

almost simultaneously. It would be better, we think, not to speak of "contagion" in such a case as this; there were causes in common, namely, heredity and vicious habits. The mental condition of one was aggravated by the reflection that she had been to blame for the consequences which followed, but there hardly seems to have been that action of the mental disorder of one sister upon the illness of the other which should be understood to constitute contagion. It cannot be said fully to correspond to the cases described by the French authors above mentioned.

Isolation of Persons in Hospitals for the Insane.—Read before the Philadelphia Social Science Association, October 23, 1879.

There are many excellent observations in this paper by Dr. Ray. He holds up to just ridicule the fallacies of public opinion in regard to mental experts, as for instance, that "the man who for many years has spent his days and nights surrounded by the insane is less qualified to give an opinion as to the existence of insanity in a given case than those whose knowledge of the disease is confined to a few general impressions respecting it." Thus in their wisdom the Legislature of Massachusetts has enacted "that no superintendent of an asylum shall give a certificate of insanity!"

Of the annoyance to physicians from actions at law for their certificates, Dr. Ray says: "Leading physicians in this community, to avoid the peril of a suit at law, have concluded to sign no more certificates of insanity."

Dr. Ray has also published a paper on "Recoveries from Mental Disease," read before the College of Physicians of Philadelphia, called forth by Dr. Earle's now well-known pamphlet on the "Curability of Insanity," upon which we have expressed an opinion in previous Retrospects in this Journal. We will not therefore enter again upon the subject here, but content ourselves for the present with referring our readers to this article, and to Dr. Earle's reply, "Studies Relative to the Curability of Insanity." Out of this friendly debate between these veteran alienists, the truth will doubtless be evolved.

2. *English Retrospect.*

English and Scotch Asylum Reports for 1878.

(Continued from July, 1879.)

Fife and Kinross District Asylum.—Judging from the excellence of this Report, the interests of the Institution would seem to be in no danger of suffering from the change of Superintendents. Dr. Brown evidently considers that the saying, "What is worth doing is worth doing well," refers to the preparation of Asylum Reports.

Notwithstanding the various means resorted to—such as removal of

all private patients and admission of those only who are paupers—to keep the number of the population within the limits of their accommodation, the complaint of overcrowding has still to be made. Two remedies are suggested to meet this evil—the enlargement of the Asylum, or the opening of lunatic wards in poorhouses for the reception of harmless chronic cases. We think both methods might be adopted with benefit to the institution and its inhabitants.*

The number of admissions for the year is 75, which is below the average for the past 10 years. Fifty patients have been discharged, a less average number than in former years. The percentage of recoveries on admission is 44, which is somewhat higher than that in all the Scotch Asylums during 1876, viz., 41.

We have to congratulate Dr. Brown on the extremely low rate of mortality during his first year of office. Out of an average number resident during the year of 286, there have been only six deaths—four males and two females.

The percentage of deaths on the total number under care is only 1·7, the smallest since the opening of the Asylum.

Killarney District Asylum.—The New Buildings opened this year for the reception of patients guarantee sufficient provision for the gradual increase of the Asylum population for many years to come. The present accommodation is for 356 patients, while the number resident at the end of the year was 287.

The increase in the population for the year has been 10. Dr. Wood is of opinion that this annual increase in Asylum populations is due, not to an increase of insanity, but to the large number of harmless idiots and imbeciles who are now sent to Asylums, and who formerly were allowed to be at large.

Amongst the admissions there is one whose treatment by her friends shows that in that “Eden of the West” there lingers an amount of ignorance and superstition which one would not have expected in this age of enlightenment.

This unfortunate subject of friendly attention was first bound with a rope and then dragged out to sea behind a boat, in order, they said, to calm her excitement. Her excitement was certainly calmed, for on being brought to the Asylum she was found to be in a state of extreme exhaustion, and to be suffering from acute pneumonia. Strange to say, she recovered, and has since been discharged.

Deaths number 32, and of these 13 are assigned to phthisis pulmonalis. The reason of this high mortality from lung disease is said to have been the low temperature in the day-rooms and corridors, which, however, might have been remedied, and the extremely monotonous and sedentary life which many of the patients lead, rendering them especially liable to this form of disease.

The want of a sufficient water-supply is subject of grave complaint,

*The Board have since adopted the first method, and considerable additions have been made to the Asylum.

there being not enough for ordinary purposes, not to speak of provision in case of fire. It is to be hoped that some plan will be adopted soon, and several are recommended, for procuring an abundant supply for all purposes.

Many important improvements, both in the house and grounds, have been made during the year.

Nottingham Lunatic Hospital.—This is a small Asylum, and the Report issued this year is a very short one, and contains matter of little interest.

Restraint or seclusion has not been employed during the year, nor has there been any suicide. "Tell-tale clocks" for the night attendants have been introduced.

