

usually falls to him to deal with it at that early stage of the disease when there is always the best hope (and sometimes the only hope) of effecting a cure. Every medical man, again, is frequently called upon to sign a certificate under which an insane person is sent to an asylum and confined there; it is most desirable, therefore, that he should be fully informed, not only of the phenomena of the disease, so that his certificate may be just and valid, but of the legal bearings of the certificate, and of the legal conditions under which he gives it. Nor is it less desirable that every medical man should be acquainted with the legal enactments with regard to the treatment in a private house of an insane patient whom it is not thought necessary to send to an asylum. Lastly, every medical man may have to give evidence in a court of justice with regard to soundness or unsoundness of mind when the gravest consequences depend upon the determination of the question at issue. He is supposed, by virtue of his profession, to be capable of giving scientific evidence on such point; and yet, as things are at present, a knowledge of insanity forms no part of his professional education. It is quite possible that he may have to give evidence in the matter of the life and death of an insane prisoner, when it is the first case of insanity which he has seen in his life.

We deem it, therefore, for every reason, to be most desirable, both for the credit of the medical profession and the welfare of the community, that the University insist upon an adequate knowledge of Mental Diseases in all those whom it sends out to the world stamped with its degree as highly qualified practitioners. Effectually to do this would require not less than a distinct paper at the Second M.B. Pass Examination.

After considerable discussion, it was resolved, on the motion of Dr. Maudsley, seconded by Dr. Sibson—

*“That it is desirable that a Certificate of having attended a Course of Clinical Instruction in Mental Diseases should be required from all Candidates for the Second M.B. Pass Examination, and that the examination should necessarily embrace the subject of insanity.*

*“That Dr. Maudsley and Dr. Sibson be requested to report this resolution to the Annual Committee.”*

(Signed) W. SHÆEN, M.A., *Clerk.*

#### *Moral Insanity.*

THE suicide of the murderer George Victor Townley has recalled public attention, not only to the history of his crime, but to the strength or weakness of the views held by certain medical authorities on what is now called “Moral Insanity.” It is, we believe, argued that the tragic end of this criminal confirms the judgment of those

experts on whose opinions the Derby justices acted in giving a certificate of his insanity. We are told that the sequel of the case proves the thorough consistency of Townley's mental history. He committed an outrageous murder because he was devoid of all moral sense and recognised no moral responsibility. He utterly disbelieved in a future state of rewards and punishments, and he finally dealt with his own life much as he had dealt with his sweetheart's life. It was a trifle which he might retain or fling away under no sense of duty to himself, to society, or to his Maker. This, as we are told, or shall be told, is a consistent life. It is ruled by madness throughout. Beginning with murder, it logically concludes with suicide. No moral convictions, no sense of responsibility—this is madness. We certainly agree with this estimate of the case so far as to be convinced that Townley's career is thoroughly consistent with itself. We should expect that such a character would end in self-murder. A man who murders his neighbour is very likely indeed to murder himself. One Judas Iscariot ran through precisely the same moral course; and it is quite possible that, under the psychological manipulation of medical authorities, he also would have been found to be morally insane. For all practical purposes, he too committed murder—murder of the basest and most irrational kind—and ended in suicide. The conclusion, therefore, must be that M. Renan's distinguished client was, like Townley, "morally insane," and therefore irresponsible.

We have no objection theoretically to all this talk. It is a mere question of words, and saves the trouble of thought. If experts choose to say that all very great criminals and scoundrels of extravagant wickedness are *ipso facto* morally insane, because their vices and atrocious deeds exceed the ordinary dimensions of everyday sin, we have no particular objection to their saying so. All that comes of it is to deprive the word "insanity" of any real meaning. When, however, we come to a practical conclusion, we are at issue with the ingenious practitioners who hold this doctrine of moral insanity. We would hang the victim of moral insanity; they would not. We should not seriously complain if Borgia, or Catiline, or Nero—the last of whom likewise consummated every vice and crime by a blundering attempt at suicide—were called morally insane. The phrase appears to be only used as convertible with intensely wicked; and if, contrary to the custom of ordinary speech, "insane" only means very wicked, anybody may in this way misuse language as much as he pleases, for aught we care. This is the fallacy that requires to be exposed. Insanity, as hitherto used by articulately speaking men, is inconsistent with responsibility; but, in the gabble of medical science, irresponsibility is proved by the mere fact of extraordinary immorality. If this is to be so, it will certainly simplify the criminal code. It only requires a new chart and scale of wickedness. Henceforth, the greater the knave, the less his guilt. A

moderate criminal, who has only reached to the point of the moral thermometer registered temperate, is not insane, and may therefore be punished. Let his crime rise a few degrees in intensity, and he becomes irresponsible. If his moral perceptions are merely hazy and indistinct, we may fine, flog, and imprison him ; but when, by a long course of indulgence in vice, and after a sustained absence of all checks and restraints on his passions, he has contrived to obliterate all moral perceptions, and is thoroughly brutalised, he is an interesting victim of obscure mental disease, whom it would be as unjust to punish for the consequences of the state of his brain as it would be to institute a criminal prosecution against a victim of rheumatic fever. We shall, of course, be told that this way of putting it is very unscientific, and that, unless we have made psychological analysis a matter of profound study, we have no right to express ourselves in this coarse and crude manner. Casual observers are not fair or adequate judges of what does or does not constitute lunacy. It is only an expert who is possessed of the mysterious solvent by which the subtle elements of insanity disengage themselves, and are revealed to the acute professional sense. There is this amount of truth in such language, that experience does, of course, give professional men superior skill in forcing real lunatics to expose their delusions. But in cases such as that of Townley nothing of the sort occurs. The expert has no advantage over the ordinary observer. All that the most acute observer, after the most diligent probing, could extract from him was that he was totally deficient in the sense of moral responsibility ; but this fact was equally patent to the most unscientific observer. It wanted no M.D. to bring out the fact ; the only question is as to the practical value of the fact. The difference is, that the medical authorities assume that the absence of the sense of responsibility on the patient's—or, as we should say, criminal's—part towards society, implies the abeyance of responsibility on the part of society towards the criminal. It means that, when once a man says "I have no duties," therefore he has none. It means that it is enough for a scoundrel to deny that he recognises law, for law to retire from the dispute and decline the jurisdiction which is thus impudently contested. And when we are told that Townley's was an obscure case, and his disease was very subtle, and required the most refined and delicate diagnosis to detect it, the answer is that there was never anything plainer. Townley avowed throughout his moral, or immoral, code with the most patent and honest frankness :—"I am not responsible for my actions ; and, therefore, I do what I please or what I must." To say this, we are told, is insanity ; to say this, we reply, is most insolent wickedness, and if you act upon it we mean to hang you.

