

thinks that nature in the formation of living structures works geometrically, and that we shall soon be able to treat morphological anatomy as geometrical science, and from the structure to formulate the active biological forces. As yet, he confesses, anatomical specialists with a few exceptions have not shown a disposition to follow these methods. For the advancement of pathology, he hopes much more from the prosecution of clinical observations than experiments in the laboratory. The dog, while being experimented on, is silent or misleads, while the patient states the truth.

As early as 1862, Dr. Benedikt pointed out that losses of sensibility did not bear any proportionate relation to ataxic motor disturbance; such disturbance is not owing to any loss of central co-ordinating function, but to causes which affect every separate muscle. He argues that the regulating influence cannot follow the impulse of the will which transmits the stimulus to the muscles, for if the regulation of the will stimulus were to go second we should have in the healthy condition an ataxic movement to be followed by a regular one. Dr. Benedikt has held for forty years that at the same time as the voluntary stimulus a centrifugal innervation proceeds along the posterior columns of the cord, and that the stoppage of this regulating innervation through disease of the posterior roots and posterior columns has for its sequel ataxic movements. He rejects the opinions generally held by physiologists that the sensory fibres of the cord only conduct centripetally. At the Congress at Moscow in 1897 the Professor proclaimed the falsity of the doctrine that the nerves only conduct in one direction, and proclaimed that not only in the commissural fibres of the brain there was double conduction, but that in the nerves, the most complete telegraphing apparatus in nature, conduction could take place in two directions. This doctrine of the double conduction of nerves was not, he observes, contradicted in Moscow, since then physiologists and pathologists have not paid proper attention to the views of the learned Professor of Vienna.

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9. Asylum Reports, 1900.

Some English County and Borough Asylums.

Bristol.—Dr. Benham records a net decrease in admissions, the increase in females being more than counterbalanced by the falling off in males. He feels sure that, whatever may be the case elsewhere, there has been no substantial increase of insanity in this district during the last few years.

The new wards have been laid with American maple wood, dry polished. It will be interesting to hear how this material wears and behaves.

Derby Borough.—As usual Dr. Macphail has reason to complain of the unsatisfactory physical state of his patients on admission.

"Four patients were admitted in a critical and almost moribund condition; three of them died within a fortnight. In all of these cases the only mental symptoms observed were delirium caused by the bodily illness from which the patients suffered: viz., acute rheumatism in two, and bladder and kidney complaints in the others."

A most unfortunate occurrence took place which illustrates the trials and anxieties of the asylum staff, and at the same time bespeaks sympathy for that of the Derby Borough Asylum.

"The coroner held one inquest. This case was unique, and I have never heard nor read of a similar occurrence. A female patient in the restless, purposeless excitement of melancholia tore out her tongue and threw it on the floor by the unaided use of her fingers. There was extensive bleeding which was soon controlled; but the shock was severe, and being handicapped by a diseased heart, she died forty-two hours afterwards. There had been no previous attempt at self-destruction by this patient, but she was regarded as suicidal. No blame could be attached to any one, and indeed the possibility of such an occurrence had not been contemplated. Happily accidents of this distressing nature are of rare occurrence, and this is the first case of suicide during the twelve years the asylum has been occupied, although suicidal tendencies are ascertained to exist in more than the half of the cases admitted. It was, unfortunately, impossible to prevent the other patients from hearing the details of a case of this sort, owing to the publicity given it by the local press. During the succeeding few weeks four of my actively suicidal patients told me they had tried, without success, to pull out their tongues."

Derby County.—The County Council has referred to a committee, consisting of asylum visitors with added members, the question of provision for idiots and imbeciles by the county, and has granted £100 to defray the expenses of a thorough inquiry. Such an inquiry must be of great service. It may on the one hand show how economy can be advanced by special provision for these classes, or it may result in the opinion that no good purpose can be served thereby. Of late considerable, and we think exaggerated, importance has been attached by county councils and others to this idea. We are inclined to think that success can only be expected when the total number of "lunatics" is large enough to supply a considerable number of inmates for two or more separate institutions. We can point to the examples of London and Birmingham as places where differential accommodation has answered. But we are a little doubtful whether an ordinary county of average size can find enough inmates for both an acute asylum and a receptacle for chronics.

