

The Diseases of Society [the Vice and Crime Problem]. By G. FRANK LYDSTON, M.D. Philadelphia and London: Lippincott, 1904. Demy 8vo, pp. 626.

Under this comprehensive title the author discusses crime, prostitution, pauperism, insanity in its relation to society, and the economic and industrial conditions which keep men under in the battle of life. Having served for some years as resident surgeon to the Blackwells Island Penitentiary, New York, Dr. Lydston had an opportunity of studying the criminal, and the absurdities of the criminal law and the penal system. Since then he has kept a hold of the subject, as has been shown by various papers in American periodicals. In his Preface the author comes boldly forward: "No apology is offered for the radical tone of some of the ideas expressed in the volume." In particular "the chapters on anarchy and sexual vice and crime are not consonant with those entertained by the great majority of people." He adds that his views of the vice and crime problem are based mainly upon the conditions prevailing in America, which must be different from the European standpoint. Having thus blown the horn, Dr. Lydston loses no time in drawing the sword, which he wields after a trenchant fashion. He finds in the New World all the wickedness, all the crimes and corruptions of the Old, in some cases in worse forms. He shows by statistics how much crime and suicides are increasing, especially in the cities of the United States, though murders have become rarer. "The machinery of the law," he tells us, "is tainted from top to bottom with venality, corruption, and interested unfairness." Both judges and jurors are bribed, and he equally denounces the thieving of corporations and the tyranny of trades unions, and says that the gaols of New Jersey and Florida are worse than the prisons of Siberia. As the franchise has been foolishly given to the negroes, the whites in the Southern States are fain to defend themselves from the mastery of their former slaves by force and intimidation. The black man has not yet got rid of the savage lust of his race, and assaults upon white women are horribly revenged by lynch law, crowds assemble and people come by trains to enjoy the spectacle of negroes burnt alive. The danger of executing the wrong man is a thousandfold greater in mob rule than in legal punishment; niceties of discrimination between negroes are not characteristic of a Southern mob.

Dr. Lydston's style is striking, though sometimes incorrect. He is too apt to expand a statement beyond his evidence, *e.g.*: "A superb mathematical or musical faculty may be possessed by a subject who is otherwise an idiot." "Persons who are born deaf and dumb may be very intelligent. Laura Bridgman and Helen Keller are brilliant examples." Yet neither of these women was so born. His reckless accusations against Britain of covetousness and hypocrisy in the war in South Africa show how little trouble Dr. Lydston has taken to acquire correct information. He talks of children who survived, but "whose longevity was short." However, in a book dealing with so many debatable questions it is easy to find faults.

Dr. Lydston has a long and somewhat diffuse chapter on neuroses in

their relation to social diseases, the product of much reading and acute observation, especially upon criminals and the insane. In our opinion he has wasted some pages in maintaining that Gall's discoveries have been treated with unworthy neglect. If Dr. Lydston will go back to the medical journals and reviews of the first half of the nineteenth century, he will find that Gall's theories received much consideration and were fairly refuted. The only successful guess made by Gall was the location of the faculty of language in the orbital portion of the brain. We can only wonder at Dr. Lydston's assertions that Gall correctly localised the optic centre and the centre for the musical faculty, that the cerebellum has been proved to be the centre for sexual feeling, and that the moral faculties have been proved to be located in the posterior and middle lobes of the brain. Lydston's observation that the growth and nutrition of the brain are influenced by muscular development is of importance. He goes so far as to hold that in manual and general physical training lies the germ from which the principles of the prevention and cure of social disease will eventually develop. In his chapter on "The Chemistry of Social Diseases" he considers the relation of intoxicants to crime. The following gives his experience of the effects of cocaine: "Deadlier than morphine, less reliable in its action, and liable to kill without warning, it has nevertheless been hailed with delight by the degenerate, and, alas! by the sufferer who does not belong to the army of degenerates. Primarily, cocaine is more stimulating than opium. Intellectual brilliancy, increased physical energy and capacity for sustained mental effort, beautiful thought imagery, fanciful yet coherent flights of imagination, relief of psychic pain, surcease of sorrow—any or all of these remarkable effects may accrue from the action of cocaine." "But the debit side of the ledger is a terrible record indeed: Death, as sudden and unexpected as a crash of thunder from a clear sky, produced by a single minute dose of the deadly drug." Amongst other evil effects following the cocaine habit he mentions prostration, mental depression, nervous irritability, vacillation of the mind, hallucinations, delusions of persecution, and outbursts of temper. The chapter on anarchy in its relation to crime is the best in the book. With a warmth of language which rises to eloquence he describes the outbreaks of anarchy, especially that of Chicago, the furious passion of mobs, and "the anarchy of rulers," meaning unjust wars and the dangerous struggles between capitalists and trades unionists.

