

*On the Prospects of Physicians engaged in Practice in Cases of Insanity.* By JOHN CONOLLY, M.D., D.C.L., Consulting Physician to the Middlesex Asylum at Hanwell.

Since the following Paper was commenced, the appearance of the "Report from the Select Committee on Lunatics, ordered by the House of Commons to be printed, 27th July, 1860," of which Committee Mr. Walpole is the respected Chairman, has, in a considerable degree, relieved the minds of physicians practising in the department of insanity, from the apprehensions occasioned by the draft of a Bill ordered to be printed in February, 1859. It would seem that the evidence brought before the Select Committee in disparagement of the proprietors of asylums for the insane, and in support of the alleged fact of the improper detention of persons in a state of sound mind, was deemed insufficient to warrant the meditated additions to stringent restrictions already existing. All the obnoxious clauses relative to the appointment of Medical Examiners, a kind of unqualified auxiliaries to the Commissioners in Lunacy, and who were to make secret reports, have been abandoned; as well as some other clauses, which had been the source of great and just dissatisfaction.

There is still, however, a strong inclination felt by Members of Parliament to alter the present lunacy laws. Some concessions to public prejudice are probably deemed unavoidable. Portions of the testimony given to the Committee, although inconsistent with testimony given by the same witnesses, created the unhappy impression that the utmost detective activity of the Commissioners in Lunacy was called for, and every ingenious stratagem of visitation required, to detect and baffle the devices of the proprietors of private asylums. These declarations tended to produce uneasiness in the public mind, and seemed to call for new legislation.

The objects of legislation in matters of lunacy are sufficiently simple. To protect the person and property of the lunatic; to prevent his being robbed; to prevent his being improperly and unnecessarily deprived of liberty; and to prevent his being neglected or treated with cruelty; are the legitimate intentions of all the laws which affect him. If the laws step beyond these objects, and throw difficulties in the way of prompt and proper medical treatment being afforded to the lunatic, they become disadvantageous to him. In dealing, however, with questions

of this kind, it is too often entirely forgotten that Insanity is a disease ; that it requires the aid of a physician ; and that this aid may be obstructed by complicated formalities of law, including risks and penalties by which the treatment of no other disease is embarrassed. There is some reason to think that legislation has even already been pushed to this excess. If we consider on the one hand the very great importance of early treatment in all cases of mental disorder, and on the other, the numerous legal formalities thrust upon the attention of the medical practitioner, on undertaking the care and treatment of any case of this description, we shall become conscious of the difficulties created, and wonderingly enquire how the difficulties can have become so numerous. The explanation seems partly to be found in the history of asylums of a bygone age ; and a very curious and dreadful state of things is undeniably revealed by that history. In those days the law slept too soundly, and permitted cruel and thoughtless physicians to go untroubled to their graves ; but the horrors of those times have passed away, and their return is not to be apprehended. Few or no vestiges of the ancient abuses now remain : the character of asylums, and the station and acquirements of superintendents of houses for the insane are totally changed. Within the last seventy years, the exertions of successive physicians have produced important ameliorations, without the prompting of legislation, and with little encouragement or even regard on the part of the public. The clauses of the Lunacy Acts, even as they now stand, are therefore chiefly directed against a class of superintendents of asylums long since superseded by men of education and character ; and, protective against dangers or offences no longer existing, are little more than sources of inconvenience to those engaged in the study and management of one of the most serious of maladies. To honourable men, and physicians of liberal attainments, they are full of affronts and discouragements ; and are at the same time curiously inoperative as regards actually existing abuses, and even creative of numerous evasions of the laws from which flow the worst results to the insane, for whose supposed benefit they have been invented.

It would be illiberal, and even foolish, to say that the framers of the proposed alterations in the Lunacy Act have any intention of rendering its restrictions more offensive and discouraging, and of increasing the impediment, to the immediate and proper care of insane persons ; but it is somewhat to be apprehended that alterations, not recommended

by the Committee, will be suggested, which may have these effects, and be unattended with any real advantages.

