

II. THE TABLES OF THE CONGRÈS ALIÉNISTE INTERNATIONAL.

A. STATISTIQUE MÉDICALE.

1	Mouvement général de la population	}	Aliénés admis pour la 1 ^{re} fois dans un asile.
2	Durée de la maladie avant l'admission		
3	Mois de admission		
4	Etat civil		
5	Dégré d'instruction		
6	Age au moment de l'admission		
7	Age au moment de l'explosion de l' maladie		
8	Circonstances aggravantes et complications		
9	Causes présumées de l'aliénation		
10	Professions		
11	Culte		
12	Lieu d'origine—Densité de la population		
13	Lieu d'origine—Configuration du sol		
14	Curables et incurables	}	Aliénés guéris pendant l'année.
15	Après rechute		
16	Age au moment de la guérison	}	Aliénés décédés dans l'année.
17	Durée du séjour dans l'asile ou du traitement		
18	Durée de la maladie avant l'admission		
19	Mois des sorties pour guérison	}	Aliénés restants le 31 décembre.
20	Causes présumées de l'aliénation		
21	Age dans le mois du décès	}	Aliénés restants le 31 décembre.
22	Durée du séjour dans l'asile		
23	Mois du décès		
24	Maladies qui ont déterminé la mort		
25	Maladies incidentes et infirmités observés pendant l'année		
26	Causes présumées de l'aliénation	}	Aliénés occupés; nature des occupations
27	Age au 31 décembre		
28	Curables et incurables		
29	Aliénés occupés; nature des occupations		

B. STATISTIQUE ADMINISTRATIVE.

- 30 Mouvement général de la population.—Assistance à domicile.
 31 Départements d'origine ou de naissance des restants le 31 décembre.

English Patients in Foreign Asylums.

In the *Journal of Mental Science*, for April, 1863, we published an "Occasional Note," *English Patients in Foreign Asylums*. We there stated, that a communication had been recently made to us by a well-informed foreign physician,

which induced us to bring before the Medico-Psychological Association the important question of the existence and condition of English patients resident in the foreign asylums of France, Belgium, and Germany, and we argued that it was hard to fancy anything more forlorn than the life of an English patient in a foreign asylum, amid a strange people with an unknown language, with food distasteful from previous habits, and an absence of all the comforts of home, and so passing year by year without one familiar tone falling on his ear, or one thought of home to gladden the desolate hours as they pass.

It requires, indeed, some reflection to realise the daily burthen which this forced residence in a foreign asylum must be to any of that large class—the partially insane—who are able both to realise their desolate position, and to feel acutely the want of those social ties and sympathies which bind together men of one family, creed, and nation; sympathies which, in the modern treatment of insanity, it is our object to strengthen or call into being, not thus to extinguish.

Our suggested remedy for these evils was, that visitation of the English patients in foreign asylums might, by negotiation through the Foreign Office, be sanctioned, which would thus place in the hands of the Commissioners information which would enable them, by private representations to the relatives, to lessen materially the existing evils of this system of foreign lunacy treatment of English subjects.

In *The Cornhill* for June will be found a curious paper on the French *Maisons de Santé* (to one of which in Paris the writer obtained access through a pious fraud), in which the writer relates, as in illustration of these views, the case of a Scotchman he found thus detained. He writes:—

At this moment, and just as we were about to pass through the gate, a small man, with a pale face and a bushy red beard, rushed up to us, gesticulating. At the first words he uttered, as much as by his unmistakably British countenance, I recognised him for a countryman of mine.

“Docteur! docteur!” cried he in broken French, and striving to make himself understood in an incomprehensible mixture of English and other languages—“Docteur! let me out—you promised—you you—

“Let me be your interpreter,” I said, remarking that the doctor seemed to make no meaning out of what he said.

“Oh!” exclaimed he, whilst his face became scarlet with pleasure

“are you an Englishman?” and he seized me eagerly by the hand. The director beckoned to me to come along, but my curiosity was excited, and I took no heed.

