

Nocturnal Palsy.

It is many years since this condition was described by Dr. Weir Mitchell, but one sees little reference⁽¹⁾ to it, though it is not uncommon in neuroses originating in the war. The patient wakes from sleep with his senses fully alert, but unable to move a single voluntary muscle. He is naturally alarmed and makes attempts to move or speak, but without avail, till suddenly with what seems a great effort he regains his power. That he is really awake when in this paralysed state is shown by the unbroken continuity of his sensations of sight and hearing. One of my patients woke in daylight to see a friend in his bedroom. He tried to speak, but could neither speak nor move for some time; when he succeeded in doing so the friend was just as he had previously seen him. The duration of these attacks is variously estimated at from a few seconds to two or three minutes.

The late Dr. Charles Féré,⁽²⁾ of Bicêtre, recorded a case in which only the right side was paralysed; he says nothing about speech.

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4. Treatment of Insanity.

The Treatment of the Insane in Pavilions without Detention [Le Traitement des Aliénés en "Pavillons Libre"]. (Bull. de la Soc. de Med. Ment. de Belg., February, 1922.) Laruelle, L.

The writer's experience shows the need of co-operation between magistrates and alienists. Representations which led to legal investigations were made by the former confederates of an alcoholic woman who was improving rapidly in the sanatorium of Fort-Jaco. The inquiry was conducted in a spirit of antagonism and suspicion which spread discontent among patients. The removal either home or to the asylum was ordered of certain patients well suited to sanatorium care who had not asked to go. These included chronic psychoses without anti-social conduct, paranoias, simple dementias, transitory and curable psychoses, etc. In particular the removal home as mentally fit and wishing to leave was ordered of a blind paraphrenic who made a stereotyped demand for discharge to go to "X, where she had the freedom of the city," but who remained, though she carried the writer's signed permit, and who refused to depart with her friends. Other cases, unable to exercise volition (*e.g.*, of stupor) were to be certified.

These events raise wider issues. For twenty years the writer has conducted, with magisterial approval, an open sanatorium outside the Asylum at Liege for patients either throughout their illness or before or after asylum treatment. Experience teaches that such institutions increase curability, shorten the duration of psychoses, prevent psychic contamination and morbid imitation and lessen the frequency of certification. Yet apparently these and even open wards in asylums are against Belgian law, which allows only home

⁽¹⁾ "Deuxième note sur la fausse réminiscence," *Journ. de Neurol.*, Bruxelles, about 1905.—⁽²⁾ "Les crampes et les paralysies nocturnes," *La Médecine Moderne*, 1900, Dr. C. Féré.