

management, and having the advantage of the experience of others, did put the crown to the edifice by advocating, adopting, and carrying out in successful practice the entire abolition of mechanical restraint. The honour of this achievement has never been denied him; it is only because he has claimed too much, and has repudiated obligations which, for his own sake, he would have done well to have acknowledged, that he has gained less than some may honestly think him entitled to. The spirit which inspired Pinel when he struck off the chains from the wretched lunatics of the Bicêtre, which was evinced by the benevolent Quakers in founding the Retreat at York, which animated the Governors of the Lincoln Asylum, and more especially their enlightened physician Dr. Charlesworth, is that which really instigated, and is still working in, the humane measures now universally sanctioned in the treatment of the insane. The non-restraint system adopted in the Lincoln Asylum was but one instance—certainly a most important, though, we trust, it may not be the final instance—of the realisation of that spirit in practice.

C. M.

The Edinburgh Review on the Non-Restraint Treatment of the Insane.

THE "Edinburgh Review" for April contains an able article on "Non-Restraint in the Treatment of the Insane." Taking under review, firstly, the memoir of Dr. Conolly, by Sir James Clark; and secondly, "Lunacy: its past and its present," by Mr. Gardiner Hill, the writer of the articles enters very fully into the subject. After dwelling upon and describing in detail some of the horrors, happily now past, in the treatment of the insane, the reviewer says—

"We confess that it is painful, and perhaps unnecessary, to trace back so far the misery the insane have undergone; and we should not have continued the sad story, were it not advisable to show that the judicious treatment of the insane is a progressive science, nobly developed by our fathers and contemporaries, but yet capable of a still wider extension by our sons, labouring in a season when the fair humanities give promise of sweeping away like a flood all the old ideas which, in a modified form, still surround asylum life."

Deeply painful as it undoubtedly is to recall and try to notice all this past history, it is well to be reminded that such horrors did exist, and, therefore, we think it not unnecessary to go carefully over the records of the past, remembering for our instruction and warning that the miseries described were countenanced, if not even advocated, by men not otherwise inhumane, but ignorant, and blinded by custom to a true sense of the enormities practised.

The reviewer having given some description of the horrors practised in the treatment of lunatics, at a time when they were even made a show of to the public at so much a head, fastened like dogs by chains to a wall, brings us by degrees to the dawn of a better day in the great work effected by Pinel in France, and carried on by Esquirol. In England, the founding of the York Retreat by the Quakers, entirely on principles of humane treatment, was the beginning of a better state of things, gradually leading on to the great era of the entire abolition of the use of restraint at the Lincoln Asylum, which was fully carried out by Mr. Gardiner Hill, with the cordial co-operation and support of Dr. Charlesworth. Thus we are brought down to the time when, inspired and instructed by these examples, the great work of reform was carried out by Dr. Conolly, at Hanwell, on a large scale, and in an asylum conspicuous from its nearness to London, being thus accessible to the visits not only of English physicians and superintendents, but to those of foreigners of all lands. We cannot do better than quote the words of the reviewer, who, after speaking of the work previously accomplished at Lincoln, says:—

“ But to Conolly belongs a still higher crown, not merely for his courage in carrying out a beneficent conception on a large scale and on a conspicuous theatre, but for his genius in expanding it. To him, hobbles and chains, handcuffs and muffs, were but material impediments that merely confined the limbs; to get rid of these he spent the best years of his life; but beyond these mechanical fetters he saw there were a hundred fetters to the spirit, which human sympathy, courage, and time only could remove.”

“ Perfect as was the experiment carried out at Lincoln Asylum, the remoteness of that institution from the great centre of life, and the want of authority in its author, would no doubt have prevented its acceptance for years by the physicians of the great county asylums so long wedded to old habits. It was for some time treated as the freak of an enthusiastic mind that would speedily go the way of all such new-fangled notions; and no doubt it would, had not an irre-

sistible impulse been given to it by the installation of Dr. Conolly at Hanwell, where, with a noble ardour, he at once set to work to carry out in the then largest asylum in the kingdom the lesson he had learned at Lincoln."