“Listen!” cried the patient. “This is my case. You can, perhaps, be of use to me. For Heaven’s sake, therefore, and out of Christian charity, do not forget what I tell you. My name is Frederick G—. I am a Scotchman, and live near Glasgow. Last January I left England to take a few days’ pleasure trip to Paris. Having scarcely ever travelled before, the fatigues of the journey from Scotland, together with my imprudence in plunging at once into sight-seeing without taking any rest, combined to make me ill. I was seized with a brain fever, and the proprietors of the Hôtel de H—, where I was staying, instead of sending for a doctor and tending me as they ought to have done, fetched the police, who, on the certificate of two Government physicians, shut me up here as a madman. During ten days I was kept in the *fourth division* of this house—that of the dangerous lunatics, confined by day in a strait-waistcoat, and tied by night on to a hard iron bed, in a stone cell, without a fire. How it was that I did not lose my senses altogether under such treatment I am sure I do not know. But, happily and providentially, I was cured. At the end of a fortnight I shook off my fever and was then transferred to this *second ward*, where, notwithstanding that since February I have been perfectly fit to be released, I have been detained unjustly for nine months. I have no means of corresponding with my family, for the director suppresses all my letters; and my mother and my sister (the only relations I have), judging from my silence and from Dr. E—’s reports, think, no doubt, that I am really mad. To make matters worse, neither the doctor, nor his assistant, nor the keepers understand a word of English; and I am, therefore totally unable to prove to them my soundness of mind—”

The unhappy man paused and seemed ready to cry.

“This gentleman appears to me of perfectly sound mind, Dr. E—,” I exclaimed. “Yes,” answered the director, speaking with evident vexation; “but he has been very ill, and has only lately recovered. He will be released in a few days.” I translated this assurance to my fellow-countryman, and, at the same time, mentioned to him my address, promising that if he had not called upon me in a fortnight, I should conclude that he were still under confinement, and make his case known at the British embassy.

I am happy to add that within a week of our visit, the ill-fated Scotchman was liberated, and left France with the well-settled and prudent determination never to set foot in it again.

Farther, in the ‘Occasional Note,’ *English Patients in Foreign Asylums*, we observed “that the present French Government, in their wild, hopeless efforts to suppress freedom of thought in the most intellectual nation in Europe, occasionally send

noisy, political adversaries for temporary treatment in the Bicêtre, has been stated to us on undoubted authority." The writer in *The Cornhill* makes this similar remark:—

"One finds in history that it was in the time of Napoleon I. that maisons de santé first played an important part in the government as private State prisons. They replaced the Bastille and the "*lettres de cachet*," so much in honour in the last century, and were made by Fouché to serve the ends of more than one political villainy. In 1802, the Prince de Polignac, afterwards so famous as Prime Minister of Charles X., was condemned for conspiracy to two years' imprisonment; but at the end of that time, instead of regaining his liberty, he was removed with his brother to a maison de santé, where they both remained incarcerated ten years, their captivity only ending, in fact, with the reign of the Emperor. Mdle. de Narbonne Fritzlar, too, the lovely Duchess of Chevreuse, some time maid of honour to the Empress Josephine, was, in 1808, cloistered in a maison de santé, on account of the political aversion she had evinced for Bonaparte; and, again, it was from a private lunatic asylum, in which he had been many years arbitrarily confined, that General Mallet escaped on the night of October 23, 1812, whilst the Grand Army was in Russia, and attempted that *coup d'état* which, ill-organised as it was, very nearly succeeded in overthrowing the Government. Under the Bourbons, up to 1830, it was the turn of the Bonapartists to fill the maisons de santé; under Louis Philippe the Republicans and the Legitimists were more or less shut up in them; and since the establishment of the Second Empire, it has been towards the persecution of political writers in country newspapers, or of too free-thinking students, that maisons de santé have been directed."

The Report of the New South Wales Lunacy Commissioner.

The New South Wales Government appointed Dr. Norton Manning, in 1867, as a Commissioner to visit the chief asylums in the United Kingdom and on the Continent, and in the United States.

The result of his labours are embodied in a Report* published by authority of the New South Wales Government, and which contains a mass of information on the construction and government of asylums such as hitherto did not exist in the English language.

Dr. Norton Manning's Report must prove of incalculable value to every asylum superintendent. The extent of his labours

* 1868. New South Wales. Report of Lunatic Asylums, by Frederick Norton Manning, M.D. By Authority. Sidney: Thomas Richards, Government Printer. 1868. P.p. 288, with many lithograph plans.