

the year 1875 no less than 1,000 persons became insane through drink, and were admitted into asylums, and maintained at a cost of 10s. 0½d. per head per week, or at the rate of £26,108 per annum.

To extend this further, and take the eleventh part of our asylum population in England and Wales as the proportion caused by intemperance, we have a total of 3,216 persons, maintained at a cost of about £83,964 per annum, exclusive of the cost of buildings. Great as these calculations show the influence of intemperance to be on insanity, it must not be forgotten that insanity is only *one* of the evil effects of intemperance. Could it be possible, by any means, to bring within the pale of statistical evidence the vast amount of sickness, pauperism, crime, and misery which is the result of drink, we should have such a startling account that thousands would join that band of earnest philanthropic workers who are striving by legislation or other means to eradicate this growing national curse.

Birmingham for the year 1875 shows a much larger proportion of cases of insanity from intemperance than any of the fifty-five asylums I have quoted, with the single exception of Broadmoor Criminal Asylum. Surely, this fact should urge our local legislators to be foremost in attempting to allay such an evil.

Thanking you for inserting this in your columns,

I am, Sir, your obedient Servant,

EDMUND B. WHITCOMBE, M.R.C.S.E.

GENERAL STATEMENT OF FIFTY-FIVE ASYLUMS.

The following table is a summary of the experience of the fifty-five asylums for the last five years:—

	Patients Admitted.			Caused by Intemperance.		
	M.	F.	Total.	M.	F.	Total.
1871	3,028	2,987	6,015	474	128	602
1872	2,820	3,041	5,861	414	154	568
1873	3,034	3,106	6,140	441	121	562
1874	3,544	3,416	6,960	541	141	682
1875	4,157	4,394	8,551	546	212	758
	16,583	16,944	32,527	2,416	756	3,172

The Prevention of Insanity.

In the Twenty-first Annual Report of the Trustees of the State Lunatic Hospital at Northampton, Massachusetts, we were attracted by a paragraph headed as above. Dr. Pliny Earle has taken to heart the complaint of some critic that superintendents of asylums do not give people any instruction as to the means of preventing insanity. In order to remove this reproach, he has made the following remarks,

which, though brief, he considers to be compendious, and to cover the whole ground. They may, he thinks, furnish texts, or the suggestion of texts, for several scores of essays or sermons, and "philanthropists, humanitarians, or ministers of the churches may thus make use of them, and disseminate the knowledge to a multifold extent." Here they are:—

Inasmuch as every person is liable to an attack of insanity, it is desirable that all should know by what means it may be avoided. Science has furnished no preventive, and the measures which are best calculated to act as such are those which characterise a life governed by prudence, moderation, and good judgment, and sound common sense. It is rational to conclude that the most certain method of preventing the attack of any disease is to preserve one's-self from the influence of the causes of that disease. He who would evade the intermittent fever must not expose himself to the malaria whence the intermittent originates. The sources of insanity are in the custom, habits, and other influences of civilised life. The necessary inference is, that if we would escape insanity, we must lead a life as near to nature as is possible amid all the surrounding artificialities of civilisation. Descending more nearly to particulars, the approximate causes of the disorder are those acts or agents which exhaust or depress the nervous power, and consequently debilitate the whole system. The man, then, who would secure immunity from insanity must either wholly avoid those acts or agents or preserve a constant watchfulness to prevent himself from being subjected to their operation to the extent of exhaustion or depression. He must be moderate in all things; curbing his appetites and passions; shielding himself, as far as possible, from the manifold causes of bodily disease; remembering that nature has been kindly mindful of her children in supplying them with an exhaustless fountain of the purest drink, without either fermentation or distillation; making neither gold, nor power, nor fame his god; mistaking neither nervous excitement for religion, nor high political agitation for a healthful preserver of good government; tempering his grief by a prudent judgment; converting his disappointments into counsellors of wisdom; and accepting all the blessings, whether physical, intellectual, or moral, which a bountiful Providence has bestowed upon him, and wisely using them "as not abusing" them.

How unlucky that a lean person cannot grow fat on the smell of a cook-shop! We hope that our readers do not share our feelings, but we must confess that, after perusing Dr. Pliny Earle's compendious remarks, we felt very much like a person might be imagined to do who, having been invited to a magnificent feast, was fed upon the smell of the dishes. Dr. Pliny Earle quotes that great philosopher, Sancho Panza, as to the blessings of sleep. He should have

remembered, when enlightening the darkness of people with regard to the prevention of insanity, the painful feelings of that same Sancho Panza on the occasion when, having been made Governor of Baratania, he found the successive courses of his elaborate banquet appear and disappear with great display without his being allowed to eat anything, and at the end of it was left as hungry as at the beginning, with the additional bitterness of tantalising disappointment.

Curability of Insanity.

In the same Report Dr. Pliny Earle, discussing the different percentages of recoveries in different asylums, and pointing out how much the temperament of the observer affects his view of what is a recovery—how much, in fact, should be allowed for the personal equation—gives a striking illustration of the uncertainty of the statistics of insanity, from the medical history of the Worcester Hospital. Two Superintendents held office for a period of three years each, and the statistics of admissions and recoveries for each of these periods are as follows:—

OFFICIAL YEAR.	Admissions.	Recoveries.	Per cent. of Recoveries.
<i>First Period.</i>			
1868-69 . . .	337	149	44·21
1869-70 . . .	384	158	41·11
1870-71 . . .	470	209	44·46
Total . . .	1,191	516	43·32
<i>Second Period.</i>			
1872-73 . . .	407	98	24·08
1873-74 . . .	400	71	17·75
1874-75 . . .	362	90	24·86
Total . . .	1,169	259	22·16

Thus, although the number of admissions (1,169) in the second period was but twenty-two less than (1,191) in the first, the number of recoveries (259) was but *one more than half as great*. The proportion of recoveries of the first period is to the proportion of the recoveries of the second, as 195 to 100, or as 100 to 51·15. There is, in my opinion, but one explanation of this most surprising difference; and that is, the difference in the physical and