the Herald Office, and that Sir Neville Wilkinson, Ulster King-at-Arms, be consulted on the matter by the Herald Office if necessary

The meeting next considered the lack of representation of its members upon the General Nursing Council of the Irish Free State, and it was resolved that the present Advisory Committee, composed of Dr. D. L. Kelly, Dr. J. O'C. Donelan and Dr. Leeper be appointed as a deputation of the Association to wait upon the Local Government Minister to lay the case before him and to solicit his attention to this matter.

The meeting then continued the discussion inaugurated at the last meeting (*vide* vol. lxxi, 1925, p. 625) by Dr. NORMAN GRAHAM on the malarial treatment of general paralysis. Dr. Graham kindly produced a typewritten synopsis of his valuable work and a very interesting discussion followed.

Dr. DUNNE, who had worked on similar lines, read a synopsis of his work, with the results of his treatment of general paralytic patients in the Grangegorman Mental Hospital (*vide* p. 343).

Dr. J. O'C. DONELAN, Dr. M. J. NOLAN, Dr. L. GAVIN and Dr. T. A. GREENE took part in this discussion, and a hearty vote of thanks was tendered to Drs. Graham and Dunne for their valuable communications, and expressions of satisfaction were general that such promising results had been obtained. The results which they recorded were keenly appreciated, and it was the unanimous feeling of the meeting that a valuable remedy for general paralysis had been found in many cases. It was felt that in regard to this treatment the pessimists of 1925 were now optimists in 1926. And Dr. J. O'C. Donelan confessed to his now being convinced of the great value of this treatment, the advantages of which both he and many other members were more than doubtful of a year ago. How the treatment effected the good results was still a mystery. The question of post-mercurial treatment was raised by Dr. NOLAN, and Dr. GRAHAM stated that he used no post-antisyphilitic treatment. Men treated by Dr. Graham had been able to resume work as masons and plumbers, and without disclosing their previous history of general paralysis had passed the authorities as most capable and healthy men.

The CHAIRMAN moved a vote of thanks to Dr. Leeper for his hospitality, to which Dr. LEEPER replied.

PARLIAMENTARY NEWS.

ASYLUMS OFFICERS' SUPERANNUATION (AMENDMENT) BILL.

IN the House of Commons on Tuesday, March 23, Mr. A. Taylor, M.P. (Lincoln), in moving: "That leave be given to introduce a Bill to amend the Asylums Officers' Superannuation Act, 1909," said that the need for the amendment of this Act was recognized by the House of Commons as far back as 1911, when it appointed a Committee to consider a Bill introduced by the noble Lord who is now Assistant Postmaster-General. (Hon. Members: "Agreed!")

Question put and agreed to.

The Bill ordered to be brought in by Mr. Taylor, Mr. Thomas Williams, Mr. Paling, Mr. Riley, Mr. Thomas Kennedy and Mr. Robert Richardson.

Asylums Officers' Superannuation (Amendment) Bill, "to amend the Asylums Officers' Superannuation Act, 1909," was presented accordingly, and read the first time.

On Wednesday, March 31, Mr. Taylor moved the second reading of the Bill, but as several hon. Members objected, it was automatically defeated.

The Asylums Officers' Superannuation (Amendment) Bill, therefore, is dead for the moment and cannot be re-introduced until the next session of the House.

THE MENTAL AFTER-CARE ASSOCIATION.

ANNUAL REPORT, 1925.

FEW who are familiar with the work of this Association can be in any doubt as to its value to the community, and the evidence of good and conscientious work is to be found in every page of this report, while evidence of its good management and administration was produced at the Annual Meeting by Sir Maurice Craig, the Treasurer, who drew attention to the fact that the expenses of administration

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only accounted for 7% of the total expenditure (surely a record for any charitable body), while contributions from patients and their friends amounted to over 30% of the total receipts.

All who had the privilege of working with the late Dr. Henry Rayner will realize the loss his death has been to the Association, for as Sir Charles Wakefield (the President of the Association) truly said in his opening remarks at the Annual Meeting, he had during his life "with all his heart and mind and soul, given great and generous service to those to whom the Association was privileged to minister."

During the year as many as 1,431 cases (males 451, females 980) were dealt with, being an increase of 255 over the previous year, and the largest increase in any year, which appears to be conclusive evidence of the insistent demand for an organization of this kind fulfilling functions carried out by no other body.

The aims of the Association are set out as follows:

1. To bridge over the difficult period following discharge from a mental hospital, to assist medical superintendents by visiting the homes of patients about to be discharged, and reporting to them on their condition, and also to keep in touch with those on trial with a view to reporting on their condition before final discharge.

2. To establish anew in each convalescent patient a degree of self-confidence, and to give them encouragement in the knowledge and assurance that they have in the personnel of the Association actual, sympathetic and personal friends, who are ready and anxious to stand by them and see them through their new difficulties.

3. To board them out in cottage homes so that they may have an interval of change of scene and air, during which period they can readjust themselves to their post-institutional conditions.

4. To find them employment.

5. To give them grants in kind or money towards maintenance while seeking work, and provide them with necessaries such as clothing, glasses, dentures, etc., and tools if necessary when work is found.

It is satisfactory to note that a considerable number of mental hospitals and Boards of Guardians give financial support, but it is quite clear that if the benefits to the community, resulting from efficient after-care such as this Association provides, could be really brought home to these various bodies their number would be much greater; in this connection it is noted that a Propaganda Committee has been appointed, which will no doubt make this one of their aims.

New and active branches definitely affiliated to the main body are much needed to extend the work of the Association, especially as there appears to be a feeling in most areas that association of this work with that of the local mental deficiency workers tends to blur over a line which patients themselves and their friends recognize as a very definite one, and one upon which they are frequently very insistent; moreover the work is of an entirely different nature. It is satisfactory to note that a Conference for this very purpose was held in December, of committees and medical superintendents, which has resulted in the formation of new branches in several counties. The Council, in its report, records its very high appreciation of its officers, "who, even with the large numbers now passing through their hands, never appear to lose the valuable power they possess of individualizing each case; their power of intuitive understanding and sympathetic tact is one of the most important assets of the Association," and we feel sure that all who have experienced the services of this body will endorse this well-merited praise.

THE TRAINING OF MENTAL DEFICIENCY NURSES[1].

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[Editor's Note.—As its author is in the service of the London County Council, it is necessary for us, in accordance with its regulations, to state that the L.C.C. is not in any way responsible for the opinions and conclusions expressed in his paper.]

[1] Reprinted from *The Nursing Times*, March 20, 1926, by kind permission of the Editor. This does not apply to the Appendix.—Eds.

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