

that his life even might depend upon it; but I could not induce him to say, or permit me to say, that he was otherwise than perfectly sane and accountable at this time. Throughout the interview he seemed morbidly afraid lest he should be tempted by the fear of punishment to make any statement which was not strictly true.

At the trial, after the evidence for the prosecution and part of that for the defence had been heard, the jury stopped the trial, and returned a verdict of acquittal on the ground of insanity, the judge (Mellor) expressing his concurrence in the following decided words:—"I am not at all surprised at your verdict. I am quite satisfied that it is fully justified by the evidence. The conduct and character of the prisoner have been such that an act of this sort could hardly have been the result of anything but disease. The evidence was so satisfactory that I do not think it necessary to make further observations upon the case. I think the verdict must recommend itself to general approval."

The New Metropolitan Asylums.

In June, 1867, a new era was begun in the Poor Law system by Mr. Gathorne Hardy's Bill, which comprised arrangements for meeting the epidemic requirements of London, and for relieving the workhouses and lunatic asylums of the imbecile, idiotic, and chronic patients, not dangerous or destructive, but quiet in their habits, leaving behind merely the infirm poor and the acute and violent lunatics, for whom the accommodation was thought sufficient. There was also another clause providing a bevy of dispensaries, which however has not been carried out, though it was probably one of the most promising parts of the Bill. As regards the arrangements for epidemics, recent events have shown them to be inadequate; it must be said, however, that in 1867 the idea of meeting visitations of severe epidemics by temporary structures was not even in its infancy, otherwise we might have been spared such structures as Stockwell and Homerton Hospitals, which will never be filled or even half-filled in times of ordinary public health, and which are too small for great emergencies. A rapidly expansive system, as by temporary hospitals or by tents, capable of enlargement and of

folding up and packing away when done with, is the proper plan for treating epidemics. What then is the proper one for quiet lunatics and imbeciles ?

What was the need for an extended system of asylum buildings for the metropolis? The Lunacy Commissioners were constantly complaining that harmless lunatics were kept, to their great detriment, in the workhouses, and that acute cases could not gain that early admission into the county asylums so necessary for their welfare. A different kind of building was proposed, because it was thought that the existing asylums were on too costly a scale for the harbouring of imbeciles and demented, that their appliances were for acute cases and convalescents, that there was a sufficient number of outstanding chronic cases to almost refill them. It was supposed that by separating the harmless and chronic from the acute and violent a less expensive dietary would be necessary, that a smaller staff would be required, and that as all intellect—or at any rate all intellectual appreciation of worldly intercourse—would be out of the question, the locale of the new asylums might be on cheap ground, though for Londoners still far away from London, far away from friends; where to be sent to live was to be sent to die, and where, once settled, it was presumed they would never again trouble society or guardians.

An appendix to the original idea was that the labour of the imbeciles employed on a large surface of land, bought cheaply, might turn out very productive; that to teach them farming, shoemaking, tailoring, &c., in short, to be self-supporting, would be agreeable to the Lunacy Laws and to public requirements. Very true; but out of this arises a difficulty, viz., that when a person, slightly imbecile though he be, has learnt to be useful and feels himself able to put forth his power, he longs for freedom, and this, though desirable, it is scarcely possible to give him; for it is a great defect in the Lunacy Administration of this county that because a person is slightly imbecile, or slightly demented, he should be put under restraint in a building where from the necessities of the case he is mixed up with and has to share the stringency applied to those whose restraint is unavoidable, but whom the necessity of protecting subjects him to the same lock and key. To the pauper-patient the case is different from the rich imbecile. In the upper classes it may be right to seclude an individual who, with no power of moderate mental energy or discretion, would throw away a large estate, or implicate old

and important family relations; but when the status of the lower classes is considered, a status to be maintained by a minimum of mental power and a maximum of manual labour, then the question of restraint of imbeciles becomes doubtful. If originality of thought were necessary for the gaining of daily bread thousands of human beings would starve. As it is, the business of the world is carried on by the result of the simplest kinds of objective teaching that have become to be almost reflex or automatic in their subjects; and thus, given a good physical constitution with strong muscles yet even feeble nerve-development, the conditions of remunerative labour are present.

