Dr. Oswald is trying the system of treating acute cases in bed in the open air in all weathers, under the protection of a verandah. Some cases have improved, and further trial is to be given.

The Directors desire it to be known to the medical profession that they are willing, through their physician superintendent, to favourably consider the admission for a limited period, at rates under the lowest fixed amount of £40 per annum, of cases of acute and recent mental illness occurring among a class who, while unable to pay a remunerative rate, are yet unwilling to have their friends sent to a rate-supported asylum for treatment.

*Govan District.*—Though it seems but the other day that Hawkhead was the latest asylum opened, it is now so nearly full that the District Board have to consider the provision of further accommodation. This state of things occurs, too, in spite of a consistently high recovery-rate (over 45 *per cent.* for the last four years) and a death-rate above the normal. Considering the nature of the area from which the patients are drawn the presence of general paralysis in less than 5 *per cent.* of the admissions is a light ratio, while less than 15 *per cent.* were due to alcohol.

*Inverness District.*—Dr. Keay still strenuously pushes the discharge of patients on probation with a view to their being ultimately boarded out. Of seventy-six thus treated, nine were returned to the asylum, two died, and fifty-eight have already been discharged. More than half of the patients who died were found on autopsy to be affected with tuberculosis. He has been able to follow infection by such cases into the staff itself. The committee have been fortunate enough to secure a neighbouring property of 200 acres of good arable land, with commodious farm house and ten cottages. Dr. Keay will be able to adapt the house and appurtenances for seventy to eighty patients.

### *Some Irish District Asylums.*

*Ballinasloe.*—In the unfortunate absence of Dr. Fletcher from illness, which to our great regret has terminated fatally, the last annual report of this asylum was made by Dr. Mills, who, as senior assistant medical officer of many years' standing, acted as deputy superintendent. It is matter of history now what has been the reward of his long, faithful, and capable services. We can but offer him our sympathy. Certainly if the Committee's procedure in this instance became common a deadly blow would be struck at the medical administration of the most important of all the public institutions which require supervision by medical men.

Dr. Mills points out a striking fact. At the time of the report 226 of the 1234 patients were over sixty years of age. Ten years ago of 791 patients only 45 were above sixty years. In other words, while the residence has increased by 56 *per cent.*, the patients over sixty have increased by 402 *per cent.* The reasons he assigns are the drain of young people going to America, and the intolerance in the family circle of members mentally unsound.

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The Inspector, Dr. Mazière Courtenay, reports in regard to the new hospital which has come into use:

> The effect produced on the mental condition of the patients by the improved accommodation and surrounding is most striking. Peace and quietude, contentment and good conduct prevailed throughout, and if proof were required these buildings show the marked influence which such accommodation has on the insane.

Intemperance as a cause was only assigned in 14 out of 240, but comparison with parallel figures in England is not possible, because the system of returning causes in Ireland permits only of one cause being given, which is probably the prominent one. But, of course, any given cause might occur as an adjuvant, though not recorded.

*Belfast.*—In relation to a depressed recovery ratio Dr. Graham writes:

> The recovery rate calculated on the admissions was 27·7 *per cent.*, as compared with 25·3 the preceding year. Here we seem to be stationary, or at least making poor headway. Can we put our finger on the cause of this depressing state of affairs? I unhesitatingly reply that the chief cause of the mischief is to be found in the reluctance of patients to seek medical advice at the very beginning of the malady, and the hesitancy of the relatives, even when the disorder is developed, to send their friends to an asylum.

A "villa" has been instituted here with good effect. It is just an ordinary house which has been made capable of receiving thirty patients.

It has been before noted that the old asylum is getting far too small for the patients of Antrim County and Belfast City. As long ago as 1892 authority was obtained for separation, leaving the old asylum to the city. An estate was bought and plans made, but these have had a stormy career, being prepared and submitted to one authority, then re-prepared and submitted to another. At last Dr. Graham persuaded his Committee to adopt the villa colony type of asylum. This is actually in course of erection. At present the main asylum, which has standard accommodation for 440 patients, actually contains 741. Planners differ, patients suffer.

