The Edinburgh teaching of Psychology.

- I. QUESTIONS FOR THE WRITTEN EXAMINATION OF DR. LAYCOCK'S CLASS OF MENTAL PSYCHOLOGY AND MENTAL DISEASES IN THE UNIVERSITY OF EDINBURGH PROPOUNDED BY THE COMMISSIONERS IN LUNACY FOR SCOTLAND AND DR. LAYCOCK CONJOINTLY. (July, 1863.)
 - 1. Give a synopsis and brief description of the different forms of Mania.
- 2. State the physiognomical aspect, symptoms, and method of treatment of Acute Melancholia.
- 3. Discriminate between illusions, hallucinations and delusions, and illustrate by examples the leading varieties of each of these.

4. What are the common cerebral lesions found after death from general paralysis?

5. When may insanity be regarded as incurable?

- 6. Under what conditions would you feed the insane artificially? Describe the process followed, and state the reasons for preferring any particular process.
- cular process.
 7. What results may be expected from the efforts now being made for the education of idiots and imbeciles?
- 8. State how a practitioner should proceed in diagnosing the mental condition of a person presumed to be insane and what precautions are needed in forming and expressing an opinion.

The Practical Examination consisted in an examination of a patient in an Asylum by the candidate, and a written commentary.

II. DR. LAYCOCK'S ADDRESS AT THE CONCLUSION OF THIS COURSE OF LECTURES.

Dr. Laycock in his address observed that it was matter of congratulation for all those who took an interest in the practical applications of mental science to observe how rapid had been its progress of late years. When the present state of our knowledge of mental diseases and defects is compared with what it was a quarter of a century ago, the advance is surprising. All kinds of metaphysical questions were then discussed which it was impossible in the nature of things to solve. To have established the uselessness of speculation, and to have the proposition so generally admitted, is no small gain to mental science, because it tends to restrict our inquiries to what it is possible for man to know as to his mental nature, and in this way to promote the growth of positive as contrasted with speculative knowledge. A few well-established principles thoroughly understood will go far to dispel many errors of speculation, and therewith obviate many mistakes in practice, as well on the part of the medical practitioner as of the other learned professions. There cannot be a doubt that within the last twelve months at least one wretched man has been hung in England for a homicide committed under delusions originating in disorder of the brain; and there is reason to think that within that period more than one insane person has thus unjustly and mercilessly suffered the last penalty of the law. So long as imbecility and insanity are confounded with crime, justice cannot be done either to the public or to individuals. It is quite certain that many criminals are being continually let loose on society who have no power whatever of self-control, and are neither more nor less than incurable imbeciles, and who are utterly wanting in those mental qualities which characterise man as a social animal. I dwelt at length in the earlier lectures of

the course on all those forms of mental disease and defects which came under the ambiguous and somewhat absurd designation of moral insanity, and thus perhaps restricted too much our subsequent inquiries into disorders and defects of the higher faculties. A thorough knowledge, however, of the appetites and desires and affections, whether they be healthy or morbid, is an excellent introduction to the study of the higher faculties, because the same general principles are applicable in reality to all man's mental states; and I took particular care to explain to you the nature of a great variety of cases of disorder of the intellect which came under our notice at Milnholm Asylum. We have had every assistance from Dr. Sadlier at Milnholm, and from Dr. Rorie at Dundee, in these practical studies, and are due to both these gentlemen our warmest thanks. (Applause.) The experience of every year convinces me, as it will, I am sure, convince you, that the more it is practicable to treat the insane as if they were sane, the better for all parties. From this point of view, the visits of a class of students to an asylum are much more beneficial than injurious, if injurious at all; and I am satisfied it would greatly conduce to the better knowledge of insanity, and the better treatment of the insane, if the practical study of mental disorders and defects was not limited to the medical profession, but was included in the course of training of other professions. It seems to me that a knowledge of healthy mental action can only be considered at all complete when that of morbid mental states is added. We have to thank Dr. Gilchrist, of the Royal Crichton Asylum, for kindly encouraging your studies by offering a prize for competition by members of the class. There have been six competitors, and the prize and first certificate of proficiency have been awarded by the Commissioners in Lunacy, conjointly with me, to Mr. John Millar. It has given me much gratification to learn from Drs. Coxe and Browne that both the written answers to questions and the reports on cases in general of the class are most creditable to the competing candidates.

The Royal Hospital of Bethlehem.

I. THE ANNUAL REPORT OF BETHLEHEM HOSPITAL.

"So much attention has recently been directed to the often-raised question of moving this ancient charity into the country, and then locating St. Thomas's Hospital on its site, that the annual account of the proceedings at Bethlehem has almost been overlooked. Notwithstanding, a brief summary of the facts contained in the last Report must prove interesting to the profession.

"During the year embraced by the present report, 163 curable patients were admitted; 80 discharged cured; 48 left uncured; 10 sent out for special reasons; and 16 died, of whom 6 sank through disease of the heart or lungs, while 4 cases ended fatally from paralysis. Regarding the aggregate recoveries, the report, however, states their number was not less than the last ten years' average; and as the ratio ranged actually under fifty per cent. on the admissions, that acknowledgment shows the proportion of cures was less than that often recorded at other establishments for the insane, where a selection of cases placed under treatment does not prevail like that pursued at the important metropolitan institution at Southwark.

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"In concluding this short notice of the Bethlehem Hospital Annual Report, one remark cannot but suggest itself—namely, that seeing this richly endowed charity, which, according to the official document now passed under review, possesses a net annual income of £19,816 10s. 3d., only cured 80 insane patients during the past year, such results seem rather small from so