PART III.—QUARTERLY REPORT ON THE PROGRESS OF PSYCHOLOGICAL MEDICINE.

I.—*Foreign Psychological Medicine.*

By J. T. Arlidge, A.B. and M.B. Lond., M.R.C.P. Lond., &c.

Etudes Pratiques sur les Maladies Nerveuses et Mentales, accompagnées de Tableaux Statistiques suivies du Rapport à M. le Sénateur Préfet de la Seine sur les Aliénés traités dans les Asiles de Bicêtre et de la Salpêtrière. Par le Dr. H. Girard-de-Cailleux. —Such is the title of the recently published work by Dr. Girard, the Inspector-General of Asylums of the Department of the Seine. It conveys the results of twenty years' experience and observation in his capacity of medical superintendent of the Auxerre asylum, to which he has given a European fame by his management and skill, and is supplemented by his admirable report on the present state of the Salpêtrière and Bicêtre, analysed already by us in our number for April, 1863.

M. Girard's observations are presented in the form of numerous tables, accompanied by brief notes and general comments. The tables present a wonderful array of statistical facts, collected and arranged with the greatest care and accuracy, and would prove of singular utility if studied in connection and compared with similar tables compiled from the medical history of our British asylums. We shall, however, restrict ourselves to noting the principal deductions arrived at by the author concerning most of the chief questions arising in the etiology, history, and pathology of insanity.

His first tables are constructed to show the movements—the admissions, discharges, deaths, and residue—in each year, from 1841 to 1857 inclusive. On 31st December, 1840, there were 161 inmates in the asylum, and in the course of the following 17 years 1345 patients, viz., 702 males and 643 females, were admitted, 478 died, 331 were cured, 169 discharged improved, and 158 sent out from various causes. Hence, on the 1st of January, 1858, the residue had increased to 370.

Upon analysing the tables the fact comes out that the number of indigent insane males present in the asylum has continued almost unchanged, whilst that of the females of the same class has increased from 64 to 100, or nearly two fifths, and this notwithstanding that the number of the latter admitted has been less than that of the former. The explanation of this occurrence is furnished by the circumstance of the mortality of the males being much the higher, so

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that of 787 men 268 have died, whilst of 719 women 210 only have died, or 1 in 2·90 of the former sex, and 1 in 3·40 of the latter.

Another result seen is, that the relative proportion of pensioners to indigent cases has considerably augmented, viz., from 20 to 92. This affords a subject of congratulation to M. Girard, as indicative of the prudence of the communes contributing to the asylum, in limiting gratuitous admission to cases which are dangerous and susceptible of cure or of improvement, and to such inoffensive incurables as cannot, from their poverty, be maintained as pensioners by their families. To practise this limitation is, says the writer, to strengthen and maintain the bonds of family and of society, an inference he proceeds to illustrate.

Deducting 159 patients belonging to the department of the Seine, the admissions into the Auxerre asylum have averaged 69·76 annually, consisting of 38 cases of indigent patients, of 29 pensioners, and of rather more than 2 temporarily received (*passagers*).

Of 1506 patients treated in the asylum, 502 suffered with mania, 364 with melancholia, 192 with simple dementia, 103 with paralytic dementia, 101 with epileptic mania, 98 with monomania, 28 with epileptic dementia, 19 with epileptic idiocy, and 99 were idiots.

With reference to sex, mania occurred equally in the two sexes, as nearly did monomania also. Idiocy was present in 52 men and in 47 women; simple dementia in 104 males, and in only 88 females; epileptic mania in 60 of the former, and 41 of the latter sex; and epileptic dementia in 20 and 8 respectively. The greatest contrast, however, prevailed with respect to paralytic dementia, which existed in 80 men, and in only 23 women. Indeed, this malady existed in one ninth of all the male lunatics admitted. On the other hand, melancholia was more rife among females, in the proportion of 206 to 158.

The following tables presented are interesting, as exhibiting the influence of proximity of an asylum on the numbers admitted from various localities, a circumstance some years ago noticed by the English Lunacy Commissioners. The conclusion is, that though the indigent insane are by the regulations in force transferred to the asylum of the department to which they belong, yet the proportion so sent is in direct relation to the facilities offered for their removal; the more distant the communes and villages, and the more difficult the journey to the asylum, so much the fewer are the patients sent, regard being had, at the same time, to the populations concerned.

