THE PROGRESS OF PSYCHIATRY IN 1897.

AMERICA.

By Dr. H. M. Bannister.

The statement made a year ago in reference to the condition and progress of American psychiatry is equally applicable at the present time; there have been no startling novelties or events, but there have also been no backward steps, at least as regards the country as a whole, in which it may be said there has been a continuous though gradual advance. There have been, it is true, the expected political changes, but many of these were for the better; while some, it may be, have been for the worse. It is a great misfortune that politicians in some parts of this country still consider public charities as political spoils, in so far as the emoluments of their administration are concerned, and that some of them have disgraced themselves by introducing the spoil system where it had not previously existed, and thus have demoralised the public service in these institutions. The past year, though it followed one of the most exciting political campaigns in our history, has not been especially notable in this respect, and there have been signs of improvement even in quarters where it was hardly expected. It may not be in the immediate future, but the time will certainly come, and that before many years, when this at present the greatest hindrance to progress in American hospitals for the insane will be a thing of the past in every part of our country.

A year ago I referred to the increasing interest in pathological work as evidenced by the founding of laboratories for this purpose in different parts of the country. This interest has not decreased, but is extending, and one of its latest manifestations is the inauguration of a plan, much like that already adopted in New York, in the State of Michigan. This commonwealth possesses in connection with its State university one of the best equipped and most efficient physiological and pathological laboratories in the United States, and the proposition is to utilise its advantages, each of the state hospitals contributing its portion to the salary of the specialist who will do their work. The plan has the advantage of economy, as the cost to each institution is small, and there will be no fitting up of quarters or expensive apparatus to procure; and it has the still further advantage of the best surroundings and atmosphere of scientific research, which, it must be confessed, are not always so well insured in all hospitals for the insane. It is quite possible that some former attempts at pathological work in asylums have been ineffective for this very reason; the workers were not sufficiently in touch with what had been or was being done elsewhere, however well equipped with appliances or skilled in microscopic technique they may have been. There

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will be no deficiencies in these regards in the New York State Laboratory or the University of Michigan. There is still another advantage in having the pathological work for all the institutions done under critical supervision at one central point, and this is not an unimportant one; it makes possible a comparison of the methods of clinical study in each separate institution, and ought to stimulate a healthy competition in this respect. Pathological findings are of comparatively little value except as interpreting clinical observations; and, as an eminent naturalist has remarked, it is just as scientific to make observations with our unaided but educated and properly guided senses as it is to observe through a tube furnished with lenses. To many, however, and to some who ought to know better, there is a sort of impressiveness about the brass and glass and general paraphernalia of microscopic work that gives it a sort of factitious importance as compared with other less showy but not less really scientific work in a hospital for the insane.

That there is an increasing interest in clinical studies of the insane is shown by the efforts constantly made to assimilate the treatment of acute cases, at least to general hospital methods. In this connection also may be mentioned the psychological laboratories at Waverley and Kankakee, the latter in charge of Professor W. A. Krohn, late of the State University of Illinois. It has as yet published no results of its operations, but there is no reason why whatever is possible in the way of good work in this special department should not be done. Kankakee, with over 2000 patients, and affording every type of mental aberration, ought to furnish an especially favourable field for the study of pathological psychology by modern objective methods.

It is probably well known to European alienists that the population of American asylums includes a large proportion of non-native inmates; but few, it is likely, realise the extent of the burden thus imposed upon our charities. The State of Massachusetts alone is stated to have deported to their native countries 520 alien insane and paupers at its expense last year,—this, of course, not including naturalised foreign-born who had gained a residence, or those turned back by the United States immigration inspectors. While the great mass of the foreign-born inmates of our institutions—and these form in some sections nearly or quite 50 per cent. of the whole—are legitimately there, having broken down mentally after they had gained a residence, there is in nearly every large asylum a number who are known or strongly suspected to have been assisted emigrants, and in many cases asylum inmates before coming to this country. I have personally known three cases of this character from a single limited district in a European state in one asylum. This condition of affairs has led to legislation in the State legislatures, and is one of the motives, it may be, of the stricter immigration laws now pending in the National Congress. Probably the seaboard States suffer most, and in this connection an inquiry into

