"It is noteworthy that ten parishes in the district of Argyllshire have agreed to give facilities for any person in their districts who requires institutional care on account of mental condition to enter the District asylum voluntarily as a rate-

aided patient.

"During the year under review 431 voluntary inmates have been admitted to asylums, compared with 381 in the previous year. This increasing number of voluntary inmates is mainly among the private class of patients, and in some institutions receiving chiefly private patients the admission-rate of voluntary inmates exceeds that of certified patients. The changes that have taken place among the voluntary inmates are naturally much more numerous, relatively, than among the certified class, owing to the fact that voluntary patients usually suffer from a milder form of mental disorder, and consequently are more responsive to care and treatment. They generally leave the institution after a short period of residence completely recovered or much improved.

"The tendency of parish councils to pay the cost of voluntary patients in District asylums, a tendency which was referred to in our previous Report, continues to develop, and a number of other parishes have followed the example of the ten parishes in Argyllshire, and are now giving facilities for persons from their districts who require institutional care to enter district asylums voluntarily as rate-aided patients. These Local Authorities are fully aware of the fact that they thereby lose the Government grant, which is distributed in respect of expenditure incurred upon certified lunatic patients only, but they have been convinced that early treatment on this voluntary basis may in some cases prevent patients from becoming permanent burdens on the local rates."

## THE GOVERNMENT MENTAL HOSPITALS OF EGYPT.

This report includes the report of the Director of Lunacy (Dr. Dudgeon) and the reports of the two mental hospitals at Abbasîya and Khanka for the year 1924. This year is marked by the transference of the "Lunacy Division," previously attached to the Ministry of the Interior, to the Department of Public Health. The total existing accommodation provided for cases of mental disease for the whole of Egypt is at the two hospitals mentioned and consists of 2,143 beds (Abbasîya 1503, Khanka 640)—that is, in the proportion of one bed to 5,000 population, and the number of patients in residence is already far ahead of the accommodation provided. Abbasîya receives all females cases, all criminal lunatics and all paying male cases; Khanka admits all non-criminal pauper male cases. Owing to the pressure of accommodation a large number of patients have to be discharged when the acute symptoms have disappeared to the care of relatives, though still insane, and as there are resident at Abbasîya 500 criminal cases, Dr. Dudgeon very naturally points out that the normal way to relieve this pressure is to provide a separate criminal asylum.

Abbasiya Mental Hospital.—A great deal of work has been done to bring this old institution up to date in the matter of pulling down walls, letting in light and air, with results that are entirely gratifying. The number of admissions for the year was 663, and 312 cases were discharged, still insane, to the care of their relatives, and the recovery-rate was a little over 20%. Of the 149 accused persons sent to the hospital for examination and observation 28 were returned for trial as not insane, and the chief forms of mental

disease present in the accused persons were dementia præcox, simple dementia and some form of congenital defect. The death-rate for the year was 6%.

Khanka Mental Hospital.—Here again overcrowding, as in many years past, is a constant menace to the health of the community, and in the year under review the average excess of population over the normal accommodation was 56%, or 359 on 640 beds.

The total admissions for the year numbered 739, of which 553 were first admissions, 14 were transfers from Abbasîya and the remainder were readmissions. The recovery-rate for the year was 11%, and the death-rate 18%. The leading feature of the year was a serious epidemic of malaria (the probability of this had been foreshadowed in former reports), which spread from east to west—from the direction of the marshes between the Gabel el Asfar farm and the hospital. The total number of cases was 655 (of whom 273 were staff), and in connection with this Dr. Miller gives the following interesting figures of the "spleen rate":

"The spleen rate, of importance as indicating not so much the malaria at the moment as the average prevalence of the disease, has been estimated at the close of the year, i.e., during the months of February and March, 1925. The result is as follows:

,			
Number of patients examined during these months			965
Spleen enlarged to one finger breadth		117	
Spleen enlarged to two fingers' breadth .		43	
Spleen enlarged to three fingers' breadth .		7	
Spleen enlarged to over three fingers' breadth	•	_	
Total enlarged spleens		167	

or roughly 17% of the patients in residence.