We do not suppose that the scientific advocates of Townley's original insanity really think their view strengthened by the pro-

ceedings at the coroner's inquest. To bring in a verdict of unsound mind in a case of suicide is a matter of course, and in this particular case the jury acted under pressure throughout. The coroner, Dr. Lankester, is obviously a disciple of the school whose views we have been combating; and this is an objection to the office being held by a professional person. Such a person has usually foregone and private views to support. The surgeon of the gaol had no reason to pronounce on Townley's insanity. One test of insanity was certainly wanting, for the size of the brain he pronounced to be normal; but he was immediately informed by the coroner that organic disease of the brain is no proof of insanity. Insane persons often have no disease of the brain, and disease of the brain is often present in sane persons. Dr. Lankester, therefore, discards all the physical and material tests of insanity; what he looks for is "seeds of insanity," invisible tokens and inscrutable vague suspicions which are incapable of proof; he detects insanity by private and mysterious tests only known to the adepts, but quite perceptible to them even in cases "in which there are no appearances of insanity." To be sure, Mr. Bradley could find none in this case, though he was naturally on the lookout for them. The chaplain, however, was more malleable. The jury had been warned by the coroner to dismiss from their minds all the history of Townley's case; but no such warning was addressed to the chaplain. He therefore at once confines himself to the previous history of the deceased, and finding nothing of madness either in the past or present, as far as it was open to him, he argues backwards from Townley's death to his life. Certainly, from all that he had observed of Townley for twelve months, he should have considered him a sane man, but the suicide leads him to a different conclusion. Townley "was perfectly insensible to the sin of the act which he committed. He could not see that it was sin. He was morally insane." And, as a further evidence of Townley's insanity, the reverend gentleman adverted to the letter written by the murderer to his mother—a letter which, to the minds of those who do not believe in "moral insanity," is only a tedious farrago of coarse, heartless, and unfeeling nonsense, and plainly betrays, what there is no question of, that the writer acknowledged no moral obligations to God or man.

And here we may take leave of Victor Townley. His whole case has seriously compromised the administration of the law. But the evil has been at least partially retrieved. The mistake under which a certificate of his insanity was originally procured cannot be repeated, for an Act of Parliament has prevented its recurrence. The criminal lunatic was, to the credit of medical science—after an investigation which reversed the opinion of the experts who prevailed at Derby—transformed into a felon; and, though Townley escaped the consequences of his crime, he died a convicted murderer. This

is something. It is not the first case in which, having been jockeyed into a miscarriage of justice, the Home Office declined to carry out the righteous decision of the law, and, by an inconsistency perhaps in some degree pardonable, refused to hang as vile a murderer as ever lived, only because the immediate execution of his sentence had been prevented by a series of successful intrigues. But Victor Townley's fate is hardly encouraging to the scientific gentlemen who preach the doctrine of moral insanity. Penal servitude for life, though alleviated by the perusal of 'Gil Blas,' 'Silvio Pellico,' and an opportunity of practising in German calligraphy, was found to be a punishment so intolerable that Townley preferred suicide to his experiences of Pentonville and his prospects of Portland. This life-history will scarcely encourage amateur atheists—even though, like Townley, they may be enabled to quote the traditionary records of family insanity in the case of their great-grandmother's aunt's second cousin twice-removed—to murder their sweethearts and themselves. Fanatics may, if they please, still continue to console themselves with the private opinion that disbelief in God and in a future state of rewards and punishments is a sufficient proof of lunacy, even though this doctrine would have consigned Auguste Comte to a hospital. And fools who are puzzled by the presence and language of an audacious criminal towering above ordinary villany, may take refuge in the plea of moral insanity, careless or ignorant that the excuse might equally have availed for Palmer and Rush. But at present the law of England has not been changed since it was laid down in M'Naghten's case; and the opinions of fools and fanatics on the subject will not, we are persuaded, be fruitful in any practical results on the guardians and makers of the law. It has never been proved, because it never can be proved, that "moral insanity" is more than a mischievous juggle of words; and the world's common sense, and the necessities of social security, are likely to protect us against any inconvenient consequences arising from the theoretical admission of an ideal possibility. Experts are free to hold what opinions they think proper, so long as we decline to allow to the "morally insane" freedom to commit unpunished murder, rape, or robbery.—*The Saturday Review*, February 25.

*The Royal Hospital of Bethlehem and the Charity Commissioners.*

(See 'Journal of Mental Science,' January, 1865.)

The following Report has been sent to us for publication :—

*Report of the Committee of the Royal Hospitals of Bridewell and Bethlehem Hospital, submitted by F. O. Martin, Esq., Inspector of Charities, as worthy of the consideration of the Governors, and on the Observations of Drs. Hood and*