No question in ethics is more open to discussion than the relations of the sexes, upon which there is a diversity of views through different times and in different countries; but in Britain, and we suppose also in America, such discussions are looked upon with dislike. Dr. Lydston, however, shows a free hand in his chapters on sexual vice and crime. The following passage comes from his view-point of professor of genito-urinary surgery:

"Prostatic disease is a special cause of nervous disturbance in the male. . . . The extent to which prostatic irritation enters into the etiology of vice and crime is by no means appreciated. Prostatic pathology is often associated with the most profound disturbances of the nervous system. The mentality of men with prostatic irritation is rarely, if ever, well balanced. Suicide, sexual vice, and varying degrees

of neurasthenia often have their foundation in an irritable, congested, or inflamed prostate."

Dr. Lydston objects to measures for the prevention of venereal diseases, as they would remove the only inhibition—the fear of consequences—that exists in many individuals. Yet, if it be wrong to prevent such diseases, is it right to treat them? Lues is but a poor preacher of continence, and if it is to be kept up as a punishment for transgressors it must be admitted that it often strikes most unequally, and entails a frightful train of distempers upon humanity, not sparing the innocent. Yet, of all infectious diseases those of venereal origin are the most easily preventible.

Dr. Lydston subscribes to the theory that the criminal is a product of evolution, which he tells us is in absolute harmony with the evolutionary theory in general. This can only be by reversion to a lower type, a type by no means easy to find. The habitual criminal is propagated by descent. Dr. Lydston admits that criminals by heredity are usually hopeless. Our ancestors tried to cut this short by the halter. Dr. Lydston, who has a refined horror of capital punishment, would have recourse to sterilisation both with the males and females.

Dr. Lydston is, however, aware that all the forces of civilisation enter into the causation of crime. If it were not for the continual recruitment of the delinquent from the non-criminal class, the degenerates would speedily become scarce, if not pass wholly away.

It is customary for writers of Dr. Lydston's school to talk with contempt of criminal codes and penal systems because they fail to reclaim the criminal, altogether ignoring the main object of these institutions, which is to protect life and property, and this they do with increasing efficiency in civilised countries. The reformation of the delinquent was ever a secondary object, and by the showing of these same criminologists it does not appear to be a hopeful task.

In the chapter on genius and degeneracy Dr. Lydston should have exercised more of the critical faculty which is not wanting in other pages. We all of us know of the books and papers written to re-echo the dictum that genius is a neurosis, supported by anecdotes, often incorrect, of the nervous troubles and peculiarities of men who have gained sufficient reputation to be thus utilised. Take the following as a sample: "Cromwell was a sickly neuropath, who was a confirmed hypochondriac, his morbidity often approximating melancholia. All his life he was dominated by a vision, in which a spectral woman of gigantic stature foretold his coming greatness—a phantasmic reflection of his own hypertrophic ego." All the warrant for this is an assertion, in the *Memoirs of Sir Philip Warwick*, that a physician who attended Oliver Cromwell before the Civil Wars said that he had been called up by his patient at unreasonable hours upon a strong fancy that he was then dying, and there went a story of him that in the daytime, lying melancholy in his bed, he believed that a spirit appeared to him and told him he would be the greatest man in the kingdom. There is, however, no proof that this made anything more than a passing impression on him, or that he became a confirmed hypochondriac. The assertion that Napoleon Bonaparte was a "physical degenerate" is equally unprovable.

The chapters on the physical and psychic characteristics of the criminal and on the illustrative crania and physiognomies of degenerates are worthy of attention. They are illustrated by no less than 177 figures, which are well executed.

The author's views on "the therapeutics of social disease" are based almost wholly upon physical considerations—what he calls "criminologic materialism." He does not wish to dispense entirely with moral suasion, and regards the prison chaplain as an important official; "the less orthodox he is the better for his success in brain-building in criminals." Dr. Lydston would abolish the slums and provide baths and other conveniences for the poor; they should be forced to take gymnastic exercises, and proper books and periodicals should be given outright. Nobody should be allowed to marry without going through a medical examination, which would embrace the moral as well as the physical qualifications of the candidates. Street-walkers and others who might help men to evade these restrictions should be shut up. At the same time, he would see that no women should want the necessaries of life. If, after all this, there should be some who would not behave, sterilisation may be resorted to. The only source indicated for such reforms, which would entail some expense, is the taxation of the plutocracy. "There should be more legal assessments of the multimillionaires—compulsory subscriptions, as it were—for the elevation of the under world."

Altogether the book is the product of an acute and vigorous thinker, whose earnestness and sympathy with the unfortunate we are compelled to respect even when we cannot agree with his views.

WILLIAM W. IRELAND.

Part III.—Epitome of Current Literature.

1. Neurology.

The Amyotrophic Form of Disseminated Sclerosis [La Sclérose en Plaques à Forme Amyotrophique]. (Gaz. des Hôp., P., Oct., 1904.) Lejonne, P.

Under this title the author gives an account of the symptomatology and morbid anatomy found in certain cases of disseminated sclerosis. They were characterised clinically by two orders of phenomena: firstly, muscular atrophy; secondly, affections of the sphincters, trophic and mental disturbances.

The muscular atrophy generally began in the small muscles of the hand, thence extending to the forearm, arm, and legs; and neither in the character of the atrophy nor in its distribution was there any essential difference between this condition and certain forms of progressive muscular atrophy or amyotrophic lateral sclerosis. Contractures were a striking feature, but these affected other muscles than those