is that every one who has been deprived of the consciousness of his acts, or of the power of resistance, by reason of infirmity of mind or external violence, is nevertheless responsible, but the punishment shall be diminished accordingly. This is very ably combatted by Ziino and Tamassia, who argue that, if insanity be once admitted, all responsibility ceases, and there should equitably be no question whatever of punishment.

One of the most valuable features of this Review is a very careful analysis of the progress made (particularly in France and Germany) in the anatomy and physiology of the nervous system: this is more clearly and agreeably done than in any Retrospect with which I am acquainted.

Dr. Tamassia has forwarded a pamphlet, containing his account of the *post-mortem appearances* in 235 cases of insanity. His account confirms, on the whole, Dr. Howden's and Dr. Balfour's observations, and, as it deals wholly with figures, I am unable to give any analysis of it, and will only add that its carefulness and evident trustworthiness will make it indispensable in any future study of the subject.

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3. *English Retrospect.—Asylum Reports for* 1875.

(*Continued from page* 487.)

Thirty-eighth Annual Report of the Suffolk Lunatic Asylum.—This report, among other interesting remarks, contains some of which all superintendents will admit the truth, and which, though not now delivered for by any means the first time, are valuable as tending to remind the public at large of important facts which they are very apt to forget. Speaking of the objections to discharging patients who are insane, but quiet, orderly and industrious within the Asylum, Dr. Kirkman says:—"It is perplexing to keep within the letter of the law, and to resist importunate entreaties; when they are complied with, feeling too often prevails over judgment." It will be said that a certain man, he continues, "might as well be working at home, and earning his living, as spending such capabilities for the benefit of the Asylum, where he is detained as an insane man. But how often is half a truth proved to be the greatest falsehood; it is the secret of quiet protection and asylum security in the background, which renders such occasional or constant display possible; work is his happiness, his *physic*, and his *cure*; he could not do under different circumstances, without medical treatment, or without the latent *sense* of treatment, what he does in the asylum, and under its sheltering care. This is but a vivid instance of a very large class of patients, who can and will work with advantage here, but with whom friends make the fatal error, that they could work just as well at home." Dr. Kirkman might have added that the *percentage* of those who do a really good day's work in asylums is very small indeed, while that of those who do a good year's is

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almost fractional. Dr. Kirkman announces his determination to retire from the post which he has now held for forty-five years, and we only express the sentiment of all the members of our Association, when we say that we trust that the committee of visitors have sufficiently rewarded his long and valuable services, and that he may long enjoy their liberality. Neither the Committee of Visitors' nor the Commissioners' Report is printed, which we think is a mistake. The death rate is 10·5 per cent.

Sixth Annual Report of the Leicester Borough Asylum.—The murder of an attendant in this asylum was committed by an epileptic patient, who was in the ordinary course committed for trial. The case is instructive as showing the indisposition of judges and juries to admit the plea of insanity in cases where there can be no reasonable doubt of it. The counsel for the patient, or prisoner, as he is termed in the visitors' report, very naturally objected to his being called on to plead at all, but the judge and jury, on the opinion of the two surgeons of the County Gaol that he "appeared to be quite rational," and able to understand the witnesses, and instruct counsel, over-ruled the objection, and the trial proceeded. According to Mr. Finch, the medical superintendent, he seems to have been as troublesome, sullen, malicious, abusive and dangerous an epileptic as one could desire to meet with, but the judge, who will be gratified to hear that it is the opinion of the chairman, and several members of the committee of visitors, that he summed up the case with great legal ability, charged the jury that "there was no doubt the prisoner was suffering under a delusion, but they must not say that a man was insane because he was suffering from delusions, unless they were satisfied that he did not know what he was doing was wrong. If the jury came to the conclusion that the prisoner's mind was unsound at the time he committed the act, that he was suffering from defective reasoning powers, and insanity in his mind, that he was not able to understand he was committing murder, and only meant to wound the deceased in order to gain a hearing for his alleged grievances, it would be competent for them to say that the prisoner was not guilty, on the ground of insanity." The Verdict was nearly as lucid as the Charge, "guilty," therefore, not insane, but "strongly recommended to mercy on the ground that he occasionally suffered from delusions" of, we presume, an insane description. The patient was sentenced to death in the usual manner, and the sentence was afterwards commuted to penal servitude for life at *Pentonville*, thus marking an important stage in the history of the treatment of criminal lunacy. The death rate is 9·6 per cent.

