

offer for merciful consideration (except one), which, although of the most painful nature, and with the utmost repugnance, I disclose; yet for the justification of those, my friends, who may have pleaded a remission of my sentence upon the ground of temporary insanity, and as a proof that my mind was reduced to the lowest state of wretchedness, I am constrained to discover that which, but for the intervention of a merciful God, must have proved my Eternal ruin. About two months previous to my apprehension, I took my only dear little daughter, whom I loved to excess, from London Bridge to Battersea Pier by steamboat, with the awful intention of drowning both myself and my child, but an invisible hand was near, Whose power alone is infinite to save. Oh, the depth of the riches, both of the Wisdom and the Love of God, how unsearchable are his judgment, and his ways past finding out. What shall I render unto Thee, O Lord, for such a mighty deliverance, for thou hast plucked me as a brand from the Eternal burning; Thou hast rescued my soul from the lowest Hell. Give me grace henceforth to devote the remnant of my days to thy service.

And so on for a foolscap page without returning to the subject in hand. These two independent statements show some strange coincidences in the circumstances of the cases, and in the train of thought which occupied the minds of the prisoners. Both were convicted of arson, both allude to self-accusation, both claim to be mentally weak, both refer to homicidal propensities (real or fanciful), and both plead the feelings of their friends, and request a re-consideration of their case on grounds of the vaguest description. Both prisoners continue to do the ordinary out-door prison work, and neither required to be exempted from discipline on mental grounds. The cases form a curious collateral psychical puzzle.

(To be continued.)

Notes in regard to the Prevalence of Insanity and other Nervous Diseases in China. By GEORGE SHEARER, M.D., Liverpool.

The following rough notes are compiled chiefly from the reports of the various Mission Hospitals established throughout China, and the Health Returns of the Treaty Ports, published under the auspices of the Chinese Customs' Service. It is a very wide question, and our materials are scanty.

I am not aware of the existence of any institution in China of the nature of an asylum for the insane. Fatuous people are occasionally met with in out-of-the-way country

places, and cases of mania, when they occur, are treated with iron handcuffs and hempen rope, and tied up like wild beasts till the fit is over, or nature sinks under the strain. As Dr. Lockhart remarks, "The condition of the insane in a country like China, where there are no asylums, is truly pitiable." A certain, though I must believe an inconsiderable, number of cases of lunacy and insanity are seen year and year at each of the various Mission Hospitals throughout the Empire, and these have been in some instances of so striking a character as to have impressed the opinion on the minds of some physicians that *mental maladies* are not less prevalent amongst the Chinese than they are amongst Europeans. Undoubtedly suicides (mostly by opium) are notoriously frequent, and from causes (such as disappointed love, injured pride, sudden fear) deemed ridiculous amongst Europeans. Yet my impression is very strong that the proportion of cases requiring restraint, surveillance, and, generally speaking, the care of an asylum, is infinitely smaller than we find in any part of England or Scotland. The statistical notes which follow will, I think, bear me out in this statement:—*Diseases of the general nervous system are by no means infrequent amongst the Chinese, but cases of alienation of mind are comparatively few.* Of course, if we include cases of anæsthesia and leprosy under diseases of the nervous system, we shall increase the former class; and if we include the suicides or attempted suicides by opium-poisoning, drowning, &c., under the latter head, we shall swell the number of insane cases. I have so arranged them in the abstracts which follow, and yet the proportion will be found to fall far below what might be looked for in European communities. Two causes in chief operate towards this result.

1st.—*The Natural Character of the People.*

The Chinaman is naturally a smooth, placid, unmartial, steady, easy-going, unexcitable being, with a large share of common sense, and self-control, and philosophy "to bear the ills of life." The mass of the population is engaged in agricultural pursuits, and leads a life of arcadian peace and felicity. Amongst business men there is nothing like the same jealous competition and rivalry, sharp practice and under-selling, which occur amongst European merchants and tradesmen; trade prices being regulated by guilds and corporations. Nor is there the same "living for appearances," and "beyond one's means," so common in England. The

style of living even on the part of wealthy merchants is simple and unpretentious, so that when calamity overtakes them the fall from the pinnacle of fortune is much less precipitous and injurious to one's pride and self-respect than it would be with us.

He that is low need fear no fall.

