. . . and it encourages juries to do their duty by convicting offenders who deserve punishment, but not the punishment which perfectly sane criminals ought to receive."

It is extremely satisfactory to find not only that a judge will adopt this doctrine, but that a great journal of the authority and influence of the "Standard" supports and favours it. There is no doubt that, in the past, harm has been done and medical opinion has been discredited by the advocacy of the plea of insanity, involving the plea of total irresponsibility, in inappropriate cases—in cases, that is to say, in which some mental weakness or disorder was present, but in insufficient amount to wholly exonerate the convict from respon-ibility. We commend this doctrine of partial responsibility, which had a warm and distinguished advocate in Dr. Yellowlees at the recent meeting of the British Medical Association, to the earnest attention of medical experts. No only is it more scientific and more in accordance with the just merits of many cases than the plea of total irresponsibility, but it has a far greater chance of success in the Courts.

Reg. v. Coffin.

The prisoner, a dentist, was indicted for stealing from the pockets of overcoats at his club. The plea in defence was not insanity, but a series of nervous headaches, aggravated by influenza and by the death of a near relative. It was urged that though the prisoner was not insane, his mind was to some extent affected, and sufficiently so to negative any presumption of felonious intent. The jury acquitted the prisoner.—County of London Sessions, April 29, 1895 (Mr. Bompas, Q.C.).—"Times," April 30.

This case is remarkable for the complete acquittal of the prisoner in spite of the facts not being disputed, and of the plea of insanity not being raised.

Captain Leroux, of the barque *St. Joseph*, was recently tried before the Marine Commercial Court at Cherbourg, charged with having abandoned his ship. The Court found that he was at least temporarily irresponsible for his actions, but suspended him for two years, and sentenced him to two months' imprisonment. Captain Leroux was seized with a fit in Court, and on the restoration of consciousness was found to have right hemiplegia.

THE CLINICAL RESEARCH ASSOCIATION, LIMITED.

This Association was originated in the autumn of 1894 for the purpose of assisting medical practitioners "in the investigation of the causes, progress, and results of morbid processes, whenever help to this end may be gained by accurate reports on the results of microscopical, chemical, or bacteriological examinations." The Association is a Limited Liability Company, controlled by doctors, the majority of whom are medical men in actual practice. The work of research is carried on by experts having no direct pecuniary interest in the Association, otherwise than as salaried officials. With regard to the provision of funds for carrying on the work, members are not at present asked to pay an annual subscription, and this course will be followed until the end of 1895. Thereafter, whatever course is followed in respect of mode of payment, all medical men who have joined before that date will be considered as original subscribers, and will be exempt from further subscription, should any such be found desirable. These facts are taken from the "Handbook" of the Association (obtainable from the Secretary, Mr. C. H. Wells, 1, Southwark Street, London Bridge, S.E.), to which reference may be made for full details as to the scope of the work undertaken, methods of transmission of specimens, scale of charges, etc. Urine, sputum, water, diphtheritic membrane, and morbid tissues generally, are examined. Results are communicated by telegram, if desired, and we can state from personal experience that the

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work is executed with promptitude. As to its efficiency, the names of the gentlemen undertaking the actual research work is sufficient guarantee.

The Association, which already has a long list of subscribers, has proved of great service to private practitioners, and in some instances also to medical men connected with asylums for the insane. In the latter direction, however, there is still, in our opinion, a considerable sphere of usefulness open to it. Even in such of our asylums which may be said to be well equipped in respect of laboratories, we apprehend that certain researches (*e.g.*, bacteriological, analytical) would scarcely be undertaken with full confidence. *A fortiori*, the Association should prove of considerable service to all such institutions as are unprovided with the necessary facilities.

Although nerve-tissues are not the only tissues of interest to asylum workers, around them our chief interest naturally centres; and we therefore are concerned to ascertain in what respect and how far the Association is prepared to meet our special needs. In the "Handbook" it is very properly pointed out that portions of brain and spinal cord sent up for examination should be placed in a chrome solution. On inquiry we learn that in certain cases in which tissues have been sent up from asylums a proper examination has been rendered impossible by faulty preliminary treatment. The Association is in a position at the present time to conduct the examination of nerve-tissues after the methods commonly followed, and, we are able to add, is prepared to make the necessary arrangements for examination according to the special methods now available, in proportion to the demands which may be made upon it by workers in neurology.

We commend the Clinical Research Association to the notice of asylum physicians, and would refer for details to the "Handbook" already mentioned.

NOTE ON A HEAVY BRAIN.

In the "Lancet" for July 20th, 1895, Dr. Cowie Grant reports a case of epilepsy which came to an autopsy, and in which the brain was found of unusual weight. The patient was a male, æt. 43. There was a history of epilepsy of seven years' duration. Prior to this he had been a very intelligent man, and fairly strong, though he occasionally suffered from headaches. He now and then drank heavily. On admission to the asylum he was in a state of epileptic dementia. He died in the *status epilepticus*. The necropsy disclosed the following:—Circumference of head above eyebrows, 25½in. Skull bones of normal thickness. Dura thickened throughout, adherent to skull at several points. Falx cerebri ossified for a considerable part of its extent. Pia-arachnoid milky, and "as thick and tough as an ordinary dura mater, while its vessels were varicose and tortuous." Adherent at several parts, chiefly in the frontal region. Cleared of all membranes and freed from all fluid, the brain weighed 67 ozs. Gyri appeared normal. No pathological changes, whether macro- or microscopical, were found in the brain. There was "an enlargement" of both choroid plexus of the lateral ventricles, and a partial ossification of the left one. It may be added that the pia-arachnoid itself weighed 4 ozs.

HOLLOWAY SANATORIUM.

Report of Mr. Gully, Q.C., assisted by Dr. George H. Savage.

After reporting upon the whole circumstances in connection with the death of Mr. Thomas Weir, the document concludes as follows:—

"Two questions arise as to Weir's treatment.

1. Was the dry pack proper treatment?
2. Was it administered with proper care and precautions?

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