The Fourth Annual Report of the Hereford City and County Lunatic Asylum.—Dr. Chapman and the Commissioners both draw attention to an outbreak of erysipelas within this asylum, and ascribe it to a defective drain. 14 patients suffered from the disorder, four of them succumbing. Dr. Chapman devotes a considerable portion of his

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report to a discussion of the causes of the high rate of lunacy in Herefordshire; but he rather begs the question by assuming that Hereford *par excellence* supplies many emigrants to other countries, and has comparatively few immigrants. Dr. Chapman does not produce any evidence of this, and even if it were so, it might be used as an argument on the other side of the question, for if Hereford has so many emigrants, and so few immigrants, the former must acquire settlements in other counties sometimes, and the latter, being few, can only slowly swell the numbers within Dr. Chapman's district.

ELEVENTH ANNUAL REPORT OF THE JOINT COUNTIES ASYLUM, CARMARTHEN.—In this asylum also, erysipelas has been epidemic, but fortunately it proved fatal in only one case. Neither the Commissioners nor Dr. Hearder assign any cause for the outbreak, and it has now disappeared. The commissioners make some very justifiably strong remarks on the custom which it appears prevails in Carmarthen of taking patients, male or female, to the asylum, under the charge of a policeman only; and in the case of a woman unaccompanied by one of her own sex. Such a state of matters is most objectionable, and should at once be put a stop to. The death rate is 12·6 per cent.

ANNUAL REPORT OF THE CUMBERLAND AND WESTMORELAND ASYLUM.—Dr. Campbell enters into an elaborate enquiry into the increase of patients in this asylum, but refrains from drawing any conclusions as to whether it argues an increase of insanity in his district, until the next census, in 1881. The commissioners give a very favourable report of the asylum. They note an employment of seclusion and restraint considerably above the average, but do not take any exception to the custom. The restraint was used for surgical reasons, but the seclusion seems to have been resorted to as a method of dealing with excited patients. The commissioners do not say anything in favour of this, but as we have said, they make no remarks in censure of it, and by a curious coincidence their next paragraph is devoted to praising the increased quietness and order in the wards. It is every year becoming a graver and more important question whether the determined set against seclusion which has obtained for so long has not been in itself a mistake. It is certain that there is a disposition on the part of some to break down the hard and fast lines which have hitherto been followed, and to judge every case on its own merits. With the fierce light of public opinion which now, thanks to the strenuous efforts of the Boards of Lunacy, beats on lunatic asylums, there is no fear of any of the abuses of former days being revived, and at any rate the medical staff of asylums are now recruited from men of much higher standing in the profession than they used to be. The death rate in this asylum is 6·6 per cent.

TENTH ANNUAL REPORT OF THE CITY OF LONDON LUNATIC ASYLUM.—Dr. Jepson reports two cases of death during the night, while the patients were not under direct supervision, one from

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accidental suffocation in an epileptic female, but not, Dr. Jepson thinks, during the occurrence of a seizure, and the other from disease of the heart. The commissioners, in their report, point out that in their opinion the former case indicates the necessity of establishing a ward for the special supervision of epileptic and suicidal patients during the night, but the smallness of the asylum will perhaps cause a considerable difficulty in carrying this out. The death rate is 7·23.

Twenty-seventh Annual Report of the North Wales Lunatic Asylum.—The occurrence of several cases of diarrhœa in this asylum created some suspicion as to the purity of the water in use, and an analysis was made by a qualified chemist with the result of showing that it was utterly unfit to be used for drinking or cooking purposes. And to this it may be added that the supply is scanty, which, though apparently advantageous, is not really so, because in hot or dry weather there is little or no flow through the reservoir, and the water becomes stagnant, thus adding to its impurity. The committee have utilized a spring at a little distance from the asylum, but it only yields about 5000 gallons a day, which is, of course, far too little for an average number of 391 patients, with an appropriate staff; and though they say it will only be used for drinking and cooking, while the contaminated fluid will not be employed except for washing and bathing purposes, there is always a practical difficulty in carrying out this, and we fear that it will be found impossible to prevent considerable consumption of the inferior water, especially as it is stated, when at its worst, to be free from taste and smell. The death rate in this asylum is 13 per cent.

