

stimulus which catabolism receives, and to the *anabolic rebound* which follows he attributes the value of the drug in those cases in which a beneficial effect is secured. Upon the whole Dr. Easterbrook considers that the drug has a decided positive value in mental affections; in women he thinks it is more effective than in men, and especially in the insanities connected with childbearing.

Reviewing the whole subject (he worked with parathyroid, thymus, pituitary, cerebral, and other extracts), the author concludes that those extracts which consist mainly of proteids (albumen and globulin) and albuminoids have merely a dietetic value; but that those animal extracts which are rich in nucleins and nucleo-proteids produce, when given by the stomach in sufficiently large doses (60 grains and upwards of the dried extract daily), a definite metabolic perturbation, which in the main is a *plus* quantity. More than this, he thinks that the thyroid body contains a specific internal secretion, *i. e.*, contains a specific substance which stimulates metabolism, *viz.*, iodothylin, just as the supra-renal extract contains a similar body—sphygmogenin.

In the successful cases of thyroid treatment above alluded to the results were obtained by large doses, and not by the small or moderate doses.

The paper requires careful study.

HARRINGTON SAINSBURY.

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### 8. Sociology.

*Preliminary Observations on the Etiology of Asylum Dysentery.* (*Arch. of Neur., Lond. Co. Asylums, 1899.*) Durham, H. E.

An opportune outbreak of this disease at Claybury Asylum provided the material for this research. The inquiry was directed in two ways: (1) to search for a peculiar organism in the organs of fatal cases, which was successful; and (2) to try the effects of the blood-serum of those who had suffered for agglutinating effects upon known organisms. This method proved negative.

The following is his summary and conclusions:—(1) In seven cases of asylum dysentery the same organism was found in pure culture; it was absent in three cases not affected with the dysentery also dying in the asylum. (2) The organism is an extremely minute micrococcus. (3) It does not grow readily on the media which have been tried; subcultivations are especially difficult to establish. (4) The micrococcus was cultivated from the blood, spleen, liver, kidney, etc., of dysenteric cases in a state of purity. (5) The most luxuriant growths were obtained by inoculating peptone broth with a few drops of bile from dysentery corpses. (6) Growths are not obtained unless considerable quantity of the infected organs are planted into the broth; the ordinary platinum loop does not take up sufficient amount. (7) It would be interesting to know whether a similar organism is present in other forms of dysentery, such as occur in tropical and subtropical regions, as also in the so-called "amoebic dysentery."

In all cases the bodies were placed, very soon after death, in the

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freezing chamber of the London County Asylums' Laboratory at Claybury, which proved of great value. Dr. Durham states that his observations would hardly have been possible without this valuable piece of apparatus.

J. R. LORD.

*Special Classes for Mentally Defective School Children.* (Charity Rev., Aug., 1900.) Channing, W.

In this article Dr. Channing gives a lucid account of the case for special instruction of mentally defective school children. He lays stress upon the necessity of the early recognition of even slight deviation from normal development in the child, physical as well as mental (for the two are frequently correlated), quoting the observation of Mosso that "the way to begin education is to consolidate the motor nerve-paths which develop first, and after that the portion of the brain concerned with intellectual work." This is quite in accord with the doctrine long insisted on by Warner; and, in fact, from the time of Seguin onwards all successful training of the mentally defective has been based upon a recognition of the fact that physical must precede psychical education. The drawback is the late age at which, as a rule, mentally defective children come under institution care, and Dr. Channing rightly argues that more benefit would result were the child of three or under scientifically tackled in the kindergarten. However, as Dr. Channing remarks, "motor training is not at present intelligently understood, and there is too little of it in the early years of school life, even during the kindergarten period."

Passing on to the practical arrangements for dealing with exceptional children, Dr. Channing refers to the arrangements which have long been in existence in Germany and Scandinavia, and are now coming into vogue in England, for the special instruction of these "weaker brethren." Though America has been well supplied with resident institutions for the "feeble-minded" (including under this term idiots and imbeciles), it does not seem hitherto to have done much in establishing special classes as auxiliary to the primary schools, and it is the importance of these, under well-trained teachers, that Dr. Channing advocates.

G. E. SHUTTLEWORTH.

*The Training of Defective Children under School Boards.* (School Board Gazette, April, 1900.) Shuttleworth, G. E.

This is a paper read at the Childhood Society by Dr. Shuttleworth, who, by reason of his position and experience, is particularly fitted to speak on the subject.<sup>(1)</sup>

He traces the birthplace of the movement for special training of defective children to Halle, in Germany, as far back as 1863. Classes on similar lines were formed at Dresden, Leipzig, and Brunswick; and in 1894 no fewer than thirty auxiliary schools, with a teaching staff of 115, had been established in Germany.

Later estimates state that there are probably not less than 6000 children receiving special instruction within the limits of the German Empire.

