

panied by an increase in the number of eosinophiles. These conditions may be due to some extraneous factor (perhaps that which causes the mental symptoms), but it is tempting to include a toxic type in our classification of epilepsy.

Auto-intoxication from constipation is without doubt an exciting factor; this is demonstrated by the marked improvement in many cases immediately on admission to asylum *régime*. Oral sepsis is also an enemy that requires much more fighting, and one which is exceedingly difficult to combat in the mentally deficient, where reactions are sluggish and the patient is indifferent as to the condition of his teeth.

Roxburgh District, Melrose.—Dr. Carlyle Johnstone relates a most interesting criminal case with which he had much to do. An imbecile lad attempted to rape his mother, who had herself been in the asylum three times. He was sent to the asylum by the Procurator-Fiscal. He stayed there for five years, and was then removed with the consent of the authorities and placed with a farmer. He earned a little money for the next ten years as a labourer, and then made another criminal assault on a girl. He was returned to the asylum by the Fiscal. It was then discovered that his settlement was in England, and he was sent to the English union with a view to being placed in the Morpeth Asylum. But the Union Medical Officer refused to certify him. So back he came to Melrose. The Scottish parish authorities would not consent to remain liable for a life-long lunacy for which they were not responsible, and made a stir, with the result that the man was taken to Edinburgh to be placed on his trial for the last offence. Dr. Johnstone and others gave evidence that after repeated examinations they were of opinion that the man was a congenital imbecile and unfit to plead. Notwithstanding this he was put on his trial and actually put into the witness box, and asked a few simple questions. The jury found that at the time of the trial he was sane, that he committed the offence, that he was sane at the time of committing it, and he got twelve months imprisonment. One wonders who had the courage to propose that such a man with such a history should be allowed to submit himself to any examination at all. Practically the examination must have been an inquisition.

Part IV.—Notes and News.

THE MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

ADJOURNED ANNUAL MEETING.

THE ANNUAL MEETING, adjourned from July, 1909, was held at the rooms of the Medical Society of London, Chandos Street, W., on Tuesday, 23rd November, 1909, Prof. Bevan-Lewis, President, in the chair.

Members present—See list of attendance at Quarterly Meeting.

The PRESIDENT said the meeting now being held was the annual one, as members would remember that the Annual Meeting in the summer was adjourned to this date because the provisions of the nursing examinations were not then

ready for discussion. They had since been circulated to each member of the Association and opinions could now be expressed upon them. It was necessary that those regulations should come into force on November 30th, so that all the teaching centres should be able to have their course of training in accord with the regulations. He proposed taking the regulations *seriatim*, not having each item read, but taking the clauses by numbers.

No. 1 and No. 2 were agreed to.

Dr. URQUHART asked for some explanation of Clause 3, page 1. The first final examination under the new regulations was to be held on the second Monday in November, 1911, and he wished to ask whether that examination included the old regulation nurses coming up then for the single examination for the first time.

The PRESIDENT said he took it that the single examination would be held in November, 1911; but after 1911 all candidates who presented themselves would not be able to escape the dual examination.

Dr. MERCIER said that was not the intention of the rule. It was that after May, 1911, no candidates would be able to present themselves under the old rule.

Dr. URQUHART: So no single examination is to be held in November, 1911?

The PRESIDENT: No.

Clauses 4 to 14 inclusive were passed.

Dr. STODDART, speaking on Clause 15, said he spoke merely to have things in order. This Clause stated: "Every candidate for the final examination must obtain from the Registrar a schedule, which must be filled up and signed as required, and returned, with the voucher of having passed the preliminary examination, to the Registrar at least four weeks before the final examination." The Association would not require this voucher from nurses exempt under Regulation 6, who possessed a certificate of having trained in a general hospital.

Dr. MERCIER replied that that was an oversight in drafting, and could be remedied by inserting after "Every candidate" the words "except as provided in Regulation 6" He moved that alteration.