Report of the Northumberland County Asylum.—In this report, which is still published in royal quarto, or something like it, Dr. McDowall's remarks are chiefly confined to reporting alterations either proposed or carried out. The death rate is 11·9 per cent.

The Eleventh Annual Report of the Staffordshire Asylum, at Burntwood.—This is chiefly remarkable for the fact that Dr. Davis inserts, in his own report, a letter from the Guardians of the Walsall Union, expressing their "entire satisfaction with all they saw" at a recent visit to the asylum. The Guardians of the Walsall Union are no doubt very worthy men, but they are hardly authorities on the manner in which asylums should be managed, and, indeed, if they are anything like some boards of guardians we know, what they call "their sense of the admirable manner in which the establishment is conducted," is hardly likely to be satisfactory testimony. The death rate is 17·37.

Twenty-fifth Annual Report of the Birmingham Borough Asylum.—In the end of 1874, and the beginning of 1875, there was an outbreak of small-pox in this asylum. One patient in whom the disease was attended with hemorrhage, and a nurse who had refused

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to be vaccinated, died. There was also a violent epidemic of erysipelas, eight persons dying from this disease. To show the very unfavourable nature of the cases in this asylum, there were two broken legs, one broken thigh, two broken collar bones, one broken rib, and two fractures of the neck of the femur, a dislocation of the shoulder, an accidental amputation of a finger, a thigh badly gored by a hog, and two cases of accidental suffocation. Altogether we must sincerely congratulate Mr. Green on being rid of a very trying year. The report of the commissioners is not published. The death rate is 13·6.

Twenty-eighth Annual Report of the Somerset County Asylum.—In this asylum also there was an outbreak of erysipelas which, however, appears to have resulted in death in only one case. Dr. Medlicott complains of the custom of sending patients to the asylum at so advanced an age as 83, 88, and 94 years. Certainly, except under very special circumstances, it would seem that they might be as well cared for elsewhere. The report of the commissioners is not published. The death rate is 12·10.

Eleventh Annual Report of the Glamorgan County Asylum.—Dr. Pringle following up a subject to which his predecessor, Dr. Yellowlees, paid considerable attention, enters at some length into a discussion of the large percentage of his cases in which the insanity is alleged to be due to intemperance. 33 *per cent.* is a very large proportion, and even allowing an ample margin for false information, and for fallacies, there must still be a great number due *bonâ fide* to intemperance in the use of intoxicating liquors. Dr. Pringle is of the opinion that the love of drink has not been the origin of these bad habits in the majority of cases, but that it is believed that in beer alone the men will acquire and retain the strength necessary for the work they have to perform, which is frequently very arduous indeed, and entails exposure to a very heated temperature. Dr. Pringle seems to think that an improvement would take place if the simple elements of physiology and of hygiene were taught to boys at school, and we hope it may; but we fear that the flavour of a pint of stout will be to the toper a much more cogent reason why he should indulge, than all the physiology in the world why he should abstain. The death rate is 9·8.

Fifty-seventh Annual Report of the Stafford County Asylum, at Stafford.—There is nothing calling for special remark in this report. The death rate is 19·6, which is very high, but there seems to have been a very large number of feeble and aged persons. Of the 104 deaths, 28 are ascribed to general paralysis, of which number the large proportion of 5 were females, and 18 were cases of senile decay.

Annual Report of the Hants County Asylum.—This report, which is almost of the same inconvenient shape and size as the Northumberland one, relates the story of an assault on Dr. Manley,

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the superintendent, by a male patient who had armed himself with a portion of an iron spoon. Fortunately, the attack was unsuccessful. The patient had recently been in the Colney Hatch Asylum, and had prepared to make a similar attack on the superintendent of that institution on the day that he was transferred to the Hants Asylum. He told Dr. Manley, "I will kill you; I will bathe my garments in your blood; I am not mad, but being in an asylum, I can do what I like and not be responsible for it;" and he quoted the instance of the melancholy death of Mr Lutwidge by a patient who, being demented, was held irresponsible. Dr. Manley remarks on this case, "this homicidal propensity has existed ever since, and still continues, and I may add that in my opinion the patient is quite as dangerous to others as to myself. To prevent his making such another attempt, his arms are confined to his sides by a waist-belt and armlets, so that his arms cannot be raised above his head to strike a heavy blow. Some persons would call this man's conduct 'uncontrollable,' I call it 'uncontrolled;' but, at all events, whilst he is so dangerous, I see no good reason why the lives of those about him should be risked from a sentimental objection to the use of restraint, and, until I see very good reason to the contrary, I shall continue to prefer the safety of others to the freedom of limb of a would-be assassin." Dr. Manley also calls attention to the advanced age at which patients are admitted, the ages of 14 averaging 73½ years. The death rate is 9·7.