Let us dispassionately consider the practical effects of the Lunacy Laws even as they now stand.—In the majority of cases, an attack of mental disorder is inconsistent with domestic treatment. Unlike a mere bodily malady, a disorder of the mind renders the attention of relatives, the tender nursing of a wife, or the solicitous watching of a husband, the dutiful devotion and care of children, not only of no avail, but absolutely inadmissible. The presence of these objects of affection, soothing and consolatory in other disorders, is in this perverting malady exasperating. Their best attentions act unfavourably on the melancholic, and add to the excitement of the maniacal. Even in the lightest forms of mental malady, home and its associations render moral government difficult or impossible. In nearly every case the cure is impeded, and in many instances hourly danger is incurred, and [in some, life is sacrificed. What is to be done? A violent patient may be overpowered by two or three strong men, but physicians condemn such an application of muscular force, which forms no part of treatment, and of which the consequences may be fatal. The patient must be removed. An ordinary lodging offers no security. A separate house may be engaged for the patient, if expense is not a consideration, but not otherwise; and this house is usually detached, situated in a small garden, surrounded by walls: one or two attendants, a housekeeper, and kitchen-maid, form the establishment. The patient is wholly in the power of the attendants. His physician sees him occasionally, perhaps even for a time daily, hears the reports of the attendants and servants, and prescribes: he can do no more. Scarcely anything can be done which deserves the name of treatment, and against neglect there is no protection whatever. What the patient is really and immediately in need of, is a house where all ordinary dangers are guarded against; where there are numerous attendants; and where constant vigilance can be exercised, and constant care bestowed upon him all the day long, and even during the night, and every day and night; and this not by uncontrolled attendants and servants, but by a medical man, having well-selected and educated assistants, male and female, acting strictly and uniformly under medical direction. These advantages, indispensable to proper treatment, and to the patient's early recovery, can be secured in an asylum, and in an asylum only. The poor, happily for them, can be sent to one of the many excellent County Asylums. The classes of patients above the

poor, and up to the highest, require asylums differently arranged, and more resembling a private house; and it is against these refuges and places of comfort and cure, that the feelings of the public have been industriously prejudiced, and the vexations of legislative interference peculiarly directed.

A physician is called in, and finds a dangerous patient attacking those about him, breaking everything within his reach, trying to leap out of the window, or to throw himself down stairs, or to get up the chimney, or to hang, drown, or burn himself, and the medical adviser is expected to suggest what is to be done, and what is to be done at once. Every hour, every minute, threatens some catastrophe. If the physician does the only wise thing that he can do, and the best thing for the patient, and promptly removes the patient to an asylum, where his life may be saved and his cure effected, he commits a misdemeanour, and becomes liable to fine and imprisonment. No matter what the urgency of the case, he must wait with folded hands, until, often after much unavoidable delay, two certificates, or, at least one certificate in addition to his own, can be obtained, and properly filled up, and a legal order of reception also can be filled up by some relative or friend. Medical men have been taught to shun writing such certificates if they possibly can. Relatives reluctantly incur the responsibility of signing an order. Thus, time is always lost, and danger is always incurred; and, whatever happens, the physician is usually made responsible.

If called in to any other description of case, the case of any bodily malady, the physician would know what to do. His undivided attention would be given to the means of cure instantly required. Called in to give advice and help in a malady where reason and life are in immediate jeopardy, he has to apply his mind to forms and documents, to seek persons to fill up preliminary papers, to watch the very filling up, every syllable, every date, so as to escape subsequent official rebuke. Even his investigation of the case, as well as his immediate management of it, amidst all the disadvantages of the imperfect information of scared servants, and of bewildered and terrified friends, is rendered extremely difficult by the absolute necessity of attending to these legal forms, which are intended to prevent the imaginary danger (for such it is in these days), of a man of sound mind being treated as a madman, carried off to an asylum, shut up, plundered, and never heard of again.

