The medical and legal proceedings relative to the disposition of Schrank contrast favourably with many of our former celebrated murder trials. Dignity, brevity and conclusiveness tempered the application of justice from the beginning to an end against which there has been no complaint worthy of utterance.

(1) *Journ. Ment. Sci.*, vol. lviii, No. 242, pp. 494, ff.
(2) Osler.—*Practice of Medicine*, 6th edition, 1906, p. 384.
(3) J. W. Babcock.—"How Long has Pellagra Existed in South Carolina?" *Amer. Journ. of Insan.*, vol. lxix.
(4) A. H. Harrington.—"Pellagra in Rhode Island," *Boston Med. and Surg. Journ.*, vol. clxvii, No. 1.
(5) David Edward Hoag.—"Pellagra," *Journ. Am. Med. Assoc.*, vol. lix, No. 16.
(6) Hideyo Noguchi and J. W. Moore.—*Journ. of Exper. Med.*, vol. xvii, No. 2, 1913.
(7) Walter Channing.—*Bost. Med. and Surg. Journ.*, vol. clxvii, No. 5, pp. 156–158.
(8) Sir Thomas Clouston.—*Ibid.*, February 27th, 1913.

FRANCE.

By Dr. René Semelaigne.

Two Bills presented to the Chambre des Députés, recognising insanity as a ground for divorce, have not yet been debated. According to the motion of M. Maurice Violette, detention in an asylum during three consecutive years is necessary, and the applicant must submit, with an interval of one year, three requests for the nomination of two physicians for the purpose of examining the patient and attesting incurability. The writ has to quote the three reports, and divorce cannot be granted unless the signers unanimously certify that such insane person no longer presents any prospect of recovery. The Bill of M. Maurice Colin requires also as an indispensable condition a detention of three consecutive years in an asylum and a certificate of incurability; but even subsequently to the divorce, the successful applicant remains responsible for the maintenance of the lunatic. M. Maurice Colin gives as a characteristic mark of incurable insanity the disappearance, without any possible return, of intellectual and moral personality. But he repels the plea for divorce when this condition is a consequence of senility.

Drs. Filassier and Juquelier read at different meetings, and more especially at the Société Médico-Psychologique, interesting papers on the same question, and Dr. Lucien Graux, director of the *Gazette Médicale de Paris*, sent to lawyers and alienists a circular soliciting their opinion on this subject. Many replies were received *pro* and *con*.

The opponents declare that an insane person, being a patient, has a right to be helped, and that such disease does not seem to offer a legitimate occasion for breaking the matrimonial bond. Divorce, according to the French law, is a penalty, and lunacy is not a fault but a misfortune. The motion would create a new and serious peril as regards the stability of marriage. Sometimes insanity is a direct consequence of matrimony (syphilis, ill-treatment, etc.), and in such a case

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the offender would not be justified in claiming divorce. Opinion as to incurability is notoriously uncertain, and a positive assertion is often impossible even after many years. Some patients who seemed to be incurable may recover, in the event of which they are of course restored to liberty, in which case the previous family life is broken for ever. In giving a certificate of incurability, how great would be the responsibility of the physician? Nullity of marriage is perhaps permissible, and even equitable, in some cases of mental disorders proved to have existed previously to matrimony, and concealed at that time; but in such cases it would be unfair further to charge the applicant for relief with the maintenance of the patient; he has been deceived, and might be, moreover, injured in his personal well-being. Delusions of persecution seem to be one of the most incurable forms of insanity; nevertheless, many patients the subjects of such delusions are more or less rational, and it is often nearly impossible to persuade the public and even the magistrates that such persons are insane. In such cases the applicant might only with difficulty obtain divorce, and, in the event of his succeeding, certainly would run the risk of remaining the object of the persecution of the patient. All the controversies of peculiar interest, which are so frequently the subject of debate about the insane, are more painful than insanity itself, and the insane being the sufferers, there is no reason to aggravate their misfortune.

Partisans of divorce observe that, according to the actual law, a jealous degenerate, a brutal drunkard, an amoral or perverted disequilibrated patient is invariably esteemed to be diseased, and that consequently a divorce, claimed on the ground of abuse, injury, or assault, is inevitably refused by a court of justice; but lunatics are not really ordinary patients, and their disease presents an anti-social type which must allow of being dealt with by special methods. Consequently, when insanity seems to be persistent, and warrants the presumption of incurability not allowing a renewal of cohabitation, when henceforth the sole matrimonial duty consists in the maintenance of the patient, it would be legitimate, in such a case, to dissolve an union morally intolerable to the sane party, and now non-existent and without any benefit to the patient. In other respects it does not seem equitable always to look on disease as a matrimonial risk to which sane people must submit without any warning, and be exposed to in any case, and without any limitation.

Divorce, indeed, is an evil, but an evil sometimes unavoidable, and in such a case it is not to be looked on as a penalty, but as a possible means of delivery. The rights of normal people must supersede the rights of the insane, and a civilised state ought apparently to shield any well equilibrated individual from the disequilibrated one, and from the consequences of any mental defect. Eventually society must be protected against any member incapable of generating sane progenny.

