sir Thomas Barlow's sympathetic words.

Part II.—Reviews.

The Sixty-seventh Report of the Commissioners in Lunacy for England and Wales, 1912.

As in previous years, we purpose giving first a digest of the statistical information contained in this report, which is never an easy task, for the Commissioners cannot be charged with verbosity or a redundancy of language.

Regarding the certified insane persons under care during 1912, the total number was 138,377, an increase of 2,716, which was 275 above that of the annual average for the decennium, 257 above that for the quinquennium, and a 2·0 *per cent.* increase as compared with 1911, which is practically the average during the past ten years. With the exception of the Metropolitan licensed houses, and the naval and military hospitals, there was an increase in the figures for all classes of asylums and hospitals.

The *private patients* number 11,353 (males 4,852, females 6,501), an increase of 217, or nearly 2 *per cent.* over the preceding year. In 1883, less than one-tenth of this class were in public asylums; the proportion is now one-third.

The *pauper patients* numbered 125,841 (males 58,508, females 67,333). This number is 2,441 in excess of that of last year, or 236 in excess of the mean annual increase for the last ten years.

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