Dorset County.—Dr. Macdonald gives the admissions for the last five years in his report, and draws from them the conclusion that they indicate a cessation of the annual rise to which we had almost become accustomed.

We congratulate him on the foundation of an Out-patient Department, which any one may attend at specified times, at Herrison, on production of a recommendation in prescribed form from a registered medical practitioner, or a justice of the peace, or a county councillor. This step, though it may not bear fruit immediately, cannot but help to familiarise the mind of the public with the fact that insanity, especially incipient insanity, is a disease for which competent medical advice can be and should be sought.

In dealing with the contemplated further accommodation for private patients, the Commissioners in their report press for its immediate

provision, and rightly, since in Dr. Macdonald's hands the results have so far shown that there is much demand for it. But we take leave to doubt whether it is wise to hold out a hope that in any case "it would also prove a very remunerative undertaking, and a saving to the rate-payers of this county" at 21s. per week. When interest and redemption of capital cost is taken into consideration, *plus* some increase in maintenance rate, we can hardly imagine that there will be much left even if the accommodation is always taken up. But, apart from that, any idea of making profit in this direction from the expenditure of county money will form the strongest weapon in the hands of those who wish to keep down county expenditure to the lowest point, and therefore object to any capital expenditure not absolutely essential.

Glamorgan.—The subjoined remarks by Dr. Pringle will be endorsed by many.

"The next most frequent cause, intemperance in drink, accounts for 113 of the admissions. That the drink craving is in some cases also one of inheritance is doubtless true, but that the majority of its victims have their own weakness and not their parents to blame is equally true. I fear the habit is often acquired from a false standard of manliness, and inability to say 'No' when pressed by companions or friends. I think there can be no doubt that the spread of education has not had the effect, at one time anticipated, of raising the *moral* as well as the intellectual character of the young, but has given them a craving for excitement and change, which has proved to be a curse instead of a blessing. They are taught sufficient to unsettle and make them discontented, but not enough to teach them to think and to realise that there are higher objects in life than the gratification of the senses."

The number of general paralytics admitted was high, being one out of nine admissions. But the most striking fact is that there were seventeen females to thirty-seven males.

Leicester, Rutland County.—Dr. Stewart is fortunate in being able to say that among his nearly 500 patients, he had, at the time of report, none that required caution cards for suicide.

He and a Committee have been on their travels with a view to framing a report for a new asylum.

Of 107 admissions only two were general paralytics, and, singularly enough, both were females.

Lincoln, Kesteven.—The progress in the new asylum buildings seems to give satisfaction to the visiting committee, and they hope to get the patients in next year at the appointed time.

City of London.—The present report deals with the important additions and improvements which have been made at Stone under Dr. White's direction. As will be seen in the last number of the Journal, these were formally brought into use in the early summer of this year, at a brilliant gathering of those interested in the treatment of the insane. We wish to add our congratulations to those which were offered on all hands to Dr. White on the occasion. We are very glad to see from the report that the visiting committee have marked their approval of the energy and skill which he has devoted to the subject, by a very handsome addition to his remuneration.

There is a good deal in the following :

"On opening this hospital I sought a complement of patients from other wards, especially Ward 1 F., which contains quiet and convalescent private cases, and Ward 3 F. melancholic private patients. The majority objected strongly to the move, and upon my interrogating them I learned that they all thought they would be too quiet and dull at the hospital, however beautiful its surroundings. One lady said to me, 'How would you like, doctor, to live in a village through which no one ever passed?' and I learnt from them generally that the 'through traffic,' which was so much condemned by experts in the past, brightened their days and gave opportunities for exchanging ideas with other members of our community which they could not otherwise enjoy."

