And now, gentlemen, to conclude, the object of this paper was rather to obtain the experience of you who have had such good opportunity for seeing the effects of this epidemic in different parts of the country; many of you have, doubtless, had some experience in yourselves of the depressing effect of the malady, and may be able to contribute to the general stock of knowledge, and give some useful hints on the pathology and treatment of a disease which has rightly been called a pest.

Some Points connected with Criminals. By JOHN BAKER, M.B., H.M.C. Prison, Portsmouth.

Of late years considerable attention has been directed to the science now commonly alluded to as criminal anthropology. The workers in this field have been mainly continental alienists, notably the Italians, of whom one of the most prominent is Professor Lombroso; and the writings of Mr. Havelock Ellis have brought the subject into prominence in this country.

The main conclusions of the Italian school are that the born criminal is a being who, by reason of a combination of bodily and mental peculiarities, belongs to a distinct type, that he is morally insane, and, therefore, ought not to be punished as a responsible, but treated as a diseased individual.

These views have met with opposition from several German authorities, amongst others, Kirn and Lutz, and it is probable there will not be found many in this country disposed to accept them in their entirety, for, as Morrison states in "Crime and its Causes," it has not yet been proved that criminals present any distinct physical conformation, nor can it be established that their mental condition is one of insanity or verging on insanity, although, taking them as a whole, the criminal classes are, it is quite true, of a humbly-developed mental organization.

Anyone who is acquainted with prison life cannot help being struck with the fact that there is a gradual descent in the mental scale from the occasional criminal, whose crime is the result of imprudence or misfortune, to the insane criminal, who is the victim of positive mental disease. Judging them, therefore, according to the measure of their mental capacity, they may be broadly divided into four classes:—(1) The occasional criminal, who is, to all intents

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and purposes, sane; (2) the born or habitual criminal, whose intellect is sound, but whose moral sense is more or less perverted; (3) the essential or natural criminal, who is, to a greater or lesser degree, intellectually and morally weak; (4) the insane criminal.

The various groups have no very distinct boundaries, but merge the one into the other. Linking the occasional with the habitual criminal is the professional criminal *per se*. With him it is surely a matter of calculation whether honesty is or is not the best policy; his gains are usually large, and he is quite prepared to undergo varied terms of imprisonments, regarding them fully compensated for by the periods of licentious liberty he now and then enjoys. His intellect is, as a rule, unusually keen. He is a criminal from choice.

As regards the habitual or born criminal, the case is somewhat different. In him, also, the intellectual faculties are usually good, but he frequently presents a perverted condition of the moral sense, which may best be described by the term moral obliquity. One of this class, on leaving prison, recently informed us that he would probably soon return, as he could not resist the temptation to steal, or, to use his own words, "I can't help it, sir; it's a maniar's upon me." Now this man was a clever tradesman and could easily have earned an honest living. The term mania employed by the convict, although expressive, was yet too strong to apply to his condition, for mania implies disease; but the craving "upon him" was not due to disease, but to a gradual perverted development of the moral sense. In some cases this moral obliquity is latent, it is hereditary, and becomes more and more intensified by education, habits, and surroundings. When quite young such persons embark on and continue in a course of crime, encouraged by the approval of elders and stimulated by the applause of companions. Bad these men are, but surely not mad in the strict sense of the term. We have not educated ourselves up to that point where we can say of the habitual criminal that he is morally insane, and, therefore, irresponsible. Different men display special aptitudes for different occupations; in some cases this mental development exists in a high degree, and because it takes the higher intellectual, instead of the lower moral direction, we call it genius, and recognize it as a gift, the result of an innate brain power. So it is with the born criminal; he displays an aptitude,

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sometimes a genius for crime, but genius of this sort is not insanity, and, therefore, he must be held responsible for his wrong-doing. Plunder and gain are the objects he aims at, and there is method and plan in his operations, in which respect he differs from the weak-minded criminal, who displays little of either. In weak-minded criminals the mental defect assumes the form of both intellectual and moral weakness, the predisposing causes being a degenerate heredity, congenital defect, head injury and nervous disorders, *e.g.*, epilepsy. In such cases we approach more nearly the insane, and the question of responsibility becomes more difficult to answer; undoubtedly there exists, to a certain degree, a state of disease in the form of intellectual defect, more or less severe in different cases, and the moot point comes to be how far their offences are excusable, owing to the presence of this condition. On the mere dictum of a knowledge of right and wrong, they cannot be held irresponsible, yet it cannot be gainsaid that in many cases their crimes are the result, indirectly, at least, of the mental defect under which they labour.

