

shortly before death, there was nothing observed during life to indicate any unusual condition of the encephalon. Neither the motor nor sensory systems were affected, and there is no reason to suppose that the mental symptoms were dependent on the presence of the tumour. During the time she was under observation she was suffering from phthisis. Mentally she was weak, melancholic and suspicious. She imagined she was under some supernatural influence, and often refused her food from the belief that it was poisoned. The special senses were not affected. As is the case with most encephalic tumours, it did not involve the brain substance proper.

OCCASIONAL NOTES OF THE QUARTER.

American Asylums.

We have received from Dr. Wilbur the copy of a paper on the "Governmental Supervision of the Insane," read by him at the Annual Meeting of the American Social Science Association. In this paper he strongly advocates a systematic governmental supervision of the asylums of the United States, similar to that which is carried out by the Commissioners in Lunacy in this country. It appears that desultory efforts have been made in some States to establish such a supervision, but not very successfully, for the Superintendents of Asylums have not yet seen the necessity of other inspection than self-inspection. This is what Dr. Wilbur says—

The only opposition that has been made to the project has come from parties directly connected with the management of insane asylums. For years they have placed themselves in opposition to a public need and a public want. Banded in an association, known as the American Association of Superintendents of Insane Asylums, a close corporation that excludes from fellowship any assistant medical officer of however large experience or faithful service, it not only assumes to dictate to legislative bodies what laws are necessary in the case of the insane, but claims for a small class of medical specialists the sole privilege of the interpretation and application of those laws. In fact, it rules the judges out of the court, except to give authority and judicial voice to the opinions of the medical expert. It assumes the prerogative of framing "a code of principles of management to secure the individual good of the insane and the highest public interest." It claims authority in all questions "re-

lating to proper location, water supply, general character of hospital; number to be treated, material for construction, arrangement of building for classification, dormitories, service-rooms, lighting, drainage, heating and ventilation, and all other details necessary in such institutions," also "all questions relating to organization and government in all their details." They have brought the whole influence of this association to bear upon the legislatures of the different states to prevent any legislative action that should in any wise interfere with their exclusively individual control of the several asylums with which they are connected, or be at variance with what, in their estimation, is the proper mode of management for the insane.

We do not of course endorse this accusation, for we are not in a position to do so; but we may take this occasion to say that the exclusion of assistant medical officers from fellowship in the Association of Superintendents has always seemed to us to be as unwarrantable as we are sure it is unwise. There can be no question that the Association is seriously the sufferer by the absence of young and energetic workers who would bring into it enthusiasm of spirit and freshness of views; and no question, moreover, that such exclusion is contrary to the fundamental principle of a truly scientific association. Science knows no difference between principal and subordinate; all workers are equal in its courts; and it gladly welcomes light, from whatever quarter it comes. American Superintendents might do well to take a leaf out of our book. The *Medico-Psychological Association* began in the union of a few medical officers of asylums, but it now includes among its members not only most of the medical officers of asylums, superintendents and assistants, but some laymen, and a considerable number of medical men who are not connected with asylums; and it has grown in usefulness, prosperity and vigour, in proportion as it has extended its roots. Exclusiveness means the deliberate shutting out of instruction, and can have but one result—lack of knowledge.

But let us return to Dr. Wilbur's indictment—

A law is passed for the establishment of a new insane hospital. A local board of Trustees is appointed; or at all events, a board of Trustees, of which a local interest soon acquires a paramount control, and to these is entrusted the expenditure of the public money in the purchase of land and the erection of buildings. And this very fact of local selection makes men appointed to represent the state and its interests lose sight of the object of their appointment. From their proximity to the institution, they become, *de facto*, identified with its

interests and the champions of its policy and its existing administration ; as of a party distinct from the state. * * * *

With what results, the customs that prevail in our insane asylums will show. At certain periods the trustees, or a small portion of them, make their visits ; usually once in three months. In company with the medical officer, they stroll through the wards or a part of the wards. Their coming is known ; the wards are scrubbed ; the ventilating fans are set in motion on these occasions at least ; the patients are in order and the attendants all on duty. It is a dress parade, in which the trustees are the inspecting officers.

