

is a rush into it and the authorities are obliged to refuse to receive more patients.

A new asylum for quiet demented patients has been opened at Graze, and it is hoped that this may be the nucleus of an insane colony. Indeed, if the asylums could get rid of these inoffensive patients a great deal of room might be obtained for recent cases. If the experiment succeeds, and I think that it must succeed, it will take a long time to accustom the people in and about Grave to live with the insane. A colony like the one at Gheel cannot be had to order. During the first years of its establishment constant and regular supervision is especially necessary.

Scientific attention is now being paid to prisoners, amongst whom, as is widely recognised, several are found whose proper place is an asylum. It is a well-known saying of Tarde that the reason why one man should be in jail while another is in an asylum is that the path of the former was crossed by a judge whilst that of the latter was crossed by a physician.

During the years 1894, 1895, and 1896 the inspectors met with 169 lunatics in the different prisons; of these, 26 were treated in prison, 137 were sent to asylums, and 6 were sent back to prison after having been found malingersers.

It is very unfortunate that a criminal, whose mental health is doubtful, has to be medically examined in a prison. The law does not allow of his temporary admission into an asylum; the investigation consequently has to be carried on under very unfavourable circumstances, and the reports of turnkeys may be safely said to be worthless. These officials consider medical interference as an act of usurpation, although they have never learnt to observe an insane person. A step in the right direction might be taken by employing an experienced mental nurse to attend and report upon the person to be examined. A great deal of prejudice and opposition has to be conquered before a real advance can be made.

Another matter which has been fiercely discussed is the rights of woman. I mention the question, not because it is directly connected with mental medicine, but because alienists in Holland have been actively engaged on both sides.

DENMARK.

By Dr. A. FRIIS.

There has been a change at the *personnel* at the asylum at Aarhus, Dr. Holm, who has been Director since 1878, having retired at the end of last year on account of ill-health, and Dr. K. Pontoppidan having succeeded him in March, 1898. This able and talented physician had been medical superintendent of the wards for nervous and mental diseases at the Kommune Hospital at Copenhagen, and clinical lecturer on psychiatry at the university there, but had resigned those

offices, sick and tired of the persecution to which he was subjected in the press, and through pamphlets at the instigation of a litigious and ill-conditioned patient who had been under his care, and who, plotting with other of his former patients, endeavoured to secure his conviction on a charge of having wrongfully detained them. Of this charge he was, of course, honourably acquitted. His retirement from his Copenhagen appointments was a matter of regret to all his colleagues and pupils, who presented him with several addresses expressive of their feelings. It is still to be hoped, and it is earnestly expected, that he will continue to adorn Danish medical literature with the results of his keen observation and intelligence, expressed with that literary polish which characterises his writings. At Copenhagen Dr. Pontoppidan has been succeeded by Dr. Friedenreich, physician to the Copenhagen prisons.

With reference to the care of idiots, the year 1898 has witnessed the adoption of the law mentioned in my last retrospect, by which the Keller asylums are to be amalgamated and rebuilt on a new site near the town of Veile in the province of Jylland, where a property of about 270 acres has been bought for the purpose. Room will thus be made for 200 idiots more, the total accommodation being raised to about 1400.

A small asylum for epileptics has been started by private initiative. It has accommodation for twenty-five quiet male patients. In the forthcoming year it is intended to start a school for epileptic children who are not mentally affected, which will be connected with a "deacon institution."

On the Toxicity of Urine, especially in Insane Patients: an Experimental Study, is the title of a very voluminous work written by Dr. V. Christiansen as a thesis for doctorate at Copenhagen University. Unfortunately the results are not proportionate to the author's labours. The book is also difficult to read and hard to get a comprehensive view of, owing to the many numerical tables and tabulated statements of experiments which are introduced into the text. The author has imitated the methods of Bouchard and his pupils, who have written on the toxicity of the urine under different conditions. He criticises the results of these authors, pointing out their weak points and deficiencies, but, as hinted above, his own results do not seem more valuable or more assured. The researches were made in the St. Hans Hospital at Roeskilde, and involved more than 500 experiments on rabbits, injected with urine from patients in mental conditions which varied exceedingly, both ætiologically and symptomatologically. General paralysis, however, and typical paranoia were excluded on account of the peculiar positions which these forms hold in psycho-pathology. The principal result the author believes he has attained is to show that in all psychopathic conditions, notwithstanding their various clinical appearances and ætiology, the quantity of toxins secreted in the urine in twenty-four hours is less than in the normal conditions (the "urotoxic co-efficient" of normal urine being 0.32 to 0.49, of the urine of the insane about 0.2). No conclusion can be drawn from the intoxication of animals by urine as to the psychical condition of the patients. The author more especially remarks the oncome of convulsions in no way depends on a greater or lesser degree

