question of the "morality" of suicide, illustrating the matter by the examples of a number of eminent persons who are alleged to have committed suicide. The argument indicated the difficulties which arise as soon as any other view is taken of "morality" than that it is the generally accepted standard of conduct at any given time.

In his summing-up the judge said that the question was one of contract. Had the plaintiff been properly treated? The same rules did not apply to people who were ill as might apply to ordinary people. There was such a thing as wise restraint. If the plaintiff's liberty was only restricted so far as was required by her condition, no offence was committed.

The jury found a verdict for the defendants, and judgment was entered accordingly, with costs.

We sympathize with Dr. Rambaut in the trouble which this case must have caused him. But the officers of mental hospitals can never be wholly free from the risk of worries occasioned by a litigious ex-patient.

## REX v. ERNEST ALBERT WALKER.

This case, tried at the Central Criminal Court on June 21st before Mr. Justice Roche, raised points of interest as regards crimes committed under the influence of epilepsy.

Walker is 17 years of age, and is described as a footman. He was indicted for the murder, on April 22nd, of a district messenger boy. He was alone in his employer's house, in Lowndes Square, that evening, and about 6 p.m. he telephoned to an office for a messenger. A boy named Davis was sent. About 8.30 p.m. that same evening the prisoner had made his way to Tonbridge, where he informed a police constable that he "thought" he had committed a murder in London, mentioning the time at which, and the weapon with which, he had done it. He also said that he did not know why he had done it. The body of the boy Davis was found in the house. A letter was found, in the prisoner's handwriting, addressed to a fellowservant, in which he first described what appeared to have been a plan for suicide on some previous occasion, and then went on to an account of the way in which he had killed Davis. And a kind of programme was found, also in the handwriting of the prisoner, which gave, in much detail, the procedure which he intended to adopt as regards the murder, part of which was actually carried out. The details of this programme strongly suggest the scenes shown in a sensational cinema film. There was nothing to show whether these documents were written before or after the commission of the murder.

There was a very strong history of insanity in other members of

the prisoner's family, on both sides. And there was evidence that the prisoner had suffered from fits since he was five years of age.

The defence was that the prisoner had committed the murder during an epileptic equivalent, or a post-epileptic state. And Dr. E. D. Macnamara, who had examined him in prison, gave evidence in support of this view. The prisoner had denied all recollection of the suicide plan described in his letter. He remembered having rung for the messenger boy. He stated that, before the arrival of the boy, he had felt something "snap in his head," that he was only partially conscious, that he had struck the boy on the head while in this state, and that he remembered nothing more until he left the house.

Dr. East, Medical Officer of Brixton Prison, gave somewhat contrary evidence. He had observed no symptoms of epilepsy. It is, of course, possible that no such symptoms occurred while the prisoner was awaiting trial, and nothing was published which throws light upon the frequency of the epileptic attacks. Still, Dr. East must have had the prisoner under observation for nearly two months.

The judge left the question of epilepsy to the jury, most properly warning them that they must not be influenced by the recent newspaper comments on the case of Ronald True. The jury found the prisoner "guilty, but insane," and the usual order for detention followed.

We feel that the proper verdict was returned. Taking all the published facts into account, especially the previous history of epilepsy, and the very characteristic "flight" to Tonbridge, it seems most probable that this crime was committed either in an epileptic equivalent or a post-epileptic state. The chief peculiarity, assuming the epileptic theory, is that the prisoner had, at least, some recollection of the acts performed by him. It was this point upon which Dr. East appears to have chiefly relied. And Dr. Macnamara also seems to have felt the difficulty. But we must remember that in such cases absolute amnesia, although undoubtedly usual, is not invariably found. We should have liked to have heard more details of the mental traits found in the prisoner, and especially the results of mental tests. A peculiar variability is sometimes found in the results obtained with such tests, either on different days, or with tests of the same character on the same day. This variability is frequently found in epileptic subjects, and is very characteristic of that condition.