Some idea of the amount of difficulty and opposition encountered by these reformers can be conceived by those who have ever laboured to eradicate long established evils, and to inaugurate a new system. Gardiner Hill tells us how, within the asylum, all the attendants were against him, and only prevailed over by constant watching and superintendence; while, without, he was assailed by reproach and derision. Pinel, in his day, had been, and, later on, Conolly, in his, was no less doubted and opposed. Speaking of the immense anxiety and responsibility involved in the first carrying out of the new experiment at Hanwell, the writer observes:—

"Looking at the matter as we now do, so long after the practical process of the abolition of all means of personal restraint has been established, we cannot fairly estimate the anxiety of mind that must have oppressed Conolly when, having thrown away the fetters, he stood face to face with suicidal patients, whose great aim in life is to get rid of it. The enduring cunning of this class of patients in compassing their ends, their adroitness, their impulsive vigour, but too well known to him, must have been before him night and day. A single life lost at this moment of trial, and the whole superstructure would have crumbled to the dust. It unfortunately happened that during the second year of trial nine such cases were brought to Hanwell; many of them came in a raving condition, bound hand and foot; they were taken to the wards and then set free, whilst those who brought them fled in terror. Well might the resident physician, in the presence of such crucial tests of the faith that was in him, tremble for its success. Instead of rigid bonds to confine the patients' limbs, he had nothing to resort to but unceasing watchfulness and sympathy. These were to all the world but himself weak and impotent substitutes; but the event proved that he looked with larger eyes than his contemporaries, and his courage was responded to with the most complete success. The abolition of all personal restraint was soon found to have more than a temporary influence upon the patients. It modified the very types of insanity. Instead of calming, the patients' bonds only exasperated them, and their features, from their constant employment, settled into rigid expressions of rage and fury, that we are only familiar with in the prints of mad-house scenes in the old times—to wit, Hogarth's grim sketches, which seem almost to caricature human nature, even when exhibiting the most diabolical expressions."

The latter part of the article is devoted to an earnest protest against the constant enlargement of already overgrown asylums; and the writer urges the necessity of recognising in the time to come, that the full development of the non-restraint system will involve the releasing from asylums cases of a permanent but harmless description. The adoption of this course, he argues, will, while right and beneficial in itself, solve the great difficulty of how to provide accommodation in our present asylums, for acute cases.

In representing the evils that he considers have accompanied the increase in the size of many county asylums, the reviewer says :—

“ Towards the end of Dr. Conolly’s life, he was oppressed with many fears lest the advance which had been made should, through the selfishness and neglect of mankind, lose its impulse, and indeed be permitted to go back. The present age is certainly not less philanthropic than the one in which he carried out this great reform, but there are certain elements at work in asylum life that justify some of his apprehensions. The first and foremost of these is the gradual growth of the county asylums. Some of these have become so large that anything like individual treatment of the patients is quite out of the question. They have ceased to be houses for the cure of mental disease, and have subsided substantially into mere houses of detention. And not only have they outgrown their curative capabilities, but they have also degenerated from that high standard as houses of mercy and pity to which Conolly would have them raised. No one saw more clearly than that philanthropist the fact that the abolition of all mechanical restraint put the asylum physician at the mercy of his attendants. In place of the strait-waistcoat, which with all its faults acted without passion, he had to rely upon human force, liable to human weakness. To keep this in check the most careful supervision is absolutely necessary—a supervision on the part of the medical officers that is ludicrously inadequate, on account of their limited numbers. The result is, that as a rule the patients are at the mercy of the attendants. What that mercy is, let the inquests that have lately been held in asylums, on patients who have died through brutal ill-treatment at their hands, make the sad answer. We do not wish to be hard upon these ‘instruments of the physician’s will,’ as Conolly terms them; they are neither better nor worse than others in the same class of life; those only who know how trying are their duties, can fairly make sufficient excuses for them; but as a fact, the school they go to is not calculated to teach humanity to uneducated minds, and we more than fear they do not forget their instruction. What we say is no mere surmise. The difficulty of obtaining trustworthy attendants is one of the trials of the medical superintendent. Yet without their intelligent aid he works in the dark.”

