PART II.-REVIEWS.

Forty-fifth Report of the Commissioners in Lunacy. June, 1891.

The forty-fifth Report of the Commissioners in Lunacy gives an interesting account of official lunacy matters during the year 1890.

On the 1st January of that year there were under official cognizance in England and Wales 86,067 persons of unsound mind, who had increased on the 1st of January last to 86,795. These patients were distributed as shown in table on p. 574.

This increase of 728 patients, of whom 105 were of the private and 623 of the pauper class, was greatly below the average of previous years, and at first sight it might have been assumed that this fact indicated a falling-off in the number of cases of occurring insanity.

Unfortunately this seems to be by no means the case, but only to prove how unreliable bare statistics are in the absence of careful investigation.

If we refer to Table III. in the Report before us we find that the percentage of admissions to population has made a sudden bound upwards, and that, whereas in the previous year it was not greater than in 1881, in the year 1890 it exceeded that of any year since 1869. Meanwhile the proportion of reported insane persons to population has not increased, but slightly diminished. It is, therefore, probable that the increased number of admissions has been somehow due to the operation of the new Lunacy Act rather than to any actual increase of occurring insanity.

This is rendered the more probable by the facts that a revision of classification under that Act has caused an apparent reduction of 867 in the number of the insane in workhouses, and that the increase in the asylum pauper admissions (deducting transfers) over those of 1889 was 1,153, or an excess of 858 over the increase of 1889.

The remarks and explanations of the Commissioners upon these points are interesting, and may well be given here in full:

"The large reduction of 867 in the number of the insane in work-houses on the 1st of January last, as compared with the 1st of January, 1890, is a feature in this year's statistics which calls for special notice.

It may, we think, be in some measure accounted for by the revision in the classification of these workhouse inmates due to the operation of the Lunacy Act, 1890.

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W M. theiler of an I.A Tannes 1801		PRIVATE.			PAUPER.			CRIMINAL.			TOTAL.	
Where praintained on 18t skillary, 1091.	Ę,	pi,	Fi	K.	pi	Ei	ĸ	ř.	Ħ	ж.	£i,	Ei
In County and Borough Asylums	767	553	977	23,928	29,463	53,391	8	15	83	24,420	30,031	54,451
In Registered Hospitals	1,785	1,661	3,446	147	\$	241	-	:	-	1,933	1,755	3,688
In Licensed Houses:—		-										
Metropolitan	825	818	1,644	337	547	884	:	:	:	1,162	1,366	2,528
Provincial	8	812	1,415	358	307	299	60	:	**	861	1,122	1,983
In Naval and Military Hospitals, and Royal India	263	16	278	:	:	:	:	:	:	. 262	16	278
In Criminal Lunatic Asylum (Broadmoor)	:	:	:	:	:	:	474	150	624	474	150	624
In Workhouses :												
Ordinary Workhouses	:	:	:	4,865	6,394	11,256	:	:	:	4,865	6,394	11,259
Metropolitan District Asylums	:	:	:	2,684	3,047	5,731	:	:	:	2,684	3,047	5,731
Private Single Patients	182	358	440	:	:	:	:	:	:	182	828	440
Out-door Paupers	:	:	:	2,319	3,494	5,813	:	:	:	2,319	3,494	5,813
Total	4,078	4,123	8,200	34,538	43,346	77,884	546	165	111	39,162	47,633	86,796

In many instances, persons suffering from mild forms of senile dementia, or from slight weakness of mind associated with epilepsy, and who had previously been classed as of unsound mind, were, last year, removed from the list, though often continuing to receive the same extra supervision in special wards; and we have seldom had to find fault with such an altered classification and arrangement, as long as the liberty of the individuals was not unduly interfered with.

The necessity, under the present Lunacy Act, of procuring, for every person admitted and detained in workhouses after the 1st of May, 1890, a magistrate's order supported by two certificates, one by the medical officer of the workhouse, the other by an independent medical man, has, by the extra trouble and expense involved, probably restricted to some extent the registration of new cases; and we have not infrequently after our visits to workhouses to report non-compliance with the law in this respect.

In connection, however, with this reduction in the insane registered in workhouses on the 1st January last, we have to mention the important fact that the reduction above referred to has been accompanied, during the year 1890, by a large augmentation of the usual annual increase of pauper admissions into asylums.

In the year 1889 the increase in the asylum pauper admissions (deducting "transfers") over those of 1888 was 295, whilst in 1890 the increase in these admissions over those of 1889 was 1,153, an excess of 858.

