

straint in the treatment of the insane must carry great weight when read in Germany :—

*“ I distinctly (he writes) assert that the non-restraint system is practicable. I have seen it carried out among many thousand patients in England, and I have found them quite as quiet and well ordered as at home, and I have learnt more and more to hate the sight of our instruments of restraint.”*

And again, regarding the old worn-out argument that such things are used in secret in England, he says that one who has learnt thoroughly to understand English life and English physicians would know well that such reasoning merited only contemptuous silence. He concludes his observations on this subject by saying—

*“ I have no doubt whatever that this English system of non-restraint must ere long prevail in Germany, and I would again urge towards this great object the careful study of English models, and above all of the asylum at Haywards Heath, and I can only again grieve that my limited time prevented me from lingering longer in that beautiful asylum.”*

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#### *“ The McFarland Trial.”*

IN the “New York Times” of April 26th and April 27th may be seen in large capitals—“The McFarland Trial. Highly important testimony of a medical expert! The causes which tend to produce insanity! What is congestion of the brain? How its presence is positively determined. Opinion regarding McFarland’s mental condition. Further important evidence of medical witnesses! Various grades of insanity explained. How the physicians determined that the prisoner was insane. Various mental tortures applied! The poor fellow thrown to the verge of acute mania!!” In all the New York papers of about a week later there were strikingly vivid descriptions of a scene in the court where this McFarland trial had just terminated by the acquittal of the prisoner. We read that ladies wept for joy, and men hurrahed, that prisoner, and counsel, and jurymen were hugged and kissed by excited women, and the man who had an hour before been standing in the dock, tried for his life, was now greeted with the acclamation given to a popular hero; the man who had just been declaimed by the highest medical authorities in the New World to be so mad as to be quite irre-

sponsible for a deliberate murder committed by him in broad day light, was now hailed as the champion of the principle of the sacredness of the marriage tie.

Such was the sensational ending of a story which from the beginning had been in the highest degree sensational in all its incidents. The prisoner, Daniel McFarland, had in 1857 married a handsome girl of 19, telling her he was a lawyer in good practice, possessed of money, and with a comfortable home in the West. The poor girl soon found that the practice was a myth, the home a third-class lodging-house in New York, and the husband an Irishman, greatly given to "Schiedam schnaps." He drank hard, and when under the influence of the "schnaps" was brutal, cruel, and to all intents and purposes mad. They led a wandering, miserable life. To support their children Mrs. McFarland used to write for magazines, and latterly to act at theatres, and she evidently showed talent and accomplishments. In 1866 she seems to have become acquainted with a Mrs. Calhoun, who whispered in her ear the new gospel of "woman's rights," and became the confidant of her sorrows and trials. She became acquainted, too, with a Mr. Richardson, a man of education, intelligence, and agreeable manners, who was very kind to her, and sympathised with her unfortunate position. Under those circumstances it is not very surprising that she and her husband got on worse and worse, and that at last she put in practice the theories of her friend Mrs. Calhoun, as to the right of a woman to get rid of a drunken and cruel husband. The divorce laws of Indiana offered her a convenient means of doing so, without even letting her husband know anything about it. When McFarland heard that his wife was divorced from him, he seems to have behaved very like a man whose powers of self-control were, to say the least, considerably weakened. The affection he had for his wife and children showed itself certainly very strongly in many ways, but his habits of intemperance became more marked, he seemed to have hallucinations of vision, to be depressed in mind, to talk of suicide (as he had constantly done before when drunk), to talk to all his friends very freely about his domestic troubles, and to be erratic in his habits and ways. He found out that his divorced wife was becoming more intimate with Mr. Richardson; he heard they were to be married, and he fancied that she must have committed adultery with him before her divorce, and that all his children would be taken from him. The result was that he shot Mr. Richardson in open

day, wounding him fatally, so that he died in a few days. Before he died, however, a marriage ceremony was performed between him and Mrs. M'Farland, in which many sensational accessories and incidents were introduced. Two of the best-known clergymen in New York performed the ceremony.

McFarland was tried for the murder, and the defence was that he was insane when he committed the act. Public opinion was most violently agitated on the whole matter. New York divided itself into two camps, the sympathisers with McFarland, who were naturally those who held the old fashioned views as to marriage, and the sympathisers with Mrs. McFarland, who comprised all the new and rising "persuasion" of the believers in easy divorce, woman's perfect equality with man, free love, &c. Neither party cared in the least whether McFarland was insane or not; but as it was on the decision of this question that he was to be hanged or not, all the best known experts were summoned to give their opinion, and this opinion was the sensation of the hour in New York. Hence the startling headings in big type quoted above.

