

charge a certain number of patients will then be placed, and treated like ordinary members of such households, taking part also in the customary domestic arrangements. In short, the Gheel system will thus be put in operation, although at first on a limited scale. Nevertheless, agencies of that kind cannot but become, in many cases, powerful prophylactic aids towards promoting professional treatment, besides thereby usefully occupying the inmates. Much praise is, therefore, due both to Dr. Aitken, the able medical superintendent, for recommending, and to the Inverness District Board of Lunacy for sanctioning, so humane a proposition; while every philanthropist anxious to promote the well-being of demented persons, to whom "the free open-air treatment" is applicable, must wish it success.

Believing some of the remarks just made regarding lunatic asylum sites will not be deemed wholly uninteresting to those engaged in these discussions, and also considering that several of the facts narrated demonstrate conclusively that Scotland does not lag behind other European countries in reference to the novel point at issue, I shall feel obliged should the present cursory observations obtain a place in your valuable journal.

I am, Sir, your obedient servant,

JOHN WEBSTER, M.D., F.R.S.

Brook Street; Oct., 1865.

*The Lancet*, November 11th, 1865.

*The Mackintosh Case—Testimonial to Drs. Smith and Lowe.*

OUR readers will recollect that a series of actions was brought by Mr. Mackintosh, of Holme, against those whom he charged with having been accessory to his illegal detention in a lunatic asylum. The last of these actions was brought against Drs. Smith and Lowe, the proprietors of Saughtonhall Asylum. There were peculiar hardships in the case of this action, for not only had Mr. Mackintosh been received as a patient in virtue of a regular warrant, but the action was not raised for a number of years after the alleged illegal detention had taken place. In the subsequent proceedings the defendants were successful; but even though they gained their cause, a very considerable expense was incurred. The medical profession of Edinburgh, desirous of testifying to Drs. Smith and Lowe the sympathy they entertained towards them, collected a sum of money to aid in defraying their expenses, which, a short time ago, was handed to Dr. Smith by Dr. Burt, President of the Royal College of Physicians. The subjoined correspondence will explain itself.

"Physicians' Hall, Edinburgh;

"17th November, 1865.

"MY DEAR SIR,—You cannot doubt that you and Dr. Lowe have had the wide-spread sympathy of the profession in your long and vexatious litigation with Mr. Mackintosh, of Holme, and that the termination of the case in your favour has given universal satisfaction.

"A few of your brethren have entertained a strong desire to lessen in some degree the pecuniary loss you have sustained, and with that view have contributed to the best of their ability, and it gives me great pleasure to be the medium of conveying to you the amount subscribed (£190 10s.), with their best wishes for your future happiness, and the prosperity of the ad-

mirable institution over which you and Dr. Lowe so ably and so skilfully preside.—Believe me, ever yours faithfully,

“JOHN G. M. BURT.”

“Dr. John Smith.”

“Saughtonhall; 20th November, 1865.

“SIR,—We shall esteem it a favour if you will insert the enclosed copy of letter in the next number of the ‘Edinburgh Medical Journal,’ and will at the same time allow us to express to our professional brethren the gratitude we feel for their handsome testimonial. Were we merely to acknowledge their very liberal subscription of the sum of £190, we should do so with feelings of the utmost gratitude; but even this sum, large as it is, sinks into insignificance in comparison with the pleasure we must ever feel at this general and unequivocal testimony on the part of those whose good opinion we highly prize. We accept it as an acknowledgment of their sense of the injustice by which we were made the defendants in a prosecution, which was not only most uncalled for in the first instance, but which was allowed to sleep for twelve years before it was submitted to a public trial. At the trial we had the satisfaction of being supported by the Scottish Courts of Justice, and eventually by the unanimous decision of the House of Lords.

“Satisfactory as their decisions were, after a long and protracted trial, attended, we need hardly say, with great anxiety and expense, we have now to acknowledge a still higher satisfaction in this expression of the opinion of our professional brethren; and we beg most cordially to express the feelings of gratitude we must ever feel towards them for this unlooked for act of liberality and kindness.—We beg to remain, Sir, your very obedient servants,

“JOHN SMITH,

“WM. H. LOWE.”

*Edinburgh Medical Journal*, December, 1865.

*Mr. John Blake, M.P., on the Desirability of an Uniform System of Treatment in Asylums for the Insane.*

CONCERNING as I do, that all public asylums have, since 1792, made steady progress in the direction of a more successful and enlightened principle of treatment, and feeling convinced that the moral treatment of the insane by kindness, occupation, and amusement, is now firmly established, I would venture to ask, why is the principle carried so much further in some institutions than in others? and, again, would it not be possible to lay down some general code of rules and regulations for the guidance of all public and private asylums in the United Kingdom, and thus afford to their inmates the fullest advantages, limited only by local circumstances, of liberty, occupation, and amusement? In visiting public asylums at home and abroad, I have often been struck by the different principles which appear to guide the governing powers of almost neighbouring institutions. Thus, in England, the asylums of Leicester and York have absolutely no boundary walls—nothing beyond a quick-set hedge—while other English county asylums are protected by the old conventional high prison-like walls, and I may add that the official returns of these respective institutions show that the attempts at escape are less frequent in the unwalled than the walled asylums; and, what in a fiscal point of view, is of greater importance, the number of attendants