Dr. STODDART seconded, and it was carried.

Clause 16 and Clause 17, Section *d*, were agreed to.

Dr. URQUHART, on 17*b*, said the first examination was to be held on the first Monday in May, the first Monday of November; and, in *c*, the final examination on the second Monday in May and second Monday in November. He asked why the preliminary and final examinations were fixed for different days. That meant an unnecessary attendance in the examination room, and unnecessary travelling and waste of time for the examiners.

Dr. PERCY SMITH said that he supposed it was quite impossible for all the attendants in asylums to be examined on the same day; there were a large number of candidates for the Preliminary and for the Final.

Dr. MERCIER said he thought Dr. Urquhart was under a little misapprehension. It was the written portion alone which was to be held on those separate dates, and that did not require the attendance of the coadjutor, so that there was no question of travelling twice over. The reason given for the second day was as stated by Dr. Percy Smith; it would abstract too many attendants from their duties to have it on the same day.

Clause 17*b* was agreed to.

Dr. STEEN moved, in regard to Clause 17*d*, that the practical part be ten minutes instead of fifteen. The oral, he thought, should be decreased to five minutes. If there were twenty candidates, that would occupy six and a half hours, and that makes the examination a very long one.

The PRESIDENT: Had we so many candidates at one time?

Dr. STEEN: Yes.

Dr. THOMSON said the question of ten minutes against fifteen was discussed by the Educational Committee, and it was pointed out that in the practical part in the wards candidates were set to do things which they might be doing simultaneously under the examiner's eyes. That suggestion was considered, and it was thought that in order to be thorough it would take fifteen minutes when one considered the making of beds and the taking of temperatures, etc.

The clause was agreed to as it originally stood.

Dr. DAWSON, speaking on Clause 17*e*, said he supposed those provisions supplemented each other to some extent, but it was right that the practical portion

should be passed in separately. The oral and the papers of questions were of much the same character; and he did not see any reason for the oral if it was not allowed to supplement the papers to some extent. If the examiner were allowed to put the + mark after a paper which was exceptionally good, or a - if it meant the paper was not quite so good as it should be, that could be taken account of in the final award. Many of the candidates were not able to express themselves very well on paper, whereas they might do very well in the oral and show sound knowledge of the work.

Dr. MERCIER said he thought he could satisfy Dr. Dawson. There was before the Educational Committee a scheme of instruction to examiners, in which was included the proviso that where a candidate's work was marked excellent in his oral and practical examination that was to count three marks on the written. That would help a very large number of candidates. There were many who just failed to pass the written who got perhaps 47, 48, or 49 *per cent.*, and if the value of the oral were allowed to supplement the written in that way many candidates would be helped.

Dr. DAWSON: That is quite satisfactory.

Dr. THOMSON: If that is so, should not *e* be re-drafted?

The PRESIDENT said he did not think it required re-drafting.

The clause was agreed to.

Sub-clauses *f* to *m* were also agreed to.

CLAUSES 18, 19, 20, 21.

Dr. MILLER read several letters which he had received on the subject:

He added that they were not the only letters which he had received on the subject, but they were the only ones which he had received permission from the writers to make public. There were letters in his possession against the provision as to passing with distinction, and the writers in each case raised strong objections against the inclusion of the clause.

Dr. SPENCE said that if a full discussion were allowed on those letters they would not be able to finish that afternoon.

The PRESIDENT asked Dr. Miller to say what were the chief contentions of the writers of the letters.

Dr. MILLER replied that they were strongly opposed to the provision regarding passing the examination with distinction.

Dr. MERCIER asked if any reason was given for objecting to the distinction.

Dr. MILLER said no reason was given in the letters, except that the writers foresaw some upsetting among the members of their staffs. One writer said—and Dr. Miller thought with truth—that unless separate examinations were held the special distinction was unnecessary.

