were converted into dormitories under pressure of space, and remain as dormitories to this day. In glancing through the statistical tables we note that the causation in one case is attributed to general paralysis. We have before adverted to this matter in connection with other Scottish asylums. We conceive that it is not altogether an untenable view that general paralysis might be deemed to be organic brain disease, and thus returnable as a cause. But this can only be in a case where the evidences of paralysis, such as are seen in a case of general paralysis of the insane, are found in an absolutely sane man. The rarity of such a combination of circumstances would justify a full history of any case in which it existed. On turning to the next table (the form of insanity) we find that two patients admitted are classified under the heading of general paralysis.

Lanark.—The Commissioner reports :

A very pleasing feature in the treatment of the patients was the large amount of interesting literature which was freely distributed throughout the institution. On the tables in every ward there were found books, magazines, and newspapers. Such a generous and thoughtful provision for the entertainment and the distraction of the inmates of asylums is, unfortunately, not common. The number of patients who were seen reading shows that the privilege is appreciated, and Dr. Kerr stated that the number of books destroyed is not great. The arrangement added markedly to the homeliness of the wards, and it no doubt increases the contentment of the patients.

As far as we can calculate from the figures in the report, this excellent asylum seems to have cost considerably less than £300 per bed, all the later additions being included in the computation.

Roxburgh.—This asylum had the misfortune to be the subject of an expensive and fruitless lawsuit, which has demonstrated that the Secretary of State in Scotland can send a criminal lunatic to any asylum he likes. The asylum authorities have to bear the cost of maintenance unless they can saddle some parish with it. In this case no parish could be thus saddled. As the asylum authorities could get no redress they gave notice to all concerned that the patient would be discharged on a certain day. This was done, but the report does not say what was the after history. We are under the impression that such a course would be illegal in England.

Dr. Johnstone gives the particulars of an escape. A man who had a good deal of liberty absented himself for a few days and then returned of his own accord. Later on he absented himself for six months, working at his trade as an engineer near Glasgow. When he found "the outside world less kind than the asylum he came back and begged to be taken in again."

The assignment of 139 causes in 78 admissions betokens more than usual energy in unearthing etiology. In nearly half the cases hereditary predisposition was found.

Some Scottish Royal Chartered Asylums.

The Crichton.—A specially designed sanatorium for the care and treatment of phthisical patients was nearly completed at the time of report. It is built of wood on a brick foundation, with a slated roof. The wards

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open on verandahs for the better carrying out of the open-air treatment. There must have been reasons for preferring wood to stone or bricks; but, unless it is intended to cremate the building after a time, those reasons are not apparent to us. We are under the impression that experienced authorities have assigned the marked phthisical mortality of certain wards in old asylums to the retention of morbid elements by the wood in floors and fittings.

Dundee.—In the report, dated June 15th, 1903, the Directors detail the crisis through which this old institution is passing. The District Lunacy Board has agreed to purchase the asylum property at West Green for £90,000. A Bill to legalise the sale passed through Parliament, and only needed Royal sanction to become an Act. Meanwhile, though some suggested that the Directors should apply the purchase money in small grants, the majority decided that a new asylum should be bought or built.

Dr. Rorie is a strong advocate of keeping recent acute cases in bed for some time after admission, in parallel with the usual practice of ordinary hospitals. He thinks that it tends in most cases to materially shorten and mitigate the severity of the attack.

Alcohol took a very heavy toll in the causation, 39 of 87 males and 41 of 114 females being so classified.

Edinburgh.—The delay and uncertainty in the completion of the new City Asylum at Bangour continues to cause the greatest trouble here, the pauper wards being so filled as to impede the admission of private patients at the lower rates. Vigorous remonstrance led to the City authorities providing temporary accommodation for 150 patients at Bangour. Alcohol was assigned as a cause in 28 *per cent.* of the admissions; 13 *per cent.* of the total admissions were general paralytics. In remarking on an outbreak here of asylum dysentery, which Dr. Clouston, being then at Carlisle, was the first to describe as long ago as 1864, he reports an entirely new and most important fact—two of the cats of the wards being found to be affected with the disease. Dr. McRae will probably publish a detailed account of the epidemic.