He next traces the movement in the Scandinavian countries, re-

marking that there the teachers are usually of the female sex, the opposite being, as a rule, preferred in Germany. As regards this country, Dr. Shuttleworth is distinctly hopeful in spite of our conservative instincts, judging that we shall profit by the experience of our neighbours, and in the long run do much better.

In London we owe the inauguration of special institutions for defective children to the late General Moberly's initiative; the subject had been ventilated before, and in the report issued from the Parkes Museum on the "Scientific Study of the Mental and Physical Condition of Childhood" there is entered a record of many years' previous work. The author notes the honourable rivalry between the School Boards of London and Leicester as regards priority in practical work in this direction, ceding the position to the latter, which opened its first special class (the first in England) in April, 1892. Up to the present, as regards the metropolis, there are upwards of fifty centres of special instruction, dealing with no fewer than 2125 children.

He next gives certain figures indicating progress in this work in various large manufacturing centres.

The expense of special classes must necessarily be large as compared with that of ordinary school instruction (the figure given shows the cost to be about double). The teachers are better paid, and the cost of building is greater. He notes with satisfaction that the Government propose to give for each unit of average attendance in special schools 50s. for general instruction, and 30s. and 40s. for manual instruction of younger and older children respectively.

Dr. Shuttleworth's experience leads him to think that there is more room for individual discrimination in the methods of teaching—the less rigid the system, the more satisfactory the results. As regards school hours, he thinks that a large amount of discretion should be accorded to the teachers; and although in many cases the atmosphere of the special schools is more wholesome, both physically and morally, than that of the home, he is not sure that five hours' inflexible schooling is good for all mentally defective children, who are rarely physically sound. He notes with satisfaction that, in the majority of centres, the School Boards have the advantage of medical advice in connection with the classes; and further, the physical state of these children is such that in dealing with them successfully the medical officer and the teacher must go hand in hand.

Before concluding Dr. Shuttleworth discusses the special training of the teachers.

J. R. LORD.

(<sup>1</sup>) Vide *Mentally Deficient Children; their Treatment and Training*, by the same author; 2nd ed.

*Influence of the Separate System on the Mental State of Prisoners [De l'influence de la détention cellulaire sur l'état mental des condamnés]. (Bulletin de la Soc. de Méd. Ment. de Belgique, Sept., 1900.) Léon de Rode.*

The author is one of the physicians appointed by the Belgian Government as consultant alienists to the prisons of that country. As these institutions are almost entirely organised on the cellular system,

Dr. de Rode has had exceptional opportunities of observing the influence of the system on the mental health of the prisoners.

After referring to the earlier statistics bearing on the question, and pointing out their conflicting character owing to local and other limitations, the paper deals with the evidence of recent Belgian experience. Taking the central (convict) prisons, it appears that during the eight years 1891-8 the proportion of prisoners becoming insane averaged 1.58 per cent. in Louvain, where the separate system is in force; while in Gand, under the associated system, it averaged 3.50 per cent. Some of the prisoners becoming insane in Gand, however, had undergone separate confinement before they were placed in association. In the secondary prisons for minor offenders the number of cases of insanity was much lower.

A table gives details regarding all the prisoners found insane on examination by the consultants; these details concern age, antecedents, crime, and period of detention before development of insanity. Other tables give similar details (referring to the years 1896-8) for prisoners relieved from separate confinement, and placed in association on account of mental symptoms.

Taking all the prisons of the country together, it appears that on an average 3.32 per cent. of the prisoners in cellular confinement are brought to the special notice of the alienist inspectors; in 1.09 per cent. the prisoners are found insane and sent to asylums, and in .58 per cent. their separate confinement is discontinued.

The author concludes from his observations that there is no such thing as a special "prison insanity," the psychoses occurring in prisoners being the same as those developed elsewhere; that the number of cases of insanity under the separate system is not at all, or is only very slightly, above that found in the associated system; and that even this small number might be further reduced by a process of selection which should exclude prisoners mentally unstable.

W. C. SULLIVAN.

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#### Part IV.—Notes and News.

##### MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

###### GENERAL MEETING.

MINUTES of the General Meeting held at the London County Asylum, Claybury, Woodford, Essex, on Thursday, February 14th, 1901.

Present: Drs. Fletcher Beach (President), H. Hayes Newington (Treasurer), A. R. Urquhart, J. Wigglesworth, A. W. Campbell, H. A. Benham (Registrar), J. Carlyle Johnstone, F. A. Elkins, A. N. Boycott, H. T. S. Aveline, L. A. Weatherly, F. H. Edwards, J. Peeke Richards, R. Percy Smith, J. R. Whitwell, R. H. Steen, J. McConaghey, Bedford Pierce, Charles Caldecott, J. F. Briscoe, S. R. Macphail, Walter S. Kay, H. Gardiner Hill, J. R. Hill, George O. Hughes, Eric France, Reginald H. Noott, J. S. Bolton, John C. Anderson, Rosina C. Despard, J. J.