Dr. MERCIER said perhaps he could remove the fears of those who had sent those letters if he said, as an examiner, that the number of persons who would obtain that distinction would be very small. It required at least 70 *per cent.* of the maximum marks in both examinations to get it. The number of candidates who reached 70 *per cent.* was microscopically small. There would be no chance of a number of junior nurses flaunting before the others the fact that they had passed the examination better than their colleagues. He did not think more than two or three would get it in any year, and it would be a very rare and valuable distinction.

Dr. DIXON asked whether in this matter the distinction to the nurse would be on her recognised capabilities of dealing with patients, or would it be on the marks she would get at the examination?

The PRESIDENT replied that it would depend on her marks altogether.

Dr. PERCY SMITH asked whether there was before the meeting any amendment to that clause.

The PRESIDENT replied that apparently there was not.

Dr. LONGWORTH said the first letter which Dr. Miller read was one in which he and his chief contended that there were reasons against granting a certificate of distinction. They thought it would create a good deal of invidious distinction which would not be justified by the merits of the prospective holders of those

certificates. Their experience of ten or twelve years in training nurses at the Suffolk Asylum for the certificate was such that they had frequently come across members of the staff who had passed the examination only with the utmost difficulty, but were otherwise excellent nurses; they had shown capabilities which could not be estimated by means of examination; and on those grounds they thought the granting of the mere pass would be preferable. He moved that the certificate of distinction proposal be not received. This meant a motion that Clause 20 be omitted.

Dr. MORRISON seconded the amendment. He thought it would create unnecessary difficulties, without any real accompanying superiority.

Dr. MACDONALD said he was sure there was no superintendent and no medical officer who did not wish to encourage work on the part of any member of the staff. Looking at the question from a practical point of view, he thought it was a mistake to go about it in the way now proposed. If it was wished to grant a special distinction, it should be by a separate examination, and he wished that had been the amendment. He was sure it was not the wish of the mover of the amendment that it should be regarded as deprecating better, higher, and more meritorious work on the part of any member of the staff. He cordially supported the suggestion that the provision should not be passed in its present form, and he hoped the meeting would take that view.

Dr. THOMAS DONELAN said he thought that what Dr. Macdonald had said would certainly meet the case. The class of nurses and attendants in private asylums was different from the class of those in public ones. Some of the latter were recruited from the ranks of ordinary domestic servants. If there were a special examination for the former, and a special merit standard, it would meet the case completely. The same applied to male attendants, for in country asylums they came largely from among farm hands.

Dr. STEEN said he hoped the Association would approve of the clause providing for distinction. In every examination there was an "honours" and a "pass," and he did not see why nurses should be deprived of the opportunity of taking "honours." He had not heard any argument up to the present which was convincing, and he hoped the Association would pass the clause.

Dr. DIXON said he understood that the certificate was given for efficiency in mental nursing. If certain candidates proved their efficiency by examination and showed they could reach a very high standard, there ought to be some recognition of that high standard. At the same time he doubted whether high efficiency in mental nursing could be gauged by an examination. That was really the question.

Dr. BEDFORD PIERCE said he had heard that the possession of the distinction certificate might cause jealousy among the staff. At the "Retreat" they had for several years had a method of distinction in operation. The "Retreat" examination had been on a higher plane than that of the Medico-Psychological Association, and those who passed it well received a special medal. He was not aware that any unpleasantness had ensued among the staff on that account; the nurses generally had been proud that a colleague had been sufficiently well up to receive the honour.

The PRESIDENT said he was in accord with what Dr. Bedford Pierce had said. He was himself connected with a large county asylum, and could confirm the statement that the nurses and attendants were drawn from a comparatively uneducated class. That seemed the basis of the objection to Clause 20. But at the same time, the Association must be progressive, and he was fully of opinion that the trend of the clause was towards progress, and therefore should be adopted.

The amendment was put, and declared lost.

