

to carry out in one's life and work the principles enunciated by the great apostle. It might well be designated the philosophy of loving-kindness, a term which the preacher prefers to the Biblical word Charity.

Some of Dr. Mercier's observations come almost under the category of aphorisms, such as: The only way to learn how to do a thing is to do it.—The intelligent worker is he or she who knows when it is proper and necessary to break a rule. Rules are necessary because workers are stupid.—Never, under any circumstances, attempt to coax a patient by a lie.—Rejoinder and retaliation is a confession of defeat.—I have spent a lifetime amongst the insane, and the most salient result of my experience is that I never despair of a patient's recovery.

We can confidently recommend this little book—unique of its kind—not merely to attendants and nurses, but to every one who is engaged in the treatment of the insane. It might, with great advantage to both nurse and patient, be carried in the pocket, and referred to with the same regularity and constancy as that with which a priest peruses his breviary. The principles there laid down should be known by heart, and thoroughly assimilated, and every effort made to carry them out in practice. The keynote of the address is encouragement, its motto "Sursum corda," and we cannot conclude this notice more appropriately than by quoting the inspiring words which occur just at its close: "When you watch the subsidence of excitement, the removal of depression, the dispersion of suspicion, the gradual return to sanity; when you open the gates and say farewell, and bid God-speed to a patient whom you have nursed through the valley of the shadow of death, and raised out of the mire of tribulation; when you send him home clothed and in his right mind, and think of the load of misery you have been instrumental in removing from him and from his family; you taste a joy as refined and as pure as that of the angels of heaven over the sinner that repenteth."

The Third Annual Report of the Board of Control for the year 1916.

The third report of the Board, ordered to be printed on October 17th, 1917, is very much abbreviated as compared with the first. In Appendix A there are only nine tables instead of twenty-four, and in Appendix B only five instead of fourteen.

This economy of printing is no doubt justified by the state of war, but it could be wished that similar care had been exercised in matter in which the saving, instead of amounting to a few score pounds, would have amounted to so many thousands. The want of these tables reduces the report to a stereotyped repetition of the baldest facts and renders any attempt at criticism or interpretation almost impossible.

The decrease in the number of the notified insane is again a striking and interesting phenomenon, opening the door to much speculation in regard to the influences producing this result.

The actual decrease for the year 1916 was 3,159, the total 134,029 on January 1st, 1917, being less by that number than at the commencement of the year under review. The number on January 1st, 1915 (the highest recorded) was 140,466, and if the average annual increase

of the preceding decade had continued, the present year would have opened with 144,968, or 10,939 more than the actual number.

The total decrease on the two years, therefore, is 6,437, and this result has been brought about by decrease in the admissions, those in 1915 and 1916 being respectively 2,055 and 2,527 less than in 1914, together with the increase of deaths, which in 1915 and 1916 were 2,157 and 2,376 more than in 1914. The recoveries were 305 and 648 less in these compared years, whilst the discharged not recovered were increased by 707 and 367 respectively.

The want of the usual tables makes it very difficult to follow out satisfactorily the incidence of these factors in the relation to sex, but there is no doubt that the reduction is somewhat larger in the males. These on January 1st, 1916, being 46 *per cent.* of the total insane population as compared with 46.2 *per cent.* on January 1st, 1915. On the other hand, the decrease in the admissions for 1916 shows only a diminution on those of 1915 by 1.7 *per cent.* for men as compared with 2.7 *per cent.* for women (in actual numbers, 168 men and 304 women).

In the absence of the necessary facts only conjectures can be made whether the stimulus and excitement of war has acted beneficially on a number of persons who, under ordinary conditions, would have become insane, or whether, as already suggested, the restrictions in the use of alcohol have led to lessened intemperance and improved general health, etc.

In regard to men, as the report points out, there are certainly a large number who are being treated in hospitals and homes who will ultimately gravitate into asylums. When the actual facts become obvious it is quite possible that the diminution will prove to have been larger among women.

The increase in the number of deaths appears to have been largely due to senile decay, in addition to a larger mortality from phthisis.

The drain of attendants for military service has been met everywhere, the report shows, by employing female nursing in suitable wards on the male side of asylums; as a result it appears that out of 5,289 attendants of military age over 3,000 have been called to the colours, many of whom have been wounded or killed.

The voluntary boarder system has been threatened by an innovation that might seriously impair its usefulness.

The report records that at the Bodmin Assizes, two men who pleaded guilty to acts of gross indecency were bound over to come up for judgment when called upon, provided that they agreed to go as "voluntary boarders" to two provincial licensed houses. It is not astonishing that the Board writes that this has caused them great anxiety or that they have laid their grave objections to this procedure before the Lord Chancellor and the Home Secretary.

That these persons can be considered as "voluntary boarders" does not seem possible to a non-legal mind. It is not stated whether the boarding—whether voluntary or not—was for any fixed period; whether, for example, forty-eight hours' residence would be sufficient to comply with the Judge's direction? or whether, on the other hand, if a fixed period of boarding, say six months, was required. In the latter case it would approximate to a sentence for that period. Neither is any

indication stated whether the boarding period should be determined by the medical authority of the licensed house or by the boarders themselves, or by the judicial authority.

The further question arises whether any licensed house would voluntarily receive such persons, or whether they, if designated by the Judge for that purpose, would be bound to receive them.

The proposition certainly seems an impossible one : and it must be hoped that the learned Judge will himself see this.

The total average cost per head for maintenance for all asylums showed a further increase of $6\frac{3}{4}$ d. per week on the previous year ; and this appears to be a moderate rise in relation to the increased cost of food, etc.

Mental deficiency care would appear to be progressing as satisfactorily as war conditions will permit. The report speaks highly of the valuable help of voluntary associations in the supervision of defectives. The Brighton Guardianship Society is specially cited as an example. The number of mental defectives on the register of the Board are : January 1st, 1918, 6,836, of whom nearly 6,000 were in certified institutions ; but this does not include a very large number, who are at present cared for by the Education and Poor Law authorities, as well as many others not yet dealt with in any public way.

The training of teachers and attendants on the mentally defectives is receiving the attention of the Board, and the hope is expressed that the next annual report will contain an account of a practical and inexpensive scheme for this purpose.

During the year eight certified institutions were established. The reports of the visits by the Board to the various institutions are given in full, and contain a considerable amount of information interesting to those specially concerned in the administration of the Act.

As stated at the outset, there is little in the report affording a basis for criticism, and in the present stress of work thrown on the Board, it would be unfair to expect any of the new departures in the treatment of the insane, which we may hope may be dealt with when the country again enjoys the opportunities of progress afforded by a lasting peace.

Part III.—Epitome of Current Literature.

1. Physiological Psychology.

The Nature of Mental Process. (*Psychol. Rev.*, May, 1917.) Carr, Harvey.

The author proposes the view that the mental functions with which psychology is concerned are in reality psycho-physical and at times neural, and that psychology must attempt to comprehend these functions in their entirety. That is to say that psychology must not be content to deal with the conscious and subjective elements of psycho-physical events, leaving their neural correlates to physiology, but include within its domain all the neural events involved. This, Carr points out, is unorthodox as a definition of the scope of psychology, but is entirely in