which patients were sent to one or other asylum were stated. There are points of difference in statistics which can only be explained by variations in the environments and class of the patients admitted.

Barming Heath .- Dr. Wolseley Lewis contributes to the report a valuable and instructive history of this old asylum, illustrated by a plan of the whole estate, which shows in various coloured inks the additions that have been made from time to time. The first dealing with the treatment of lunatics by the county authorities was in 1828, when plans were passed for the erection of an asylum. This was opened in 1833, having accommodation for 174 patients. The safekeeping of inmates being the first consideration, the buildings were much on the lines of prisons. In 1840 better ideas began to prevail, and in 1844 Quarter Sessions reported against the improper practice of sending patients too late for the promotion of recovery. But in this year among other additions was a bath of surprise. The latter is instructive as illustrating the barbarous methods of treatment in those days. "It was reserved for the very violent patients, over whose head was placed a hood, and round whose waist a girdle with rope attached was fastened; they were then led by a side door to this bath of cold water, into which they unexpectedly plunged." Since that day improvement has gone on by degrees, till now Dr. Lewis can write that the last additions represent the latest ideas in asylum architecture. Alcohol does not seem to be a prolific factor of insanity, only 40 cases out of 387 having this marked up against them. Heredity occurs in a third, while senility and prolonged mental stress account each for about one-fifth of the admissions. General paralysis was found in 30 out of 194 men, while in only 1 case in 219 women. Melancholia, acute, was found in 32 and 82 cases respectively, and largely exceeded the acute mania cases-23 and 37. The general recovery-rate is 41 per cent. on comparison of direct admissions and direct recoveries.

 $\dot{Chartham.}$ —Alcohol does not seem to be a more important factor than at Barming Heath. General paralysis occurred in a considerably smaller proportion, but the facts as to melancholia and mania were reversed, mania being found in 50 and melancholia in 35 out of 186 admissions. The recovery-rate was somewhat lower than at Barming Heath, but this can be probably accounted for to a large extent by the greater delay in the admission of recent cases. Of those brought within 3 months of falling ill, there were 57 per cent. of total admissions at Barming Heath, and only 41 per cent. at Chartham.

London County.

The rate of increase in the number of patients under the care of this authority on December 31st, 1907, shows a tendency to go upwards again, after three years of gradual decline. As is pointed out in the report, there is always a tendency for the opening of a new asylum to be followed by a rush of cases, which have been kept back on account of accommodation being deficient pending the opening. Long Grove was opened in June, 1907. Still, as matters stand now, there is great improvement over the figures of former years. We note that the direct

admissions were actually less by twenty-three in 1907 than in 1906. The committee think that they are justified, on the whole, in assuming that the rate of increase of insanity in their area is a decreasing one, and, as far as we can see, this is so. Therefore they are averse to building their eleventh asylum, for the present at all events. The Lunacy Commissioners have been pressing for this for some time past, but in addition to the fact mentioned above, the Committee have in view the possibility (now turned into a certainty by the issue of the Report of the Commission on the Feeble-minded) that unification of London lunacy administration would become probable. When this is carried out a considerable quantity of unused accommodation provided by the Metropolitan Asylums Board will be available. The Committee are further of opinion that a good deal has to be said about the certification and adjudication of pauper lunatics in relation to asylum accommodation. Until all these points are settled they propose to hold their hand.

The Report deals at some length with the really splendid offer of Dr. Maudsley in relation to a mental hospital. That offer has been already discussed in these pages.

In lamenting the large quantity of recurrent insanity, and the necessity, for legal reasons, of discharging those who are certain to come back again, the Committee hint at the urgent need for steps being taken "to reduce the alarming possibilities which now exist for the multiplication of degenerates by the unsound of both sexes."

The Statistical Tables of the London County Asylum.

We must confess that at first sight the amount of space taken up by these tables is startling. They occupy 160 out of the 360 pages con-tained in the report. The next impression is one of admiration for the zeal which has prompted the carrying out of this vast scheme of tabulation. The work is enormously increased by the fact that the figures of the contributing asylums, which in themselves are gigantic, are worked up together and summarised into one tangible whole. Where averages have been called for in individual asylum reports, they have been provided in the summary. We feel that the Asylum's Committee and its officers have laid every one concerned under a deep obligation in undertaking the heavy work of setting out in practicable form the facts recorded by its medical staff. There can be no gainsaying the fact that the present mass of information is the most valuable contribution that has up to this time been made to the statistical side of psychiatric science. The work has, indeed, been done well, set out plainly and conveniently. One great result of the new scheme, as it affects London, is that in the most important matters, such as causation, forms of insanity, and causes of death, it has become possible, for the first time, to give summaries of all the asylums' returns.

Turning to the scheme itself, it is only when one takes in hand this huge but compact enumeration of medical facts, relating to one-fifth of the pauper lunacy of the country, that one recognises the immense stride taken by the Association in the adoption of a new scheme of