We cannot find any reason why, to show the causes of two deaths, a table containing between twenty and thirty different forms of disease should have been made. Nor do we consider it at all scientific that one of the deaths should be set down to such a vague cause as "maniacal and melancholic exhaustion or decay;" or the other to so very comprehensive a list as "inflammation and other diseases of the brain, softening, tumours, &c."

Parkside Asylum, Macclesfield.—Here the accommodation is so much in excess of the population that the Board has been able to make arrangements to receive a certain number of patients from other Asylums.

Dry-rot appearing in the wood-work has rendered extensive repairs necessary.

Recoveries have been at a higher rate than in any previous year, and the death-rate has been low.

The number of admissions is the lowest on record since the opening of the Asylum. The number of relapsed cases, however, has been increased.

Dr. Deas is of opinion that this diminution of "new," and increase of "relapsed," cases "has more than an accidental connection with the great depression of trade." The compulsory frugality and temperance, due to diminished wages, would account for the diminution of "new" cases, while "the 'pinch' in regard to finding employment, and obtaining the necessaries of life, would tell sooner on those who had had former attacks of insanity." The periods of residence outside the Asylum of those relapsed, range from two months to five years.

The number of discharges is 66, the comparative smallness of it being accounted for by the great diminution in the number of foreign patients, who in former years swelled both the admissions and discharges.

The number of deaths is 57, a rate of eight per cent. on the total number under treatment. One general paralytic died during a congestive paralytic seizure, from food lodging in the trachea. The amount of sickness has been small.

The Assistant Medical Officer left during the year.

The "self-supporting" principle is applied to means of recreation, almost all the entertainments having been given by those connected with the Asylum. The weekly cost of maintenance per patient has been 10s. 8½d.

Lancaster County Asylum.—An epidemic of typhoid fever occurred during August and September. Four deaths resulted. The cause of the outbreak is doubtful.

A special dormitory has been set apart for epileptics, with an attendant constantly present. This has been rendered necessary by several of these patients having been suffocated, while in a fit, by turning over upon their faces. One of these had been in the habit of keeping in his mouth any small article which he could conveniently retain, and at the *post-mortem*, two plugs of blanket were found wedged into the larynx.

Deaths were at the rate of 7·6 per cent. on the total number under treatment.

No suicides or fatal accidents occurred, although one man made five attempts during a month to kill himself.

There were two cases of parturition, the mother in each suffering from acute mania.

Short pathological notes on each case of death, on which a *post-mortem* was held, are given by the Assistant Medical Officers.

Rainhill Asylum.—Complaint is made of the number of old and infirm patients sent from Workhouses. They simply swell the mortality list.

An inmate of the Asylum for upwards of 15 years has been discharged recovered. This is a very rare occurrence. The subsequent history of those discharged is, as far as possible, traced, and a useful table is formed from this.

The death-rate was 9·18 per cent. on the average number resident. One death by suicide is reported. It is five years since a like fatality occurred. Three patients have died of suffocation from food entering the larynx, one of them from food regurgitating from the stomach during an epileptic fit. In Table 18 many of the causes of death given are rather indefinite.

The Assistant Medical Officer, after four years' service, has resigned to go into private practice.

Three Counties Asylum.—The nineteenth annual report is a favourable one.

Great progress has been made in the new buildings, which have been rendered necessary on account of overcrowding. By the end of next summer it is expected that they will be completed.

Admissions for the year have been 183, a large number of these being cases of an incurable nature.

The discharges were 60, 49 only being classed as "recovered," a small percentage on the number of admissions, due, it is said, to the bad class of cases admitted.

Eighty-four patients died during the year. It is very unusual, in reports of Asylums, that the number of deaths exceeds that of discharges, and we should have wished that some explanation had been made of this abnormality.

One inquest was held on the death of an old man who had fallen down and fractured his thigh. The verdict given was—"Shock to system, consequent on accident." In Table 5 we object to the term, "Disease of Brain," as a cause of death, on account of its indefiniteness.

A *post-mortem* has been made on only a small number of cases, because of insufficient accommodation.

Dr. Swain objects, and quite properly, to criminal lunatics being sent to County Asylums. They must, to a certain extent, demoralize the other patients with whom they associate. It is to be hoped that Government, in its new zeal for home legislation, will turn its attention to this abuse.

A new fire-engine of thirty-two manual power has been obtained.

We notice with pleasure that an attendant, retiring on account of bad health, after many years' service, has been granted a pension of 12s a week. It is by such means as this that attendants should be encouraged to remain in Asylums, constant changing, we need hardly remark, being very hurtful to the interests of the patients.

The net cost of each patient per week has been 8s. 10½d., which is below the average in most County Asylums.

