

As regards criminality, the Government of Prussia has erected wards for the observation of insane criminals at its larger prisons—*e. g.* Köhn, Halle, Münster,—but unfortunately the criminals, when finally recognised as insane, are transferred to the usual asylum, where they are associated with the non-criminal.

The recruiting sergeant in Saxony will have for the future to search for a history of insanity before men are allowed to join the Army, the Minister for War having ordered the rejection of all recruits who have had mental disease.

The annual meeting of the Association of German Alienists was held on 20th and 21st April at Frankfort-on-Maine. The most noteworthy paper was that by Professor de juris Lenel, of Strassburg, and Dr. Kreuser, of Schussenried, on “The Prognosis of the Psychoses with regard to the § 1569 of the Code-Civil”<sup>(1)</sup> (Divorce by reason of Insanity). This was followed by an important discussion.

Another interesting paper was that of Dr. Siemerling on the “Evolution of the Doctrine of Criminal Heredity.” He is very emphatic on the necessity of modifying the punishment of the endogenous recurrent criminal.

Dr. Sioli discussed the question of rural and urban insane, noting the predominance of the latter over the former. He advocates, for cities of 100,000 inhabitants, the erection of an annexe to the general hospital, consisting of two wards, for fifteen to twenty insane patients, maintaining that thereby two hundred cases can be treated per annum, granting that they do not remain in the wards for longer than two to four months each.

Dannemann showed a number of plans for asylums to accommodate thirty, forty, fifty, or one hundred patients, and discussed the construction and organisation of these establishments. Fürstner gave a report on the morbid changes in the spinal cord in general paralysis; Bonhoeffer discussed the qualities of vagrants and vagabonds; Alzheimer the pathological anatomy of chronic insanity; and O. Vagt opposed Fleschsig's doctrines.

Sander demonstrated some changes in acute insanity; while Friedländer read a paper on erythrophobia, Raecke on changes in the cerebellum and the basal ganglia in general paralysis, and Kirchhoff on the expression in melancholia.

<sup>1</sup> Vide *Journ. Ment. Sci.*, 1899, p. 386.

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## HOLLAND.

By Dr. F. M. COWAN.

It is pleasant to see that those in authority are becoming convinced that the symptoms and treatment of mental diseases should be taught at our medical schools. As it is now, three of our universities have each a chair for psychological medicine, and it seems strange that the remaining one, that of Groningen, should not have a similar chair.

The recent appointment at Utrecht was that of Prof. Th. Ziehen,

who was professor extraordinary at Jena. Prof. Ziehen is well known as the author of the anatomy of the nervous centres in *Bardleben's Anatomical Handbook of Lectures on Physiological Psychology*, and of a text-book on *Mental Diseases*.

Now it is a fact, that diseases of the mind can no more be learnt from a book or by oral teaching than any other branch of medical knowledge, and therefore we rejoice at the appointment of clinical teachers; but the question at the same time arises, Where is the material for these teachers?

Amsterdam possesses its suburban hospital, where all recent cases are admitted and cared for until they are sent to the Meerenberg Asylum. There is no dearth of cases for clinical instruction there, and as the university and the hospitals are city institutions there is no fear of any friction between professors and hospital physicians. Nor need there be any great fear of friction at Leyden. The local authorities, aware of the necessity of having this important branch of medicine taught theoretically and practically, opened an asylum at Leyden, and in addition to this, they intend erecting a sanatorium for nervous diseases. It was very wisely thought necessary that not only insanity proper should be the subject of teaching, but that different neuroses, which cause the sufferers so much worry and distress, should be seen and studied by the medical students.

Circumstances are not so favourable at Utrecht. The asylum there is a very ancient institution, dating from the time of the Crusades. While the governors are quite willing to make great allowances for the benefit of the professor and the students, they require the medical staff of the asylum to exercise chief control, and the professor is to be a guest. Prof. Winkler resigned the chair at Utrecht because he considered a teacher without a clinic useless. Everything remains to be done for Groningen—*i. e.* a chair has to be created, and a clinic has to be opened—for Groningen has not an asylum belonging either to the town or the university. True, there is a lunatic asylum, distant about twenty minutes by rail, but this has been erected by a religious community, and the question is whether the board of governors will permit it to be used for teaching purposes.

Several alienists hoped that as the penal code of laws was to be partially revised, more enlightened views might be introduced with respect to criminal lunatics (*sit venia verbo*). It would appear that the judges seem to expect a philosophical rather than a medical answer to their queries.

Next year, the Congress on Criminal Anthropology will meet at Amsterdam. A good omen for its success is the interest taken in its proceedings by people of different schools and creeds. Modern doctrines as to the position of the criminal are very slow to spread; and it is very sad to hear people acquainted with law, and who should know better, assert that if these doctrines of Lombroso and others were accepted, we should see mankind left to the tender mercies of a set of ruffians.

A movement is being set on foot to publish all cases in which physicians are called upon by judges to give evidence regarding the mental condition of the accused. Medical opinion is pretty often asked, but it sometimes proves very difficult to convince judges that a man who

apparently speaks well, and shows no very palpable symptoms of insanity, should be an asylum inmate and not a prisoner. The prison officials, of course, consider the medical expert as a sort of modern body-snatcher, who breaks into their gaols to carry off the members of their flock. These worthies give most arbitrary evidence, stating that what is considered a symptom of insanity by medical men is only hardened vice and shamming. Observation in a prison cannot but be defective, and it is a pity, that in the modifications to be introduced in our penal laws, there should be no clause regulating this important matter. There can be no doubt that criminal anthropology must be taught at our medical schools, and should be studied by both jurists and physicians; this is the only way to obtain co-operation in these important sociological questions. That this want is keenly felt, is proved by the attendance of barristers and medical men at the lectures which are occasionally given.

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#### ITALY.

By DR. GUILIO CESARE FERRARI.

I believe that, in beginning my annual report on the general conditions of psychiatry in Italy, it will, first of all, be useful to give an idea of the circumstances and surroundings in which we prosecute our studies, endeavouring not to be led by our admiration for those centres where the scientific movements form the motive force, into forgetfulness of those other centres, which are indeed less important as regards size, but which must often be credited with subjecting to an effective test the theories and hypotheses issuing somewhat prematurely from the larger centres.

The conditions of instruction in psychiatry vary much in various centres. Teaching presents in almost every nation a certain one-sidedness. Thus, while English and American psychiatry is by preference clinical and psychological, that of Germany has always been, and still is, by preference, histological; while the French has chiefly devoted itself to studies in psychical symptomatology, Italian psychiatry, since its resuscitation, has been absolutely eclectic. It has cultivated with the same zeal all branches of our specialty, and at the same time has thrown a brilliant light upon certain cognate subjects,—for example, upon penal science; whence has arisen a new branch intermediate between anthropology and criminology; the distinction resulting therefrom Italy may justly be proud of.

This character of eclecticism depends, however, only on a general impression, for if we look more closely into the matter, we see that (with the exception of the psychiatric institute at Reggio Emilia) the various centres follow one or other of various methods of study, according to the opportunities offered by the circumstances and surroundings of each.

The question of "environment" (circumstances and surroundings) reminds us of a fact which is very sad, but is inevitable, because it is connected with the economic development of Italy. In the great cities, psychiatry finds material for study outside asylums, and although our