The form of the documents to be filled up before the physician can legally resort to what is in many cases the most

important article of treatment, is complicated, and even curious; one great object apparently being the identification of the patient. There is an Order of Reception required, in which, in the course of three short lines, the name of the patient must be written twice. The Order is usually signed by a relative. Appended to this order is a Statement, containing sixteen particulars, often almost as many sources of puzzle to the signing and agitated relative, and seldom filled up completely and correctly. In this statement the name of the patient, at full length, must be written, for the third time. The sex and age are to be stated, the social state as to marriage, the condition in life, the religion, the previous place of abode, and various particulars which belong to the medical history of the case, and to this statement also the relative must again sign his name. Two medical certificates are also required, and in each the patient's name is again mentioned twice. Within a few days afterward, copies of the order, and statement, and of the two certificates, must be forwarded to the Commissioners, with a notice from the superintendent of the asylum to which the patient is taken, in which the name of the patient is given once, and another statement, signed by the medical attendant of the asylum, in which the patient's name is mentioned once more, or for the ninth time. The name and various particulars must be entered without delay in an admission book, kept in every asylum, and again in a case book, where the whole history of the case is recorded.

It would seem as if no precaution was omitted, or as if distrust of everybody's intentions in every case of insanity could not be more elaborately expressed. The physician pronounces his opinion, that the patient's case can only be properly treated in an asylum: his opinion is not relied upon. A relative is desirous to act on the physician's opinion: his motives are looked upon with suspicion, and his statement as unworthy of credit. Two medical men,—not partners, not relatives, not connected with the patient's relatives, not related in any degree or associated in any manner with the proprietor of any asylum to which it is proposed, or even afterward determined, that the patient shall be sent, and which two medical men are not to see the patient together, and consult after the manner of their profession, but are to see the patient separately, and not even in the presence of any other medical man—make as full and intelligible a statement as the prescribed forms of the Certificates permit:—their separate conviction, their deliberately recorded opinions, are not considered as entitled to belief. The medical officer of the asylum makes his statements, in

addition to all the others: it is assumed that he is simply swayed by views of profit, and that his word is not to be taken. After all this writing and signing, and the copying of all these documents and forwarding them to the Commissioners in Lunacy, enough is not yet supposed to be done to preserve a person in sound mind from being unjustly shut up as a lunatic. The physician, the relative, the two doctors called in to write certificates, the asylum doctor, and the Commissioners themselves, who can instantly visit the patient, or order him to be visited by anybody they choose, wherever he is, and at any time, by night or by day,—are all distrusted. The sleep of the members of a Parliamentary Committee is yet broken by reflections on the means of counteracting imaginary enormities, whether by means of the Justices of the Peace, or of examiners, or by any functionaries who shall, at least, possess the recommendation of complete ignorance of insanity and the treatment required by it.

A young medical man, who has received a complete medical and surgical education, must either be very sadly situated, or very advantageously, who can make up his mind to devote himself to the study and treatment of Insanity, and especially to the treatment of the insane in a private asylum. Whoever does so, condemns himself to a life of unceasing anxiety, to an abnegation of all domestic enjoyments, and to a hundred and fifty clauses of Acts of Parliament. If he undertakes to receive patients under his own roof, he must lay a plan of his dwelling before the Commissioners, marking and measuring every room and closet, and every rood of garden and orchard. Such proofs of the proper adaptation of the place for the proposed object are unobjectionable: but his professional dignity will be a little wounded by finding that his qualifications for opening such a house are not enquired into. Unless he proposes to receive one hundred patients he may be a doctor or no doctor, or he may be a shrewd person who has secured the promise of half the patients of a too confiding employer. He may know something of medicine or something of insanity, or nothing of either. He could not become an assistant or a dresser in a general hospital without some special education, but no special education or experience is required to qualify him for treating disorders of the mind. In the very beginning, and to the very end, the law merely treats him as one of the dangerous classes, exercising a suspected trade, and solely intent on gain. It takes no account of him as a physician whose life is to be given to the cure or alleviation of the obscurest as well as the heaviest of human afflictions. If the applicant for

a license is not a medical man, a medical visitor must indeed be appointed ; but to the particular qualifications of this visitor no especial attention is required.