They do everything quietly and methodically, without the slightest exertion or fuss. They have few ups and downs in their world. Fate regulates everything, and they are content with their lot. If they have wealth, they use it; if none, they do without it. They live on in one regular routine. Worry is unknown. None of the causes, such as competition in business, speculation, religious controversy, and party politics, which in the west undermine health and increase the mortality, are found here. General indolence and ease, disinclination to be troubled about matters, and a desire to let things take their course, trusting that all will come right, are their characteristics. This state of feeling, partly inculcated by their various religions, and occasioned partly by the climate, conduces most effectively to the permanence of their institutions, and indisposes them for any changes in their customs.

2nd.—Their Temperate and Abstemious Habits.

The Chinese are a sober, temperate people. One physician writes—"During eight years' residence in Peking, I have seen but two cases of intoxication." Another, "During six years' residence in Hankow I have seen but two cases of intoxication and one of drunkard's liver." Another, "During seven years' connexion with a public hospital I saw but eight cases of intemperance." Yet a good deal of raw coarse spirits, or "shamshoo," is consumed, distilled from the Sorghum, or Barbadoes Millet, and containing a large quantity of fusel oil, which renders it impossible to be drunk in large quantities. Tea is the only beverage which is not used in *moderation*, and to this circumstance is attributed the general prevalence of dyspeptic and gastric disorders. A mild, native tobacco is commonly smoked by men and women by means of the water-pipe, and within the last forty years the opium-pipe has become the indispensable and baneful luxury of an enormous and growing proportion of the population. How far the habit of opium smoking tells in the development of mental

diseases I know not, but of all luxuries it is the surest destroyer of health, property, position, and life.

At the Shanghai General Hospital during the year 1855 there were 12,237 cases, surgical and medical, under treatment, of which 16 were entered under the heading paralysis, 20 of epilepsy, and 16 of attempted or successful suicide by opium. Proportion 1 to 235.

During the year 1854, at the same institution, 12,181 cases were treated, 20 of which were cases of paralysis, 15 of epilepsy, six of suicide by taking opium. Proportion 1 to 297.

In 1856 there were 11,495 cases entered, of which 10 were cases of paralysis, 16 of epilepsy; attempted suicide by the use of opium, 8; successful ditto, 4. Proportion 1 to 302.

During the year 1863, out of some 20,000 cases, there were but 14 of insanity, and this is stated by Dr. Henderson to be "more than double the number observed during the three preceding years. Insanity, though reckoned exceedingly rare amongst the Chinese," he goes on to say, "may not be really so, as we shall probably find on a better acquaintance with the people." In the majority of cases the friends ascribed the disease to the influence of sudden terror, as from fire, incursions of Imperialist soldiers, pirates or robbers, pecuniary losses, disappointment in love or marriage. Two were examples of *erotomania*; one was perfectly quiet and inoffensive, and left the hospital perfectly cured within three months; the other showed his disappointment by savagely attacking everyone who approached him. He was carried in by four men, heavily ironed with a chain weighing 4lbs. around his neck, and his hands and feet firmly tied together. He recovered within 42 days.

A maniac who had just attempted to commit suicide by drowning was brought to the hospital by two policemen, who found him a most troublesome subject to manage. He endeavoured to destroy everything within his reach, stripped himself naked, and was constantly vociferating at the pitch of his voice, day and night. He steadily refused all food and medicine, and was fed with the stomach pump for eight days, but in the end he died of exhaustion.

Another case of acute mania died of inanition.

A third, in a lad 18 years old, seemed due to injury about the head, received during a severe beating from his master, and was an extremely violent one. For seventy hours he never slept, nor ceased yelling, notwithstanding large doses,

frequently repeated, of tartar emetic and opium. Aphonia at last put an effectual stop to the uproar, and at the end of fifty days he was perfectly well.

Of the 14 cases of insanity, 11 were cases of acute mania, with excited pulse and obstinate insomnia, and three were cases of dementia.

The same year 44 cases of attempted suicide by opium were treated, of which 14 were fatal. Proportion 1 in 345.

In the year 1860 (total, 16,111), dementia, 6; epilepsy, 5; paralysis of face, 23; hemiplegia, 4; paraplegia, 13. Proportion 1 in 316.

During the year 1865 the entire number of cases amounted to 15,000; there were two cases of suicide by hanging, and 43 of attempted suicide by opium—34 being successfully treated and nine proving fatal. There were two cases also of acute mania. Proportion 1 to 319.