In some workhouses the pressure for accommodation for the ordinary sick, coupled probably with the temptation of the Parliamentary grant of 4s. per head per week received for every patient maintained in an asylum, appears from time to time to have induced the guardians to acquire the requisite room, by sending some of the imbecile residents to an asylum rather than by building additional infirmary accommodation at the workhouse. This course has always been deprecated by us as calculated to cast an unnecessary financial burden upon County Councils and their asylum committees, but it cannot be prevented if the persons to be removed are certified to be of unsound mind, and if the other usual legal formalities are complied with."

The results of treatment during the year 1890 were not quite so satisfactory as usual.

The recovery rate was 38.59 per cent. on the admissions, against 38.81 for 1889, and 39.57 for the last ten years.

The death-rate was 10.33 per cent. on the daily average numbers resident as compared with 9.81 for 1889, and 9.73 for the last ten years.

The recoveries and deaths in the several classes of asylum and in private care, excluding idiot asylums, in the year under review, and in the last decennial period, have been as follows:—

	YEAR.	•		. 80	County and Borough Asylums.	qgno	Begin Idiot	Begistered Hospitals (excluding Idiot Establishments).	pitals	Metropolii Idiot	Metropolitan Licensed Houses (excluding Idiot Establishments).	d Houses		Provincial Licensed Houses (excluding Idiot Establishments).	Houses ents).
				Males.	Females.	Total.	Males.	Females. Total.	Total.	Males.	Males. Females.	Total.	Males.	Males. Females.	Total.
ERIES.	0881	÷	:	34.63	82.23	38.65	41.03	60.67	79.97	30.83	34.77	83.16	32.62	41.78	38.30
BECOL	10 years	i	:	35.31	76.27	39.76	39.68	52-07	46.61	29.74	40.23	35.30	30.63	40.73	36.43
.aht	1890	:	:	12.66	8.76	10.21	8.83	2.46	6-91	15.66	11-72	13.48	13:02	6.93	8.51
VEG	10 years	:	:	18-11	8.21	26.6	00-6	4.63	6.56	13.85	8-97	11:24	10.12	7.21	8.46

	Į K	Ував.			Naval and Boyal	Naval and Military Hospitals, and Boyal India Asylum.	Iospitals,	Gr.	Oriminal Asylum (Broadmoor).	un .	Private	Private Single Patients.	tients.	Idiot	TOTAL (excluding Idiot Establishments).	ients).
					Males.	Females.	Total.	Males.	Males. Females.	Total.	Males.	Females.	Total.	Males.	Males. Females.	Total.
ERIES.	2 1890	:	:	:	47.93	i	47.93	13-95	28-57	17.54	13.50	22.73	19-13	34.77	42.08	38.29
BECOA	10 years	ars	÷	:	57.87	i	57.87	9-36	19.84	11-81	11-90	16:38	14.39	35.24	43.69	39.57
.eht) 1890	:	i	:	6.73	21.06	7.78	62.3	1.99	4.49	7-65	6.93	1.33	12.40	8-62	10-33
AEG	l 10 years	ars	:	:	6.03	4.18	5-91	3.68	2-27	3 30	6 03	6.91	5.96	11.76	8.03	9.73

There is still no table in this Report showing the causes of death, but it appears that fourteen were from suicide in asylums and four from suffocation during epileptic fits. In the Report the number of suicides is given as 18, but in four of them the act was committed either before admission or after discharge on leave, and they cannot, therefore, be properly regarded as having occurred in asylums. The number, although, of course, far too large, is extremely small when it is remembered that the percentage of persons who are admitted into asylums with a suicidal disposition is very considerable, and that the modern system of treatment, which adds so greatly to the comfort and happiness of the patients, necessarily exposes them to the dangers which attend upon increased liberty and a less irksome surveillance.

In 76.6 per cent. of the deaths post-mortem examinations were made.