The Superintendent, a man selected often through social or political considerations or some species of favoritism, and not by any form of competitive examination, as is the case abroad, is loaded down with an accumulation of duties and responsibilities, beyond the capacity of one man in a thousand.

Besides these home duties, he is, unfortunately, a frequent witness in the courts, and often has a large and lucrative consultation practice through a wide territory ; both of which matters divert his time and his thoughts from the special work, where he is needed and for which he was chosen.

The evil consequences he traces in neglect and abuses on the part of subordinates, unkind treatment of patients, the hushing up of scandals, no prosecution of wrong-doers, and extravagant expenditure. The Superintendents become timid and over cautious.

They are afraid to run any risks, even small ones, and when the welfare and comfort of their patients might possibly be much promoted thereby. Thus, they feel safer when the patients are, most of the time, under lock and key in the wards or airing-courts. And so the patients are not allowed that degree of freedom that is found practicable in other lands. They are not trusted to labour in various occupations, which is the great feature and art of management of the insane in European countries. There are patients, physically strong and well, in our asylums who are scarcely trusted out of doors from one year's end to another ; and, prevailing, the patients of American asylums are very little in the open air. Dr. Bucknill, the English Commissioner of Lunacy, who visited this country a year ago, noticed this fact and comments upon it in an account of his visit to American asylums.*

* NOTE.—Dr. Gray, the Superintendent of the Asylum at Utica, and also editor of the "Journal of Insanity," has a note upon this criticism of Dr. Bucknill, which reads thus : "Dr. Bucknill visited Utica on the 22d, 23d and 24th of May. On Saturday, the 22d, the records of the asylum show that out of a population of 287 men patients, 233 were out of doors, and on Monday, the 24th, 252." This is hardly an ingenuous statement. The days referred to were exceptionally fine ones. They were in a sense parade days, for on the

The advantages of independent inspection of lunatic asylums by authorities who are not concerned in their management are so obvious, its necessity so palpable, that we cannot conceive any real argument against it; and we heartily concur with Dr. Wilbur in his wish to establish systematic government supervision, while leaving to him the entire responsibility for his indictment of the management of American asylums.

In the main hall of the asylum at Washington stands an electric clock, which Dr. Nichols is fond of showing to visitors. By ingenious devices of mechanism, it registers on a sheet of paper, for the information of the officers, the precise movements of the night watchman as he makes his periodical rounds through the wards, thus securing his fidelity.

On its face Dr. N. has placed the old Latin motto, "*Quis custodiet ipsos custodes?*"—who shall keep the very keepers? Would it not be well to emblazon this same motto on the door-posts of this and all other American asylums? Is it not wise for the state governments to act upon the principle thus quaintly stated, and establish a proper supervision of the very care-takers of all confined in such institutions?

A Priestly Exorcist.

The "Times" of November 2nd contains the following report from its Barcelona correspondent, who wrote under date October 21st:—

"I will briefly describe what has just happened in this wealthy city. About the 14th or 15th of this present month of October it was privately announced, chiefly to the faithful women of the congregation which regularly throngs the Church of the Holy Spirit in the street of San Francisco, that a young woman of 17 or 18 years of age of the lower class, having long been afflicted with 'a hatred of holy things'—the poor girl probably was subject to epileptic fits, and cried out became convulsed when she heard the noise of the organ in church—the senior priest of the church above mentioned would cure her of her disease, or, to use that gentleman's own language, 'Avaunt,

22nd the Association of Superintendents of Insane Asylums were making a visit to the Utica institution, and some of them, with Dr. Bucknill, remained over the 24th. Out of deference to the visitors, perhaps, an unusual effort was made to get the patients out. Nevertheless, in spite of this note, the fact is patent to all who have had the opportunity of comparing the customs of American with British institutions, that the former are much less in the open air than the latter. In Great Britain they not only get the patients out of doors, but keep them out.