

labour, still it would, as a matter of course, be found in practice to be impossible, in dealing with lunatics, to carry out any such system of compulsion.

Inasmuch, then, as coercion and punishment, with the object of promoting industry, are inapplicable to insane persons, and as they would indeed, if tried, be found in practice to be not only cruel but unsuccessful, recourse must necessarily be had to some system or other of rewards. Previously to the year 1875 the chief kind of reward offered for useful work consisted, in this asylum, of a luncheon of bread and cheese, with beer, in the forenoon, with a further smaller ration of beer in the middle of the afternoon's work. In 1875 the issuing of beer in the forenoon and afternoon, as a reward for work, was discontinued, and a scheme was introduced instead by which a small proportion of the money value of the work actually done is credited to the workers, to be expended for them, according to their individual tastes, in procuring trifling luxuries of a harmless nature. As a result of the operation of this scheme it was found that the money value of the work done by the patients in the shoemakers' shop in the year 1876 exceeded the money value of the work done in 1875 (the year preceding the introduction of the scheme) by 160 per cent., whilst in the tailors' shop the extent of increase was 120 per cent., and similar results have been obtained in other departments of labour; and thus, notwithstanding the allotment of sums of money to the working patients, the annual cost of maintenance has undergone reduction to a very appreciable extent. The discontinuance of the issue of beer in the forenoon and afternoon caused a saving upon that item alone, during the year, of £165.

From the time at which the control of the repairs of the buildings was transferred from the Council to the Office of Works no use whatever was made of the labour of the patients in that department until the month of June in last year, at which time the Office of Works gave their sanction to the employment of a party of patients in the work of painting.

Between that time and the end of the year the money value of this description of work, executed by the patients and their attendants, amounted, according to a return, furnished by the Office of Works, to the sum of £228 19s. 6d.

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*Dr. Major on Statistical Tables of the Causes of Insanity.*

In proceeding now to offer, for the opinion and judgment of others, a method of tabulation which I venture to think would meet many of the requirements of the case, and be free from the sources of fallacy inseparable from the system which usually obtains, I have merely to

express a hope that it may be considered worthy of being weighed in the balance and dealt with strictly on its merits.

The feeling of utter failure experienced in endeavouring to draw up with accuracy a table of causes in the usual manner, led me to consider whether it would not be possible to devise a system which, while being simple and easy of application, might at the same time embody more facts than the usual method, and so be more truthful and accurate. And, finally, a scheme suggested itself, to describe and illustrate which will now be my object.

The course proposed is extremely simple. It is (1) that in recording each case, with respect to its causation, the circumstances, however few, or however numerous, which seem, on the information available, to have exercised a causative influence, should be fairly stated; and (2) that in placing the supposed causes in a tabular form, they should be simply added together, like with like, and irrespective of the number of cases under consideration. To give an illustration of the plan suggested, I take six cases at random from the case book.

Name.	Causes.
M. S.	Hereditary tendency (to insanity), alcoholism, previous attacks.
M. A. S.	Over-lactation, grief.
E. P.	Old age, grief.
S. J. C.	Hereditary tendency, climacteric period.
S. L.	Old age.
E. A. H.	Grief, privation, climacteric period.

Adding and tabulating like causes in the above six cases, the results may be expressed as follows:—

	Cases.
Hereditary tendency contributed to the production of	2
Alcoholism	1
Over-lactation	1
Grief	3
Old age	2
Climacteric period	2
Privation	1

Of course, if desired, the sub-division into moral and physical causes can, under this system, be made in the usual way, and probably the table would derive additional value by the *percentage value* of each causative agency being given. These are matters of detail; the essential point being that of no single cause it is stated that it has produced a given number of cases, but that it has been *concerned in their production*.

The chief advantage claimed for the system, as now submitted, has been already pretty clearly indicated in the course of my remarks. Instead of pausing in perplexity over cases to the causation of which

several influences appear to have contributed, and endeavouring to weigh their relative importance, so as to be as little incorrect as possible in stating *the* cause, there is nothing to do but to record carefully and conscientiously *all* the influences which appear to have played a part. Take a case (no uncommon occurrence) in which there is shown to have been hereditary tendency to insanity, mental anxiety, and alcoholic excess as facts in the history. Who shall decide on which to throw the responsibility and which to exclude? Is it not more probable that all have played a part, and that to attempt to dissociate them is impossible, and must fail? The system proposed provides for any such contingency, and gives to all the adverse influences a place.

But it may be urged that the value of positive data as to the number of cases of insanity traceable to a given cause, and that cause only, is too great to be given up. It would certainly be so if it could be shown that in a majority of cases it were possible to ascertain the fact; but if, as I have contended, this is impossible, then, as it appears to me, it is better to remain satisfied with data, which if not so definite and precise as could be wished, nevertheless express important facts and furnish reliable information.

It may be objected, in the second place, that by the proposed method all causes would appear to be of equal potency: that is to say, no special indication is given of those which *singly* have or appear to have occasioned the insanity. I must admit the force of the objection, which, however, applies equally well in reality, if not on paper, to the system commonly in use. Practically, the most important cause will be that the occurrence of which is most frequently noted, and this is at once indicated in the method of tabulation proposed.

Finally, it may be urged that it is safer in stating causes to give too little than too much, that it is better to omit the record of some condition which may have been causative, rather than to introduce such as those which may have had no influence. Possibly this is so. Practically, however, with care, serious error in over-statement will, I think, be usually avoided.—*Journal of Psychological Medicine*, vol. iii.

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#### *Fraternal Congratulations.*

The Association of Medical Superintendents of American Asylums concluded the scientific proceedings of their Annual Meeting with the following resolution, which was adopted:—

*Resolved*—That we congratulate our much-esteemed colleague, Dr. Andrew MacFarland, an early, useful and beloved member of this Association, upon his new social relations assumed with Miss Abbie