"As Christophers has pointed out that the adult spleen rate in 'the highly malarious community' of Singhbhum, Calcutta, is 11%, the above result, considered as a measure of the endemicity of the disease, can hardly be described as gratifying."

As the result of the outbreak of malaria some interesting results might have been expected amongst the general paralytics, but Dr. Miller points out that these cases do not as a rule come to the mental hospital until they are in such an advanced condition that little hope can be entertained of their recovery following upon an attack of malaria either naturally or artificially induced; he, however, gives some details of four general paralytics who developed definite malaria, without any improvement.

There were 103 cases of mental disease admitted during the year which were attributed to the abuse of drugs, chiefly hasheesh taken pure, or with other drugs.

<sup>&</sup>quot;Drug eases.—Statistics were collected during the year of the total number of patients admitted between 1912-23 whose insanity could be ascribed to the taking of hasheesh (a) in a pure form, and (b) mixed with other drugs, chiefly in combination with alcohol, but a certain number, 19, in combination with opium alone, or in addition to alcohol. The results of the statistics are interesting, and show that, as the years pass, hasheesh tends to be taken in combination with other drugs, chiefly alcohol, and not alone as was formerly the case:

1927.]	MENTAL	HOSPIT	AL	REPO	ORTS.	•			339
Total number	admitted during t	t <b>he 12</b> yea	ars				•		376
	y was ascribed to								
,, ,,	,,,	,,	mix	ed wit	h othe	er dru	gs.		276
Received from	the four large tow	ns, Cairo,	Alex	andri	a, Port	t Said	and S	uez	192
Average age o	f those admitted.	•			•			32 3	years
" Occupations	of those admitte	d: Sales	men	and a	rtizar	ıs in	practi	ically	equal
proportions furn	ish 50% of the to	tal numb	ers."	•			-	•	-

## FEDERATED MALAY STATES.

Central Mental Hospital, Tanjong Rambutan.—In the fifteenth annual report of this hospital (for the year 1925) it is shown that it had on its register at the end of the year a total of 1,895 patients in the proportion of more than 3 males to 1 female, the increase for the year being 150, though the increase of strictly Federated Malay States patients was rather less than that of previous years. The districts giving the largest number of patients during the year were the urban areas of Kuala Lumpur, Ipoh, Taiping and Seramban.

As in previous years, the form of mental disorder most prominent amongst the admissions was primary dementia, which accounted for more than a quarter of the total; 68 cases of general paralysis were admitted, but it is to be hoped that this figure will, in process of time, tend to diminish as a result of the active scheme (both educational and treatment) for combating venereal disease now adopted by the Government. In a report by Dr. Arthur Smith (the Government specialist) on this subject it is noted that syphilis is particularly rife amongst the Chinese, and it is amongst the Chinese also that alcohol appears to be an increasing cause of mental disease:

"I may be accused of repeating myself year after year in my report, but I cannot help again pointing to the increase in alcohol as a cause of mental disease, and stressing the fact that alcohol is taking the place of opium with the Chinese, and very much to their detriment. I must point out also that we shall have to guard against the crimes attributable to alcohol amongst the Chinese as a new danger to the community.

"A remarkable fact in alcohol, as a cause, in this year's table is that it appears as a contributory cause in almost half the cases attributable to alcohol, whereas last year it appeared almost invariably as a primary cause.

"Even so, syphilis and alcohol are the most potent causes, as they appear more often than not as primary causes, whereas 'gastro-intestinal system' is almost invariably shown as a contributory cause, as is 'cardio-vascular degeneration,' which in its turn is as often as not due to syphilis or alcohol.

"Before I leave the question of alcohol, I should like to point out that alcohol appeared as a cause in 43 Chinese cases and only 20 Tamil cases."

In connection with the subject of the opium habit, it is interesting to note that the Government has established wards for the purpose of attempting its cure, and the Principal Medical Officer (Dr. Dowden) reports on this experiment as follows:

"This costly experiment cannot be regarded as an unqualified success. Government paid all expenses and supplied special cooks and diets. No reliable figures giving statistics of cures have ever been produced, for patients cannot be traced after discharge—a fact admitted by everyone.

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