Another fact we find confirmed is, that the number of admissions is in direct proportion to the density of a population. This some would explain by the greater degree of civilisation of urban than of rural populations, an interpretation which can only be admitted when civilisation is treated as synonymous with an agglomeration of people necessarily subjected to the influence of excitement and of

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passions called forth by the operations of trade, by interest in public affairs, and by mutual intercourse, and to injurious hygienic conditions entailed by town life. But the fact is in a great measure explicable from the more active and extended public beneficence of towns, from the circumstance that the same class of mentally disordered persons is more dangerous and obnoxious in towns than in the country; that the relations between the public authorities are more close and operative, and that thereby the transfer of a lunatic to the asylum is facilitated, an event further favoured by the ready means of communication enjoyed by towns.

Readmissions on account of relapse have occurred in the proportion of one fifth of the whole number admitted, and have been more numerous among the indigent patients than among the pensioners.

The relative proportion to their population of patients sent from the several cantons in the department is very striking, on account of its great variation. Thus in that of Auxerre the admissions have equalled 1 to 2187 of its inhabitants, whilst in that of Serignes they were only 1 to 21,604, and in that of Cerisiers, 1 to 20,572 inhabitants. M. Girard cannot explain this great difference; but, thinking that the nature and products of the soil might have something to do with it, he has prepared a table, from which it appears that in alluvial soils the ratio of admissions to population has been the highest (1 in 4671), and that where lias forms the subsoil the proportion is lowest (1 in 17,496). In our opinion this table of the geological characters of the several divisions of the department proves very little; the more material considerations concerned are, on which subsoil is the densest population found, and on which stands the town most conveniently situated with regard to access to the asylum. Another element in the inquiry, as suggested by the author, would be relative to the existence of families in certain localities, among whom insanity is hereditary and transmitted.

On the etiology of insanity very elaborate tables are set forth. With respect to the inquiry as to the influence of the several occupations, the relative number of each occupation admitted to the whole number of persons of that occupation in the general population, is rightly taken into account. In the table so prepared workers in metal exhibit the highest ratio (1 in 242 of those so occupied), and next to them soldiers and sailors (1 in 708). To account for workers in metal being so frequently the victims of insanity, M. Girard has recourse to the idea of Parent-Duchâtelet, that metals exercise a poisonous and destructive influence on the animal economy, increased by the usual habits of intemperance indulged in by those who work in them. There may possibly be some truth in this hypothesis, but in calculating the proportion of patients furnished by any trade, the smallness of the number concerned plays a very prominent part in the result arrived at. Thus, for example, if there were only 20 persons

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engaged in the same trade, and in the course of 17 years 4 of them were admitted into a lunatic asylum, we could not accept this as indicative of the normal ratio in which insanity prevailed in that trade. The value of the result would differ materially from that accruing from the fact detailed, that of 87,737 farm labourers 130 became victims of insanity within the same period of time (17 years). The smaller the number of individuals entering into the computation, the greater will be the error in the relative proportion calculated from it, especially in questions of vital statistics, where so many influences are at work, and should be rightly appreciated and allowed for.

Lawyers occupy the next position in the descending scale of proclivity to mental disorder after soldiers and sailors, and after them come workers in wood and those engaged in building. Then follow professors, scientific and literary men, and ecclesiastics; dealers in food and drinks, shopmen, manufacturers, merchants, and bankers. Next stand the members of the medical profession and pharmaciens, and below these range master-workmen, agricultural labourers, and farmers; but to no one occupation does any particular form of insanity appear to be especially attached.

In estimating the influence of age on the production of insanity, M. Girard very justly indicates the proportion of the population of the department living at the different ages of those admitted into the asylum; and, having these data, he finds that among 1227 lunatics, 632 men and 595 women, insanity occurred most frequently between the 40th and 45th year, and next in order between the 30th and 35th year; the next periods after these in order are, 25 to 30, 35 to 40, 45 to 50, 20 to 25, 60 to 70, 50 to 55, 80 and upwards, 60 to 65, 70 to 75, 75 to 80, 12 to 20, 55 to 60, and lastly 12 and under. By losing sight of this necessary element in the calculation, viz., the relative number of individuals of the same ages existing in the general population from which those admitted are derived, and looking only at the crude number of admissions, the conclusion would be that most instances of insanity occurred between the 25th and 30th year, inasmuch as the number entering the asylum at that age was the largest.