Clauses 21, 22, 23, 24, 25, 26, 27, 28, and 29 were passed.

Dr. STODDART said, in regard to Clause 30, he would like to move an amendment. As Secretary of the Educational Committee he would not have moved an amendment to those regulations, but Dr. Mercier gave him to understand he would be in order in doing so. His own feeling was that the fee of 10s. for the second examination was too high for nurses coming from the class from which nurses were drawn, because many of them already found that even the 5s. fee was rather a strain upon them; and many hesitated about paying the 5s. fee to go in for the examination at present. If the fee were 5s. for the first examination, and

5s. for the second, that would add to the Association's income a sum of £250. If the second examination fee were raised to 10s., that would increase the income of the Association by another £250, the total increase being £500 a year. As far as he was aware—the treasurer would be able to correct him if he was wrong—the Association did not need that money, which would be lying idle; and it was not fair to the nurses to charge them so heavily. Another point to be considered was that a general hospital nurse got her training, examination and certificate free, without any fees whatever, and those general hospital nurses, who often came from a class who could afford to pay very much better than the asylum nurses, entered into competition with asylum nurses, and hence mental nurses were placed at a disadvantage. He therefore moved that instead of the words "and for the final examination 10s.," the rule should read, "and for the final examination 5s.," and so forth.

Dr. PERCY SMITH asked whether it was not the fact that people who entered as probationers at general hospitals usually paid something to the hospital on entering to be trained. If so, they did invest some money. And the 10s. in the present case was an investment for the nurses with regard to that examination. The nurse who obtained the certificate got her name on one of the nursing associations as a private nurse, and was able to earn £100 or £150 a year. Therefore, although 10s. might seem a large amount for some of the nurses who were at county asylums, he thought they did receive considerable value for their investment when they took the certificate.

Dr. SPENCE said it might seem unkind not to support the generous intentions of Dr. Stoddart, but in the majority of county asylums, directly a nurse passed that examination she received an additional £2 a year; and it was surely worth her while paying 10s. to get that. But, apart from that, he thought the Association should make the certificate not only worth having, but worth paying for, and worth working for. He therefore strongly supported the retention of that paragraph.

Dr. MERCIER said, with regard to the financial position, he understood Dr. Stoddart to say the Association was so wealthy that it did not require the larger fee from the nurses. The financial position of the Association, favourable as he was glad to say it was, was due entirely to the dreadful system of sweating the examiners which was carried on. The examiners, at the recent nurses' examinations, assessed with the greatest care 10,000 questions at one-third of a farthing per question.

Dr. WOLSELEY-LEWIS seconded Dr. Stoddart's amendment. He said he hoped the day was not far distant when those examinations would become compulsory in all the public asylums, and that when superintendents would engage nurses it would be understood they would be obliged to pass at all events a preliminary examination before being regularly taken on the staff. That meant to say that nurses in asylums were put on all fours with nurses in ordinary hospitals, who had to go through a course of training before they could be considered nurses.

Dr. MERCIER: Pay a premium?

Dr. WOLSELEY-LEWIS said he meant they would be paid at a considerably lower scale as probationers than when they claimed the full position of recognised nurses in an institution.

The PRESIDENT said that when the clause presented itself to him at first he was rather astonished; he thought 10s. was rather high, especially for the class of nurses in county asylums. But he found that his feeling was not shared generally, and when he looked into the question he confessed he had been converted. The nurses had three years' extremely good training, which was very valuable to them. They had the examinations, and an enormous amount of trouble was taken with their tuition, and the extra 5s. was not too much to ask. He was now very strongly in favour of it, and he looked upon himself as a convert to the clause itself. But he thought good would come out of the discussion. Many nurses received an addition to their wages when they obtained their certificate. Another point he wished to indicate was that during the three years of training the wages of the nurses were going up, and they were therefore better able to pay the sum.

Dr. MERCIER: What is the amendment?

The PRESIDENT: That it be reduced to 5s. for the second examination.

