

### Part III.—Psychological Retrospect.

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#### AMERICA.

By Dr. H. M. BANNISTER.

AN adequate review of the progress of psychiatry in America during the past two years is not exactly an easy task. The field is so wide, and the possible details so numerous, that any statement of the facts within reasonable compass is difficult, if not impracticable. From another point of view there is really not so much to write, and the discrimination of what will be of interest is a matter of some embarrassment. I shall therefore only note such matters as occur to me, and admit that my judgment may be at fault in some particulars.

The session of the Medico-Psychological Association at St. Louis, in 1898, was in all respects a success; its spirit was excellent, and the papers presented mainly of a superior order. The annual address by Dr. Eskridge pictured an ideal hospital for the insane, an ideal that, while in many respects it will be hard to realise, is altogether along the lines of the best thought in this direction. Another paper of special practical interest which aroused some discussion was that of Dr. Burr, giving his impressions of the county asylums of Wisconsin. As your readers are aware, there is a certain faction of philanthropists who advocate the county care of the insane on the Wisconsin plan, and this statement by a competent observer was of interest. It may not be necessary to say that his impressions were not the most favourable, that he found the care of the insane in these institutions far below that given them in the state asylums. The counties here it should be remembered are the minor divisions of the state, and it is only exceptional that their tax-paying capabilities are such as to enable them to support a properly equipped institution for the care and treatment of lunatics. It is only in Wisconsin that county care is preferred to state care for any considerable portion of the chronic insane, or where it is regarded as anything but a necessary evil in the lack of proper state accommodation. It has been, however, so vigorously advocated by the Wisconsin authorities, that it is sometimes proposed elsewhere in legislatures when the question of provision for the insane arises, but not so far with success. There is no doubt but that the county asylums of Wisconsin are a great improvement over many of the poor-houses and gaols, where the overflow from the asylums goes in many other states; but the claim that they furnish an ideal or even an approximately adequate provision is absurd.

The New York meeting of the Association last May was equally a success, judging from the testimony and reports of its proceedings, though the writer cannot personally testify, on account of unavoidable absence. The papers presented were generally of a high order, indicating earnest and well-directed work, which it may, I think, be said

is becoming more and more the rule in our better organised hospitals for the insane. There has never been any backwardness in adapting every practical discovery to its best utility or in originating new features of value by our American alienists ; but it is more within the past few years than ever before that they have so generally shown the tendency to contribute to the higher grade of scientific work in the specialty. Two new periodical publications started within the past two years are to some extent evidence of this fact. The *Archives of Neurology and Psycho-pathology*, issued by the New York State Laboratory, is one of these ; it is perhaps not entirely a new publication, being the successor of the *State Hospitals Bulletin*, but it has been completely changed, and is in every respect even more than its predecessor a high-class scientific publication. The other serial alluded to is the *Bulletin of the Ohio State Hospital for Epileptics*, which has thus far been the medium of the publication of the work of its pathologist, Dr. Ohmacher. His memoirs are thorough and scientific, though every one may not accept his views as to the lymphatic origin of so-called idiopathic epilepsy. Good work is also being done in other places and in other states, but the results have not such a special means of communication to the world, and are scattered through the general and special medical periodical literature of the country. It is a fact, not perhaps generally appreciated, that in all departments of medicine American workers are probably more familiar with European medical literature than foreigners are with American contributions. The tendency of American neurologists to overdo the foreign references in their articles was alluded to by Dr. Lloyd in his presidential address before the American Neurological Association, and the tendency is not confined altogether to the neurologists. It is a significant fact, however, in one respect ; if perhaps we do still have a little too much regard for the "made in Germany" trade-mark, our writers are beginning in all departments to keep themselves well informed not only in the contributions in their own language, but in all others. Owing to political appointments, etc., our alienists have been in times past somewhat behindhand in this respect, but we believe that this is yearly becoming less the fact.

We cannot record any notable advance in the therapeutics of mental diseases, other than to say that the ideal of a psychopathic hospital is more and more before our alienists, and that practical suggestions in this general direction are being tested in various quarters. The often discussed question of the curative effects of gynæcological treatment of insane women is being extensively written upon by one or two enthusiastic Canadian authorities, who report very striking results. This it will be remembered was one of the subjects strongly advocated by the late Dr. Robé, but since his death there have not been many, in this country at least, who have taken it up as vigorously as he did. It is probable that there are few alienists who do not recognise the right of the insane woman to be relieved of her infirmities ; but there are not so many who have had the encouraging experience from gynæcological surgery that is reported by the writers referred to, and there are many who think that there are possible valid objections to such treatment in

very many cases. On the whole the consensus of opinion in this country on this question, both among alienists and neurologists, based on their experience covering many years, is, I think, conservative rather than radical.

An interesting phenomenon from some psychological points of view, and one that may be mentioned here, is the recent growth of certain cults such as "Christian Science," "Divine Healing," etc. These of course are not special to this country, but they have a large freedom here and have developed accordingly. What will be their fate, whether they will die out, or, losing some of their salient features, settle down amongst the ruck of heterodox sects, is a question for the future. At present "Christian Science" at least has quite an extensive following, not confined by any means to the poorer classes. As an interesting fact bearing on their ideas as to science, I may mention the protests made by some of the adherents of "Mother Eddy" against the teaching of physiology in the public schools of Chicago; there being no such thing as pathology, there can, of course, be no physiology, and the youthful mind should not be burdened with such a useless and fictitious study. Possibly a few years from now we will be able to make a psychiatric study of the results of "Christian Science," "Divinism," and other kindred delusions, to say nothing of "Osteopathy" and the like.

The movement for the special care of epileptics, though not as active, is still in evidence, and it is probable that Illinois will before very long follow the examples of New York and Ohio in providing a special institution for their care. The subject was presented to the last legislature, but it takes time for movements of this kind to mature and overcome the timidity of economical legislators. Sooner or later, however, it is probable that such institutions supported by public funds will be common in this country, at least in the richer and older portion.

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#### FRANCE.

By Dr. RÉNE SEMELAIGNE.

*Secondary systematised insanity.*—According to Dr. Anglade, of Toulouse, this disorder can be classified into—(1) Systematised insanity secondary to mania. This really has its basis in one or more delirious conceptions remaining fixed after one or several attacks of mania. They are often contradictory and do not unite, the ideas becoming separately systematised. These patients are generally megalomaniacs with blunted affective processes and some loss of moral and social sense. Memory and physical activity remain intact. Dementia, if it occurs, appears late. (2) Systematised insanity secondary to melancholia, which can be further divided into those depending upon some delirious idea surviving the symptoms of agitation and sometimes hallucinations; into those of a progressive systematised type, simulating paranoia, but in reality having relationship to neither melancholia nor the latter, being the