Chester County Asylum.—Here also we find that the Asylum population has undergone an increase during the year. There are now 27 more patients in the House than at the beginning of the year, and this notwithstanding that the number of admissions for the present has been 22 less than for the last year. There are now 512 inmates.

Admissions were 140, 16 being re-admissions.

The percentage of recoveries on admissions is large, being 42·2, which is 12 per cent. above the average of County and Borough Asylums.

Attention is drawn to the fact that the greatest number of recoveries took place amongst those brought to the Asylum in the earlier stages of the disease, and Dr. Davidson urges "upon all interested the importance of placing patients under proper scientific treatment at the earliest possible opportunity." It would be well were both the medical and lay world to bear this in mind.

The death-rate is small, the percentage on the total number under treatment being 7·9. There were 17 deaths from general paralysis—a very good opportunity for studying the pathology of this disease.

Four inquests have been held.

Amongst the class of cases remaining in the Asylum, we notice that the number of general paralytics is given as 54, a much higher number than is usually found.

Here is an item for teetotallers—"In 29 per cent. of the year's admissions, the exciting cause was *clearly* traceable to intemperance in drink."

Many important improvements, notably the execution of works for the utilization of the Asylum sewage on the farm, have been carried out. The patients have given valuable assistance in these improvements, the whole of the painting and plastering work having been done by them.

Scottish National Institution for the Education of Imbecile Children.—Dr. Ireland's reports are always good, and this year's forms no exception. His remarks on the influence of the rule excluding imbeciles above 18 years of age from Training Institutions are worthy of being reproduced—"Owing to the removal, from legal difficulties, of a number of adults, the check upon the admission of older pupils, and the increased rarity of re-elections, a very important change is being accomplished in our little community. There is now a much larger proportion of young children, and it is advisable to point out the necessary result of this alteration. As the children are more helpless, and require a great deal more attendance, and as we can no longer count upon the assistance of the older pupils in watching and taking care of them, the necessary expenses of the house are increased; the pupils in general are more tender and delicate, require more protection from the weather, and take disease more easily. Thus there is always a larger proportion of cases in the Hospital, and it may be considered satisfactory that the mortality has been no greater. The labour of the teachers is also much increased. It is more difficult to divide the pupils into classes, and fewer can be put to trades. Imbeciles in general are of weakly constitutions and slow of growth; few of them can be sent to work before fifteen or sixteen years of age, even in a covered workshop, much less endure exposure to the weather in learning outdoor labour. Hence it is easy to see, if our pupils go out at eighteen years of age, they can hardly learn to make their bread in their short apprenticeship of three or four years, and, in any case, that we are labouring under disadvantages greater than any other training school of the kind."

The subject of training imbeciles at home is here discussed, and a conclusion unfavourable to this method is come to. No doubt, as Dr. Ireland remarks, those who devote themselves to a special art can do it better than beginners or amateurs; but the principal reason, we think, why imbecile children should be sent to Training Institutions is the same as why sane children should be sent to public schools—the influence they bring to bear upon each other, those higher in the scale of intelligence inciting those of a lower grade to increased efforts to succeed.

The cases elected by the subscribers do not seem to have been chosen judiciously, because a large proportion of them were uneducable. These only keep out others who might be benefited. It is

urged that pupils should be sent at an early age, so that the process of education may be commenced before the intellectual development has proceeded too far in a wrong direction.

Brush and mat making form the chief employment of the patients. The new buildings are completed and occupied.

There is still a deficiency of water, but steps are being taken to remedy this.

The number of patients in the House is 101.

There have been 35 admissions, 32 discharges, and three deaths during the year.

Bethlem Hospital.—Dr. Geo. H. Savage is the writer of the Report before us, having succeeded Dr. Rhys Williams, who had been in connection with the Hospital for 15 years.

The patients' hours of rising and going to bed have each been made an hour later, and consequent on this, supper has been introduced. This, it is thought, will banish the sleeplessness so often arising from want of supper in those who have been accustomed to this meal. The amount of stimulants used, especially wine, has been much reduced. There has been no suicide, and no death requiring an inquest during the year.

The Convalescent Hospital at Witley continues to do much good. Dr. Savage says:—"It is an immense boon to the class of patients we admit, as the majority of them, as soon as they leave, have at once to enter upon the duties of life again, and a change into the country, with greater freedom and more variety in their surroundings, enables them to gain confidence in themselves, and gives their friends trust in them; a most important point to secure recovery."

Whittingham Asylum.—In this report we have been obliged to have recourse to the Commissioners in Lunacy and the Committee of Visitors for any information regarding the Asylum and its work. The Medical Superintendent's report occupies exactly a page and a half, and consists of only a few bare statements of facts. We think that, with a total number of patients under care and treatment of 1,458, something more interesting might have been said concerning them than that "those who are able and willing to work have been encouraged to do so," which is really the only sentence having any reference to the means of treatment used.