Middlesex.—We note that the maintenance rate has gone up to 12s. owing to the cost of provisions, clothing, coals, etc.

With regard to "Female Inebriates," Dr. Gardiner Hill reports :

"Of the admissions, four criminal inebriates who had given way to violent outbursts of temper, best expressed in prison language as 'breakings out,' were brought here from the St. Joseph's Inebriate Reformatory, at Ashford. For years past the asylum has become the common receptacle of all that is mentally deficient, and under the same conditions, and with but little help for classification, it has had to provide accommodation for the acute, recovering, and the chronic cases—the insane pauper and the pauper insane, the idiot, and the senile dement—the criminal lunatic, and now the further responsibility of looking after the criminal inebriate may be added to its difficulties.

"I cannot speak too forcibly against this latter innovation. These women belong to the criminal and quasi-insane class, and are not fit companions for the ordinary patients of a county asylum. These inebriates all presumably belong to London unions, as none had ever resided in the County of Middlesex before being committed to the reformatory, and all had been convicted at London courts."

It is satisfactory to know that representations on the grievance to the Home Secretary were successful.

We note that only in 30 out of 448 admissions was intemperance in drink assigned as a cause.

Middlesborough.—Out of thirty-five female admissions four had the subjoined remarkable causation.

"Among other causes the following may be noted:—Three women were admitted suffering from self-accusatory melancholia; of these, two were remorse-stricken because they had attempted medicinal abortion (fortunately without success). In one case there turned out to be no pregnancy, which when demonstrated, removed the burden from her mind. In the other case she was delivered of a healthy child in due course, and though she declared the drug taken had injured one of its feet, she ultimately overcame this fancy and recovered. In the third case abortion had apparently been performed for medical reasons, and the shock and remorse of the supposed 'unpardonable sin' unhinged her. She also made a good recovery. A similar self-accusatory condition was found in the case of a woman admitted through intense remorse after adultery. She also got over it."

Monmouth.—Dr. Glendinning notes a decrease in deaths from general paralysis, and in the number under treatment. The returns in the Commissioners' Report for 1900 appear to indicate a considerable reduction throughout the county in admissions for that disease in comparison with the average for the preceding five years.

Nottingham City.—The following is an opinion of Dr. Powell.

"It will be observed that the number of male patients is still decreasing, and there are now fewer on our books than there were three years ago, whilst prior to that time there was an annual increase of from ten to twelve patients of that sex.

"This experience disproves the theory which has been advanced in some places,

that during periods of commercial prosperity the number of male cases increased out of proportion to the females, whilst during depression the converse took place. I think it is admitted that trade generally has been prosperous in Nottingham during the past three years, so that according to the above theory we should have had an increase in our male admissions, instead of which there has been a steady decrease. I think the more reasonable cause of our decreased number is, that we have gradually come down to a normal admission rate, from that which was for some years prior to 1898, quite an abnormal one. The same thing, however, does not obtain with reference to the females; the number of these seems to be still steadily going up."

Staffordshire (Cheddleton).—This asylum was, of course, able to entertain a large number of out-county patients. Dr. Menzies had some from Essex and some from Lancashire. He found the former the better workers and more easily managed. He is not particularly pleased with the Lancashire folk, though he has been able to get work out of some of them, who apparently never worked before at the asylums whence they came. He utters a warning in relation to tuberculosis against coil covers with gratings, which latter have been sedulously used as spittoons.

It is disquieting to read of an epidemic of colitis in a new asylum, involving twenty-nine cases and five deaths. The commissioners note with approval the establishment of a canteen for male attendants.

Staffordshire (Burntwood).—We entirely concur in Dr. Spence's remarks about the pity of receiving idiot children into an asylum for adults.