During the year 1870, Dr. Johnston reports a total of 12,823 cases, of which six were cases of insanity (one only remained uncured), 38 of epilepsy, 48 of paralysis, 31 of facial paralysis, and four of locomotor ataxy. Cases of poisoning with opium 48, of which 12 died; ditto with arsenic, 2: both recovered. Proportion 1 to 72.

During 1871, 22,496 general cases were treated, including one of paraplegia, ten of attempted suicides by swallowing opium, of which two were fatal, and one of suicidal melancholia, alternating with attacks of acute mania. Proportion 1 to 1607.

During 1867, 13,078 general cases were under treatment, of which five were cases of hemiplegia; 40 of epilepsy, four of mania, 24 of facial paralysis, four of cut throat, 44 of opium poisoning, of which ten died. Proportion 1 to 108.

During 1872, the total was 12,378, of which 12 were cases of epilepsy, 24 of hemiplegia, three of acute mania, and 38 of opium poisoning (all suicidal), of whom nine died. Proportion 1 to 160.

At Swatow Native Hospital there were treated during the years following:—

	General Cases.	Paralysis.	Epilepsy.	Insanity.	
1864	1967	7	—	1	Proportion 1 to 246
1865	1777	15	4	—	Proportion 1 to 90
1866	2500	11	9	2	Proportion 1 to 113
1867	3000	24	8	2	Proportion 1 to 90

At the Hankow Hospital of the Wesleyan Mission, Dr. Porter Smith reports that during the year 1864-5 he treated a total of 18,764 cases, of which 182 came under the denomination of diseases of the nervous system, as follows:—Epilepsy, 5; apoplexy, 2; paralysis, 60; neuralgia, 118; aphonia, 2. Proportion 1 to 108. He remarks—“Diseases of the nervous system are remarkably infrequent. How far this depends on the apathetic, peace-and-quietness loving character of the people, we cannot tell. In keeping with all their physics and philosophy, they certainly do not use their brains to any very wasting or wearing extent. Apoplexy is very rare. Palsy is generally hemiplegic, coming on in no very definite or sudden manner, and almost always recovered from to a considerable degree. Paraplegia, general paralysis, softening of the brain, and chorea have not been observed. Bell’s paralysis of the face occurs with tolerable frequency. Dentition is easy amongst children, and seldom attended with convulsions, palsy, &c. Water on the brain is uncommon. Insanity has not been seen or heard of amongst persons applying for relief. Three cases of idiocy have been noted amongst children, and four instances of imbecility amongst adults. Considering the alarming character of mental maladies, on the one hand, and the exaggerated notions entertained by the Chinese of the powers of Western Art on the other, it is probable that if cases of insanity were numerous in proportion to other diseases and the population, they would be found in far greater numbers at the hospital.”

During the year 1865-6 Dr. P. Smith treated 8,941 cases at the Mission Hospital, Hankow, of which 152 were classed under the head of diseases of the nervous system, as follows:—Apoplexy, 1; epilepsy, 25; paralysis, 44; neuralgia, 55; sciatica, 28. Proportion 1 in 59.

During the year 1866-7 Dr. Smith treated 11,557 cases at the hospital, of which 141 are referred to the class of diseases of the nervous system, as follows:—Apoplexy, 2; epilepsy, 28; paralysis, 36; hydrocephalus, 3; neuralgia, 49; sciatica, 20; facial paralysis, 3. Proportion 1 in 82.

During the year 1867-8 Dr. Smith treated at the hospital a total of 6,661 cases, of which no portion is classed under the head of diseases of the nervous system. Proportion nil.

During the year 1868-9 Dr. Smith treated in all 6,935 cases, of which 120 are referred to the nervous system. Thus:—Epilepsy, 14; infantile convulsions, 2; hemiplegia,

12; hydrocephalus, 2; facial palsy, 2; neuralgia, 69; sciatica, 14; insanity, 2. Proportion 1 in 58.

In the Native Hospital at Hankow, carried on by Dr. Shearer under the auspices of the London Mission, I find there were 5,668 cases under treatment during the year 1870, of which 165 cases are entered under the head of diseases of the nervous system as follows:—Neuralgia, 15; sciatica, 18; vertigo, 4; cephalalgia, 42; hemicrania, 16; trembling palsy, 2; facial paralysis, 7; head palsy, 1; hemiplegia, 11; paraplegia, 16; hæmorrhagic apoplexy, fatal, 1; epilepsy, 12. Two cases of insanity, and one of suicide by hanging, all of them originating in family quarrels. Proportion 1 in 35.

