

diseases and bronchitis are nearly three times, and apoplexy half, as frequent in the insane as in the general population, while fatty and valvular disease of the heart, epilepsy, pneumonia and phthisis are largely in excess.

Allusion is made to Dr. Maudsley's munificent offer of £30,000 to be applied to the establishment of a hospital for incipient and unconfirmed insanity. The suggestion is made that the clauses in the Lord Chancellor's Bill, previously referred to, should apply to the inmates of such a hospital. It must be regretted that this piece of legislation has not been effected, in anticipation of the establishment of such institutions.

Model rules (pp. 36 and 37) are given for the taking of stock and the auditing of accounts in asylums. These should materially aid in the prevention of the "scandals" that have from time to time vexed committees of management.

Dysentery and diarrhoea receive very considerable attention, as in previous years, but the statistics for the year do not show any marked general amelioration.

Dr. Mott's summary of the conclusions of his study of the incidence of tuberculosis in the London County Asylums is quoted in full. The general adoption of his recommendations should lead to considerable reduction in this source of mortality.

The Commissioners again report that several of the registered hospitals fail to adequately discharge "their primary function of receiving and maintaining at low rates of payment patients of education and refinement, but of limited means, who would feel acutely the surroundings and association of a county asylum."

Does the hope expressed, that these institutions would "voluntarily" bring themselves up to the "high standard of liberality" attained by some of them, imply a possibility of other means being employed to attain this very desirable end?

The supplement on scientific research work in asylums gives a record of very satisfactory progress in this respect. The good results of this supplement will, however, become more obvious in the next year or two.

The new statistical tables must have added largely to the work of the already over-burthened Commission, and this will not be lessened as time goes on. It is sincerely to be hoped that before the next report is printed the Commission may have been strengthened by additions to its *personnel*, which will enable it to grapple with some of the many forms of work that are needing attention. The recent Royal Commissions ought to have impressed even a British House of Commons with the desirability of giving much greater attention to the national health.

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*The Fifty-first Annual Report of the General Board of Commissioners in Lunacy for Scotland, 1909.*

On January 1st, 1909, there were in Scotland 18,197 registered insane persons of whom the Board had official cognizance. Of these, 2,682 were maintained from private sources, 15,464 by parochial rates,

and 51 at the expense of the State. The total increase during the past year was 289, as at January 1st, 1909.

The general results during 1908, as compared with 1907, are, in regard to *registered* lunatics, as follows: (1) There was a total increase of 267, due to an increase of private patients by 44 and of pauper patients by 223. (2) The total increase of 267 arose from an increase of the number in establishments by 229, and by an increase of the number in private dwellings by 38. (3) The increased number of 229 in establishments arose from an increase of 52 private patients and of 177 pauper patients. Of pauper patients in establishments, the average increase during the preceding five years was 175, so that the increase of 177 during the year 1908 has been nearly the same as the average increase of that quinquenniad. (4) All pauper lunatics in establishments continue to be provided for in institutions of a public character.

In the number of non-registered lunatics the following changes occurred during 1908:

In the Criminal Lunatic Department of Perth Prison the number is two more than last year.

In training schools for imbecile children the number is twenty more than last year.

The total increase in this Report is now shown to be 12,373 persons as compared with 5,824 persons, on January 1st, 1858.

The following tabular statement shows the proportions of the insane in Scotland per 100,000 of the estimated population as at January 1st in the past twenty-four years:

Years.	Private patients.	Pauper patients.	Total.
Average of 5 years. { 1886-90 . . . . .	43	247	290
{ 1891-95 . . . . .	46	267	313
{ 1896-1900. . . . .	49	288	337
January 1st, 1901 . . . . .	50	299	349
"   1902 . . . . .	50	303	353
"   1903 . . . . .	50	308	358
"   1904 . . . . .	52	307	359
"   1905 . . . . .	52	311	363
"   1906 . . . . .	51	312	363
"   1907 . . . . .	50	312	362
"   1908 . . . . .	51	314	365
"   1909 . . . . .	51	315	366

The above statement shows that the number of private patients in proportion to the population slightly fluctuated of recent years, but the pauper patients still tend to increase. It is to be noted, however, that the increase in the past year, from 365 to 366 per 100,000, was due to accumulation as the number placed on the register for the first time fell below that of the preceding year by 105. But for a decreased rate of removal by discharge and death there would have been a decrease of the total number on the Register. The Commissioners state that the

Register does not, of course, include a large number of persons of unsound mind in Scotland who might be brought under official cognizance consequent on administrative changes, thus increasing the amount of registered lunacy without any change in the actual proportion of mental unsoundness in the community.