Referring to a longer epoch in life, the table teaches us that insanity is most prevalent between the 20th and 50th years; that is during the period when the greatest mental activity is demanded, and the passions and emotions are in full exercise.

The table to exhibit the prevailing variety of mental disorder at different ages, shows that mania and melancholia occur especially between 25 and 30; monomania between 40 and 45; simple dementia between 70 and 80; and paralytic dementia between 70 and 75. Taking, however, the crude number afflicted with this last-named malady, without regard to other considerations, its victims between 40 and 45 are nearly double those between 70 and 75.

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The table presenting the relations subsisting between insanity and the civil condition of those suffering from it, confirms previous conclusions that the unmarried suffer more than the married and widowed. Thus, the first-named furnished 1 admission to every 2169 inhabitants, whilst the widowed produced 1 to every 4572, and the married only 1 to every 7049. Children under puberty were as 1 to 19,744. Married insane men were more numerous than married women so afflicted.

The influence of a higher social position and property is, with regard to the production of insanity, unfavorable. It is calculated that only one fourth of the population of France is in the possession of sufficient means for comfort or enjoyment, and yet that fourth part furnishes the largest relative proportion of lunatics. Esquirol also noted this preponderance of insanity among the wealthier classes.

It is an equally curious circumstance that education is also associated with a predominance of mental disorder; a result, however, due rather to the manner and purpose to which it is applied than to education considered as simply an accomplishment or acquisition.

In estimating the influence of the seasons on the production of insanity, various contingent conditions must be borne in mind, such as convenience and the readiness and facilities for removal to an asylum. The proclivity appears to coincide with the natural sequence of the seasons,—spring, summer, autumn and winter. May produced most cases, and after it in order, June, July, September, April, October, March, December, January, February and November. June, May and December developed most mania; December, April and November most monomania; and May, June, April, July and August most melancholia.

The tables showing the effects of barometric pressure and of thermometric degrees upon admissions, though prepared at a great expenditure of trouble, are inconclusive in regard to any particular feature. Of the equally painstaking tables setting forth the prevailing crops produced in different districts, the direction of the winds, and the effects of the elevation of localities, we cannot assign to the conclusions any great value; the co-ordinate, more potent, modifying circumstances being so numerous and so difficult of exclusion in a valuation of those less tangible influences.

The relation between the form of delirium and the natural character of patients has been much discussed, and in Fodéré's opinion the former represents nothing more than an exaggerated state of the latter. On the contrary, Esquirol and others regarded perversion of the character to be correlative with mental disorder. On this point M. Girard has made 419 observations, the correctness of which he vouches for, whence it appears that mania is equally common with the gay and the morose, that monomania falls to the lot of the gay, and melancholia to that of those disposed to sadness, and lastly that

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dementia, both simple and paralytic, happens alike with both descriptions of character. The general deduction therefore is, that the form of insanity manifested consists at one time in an exaggeration, and at another in a perversion of the natural character, and is determined by the changes which take place in the nervous system.

The influence of temperaments is next discussed, and the inferences drawn are, that the sanguine and nervo-sanguine predispose particularly to mania, and in a lesser degree to monomania, to melancholia and to simple and paralytic dementia; that the lymphatic and lymphatico-sanguine coincide with idiocy; that the lymphatic and nervo-lymphatic create, in a certain measure, a predisposition to melancholia, and that the bilious and bilio-nervous operate in the same direction.

M. Girard honestly admits that these conclusions require to be taken with many allowances; still there is no doubt a certain harmony between the native character and the temperament (two conditions indeed not readily distinguishable) of individuals and the form of the delirium their diseased minds take on.

Of 1506 patients admitted, hallucinations were found in nearly one third; hearing being the sense most frequently their seat, then vision, touch, taste and smell, in the order enumerated. Hallucinations of hearing occurred in nearly one half the cases of mania, in one third those of monomania, in one half of those of melancholia, and in one seventh those of dementia, simple and paralytic. The like occurred in two instances out of 100 where idiocy and mania were combined; in 12 of 13 cases of epilepsy with mania, and in 12 of 28 in which this malady was united with dementia. With respect to epileptic delirium, M. Girard rightly remarks that its characters are such as frequently to render it impossible to obtain an answer from its victims, and to substantiate the existence of hallucinations which may fairly be presumed to be present even in an intense degree; and not only is this so, but also the paroxysm of epileptic mania is itself short; these probable examples of hallucination consequently do not figure in the table.