Dr. Thomson, of Swatow, reports 35 cases of diseases of the nervous system, out of 1500 cases of general disease treated in the Native Hospital, as follows:—Neuralgia, 17; sciatica, 8; hysteria, 1; paraplegia, 1; hemiplegia, 3; epilepsy, 4; oëtitis, 1. Proportion 1 in 42.

At Kew-Kiang Hospital for the natives Dr. Shearer reports upon 2,456 general cases under treatment during the year 1871, of which 44 are referred to the nervous system. Among these were 2 of hæmorrhagic apoplexy, fatal within 6 hours; 1 of delirium tremens; 1 of numbness and partial paralysis of right arm and hand, with acute wasting of the muscles; 3 of convulsions in young children; and one of acute mania cured by repeated doses of bromide of potassium, after the ordinary sedatives had failed. Also several cases of opium poisoning with a view to suicide, saved by the administration of strychnia in minute and repeated doses. Proportion 1 in 46.

Dr. Manson, at the Dispensary for the Natives in Takoo and Taiwanfoo, Formosa, reports on 1287 cases, of which 7 only are classed under the head of diseases of the nervous system, as follows:—Hysteria, 1; neuralgia, 2; sciatica, 2; epilepsy, 2. Proportion 1 in 183.

Dr. Reid, in charge of the Mission Hospital at Hankow, for 1872, reports upon some 5138 cases, of which 120 are placed under the head of diseases of the nervous system, as follows:—Chronic hydrocephalus, 2; apoplexy, 2; embolism, 1; inflammation of spinal cord, 2; atrophy of spinal cord, 5; softening of spinal cord, 3; neuroma, 2; paraplegia, 7; hemiplegia, 19; facial paralysis, 5; Scrivener's palsy, 1; infantile paralysis, 10; tetanus, 1; convulsions, 10; epilepsy, 16; shaking palsy, 2; neuralgia, 6; sciatica, 8; hemicrania, 4. This is in the proportion of 1 in 42.

Dr. Manson, of Formosa, reports upon 891 cases treated by him during 1872, of which only 9 were referred to the nervous system:—Hysteria, 3; epilepsy, 1; sciatica, 1; paralysis, 4. Proportion 1 in 99.

During the year 1873, Dr. Reid treated some 3876 cases at the Mission Hospital in Hankow, of which 101 belonged to the class of nervous diseases, as follows:—Tubercular meningitis, 1; apoplexy, 3; sunstroke, 2; hemiplegia, 15; paraplegia, 5; infantile convulsions, 9; epilepsy, 12; neuralgia, 13; sciatica, 16; shaking palsy, 1; locomotor ataxy, 2; infantile paralysis, 5; Bell's paralysis, 4; Scrivener's palsy, 1; anæsthesia, 3; spasm of muscle, 4; mania, 1; idiocy, 2; neuroma, 2. This is in the proportion of 1 in 38.

The only reliable inferences to be drawn from these statistics seem to be the following:—*That disorders of the nervous system, in a general sense, are by no means infrequent amongst the Chinese; that we have no sufficient data as yet to enable us to decide the question of their greater or less frequency of occurrence, as compared with European countries, though the probabilities are that the prevalence of diseases of the general nervous system in China bears some proportion to the prevalence of the same diseases in Europe, and other regions, since the proportion is observed constantly to rise with the degree of attention paid to diagnosis, the proportion of nervous cases varying from 1 in 1607 to 1 in 38 at different hospitals; but that cases of alienation of mind, idiocy, lunacy, fatuity, and, generally speaking, insanity, are strikingly few, if we leave suicides out of the reckoning.*

Sunstroke, or heat apoplexy, which carried off 10 persons in the foreign community at Shanghai during the summer of 1872, is all but unknown amongst the Chinese.

In confirmation of these remarks, I find Dr. Lockhart, of the Peking Hospital, who, during the year 1861-2 prescribed for some 22,144 cases, writing thus:—

“The number of cases of paralysis of various kinds has been very surprising, chiefly atonic paralysis, the result, in many cases, of excessive study, and of endeavouring to commit to memory the books of the classics; in some also the result doubtless of extreme dissipation. Other cases were clearly the result of effusion of serum, or the extravasation of blood on or into the brain, as in apoplexy. From all that could be ascertained, it would appear that disease of the brain and paralysis in its various forms prevail to a great extent in this city. I am satisfied that one cause of cerebral affections among the Chinese in the North is the practice of living and

sleeping in rooms heated by stoves in which anthracite coal is burned. These stoves have no chimney, and the coal being smokeless, leads the people to suppose that nothing injurious passes from the fire, but of course a large amount of carbonic acid and carbonic oxide is generated, and injuriously affects those exposed to it, causing severe headache, stupefaction, and fever. Many persons have been brought to me semi-comatose, who in the cold weather had lighted the stove and then gone to bed, but were afterwards found by their friends to be insensible. Such a state, often repeated, must give rise to cerebral disease sooner or later, and I am sure it does so in many instances.

