CLINICAL NOTES AND CASES.

Case of Feigned Insanity. By ALEX. ROBERTSON, M.D., F.F.P.S.G., Physician to the City Parochial Asylum and Hospital, Glasgow.

In the "Journal" for October, 1881, I recorded a case of feigned insanity in a prisoner who was charged with the crime of murder. The form of mental disorder assumed in that case was acute mania; and the pourtrayment was so good that even the experienced prison officials, who are accustomed with attempts at imposture in all its varieties, were deceived by his histrionic skill. The following case differs in many of its aspects from that one, but it resembles it in respect that the prisoner ultimately confessed his imposition; though, as in the former case, not till after the distinct expression of medical opinion that he was malingering.

On the 16th October, I was asked by the Public Prosecutor (Procurator-Fiscal), in this city, to examine a man named John Roberts, in the prison, and report respecting his mental condition. I was informed that the prisoner was charged with the crime of theft by housebreaking, and that his trial was fixed for the following day at the Court of Justiciary, which was then sitting in Glasgow. In explanation of the shortness of the notice, it was said that though the authorities were aware that there had been indications of apparent insanity for a week or two, it was supposed that the apparent disorder was feigned, and it was hoped that he would give up his imposition before the day of trial arrived. The prisoner did not, however, take this anticipated step, but maintained his seeming condition, and his agent likewise intimated that it was intended to plead insanity in bar of trial; thereupon it was determined that the opinion of a medical expert should be obtained.

I was informed that the theft was committed on the 12th September, and that considerable ingenuity had been shown in its execution. Roberts was sent to jail on the 19th of the same month, after emitting a declaration of an ordinary kind before the Sheriff. On inquiry I learned that there was nothing in that statement, or in his demeanour at the time it was made, calculated to give rise to the least suspicion of his mental soundness.

Before seeing Roberts, I had first of all an interview with

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the warders who had been most with him since his admission into the prison. Their testimony was to the effect that a few days after he came under their charge he made an apparent attempt at suicide. He had put a cord round his neck in a running noose, then passed it through an iron eye in the wall of his cell, near the floor, and afterwards round his foot, by which means he could have tightened it so as to have strangled himself without difficulty, had he been so disposed. The gaoler found him with the cord round his neck, and in the position described. This officer did not, however, think it a real attempt at self-destruction, as the cord was not tight; and as, in his belief, it had been put on just before his visit, which was made at the usual time for the inspection of the prisoners.

This was the first circumstance that directed attention to his mental condition. But from this time a marked change was observable in many respects. He now obstinately refused to work, sometimes would not speak when addressed, and occasionally took very little food for some days together. Generally, however, he spoke sensibly, except that he asserted he had committed murder, and was to be tried on that charge. Now and then he would lie on the floor of his cell, staring at the ceiling intently, as if he saw someone there, or heard a voice speaking to him from above. It was said that he had not been noisy, but, on the contrary, rather quiet and gloomy, and had been cleanly and correct in person and dress.

Two other prisoners, who had occupied the same cell with him since the time of his doubtful suicidal attempt, corroborated these statements of the warders; and they further testified that occasionally he did not sleep well, and had two or three times declared that he saw people at the window of the cell, which, in their belief, must have been imaginary.

I found Roberts to be a man rather under the average height, with a stout, firmly-knit frame. I was told that he was 45 years of age. He has a head of average size, and well-formed. His expression of countenance is restless, cunning, and furtive. When I spoke to him he looked at me, though he quickly averted his eyes, and was obviously indisposed to bear a steady gaze. His replies to questions regarding his previous career and other subjects were for the most part, but not altogether, reasonable and apparently correct. When, however, reference was made to the crime for which he was in prison, he professed complete ignorance of any circumstances relating to it, and declared that he was to be tried for murder.

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It was quite true, he alleged, that he had committed murder—that he had seriously maltreated a woman with whom he cohabited, and thereafter had pushed her into the canal, where she was drowned. Though I assured him that I had positive information that this woman was alive and well, and though he thanked me for telling him so, yet in a few minutes he reverted to his statement that he would be tried for her murder; he further said that she came into his cell at night, and had even brought a razor to him, which he refused to accept. He became very pathetic in telling the story of his avowed crime, and in expressing his compunctions of conscience regarding it, so much so that even tears gathered in his eyes and trickled down his cheeks. Besides this, the leading subject on which he harped, he complained that thousands of rats came into his cell at night. There were other absurd statements of a somewhat similar kind, but these will suffice to convey an idea of their character.