Twenty-third Annual Report of the Killarney District Asylum.—The first thing that struck us on glancing through this report, was the commendable brevity of the Inspector's entries. The result of a two days' visit is chronicled in half a page of the report, and such sentences as the following occur: "The food I examined was very good;" "The visits of the external officers are regular;" "The body clothing of the patients is on the whole fair, save so far as shoes are in question; indeed, in most Irish Asylums, I find more or less neglect in this particular." The English Commissioners visit Asylums in couples, and so are entitled to the use of the pretentious "we;" but who ever heard of the Scottish, who visit singly like the Irish, using the "I?" With them it is always "it is recommended," "it is suggested," and so forth. In the report of this Asylum there is a singular remark in this same Inspector's entry. "The matron complains, and I think properly that there is little or no amusement for the females. I have requested her *to submit to the Board of Governors* any means for that object she may recommend." We cannot but regard it as fatal to the progress towards improvement of the Irish Asylums that the responsibility of management should be so divided. In a few English and Scottish Asylums the matron is still vested with exceptional and independent authority, but these are notably the most badly managed institutions. We wonder that Dr. Nugent does not make strenuous efforts to

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have matters placed on the proper footing, and to make the Medical Superintendent responsible for everything, even the amusements of the females. The percentage of deaths is 11·25.

TWENTY-FIFTH ANNUAL REPORT OF THE WILTS COUNTY ASYLUM.—If we remember rightly, Dr. Burman wrote the longest report of all the reports that reached us last year, and this year he has a fair chance of again bearing off the palm in this respect. The Committee of Visitors, too, are not behind hand, but are almost as voluminous for a Committee as Dr. Burman is for a Superintendent. Much that is said in the Medical Report is of considerable interest. It seemed scarcely necessary however, to insert a copy of the correspondence between the Commissioners and the Asylum about special supervision at night of epileptic and suicidal patients, in which the Secretary asks if the Committee have taken any steps in the matter, and Dr. Burman replies that they haven't. A copy, too, of the Section of the Lunacy Act relating to the ill-treatment of patients is very properly handed to each attendant on his entering the service of most Asylums, but there is no occasion to embody it in the report. Erysipelas has been prevalent in this Asylum also, and one death resulted from it, and Dr. Burman's heavy responsibilities have been still further increased by outbreaks of measles, scarlatina, and typhoid fever. In their report the Committee draw attention to the fact that patients are sent to the Asylum as paupers, the whole cost of whose maintenance is borne by their friends, which they seem to think an abuse of a building erected by the ratepayers of the county for paupers only. This is an illiberal and not a philanthropic view of the matter, and one which, if its working were strictly enforced, would cause far more evil and misery than it would prevent. Every one who has had the charge of a pauper Asylum knows that there is a very large number of people whose circumstances are such that they have the greatest possible objection to going on the parish, but who could not afford to pay the lowest rate of charge in any private Asylum. To these the County Asylum is a great boon, and if its doors were shut against them, there would be nothing for them but to remain at home until the disease is almost past the chance of recovery, and their money all spent, when the whole family would be thrown on the parish. We speak from personal knowledge when we say that there are many instances in which the slender savings of years are proudly parted with week by week to the Guardians rather than allow an insane relation to go on the parish, and the habit is one so productive of good in every respect that it should rather be encouraged than checked. The death rate is 10·7.

REPORT OF THE LANCASTER COUNTY ASYLUM AT WHITTINGHAM.—This Asylum, which has been opened for three years, and which appears to have been built for 1,140 patients, already contains 891, or about five-sixths of what it can hold, a state of matters which cannot fail to make the county ratepayers of Lancashire feel uneasy.

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The yearly increasing requirements for the accommodation of lunatics is one of the gravest social questions of the day, and to all appearance we are as far from its solution as ever. The death rate is 10·39.

