

recorded at a small adjourned annual meeting. He thought that the matter should be more fully and deliberately considered before any active steps were taken, and in his opinion it would be more in accordance with the dignity and authority of the Association if a small Sub-Committee were appointed to go thoroughly into the subject and report to the Association at the next annual meeting, which would be held in London. An opportunity would thereby be afforded for the full discussion of the question. He therefore moved the following amendment: "That in the opinion of this Association the time had arrived at which it is desirable that the subject of the questions that ought to be left to the jury in criminal cases in which the plea of insanity is raised be reconsidered, and that a small Sub-Committee be appointed to investigate the whole subject and report at the next annual meeting of the Association."

This was seconded by Dr. SAVAGE.

Dr. MERCIER objected to deferring the subject for a year. The British Medical Association was going to move in the matter, and he did not think that this Association should be behindhand in taking up the subject.

The President then put Dr. Nicolson's amendment to the meeting.

After some remarks had been made on the number of members voting by show of hands, a division was called for, when it was found that 15 voted for the amendment and six against.

The amendment was therefore declared to be carried.

The President then put it to the meeting as a substantive motion, whereupon Dr. MERCIER proposed, and Dr. MORRISON seconded, that the word "annual" be omitted.

The substantive motion, with this omission, was carried unanimously.

Dr. NEWINGTON proposed that the Sub-Committee be composed of Drs. Orange, Nicolson, Savage, Mercier, Weatherly, Blandford, Woods, and Yellowlees.

Dr. STEWART seconded, and this was carried unanimously.

This concluded the business.

BRITISH MEDICAL ASSOCIATION.

The sixty-second annual meeting was held at Bristol, July 31st to August 3rd, 1894.

The Section for PSYCHOLOGY was well attended and its interest fully maintained.

President—G. FIELDING BLANDFORD, M.D.

Vice-Presidents— { S. REES PHILIPPS, M.D.
 { FLETCHER BEACH, M.D.

Honorary Secretaries— { C. SPENCER COBBOLD, M.D.
 { R. S. STEWART, M.D.

In accordance with the intention of devoting the current number of the Journal to the proceedings of the Annual Meeting in Dublin, the report of the proceedings of the above-named Section is deferred to the number for January, 1895.

ASSAULT ON DR. WIGLESWORTH.

Our readers will be aware from the Medical Journals that Dr. Wiglesworth has had a narrow escape from a fatal assault by a male patient in the Rainhill Asylum. It must be some comfort to him to know how widespread has been the sympathy expressed with him in his very serious condition. The satisfaction felt in the favourable course which his illness has happily run is in proportion to the anxiety experienced.

The patient was an Irishman* aged 39, a schoolmaster, who seems to have wandered about America between 1879 and 1886, never keeping situations long,

* For these particulars we are indebted to Dr. Menzies, Senior Assistant Medical Officer of the Rainhill Asylum.

always complaining of people following him and conspiring against him. But before 1879 he seems to have lost his father and brother, and to have been unduly depressed. About 1886 he was admitted into the asylum at Dijon, where he remained for five years, and then escaped. The next year was spent in an asylum in Paris. He again escaped, and eventually arrived at his sister's house in Ireland. He disappeared suddenly, and was found wandering in London. He was brought to Rainhill on the 8th November, 1892. He was always a quiet man in Rainhill, but was looked upon as somewhat dangerous, and was in the refractory ward. The accident occurred in this wise.

Dr. Wiglesworth had spoken to him in the airing court at 11 a.m. on the 7th August. He asked him for his discharge, and Dr. Wiglesworth gave him a temporizing answer. As he turned away the patient struck at him. He was seized by the attendants, and an instrument dropped to the ground. It was an old "hold-fast," evidently long disused and buried. It had been brought in by someone and given to him, for he had not been out of the ward or court for two months. It had been ground to a double dagger edge, and carefully burnished.

After the blow the patient walked quietly away, and afterwards said that he "did it to save the institutions of the country." He frequently asked for Dr. Wiglesworth during his illness, and expressed regret at "having to do it."

As to the wound and operation, it appears that the iron entered in a forward and inward direction in front of the left mastoid process, glanced off the internal surface of the ramus of the jaw, missed the internal maxillary artery, passed through the posterior part of the parotid gland, cutting some fibres of the facial nerve, missed the temporal artery, and at a depth of $2\frac{1}{4}$ inches severed the internal carotid posteriorly and internally to the styloid process, $\frac{1}{4}$ inch from the base of skull. The blood gushed out in a stream, and Dr. Wiglesworth immediately made strong pressure on the vessels of the neck, and walked (110 yards) to his house.

The chief attendant ran for aid, and met Dr. Buss, who reached Dr. Wiglesworth growing faint, at his study door. Dr. Buss maintained the pressure, and when Dr. Menzies came he probed the wound, and made a preliminary exploratory incision. It was at once seen that it was very deep and serious, and Mr. Damer Harrison was telephoned for. Meanwhile Drs. Buss and Hinds kept up the pressure. At 1.5 chloroform was given, and the wound explored. All the branches of the external carotid were found intact. Dr. Hinds kept his finger deep in the wound, and Mr. Harrison dissected down to it past the mastoid, and past the styloid process. Finding no hope of tying the internal carotid, he dissected and ligatured the common carotid, plugged the wound, and dressed it. The duration of operation was $2\frac{1}{2}$ hours. The quantity of blood lost by the accident and the operation was estimated at from 15 to 30 ozs.

Mr. Harrison and Mr. Rushton Parker slept in the house each night for a week, Mr. Harrison for a week longer. The wound was soused with 1 to 20 carbolic acid, but afterwards 1 to 40, and plugged each day. No reactionary or secondary hæmorrhage followed. The bruising of the nerves and muscles about the larynx and pharynx caused some trouble for some days, pain, cough, etc., but eventually cleared up.

One word as to the criminal procedure. The main building is in St. Helen's Borough, and Dr. Menzies desired the Borough Magistrate to come over and remand the patient to Walton Gaol. But the clerk to the Committee wished to establish the right of a County J.P. to act anywhere in the county, so the Chairman remanded him till Dr. Wiglesworth was out of danger. Then Mr. J. Birchall, J.P., remanded him to Walton Gaol as an ordinary criminal. There he was dealt with and sent to Broadmoor in the usual way under 47 and 48 Vic., cap. 64, sec. 2 (1) and (3).

It was obviously desirable to have him dealt with in this way in order to avoid a trial at the Assizes, which moreover would have kept him in suspense three months (*vide* 46 and 47 Vic., cap. 38, sec. 2 (1) and (2)).

In conclusion, we desire to warmly congratulate Dr. Wiglesworth on his recovery, and the Association itself on so valuable a life having been spared.