Illusions were not noted in the same order of frequency as hallucinations; the senses being affected in the following relative sequence:—taste, smell, sight, hearing and touch. Irresistible impulses occur in the subjoined order of frequency, viz., in idiocy, monomania, melancholia, mania, in simple and paralytic dementia, and in epileptic mania.

Among 182 females admitted between the ages of 12 and 55, and in whom menstruation was proceeding, this function was regular in 84.

The majority of recoveries took place in the course of the first year of attack, and principally between the sixth and the ninth

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months. Thus, of 331 admitted in the period of 17 years, 264 occurred during the first year, 39 during the second, 9 during the third, 10 during the fourth, and only 9 in all subsequent years.

A similar rule obtains with regard to deaths, which are most numerous in the first year after admission, and progressively decrease as the cases become chronic. For instance, of the 478 deaths in the 17 years, 266 occurred in the first year after admission, and chiefly in the course of the first three months of that year. They are, moreover, tolerably frequent in the second and third year, and afterwards sensibly decline in number. Hence many lunatics attain a good old age. Of 478 patients at Auxerre, 98 were above 60 years old; and of all the forms of insanity, mania seems most prone to prolong itself, excepting idiocy, which extends throughout life. Dementia comes next after mania, then monomania, and certain very rare cases of epilepsy complicated with dementia, afterwards melancholia, and last of all paralytic dementia. Excluding general paralysis and epilepsy, insanity appears a more lasting disease among women than men. This greater longevity of insane females, coupled with the lesser ratio of recoveries among them, explains their predominance in the population of the asylum.

The duration of insanity is so much the less, the nearer to puberty the malady shows itself; in other words, its duration is in direct ratio with the age at which it makes its appearance.

The recoveries in 17 years amounted to 331 of 1506 patients admitted, being 1 in 4·50; the admissions including chronic, and, in other respects, incurable cases. But, by deducting from the 1506 admissions, 99 idiots, 148 epileptics, and 295 cases of simple and paralytic dementia, the proportion of cures is elevated to 1 in 3·20.

The influence of the seasons on recoveries appears so far indicated that it may be asserted that the end of autumn is favorable to the cure of mania and melancholia.

Among the causes of death in the several forms of mental disorder, softening of the brain occupies the foremost place. Of 603 causes, often multiple, noted in 478 deaths, this softening happened in 110; next in order was marasmus or nervous exhaustion (in 88); then cerebral or meningeal apoplexy and cerebral congestion (in 63); then convulsions and epileptic seizures (in 58); afterwards enteritis, colitis or diarrhœa (in 45); next encephalitis, meningitis or hydrocephalus (in 29), and phthisis in the same rank (in 29); then cholera (in 27); gangrene (in 21); pleurisy and pneumonia (in 16); typhoid fever (in 15); organic diseases of the heart (in 12), and so forth in decreasing numbers.

The author remarks on the occurrence of cerebral softening in every form of insanity—after this has existed a longer or shorter time—instead of being, as often presumed, the special lesion of

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paralytic dementia; and he states that his experience proves that insanity may prevail under the most varied forms, but especially as mania and dementia, and terminate by softening, without affording at its commencement any certain signs of such a termination.

Seclusion is practised at Auxerre, as M. Girard writes, only with patients left at liberty, but with whom life in common with the other inmates in the asylum is impossible. For the purposes of seclusion, five single rooms are provided for patients of each sex, each room possessing its own court or garden in its rear, overlooking the country, and opening in front upon a corridor in which the experiment of mingling their inmates together may at any time be essayed. No restraint is put upon the patients, and to each one an attendant is assigned. The group of single rooms for each sex constitutes, so to speak, a small establishment separate and detached from the other sections of the asylum, and furnished with its baths and its own warming apparatus. The purpose of this arrangement is to remove the excited patient from the observation, noise and contact of other like inmates, and to bring him into relation only with a quiet, intelligent and kind attendant devoted to his service.

The amount of seclusion thus carried out has been equivalent to the constant occupation, in a population of 400, of about five single rooms.