The average weekly cost of maintaining the patients in County and Borough Asylums during the year ended 31st March, 1891, was as follows:—

	s.	d.
In County Asylums	8	7 8
In Borough Asylums		
In both taken together		

The following are the details of the average weekly cost:-

•									Cou Asylu			ugh ums.
Provisions (including Clothing Salaries and wages Nece-saries (e.g., fuel Surgery and dispensa Wines, spirits, porter Charged to Maintena Furniture and bedd Garden and farm Miscellaneous	iigh gh ry nce A	t, was	 hing,		7 diet)				5. 3 0 2 1 0 0	d. 650 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8. 3 0 2 1 1 0 0	d. 755 88 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Less monies received sive of those consu	for a med i	rticles, n the .	good Asylu	ls, and m)	produ 		old (ex	olu-	8	10 ‡ 3 ‡	10	4½ 3
Total average weekly	cost	per he	ad			•••	•••	•••	8	78	10	11

The Commissioners report favourably of the condition and management of the various classes of asylums, and they make

the following very pertinent public declaration on the great question of pensions, which we gladly reproduce:—

"The question of granting superannuation allowances to asylum officials has recently, we believe, engaged the attention of Visiting Committees and County Councils, and our opinion upon it has more than once been sought. We have expressed ourselves in a sense favourable to the granting of such allowances; and we think it may be useful that we should in this Report give a wider publicity to that opinion, with some of our reasons for entertain-

ing it

The Lunatic Asylums Act, 1853, Section 57, and the Lunacy Acts Amendment Act, 1862, enabled Committees of Visitors of Asylums to grant superannuation allowances to officers and servants disabled by sickness, age, or infirmity, or who had attained the age of 50, and had served at least 15 years. The grant, however, required to be confirmed by the Justices in Quarter or General Sessions. The power was permissive, and its exercise wholly within the discretion of the Committee, but presumably it was intended by the Legislature to be exercised as the rule, not exceptionally. The Lunacy Act, 1890 (which repealed the above Acts), by Section 280 re-enacted the power in question, but, as a consequence of the change in local government, transferred the confirmation of the allowance to the County Council.

It is obviously of the first importance to the welfare of the insane to attract well qualified persons to the service of the asylums, and to retain them therein when, by the experience they have gained, their service has become valuable. This can only be done by offering adequate remuneration; economy must, no doubt, be kept in view, but efficiency must not be sacrificed to it.

The question then arises as to the best form of remuneration. If it is by salary or wages only, without prospect of pension, salaries and wages must be on a higher scale, and it may be doubtful if any actual money saving will be effected; but if it should, it will be at the risk of inefficient service due to the retention of office when the power to discharge its duties has become impaired.

This, in our opinion, is not an imaginary risk; and, however desirable reasonable length of service may be, a mode of remuneration which renders the service liable to such a contingency is not

satisfactory.

Fair salaries or wages, with the prospect of liberal pensions after disablement or reasonable length of service, offer, we think, the most influential inducements to really suitable persons to enter asylum service, and to remain in it as a permanent occupation.

With regard to the medical staff, it may be observed that the specialty offers no great prizes, while it demands for the satisfactory discharge of the duties and responsibilities it entails very considerable ability, great power of organization and administration, and varied knowledge. The work of a medical superintendent of an asylum is anxious, harassing, and not unattended by personal risk. His responsibility is unceasing, and few men can venture, without danger to health, to extend their tenure of the office beyond moderate limits. The work of the lower officials, who are much in contact with the insane, is also wearing, and not free from danger; while it calls for the exercise of qualities of intelligence, tact, and patience, which are by no means too common. No one who has spent the best years of his life in an asylum is likely, after retirement, to succeed in any other occupation; and if he has no pension to look forward to his outlook for the future will be a gloomy one, for experience, we think, shows that provision for old age would not often be made out of an income which, at the best, would be but moderate.

The system of moderate salaries with superannuation has had a fair trial in the past, and, we consider, with satisfactory results, and we would most strongly deprecate any departure from it in the future."

The whole Report affords continued assurance that there is no falling off in the efficiency and energy with which the duties of the Lunacy Board are discharged. They must have been severely taxed by the operation of the new Lunacy Act, which, however, receives no more than a passing reference.

A Plea for the Scientific Study of Insanity. By J. BATTY TUKE, M.D., F.R.C.P.Ed. Edinburgh: Young, J. Pentland. 1891.

The question the author endeavours to answer is, Does the study of insanity occupy that position in the realm of medicine which it ought to occupy? A very pertinent inquiry. There is no such thing as standing still, and it is well to have any unwarranted self-satisfaction in our state of health shaken from time to time, so as to consider whether it is as good as it ought to be. In the present instance it is highly probable that benefit will arise from an honest searching of heart as to whether the special branch of medicine, known as Medical Psychology, is being cultivated as fully as it ought to be, and on the lines which modern science justly demands that it should be studied. To assert that all is done that can be done—that mental physicians, whether in or out of asylums, are