The Commissioners conclude that the rise in the proportion to the total population from 1893 onwards may be held to coincide generally with the extensive development of the hospital side of asylums, and either as cause or effect with their more perfect equipment for the reception, classification, and treatment of persons of unsound mind who would not formerly have been placed in asylums. This influence has, however, apparently reached its greatest strength, and has fallen, consequently representing a positive decrease of occurring insanity in forms calling for certification.

Having regard to the numbers registered for the first time, the proportion to population has fluctuated within somewhat narrow limits for the thirty-five years now concluded, and is now lower than it was in 1875 as regards private patients; but the pauper patients rose in proportion up to 1902, when it attained the maximum of 52·6. It has since fallen throughout the last five years to 50·5, 47·9, 45·1, 48·3, and 46·6. The Commissioners regard these figures as trustworthy regarding the registered insane, especially regarding the pauper class.

There would seem to be an increase in the number of voluntary patients who are admitted to asylums without disagreeable or troublesome formalities. The Commissioners favour a change in the law which would permit of a person being received into and kept in an asylum for three days on his own written application to the Superintendent, provided the sanction of the Board be at once applied for in the usual way on admission, and that no voluntary boarder be retained for any longer period than three days without such sanction.

The recovery-rates, excluding transfers, were much the same as in the former year—38·4 for private patients and 40·5 for pauper. While the proportion of recoveries among private patients has varied from one year to another it has shown no certain indications of falling off, unless the lowest point reached during the last two years be regarded as such. Among pauper patients a continuous decrease is recorded between 1880–84 and 1900–04, and in the past four years a tendency towards a still further decrease appears to be in force. The recovery-rates have, no doubt, in recent years been unfavourably affected by the increased use of observation wards connected with the parochial hospitals of several large parishes, which receive persons suffering from passing attacks of mental disorder, of whom some, in the absence of such wards, would have been removed to asylums, and would have been discharged recovered shortly after admission. But the lowering of the rate is probably to be mainly ascribed to the accumulation of chronic patients, and to the fact that the development of nursing and the improved means of hospital care in asylums have led to their being more freely used for the reception of patients whose age and whose mental and physical condition are such as to preclude hope of recovery. Persons in moribund states, or suffering from incurable physical diseases, complicated with mental unsoundness or decay, are now sent

to asylum hospitals instead of being sent to ordinary infirmaries, or of being kept at home until death takes place, and returns obtained last year prove conclusively that of late years the number of persons admitted at ages so advanced as to render recovery almost impossible has largely increased.

The new arrangements for the treatment of incipient insanity in the Royal Infirmaries of Edinburgh and Dundee will, no doubt, in time also have an effect upon the recovery-rate.

The death-rate for the year was rather lower, as is shown by this table :

Classes of patients.	Proportion of deaths <i>per cent.</i> of number resident in all establishments.						
	1890-94.	1895-99.	1900-04.	1905.	1906.	1907.	1908.
Private patients . . . .	7·6	7·2	7·9	8·2	9·1	8·4	7·3
Pauper patients . . . .	8·7	8·5	9·2	9·6	9·5	9·8	9·3
Both classes . . . .	8·5	8·2	9·0	9·4	9·4	9·6	8·9

As regards pauper patients, the lower admission-rate must have contributed in some degree to this result, the mortality during the first year of admission being always very high.

We are glad to observe that the number of attendants and servants who left for one reason or another was 164 less than the number for the previous year. Those who resigned voluntarily numbered 123 fewer. No doubt the assurance of pensions now granted by the legislature will have a favourable effect on the service and render these changes fewer. There is, however, so much unrest in the domestic class that it would be well to discriminate between the attendants and servants in these returns. Asylum artisans are largely a class enjoying fixity of tenure and slow to move, whereas kitchen and laundry servants are just as difficult to retain. The Commissioners again recur to a recommendation, which is having careful consideration already, and will no doubt result in an improved state of matters. They recommend that the administrators of institutions in which changes among attendants occur frequently should inquire carefully into the causes. Experience tends to show that in the case of men a high class of attendant and security for permanent service are best obtained by increasing the number of married attendants, and where comfortable cottages for married attendants are provided for such of the staff as do not necessarily require to sleep in the asylum. The great bulk of the changes occurs in the case of attendants and servants who have only been a short time in asylum service. As the number of attendants and servants who resigned voluntarily constitutes 75 *per cent.* of the whole number of changes during the last year, it may be inferred that, although the inducements to enter asylum service are not pecuniarily unattractive to those who seek employment, a large number find the service on trial

not to be congenial. This may be due in part to the trying nature of the service, and possibly still more to the general want of freedom inseparable from the discipline of a large institution, which causes a preference to be given to employments, perhaps less well paid, in which the workers' time, after certain hours, is wholly at their own disposal.