The licensed house is inspected by the Commissioners, and regularly visited by them. They look most carefully into its management, and pay the utmost attention to the state of the patients, any of whom they can remove ; and they can also revoke the license at any time ; to all which no objection can well be made. Except in the case of a dangerous patient, the relative or person who signed the Order of Reception can remove the patient at any time, and without any notice. If a suspicion arises of the improper detention of a patient, or if any patient is believed to be in some asylum concerning which exact information cannot be obtained, the Commissioners can give an order to search the Returns of all Asylums for the twelve preceding months. If any doubt as to the actual treatment of a patient arises in the mind of any friend, every possible facility is given for visiting the patient, or for having the patient visited by any medical man for any limited number of times. The Commissioners have notice, within a few days, of every patient admitted into every asylum, with a short description of each case. They can visit the patient at once, and at any time. Books are kept, in which every accident, escape, or death, is registered, and every variation in the patient's health of mind or body, and every case relieved, or cured, or removed. All this is well ; but the proprietor of the asylum is scarcely regarded as the master of his own servants, and is required, if he dismisses any of them for misconduct, to report the circumstance to the Commissioners, which rather over-minute legislation is perhaps but rarely complied with. As a physician even, the proprietor of an asylum cannot give permission to any of his patients to pass a few days with their nearest friends, or with their parents, nor send them to the sea-coast or any where else for salutary change, or for the benefit of health, without formal leave from the Commissioners, on furnishing a formal assent of the friends in writing. These regulations would seem ample enough to protect any person from improper confinement, and any insane person from improper treatment or neglect.

But the jealous guardianship of the law extends further. A licence must be obtained, and all other restrictions must be attended to, by any person receiving even so small a number of insane persons as two ; and it is the evident desire of the Commissioners that no person, medical or otherwise, should take

charge of a single patient without certificates ; and if a medical man in attendance writes one of the certificates he is no longer acknowledged by the Commissioners as the attending physician ; and another must be appointed to make regular visits to the patient and to report to them. The patient, even so placed, cannot be allowed to visit his friends or go to the sea-side or elsewhere, without the formalities just mentioned.

Without impugning the nature and objects of the greater part of these regulations, it is well known and understood that some of them expose the proprietors of asylums to many dangers ; hedge them in by pains and penalties, involve them in the intricate meshes of the law ; and yet without the smallest protection from the Commissioners or any other persons, in any difficulty that happens to them. Some of the regulations so obviously interfere with the authority and freedom of action of relatives, and even parents, as to be evaded whenever practicable ; and the effect of others is to cause patients, especially of the richer classes, to be concealed, or deprived for a length of time of proper treatment, and only to be taken to an asylum when no treatment can be effectual ; or perhaps to be removed out of the way of restriction and publicity, to other countries, to Belgium or to France, with little regard to their well-doing.

It would be easy to describe numerous cases in which the necessity of procuring certificates, and the existing difficulties of reception and treatment in private asylums, or in a private family receiving remuneration, retard measures of importance, and add to the distress attending the occurrence of temporary insanity. Many instances occur in which intellectual men and women break down for a time from overwork and anxiety : with rest and proper care they recover, and return to the labour necessary to their living. Certificates and orders, and the degree of publicity really inseparable from these formalities, are ruinous to them. The man of business who has been subjected to these things is scarcely trusted again ; the literary man is regarded doubtfully ; the tutor and the governess are received into families with apprehension. There are also cases in which the physician knows that symptoms which appear slight to ordinary observers are the first of a series which will end in imbecility, paralysis, and death ; cases in which early and proper treatment, away from home, would so retard the progress of the malady as to effect what might be looked upon as a complete cure, although the cure would still be only temporary ; and in which cases the impossibility of getting certificates, and the penalties attached to placing