Such and other reasons have been advanced on either side. Of course, neither advocates nor opponents have been convinced by any reasoning of their adversaries. The writer abstained from replying to the aforesaid inquiry and from participating in the contest. Many cases, indeed, are very painful, but it does not seem advisable to extend any further the facilities for divorce. Advocates of divorce on the ground of insanity propose to except senile dementia. Well, but M.

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Maurice Violette equally excepts, and classes amongst matrimonial risks, all the cases of dementia consecutive to an attack of insanity. In such cases, according to him, the original personality does not quite disappear; as long as one agrees to be cared for by his relations and does not suffer a super-added delirium, he seems to be more comparable to an ordinary, than to an insane, patient. Why? The original personality might entirely disappear in organic dementia, and, on the contrary, persist in various other forms of insanity. M. Maurice Violette describes incurable insanity as the disappearance, without any possible recurrence, of intellectual and moral personality. But if one excepts some states of complete dementia, very few insane exhibit such disappearance, and, with such restriction, delusions of persecution or moral insanity could not constitute a legitimate ground for divorce.

Dr. Lucien Graux maintains that in such a question any exaggerated sentimentality is out of place; that in the Middle Ages leprosy was extinguished by the use of shocking methods, and that the dissolution of union of some insane would not be a very cruel action; consequently, the grant of divorce on the ground of insanity might contribute to the happiness of a great many and to the substantial benefit of our race, which it is our object to breed, cost what it may, healthy, strong and safe from any defect. I daresay that I misunderstand such a view of divorce. If new legislation succeeds in breaking the matrimonial bond of some incurable lunatics, what will be the real advantage to society? There are so many insane or disequilibrated persons living at large that there remain ample opportunities for the unhindered reproduction of a degenerate posterity, in spite of any grants of divorce. In days of old, a well-known alienist pleaded for legislation prohibiting the marriage of lunatics. Such prohibition would not be more successful than divorce. If one was endeavouring to attain such an end, the best and most unique proceeding would evidently be the castration of any insane disequilibrated, epileptic, alcoholic, or syphilitic person, without any exception, but I daresay there is no member of Parliament who would venture to propose so radical a motion. Consequently, lunacy will not decrease as a consequence of divorce, and the possibility of an improvement of the race does not seem to be a conclusive argument on behalf of such a law.

In such a matter the main issue requiring the consideration of legislators is evidently the painful condition of any person united to an incurable lunatic. Intimacy is no longer possible, any cohabitation is insufferable or dangerous, and nevertheless, the law maintains the permanency of a legal bond when matrimonial relations are really broken without any chance of being renewed. According to M. Maurice Colin there is no social interest which demands that anyone should be compelled to remain solitary at his desolated home. It is, indeed, proper that such considerations should be the subject of argument between lawyers and members of Parliament, but I am of opinion that the medical point of view need not be identical. However sane people so situated are to be pitied, physicians must, above all other things, consider the interests of the patients placed under their care. We have also to consider, in such a question, our own degree of responsibility. So my old friend, Dr. Klippel, physician of the hospitals of

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Paris, and President for 1912 of the Société Médico-Psychologique, has recently proposed to our colleagues the following programme of discussion: (1) Care and caution to be exercised by physicians with respect to declarations of incurability, especially in the case of psychoses not organic. (2) The possibility of an action being taken against a physician in the case of controvertible prognosis. (3) Prolongation of the period of time allowed to elapse abroad before stating the great probability of the incurability of any insane person. (4) A study of the conditions of observation indispensable to any physician in order to give his opinion on incurability within a space of four or five years. If he had not an opportunity of examining the patient previously to that period, he might evidently be in difficulty with respect to some cases which, otherwise, would not leave any doubt as regards the prognosis. It might also be necessary to observe not only the present condition, but the complete evolution of the disease. (5) The most suitable demeanour for a physician to adopt towards a patient during an action for divorce. In such a case the various formalities are often a cause of anxiety and emotional disturbance highly prejudicial to a patient at a time when incurability is not yet beyond doubt. If some day or other insanity is admitted in France as a plea for divorce, let us hope that everyone will call to mind, on all occasions, the words of Pinel, "that an insane person is not a culprit deserving punishment but a patient worthy of compassion."

GERMANY.

By Dr. J. BRESLER.

F. SIEMENS (Lauenburg in Pomerania), at the annual meeting of the German Society for Psychiatry at Kiel, in May, 1912, made the proposition, which received unanimous support, that the Empire might be called on to establish a biological institution for the investigation of the physical basis of mental diseases. He said that the building of expensive establishments and the discovery of new methods of accommodation cannot in the long run satisfy either physician or people. Neither was it of any value to continue the diligent grouping of mental symptoms into types according to the fancy of the alienist. There were only two kinds of symptoms in mental disease: (*a*) The *elementary*, caused by physical disease such as anxiety, hallucinations, emotionalism, stupor, catatonia, and delirium; (*b*) *symptoms of a purely mental kind, arising out of the misinterpretation of those elementary derangements by the psyche.* The study of the action of the internal secretion of glands encouraged the hope that in the investigation of mental diseases much also will be gained by this means. The individual provincial asylums were not in a position to accomplish the task of so comprehensive an inquiry, nor were the individual clinics at the universities, but the Empire must establish an institution on a large scale for this purpose.

At the same meeting Hoche (Freiburg i, Br.), in his report about the importance of the groups of symptoms in psychiatry, urged at the same time that the search for pure forms of disease is a fruitless one; he

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