The following remarks apply to the alleged unnecessary confinement of many harmless chronic cases in asylums :—

“ No doubt in the eyes of the public these establishments are the necessary places of detention of troops of violent madmen, too dangerous to be allowed outside the walls. It is difficult to get rid of old notions on the subject of lunatics. The popular idea is that they must all be raving and desperate, and the visitor to an asylum enters the wards with the expectation of meeting violent maniacs, whom it would be dangerous to approach. He has not taken many steps, however, before this illusion begins to vanish; he may even ask, ‘ where are the mad people?’ as he sees nothing but groups of patients seated round the fire or lolling about in a dreary sort of way, perfectly quiet, and only curious about the curiosity of the stranger. This is the class of people that form at least ninety per cent. of the inhabitants of our asylums, chronic and incurable cases that no treatment will ever improve, upon whom the elaborate and expensive classification and organisation is entirely thrown away, and to whom the palatial character of the building in which they are immured, not only affords no delight, but is perfectly detestable. It is this class of patients, beyond human help, that now choke up the public asylums throughout the land, converting them from houses of cure into mere prisons.”

And a little further on, in reference to the same subject:—

“ The most painful impression left on us after visiting a county asylum is the doleful wail from the patients as they pray for liberty from the medical attendant, all the more painful as we are aware that large numbers are needlessly detained. Of the ninety per cent. of chronic cases, at least thirty, by the admission of the medical superintendents, and probably nearer forty to less official views, are both harmless and quiet, capable of giving some little help in the world, and with a capacity for enjoyment. To deny them their liberty under these circumstances is both cruel and illegal, inasmuch as the certificate of lunacy, which is the authority for a patient’s detention, states that he must be ‘ a *proper* person to be detained and taken charge of,’ which certainly cannot be said of these poor harmless and incurable creatures.”

The writer refers to the colony at Gheel, and gives some description of the manner in which the domestic system of treatment is carried on there, and of the kind of supervision maintained :—

“ Ever since the existence of this singular community has been made known to the psychological world, in England, its teaching has

made the most profound impression upon it. It was not to be expected that our own superintendents of asylums, saturated with a vicious spirit of routine, which they unhappily term experience, would at once acknowledge the value of a plan so antagonistic to their own interests and to our own asylum practice, which they have been led to imagine as perfection itself; but in the discussions that are continually taking place on the advisability of a further extension of the non-restraint system, Gheel is continually cropping up like a ghost that cannot be laid."

We must close these extracts with one more passage, in which the writer, after discussing the reasons of the objections, and the obstacles to the adoption of more freedom in the treatment of the insane, says :—

" Hence the strange and futile objections that we see daily urged against a greater freedom in the treatment of the lunatic ; but that a sweeping change in that direction is one of the inevitable reforms we feel blowing towards us in the breath of every angry discussion among practical psychologists in this matter, is but too obvious. As we see wing after wing spreading, and story after story ascending, in every asylum throughout the country, we are reminded of the overgrown monastic system, which entangled so many interests and seemed so powerful that it could defy all change, but for that very reason toppled and fell by its own weight never to be renewed. Asylum life may not come to so sudden an end, but the longer its present unnatural and oppressive system, as regards the greater number of its inmates, is maintained, the greater will be the revolution when at last it arrives."

PART III.—PSYCHOLOGICAL RETROSPECT.

The Editor regrets much that he is compelled to defer a Report on American Psychological Medicine and other valuable material until the next number.