

Let there be, wherever it is desirable, a separate block for those patients who are labouring under acute forms of mental disorder. In some instances existing arrangements in regard to a distinct ward for recent cases are amply sufficient.

Let brain-surgery and any and every form of treatment which modern medical science can suggest be tried in existing institutions.

Whether under all these favourable conditions, the percentage of recoveries will be materially raised we cannot say, but this happy result is much more likely to be reached by retaining the moral and social advantages now in operation, the outcome of years of acquaintance with the requirements of the insane, than by the divorce of the moral and physical treatment of mental alienation with which we are now threatened.

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*Alleged Increase of Insanity.*

An important contribution to the study of this problem has been made by Mr. Noel A. Humphreys in a paper read before the Royal Statistical Society, 18th February, 1890. Considering the unfortunate and egregious mistakes which are made in the matter of statistics by those who either are ignorant of the elementary principles of the science, or who draw conclusions from insufficient data, it is of the first importance to have statisticians with special training, and provided with all the particulars which can be procured from dependable sources. These qualifications Mr. Humphreys possesses, and the result is the most trustworthy article to which men can refer who desire to know the real facts of the case.

Mr. Humphreys lays great stress on the shortcomings of the Lunacy Commissioners. It appears that the census of 1881 gave a return of the number of the insane, which was 11,390 in excess of the registered cases reported in the Lunacy Blue Book for that year.

Neither the Local Government Board nor the Lunacy Board makes any return of the admissions of pauper lunatics into Workhouses, or of the new cases receiving out-door relief.

Hence any return of admissions of the insane is defective to this extent. It is also pointed out that the admissions into asylums from among cases already existing in Workhouses, or residing with relatives, are not distinguished from the really new cases.

Mr. Humphreys, of course, disregards as any evidence of the increase of insanity, the rise in the number of registered lunatics from year to year. That this is largely due to more complete registration and the prolongation of life in the lunatic population, admits of proof.

The rate of mortality in asylums declined from 10·31 per cent. in 1859-68, to 10·17 in 1869-78, and to 9·55 in 1879-88.

Praise is bestowed upon the Statistical Committee of the Metropolitan Asylums Board. Their asylums contained 3,208 inmates on January 1st, 1871, and 4,919 at the end of 1888. The death rate steadily declined from 16·63 per cent., in 1871, to 6·85 per cent. in 1886; the mean annual rate declining from 14·1 per cent. in the first three years 1871-73, to 7·40 per cent. in the three years 1886-88. Had the mean death rate in the above-mentioned three years prevailed during the succeeding 15 years, and the number annually resident been maintained, the deaths would have exceeded the recorded number by 3,712. If, again, the death rate in the first three years had continued, and the vacancies due to the excess of this death rate upon the lower rates actually recorded, had not been filled by extra admissions, the inmates at the end of 1888 would have been only 3,346 instead of 4,919 actually in detention, of whom 1,573 survived in consequence of the lower death rate.

From statistics it cannot therefore be inferred that there is any actual increase of occurring insanity.

“In spite of constantly increasing accuracy of registration, the proportion of admissions to population has shown no increase during the last ten years, and actually declined during the five years 1884-88, compared with preceding five-year periods.”

The deficiencies in the Lunacy Board's statistics are especially unfortunate in the following points: (1) The ages of the insane under different kinds of treatment should be tabulated for a series of years. (2) The ages of deaths of the insane persons under such different kind of treatment should also be given for series of years. (3) More precise information should be given concerning the previous history of all the new cases coming under observation during each year. (4) Speaking generally, the tables of the Commissioners should be remodelled so as to include the improved series of tables recently adopted by the Statistical Committee of the Metropolitan Asylums Board.