Report of the Lancaster County Asylum at Prestwich.—The Commissioners commence their statutory report by saying that the inspection occupied them about a day and a half. Considering there were at the date of the visit 1,028 patients, and taking a working day and a half as 12 hours, this is at the rate of 42 seconds per patient, inclusive of inspection of wards, registers, &c. They make a very favourable report of the condition of the Asylum. Mr Ley's report is, as usual, thoughtful and pointed, and in many respects a model of what a report should be. The death rate is 8·83.

Report of the Norfolk County Asylum.—In this Asylum erysipelas has been prevalent, and two deaths are ascribed to it; but in addition to these we observe in the table of the causes of death other fatal cases from blood poisoning. We have, in this article, noticed already so many Asylums in which such epidemics have occurred, that we confess we feel some alarm on the subject. The continued cry for more accommodation is quite bad enough without that already in existence being unhealthy. The death rate is 13·11.

Forty-sixth Annual Report of the Belfast District Asylum.—During the year this Asylum had the misfortune to lose, by death, the venerable services of Dr. Stewart, who was for so many years the Irish Secretary of this Association. Every one who knew him knew the great interest he took in his work, and those who visited the Asylum when it was under his management had reason to testify to the intimate personal knowledge he had of those under his charge. Both the Inspector (whose reports are, as usual, of the shortest and pithiest description), and Dr. Merrick, his successor, make suitable allusion to the loss the Asylum has sustained by his death. The death rate is 4·2.

Eighteenth Annual Report of the Cambridge County Asylum.—An outbreak of erysipelas occurred in this Asylum of a very serious character, and carried off four cases. It seems to have broken out in February, and it did not disappear until the end of September. The Commissioners ascribed it to the serious over-crowding of the Asylum, which they say has been officially known to the Committee since 1870, and has at each statutory visit been the subject of comment by the Board of Commissioners. The Committee have at length bestirred themselves in the matter, apparently not before it was necessary. The death rate is 19·2.

Seventeenth Annual Report of the Sussex County Asylum.—In this Asylum there were two deaths from erysipelas, but as no remark is made by either the Commissioners or the Superintendent, we suppose the disease was not epidemic. Dr. Williams complains of the trouble he experiences in getting the relieving officers to have the papers for the admission of a patient properly filled up. It is

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a very difficult thing to know what to do when a patient arrives from a distance in such cases, for it is practically impossible to refuse admission to, for instance, a desperate suicidal case, yet in even such a case the Superintendent makes himself liable to heavy penalties if he admits the patient. Dr. Williams writes with approval of his classes for teaching reading and writing as productive of excellent results. The death rate is 15·2, and of the 120 deaths no less than 54 are ascribed to epilepsy, general paralysis, and other diseases of the brain.

THIRTY-SIXTH ANNUAL REPORT OF THE ROYAL CRICHTON AND SOUTHERN COUNTIES ASYLUM.—The only topic of particular interest treated of in this report is in a paragraph on Voluntary Patients, which we should have been glad to see much longer. At the present day when there is so strong a desire on the part of some to legislate for habitual drunkards, and so much difference of opinion even amongst the parties themselves as to how it ought to be done, a more detailed account of Dr. Gilchrist's opinion of the working of the voluntary system among the insane would be very acceptable. We believe he has had more experience of the system than any other Asylum physician. Numbers of papers have been written on the subject, but there is no really satisfactory account of the results obtained. He had 16 "voluntaries" on the 31st of December, 1874, and 14 on the 31st of December, 1875, having admitted 12 during the year. We gather from what he says that he does not view the system with much favour, as he says they seldom remain until recovery is completed, and our own experience coincides with this view. When they begin to be a little better, they, like most other patients, feel the restraints of Asylum life irksome, and demand their discharge. This may be refused by procuring an order and certificates for their detention, but such a plan is seldom resorted to except in extreme cases, for it is considered by the patient as taking an unfair advantage, and, so to speak, setting a trap for him, thus increasing the irritation which he feels at being detained at all, and prejudicing his chances of recovery. The statistical tables given at the end of this report are very inadequate, and we would suggest that the tables of the Medico-psychological Association, now happily in force in nearly all other Asylum reports, should be adopted next year. The death rate is about 7.6.