of exaltation, but that they may set in even very violently in connection with cases resembling stupor. The symptoms of urinary intoxication depend, within rather wide limits, on the individuality of the animal experimented upon.

The author has also specially examined the urine of sleepless patients, and has found that the amount of "urotoxines" secreted in the urine of the night are independent of sleeping or not. Another special investigation is on the toxicity of urine of patients on thyroid treatment. It is found that the quantity of toxins secreted in twenty-four hours during, and a short time after, treatment, is greater than the amount secreted when not under thyroid treatment. The increment is not equal in all patients, and seems to be due to an increased destruction of the albuminates.

Influenza as a Cause of Insanity; Historical and Clinical Researches, by Dr. H. FEHR, is also a very voluminous book (438 pages), written for the same purpose as the former. The results also are not very great, being mostly negative; they are, besides, not always unimpeachable, as the author admits. The historical part comes first, and the first chapter consists of a short account of the acute febrile diseases as causes of insanity; then follows a chapter on influenza in general, and then the mental diseases caused by influenza. First, the older observations are recounted, and then observations from the epidemics subsequent to 1889. Among the latter 303 cases are reviewed, published in the most various periodicals by more than 100 authors. It is evident that these authors do not agree as to the pathogenesis of these insanities. Some of them regard influenza as an "epidemic nervous disease," a "centro-neural fever." To these the psychical disturbances are a matter of course. Other authors believe that influenza is capable of producing insanity in previously sound persons, and that this process is to be explained by a special "grippe-toxine." Again, others hold that the toxine is the chief factor, but that it cannot act alone, and that there must be individual neuropathic disposition. All forms of mental diseases are also represented among these cases.

The author then proceeds to that which should be the substance of the book, his own original researches, based on fifty-four cases from the asylum at Middelfart, which are all referred to in detail. In fifty of these cases the insanity appeared as a "convalescence-psychosis" after influenza. The "infection-psychosis," which appeared as an "achme-delirium, and as "collapse-delirium" was only represented by two patients, one under each form. In two further cases the common symptoms of influenza were not confirmed in the patients themselves, but their insanity broke out at a time when everyone about them was suffering from influenza, and the author therefore thinks that the mental trouble in these cases resulted from influenza, but he does not include them in his statistics. The author's patients have shown very different symptoms; nevertheless the excited forms predominated among the cases of "infection-psychosis," and the depressive forms among the cases of "convalescence-psychosis," from which it appears to be demonstrated that influenza does not produce a special form of mental disease, and does not always produce the same form of disease. The author is of opinion that "influenza has the power of

bringing to light whatever morbid tendencies there may be in the organism, and, with regard to mental diseases, that peculiar form of insanity to which the individual is most disposed is that which influenza calls forth." However, predisposition is not absolutely necessary. The name "influenza-psychosis" is therefore not applicable, except, perhaps, as a mere ætiological definition, and the so-called "pseudo-influenza-psychosis" has for the same reason no right to its name. Of all cases of influenza, those which are most serious generally are most prone to produce insanity. Insanity may break out at any period of the illness, but most of the published cases are "convalescence-psychoses." Patients under fifteen seem relatively less affected; from fifteen to sixty-five cases are more frequent; after sixty-five the proportion again decreases. The sexes were affected in equal proportions. As to prognosis, there is nothing definite to say; the treatment is chiefly supporting. Some authors having believed that they observed an augmentation of the cases of suicide and delirium tremens in connection with epidemics of influenza, the author has made statistical inquiries into this matter, and has found that, while there has not been an absolute increase of the number of suicides during the whole period since the epidemics began, there have been during the epidemics (great as well as small) more suicides than the average expectation would justify. But there is this singular difference in this matter between the great and the small epidemics, that the apparent increase is to be traced to the two first months after the cessation of the great epidemics, but it is abolished directly after the small, and in the latter case the cessation of the epidemic is followed for the next two months by a compensatory falling off of the number. A similar falling off after the great epidemic shows itself first in the third or fourth month. As to cases of delirium tremens, a generally similar result is to be noted, but the falling off occurs even before the epidemic has ceased.

