audience of the Royal Institution, contained much interesting matter, skilfully arranged and characterised by originality of view. What is of interest to our readers, however, is not so much the contents of the lectures, but their significance.

That part of the English educational system which is represented by those archaic establishments, the Universities of Oxford and Cambridge, has hitherto so slightly recognised the existence of psychology as an aid to teaching, and of the brain as the fundamental fact of mental development, that the phenomenon just reported is at once astonishing and of good omen. That a Master of a College in Cambridge should appear before the public as a teacher competent to direct pedagogues in accordance with scientific methods opens vistas of hope for the expansion of our educational system in consonance with the dictates of modern psychology. The deadly upas of mediæval culture has too long spread its baleful influence over those educational establishments; but with Dr. Hill at Cambridge, and Dr. Burdon Sanderson at Oxford, the pure light of science is already proving a revivifying antidote to the bacteria of scholasticism.

Neurologists and Alienists.

Specialism in medicine, as in other departments of knowledge, has its special dangers in contracting the mental vision; but it has undoubtedly done much for scientific progress. Medical specialism, in addition to scientific advantages, offers a certain convenience to the public in enabling them to obtain the advice of those who have intimate knowledge of particular forms of disease, and who are therefore presumably best qualified to treat them.

Medical specialists, as a rule, abide by their specialism, and promptly relegate to other consultants any case which does not appear appropriate to their limitations. For instance, we should hardly expect that a patient who had strayed into the rooms of a neurologist would be retained for an operation to relieve him of a cataract.

It is, indeed, of frequent occurrence that one specialist in the course of his medical duties finds it necessary to have further

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advice from another specialist. We have known a case of detached retina, apparently suffering from visual hallucinations, so obscure in local symptoms that the diagnosis could not be absolute without the opinion of a skilful ophthalmic surgeon.

This reasonable division of labour, which cannot but be productive of the best results for the patients affected, does not apparently hold good in regard to cases of mental disease. Herbert Spencer tells us that the labourer in the village alehouse says very positively what Parliament should do, and there are not a few occasions when the plain man declares himself a complete arbiter. Indeed, a learned judge placed it on record that he considered himself or any other intelligent man capable of diagnosing insanity. We need not enter on that discussion again, but would rather inquire how it is that neurologists have come to treat mental disorders which lie beyond the range of their ordinary practice.

This has arisen, no doubt, to a large extent owing to the circumstance that the friends of insane patients are most unwilling to recognise the fact of mental disorder. They prefer to consult a neurologist rather than any physician whose name is associated with the treatment of insanity, just as they prefer to speak of mania as hysteria and of gross delusions as mere fancies.

There is no doubt that the records of asylums and the case-books of alienist physicians show that insane persons are treated by neurologists in considerable numbers. Often these patients have been under the care not of one, but of several neurologists, a progress which has been described, perhaps with undue levity, as the "regular neurological round."

Whether the neurologists are specially qualified to treat mental disorders, or whether they should relegate them to the alienists, is a question for neurologists individually to decide. The alienist, however, to whom these patients usually come sooner or later, after running the gauntlet of such a pharmaceutical buffeting as is entailed by the regular round, is compelled to recognise that such a course of preliminary treatment, often combined with the stock prescription of travel, has not unfrequently introduced an ætiological factor of no small prognostic importance, and the moral is that the cobbler should stick to his last.

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