In the causation tables we note that of 189 male admissions no less than 13, or 6·8 *per cent.*, were classified under syphilis. In respect of "venereal disease," the five-year averages of the English Commissioners give a percentage of 3·5 for all male admissions. When divided into "private" and "pauper" this general percentage is broken up into 6·4 and 3·1 respectively. Of course, the discrepancy in this respect between the two social states may be accounted for in part by the better chances of obtaining accurate histories in cases arising in the upper classes; but it is a point which claims some attempt at elucidation, if only for the sake of science. We venture to suggest that a note in the JOURNAL by Dr. Clouston would be acceptable, seeing that at Morningside there are large numbers of both classes, and both classes are subjected to the same methods and the same energy of inquiry.

Montrose.—Dr. Havelock animadverts—and justly, too—against the inconvenience that may occur from the present regulations for admission

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of voluntary boarders. His remarks apply equally to England. He had a personal application to be taken in from a gentleman. It was explained that the previous sanction of the Lunacy Board was required. The patient warned him that self-control was departing and that immediate care was required to obviate risk of danger. Dr. Havelock took him in as a guest for the three days elapsing before official sanction was received. Dr. Havelock suggests that this sanction should follow admission, and this we entirely endorse. The following figures are striking:

	Males.	Females.	Total.
Total admissions . .	80 .	81 .	161
General paralytics admitted	5 .	6 .	11

Murray, Perth.—The laundry, which had been refitted and modernised within the last ten years, was almost completely ruined by fire. Dr. Urquhart points to one case among his admissions as notable:

A young man of limited education, who had harassed his mind with ill-considered studies in philosophy and other difficult subjects. Passing on to dabble in mesmerism with a friend of like tastes, he rapidly developed delusions of unseen agency and of a conspiracy against his life and interests. How far the hypnotic experiments may have determined his insanity is of course an open question. I believe, however, that these did more than merely tinge his morbid ideas, that they constituted the determining cause—the last straw, so to speak, to overweight his ill-directed activities.

Part IV.—Notes and News.

MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

Annual Meeting.

The sixty-second annual meeting of the Association began at 11 a.m. on Thursday, July 16th, 1903, at the Medical Society's Rooms, 11, Chandos Street, Cavendish Square, London, W. Dr. Wiglesworth, the retiring President, occupied the chair.

Present: J. Wiglesworth, A. R. Urquhart, P. W. Macdonald, W. R. Dawson, R. Jones, A. Miller, C. Mercier, G. Braine-Hartnell, H. H. Newington, A. R. Turnbull, C. H. Bond, R. C. Stewart, H. Rayner, L. C. Bruce, C. K. Hitchcock, E. B. Whitcombe, E. W. White, T. B. Hyslop, R. R. Leeper, J. P. Richards, L. R. Oswald, N. T. Kerr, J. C. Johnstone, W. F. Farquharson, L. A. Weatherly, J. B. Spence, C. A. Wigan, H. A. Benham, D. Blair, C. S. Morrison, S. R. Macphail, T. O. Wood, J. Rutherford, J. Chambers, R. J. Stilwell, D. Bower, D. G. Thomson, R. Legge, F. Beach, F. Watson, H. G. Hill, W. L. Andriezen, G. F. Blandford, J. K. Will, G. S. Elliot, G. H. Savage, C. Edwards, R. Langdon-Down, T. C. Shaw, F. R. P. Taylor, J. E. M. Finch, D. Nicholson, J. W. Higginson, H. Barnett, H. Corner, W. F. Menzies, F. H. Edwards, F. Edridge-Green, W. Douglas, J. Scott, R. H. Cole, S. W. Lewis, F. W. Mott, E. F. Trevelyan, C. Clapham, M. Craig, R. L. Rutherford, R. H. Steen, C.H. Fennell, W. J. Mickle, A. Wilson, H. Stilwell, A. S. Newington, G. E. Shuttleworth, H. F. Winslow.

Visitors: Dr. Koch, C. E. Beevor, Sir Victor Horsley, C. L. Tuckey, W. Melville, T. D. Savill, T. S. Meikle, J. Rorie, and Mr. Vincent Pantin.

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