There voted in favour of the amendment 19; against, 23, and—

The PRESIDENT declared the amendment lost, and said that the Association would now proceed to the discussion of the schedules.

Forms A and B were agreed to.

Dr. MERCIER said a little discretion might be allowed with regard to those forms. The number was placed in a different position from that on the present certificates; and it might be convenient to leave it where it is.

Agreed.

The Preliminary Examination portion was likewise agreed to.

The PRESIDENT asked whether there were any comments upon the Final Examination portion.

Agreed.

THE MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

THE Quarterly General Meeting of members of the Association was held in the rooms of the Medical Society of London, on Tuesday, 23rd November, 1909, Prof. Bevan-Lewis, President, in the Chair.

Present—The President, and Drs. S. Adair, H. F. S. Aveline, J. L. Baskin, Fletcher Beach, C. Hubert Bond, David Bower, J. F. Briscoe, P. E. Campbell, J. Chambers, L. Coupland, M. Craig, W. R. Dawson, A. De Steiger, H. Devine, J. F. Dixon, T. J. O'C. Donelan, E. L. Dove, T. Drapes, F. H. Edwards, F. M. Elkins, C. H. Fennell, S. J. Gilfillan, T. D. Greenlees, H. E. Haynes, C. R. Hitchcock, David Hunter, J. H. Johnston, W. B. Keith, H. Kerr, H. A. Layton, S. G. Longworth, J. R. Low, W. H. C. Macartney, P. W. MacDonald, T. W. McDowall, M. E. Martin, C. Mercier, J. Middlemass, A. Miller, C. S. Morrison, H. Hayes Newington, H. J. Norman, F. O'Mara, D. Orr, M. E. Paul, Bedford Pierce, E. Powell, N. Raw, H. Rayner, R. G. Rows, G. H. Savage, J. G. P. Shera, G. E. Shuttleworth, J. G. Smith, R. Percy Smith, J. B. Spence, T. E. K. Stansfield, R. H. Steen, R. C. Steward, A. H. B. Stoddart, D. J. Thomson, T. Seymour Tuke, P. M. Turnbull, A. R. Urquhart, F. Watson, G. B. Whitcombe, G. Williamson, H. Wolseley-Lewis, and T. Outram Wood. Visitor: Staff-Surgeon R. St. G. S. Bond, R.N.

Attendance at previous Council meeting—The President, and Drs. H. F. S. Aveline, T. S. Adair, C. Hubert Bond, W. R. Dawson, C. H. Fennell, P. W. MacDonald, C. Mercier, A. Miller, D. Orr, R. H. Steen, A. H. B. Stoddart, W. Vincent, and H. Wolseley-Lewis.

The PRESIDENT said that before proceeding to the agenda of the ordinary meeting he felt impelled to deal with a subject which at all events ought to be uppermost in the minds of members. They met there that day at quite an eventful epoch in the history of the Association, and it was fitting that they should congratulate each other upon the passage through the House of Lords of the Asylum Officers' Superannuation Bill. (Applause.) Their very hearty congratulations were also due to the Executives of both the Asylum Workers' Association and the Medico-Psychological Association, which had so happily joined hands together and brought about a piece of work which was very important and of mutual benefit. After years of futile labour on the part of the Association the important measure had won success—that success which it so richly deserved. And he thought all would agree that the magnificent headway which it had made throughout its career through both Houses of Parliament was of sufficiently happy augury for its eventual triumph, and of the very beneficent future which was in store for it. Their first duty that day was to convey to Sir William Collins and to Dr. Shuttleworth their keen sense of appreciation of the ceaseless efforts which those gentlemen had made to secure success to the Bill, and their unbounded admiration of the skill, tact and discretion, and address which had been displayed by Sir William Collins in carrying the measure forward, and in guiding the Bill through the troublous waters of the Scylla and Charybdis of parliamentary procedure. He felt bound to say that the intrinsic merits of the Bill seemed from the first to have demanded for it universal recognition and confidence; and that could only be due to the fact that such extreme care had been taken in modelling and