THIRTY-FOURTH ANNUAL REPORT OF THE SURREY COUNTY ASYLUM AT WANDSWORTH.—The Committee of visitors of this Asylum take very liberal and advanced views of the ultimate economy of providing ample accommodation for the pauper lunatics of the district. Their remarks may be read with advantage by many like bodies. Talking of a decrease in the numbers of lunatics within the county during the year they say, "It is not for us to say what effect this diminution in numbers may have upon the question of building a third Asylum, but whatever steps may be taken, we hope it will be remembered that there

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is no surer way of keeping down the numbers than by taking care that the Asylum accommodation shall constantly be somewhat in excess of the demands upon it." This opinion may be true, but we fear there is no proof of it in the experience of the English counties. According to the report of the Commissioners restraint by means of "gloves" appears to be freely employed for destructive and for suicidal propensities. The death rate is 9·3.

ANNUAL REPORT OF THE GLOUCESTER COUNTY ASYLUM.—Mr Toller has apparently nothing to say, for there is no medical report. The death rate is 13.

REPORT OF THE ROXBURGH, BERWICK, AND SELKIRK DISTRICT ASYLUM.—In the report of one of the Commissioners, it is said that at this Asylum "the removal of unrecovered patients appears to be judiciously encouraged." As all the information that Dr. Grierson gives of these cases is that of the 8 discharged "relieved," which we suppose answers to the "unrecovered" of the Commissioners, 5 were liberated at first on probation, and 2 removed to England and Ireland, we should be glad if he had enlarged a little on this subject. With so many Asylums in the United Kingdom, too small to supply the wants of their districts, the discharge of "unrecovered" patients is looked upon as almost a necessity by some; but it is obviously a system to be adopted with discretion, and some details from those who employ it would be extremely valuable. The death rate is 6·1.

SIXTH ANNUAL REPORT OF THE STIRLING DISTRICT LUNACY BOARD.—The first thing which strikes one in reading this report is the very large proportion of admissions to the average number resident, viz., upwards of 100 per annum of the former to about 215 of the latter. To speak in actual figures, the number of admissions in 6 years (we purposely omit the first year of the Asylum) is 630, or 105 per annum, and the average number resident in those 6 years was 220. The number of admissions to the English County Asylums in 1874 was 9,693, and the average number resident was 32,062, but if the percentage of the Stirling District obtained, the admissions would have been 15,302, or in other words they are in England at the rate of only three-fifths of the Stirling rate. Dr. Frederick Skae enters at considerable length into a discussion of this, and the kindred subject that the Asylum is over-crowded, and he by no means allows that such a state of matters is of itself an argument for additional building. He, on the contrary, seems to think that the more accommodation you provide the more you will be asked for, and he would try the plan of boarding the surplus in other Asylums. He says, "should the Asylum again become crowded it will be better, instead of building, to rent beds for the surplus patients in some other Asylum, and to meet the extra cost for the patients thus boarded by raising the general rate of maintenance." He thinks that by thus directly raising the cost of keeping pauper lunatics in the Asylum, instead of doing it indirectly by county rates for additional build-

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ings, a wholesome check to the system of sending all and sundry to the Asylum would be given. The chief objection to the plan is that all the District Asylums are either full or with every prospect of speedily becoming so, and such a remedy could therefore only be of a very temporary nature. Besides, the system, where it has been tried, and it has prevailed to a very large extent from time to time in England, during the erection of County Asylums, operates with undue hardship on the patients, who are thus removed for an indefinite period from all chance of seeing their friends. This is not a trifling consideration, for the patients thus transferred are generally taken from the quiet and orderly class, the Superintendent to whom they are going naturally objecting to receive the worst cases. Dr. Skae states, that from information he procured, he knows he might have disposed of 50 patients in this way last year by paying from three to five pounds a year more than the Stirling rate of board. The Commissioners suggest in their report that the Asylum should be enlarged, but Dr. Skae "hoists them with their own petard" by quoting passages from their former reports strongly condemnatory of large Asylums. The death rate on the average number resident is nearly 9·1, which is not of itself particularly high, and Dr. Skae very fairly points out that the unusual number of admissions which he has every year should be considered, the death rate being always higher in the recent cases. A really correct mode of calculating the death rate in Asylums is still wanting. Dr. Skae has been appointed Inspector of Asylums for New Zealand since his report was written, an appointment on which we congratulate him and the New Zealand Government. He will there have a new field before him, and we shall mark with much interest the methods adopted in that colony under his guidance for the care and treatment of its insane.

