

ANNUAL MEETING OF THE ASSOCIATION OF  
MEDICAL OFFICERS OF ASYLUMS AND  
HOSPITALS FOR THE INSANE.

*Official Report of the Proceedings.*

The Annual Meeting for 1858 of the Association was held in the University Buildings, Edinburgh, on the 28th July. Dr. CONOLLY, D.C.L., President.

Both the morning and afternoon meetings were fully attended by the members of the Association, and also by many of the distinguished ornaments of the profession in Edinburgh. Among those present were Professor Alison, Professor Simpson, Professor Laycock, Professor Bennett, Dr. W. A. F. Browne and Dr. Cox, (Commissioners in Lunacy for Scotland,) Dr. Conolly, Dr. Forbes Winslow, Dr. Bucknill, Dr. Lockhart Robertson, Dr. Stevens, Dr. Harrington Tuke, Dr. Skae, Dr. Begbie, Dr. Lindsay, Dr. Robert Jamieson, Dr. Howden, Dr. Gilchrist, Dr. Hitchman, Dr. Wingett, Dr. Davey, Sir Alexander Morrison, Dr. Sherlock, Dr. Mackintosh, Dr. Donald Mackintosh, Booth Eddison, Esq., Dr. Rogan, Drs. Dickson (2), Dr. Stewart, Dr. Lees, Dr. Grierson, Dr. Armstrong, Dr. Paul, Dr. Brodie, Dr. Stilwell, Dr. Seaton, J. Cornwall, Esq., Dr. Lowe, Drs. Smith (2), Dr. Lorimer, Dr. de Saycale (Nice), Dr. Aitkin, J. Yearsley, Esq., J. Bartlett, Esq., F. Flower, Esq., P. Cartwright, Esq., Dr. Cossar, Rev. F. L. Robertson, &c., &c., &c. The morning meeting was in one of the class rooms of the University, which was so crowded by visitors that the delivery of Dr. Conolly's address was arranged to take place in one of the lecture rooms.

The morning meeting commenced at 11 o'clock; Dr. FORBES WINSLOW, the retiring President, in the chair.

MINUTES OF PREVIOUS MEETING.

The minutes of the annual meeting in London, 1857, were taken as read, and confirmed.

ELECTION OF NEW MEMBERS.

*Honorary Member.*

Dr. BUCKNILL said he had great pleasure in proposing that Dr. W. A. F. Browne, Commissioner in Lunacy for Scotland, should be elected an Honorary Member of the Association; and also that the thanks of the Association should be given to Dr. Browne for the great services he had conferred on the Association for many years past, in the capacity of Scotch Secretary. Dr. Browne had been an earnest and most zealous member of the Association, and it was with peculiar pleasure that they saw him elevated to the important office which he now filled, and which rendered it needful that he should resign the post of Scotch Secretary to the Association.

Dr. LOCKHART ROBERTSON, in seconding the resolution, referred to his long and intimate acquaintance with Dr. Browne, his early teacher in the science of psychology, and to the unqualified pleasure with which he regarded Dr. Browne's elevation to the office of Commissioner in Lunacy for Scotland. The resolution was carried unanimously.

*Ordinary Members.*

The following gentlemen were elected ordinary members of the Association:—

BRYAN, DR. EDWARD, M.S. Cambridge Co. Asy.  
BULL, DR., Cork.  
BURGESS, DR., Norwood, Surrey.  
BUSHNAN, DR. STEVENSON, Laverstock House, Salisbury.  
DARTNELL, DR., Arden House, Henley-in-Arden.  
DELANEY, DR., M.S. Dist. Asy., Kilkenny.  
EATON, R., Esq., Co. Asy., Stafford.  
GILCHRIST, DR., M.S. Crichton Institution, Dumfries.  
JAMIESON, DR. ROBERT, M.S. Roy. Lun. Asy., Aberdeen.  
KNIGHT, DR., V.P. Co. Asy., Stafford.  
LALOB, DR., Richmond Dist. Asy., Dublin.  
LAW, DR. L., Central Asy., Dublin.  
LEWIS, H., Esq., Co. Asy., Chester.  
LOWE, DR., Saughton Hill, Edinburgh.  
MACMUNN, DR., Dist. Asy., Sligo.  
MALCOLM, DR., V.P., Roy. Asy., Perth.  
MAUDSLEY, DR. HY., Co. Asy., Essex.  
MEYER, DR., M.S. Surrey Asy., Wandsworth.  
MILLER, DR., V.P. St. Thomas Hospital, Exeter.

MORRIS, J., Esq., Peckham Ho. Asy., London.  
 PALEY, DR. E., 39, Arlington Street, Mornington Crescent.  
 PHILLIPS, E. T., Esq., M.S., Pembroke Co. Asy., Haverford  
 West.  
 RAE, JAS., Esq., Naval Asy., Haslar.  
 ROBINSON, DR., Eldon Sq., Newcastle-on-Tyne.  
 SHEPPARD, DR. E., 10, Hanover Terrace, Regents Park  
 SKAE, DR., M.S. Roy. Asy., Edinburgh.  
 SIBBALD, DR., Roy. Asy., Edinburgh.  
 SMITH, DR. R., Bath-lane, Newcastle-on-Tyne.  
 SMITH, DR., Saughton Hall, Edinburgh.  
 WHITE, DR., V.P. Dist. Asy., Derry.