the patient in circumstances essential to cure, in the early stage, cause him to be inefficiently attended to until the nature of the malady becomes clear to inexperienced observers, and hopeless. Patients who have been insane for a time, and have been placed in a good asylum, and recovered, not unfrequently return to the same asylum of their own accord, when they feel that the mind is giving way again : they sometimes travel a great distance to do so, and suffer much on the journey ; and when they arrive, if the proprietor, without waiting for forms, receives them kindly, and places them in their old apartments, he places himself in a situation of great difficulty ; and has to make explanations and apologies for doing what it would have been disgraceful not to do. If he receives his dearest friend into his house and gives him the sheltering care required in derangement of mind, he is exposed to be fretted and pained by formalities. More constant and especial difficulty is experienced in cases of what is termed moral insanity ; where the conversation is sensible, or at least careful and cautious, and the conduct insufferable ; cases in young women, in which the feelings, affections, and actions are perverted, but the demeanour in society scarcely such as to occasion remark ; and cases in men where the disposition to drink to excess, and to waste money and property, comes on in paroxysms, but with deceptive intervals. Many imbecile young persons, both male and female, whose peculiarities render their remaining at home among brothers and sisters highly inexpedient, are also deprived of proper protection, given up to servants, and subjected to very inferior management or neglect. In such circumstances, and in others that may be mentioned, the question always, and naturally, arises, whether the proper treatment of the more marked forms of madness, and the security of the insane from ill-treatment, could not be effected without the exclusion of numerous cases from needful care, shelter and regulation, which the precise restrictions of the law as respects certificates undoubtedly occasions. It would not seem difficult to maintain an equally efficient acquaintance with such cases, and a sufficient supervision of them, without the aid of forms that assuredly have a pernicious effect as respects a very large number of patients requiring specific domestic care, or even immediate protection and professional aid. The modification of the existing lunacy laws would seem to be more needed than any increase of their number.

In the meantime, the calm and practical Report presented to the House of Commons from the Select Committee on Lunatics is such as to allay many anxieties which had been

excited by some of the evidence laid before it; and it may very sincerely be added, that the ability and judgment of the members composing the committee, and the independent character of its chairman, give us every assurance that, unless overpowered by the influence of persons more easily prejudiced, or more hasty and more easily excited and misled, no mischievous alterations are very likely to take place in the next session of Parliament. As respects private asylums especially, the changes recommended in the Report are not generally objectionable: the few requiring comment being—

1. That Medical Certificates should be verified or their correctness and their being justificatory of the patient's confinement shewn before a magistrate. This is Mr. Bolden's proposition, who, being a lawyer, readily falls into the common error of considering this important part of the medical treatment of a patient as simply a legal proceeding. The obvious effect of such a formality would merely be a hurtful delay.

2. That the Certificates authorising detention should be limited to three months, in order, to use Lord Shaftesbury's words, "to compel a revision of the case by the family or friends." This might in certain cases constitute a protection against neglect or improper detention; but in many other cases it would but renew the distress and apprehensions undergone before resorting to a measure painful even when its first necessity was first reluctantly admitted.

3. That the person signing the Order should state when the person so signing last saw the patient. To this there seems to be no objection, although the impropriety of its being signed by any one who has not seen the patient recently must be of very rare occurrence

4. That a copy of the Order and Certificates, instead of being sent to the Commissioners only within seven days, shall be sent within twenty-four hours; the only objection to which is, that in asylums into which pauper lunatics are received the number admitted at once is sometimes very great, and the superintendent would be so laboriously occupied in copying the mass of ill written documents, as to have no time to examine and classify the patients on their admission.

5. That the patient should as soon as possible be visited by the Commissioners, or by some persons acting directly under their authority. This duty should undoubtedly fall on the Commissioners: persons acting directly under their authority would seldom be competent to the duty of judging as to the propriety of confining the patient.

There are some further recommendations touching the visits

of friends and the correspondence of patients, on both of which points much must always be left to the judgment of physicians. The visits of injudicious friends may counteract all medical and moral treatment, and the letters of patients sent indiscriminately to those to whom they are addressed would produce mischief in many instances, incalculable annoyance in many more, and in some irremediable unhappiness.

There are a few other suggestions in the report, and those of a nature obviously useful: but if no extraneous authority and no proper prejudices sway or pervert the judgment of members of Parliament who give particular attention to this subject, the new bills are not likely to contain any clauses of which the proprietors and physicians of private asylums will have cause to complain. Their danger lies more in the supposed disposition of the Commissioners in Lunacy to look upon them as persons influenced by profit and profit merely, to a degree beyond that which influences other persons, or all persons who are industrious in business of any other kind, or in any branch of commerce, or in arts or arms, or in professional exertion of any sort. This disposition of the Commissioners, if it really exists, which is doubtful, is very unfortunate, and must produce results mortifying to many medical men of character and honour; and distressing to the relatives of many patients, filling their minds with vague apprehensions, and forcing them to depart from arrangements which have long been the only source of comfort and satisfaction left to them.