Such individuals, when uncared for and left to struggle for existence, are cast aside in the busy world, and failing to find a means of subsistence in competing with others, almost of necessity have recourse to acts of an anti-social nature. Many find their way into asylums, but there exists a residuum which furnishes part of the prison population. According to Ellis, Marro, in Italy, found, amongst 500 prisoners, 4·2 per cent. of deficient intellect. In a population of 840, we found the percentage 2·5 per cent.; on the majority, sentence had been passed for repeated acts of petty larceny, the others had committed still graver crimes, *i.e.*, rape, arson, bestiality, manslaughter. When such persons are brought up for trial for minor offences, little interest is felt in the accused, and, as Mr. North has stated, except in cases of murder, where the sanctity of life is in question, their mental condition is seldom the subject of inquiry, offences of a less atrocious nature committed by such people rarely attracting attention, yet the same principles are applicable to many other forms of crime." . . . These remarks are applicable to the case of a man who was twice convicted of arson. There was a history of brain disorder in childhood, and one of his children was imbecile. On the second occasion the jury recommended him to mercy, on the ground that he might be of weak mind. The Court called no medical evidence in support of the recommendation, but was

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content with the testimony of two lay witnesses, who said that the prisoner's manner and conduct were consistent with sanity. Were the individual psychological peculiarities of these weak-minded criminals strictly investigated, and their modes of life and family histories fully inquired into, the question of responsibility might be more frequently raised in their cases.

These natural criminals make bad prisoners; they are, as they express it, frequently "in trouble." They are extremely credulous, and are easily imposed upon by stronger-minded criminals, and induced to break established rules and practise malingering. Malingering is carried out in three different ways—either by inducing disease or inflicting self-injury, by feigning symptoms which have no real existence, or by pretending continuance of genuine disease after recovery has taken place. Amongst the weak-minded factitious injury is the most common form, as they possess little initiative power, and are incapable of contriving and carrying out any sustained course of feigned illness. With weak inhibitory will power, with a disinclination to work, and urged on by others, they have been known to sacrifice a limb in a moment of impulse. This self-injury was carried out to a marked extent in one case. The prisoner, whose family history showed both insane and phthisical tendencies, sustained concussion of the brain at the age of 19, owing to a fall from a horse. He was sentenced to penal servitude for placing a sleeper on the rails, but had previously undergone various terms of imprisonment for larceny, drunkenness, desertion, and arson. Whilst undergoing sentence he placed his arm under an advancing waggon, which crushed the limb, and necessitated amputation. At a later period he almost severed his tendo-achillis, and on another occasion he induced a severe attack of cellulitis by inserting pieces of copper wire into his leg. This is a very exceptional case, but it certainly points to a depraved and degenerate condition of the nervous system.

It occasionally happens that weak-minded prisoners feign insanity; rarely does this take the form of delusional monomania, but rather of simulated mania, alternating with periods of melancholia. They sing and shout, use filthy and obscene language, tear their clothing, smear their persons and cell walls with excrement, and conduct themselves generally in an extravagant manner, more especially so when they know they are being observed. We can remember one case of a prisoner of a low type who was in the habit of dashing his forehead against the walls of the padded cell

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whenever he heard anyone approaching his cell door. However, he soon gave up the practice, and confessed his imposture. When they are physically incapable of keeping up the excitement any longer they proceed to the other extreme, and maintain a sullen demeanour, refusing to speak, and sometimes to eat, and so the cycle runs on until they give it up altogether, when it is by no means uncommon for them to confess they were acting at the instigation of another prisoner. It sometimes happens that even after confessing that they had been malingering a repetition of the same symptoms is indulged in. This may be accounted for in that they are stung by the taunts of their fellow prisoners on being detected.