“ Amaurosis is also very common, the consequence of unremitting application to reading, and also of dissipation and excess. Many of the Buddhist and other priests are subject to this malady.

“ *Insanity.*—Many cases of insanity and idiocy were seen, but they were for the most part quiet and easily controlled. In one case of acute mania, the young woman had been tightly bound with cords by the wrists till mortification set in, which, spreading up the arms, caused her death. The condition of the insane in a country like China, where there are no asylums, is truly pitiable. The unfortunate sufferers are usually bound fast, sadly neglected, and subject to hard and cruel treatment, in order to precipitate their death, which is *urgently desired* by their friends and relatives.

“ Many epileptics were seen, and deaf mutes are from time to time brought to the Hospital.”

It is quite evident that no satisfactory conclusions can be drawn from the statistical method as applied to these returns, which, in most cases, are rather a simple record of the rough and ready treatment of a general hospital, by men engaged in private practice, than a careful analysis and classification of cases for scientific purposes. But it will be remarked that, whereas the proportion of nervous diseases to general maladies varies thus :—1 to 235, 1 to 297, 1 to 302, 1 to 345, 1 to 316, 1 to 319, 1 to 246, 1 to 103, 1 to 90 ; it is stated to be so rare in one hospital as 1 to 1607, and so frequent in others as 1 in 59, 1 in 58, 1 in 48, 1 in 42, and even 1 in 35. This enormous divergence can only be attributed to the greater nicety of diagnosis practised at some hospitals than others.

Still it may be interesting to compare with these returns of the native hospitals a few which I have by me of the maladies prevalent amongst foreign communities in China, from

which it will be seen that the percentage of nervous disorders is much greater, though, as a rule, the residents in our foreign settlements are young, hale and hearty—in fact, generally speaking, people in the prime of life. For this excess of nervous affections the climate is generally blamed. Dr. Scott, of Swatow, for 1870, reports upon 361 cases of general disease amongst the foreign population, of which 12 belong to the nervous class, or 1 in 30.

Dr. Somerville, of Foochow, returns a total of 496 cases for 1872, of which 19 were classed under the neuroses, or 1 in 26, as follows:—Heat apoplexy, 1; sun malaise, 13; tetanus, 1; sciatica, 1; neuralgia, 3.

Dr. Wong, of Canton, makes a return of 204 cases of disease amongst foreigners during 1872, of which 12 were nervous cases, or 1 in 17, thus:—Sunstroke, 2; neuralgia, 6; paraplegia, 1; cerebral exhaustion, 2; hysteria, 1.

Amongst the foreign community of Shanghai, numbering between 2000 and 3000 souls, during the half-year ending September, 1872, there took place in all 63 deaths, 16 of which, or nearly one-fourth, were from affections of the nervous system, as follows:—Disease of the brain, 1; heat apoplexy, 10; spinal arachnitis, 1; delirium tremens, 1; infantile convulsions, 3.

During the succeeding half-year (cool winter season), 50 deaths occurred, of which only 6, or $\frac{1}{8}$ th were from affections of the mind and brain, thus:—Suicide, 1; brain disease, 4; epilepsy, 1.

On the Family Care of the Insane in Scotland. By PROFESSOR FRIEDRICH JOLLY, of Strasburg.*

The treatment of the insane in families, and the system pursued at Gheel, are generally regarded as identical. The experiment which has been going on for centuries in the little Belgian town appears to satisfy all the requirements of a crucial experiment; and it is supposed that it furnishes in its results a demonstration of the worth or worthlessness of the family system of treatment. Friends and foes have long

* It seldom happens that any portion of our lunacy administration is discussed in detail by foreign writers. As such discussions when they do take place ought to be specially valuable to the readers of this Journal, it has been thought a translation in full of this interesting paper would prove acceptable. The original appeared in the *Archiv. für Psychiatrie*, V Bd., 1 Heft, 1874.
—Tr.