The suppression of private asylums and the accumulation of patients, high and low, rich and poor, furious and gentle, in larger institutions, where, in some inexplicable manner, nobody is to derive any pecuniary advantage, does really appear to be an idea cherished by the Commissioners, and one for a time likely to prevail and do a certain amount of mischief. Such arrangements ought at least never to be made without some regard to the physician in whom the friends of the patients have long confided. The feelings of the friends, the situation of the new asylum recommended in relation to their residences, and the habitual influences which have long been comfortable to the patient, should receive humane consideration. The range of happiness in any patient's daily existence is very limited, and to detach any of them from familiar places and from attendants who have become their friends, and plunge them among a crowd of lunatics in which they become but units of a large community, are not matters to be regulated like a military change of quarters, but requiring grave reflection as highly important parts of treatment.

In relation to the question of the relative advantages of private asylums, Dr. Harrington Tuke's letter, which appeared in a recent number of the *Lancet*, (November 3rd), is well deserving of notice. It shews that on comparing the returns from asylums of various descriptions, "the highest rate of cure is to be found in private asylums for the upper and middle classes in which there are resident medical officers or proprietors;" that whilst the per-centage of cures on admissions in private asylums, with medical residents, but where also pauper patients are received, and the number of patients is consequently great, is 34.09, the per-centage of cures in private asylums solely for the higher and middle classes, with resident medical proprietors or officers, is 38.6. One of the tables given by Dr. Tuke seems to establish the fact that in private asylums the per-centage of recoveries, in the first year of the malady, is between 70 and 80; but that the per-centage in cases of more than one year's duration falls to 20. These statements are at least deserving of attention, both with reference to the character and effect of private asylums, and to the impropriety of creating obstacles to an early resort to them in cases of insanity.

I fully agree with Dr. Tuke in his comments on these facts. He justly observes that "the fact that nearly eighty in a hundred patients, placed without delay in a private asylum, are restored to health, should be sufficient to remove any impression unfavourable to such establishments. It has been well said, he goes on to remark, by Mr. Campbell, one of the Commissioners, "that it is unwise to degrade the position of the medical proprietor, and by showing extreme suspicion, and treating him as one who would take advantage of his patients, and for profit deprive them of their liberty, to deter men of the highest character from entering upon a department of medicine in which so much good can be done, so much evil prevented. Instead of seeking to overturn, it might be well to search for means to improve, and for safeguards to protect against abuse, an institution which affords the best opportunities for the cure and treatment of the insane, together with a shadow of that home which for a while must be abandoned, the society and sympathy of educated men and gentlewomen, the cheering companionship of children, and ever-watchful care ensuring the constant consideration and forbearance of servants." Nobody does the Commissioners in Lunacy the injustice to think them insensible to the arguments so well adduced in this extract, and so wholly without exaggeration.

I cannot conclude this paper without alluding to a subject which I believe to be important in relation to the Prospects of Physicians practising in Insanity, and which is unquestionably most important in relation to the insane. In all the projects of legislation with reference to persons afflicted with mental disorder, insanity, in all its forms, seems to be almost exclusively regarded as a disqualifying condition, a social peculiarity, calling for particular laws. Protection of property, and the care of the person, appear to constitute the sole object of the legislator's contemplation ; and their importance is indeed undeniable. But whilst great pains are thus taken to control those who undertake to be the medical guardians of insane people, and to surround them with restrictions, no consideration seems to be extended to creating a class of medical guardians qualified for so important an office. Their efficiency, arising out of study or experience, is still almost entirely overlooked. Unhappily, the same forgetfulness prevails in the medical schools, and even in the Medical Council of England. A medical man who undertakes the performance of surgical operations is very reasonably expected to be thoroughly informed as to the structure and shape of bones and muscles, and the course of blood vessels and nerves, and the natural laws of reparation and healing. For practising in mental disorders no preparation is demanded. It can scarcely be wondered at that the practitioners in this department of medicine are depreciated, or exposed to derogatory observations. The practice in which they are engaged seems to the public to require no qualification but that of having a house large enough to receive patients into ; and the medical proprietor or visitor of a private asylum may never have seen a well conducted asylum in his life. It would be very much to the advantage of such institutions if this state of things was altered, and if medical practitioners were encouraged and enabled to acquire some knowledge of the nature and treatment of mental as of other diseases. It seems scarcely credible that the faculties of the mind, the intimate and various relations between the mind and body, and the actual effects of various influences, as remedies or otherwise, on both, when the mental functions are modified or disturbed, should not be thought essential parts of medical study, even for those especially devoting themselves to the care of the insane. Yet this part of physiology obtains little attention, and of pathology and practical therapeutics none. It would seem to be concluded either that the treatment of disorders of the mind can be improved no further, or that its improvement is of no consequence.