setting out its provisions. Among its chief merits were the contributory clauses, which clauses fixed the Bill on a financial basis, and at the same time encouraged so much that feeling of self-dependence which was the all-important moral element in the measure. It was very important in every sense, and at the same time swept away, once for all, that most undesirable undercurrent of suspicion and distrust which was such a demoralising feature in all non-contributory and permissive schemes of superannuation. He did not think it was necessary for him to dilate further upon the merits of the Bill; they were so manifest to all. He asked the meeting to signalise, with no uncertain voice, its very high appreciation of the work done for the Association by Dr. Shuttleworth (much applause), for he had borne practically the whole of the labour upon his shoulders, and had exerted himself to an enormous extent in the interests of asylums throughout England at large. (Loud applause.) It had been proposed that a more substantial recognition of Dr. Shuttleworth's services should be made by the Association. He was looking forward to a dinner to which Sir William Collins and all concerned would be invited. He felt it was fully in accord with the ideas of members that that should be done.

Dr. SHUTTLEWORTH desired to say a word of recognition of the extreme kindness with which the Association had recognised any little service he had been able to render in a course which was an important one, and in which the Asylum Workers' Association had done its share. It must not be forgotten that the idea of pensions originated with the Medico-Psychological Association and the question was very ably worked at by the Treasurer, Dr. Hayes Newington, many years ago. It had been their good fortune to secure an exceptional year in order to get the measure through as a private member's Bill. And it was to Sir William Collins having taken advantage of the opportunities which had presented themselves that the success of the Bill up to the present point was due. At the same time, one should not lose sight of the very valuable services which Lord Monk Bretton had accorded to the promoters in taking over the personal conduct of the Bill in the House of Lords, and of the public debate which took place in that Chamber. There was also much private debate, which was not recorded in the Press, and negotiation with Government departments. But all through there had been abundance of debate on the measure, and Lord Monk Bretton had been most skilful and tactful in guiding the Bill through with a minimum of mutilation. And though the Bill did not now comprise all that his friends desired, it yet contained a very fair instalment. And if at a future time it was found that the Bill did not work as satisfactorily as was wished, he hoped there might be an opportunity for amendment with the view of getting a little more. He personally very highly appreciated the expressions which had been uttered concerning his own efforts. It had, of course, not been an easy task, and it had taken up a good deal of time; but what he had done had been freely rendered. He looked back upon what he had been able to accomplish with very great satisfaction.

Dr. SPENCE suggested that the thanks of the Association to Sir William Collins should be emphasised by the passing of a special resolution directing the General Secretary to forward to Sir William a formal letter expressive of the Association's warmest thanks for his skilful pilotage of the Bill.

Dr. HAYES NEWINGTON thought that a formal letter should also be sent to Lord Monk Bretton and Dr. Shuttleworth, and on the motion of Dr. MERCIER it was agreed that a resolution to this effect should be entered in the minutes.

SIR JAMES MOODY'S KNIGHTHOOD.

The PRESIDENT said he thought it right he should bring another matter before the meeting. Since the Association last met a great distinction had been conferred upon a member of the Association—an old official in asylum life. His Majesty had bestowed a knighthood upon Sir James Moody, and it was only right to ask the General Secretary to write a letter of congratulation, including therein Lady Moody. He asked Dr. Thomson to speak to the proposal.

Dr. THOMSON said that, as Dr. Moody's first assistant medical officer of twenty-three years ago, he had much pleasure in seconding the resolution of congratulation which it was proposed to send to Sir James and Lady Moody.

The resolution was agreed to.

ELECTION OF CANDIDATES FOR MEMBERSHIP.