Passing by some tables we come to the important chapter on the pathological anatomy of insanity. The first group of morbid conditions noticed are diseases of the heart, among which hypertrophy was noticed 16 times in 45 cases of mania, or in more than a third of them. He would attribute this circumstance to the disturbance and modifications of the circulation determined by the maniacal state, and which by frequent recurrence finally induce organic changes in the central organ of circulation. To the operation of a similar agency—the effects of emotion, he would refer also the frequency of the same cardiac lesion in melancholia, in which he found it occur 8 times in 21 cases.

He has, however, in the next place to record the existence of hypertrophy in 8 of 32 cases of simple dementia,—a condition in which (except as a sequel of mania or of melancholia, and expressive of their past influence), the operation of mental excitement and emotion cannot be predicated. On the other hand, he encountered only one instance of hypertrophy of the heart in 6 cases of monomania, whilst 7 examples of cardiac lesion were found in 27 autopsies of patients dead from paralytic dementia. Further, in epileptic mania the occurrence of hypertrophy is in a still higher ratio than in simple mania, being 8 times in 20 cases, whilst in idiocy it sinks to 3 instances in 12.

This frequency of cardiac disease in mental disorders must be regarded as a well established fact, but the hypothesis M. Girard

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would advance to explain it, is, in our opinion, certainly deficient.

Among the several concomitant lesions of insanity, phthisis holds a foremost place. M. Girard finds it more rife in melancholia than in any other form of mental disorder; for example, it was present in 6 of 21 cases of melancholia, and only in 10 of the 160 remaining cases of all other forms of insanity.

Coming now to alterations of the cranium and its contents, we learn that in 50 autopsies of mania, in 25 of which the cranium was attentively examined, the bones were found thin and eburnated in 3 cases; thickened and eburnated in 5; simply thinner than normal in 7, and thicker in 3; with simple eburnation in 1; deformed in a marked degree in 2, and, lastly, normal in appearance in 4. It was also found to happen that the cranium is thin and eburnated in chronic cases of considerable age; and that thickening and eburnation are also coincident with chronic mental disorder. A simple decrease of thickness occurs where there is shrinking of the brain and of its sulci.

In 4 of 6 cases of monomania thickening with eburnation was met with. In 14 autopsies out of 22 sufferers from melancholia, the cranium was normal in 7; thin with eburnation in 2; thin only in 1; eburnated only in 1; thickened and eburnated in 1; thickened simply in 1, and deformed in 1. Similar increased or decreased states of thickness are still more common among the victims of dementia, and little less so among epileptics.

Alterations in the membranes of the brain are even more frequent than in the cranial bones. Of 45 autopsies after mania, the dura mater was found adherent to the cranium in 7 instances; the membranes injected in 27; thickened in 15; reduced in thickness in 6, and fibrous, cartilaginous, or ossified at points in 3. Intra-arachnoid effusion occurred in 14, in 1 of which it was milky, and in another purulent. The membranes adhered to the cerebral substance in 14. An increased thickening in general coincides with long-lasting insanity; and in a less degree the same conclusion holds true where the membranes are reduced in thickness.

It would carry us beyond the scope of our task to proceed further with an analysis of what is in fact an analysis of the copious tables exhibiting the post-mortem changes observed in M. Girard's cases; we will therefore conclude by a brief comment he makes upon the subject in general. At the outset of our reflections we are struck, says M. Girard, with the fact that all the morbid states of the brain, although most varied at their origin, may lead to the same pathological results as seen after death. Yet we cannot admit the conclusion this would suggest, that there are no special alterations in the whole course and termination of mental disorder.

The able report on the condition of the insane in the great

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Parisian lunatic hospitals, the Bicêtre and Salpêtrière, occupies the remainder of the book under notice. As before stated, this report was fully analysed in the last volume of this Journal.

Annales Medico-Psychologiques.—After a long interval the last four numbers of this well-known journal have been forwarded to us, and now demand notice; this, however, must be briefer than we could wish, on account of the accumulation of other foreign psychological works and periodicals.

The number for May, 1863, contains the following "original memoirs":—Cérise, on Animism in Physiology and in Psychology; H. Bonnet, Retrospective Review of Mental Science; Laurent, on the Physiognomy of the Insane; Dagonet, Letter addressed to the Préfet of the Seine; Brierre de Boismont, on Institutions for the Insane in Italy.