That this is so is easily proved. Take the average intellect of multitudes of bricklayers' labourers, porters, hangers-on of docks, stable-helpers, &c., who, if tried by the most moderate standard of brain-scale, would be found wanting, deficient in moral sense, unable to read or write, pugnacious, incapable of the smallest process of comparison, and therefore of reasoning, wanting in application, and driven to work only by the mastering appeals of a craving appetite. And yet people of this calibre form a large class of those who find their way into these "Imbecile" Asylums. Work becomes slack, vicissitudes of weather, or the loathsomeness of their abodes bring on disease, and their only refuge is the workhouse-infirmiry; once there the defects in them are noticed, and, condemned, either for bad language, laziness, ignorance, or debility, combined with a phrenologically repulsive appearance, they are voted to be beyond the pale of society, and are sent to be immured within a stately prison. Lucky are they if, instead of the asylum, they are sent to the gaol, for once their term expired, they are free in the latter case; whilst in the former, they are dependent on the peculiar ideas of "personal responsibility" of the medical man to whose charge they are committed.

Let us take a few statistics from one of the Asylums. Here are about 500 "imbeciles" at work. Without doubt, 300 of these do an amount of daily work sufficient to keep themselves, at a fair rate of wages. But, it may be said, "these people work well enough under supervision, though left to themselves, they would be fit for nothing." Very good; but is it necessary to send them to a far-distant asylum for this supervision? Surely Boards of Guardians could find enough work and supervision for these without sending them to large and limited institutions. Taking these

300 disposable persons away, and estimating a similar number from the sister Asylum, we have a total of 600 *vacancies* which might be filled with a class really requiring admission, and would effectually drain the outlying patients in the County Asylums, and find still room to spare for new comers without the necessity of building a new asylum, as is in contemplation, or of enlarging the present ones.

A few words on the plan of construction of these new Metropolitan District Asylums at Leavesden and Caterham. The sites were chosen, the one on the north and the other on the south side of London (each distant about 20 miles from Charing Cross), for the more convenient arrangement and classification of the parishes; the northern, eastern, and western parishes sending their patients to Leavesden, and the southern and central ones to Caterham—not a very equal distribution, by-the-bye. As economy was the order of the day, a symmetrical arrangement on the block system was adopted; the “administrative” department (officers’ quarters, kitchen, laundry, &c.) forming the centre and the blocks disposed laterally. A long corridor on each side, into which the various blocks open, completes the scheme, which is simple, easily learnt, and practical. Out-lying come the usual impedimenta of gas-works, farm-buildings, shops, &c. One great addition to the usual range of asylum buildings is especially worthy of notice, viz., a hospital removed to a considerable distance, for the treatment of infectious diseases. At Caterham so great has been the pressure for space, that this special hospital has been converted into a temporary asylum for female imbeciles. The blocks, of which there are eleven, six female and five male, are divided into two classes, “general” and “infirmary,” the former holding 160 patients each, the latter 90. Each “infirmary block” has, moreover, 12 single rooms superadded for troublesome or special cases. The original estimate was for 1,620 inmates; 730 males, and 890 females. Already the accommodation is found insufficient.

Each “general” block is built in three storeys, the ground floor, with its offices, such as lavatory, scullery, store-rooms, &c., forming the dwelling and dining-room, whilst the two upper floors are dormitories, each holding 80 beds. The cubic space allotted is 320 feet in the day room, and 600 feet in the sleeping-room; in the “infirmary” on each side the space is upwards of 900 feet. The attendant’s bed-rooms are placed at the end of the dormitories, thus affording easy proximity in emergency; and here we may note the employment of a

man and his wife as charge attendants of the male blocks, with two male attendants under them. On the lower floors are earth-closets; on the upper, water-closets. Thus, each "block" is a house by itself, independent of, and quite separate in its economy from the others. When we say that there is one Medical Superintendent, and one Assistant Medical Officer (who has, moreover, to do the dispensing), we may be credited with truth in adding that the very strictest "economy" in supply of medical men has been attained.