Dr. BOND (Secretary) mentioned that in respect of one of the candidates, Cecil Johnson, the proposers were Dr. Shuttleworth, Dr. Crookshank, and himself. But on looking at the register he was reminded that Dr. Crookshank had recently resigned, and therefore his name should not appear there. Dr. Hayes Newington was willing to fill the gap, and, with the permission of the meeting, he took it that the election might go forward.

Agreed.

The PRESIDENT nominated Dr. Thomson and Dr. Steen as scrutineers.

The following candidates were duly elected ordinary members:

George Henry Adam, M.R.C.S., L.R.C.P.Lond. (Manager and Medical Superintendent), West Malling Place, Kent. Proposed by T. Claye Shaw, Henry Rayner, and Hayes Newington.

Gilbert Kennedy Aubrey, L.M. & S., S.A., Assistant Medical Officer, Darenth Asylum, near Dartford. Proposed by A. Rotherham, H. Hallet, and R. H. Steen.

Percival Charles Coombes, M.R.C.S., L.R.C.P.Lond., Assistant Medical Officer, Surrey County Asylum, Netherne. Proposed by F. C. Gayton, J. E. Barton, and H. N. Cappe.

Frederick Douglas Crosthwaite, M.B., Ch.B.Edin., Assistant Medical Officer, London County Asylum, Horton, Epsom. Proposed by John R. Lord, David Ogilvy, and Samuel Elgee.

Rae Gibson, M.B., Ch.B.Edin., M.R.C.P., Assistant Physician, Royal Asylum, Morningside, Edinburgh. Proposed by Geo. M. Robertson, R. Dods Brown, and W. Ford Robertson.

Cecil Johnson, M.B., Ch.B.Vict., 6, Palewell Park, East Sheen. Proposed by G. E. Shuttleworth, H. Hayes Newington, and C. Hubert Bond.

Roger Aiken Rankine, M.B., B.S.Lond., M.R.C.S., L.R.C.P., Assistant Medical Officer, Earlswood Asylum, Redhill. Proposed by Charles Caldecott, H. Hayes Newington, C. Hubert Bond.

Dr. SIDNEY COUPLAND, F.R.C.P., then read a paper entitled "The Causes of Insanity, with special Reference to the Correlation of Assigned Factors: A Study of the Returns for 1907" (see p. 1).

The paper was well illustrated by admirably clear statistical diagrams. It was followed by a lengthy discussion, in which the PRESIDENT, and Drs. MERCIER, HAYES NEWINGTON, and BOND took part. Dr. COUPLAND replied.

Drs. DAVID ORR and R. G. ROWS then read a paper (supplemented by a lantern demonstration) upon "The Histological Evidence that Toxins reach the Spinal Cord *via* the Spinal Roots, with Special Reference to Plasma Cells" (see page 86).

The PRESIDENT and Dr. SCOTT WILLIAMSON discussed the paper, and their remarks were replied to by Dr. ORR.

Owing to the lateness of the hour, Dr. Harvey Baird's paper, "Alterations in the Ependyma in General Paralysis"; "A Case of Mania relapsing into Unconsciousness, lasting Seven Months," communicated by Dr. Nathan Raw; and Dr. Scott Williamson's paper, entitled "Typhoid Carrier Infection," were adjourned.

About thirty of the members afterwards dined together at the Café Monico.

 COMMEMORATIVE DINNER.

IN celebration of the passing of the Asylums Officers' Superannuation Act, members of the Association and guests dined at the Gaiety Restaurant, Strand, on Monday evening, December 20th, 1909, the President of the Association, Prof. W. Bevan-Lewis, M.Sc. in the Chair.

The guests included: The Right Hon. Lord Monk Bretton; Sir William Collins, M.P.; Dr. Shuttleworth; Mr. J. M. Henderson, M.P., Chairman of the Select Committee of the House of Commons to which the Bill was referred; Mr. R. Charlton Palmer, Lord Chancellor's Visitor in Lunacy; Dr. F. Needham,