Clinical Lectures on Nervous Diseases, by Dr. K. Pontoppidan, appeared shortly after the author's resignation above referred to. In twelve lectures he treats, with his usual brilliancy, clearness, and preciseness, various subjects connected with the pathology of the nervous system. The book is of interest to the alienist, as it frequently touches upon the connections between psychiatry and neurology. Thus, in the first lecture the author describes an old man in whom multiple softenings in the brain caused by arterio-sclerosis produced dementia and hemianopsia duplex. Similarly in the twelfth lecture on "Hypochondria and the Psychological Treatment of Functional Neurosis," where the author details cases of hypochondriasis, especially one in which there were stereotypic automatic movements of the mouth to clean imaginary dirt from the teeth, the author takes occasion to thoroughly discuss the question of "disciplinary" treatment in hospitals, "diverting" by work, hypnotism and hypnotic suggestion, &c. In other lectures he deals with meningitis in adults, cerebral apoplexy, the diagnosis between organic and functional nervous diseases, cancer of the spinal column with medullary trouble, rare nervous affections in connection with the puerperal state, bulbar paralysis with emotional incontinence (Crichton Browne), humour ad pnhem, and traumatic lesions of the brain.

On the Pathogenesis of Delirium Tremens is the title of a study by Dr. P. Hertz published in the *Hospitalstidende* in consequence of the paper on the same subject by Dr. Jacobson, referred to in my last retrospect. The results of Dr. Hertz's researches is to show that uncomplicated delirium tremens is always accompanied by a disturbance of the renal functions—an acute nephritis which is primary to the delirium. There is, therefore, every reason to suppose that this malady is an acute auto-intoxicational insanity following the insufficient performance of the renal functions in an acute nephritis. The special form of delirium tremens is only due to its arising in a chronic alcoholist.

Dr. Würtzen has published in the *Nordiskt-mediciniskt Archiv* some investigations on *Insanity in Danish Recruits*. They are based on forty cases observed during the last ten years. Predisposition was found in thirty cases, and insanity appeared shortly after the beginning of service, owing apparently to a lessened power of resistance in the individual. The author is not disposed to believe in a special insanity of recruits, but thinks that most of the cases are insanities of development or of puberty.

ITALY.

By Professor BIANCHI.

Italy has not yet a Lunacy Act. The various propositions submitted to Parliament have borne no fruit, owing to the fall of ministers or to the dissolution of the Chamber of Deputies. An Act is much required. New propositions, drawn up by an extra-parliamentary commission, of which the present reporter is a member, are to be considered. In the meantime insanity increases greatly in Italy. Districts, which at present are without asylums, in the modern signification, are being provided with them.

Psychiatry in Italy is at present less occupied with experimental investigation than with histological, clinico-chemical, and bacteriological work.

The principal work recently accomplished may be briefly referred to. *On the Origin and the Mutual Relationships of the Nerve and Neuroglial Elements*, by F. Capobianco and O. Fragnito.—The authors give the results of their researches under four headings. Under the first they treat of the neuroglia, to which, contrary to the almost unanimous opinion of recent observers, they assign a double origin, ectodermal and mesodermal. The former is generally admitted, but not the latter. The second chapter, dealing with the origin of the nerve-cells, is of less importance, the authors simply confirming the demonstrations of previous workers in respect to the ectodermal origin of these cells. Their development is followed through the four principal stages—germinative cells, transitional cells, neuroblasts, nerve-cells.