calculated to give rise to undue influence, and the donee is unable to prove affirmatively that the donor had independent advice. Mr. Justice Wright held that in the case of *Morley v. Loughnan* there was positive proof of undue influence having been exercised. But his lordship was also prepared to hold, if necessary, that the relation between Mr. Morley and Loughnan was such a relation as brought the defendant within the second class of cases above referred to, and threw upon him the onus—which he had utterly failed to discharge—of vindicating the voluntary character of the gifts. This, if we mistake not, is a distinct advance upon previous decisions, and it will render the law of undue influence for the future much more difficult of evasion than it has been in the past.

Compulsory Legislation for Habitual Drunkards.

In the year 1890 the late Dr. Henry Monro sketched the following suggestions for a petition to Parliament on the subject of habitual intemperance.

Compulsory powers required.—That medical men should sign a statement that they consider certain forms of inebriety the result of *disease*, and consequently that such cases need the only remedy which is likely to prove of any real benefit, viz., *compulsory* seclusion in retreats or homes suitable for their treatment and cure.

Voluntary seclusion inadequate.—The present law permitting *voluntary* seclusion is almost useless, as persons suffering from the disease have a wholly *enervated will*, and are, in consequence, usually incapable of the resolution necessary to take any such steps of their own accord, for the purposes of their own cure, however much they may desire from time to time to escape from the overpowering impulse towards alcohol.

Method of certifying.—We would therefore earnestly entreat for legislation on the special point of *compulsory* seclusion under some such provisions as the following:—

We would suggest that one member of the family of the inebriate (or two if deemed more desirable) should "request," two medical men should "certify," and some judicial authority should be instituted, say a Commissioner for Intemperance, or Magistrate, or any other officially appointed person, to "authorize" any such certificate for seclusion.

Objection to ordinary lunatic asylums.—We do not deem it desirable for the ordinary lunatic asylum to be assigned for the reception of these cases, "as, though such persons have lost

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ordinary moral control as regards alcohol, they are not deemed insane in other matters."

The kind of retreats desirable.—We think that retreats for these cases should be *public* institutions, managed by Committees possibly; but under medical care analogous to the existing lunatic hospitals (payment being made by those capable of payment); and it might be advisable further to suggest that the same certificates should cover the seclusion in private houses, if more acceptable to the relations of the inebriate.

Period of detention and leave of absence clause.—We would further suggest that the period of time covered by these certificates should in no case be less than one twelvemonth; though fixed periods of absence might be granted during that time, at the discretion of the medical officer of the institution, on *probation*, as is permitted by the Lunacy Laws, provision being made for the *immediate* recall of such patient upon the least breakdown prior to the specified time for the return of the case.

Security for sufferers under this disease.—We cannot help believing that with some such provisions as those suggested above, all possibility of any acts of injustice would be avoided, and a means of cure provided for a daily increasing disease which it is impossible for the medical profession to treat effectively without the support of the State.

It has been thought well to carry out these suggestions, the essential feature of which is the *compulsory* instead of the voluntary seclusion of inebriates whose lamentable habits are due to disease. An opportunity for making an effort in this direction has occurred, in consequence of a Departmental Committee having been appointed by the Home Office. This Committee not having closed its sittings, a memorial was drawn up for presentation to this Committee, and a number of influential signatures were obtained in support of its prayer. We think it well to place it on record in the pages of this Journal, and trust that no long time will elapse before compulsory restraint will become legal, at once for the benefit of the inebriate, and in order to mitigate the intolerable misery from which his family, in countless instances, suffers.

Copy of the Memorial.

We, the undersigned, members of the medical profession, having had experience of the great difficulty which now exists in dealing with inebriates, respectfully urge upon the Committee the pressing need of further legislation concerning them.

At present provision is made to a very limited extent by the Inebriates' Acts, the essential feature of which is that a person

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may place himself under restraint for a period not exceeding a twelvemonth. This has been found to be of limited value, the proportion of persons, especially ladies, who will go before magistrates and voluntarily place themselves under restraint is small, and we think that unless the clause is repealed which requires appearance before two Justices, the Acts will remain of little value.

We earnestly desire the compulsory restraint, with all proper safeguards, of those men and women who cannot control themselves in this respect. We are of opinion that much good may be done to inebriates, if compulsory detention can be enforced for a sufficient time, and if upon release and subsequent breakdown, they can again be placed under control without delay or difficulty.

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