The year is marked by the resignation of Dr. Rutherford at Dumfries, and Dr. Clouston at Edinburgh. Both were granted handsome superannuation allowances. Their successors are Dr. Easterbrook and Dr. G. M. Robertson. Dr. McNaughtan has also resigned on pension, and has been succeeded by Dr. Sturrock in the Criminal Lunatic Department of H.M. Prison at Perth.

The private and pauper patients provided for in private dwellings during the year show some increase, the latter class on January 1st having numbered 2,826 as compared with 2,780 on the corresponding date of the previous year. The record of the year is as favourable as usual.

The Commissioners again urge that the poorer class of the private insane should be accommodated in the district asylums, and not be subject to removal whenever their beds are required for the rate-supported class.

The following extract from the Report has a special interest at the present time when the Poor Law has been cast into the melting-pot, and our legislators are face to face with new recommendations regarding the feeble-minded and the inebriate. No doubt the Association will consider these weighty reports in due course, and it is well that we should reproduce these suggested amendments as specially affecting Scotland.

The main respects in which the Board think that the existing (Scotland) Acts stand more immediately in need of amendment are briefly indicated in the following suggestions :

"To amend the term 'lunatic,' which is at present defined to be a person 'certified by two medical persons to be a lunatic,' etc., whereas the term is often employed in the Acts to persons who from the circumstances of the case cannot have undergone certification as lunatics ; also extension of the definition so as to embrace imbeciles who are wholly or partly unable to earn their own living on account of mental defect, thus bringing within the scope of the definition a large number of persons of unsound mind already on the register of the Board, and otherwise extending the scope of the definition in a desirable direction.

"To amend the term 'house,' which is defined at present as 'any house in which a single lunatic is kept under an order of the Sheriff,' thus rendering the term inapplicable to houses in which patients are kept under sanction of the Board, which is now, in point of fact, the only authority used in such cases, and also rendering it inapplicable to a house in which an insane person may be kept, contrary to law, without either a Sheriff's Order or the sanction of the Board.

"To amend the provisions relating to the acquisition of land by district lunacy boards, these provisions being at present expressed in such a way as to leave the powers of district boards on the subject a matter of some uncertainty.

"To enlarge existing provisions with regard to the powers of the Board

to make regulations so as to enable the Board, with the approval of the Secretary for Scotland, to make regulations for the good order and management of all establishments for the insane in Scotland; and also to provide that plans for all such establishments shall be submitted to the Board and receive their sanction before being put into execution.

“To enable the Board in all cases to determine the number of patients which may be received into any establishment for the insane, and to provide that no larger number shall be received without the Board’s sanction.

“To give directors of Royal asylums and district boards of lunacy permissive power to grant superannuation allowances to officers, attendants, and servants in their employment to the same extent and on like terms as are given by the laws of England in the case of county and borough asylums, and of Ireland in the case of district asylums.

“To provide for the audit of the accounts of district boards of lunacy by placing such boards in that respect upon the same footing as county councils.

“To amend the provisions for the election of district lunacy boards (at present contained in the Prisons [Scotland] Act, 1877), and to provide for the representation of parish councils on such boards.

“To extend the provisions with regard to the reception of private patients into district asylums, so as to enable district boards, if they see fit, to make separate provision for the accommodation of private patients at low rates of board, and to give such of these patients as belong to the district security against removal to make room for pauper patients.

“To give the Commissioners extended powers in the matter of visiting any establishment or house into which they have reason to believe that persons, not being persons under the care of their natural guardians, are resident on account of mental disorder or defect, and without legal authority.

“To do away with the certificate granted after the first three years of residence have passed and annually thereafter, which is at present necessary in order to keep in force the sheriff’s order in the case of patients in asylums; and to put upon a more clear and satisfactory footing the provisions in regard to the discharge of patients.

“To extend the existing provisions for the protection of insane persons not kept for gain, who are harshly or cruelly treated, or are subjected to restraint or coercion, so as to cover also the case of those who are seriously neglected, or are inadequately protected from sexual danger.

“To provide against the removal from the poor-roll of pauper patients for whose removal to an asylum, or to another house or guardian, the Board have issued an order.

“To provide that when a patient in an asylum has been removed with the sanction of the Board to the lunatic wards of a poorhouse, or to a private house, and still remains on the Board’s register, he may be transferred back to the asylum, with the sanction of the Board, and be received therein in virtue of the original sheriff’s order for reception.

“To amend the provisions for the protection of female patients in asylums, and in private houses under sanction of the Board, their pro-

tection not being adequately provided for either by the existing Lunacy Acts or by the Criminal Law Amendment Act of 1885.

