

been respited, and thus both Dr. Ley and Dr. Mould are justified in their opinions, the first by the conviction of the prisoner, and the second by his respite; and what is, perhaps, as important, substantial justice is done both to the prisoner and to the community which he had so grievously wronged.

KLEPTOMANIA.

The wealthy American lady, Mrs. Castle, recently tried at Clerkenwell, and sentenced to three months' imprisonment in spite of Sir Edward Clarke's defence, has been set at liberty, but at what cost of mental anxiety to herself and to her unhappy friends. At the trial it was conclusively proved that she had no need for the articles stolen, and that her past history showed similar aberrations. Drs. Savage and Gabriel are reported to have stated in court, *after she pleaded guilty*, that "she was suffering from disorders which had so mentally affected her as to render her not responsible for her actions." Is there not something very much amiss in this procedure? Is it seemly that any person should be found "guilty," and immediately thereafter, evidence should be led to mitigate or nullify the sentence? The late Committee on Criminal Responsibility appointed by the Medico-Psychological Association excluded minor offences from their consideration; but the matter cannot rest while such cases as this recur from time to time. Is there any reason why the victims of mental disease should not be dealt with as insane offenders, why some such procedure as is prescribed by the Scottish Lunacy Act for 1862 (Sect. 15), should not be made generally applicable? By that enactment the Sheriff can, if satisfied, order the delivery of the sufferer to a friend or relative for the purpose of proper care and treatment; and thus in open court or *in camera* obviate the scandals following upon such incidents as we now mention.

INSURANCE AND SUICIDE.

An important case was tried in the Court of Session in June. The questions at issue were whether the late Captain Sangster met his death accidentally, whether he had failed to use due diligence for his personal safety and protection. From the evidence it appeared that he had gone to Crieff Hydropathic for a change, and that he had proceeded to Loch Earn, where he was seen rowing about in a boat on the evening of the 30th April, 1895. Next day his clothes were found neatly folded up in the drifting boat. The Insurance Company refused to pay the policy of £1,000, averring that Captain Sangster had committed suicide, or that he had failed to take proper care of himself.

From the medical point of view it was stated for the Insurance Company by Dr. Gillespie that he did not think the fact of the clothes having been found in the boat displaced the theory of suicide. Suicides were often secretive. He knew of a case of suicide from drowning in which the person had stripped himself of his clothes.

Dr. Urquhart was of the same opinion. The fact that no signs of melancholia had been observed did not exclude the possibility of suicide. If the person did not intend to commit suicide he ran a very grave danger by bathing under the circumstances mentioned.

Dr. Clouston concurred, and laid stress upon the circumstance that Captain Sangster should have suddenly resigned his position as Marine Superintendent without conferring with his employers.

Lord Stormonth-Darling, in giving judgment, said—(1) that Captain Sangster was drowned in Loch Earn on the evening of 30th April, 1895; (2) that he died by accident, and not by suicide; and (3) that there was not on his part such want of diligence for his personal safety, or such wilful, wanton, or negligent exposure