Deteriorated mentally, many of these weak-minded criminals are degenerate physically. The following are the results of the examination of 25 such individuals (males):—

Their family histories showed the following record:—A tendency to alcoholism in seven instances, to insanity in five, to epilepsy in two, to phthisis in seven. Criminals as a rule, judging from post-mortem evidences, are extremely prone to tubercular affections. Ten had undergone a previous sentence of penal servitude, and 22, including the former, had been in prison for shorter periods, 23 were addicted to drink, six had suffered from syphilis, one from meningitis, two from rheumatic fever, six suffered from epilepsy (four acquired and two congenital), five had varicose veins, one heart disease, one hemiplegia, and one showed a peculiar condition, viz., marked atrophy of the scapular muscles.

The height ranged from 5ft. $\frac{3}{4}$in. to 5ft. 10in., but the average only reached 5ft. $3\frac{1}{4}$in., showing a stunted growth. The body weight on reception into prison varied from 116 lbs. to 154 lbs.

No safe diagnostic evidence of the criminal nature can be evolved from head-measurements, or from the shape of the cranium, yet in the majority of these 25 cases the forehead was generally low, ranging from $1\frac{1}{4}$in. in the lowest type to $2\frac{1}{4}$in. in the higher; the epileptic men showed a larger expanse of forehead than the others. The measurements of the antero-posterior curve varied from $10\frac{3}{4}$in. to $13\frac{1}{2}$in., and those of the circumference from $19\frac{1}{2}$in. to $22\frac{1}{2}$in. In 13 cases the orbits were large, and in the majority the frontal sinuses and zygoma were prominent. As a rule the lower jaw was weak, but in four of the epileptics massive and square. Perhaps the most remarkable, and certainly the most signi-

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ficant, feature about the head was the frequent abnormality of the palate. In only six cases could it be called normal; in the remaining 19 it was more or less contracted, assuming a V shape in five, saddle shape in two, and in the rest the dental arches were approximated on a more or less narrow, flat roof. In 12 the mammæ were but ill-developed. Seven presented marks of tattooing, the designs representing love, religion, nautical subjects, etc. We cannot think that tattooing has any special significance as regards criminals generally, for it is mainly found on those men who have either been soldiers or sailors. The proportion of large and small ears was about equal. The hearing was generally good. In only three instances was it defective, and that not to a marked degree, whilst in seven cases the eyesight was weak. The patellar reflex was exaggerated in one man, and deficient in seven, markedly so in one case, where there was defective co-ordinating power of the lower limbs. Sensibility was in most of the cases dull, but this holds good in criminals as a rule. They bear pain well. The cause of all this degeneracy, both mental and physical, is doubtless that of a tainted inheritance, brought about by a combination of drink, insanity, phthisis, and syphilis. It is not an easy matter for such individuals to obtain employment, even if they wished it, and they naturally fall into crime. The measure of their responsibility ought to be judged by a careful examination into their modes of life, family histories, and individual psychological peculiarities. It is the duty of society to protect them, to make provision when necessary for their mental state to be inquired into at the time of their trial, whatever the nature or extent of their crimes, for if left to themselves, their end in most cases is a felon's grave.

Public Asylum Dietaries. Ought they not to be more varied?
By J. A. CAMPBELL, M.D., County Asylum, Carlisle.

I touched on this subject in a paper that I published in our Journal in 1883, and mentioned several changes which I had introduced into the diet scale of the asylum I have charge of. I suggested that an expression of opinion of various asylum physicians would be useful, and might with advantage appear in the columns of this Journal. Dr. Rayner, in the Presidential Address to our Society for 1884, made remarks somewhat resembling those I refer to, and called attention to the difficulties that exist in comparing

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