Though the terms of the act defining the cases proper to be sent from the workhouses, viz.:—utterly irresponsible imbeciles and dements, were tolerably clear, there has been some difficulty of comprehending them by the medical officers of the various parishes and unions; thus among the patients sent down have been many of chronic rheumatism, chronic bronchitis, heart disease, simple epilepsy, *i.e.*, without mania or other dangerous complication, phthisis, debility, ulcerated legs (!), deaf-mutism, paraplegia, &c., all without the slightest mental lesion, yet unable to get their own living and a burden on the rates. All such have, of course, been discharged. But why were they ever sent? Beyond the expense incurred in sending them backwards and forwards, a great injury has been done to their personal feelings, and to those of their friends and relations in the fact of their having ever been sent to an asylum at all. How many histories of "cases" may from this cause be complicated, and medical men misled from the statement that So-and-so's father or uncle or other relation, as the case may be, was once in a lunatic asylum, the truth being that in order to take a pauper off the "indoor-relief" list, and charge him to the "common poor fund," he was improperly sent and placed under restraint. It is speaking well within limits to say that *scores* of such have been admitted and discharged.

Nor is there even the plea of economy to justify the transmission of these strictly workhouse-pensioners to the new asylums. The returns of expenses for the last quarter shew more than nine shillings per head per week! And even allowing for the fact that this is the first year of their existence, and that whilst the staff had to be tolerably complete from the first, yet the patients came in by piecemeal, there is yet no idea that the cost per head will be very materially decreased. Now, in the workhouses, the individual cost is much less, and moreover, some of the workhouses are excellently administered, and the patients themselves speak in

high terms of them, both as regards comfort and treatment. How is it then that in an asylum of more than 1600 patients, with a small staff of officers, with about 500 workers, with a good average dietary, and not excessive salaries, the weekly cost is nearly half as much again as in some County Asylums, where mixed cases of all sorts are received, and nearly as much as at Hanwell and Colney Hatch? The fault, we fear, is in the mode of administration. The system of carrying on the Metropolitan Asylums has never found favour with experienced and practical lunacy men.

So long as the authority is split up into sub-sections, each with its own leader, there must be a confliction of interests, and therefore a loss of motive power, which means waste. Another point, too, the great distance from London, and the absence of any convenient large town whence to draw supplies, cause large items for carriage and locomotion.

We can note, however, a favourable side to this plan of separating for economical purposes chronic and harmless lunatics, with imbeciles requiring restraint, from acute and violent cases; thus, in the former, from the similarity of their conditions, a simpler and more uniform diet can be used; the required quantities being greater, more advantageous contracts are obtainable; and speaking from positive knowledge, the amounts of extra diet required are very small indeed.

Next, the staff of attendants can be largely reduced—and here it may be as well to say that the nursing is after this fashion:—There are, in all, 11 blocks, six being for women and five for men; of the six womens' blocks, five hold 160 each, and the sixth (an infirmary block), 90. Of the five male blocks, four hold 160 men each, and the fifth (infirmary), holds 90. To each ordinary block of 160 patients, are four attendants, and though the supply is greater in the infirmaries, the average may be safely taken as one attendant to 40 patients (for in so large a staff one or more attendants will certainly be absent every day).

In no other class of asylums have we ever met with so low an average as one attendant to 40 patients, and yet the cleanliness and order in which we have invariably found them shew that the work can be got through, and that people may be found to do it, however severe and trying it may be. Again, the quiet habits of the patients allow of their being massed in large dormitories, saving the expense of single and more numerous wards. It is sufficient to point to a total building-cost of £80 per bed, to get a favourable comparison

with other asylums, the new Macclesfield Asylum, for instance. To counties contemplating the erection of new establishments, these principles might be advantageously borne in mind. Hitherto our asylums have been built to meet the emergencies of acute and chronic cases together, and as the requirements of the two classes are different, so do the existing structures suit neither class perfectly. For acute cases we want quiet, seclusion, &c., things more obtainable in the class of lunatic hospitals; for harmless and quiet patients the elaborate paraphernalia wanted for acute cases are unnecessary. It would surely be possible so to build new asylums as to arrange for the clubbing together of the harmless and the separation of the acute.

The plea will not hold that it is baneful from sanitary or prudential motives to club these quiet persons together in large numbers. Leavesden and Caterham shew that it is possible to have a happy family of 160 patients in a ward with very few casualties (and these mostly from epileptic fits), with great quietude and with the benefit derived from intercourse with a considerable number of their fellow-creatures.

These have been clearly shown by the new asylums, and they are, to our mind, among the most instructive facts that have been shewn. The defects are the insufficient extent of land, impeding the irrigation and the operation of the earth-closets, capable of six times their present amount of application, and the inaccessible part of the county where they are situated, isolating the patients from their friends, and creating a difficulty in retaining attendants, to whom no amount of comfort will repay loss of intercourse with the world.