It now devolved on me to decide on the facts, so far as I had been able to ascertain them. It may be mentioned that the warders were distinctly of opinion that the prisoner was feigning; but I could not find that, besides their impressions of the apparent suicidal attempt, they had any clear or definite grounds to state for their beliefs. I was also informed that Dr. Sutherland, the medical officer of the prison, held the same view; but, unfortunately, I was unable to see that gentleman. The course which I determined to take will be understood from the following report which I sent to the Fiscal after leaving the prison :—

> I hereby certify, on soul and conscience, that I have this day carefully examined John Roberts, prisoner in Duke St. Prison, with a view to determine his mental condition. My interview with him lasted upwards of an hour. It has not, however, resulted in my being able to express an opinion respecting his mental state. The case is of such a nature that it seems to me the prisoner would require to be re-examined at least on two other occasions, and, if practicable, at intervals of some days.

Notwithstanding the terms of this report, I was asked to see Roberts on the two following days, and, if possible, arrive at a conclusion regarding his alleged insanity, it being agreed to postpone his trial till about the close of the sitting of the Court. Accordingly, I had two other interviews with the prisoner, respectively on the 17th and 18th October, after which I informed the Fiscal that I was prepared to make a

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definite statement in the case. Previously, however, I was told that if I had any hesitation his trial would be postponed till the next circuit, which would be in December. This delay, I said, was not necessary. My precognition was then taken. It was to the following effect :—

I am of opinion that the prisoner is feigning insanity. The apparent indications of mental disorder shown by him are not consistent with real insanity. Thus, at one time of each of the last two interviews, he declared that he had committed murder, and was lying under that charge, that there was no hope for him, and that he was eternally lost ; while at another time he said that he had £400 in gold, that he expected to inherit from £4,000 to £5,000, and intended going to Callao in Peru, where he resided some years ago : there he would purchase an estate, keep a riding horse, and had no doubt that he would get into the best society. At the last interview, he asserted that the island of St. Helena belonged to him.

These two kinds of apparent insanity are of a totally different nature, and are not met with in real unsoundness of mind in the same person at the same time. The one implies exaltation and the other depression—states of mind that do not exist together.

Further, his memory is good with regard to many things, such as remembering, without difficulty, the names of places in Peru and Brazil, and the names of several firms in Glasgow by whom, he says, he was employed during this year ; yet at both of my last interviews with him, which were nearly as long as my first one, he declared that he had never seen me before, unless it were some months ago, though I tried him both with my hat off and on, and referred to incidents of the preceding examinations.

Such correctness of memory in relation to a variety of subjects, and extraordinary blanks in reference to others, are not met with in real insanity at his age.

Again, his expression of face and general demeanour are not consistent with either of the two types of insanity which, in my opinion, are simultaneously feigned by him. They are indicative of cunning and suspicion, but neither of exaltation nor depression.

The trial, therefore, proceeded. The plea of insanity was departed from by the prisoner's counsel, and the case went to proof of the crime of theft. This was clearly brought home to him, and the jury, without leaving the box, unanimously found him guilty. A sentence of seven years' penal servitude was passed, this being the same as one to which he had been previously subjected.

While at the bar, the panel persisted in looking to either side in an odd sort of way, without giving apparent heed to the evidence ; maintaining, in fact, to the close, the semblance

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of insanity. However, since the trial, I have been informed by Dr. Sutherland that he has fully confessed his imposition, admitting that he had been feigning mental unsoundness.

The question arises: What could be the prisoner's object in pretending to be insane? It is certainly by no means easy in many cases to discover the motive for exceptional forms of crime or imposture, but in this case it does not seem difficult to find. He had, undoubtedly, good reason, in view of his previous career, to apprehend, what actually occurred, that he would receive a severe sentence. It might well be also that, as the knowledge of the comforts of asylum life, with its general amenities, is now wide-spread through all ranks of the community, Roberts, being aware of it, might prefer that form of confinement, with all its drawbacks, to the more rigorous discipline of the prison. And it might also readily strike him that, though committed to an asylum, his confinement in it need not be a protracted one, if after maintaining his deceit for such a period as would allay suspicion, he should seem to his guardians to have become gradually restored to reason.

Case of Acute Loss of Memory. By Dr. GEO. H. SAVAGE.

In describing the accompanying case, it will be seen that the loss of memory has been more sudden and more extreme than generally happens. This case suggests the difficult question as to whether loss of memory is to be considered as unsoundness of mind. Legally, one has no doubt but that persons who have extreme losses of memory would be considered as unfit to transact business. In noticing the development of the higher nervous organisms, one has to place memory as the great builder of nerve power. The mere fact that impressions are received goes for little in the construction of a mind, but the fact that these impressions can be stored and compared, points to the commencement of a highly-organised power. If, then, we meet with cases in which the perceptions remain, but the storage is wanting, the patient must be looked upon in very much the same way as the undeveloped. Those of us who are used to mix much with the insane, are aware of the persistence of memory in the majority of persons suffering from ordinary insanities, but we are also used to cases in which the memory is affected in various ways and in various degrees, so that in

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