of himself to unnecessary danger as to relieve the defenders from liability under the policy. With regard to the first of these conclusions there can be no doubt; it is on the second and third that the controversy arises. "The notion of what the doctors call 'sane suicide'" is out of the question. There may be strong, though I suppose there never can be sufficient, reasons for self-destruction; but no such reason existed in Captain Sangster's case. . . . The only possible theory to account for suicide is that he was in the earliest, which is said to be also the most dangerous, stage of melancholia. The defenders' case on record gives an air of plausibility to this theory. It is said in effect that for some time back he had been in a desponding state about his health and his fitness for his duties; that under the influence of this feeling he resigned his situation . . . ; that he left home on 29th April, and wrote the same night to his nephew, sending back the larger part of the money which he had taken with him; that he left Crieff next morning without telling any one where he was going, arrived at St. Fillans in the evening, engaged no room for the night, and went out alone in a boat on a cold and stormy night. Two additional suggestions not mentioned on record were made in the course of the proof as strengthening the theory of morbid despondency. One that he ate nothing from breakfast onwards, the other that he walked along with his head down and spoke to nobody. Now, some of these things are disproved and others are capable of explanation. Such evidence as there is shows that he had not only breakfast, but luncheon, at Crieff, and he certainly had a glass of port and a biscuit (which his doctor had recommended) both at Comrie and St. Fillans, and at each of these places he spoke quite cheerfully and pleasantly to the persons who served him. It is true that he had resigned his situation, and had insisted on doing so, notwithstanding the entreaties of his employers that he should remain. It is also true that he put forward as his reason partly that his health had not been good, and partly that he did not feel himself equal to his duties. But it appears that for some time he had found these duties irksome, though he discharged them to his employers' entire satisfaction, and he thought he would be happier in command of a ship trading to the East. As this resolution would almost certainly have removed him from the service of the Messrs. Thomson, who had been exceedingly kind to him, it was quite natural that he should magnify any reason which would seem to make the step he was taking almost a necessity. It was also true that he sent back some £15 from Crieff; but he had received payment of a month's salary just before leaving Dundee, and he retained £8, and said that he would write for more if he wanted it. His visit to St. Fillans, his going out in the evening to row, even his bathing at so comparatively late an hour on an April day, are made much less surprising than they would otherwise have been when we know that he was an impulsive man, accustomed to boats, and fond of bathing, and that he had not only been taking baths in extremely cold water on his last voyage, but had been advised by his doctor to use cold water as a means of recovering tone. Indeed, that and the use of port wine and a tonic had been the only prescriptions given him, for his bodily organs were all in sound condition, and there was nothing wrong with him except that he was rather fagged. Even the omission to make any arrangements for the night is explained by the fact that he might either have engaged a bed at the inn on returning from his row or he might have spent the night in the house of the witness Menzies, with whom he had lodged a few years before. Accordingly, I find in the evidence nothing to suggest morbid despondency or to make suicide a reasonable inference. If he was melancholy-mad, it is a most extraordinary thing that such an idea never crossed the mind of any one with whom he came in contact. On the other hand, it seems to me almost incredible that a swimmer desiring to drown himself should have taken pains to make the operation as difficult as possible by taking off all his clothes. I find it much easier to believe that an impulsive man, accustomed to boats and to cold water, should have suddenly resolved to have a swim on the evening of what had been for the season an exceptionally warm day, forgetting that the deep water of a Highland loch is void even after a warm day, and that cramp is a danger which may prove fatal to the best swimmer if he bathes where he can get no help."

On appeal, the First Division of the Court of Session on 28th October, 1896, concurred in the finding of Lord Stormonth-Darling, and gave decree as sued for with expenses.

This case is of interest in respect of the rejection of the medical evidence in favour of suicide, as above set forth. In brief, it did not seem possible for the judge to accept the statement that the initial stage of melancholia is not apparent to the man in the street. Yet, about the same time as this trial, the newspapers were printing the circumstances of Lady Mary Bligh's suicide; how she was found drowned after having entered the water divested of clothing; how her father stated that "it was not the fact that she had been in a very depressed frame of mind, or a despondent state of mind. Battling with ill-health though she was, she was uniformly cheerful and the brightest of companions. It is absolutely untrue that she had a love affair. That she was ever seen weeping bitterly in her walks must appear to those who knew her most unlikely. There can be no doubt that she acted as she did under some uncontrollable influence, rapidly developed, which at once deprived her of reason and overcame her will, which those who most lately conversed with her know was to live, not to die."

DR. A. JAMES ON CRIME.

At a recent meeting of the Medico-Chirurgical Society of Edinburgh Dr. James read a paper on "Crime," which is of interest, as representing the thoughtful conclusions of an able general physician in regard to this subject. Dr. James pointed out the analysis of crime, pauperism, and insanity in the constancy of numbers year by year. Just as diseases occur and cause death in a wonderfully constant number, so do crimes happen. He pursued this subject in regard to liability at different ages, and showed the dependence on season, temperature, weather, and so on. Dr. James entered at some length into questions of social relationships—the influence of trade, the preponderance of crimes against property in bad times, of crimes against the person in prosperous times. He showed how the crimes of the people are like themselves innately, and how the environment influences the criminal, and how the criminal is generally behind the age, although sometimes in advance of it.

Dr. James concluded by reference to the treatment of crime, and emphasised the necessity for treating the criminal rather than the crime. While acknowledging the usefulness of primitive measures to aid defects of action in the higher evolved centres of mind, he laid down the principle that all criminal law should be founded on natural science, and that special education in this respect is necessary for those who make the laws and those who administer them. Dr. James would have the governors of gaols competent in physiological psychology, and would enlarge their powers for detention or dismissal of criminals. He advocated greater publicity in affairs of business, and an extension of education in the best sense for all. He looked upon the improvement of the social condition of women as an important factor in the decrease of crime.

The discussion which followed was of an interesting nature, and will be published in full in the *Transactions of the Medico-Chirurgical Society of Edinburgh* for 1896-97.

ARCHITECT ASSESSORS.

It is of great importance, when new asylums are being erected in different parts of the country, that the best advice should be sought by those responsible for the after working of these institutions. There are now, at the service of the public, men who have given long and special attention to the many and intricate questions arising out of the continuous necessity for additions to asylum accommodation. There is a danger in adhering too rigidly to the traditions of asylum