I can only repeat, what I have at various times and in various places expressed before, that every large public asylum ought, during a part of each year, to be a clinical school. The practicability of effecting this, without any disturbance of the patients, has already been shewn at Hanwell, Bethlehem, and St. Luke's; and several of the pupils who have had the advantage of attending the visits and lectures in those asylums are now among the efficient superintendents of other institutions, and have already made important contributions to medical knowledge.

This neglect of insanity as a part of medical study is entirely accordant with all the past history of lunacy and lunatics. The whole subject of madness was long ago pushed out of medical consideration, and thrust out of ordinary practice as inconvenient. The treatment of the insane was eschewed by physicians, and given up to coarse and ignorant jailers and to low and brutal servants. The formal physicians of the last century, content with the axioms of the ancients, and practically ignorant of the real forms and course of mental maladies, and perhaps disdaining the painful task of personal inspection, gave a pompous sanction to established measures, involving neglect and cruelty. If they prescribed, they seem not to have regarded the effects of their prescriptions. The paucity of recoveries, and the shocking mortality in those old mad-houses, in no way discomposed them. Solemn professors, one after another, delivered the same unweighed doctrines from their chairs, and perpetuated the same pernicious practice. To this indifference to the condition and treatment of the insane the attention of the public was attracted in this country before that of the medical profession. The founder of the York Retreat was not a physician; the courageous investigators of the abuses in the old York Asylum, and in other asylums, were private gentlemen. Slowly, and somewhat reluctantly at first, and only in later years earnestly, the state of asylums and the treatment of the insane became improved by the medical officers of such institutions: but when their attention was fairly and heartily directed to subjects on which their education had left them in much darkness, what had before been merely mad-houses became in reality places of retreat and refuge, and entitled to the denomination of hospitals for the insane. But still this department of practice continued separated from general medicine; almost unavoidably as an art, and habitually as a study. In the old days no good lessons could be learned in asylums, where no good principle prevailed and no liberal

thought flourished. The malady was exasperated, not soothed, in those dreadful places. It was only as improvements proceeded that opportunities of sound instruction were created : but these opportunities were neglected ; and they remain neglected. The governing bodies of large asylums do not sufficiently appreciate the instruction of medical students. They too often fail to estimate the value of medical services in asylums, and disregard the opinions of their own medical officers ; looking upon medical and even upon sanitary monitions as of small importance ; raising, in despite of such authority and warnings, enormous buildings, where all causes of sickness and mortality are accumulated, and all medical experience as much set at nought as the authority of the Commissioners in Lunacy, who can only protest against these things, and have no power to prevent them.

Thus, whilst the Law has stepped in to avenge the errors of the past on men who have been actively endeavouring to sweep those errors away, it has done little more. A certain wantonness of legislation has been exercised on all medical men devoting themselves to the care of the insane ; and their name has received a brand from which their improved character ought to have been a protection. They are expiating the offences of their forefathers. Their best attempts have been made with small encouragement, and their labours in the exercise of their profession are stigmatized as venal. Nothing has been done, and nothing seems to be dreamed of, calculated to give encouragement to medical men practising in insanity, or to students who ought to be qualifying themselves for exercising this branch of the medical profession.— A few clauses in an Act of Parliament bearing on these neglected points might be really serviceable ; beneficial to the insane, and encouraging to the continued exertions on which the safety of the insane depends.