The paper by M. Laurent, assistant-physician of the Asylum of Quatre-Mares, Rouen, is the continuation of a memoir commenced in the March number, and of which we gave a sketch in this Journal for July, 1863. His present purpose is to establish the relations existing between the modifications of the physiognomy and the several forms of mental disorder. These forms he treats of under the headings of "simple madness," "mixed madness," and "complicated madness." In the first category are included mania, melancholia, monomania, and dementia; in the second, the mixed forms, are comprised similar recognised varieties of mental disturbance, associated, however, with neuroses, *e.g.*, with epilepsy, hysteria, hypochondria, catalepsy, &c., whereby they acquire a special character, and undergo a modification in their course and psychical symptomatology; lastly, in the third, that of complicated insanity, the mental disorder is modified by the presence of paralysis, in the form of general paralysis, as a special pathological entity, or by consecutive paralysis, or by cerebral lesions, such as hæmorrhage, or by toxæmic agents, such as alcohol. The variations the physiognomy may undergo in these several forms are exceedingly numerous, though pretty constant in some of them, and hence they always constitute an important part in the descriptions of the accepted varieties of insanity. They are most carefully studied and portrayed in M. Laurent's memoir, to which we would refer the reader, since a satisfactory abstract of it could not be furnished within much narrower limits than it occupies in the author's own description.

The object of M. Dagonet's letter to the Préfet of the Seine is to suggest to that high functionary the desirability of a *concours* to determine on the erection and organisation of the proposed new asylums for the department over which he presides. The writer takes as a basis of the conditions of the *concours*, the report made by M. Girard de Cailleux, according to which the number of lunatics in the department, in March, 1860, was 4056, consisting of 1635 males

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and 2421 females. This inequality in the number of the two sexes, therefore, constitutes the first point to be borne in mind in any contemplated project. Again, of the whole number there were 800 afflicted with general paralysis; 400 idiots and imbeciles; 270 epileptic insane, and 2586 with simple insanity in its several forms. M. Dagonet would therefore suggest the erection of two special hospitals at a distance from Paris, the one for the 800 paralytics, of whom two thirds are males; the other also for 800, comprising idiots and epileptics, and therefore subdivided into two perfectly distinct sections, the larger of which would be allotted to the former class of patients, as being the more numerous. The remaining 2600 lunatics, of whom two thirds are females, M. Dagonet would accommodate in four separate asylums, two for those of the male, each to hold about 500, and two for those of the female sex, each to contain about 900 inmates. He would also include in his programme of the *concours* the scheme of a clinical hospital in the vicinity of Paris and its medical schools, and in connection with it, in Paris, a central office for the admission of patients; indeed, these two institutions were previously proposed by the late commission and have been accepted by the authorities. This central office, he thinks with M. Renaudin, might be used as a small depôt and asylum for some 70 cases, constantly renewed, and might have a chief physician attached to it as professor of psychiatry, together with an assistant to act as superintendent, and several *internes* to record the cases and their treatment. By this arrangement he would desire to facilitate observation and instruction in mental disorder, calculating that in the course of a year, 700 patients would pass under notice, exhibiting the malady in every form, and particularly in its early and curable condition, when the value of medical treatment can be fairly tried and estimated.

Italian Asylums.—M. Brierre de Boismont, who wrote an account of Italian asylums in 1830, has lately revisited Italy, and now presents a few short notes on their present condition. He remarks that progress is perceptible, but to a much less extent than in other European countries, and that a satisfactory asylum, constructed on modern principles, is wanting. The great defects of the existing asylums are their urban sites and limited area, and the deficient provision for the occupation and amusement of their inmates.

The three other numbers of the 'Annales Medico-Psychologiques' now in hand contain the following original memoirs, some of which will require notice on a future occasion. For July—Dumesnil on the essential diagnostic sign between the mental disturbance peculiar to an attack of insanity, and that which precedes the outbreak of typhoid fever; a medico-legal report by Dagonet, on a man who murdered his wife; a second by Baume, on a criminal assault committed by an imbecile; a notice of the agricultural colony of St. Luke, con-

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nected with the Pau Asylum, by Auzouy; notes on the asylums of Russia, by Paul Herzog; and a notice of the works of Aubanel, by Thore. For September, we have an introductory lecture on Comparative Psychology, by Chauvet; a paper by Brierre de Boismont, on the general and partial responsibility of the insane, and a medico-legal report on a man accused of having murdered his wife. For November, Billod has a paper on Amaurosis and the inequality of the pupils in progressive general paralysis; and there are also a medico-legal report by L'Homme, and a notice of the "medico-agricultural asylum" of Leyme.