“To enable district lunacy boards to erect, or to combine for the erection, of institutions for the care of idiot or imbecile children supported by parishes.

“To secure that applications to inspectors of poor on behalf of idiot or imbecile children shall be carefully considered, and shall not be rejected without adequate reasons, and that when such young persons are provided for in institutions for idiot or imbecile children they shall not be removed from supervision on being discharged after attaining eighteen years of age, but shall remain under charge of the parish council until such time as the Board have assurance that they will be satisfactorily provided for otherwise.

“To empower parish councils to combine in making arrangements for the boarding out from asylums of pauper patients, and for their subsequent supervision and visitation, thus enabling the smaller parishes in combination to attain success in this direction such as is attained by the large urban parishes.

“To provide that in the case of uncertified insane persons who are to be placed under private care, or in the lunatic wards of poorhouses, it shall be lawful for the Board to grant their sanction, and to register the patient on one certificate of insanity, and without any further certification of lunacy.

“To provide that a person desiring to enter an asylum as a voluntary boarder may be received on his own written application, but may not be kept for more than three days without the written authority of a Commissioner in Lunacy.

“To provide that, as regards the receipt and transmission of letters to and from patients, the sheriff of the county in which an asylum is situated shall be put in the same position as the Board; and that the provisions of the Act in regard to visitors to patients shall be placed upon a somewhat wider basis than is the case at present.

“To provide that the powers of the Board to initiate steps for the appointment of judicial factors shall not, as at present, be confined to persons who are being ‘detained and taken charge of as lunatics,’ since that description is as likely as not to be inapplicable to persons unable to manage their affairs on account of mental defect.

“To provide for the more certain determination of parishes to be held chargeable with the maintenance of insane prisoners sent to asylums; to provide for their reception by asylums serving as district asylums; and to provide that in the case of such prisoners undergoing sentences, the order for their reception into an asylum shall not lapse on expiry of the term of sentence, as is the case at present.

“To provide that pauper patients for whose removal from Scotland an order is sought need not personally appear in court, as is necessary at present, in obedience to certain provisions of the Poor Law dealing with paupers whose removal is sought, which make no exception in the case of lunatics.

“To provide that in the case of lunacy districts consisting of a single parish or combination, the parish council shall be empowered to levy and collect lunacy assessments for providing and altering asylums,

along with the assessments for relief of the poor. At present these lunacy assessments are levied and collected by the burgh or county authorities within such parish, and the change here referred to is sought by the corporations of the larger burghs, and is concurred in by parish councils in such burghs almost without exception.

“To provide that letters of agreement as to the rate of board to be paid for non-pauper patients received into asylums shall be sufficiently stamped with a sixpenny stamp. Hitherto a sixpenny stamp has been regarded as sufficiently stamping such an agreement, but founding on a recent decision, the Inland Revenue authorities have held that these agreements are liable to a bond duty at the rate of 2s. 6d. per each £5 of the annual rate agreed upon, which lays a heavy additional burden upon a family in which the misfortune of insanity occurs.

“To provide that district boards of lunacy shall have power, for the purpose of obtaining instruction and assistance in pathological investigation for medical officers of asylums under their charge, to make annual contributions towards any pathological laboratory having for its object investigation into the pathology of mental diseases.

“To enact for Scotland a provision in terms of Section 330, Sub-sections (1) and (2) of the English Lunacy Acts 1890–91, for the protection of medical persons against proceedings in respect to certificates of lunacy granted in good faith and with reasonable care.

“These suggestions, being of the nature of amendments of existing laws, do not deal with what may be termed the main recommendations of the Report of the Royal Commission on the Care and Control of the Feeble-minded, but, as has been said, they include many important recommendations of that Commission. Many of the proposals made above are such as did not fall within the scope of that Commission's report, but all of them are, we believe, in harmony with the spirit of that report, and their passing into law would in no way interfere with or render more difficult the adoption of other measures recommended by the Commission that may in future be the subject of legislative consideration.

“These proposals involve provisions which are, in our opinion, urgently needed to place the lunacy law of Scotland on an efficient and satisfactory footing, and we venture to express the hope that a bill giving effect to them will be introduced into Parliament at an early date.”

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*Fifty-eighth Report of the Inspectors of Lunatics in Ireland for the year ending December 31st, 1908.*

IN this, their latest report, the Irish Inspectors have not quite as satisfactory a tale to tell as in either of their two previous reports, the increase of the total amount of insane in establishments having been greater in 1908 than in 1906 or 1907, the increase for the three years being respectively 189, 164, and 213. The last figure, however, is less by 200 than the average increase for the preceding ten years, so that there is not really much to arouse apprehension as regards the increase of insanity. The total number of insane in establishments on December 31st, 1908, was 23,931.