The City of Belfast have been thoughtful enough to plant some small-pox huts within 285 yards of the asylum portion of the Purdysburn estate!

Only 14 out of over 450 males refuse to work, while none of the females are thus obstinate. The success in getting such a large proportion to employ themselves usefully reflects much credit on the spirit in which the institution is managed.

*Enniscorthy.*—Dr. Drapes writes very strongly, but not too strongly, on the alcoholic question. The following extract from his report will show what are his probable views on the licensing question:

> Drinking habits are regarded with far too great leniency by the public generally, treated as a "weakness," a harmless indulgence, to be condoned, winked at, even directly encouraged by a large section of the community, and as far as the law is concerned, as regards any deterrent effect it may have on habitual drunkards, it is a miserable failure. Those magistrates who deem it consistent with their official position to encourage and sanction the planting of public-houses broadcast over

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the country, so multiplying foci of temptation, and nurseries of insanity, seem blind to their responsibilities as citizens, and the real obligations of their office, which should be to restrict and, if possible, eradicate all injurious influences on the body politic, to adopt measures which shall curb and restrain, not encourage, licence and inordinate indulgence, and as far as in them lies to raise the moral and physical tone of the population. Were public houses, instead of being increased, reduced to a minimum a great benefit would be conferred on those unfortunates who have drinking proclivities and feeble wills, and also on ratepayers themselves, who, whatever mistakes those in authority may commit, have in the end always to "pay the piper." Let the facilities for drink be confined within their narrowest limits, and at least one potent cause of insanity is lessened; multiply them indefinitely and our asylums will get filled to overflowing.

There is yet another extract from his report which must meet with unqualified approval.

It is difficult to bring home to some minds, particularly those of very economical views, that the work of an asylum attendant is on quite a different level, and very far removed from the work of an ordinary labourer, and that a labourer's wage ought not to be ample recompense for those who have to perform the arduous, difficult, and delicate duties in connection with the care and management of the insane. A little reflection ought to convince such persons that this view is a very erroneous one. The work of an ordinary labourer is generally classed as unskilled, in contradistinction to that of an artisan, for instance, which requires a more or less protracted period of teaching, training, and experience before a man is qualified to undertake a work of the kind usually known as "skilled labour." Surely an attendant on the insane ought to stand on at least the same level, certainly on no lower level, than that of an ordinary artisan. No one can be an efficient asylum attendant until after extended training and experience.

There is no entry of general paralysis among either admission, deaths, or remainder.

*Limerick.*—Dr. O'Neill has a happier experience than Dr. Graham at Belfast in the promptitude with which patients are sent into the asylum. Fifty-two *per cent.* of his admissions came in within three months, and another 26 *per cent.* within twelve months.

During the past fourteen years I have repeatedly drawn attention to the change in the form of insanity of the admissions. Formerly the greater number suffered from mania, now the majority suffer from melancholia. Of the admissions for last year 73, or 46 *per cent.*, were suffering from this form of insanity. The physical condition of a large number of the admissions was very unfavourable, many of them being in a broken down and exhausted state.

Here, too, persistent efforts are made to get the patients to work, and the benefit to them is backed up by appreciable saving in expenses.

In an asylum with a skilled and efficient staff of tradesmen-attendants all the works in connection with the institution should be executed by house labour, and this asylum may be taken as a fair example. The entire work of the institution, including all branches of industry—masonry, carpentry, painting, engineering, baking, tailoring, shoemaking, upholstering, smithwork, and, recently, weaving—is executed by the staff, assisted by the patients. Every article of patients' clothing, male and female, as well as that of the attendants' uniforms, is made in the house. The weaving, which was started in January, 1903, has proved most satisfactory; nearly 1300 yards of strong, serviceable tweed for the men's coats and waistcoats have been made. For some months past we have been making a first-rate serge for the women's dresses. It is gratifying to know that apart from the intention which led to the introduction of weaving, namely, "employment," that we can produce sufficient tweed and serge for our requirements at a considerable saving.

This asylum is quite free from general paralysis.

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