ing whether there might not be introduced here a method of treatment and study new to this country. Since Conolly's efforts towards the abolition of restraint, no improvement has been urged so great as this. Its adoption would, we are convinced, diminish the increase of insanity, promote the comfort of the sufferers, and alleviate the heavy burdens on the public purse as well as on private benevolence.

The legal position of the suggested clinical wards cannot here be discussed. It is, moreover, closely connected with another question which it is impossible for the present to enter on. The inmates of lunatic asylums may be classified as recent cases of whose recovery there is reasonable hope—chronic cases which derive benefit from asylum treatment, and chronic cases which are beyond all possibility of alleviation. The disposal of the last and some of the second class of cases is still an unsettled question. Their detention in asylums, their confinement in poor houses, and their treatment on the cottage or family system have found and find their respective supporters. This subject also occupied the attention of the association, and to it we shall return.—*North British Daily Mail.*

Middle Class Asylums for the Insane.

The provision for the care and treatment of lunatics made by the State is for paupers only. Why this should be, it is difficult to find a satisfactory reason. Asylums meet a public want; and it has always appeared to us that it would be about as rational to limit prisons to the reception of pauper criminals, as it is to limit asylums erected with the public money to the reception of pauper lunatics. As it is, however, the wisdom of Parliament has decreed that the very classes which have found the money for the erection of our public asylums shall be excluded from the benefits they confer. Conolly made strenuous efforts to remedy the evils which flow from this omission, but found great difficulty in interesting the public in the matter. He had, however, the gratification of promoting by his influence the establishment of the Coton Hill Asylum, near Stafford, as a place of treatment for patients of the middle classes. Of such institutions there are several in England, but in far too insufficient number for the accommodation of the patients belonging to the independent classes, the greater proportion of whom are accordingly sent to private establishments, in which the cost of maintenance must be regulated by the necessity to provide an adequate profit for their proprietors. The English public

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asylums for the middle classes have, like our own public asylums, been erected chiefly by means of contributions and legacies. The charitable portion of the community has thus voluntarily undertaken a burden which should have been borne by the whole nation. But this inequality becomes, in our opinon, an injustice when, as is a common practice, the surplus of the payments for some patients are taken to supplement the payments of others. There are few families in which the maintenance in an asylum of an insane member does not fall as a heavy burden; yet many families who can ill afford it make serious sacrifices to secure to the sufferer every possible advantage. To take part of the payments made under such circumstances to lighten the burden of others, is simply to make the miserable relieve the miserable; and even where there is no particular want of money in a patient's family, the principle of requiring higher payments than are requisite for his own maintenance, in order that benefits may be extended to others, appears to us to be simply fining a man because he had the misfortune to become insane. The proper course, in our opinion, would be to levy the requisite funds from the whole community by assessment.—*From a Revien of Dr. Conolly's Life in "The Scotsman."*

The Case of Santa Nistri.

The inquest on the body of a poor patient, Santa Nistri, who was admitted into the Hanwell Asylum suffering from general paralysis, and who died there after a fortnight from the effects of frightful injuries received in the asylum, has ended in a very unsatisfactory manner. The verdict of the jury was that death resulted from the injuries received in the asylum; but there was no evidence to show how they had been produced. Considering what these injuries were—that the breast-bone was broken; that the third, fourth, sixth, and seventh right ribs, and the fourth, fifth, sixth, and seventh left ribs were broken; that the chest was bruised; and that the left eye was very black and lacerated,—it is sufficiently plain that, however the event may have happened, the poor fellow was effectually crushed to death. It will require, too, we cannot but think, a faith not less than that which removes mountains, to believe that all this destruction could have been done without any attendant in the patient's ward or anyone in the establishment having the faintest notion how it occurred. The vague and lame story of the deceased having stumbled over a mat and fallen on the floor—

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