Besides these original contributions the journal contains the usual supply of extracts from foreign journals, and reviews and notices of the meetings of the Medico-Psychological Society of Paris. In two numbers M. Dumesnil has presented his readers with an analysis of the contents of the 'Journal of Mental Science,' and in noticing Dr. Mundy's paper on the Cottage System, has found room for some smart criticism.

Archivio Italiano per le Malattie Nervose, e più particolaramente per le Alienazioni Mentali; Diretto dai Dottori Andrea Verga, Cesare Castiglioni e Serafino Biffi. Milan, 1864.—Under this title of "Italian Archives of Nervous Maladies, and especially of Mental Derangement," we have to welcome the first number of the first Italian journal, separately published as such, specially devoted to psychological medicine. It is edited by three well-known physicians, Dr. Verga, director of the Great General Hospital of Milan; Dr. Castiglioni, medical superintendent of the Asylum of Senavra, at Milan; and Dr. Biffi, medical director of the private asylum of St. Celsus, near Milan. Under the management of these three able physicians we may anticipate a successful and useful career for this new periodical, and we trust it may, by means of original productions from the ablest and most scientific physicians of Italy, and by the information gathered in its pages from the contemporaneous psychological literature of other lands, give an impetus to the study of psychiatry, and especially to the improved treatment of the insane, so that Italy may in these matters be led to emulate, and ere long equal the progress attained in most other European states.

The contents of this first number are:—a preface, by Dr. Verga; two original memoirs, one "on phrenopathy considered pathologically," by Dr. Carlshivi, the other a chemico-physiological dissertation on the presence and properties of the sulpho-cyanide of potassium in the saliva, and on its relations to the poison of hydrophobia, &c., by Dr. P. Lussana; several reviews and analytical notices of other journals and works on nervous and mental disorders, and lastly, some general notes and news in reference to asylums and their officers.

Dr. Verga informs us, in his preface, that the new periodical is in

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fact the continuation of the "Psychiatric Appendix of the 'Medical Gazette' of Lombardy," first promoted by Gualandi, in 1848; yet that whilst embracing the same subjects, it appears in an improved and enlarged form, and at more frequent intervals, so as to more adequately represent and serve the department of medicine it treats, in united and regenerated Italy. Its appearance as a separate publication was also called for by the asylum physicians who attended the psychiatric section of the Scientific Congress at Siena, and the editors desire to make it the medium of communication for the superintendents of asylums in every part of Italy, and the organ of the association established among them. Encouraged by the success of the 'Appendix,' and by the ready and valuable co-operation accorded to that production, Dr. Verga anticipates and bespeaks a higher degree of success and utility for this improved issue, particularly as it addresses itself to all Italy, and solicits support from a now united people. It is with a spirit-stirring pride that he alludes to the deliverance from oppression of his country, and of its consolidation into a free and united kingdom; nor can he close his preface without a reference to Rome and Venice, declaring, on behalf of his professional colleagues, that they have not lost sight of Rome and Venetia, but are ready to lay down the pen and take up the carbine when occasion demands, an occasion they ardently long for.

The notice of the original articles and other contents we must postpone to another time.

"*On the treatment of Delirium Tremens and Mania with Tincture of Digitalis.*" By W. McCrea, M.B. London, &c.—We presented an analysis of the first portion of this interesting and practical paper in the October (1863) number, and promised to continue the abstract when the next portion was published. This second part we have lately received, as it appeared in the 'Australasian Medical and Surgical Review,' published at Melbourne, under the editorship of Mr. James Keene. The subject of the use of digitalis in delirium tremens and mania has now assumed great practical importance, several physicians having lately written upon it, among whom we may refer to our editor, Dr. Robertson, who has detailed his experience in our last number (January, 1864).

Dr. McCrea reported in his first paper 40 cases in which he had administered tincture of digitalis in half-ounce doses. In one case, Donald G— ('Journal of Mental Science,' No. xlvii, October, 1863, p. 388), it was stated that an ounce dose was given every four hours; this was, as Dr. McCrea now informs his readers in a note, a typographical error in the Australian Journal, for in no case had the dose exceeded half-an-ounce. In the second part of his paper he recounts the history of five other cases, four of them delirium tremens, and one of mania, in which the drug was given in that dose. The first

https://doi.org/10.1192/bjp.10.49.105 Published online by Cambridge University Press

case, that of a man æt. 35, the delirium was complicated with epilepsy, and death took place eight days after treatment was begun. Arachnitis, softening and shrinking of the left lobe of the cerebellum, and shrinking and induration of the spinal cord, together with drunkard's liver, were found on examination. The other cases rapidly improved and recovered, and present no special points for notice.