"Among the patients on the books of the asylum are 23 children (13 boys, 10 girls) under the age of sixteen. Of these 9 are subject to epileptic seizures, and all of them are either idiots or imbeciles of a low type. Two small wards—one in each division—are set apart for these patients, which might with advantage be used in other ways if a suitable house could be secured where the children could be cared for, at least as well as where they are at present, and apart from the adult insane. Such a house should, if possible, be so situated as to be fairly accessible from all parts of the county. At present children from the north of the county are sent to us, thus rendering it difficult for the parents—who, much to the credit of human nature, appear to be specially attached to their afflicted little ones—to visit them as often as they would probably wish to do. Apart from the gain to this asylum in having additional space set free for the more acutely insane, such a scheme as is here outlined would afford an opportunity of testing the question as to whether further accommodation is not really required in the county for feeble-minded children, a subject which at the present time is occupying the attention of many who are interested in the welfare of a peculiarly helpless and, it is to be feared in the large majority of cases, hopeless section of the community."

Sunderland Borough.—Dr. Middlemass again points out that he continues to receive male patients in the proportion of three to two females. He accounts to some extent for this by the greater exposure of men to alcoholic perils. Taking both sexes together one out of every three admissions was caused by drink. When the total drink cases are split up into sexes it is found 41 *per cent.* of the male cases were alcoholic, the ratio for females coming out about 20 *per cent.* He notes that general paralysis appears to be undergoing a gradual diminution.

East Sussex.—This is the first report issued by Dr. Walker, the new medical superintendent. Just one third of the admissions were actually suicidal. Over 10 *per cent.* of the male admissions were general

paralytics, a large proportion in the absence of large manufacturing or mining or seafaring centres. On the other hand phthisis only accounts for two deaths out of ninety-one. The asylum patients chargeable to the county and the county borough of Brighton have increased by 58 or nearly 6 *per cent.* during the year.

Sussex (West).—The Committee state that they have found the establishment of a pension scheme a thorny subject, and prefer to wait until Parliament has said what, if anything, it is going to do in the matter.

Dr. Kidd gives the following curious instance of self-restraint. It has quite an old-world flavour about it.

“Attempted escapes have been made in four instances, and one of these was successful. This patient (G. G—) was subject to severe attacks of excitement at night, when he was apt to be destructive and dangerous to himself, but by day he was capable of being allowed a large measure of liberty, and was freely trusted. He abused this confidence and effected his escape, and was eventually written off the books. It was subsequently ascertained that he was assisted by his friends, but was so apprehensive of the nocturnal attacks—of which he was well aware—that he had to strap himself in bed every night.”

Metropolitan Asylums Board Imbecile Asylums.

The body which is responsible for these asylums has quite recently reorganised its work, and has substituted for independent committees managing the separate institutions a central committee, with sub-committees for each asylum. In this respect it has followed the example of the London County Council, and will no doubt experience the same beneficial results from co-ordination. One immediate result has been the production of full statistics on the lines of the Association's Tables, which have been adopted to the full extent.

The daily cost in respect of all charges other than those of a special nature was 1s. 4½*d.* for the year ending Michaelmas, 1900. The average number resident during 1900 in the three institutions was 5831.

A new departure has been taken by the hiring on lease of a large house near Ealing, in which it is proposed to place “150 educable (*i. e.* improvable) children with proper classroom, etc.” There will be 90 males and 60 females. It is proposed to place the institution under the care of a headmistress or matron, assisted by a housekeeper, medical assistance for general treatment being sought locally, while the special treatment is to be directed by a medical expert visiting once a week. The Board's expressed reason for the change of practice is that medical superintendents become administrative officers instead of medical experts. However that may be, a medical superintendent trained in the service is the best guarantee for kind, efficient, and even treatment, as a rule, and we are of the opinion that the absence of a medical superintendent will make it the more incumbent on individual committee men to pay frequent and unannounced visits.

The Committee shows itself very much alive to the dangers of overcrowding, and to its duties in regard to tuberculosis, of which we shall