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the relative degeneracy of the younger class of criminals in New York and Illinois, by Dr. E. S. Talbot, is of interest. The paper was offered at the last meeting of the American Medical Association, and was based on a series of observations and measurements of the inmates of the State Reformatories at Elmira and Pontiac respectively. The proportion of foreign-born in these two reformatories was about the same in both, and the figures of Irish and German nationalities were large. The statistics brought out the rather striking fact that while all or nearly all the inmates examined were physical degenerates as compared with the average population, those of the eastern institutions were decidedly more markedly such than those of the Illinois Reformatory, and that this difference was as pronounced in the different nationalities as in the inmates taken as a whole. Dr. Talbot endeavours to account for this by the fact that New York has for a long time maintained institutions for defective immigrants, and that these have had a tendency to concentrate this class within its limits. The inferiority, however, existed in the native-born as well, and to make this reason apply to them we have to assume that practically all the native offenders of this class must at least have had recent ancestors of foreign birth. This is probably hardly true of such a proportion as would be required, and it seems probable that other reasons, as yet not given, must exist. The fact, however, is an interesting one, and goes to show how, besides its native product, the country is overloaded with alien defectives. While the writer was connected with one of the large State hospitals of Illinois, the one county in its district that was almost exclusively populated with the original Anglo-American stock never kept its quota over half filled; while the others, similarly situated but with a large foreign element, were always demanding space.

It is not altogether pleasant to anticipate the founding of new Jukes families, or such as that recently described by Kierman, the record of which, according to the *Lancet*, exceeded Zola's most daring imagination, and which was the outcome of one or two defective immigrant importations. That we have survived them in the past is, perhaps, a comfortable assurance for the future; but, as shown in the Jukes family, they are expensive and inconvenient.

The care of the chronic insane is a subject that is always to the fore in the older States of the Union. Within the past three or four years Massachusetts and Pennsylvania have built asylums for this class, and one has been started in Illinois; but this last, according to recent reports, is not likely to be available for use for some time on account of defects in construction, &c. The Wisconsin system of so-called county asylums is claimed by its advocates to best meet the needs, but it is hardly an ideal plan, though inexpensive, and an improvement on the almshouses it supplanted. According to the Hon. Clarence Snyden, Special Agent for the

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Inspection of Charitable, &c., Institutions, Wisconsin supports in these establishments nearly 3000 chronic lunatics, at a cost of about $88 a year apiece. New York adopts the plan of State care for all, and has about 20,000 inmates in her hospitals for the insane. The boarding-out plan has been tried to a limited extent in Massachusetts, apparently without striking success thus far. Dr. Moulton's reply to Sir Arthur Mitchell's criticisms of the Report of the Massachusetts Commissioners states, I think, some of the difficulties in carrying out this method in this country fairly, and, as the statement of one acquainted with the ground, is worthy of credence. He might, however, have said more and made his case still stronger. Until the country has become much older, and has a larger settled rural population of a certain social class than it now possesses, it is doubtful whether the boarding-out plan will be anywhere general or remarkably successful.

The after-care of the insane is another subject that is exciting attention, and has been taken up the past year not only by the Medico-Psychological Association, but also by the American Neurological Association, which includes in its membership a number of alienists as well as neurologists. At its last meeting this body received a report of a committee appointed to consider the subject, which included recommendations that the Association take further active measures to aid in the foundation of organisations for assistance of the convalescent insane. As a preliminary, however, it was held that there should be a more universal recognition of the necessity of separate hospital treatment of insanity in its acute and active stage, and special provision for the treatment of the acute insane in public hospitals before burdening the taxpayers with the cost of convalescent homes. This, of course, will not interfere with voluntary endeavours in this direction, and it is not understood that they were discouraged or not advocated by the recommendations, whether the hospital reform is or is not immediately achieved.

Two events of psychiatric interest during the past year were the transfer of the *Journal of Insanity*, the organ of the Medico-Psychological Association, to Baltimore, where it is now issued from the scholarly precincts of the Johns Hopkins Press. It has been completely changed in appearance, and otherwise improved. The other event is the publication of Dr. Kellogg's book on Mental Diseases, which is the most extensive work of its kind that has as yet appeared as a native product in this country, and as America has not been very prolific in psychiatric text-books its publication is the more noteworthy. It is to be hoped it will meet with deserved success.

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