Dr. McCrea concludes his paper by some general remarks. Fifty-seven cases of delirium tremens were treated with half-ounce doses of tincture of digitalis, the doses varying in number from one to ten. The result was beneficial in 22 cases, or 40 per cent., and a good effect produced in 4 other cases; making 47 per cent. of the whole number. In 23 cases, or about 40 per cent. of the total number, it is doubtful whether the medicine had any beneficial effect on the disease. "Among the doubtful cases I include all those where the patient had only one dose of digitalis. In almost every case an emetic was first given, and was generally followed by purgative medicine; this treatment alone, in an equal number of cases treated before and since the digitalis mode, was sufficient to effect a cure. In these cases, under both modes of treatment, the disease was not severe; and I think it is very probable that the sound sleep and immediate recovery which followed the single dose of digitalis would have occurred had the digitalis not been given. It is certain that it did occur in an equal number of similar cases in which digitalis was not given. In the remainder of the doubtful cases, the digitalis was followed by sleep one night, whilst on the previous or following night no such effect was produced, though no apparent cause for the difference existed. Even when sleep followed, the effect on the disease was temporary, and the cure could not be said to be effected by it, other medicines, tending to reduce congestion of the liver and give tone to the digestive organs, having been administered in the intervals."

"In 8 cases, or 14 per cent. of the whole, the digitalis exerted no beneficial influence whatever. The number of doses in these cases ranged from two to eight respectively. I could not say that any bad effect resulted from its employment, but no sleep followed its exhibition, no effect was produced on the circulation, and it did not modify the disease in any way."

"I watched the cases narrowly, in order to ascertain whether there was anything in the constitutions of the patients, the state of the circulation, the duration of the disease, or the character of the symptoms, which would afford some indication as to the cases in which the medicine was likely to be efficacious or otherwise. In three of the cases, where the pulse fell considerably below the normal rate, the digitalis was undoubtedly beneficial; beyond this there was no indication. . . . . The result of my observations on the effect of digitalis in the treatment of delirium

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tremens is, on the whole, unfavorable to it. I do not think there is any danger attending its use, and some of the cases were unquestionably benefited by it; but, like many other new remedies, it has been over-estimated."

"In the treatment of *mania* by half-ounce doses of tincture of digitalis, the result was much more satisfactory. Of 20 cases treated in this way, 13, or 65 per cent., showed decided benefit. In one of these cases as many as twelve doses in fifteen days, were given; the medicine, in almost every dose, controlling the mania. In one case some benefit was derived, but not so decided in character. In 3 cases, or 15 per cent., the effect of the medicine was doubtful; in one of these two doses were given, and in two others, six doses each. In 3 cases it was administered in four, six and seven doses respectively, without any benefit whatever; one of these was cured afterwards by cold affusion to the head, and two others were sent to the asylum."

"The result of all these cases of mania convinces me that digitalis, in half-ounce doses, is a valuable remedy in controlling maniacal violence and procuring sleep."

II. *English Psychological Literature.*

We are again reluctantly compelled, by the pressure on our limited space, to defer till our next publication the Report on "English Psychological Literature," which is prepared, and which is several times referred to in our present notice of publications received. The number of interesting original contributions which it is our good fortune to publish in this number, lessen the space at our disposal for the Quarterly Report on the progress of Psychological Medicine, and have compelled alike the omission of half a sheet of Dr. Arlidge's Report on Foreign Psychological Literature, as also of the Report on English Pyschology and of the Excerpta from Asylum Reports for 1864.

III.—*Medico-Legal Cases.*

1.—*The Sequel of the Townley Case.*

(See 'Journal of Mental Science,' January, 1864. 'Quarterly Report on the Progress of Psychological Medicine.' III. 'Medico-Legal Cases.')

In the last number of the 'Journal of Mental Science' (January 1st, 1864), we related the history of this murder, and gave in full the medical evidence submitted at the trial, together with the very able

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