OCCASIONAL NOTES OF THE QUARTER.

Lunacy Acts Amendment Bill.

Notwithstanding the difficulty hitherto experienced in passing the Lunacy Bill, which last Session reached the House of Commons, there appears to be legitimate ground for prognosticating its passage into law during the present Session. The strong objection entertained by the Parliamentary Committee of the Association to some of its clauses, while fully recognizing the utility of others, remains unabated. As is well-known, the Committee have again and again urged their objections to the Bill, and their reasons have been stated as incisively as possible. The last opportunity afforded by the Government for the expression of the views entertained by the Association occurred at the time of the deputation to Sir Edward Clarke, the Solicitor-General, who at that time had charge of the Bill in the House of Commons. The marked attention with which he listened to the remarks make by the members of the deputation, and the clear grasp which he evidently had of the subject, favoured the hope that considerable modifications would be introduced into the Bill in the Lower House.

It is a matter of great regret, after such an interchange of opinion and friendly discussion, that the Bill subsequently passed into other hands, and there is no reason to believe that it will revert to those of the Solicitor-General. The more the probable influence of the Bill is considered, the greater is the conviction of those engaged in lunacy practice that the cumbrous forms which it is proposed to introduce to prevent the admission of persons not insane into lunatic asylums will render it increasingly difficult and exceedingly troublesome to place sufferers from mental disorder under prompt care and treatment. The forms at present required are frequently a complete obstacle to action being taken by the friends of the patient, and that this will be increased to a large and injurious extent scarcely admits of doubt. The mischievous interference with the power hitherto exercised by medical men of taking charge of single patients is a very dark blot on the Bill, and will still further jeopardize the patient's chances of being placed under other charge than that of relatives. In short, the whole tendency of the Bill

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will be to keep lunatics at home at a time when it is essential to recovery that they should be removed from its associations. It will further have the effect of inducing the removal of patients from British care to foreign asylums, out of the reach of proper supervision. That the Bill possesses some good features is, we repeat, not to be denied, but it is not of practical importance to comment on these, but rather to criticize and condemn those which are opposed to the best interests of the insane and to the position which the medical profession ought to hold with respect to the determination of the medical question, whether or not persons alleged to be of unsound mind should be placed under control and treatment. A reference to the number of this Journal for July, 1887, will recall the objections to the Bill contained in the "Observations and Suggestions," issued by the Association. The number for July, 1888, contains the additional paragraphs prepared by the Committee prior to the re-issue of the document to Members of Parliament and others. The Presidential Address for 1887, by Dr. Needham, in the October number of the Journal for that year, contains a full statement of the objections in detail to the principal clauses of the Bill, of which we disapprove.

Some passages in Dr. Needham's Address are so much to the point, and so well put, that we reproduce them here:—

"Those who made the Bill have filled it with curious anomalies, but their one idea seems to have been constantly kept in view—that in the diagnosis of morbid states of mind, the non-medical class has, in its ignorance, a better claim to public confidence than those who have devoted the trained intelligence of their lives to the discrimination of such diseased conditions.

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"The basis of the Bill has been stated to be principally the recommendation of the Select Committee of 1877, but in many essential particulars it travels far beyond, and in others it departs widely from them. The principle of the Scotch procedure has been said to have been adopted with somewhat fuller elaboration of detail, but in the machinery which regulates that procedure are initial conditions which cannot be reproduced in any English Lunacy Bill. The Scotch sheriffs and sheriff substitutes, who are skilled lawyers of standing at the Bar, have no analogues in the English magistrates, who become so, not necessarily because

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of their legal knowledge or judicial minds, but because they are respectable citizens with decided political sympathies, or in many cases, good business capacity.

"The primary and fundamental principle of the Bill is that in future no private patient shall be deprived of his liberty, either for his own benefit or the good of society, by an order under the hand of a friend or relative, and the certificates of two medical men, but that in every county and borough there shall be made a selection of justices, to whom petitions, supported by medical evidence, shall be presented. They are to consider the medical evidence of lunacy, and if they think fit, personally examine the patient.

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"Upon the magistrate is conferred the power, not of satisfying himself as to the *bonâ fides* and respectability of the medical certificates, and that the necessary legal requirements have been complied with, as in Scotland, but to decide as to the sufficiency of the medical facts adduced as evidence of insanity.

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"But there is one clause of which I have been hitherto unable to see either the need or any justification. It is to the effect that no person who is not temporarily insane only, or suffering from senile insanity, or desirous of voluntarily submitting to care and treatment, may be received into the house of a medical man as a single patient, except upon a special order by the Lord Chancellor, or a judge of the Supreme Court, in other words, unless he be a Chancery patient. I must confess my entire inability to understand the reason for this enactment. . . . Its chief incidence will be upon medical men in general practice, and upon the public which desires to avoid sending its insane relatives to asylums, but it will also deprive us of an excellent method of treatment in certain cases, and it is another indignity to the medical profession."

With Dr. Needham's criticism of the notices respecting the letter-writing of patients which the Bill requires to be posted in a conspicuous place in asylums receiving private patients, we conclude these extracts, again referring our readers to the Address itself:—

"These notices will act, in numerous cases, where rest and quiet are needed as the first elements of cure, as constant provocations, disturbing all the nice and pleasant relations

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which ought to, and at present so frequently do, exist between the patients and those who have charge of them."

The revised Bill (issued Feb. 25) is very slightly altered, and in no instance are the clauses to which exception has been taken, expunged or modified.

County Councils and Pensions.

It is premature to forecast or discuss the probable action of the new County Councils, to whose care the county asylums are being transferred. Time alone will show the effect of the change.

We subjoin, however, the following remarks made by Dr. Murray Lindsay in the current annual report of the Derby Asylum, as being germane to the subject, in regard to which so many medical superintendents of asylums feel so deep an interest :—

"As the question of pensions has of late attracted considerable public attention—and perhaps there is no question upon which more erroneous ideas prevail—it may be of interest to rate-payers and others to know some important facts connected with the pensions granted to the officials of this asylum, which are taken from a summary recently prepared.

"The asylum has been in operation over 37 years; the total number pensioned has been 23; the average length of service nearly 23 years; average age on retirement 57 years; number of pensioners deceased 12, being more than half the total, and 11 are still living; the average length of service of the 11 surviving pensioners is 25 years, whilst the average duration of pension enjoyed by the 12 deceased was six years.

"Proportion of pension to (salary or wages and allowances) the total value of office.

Maximum of two-thirds	1
Nearly two-thirds	1
Slightly over a half	3
One-half	5
Under one-half	8
Less than a third	3
About a fourth	2
Total number pensioned	23

"These facts and figures speak for themselves, and are surely sufficient evidence that the magistrates, whilst simply performing a statutory duty in accordance with the Lunacy Acts,

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