Report of the County Lunatic Asylum at Rainhill.—Erysipelas has been epidemic in this Asylum, and carried off 2 patients. Dr. Rogers shows the importance of receiving with caution the "alleged" causes of insanity in cases admitted to Asylums, in the case of a sailor whose disease was charged to attendance at "revival" meetings, but who, on enquiry, was proved to have been living a dissipated life for some time before. The death rate is 11·77 per cent.

Thirtieth Annual Report of the Devon County Asylum.—From the medical report it would appear that the Superintendent of this Asylum is occupied, to a great extent, as a Clerk of Works; at least, we cannot see what bearing on the treatment of the insane the erection of new boilers, gasworks, and laundry cisterns has. These things belong rightly to the report of the Committee of Visitors, and if they do not think themselves competent to remark on them, they should employ somebody who is, and not throw the burden and responsibility on the Superintendent. That officer, to whom they allow only one assistant, has surely quite enough to do in looking after a daily average of 683 patients, without having in addition to

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be directly answerable for the efficiency of gas, scrubbers, and retorts. The death rate is 7·9.

Sixteenth Report of the Three Counties Asylum.—Erysipelas has been prevalent in this Asylum, but it is not assigned as the cause of death in any case. There is a strikingly large number of deaths from "senile decay," viz., 23 out of a total of 81 deaths, or nearly 30 per cent. The Commissioners, in their statutory entry, state that Mr Swain, the new Superintendent, has entirely abolished the use of seclusion, and from what they say, and from what he says, we gather that he carried out his views immediately on his arrival by summarily dispensing with it in all cases whatsoever. Mr Swain evidently gratified the Commissioners very much by his alacrity in conforming to their views. The death rate is 11·34.

Ninth Annual Report of the Surrey County Asylum at Brookwood.—Dr. Brushfield calls attention to the increasing percentage of *registered* lunatics to the population within the county of Surrey, and he shows pretty plainly that it is rising in a higher proportion than the population itself. We need scarcely point out that this has no bearing on the question of the increase of insanity in the county. His remarks about the water supply are a little alarming, and are worthy of being quoted. "We have had no reason to complain as to the daily quantity. As to the quality, having some reason to doubt its purity, it was, at my request, analyzed by the county analyst, and his report was far less favourable than that of the analysis made in 1868. Since that time a considerable tract of land has been drained into the sources of our supply, and a number of houses erected in their vicinity, from which there is reason to fear sewage percolation may occasionally take place. As yet the *contamination is not very much*, but is likely to increase year by year. Much may be and is done by filtering the whole of the supply through a thick bed of sand, gravel, and animal charcoal, before being furnished to the Asylum, and through filters placed in each ward." Dr. Brushfield proposes, as a remedy, the sinking of an Artesian well, and certainly something of the kind should be tried. Want of water in Surrey, and contamination when you get it, are not a satisfactory state of matters. The Commissioners' entry is not published, as it was printed with last year's report. This is, in our opinion, a mistaken plan; each year's report should be complete in itself. The death rate is 10·61.

Report of the Chester County Lunatic Asylum at Chester.—From a remark in the report of the Committee we infer that they themselves engage and dismiss the attendants of this Asylum. Speaking of the conduct of the servants of that class they say it was, "on the whole, satisfactory, with the exception of a want of sobriety on the part of a few of the male attendants, but the *Committee having exercised* the necessary discipline in their cases trust that," &c. Such powers would be much more appropriately exercised by their Superin-

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tendent. If a Superintendent is fit for his place he is fit to be entrusted with arbitrary powers in regard to the engagement and dismissal of all the servants, the Committee holding him responsible for their conduct, and it is a notable fact that by far the best managed Asylums are those in which the Superintendent's authority is paramount. By leaving everything connected with the administration of the Asylum in his hands, the Committee are only making a practical acknowledgement of a fact which they would never attempt to deny if it were placed plainly before them—that he knows much more about it than they ; and if he is the proper man for the place there is no fear of his exceeding his duty, while, if he is not, they ought to get some one who is. We think the Committee of Visitors of this Asylum do grave injustice to Dr. Davidson, and seriously peril the discipline of the institution by their plan of administration. The death rate is 15·2, but there has not been any epidemic.