Two fires have occurred during the year, both of them arising from the same cause—from burning soot, or other burning substance, falling from one of the chimneys into the gutter on the roof. Neither of them caused much damage, and they were speedily got under and prevented from spreading.

On account of overcrowding, many harmless and chronic cases have been removed to Workhouses, a step, we think, in the right direction.

More land has been obtained for farming purposes. An addition capable of accommodating 600 patients is about to be built.

Two inquests have been held—one on a case of suffocation while

being fed (spoon or stomach pump?) and the other on a suicide. 375 patients have been admitted.

The percentage of recoveries on admissions is 35.73; of deaths on the number under treatment, 9.88.

In the table showing causes of death we again enter our protest to such indefinite terms as "brain disease," "disease of liver," &c., and we think that "childbirth" is not a cause of death at all. Women die during childbirth from some complication connected with it, but not from it.

Colonial Reports.

London Asylum (Ontario).—The chief part of this report is devoted to considerations of a merely local interest.

Many improvements have been introduced, among which we notice the laying of the floors of the dormitories with oak, the introduction of the telephone throughout the Asylum, and the thorough drainage of the basement of the institution. Among the improvements recommended to be made, we may mention the laying of the whole of the Asylum with oak flooring, the building of a chapel, the introduction of a set of electric clocks, and the procuring of a steam force-pump in case of fire.

The use of alcoholic stimulants, except in very exceptional cases, has been given up, and with good results.

We question the propriety of allowing the general public to be shown through Asylums to such an extent and in such numbers as seems to be the case in this Asylum. During four days of a fair upwards of two thousand people were shown through. It is right to add, that no complaint of these visits has been made by the patients, an experience which few Superintendents can boast of, even with a very much smaller number of visitors.

Nova Scotia Hospital for Insane.—This report goes largely into the subject of the "Care of the Insane." The conclusions come to are that patients should be sent to Asylums in the early stages of their disease, that there should be separate institutions for recent and chronic cases, and, with especial reference to Nova Scotia, that there should be erected throughout the Province "Cottage Asylums" capable of accommodating 50 to 100 persons, to which patients might be taken at first, before being required to undertake a long journey to the central Asylum.

Many important alterations and repairs have been made.

There has been a change of Superintendent.

The "protective" bed is used for violent, acutely excited cases, and it is said to have the result of making them sleep during the greatest part of the night. Sleeping draughts are rarely given.

Provincial Asylum, St. John, N.B.—A novelty in statistics is introduced in this report. The colour of the patients' hair is set down, and, contrary to all preconceived notions, we find red represented by a very small number.

In the table showing the occupation of patients admitted, labourers and farmers largely preponderate, due, it is said, to this class of people forming a large proportion of the population of the district. With regard to labourers, intemperance is a prolific cause of insanity.

One case is reported which shows the great determination there is in some patients to commit suicide. This man first made an unsuccessful attempt by cutting his throat with a piece of glass, obtained by breaking a window. After this he was put under restraint, and constantly watched, but in spite of these precautions he managed to accomplish his object. By some unexplained means, he had obtained possession of a small piece of glass, with which, while pretending to be asleep, he scratched a hole through the abdominal wall, and died from the peritonitis which was set up.

The additions being made to the main building are well advanced, and are expected to be ready soon.

3. Retrospect of Mental Philosophy (*Periodical Literature.*)

By B. F. C. COSTELLOE, B. Sc. and M.A., Glasgow.

Mind: A Quarterly Review of Psychology and Philosophy.
January, 1880.

The first number for the year is not remarkable for any paper of striking value. Readers of the Journal will be chiefly attracted by the long and clearly written *resumé* of Dr. Hughlings Jackson's recent studies "On Affections of Speech from Disease of the Brain," which is contributed by Mr. James Sully. He remarks on the great value of Dr. Jackson's attempts to classify the different forms of aphasia under the three main heads or stages of—(1) *Defect of Speech*, in which the patient has a full vocabulary, but confuses words; (2) *Loss of Speech*, in which the patient is practically speechless, and his pantomimic power is impaired as well; and (3) *Loss of Language*, in which, besides being speechless, he has altogether lost the power of pantomime, and even his faculty of emotional language is deeply involved in the wreck. All these states or stages again are, properly speaking, to be distinguished altogether from affections of speech in the way of *loss of articulation* (owing to paralysis of the tongue, &c.), or *loss of vocalisation* (owing to disease of the larynx); whereas the three degrees or stages of aphasia proper are due to a deep-seated and severe disorganisation of the brain. The main interest of the theory lies in the ingenious and carefully-argued analysis of the symptoms, by which Dr. Jackson arrives at the theory that as the process of destruction goes on, the superior "layers" or strata of speech fail first—those namely which involve the ordinary power of adapting sounds to the circumstances of the moment as they arise; after them fail the "more