The chief medical experts examined were Dr. R. A. Vance, Dr. R. L. Parsons, and Dr. Hammond. Their testimony was in keeping with the other parts of the drama, being new and startling in no ordinary degree. Dr. Vance is described by the "New York Times" as "a gentleman of somewhat youthful appearance, but possessing intellectual characteristics far beyond his years," who "gave his evidence in such an intelligible manner as to be understood by persons of ordinary comprehension," describing the "structure of the brain, illustrating as he proceeded by reference plates, which showed a healthy and a diseased condition of that organ." "He described the uses of the ophthalmoscope, telling how physicians determined the presence of congestion of the brain," and applied the "whole class of symptoms indicating congestion of the brain to the case of McFarland." He described and laid great stress on the pulse being very quick (107), and becoming much quicker during the three hours he was under examination. He thus summed up his evidence:—

Q.—What organic changes are apparent in an individual who suffers from congestion of the brain? A.—The appearances will vary; sometimes you see a general haggard appearance—sometimes slight paralysis in the eye—paralysis of the face—hanging of one

cheek—distortion of the mouth, one corner being depressed and another elevated—the tongue not coming out in a straight line, but projecting to one side, and the person being unable to articulate properly; then there is paralysis of the arm and leg, when they cannot maintain a continued tension; there is also a projection of the eye which it is impossible to assume.

Q.—What is the change in colour of the brain, to which you have referred, attributable to? A.—Increase in the amount of blood circulating through the vessels in the back of the eye; any process of decay that alters its appearance might cause degeneration of the optic nerve.

Q.—What change of character is there in those who suffer from congestion of the brain? A.—There is a general change of character; for instance, a moral man may become obscene, a pious man may become very ungodly, and a thrifty person may become spendthrift; a feeling of depression and exaltation is also very common, and is inseparable from insanity; memory generally fails and judgment is invariably impaired, and the speech becomes incoherent; besides this, there are illusions, hallucinations, and delusions; in the beginning the person simply complains of dark spots in his vision and noises in the ears, then follow hallucinations, and finally, delusions; wherever congestion of the brain exists it is accompanied by these signs if it continues for any length of time.

It appears that a first cousin of McFarland, to whom he was said to bear a resemblance, had been insane, and this was duly dwelt on. At last the counsel for the prisoner asked Dr. Vance the very longest question ever asked in a court of justice (it is said), which occupies more than half a column of very small type, the answer to which was “I should unhesitatingly say he was not in his right mind—that he was insane.” And unquestionably if McFarland answered to the supposed cases described in the question, he was mad enough, for amongst other things mentioned were hallucinations, delusions, suicidal tendencies, sleeplessness, frenzy, and absolute distraction, not to speak of a pulse varying from 100 to 130, the “involuntary working of the muscles of his chin and about his mouth and nose,” and the “tendency to pull his hairs.” Dr. Parsons gave similar evidence to Dr. Vance, and then Dr. Hammond was examined. He described how he “ascertained the presence of congestion of the brain by the ophthalmoscope, measured the strength of the nerves by the dynamograph, timed his pulse, which he found varying from 104 to 124; and by speaking of Richardson, and showing McFarland photographs of his wife, made the poor man almost

frantic with grief, and then, grasping his hand, found his pulse to be 142. At this time McFarland was almost uncontrollable, and exhibited all the symptoms of acute mania." It is said that those experts stood a most severe cross-examination without flinching from their opinions.

Those American experts were bold men. Have we not all been longing for the coming time when our knowledge of the structure of the brain, and of its pathology, would enable us definitely to connect its organisation and disorganisation with sanity and insanity? Who can describe the mental tortures that our poor "mad-doctors" might not have been spared from merciless counsel as they vainly tried to reconcile metaphysical abstractions with the working of brain cells, if they could have triumphantly appealed to what they saw through the ophthalmoscope, and to what the dynamograph told them? Well might one of the young lions of the "Daily Telegraph" roar about the new era which this trial had inaugurated in the detection of insanity. No longer will the "Saturday Review" be able savagely to vituperate the men who venture to say that they think an imbecile epileptic is not altogether responsible at all times for his actions, for (after drinking and fits) are not the vessels of his retina highly congested?

That this bold appeal to physical facts and symptoms, and instrumental indications in a court of justice is in the right direction, cannot be doubted. America deserves the credit of the novel idea. But it is to be feared that for some time we shall differ as much about the physics as the metaphysics. Oculists will be called in to say that all sorts of congestion of the retina may occur without any trace of perversion of intellectual vision; physiologists will say that the indications of the dynamograph are as yet very uncertain; physicians will quote cases of high pulse, and raised temperature, and all sorts of nervous twitchings and unsteadiness, when at the same time there was absolute freedom from intellectual or emotional derangement; and pathologists will, as before, describe instances of softened brains which seem to have been compatible with sound minds. Dr. Hammond has the respect of the whole profession, but many persons will be found to say that a considerable portion of his evidence, and that of Dr. Vance in the McFarland trial, was only an application of sensational psychology to a sensational case.

T. S. C.