Report of the Royal Edinburgh Asylum for the Insane.—Dr. Clouston goes into the question of the connexion of intemperance and insanity. It is of importance that this should be rigorously and scientifically enquired into by those who have such ample means at their disposal as Asylum Superintendents, for the subject is of vast consequence to the true solution of a question which relates to one of the gravest social evils we have ; and if the answer should happen to cut away a good deal of the ground from under the feet of the complacent platform orator, we are not sure that much harm would be done, for when philanthropy runs counter to truth, though some good may be done at first, evil is sure to ensue in the long run. There were 320 admissions of all classes. The death rate is 9 per cent.

Annual Report of the Warwick County Asylum.—There has not been any epidemic here, but there were one or two accidents of a serious character, one being loss of the sight of an eye by a patient who was pushed against a table by another. An attendant committed suicide. Dr. Parsey gives an interesting account of the inmates of the new idiot wards of this Asylum, but it is too long for quotation, and does not admit of being curtailed. The death rate is about 9·8.

We have now reviewed every report which reached us in time, and, in conclusion, one remark appears to be called for with reference to the English Asylums. We have read the entries by the Commissioners in Lunacy, when they have been published, most carefully from beginning to end, and while we have no hesitation on the whole in calling them sensible and practical, there is an omission which strikes us as being not a little peculiar, and that is, there is not in a single instance, so far as we can remember, any allusion made to the " Deaths, Injuries, and Violence " column of the *Medical Journal*. Superintendents are bound by the Act to be as careful and punctilious in registering every black-eye, as they are in the case of instances of restraint. Every one knows how particular the Commissioners are about the entering of seclusion, but the section under

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which they proceed is just as peremptory about injuries and violence. A Superintendent once candidly said to us that he never entered such injuries as bloody noses, black eyes, ordinary scalp wounds, and such like, because he did not think them of sufficient importance, and also because if he once began he would have little else to do. The Act, however, is plain enough, and does not permit any discretionary powers whatsoever, any more than it does about restraint and seclusion. We trust, therefore, that the English Commissioners will next year institute careful enquiries into the practice in vogue in the various Asylums, and we shall be much surprised if they do not find that the greatest possible difference prevails. Apart from the necessity, to which we have before alluded, of the Commissioners being strict in requiring a rigid and unvarying compliance with the requirements of the Lunacy Acts, it is certain that a comparison on a large scale of the restraint and seclusion, the medical treatment, and the deaths, injuries, and violence columns, if they were kept as scrupulously in all Asylums as we know they are in some, would be of the utmost value with regard to the results of treatment, if nothing else. It would be an improvement if the Journal had to be signed by the Medical Officer, as is the case with similar records in the Scottish and Irish Asylums; but, at any rate, it is almost impossible to overrate its value as a ground work for statistics. With this suggestion, which we urge on the Commissioners, we beg to take leave of the subject of the Asylum reports.

PART IV—NOTES AND NEWS.

QUARTERLY MEETING OF THE MEDICO-PSYCHOLOGICAL ASSOCIATION, HELD IN EDINBURGH.

A meeting of the Medico-Psychological Association was held on the 1st November, in the hall of the Royal Society of Edinburgh. Present,—Dr. Jamieson (who presided), Drs. Tuke, Howden (Montrose), Grierson, Cameron, Anderson, J. A. Campbell, Rutherford, Fraser, Smith, Howden (Haddington), Sanderson, Brown, W. C. McIntosh, and Ireland.

Dr. HOWDEN (Montrose) exhibited a tubercular tumour from the brain of a young woman, and read the notes of the case. (See *Clinical Cases.*)

ARTIFICIAL FEEDING.

Dr. ANDERSON read a paper on "The Mechanism of Artificial Feeding," at the same time showing the apparatus which he used for the purpose.

The CHAIRMAN said that he thought they should be greatly obliged to Dr. Anderson for explaining his mode, which was exceedingly ingenious. The improvement on the old method was very distinct, and he would be glad to hear observations from some of his brethren on the subject. He was not fond of feeding artificially by instruments if he could avoid it; and he thought that of late years an advance had been made by kinder treatment of patients, and by the exercise of more patience. He did not think that they had fed a patient

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