To settle the problem of finally disposing the pauper lunatics in large towns, is like trying to demolish a social hydra. The following plan, however, is recommended; it has not yet been practised; probably not conceived. Let there be in each parish a building of simple construction, capable of holding say 100 to 200 strong-limbed imbeciles, and let these be employed in such work as they are best fitted for, and for which there is constant need, viz. :—paving, labouring, carting, street sweeping, &c., &c., taking care to have efficient task-masters, and the whole put under medical supervision. There would then be a chance of having our streets free from dust in summer and of snow in winter. Kept under an amount of restraint or supervision sufficient to *make them work*, they will still be able to enjoy the liberty so longed for, and to see their friends—separation from whom is one of the

greatest hardships entailed by the site of the new asylums. Under a stricter law, it might be possible and prudent to inflict moderate corporal punishment in case of malingering, or refusal to work; always, of course, under medical sanction. This may seem to be reverting to the dark days of Restraint; but any candid mind will confess that we are now in a period of reaction into a pernicious indulgence from the former exaggerated severity. Instead of the toothless and feeble old men who are now employed, and to whom it is an idle compliment to apply the word "work," we should have really sturdy youths and men, strong in muscle if weak in brain, who, if left to their own devices and the strain of competition for living, would fall prey to drink, or the acts of the wicked, but who, happy in their freedom from responsibility, and in the feeling of dependence on a stronger power, would lead comfortable and useful lives, not only *growing*, but with potentiality of some degree of *development*. This plan would have many advantages over the boarding out system; it would engage men in work to which they have been more or less accustomed, and for which there is positive necessity; it would prevent the risk of placing the mentally afflicted with imperfectly known persons; it would ensure skilled supervision, and it would keep them in the proximity of their friends, for whom they exhibit great affection, and upon whose sympathy they much rely. There would be no necessity for building afresh, for most parishes can boast of some tenement convertible to the purpose, and which by its freedom from the conventional public building style, would give more independent tone to the inmates. The parishes will not learn lessons. If they continue sending to these asylums (expressly stated in the act to be for Insane Persons ONLY) improper cases, then, without doubt, an enlargement must soon be made, for both are now full, and demands for admission still pouring in. On a recent occasion, the "Lancet," when commenting on some instances of deaf-mutes, whom it considered improperly sent to these asylums, recommended that the ordinary form of certificate used in county asylums should be adopted. Certainly, the details at present sent are too meagre; often absolutely *nil*. Great use would be derived from such items of information as to occupation, previous history, habits, delusions, &c., as are afforded in ordinary lunacy certificates; but all versed in lunacy know the utter futility of the recommendations of admission signed by the relieving officer and clergyman, or by the magistrate, all of

whom act upon the report made by the medical man—the really responsible party. If any additional security is required, let it be that of a second medical witness, as in the case of a private patient, not of lay persons, whose entire ignorance of the significance of certain symptoms, patent enough to the professional mind, might (and occasionally has done) led to a delay, possibly fatal. The public ought, on the whole, to be satisfied with the care that medical men have used in committing members of the social community to asylums. The difficulty of rightly interpreting the Act of 1867 has led to the temporary incarceration of improper cases, and of persons undoubtedly sane; all such, however, have been remitted. We commend the above scheme to the consideration of the Poor Law Board—a Board which honestly strives to do its work, though its very ancient and cumbrous machinery retards its progression, and allows evils to hold ground far too much in the van.

F. P.

Further Observations on General Paralysis of the Insane, and on the Morbid Changes found on Post-mortem Examination in the Spinal Cord. By R. BOYD, M.D., F.R.C.P., Ex-President of the Medico-Psychological Association.

(Continued from page 24 of the Journal.)

In my communication on General Paralysis in the previous number of the Journal, reference is made to tables, showing various particulars in 124 males and 31 females suffering from this disease, and in whom post-mortem examinations were made during a period extending over 20 years. As these tables were found to be too voluminous for publication in the Journal an analysis or summary only was given. A further reference to the subject may not be uninteresting, especially as relates to the spinal canal, the spinal cord, and investing membranes, since any notice of their condition in insane persons is entirely omitted, even by recent observers. These morbid changes, so frequently noticed by myself and colleagues at the Somerset County Asylum, and in many instances submitted to others for microscopical examination, can only have been overlooked in other institutions from the difficulty of exposing the spinal cord, so as to admit of its