The conclusion at which Mr. Humphreys arrives must be regarded as highly satisfactory, and calculated to correct the sensational statements current at the present day in regard to

the enormous increase of mental disorders. Up to the year 1878 it was impossible to separate the admission of patients labouring under a first attack from those who had laboured under more than one. And although a return of first attacks is now made to the Lunacy Board, it is a very imperfect approximation to the truth. Still it is better than nothing, and a return of the admissions of first-attack cases from 1878 to 1887 shows that in 1878 the proportion per 10,000 living in England and Wales was 3·337; in 1879 it was 3·345; in 1880 it was less, viz., 3·225; in 1881 slightly higher, 3·252; the same for 1882; in 1883 a distinct rise, 3·435. Now in 1884 the ratio fell to the number of 1878; and it was still lower in 1885, being 3·101; in 1886 it had risen to 3·198, and in 1887 to 3·332. (The last Blue Book does not supply the data for 1888 or 1889.) This ratio is lower than it was in 1878 by a small fraction, and therefore the number of first attacks at the end of ten years (*i.e.*, in 1887) had not increased.

As we have already said, such a return as the foregoing could not be obtained at an earlier date, and as the proportion of admissions of certified lunatics to 10,000 of the estimated population during the 18 years 1859-1876 showed a rise from 4·729 to 5·934, there was some ground for fearing a real increase of occurring insanity.

Now, however, we have not only a return of first attacks which militates against the supposed increase of insanity, but even the proportion of the admissions\* to the population shows that no increase has taken place during the last decennium, and that it has even indicated a decline during the latter half of that period. It follows, therefore, that the fears raised by the Lunacy Statistics up to ten years ago do not derive any support from the official returns since that date.

We have always held that it is one thing to disprove the assertion so frequently made that statistics prove the increase of insanity in this country, by showing that statistics do not support this statement, and that it is another thing to assert that outside the range of Registered Lunacy, no actual increase may have taken place under the unfavourable conditions of modern civilization. There may be more nervous excitability, there may be more mental disturbance on the borderland of insanity, but never reaching the portal of a lunatic asylum. It is only proper that this possibility, not to say probability, should be borne in mind. We are bound to warn the present

\* Less transfers and re-admissions; workhouses and the Metropolitan District Asylums not being included.

generation against intellectual as well as moral excesses, and we must be careful how we lightly throw away any of the evidence which our own experience affords, tending to support the medical advice which is so much required in this age of rush and worry, whether among men of business or students of science.

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*Retreats under the Inebriates Acts, 1879, 1888.*

We think the time has come when the operation of these Acts and the condition and character of Inebriate Retreats should be reviewed. More than a decade has elapsed since the first Act was passed, and it may be supposed, therefore, that sufficient opportunity has been given for the working of the fresh legislation which Parliament adopted as a consequence of a considerable amount of public feeling, and of the decided action taken by the medical profession. The last (the ninth) report of the Inspector, Dr. Hoffman, is before us, and from this we learn that no new institution of the kind has been opened during the year, but renewed licenses were granted for those already in existence, seven in number, and licensed for 94 patients in all. There were, however, only 49 patients resident in these institutions on December 31st, 1888. The name and situation of the Retreats were as follows :—

Coleman Hill House, near Hales Owen, Worcestershire.

Dalrymple House, Rickmansworth, Hertfordshire.

High Shot House, Twickenham, Middlesex.

Montague House, Brook Green, Hammersmith, W.

Old Park Hall, Walsall, Staffordshire.

Tower House, Westgate-on-Sea, Kent.

Amesbury House, Amesbury, Wiltshire.

Here is the fact that although licensed for 94 persons, there are actually only 49 persons availing themselves of their shelter and care. Why is this? It must be remembered that the Amended Act of 1888 had not borne fruit when these numbers were reported. One of the Clauses in this Act, that which enables the application of a patient for admission to a Retreat to be attested before any two Justices without restriction to the particular jurisdiction for which such Justices usually act, may, and probably will, tend to increase the admission of patients in future. Possibly the change of title from the "Habitual Drunkards Act" to the "Inebriates Act" may render it more popular. It is to be noted that