#### RETIRING PRESIDENT'S ADDRESS.

Dr. FORBES WINSLOW in retiring from the office of president, to which he had been elected at Derby, in 1857, and which he has filled with satisfaction to the Association, addressed the meeting in the following terms:—

Before proceeding to the consideration of the special subject of my address, and resigning into the hands of my illustrious successor the distinguished office with which you honoured me when we met in 1857 at Derby, I would beg to congratulate you on our holding this year our usual annual meeting in this justly renowned and beautiful city. I cannot conceal from you the great pleasure and gratification which I feel individually, and in which I am sure you all participate, in having this opportunity of meeting, on their own native soil, not only the members of this, but of the British Medical Association residing north of the Tweed, and of having the privilege of renewing acquaintance with the many distinguished and honoured members of our profession living in this illustrious and far-famed seat of learning. I do not consider that we sufficiently appreciate in England the immense influence which the Edinburgh, and in fact the whole Scotch schools of medicine, have exercised over the destinies of our profession. Until the establishment, within the last thirty years, of three or four great seminaries of medical instruction in England, we were almost entirely indebted to Scotland for the medical education of our youth. Nearly all the celebrated English physicians, and many of our distinguished surgeons, undoubtedly acquired in this city and in this country the knowledge which enabled them afterwards

to occupy positions of great eminence in our own country. Let us admit with gratitude the benefit which the Scotch schools of medicine have conferred upon our noble science. Let us never forget how much of the respect in which our professional body is held in all parts of the civilised globe, is mainly owing to the flood of light which has emanated from the men whose genius has made renowned and celebrated this great school of medicine.

The legislative settlement of the long-agitated question of medical reform is a significant fact in the history of modern medicine. It constitutes beyond all question one of the most important epochs within the memory of living medical men. Should not this be a subject for mutual rejoicing and congratulation? and ought we not to feel a debt of gratitude to her Majesty's Government, and particularly to its distinguished and illustrious chief, as well as Mr. Walpole, the Home Secretary, for the great services they have rendered to the medical profession throughout the United Kingdom? Incomplete and imperfect as the measure may be in some of its provisions, it nevertheless finally extinguishes many long-existing and gross medical anomalies. If it accomplishes no other good, it fully and liberally recognizes a perfect equality of practice throughout the United Kingdom. Hitherto, the physician who was considered competent to prescribe in Edinburgh, was held legally unqualified to do so in England. North of the Tweed, the eminent physicians of this country were held in the highest veneration and respect, being considered as able and sagacious practitioners. Once over the Border, their knowledge, talents, and practical medical sagacity, were ignored by the English corporate bodies! Thank God! this monstrous injustice is now at an end, and the powers of the London College of Physicians to interfere with the graduates of the Universities of Scotland has ceased to exist. Our able, worthy, and excellent friends connected with the University of Edinburgh, and the Royal College of Physicians of this city, may now legally practice their professions in England, without exposing themselves to the humiliation of being served with a summary process from the censors of the London College.

Mr. Tite, the member for Bath, having in a short speech during the present session of Parliament brought under the notice of the House of Commons the existing state of Chancery lunatics, with a view to the appointment of a committee to enquire into their condition, and having, on the suggestion of Government, withdrawn his notice of

motion on the promise that in the ensuing session the whole state of the law affecting the care and treatment of the insane would be made the subject of strict Parliamentary inquiry, and, if necessary, legislative interference, I don't think I can more usefully occupy the time of the Association than by calling its attention to what I conceive to be the right basis upon which all legislation regarding the insane should rest. This will open the question for the careful consideration of the Association, and will, I hope, justify the organization of an acting and of an active committee in London to watch the progress of future legislation on this important subject ; one of all others in which we are personally and collectively deeply interested.

After referring to the constitution of the Board of Commissioners, and expressing the opinion that in any future legislation on the subject of lunacy it would be desirable to define with more precision the precise legal powers of the Commissioners, in all cases of serious dispute between the proprietor of an asylum and the Commissioners of Lunacy, Dr. Winslow continued :

We cannot disguise from ourselves the fact that the section of the Lunacy Act relating to medical certificates is far from being in a satisfactory condition. There always has been a great outcry against the power which the law places in the hands of two qualified medical practitioners. *Prima facie*, there are undoubtedly grave objections to this clause. If we always could guarantee the respectability, the intelligence, and the practical experience of the members of the medical profession called upon to certify to the mental condition of a person prior to his being placed under restraint, no possible objection could be raised to the law as it at present exists ; but unfortunately it does occasionally happen that very incompetent men are called in to certify, and by doing so without sufficient ground or reason, serious odium is brought upon all persons associated with asylums for the treatment of the insane. The force of public opinion is beyond all doubt against this part of the legislative enactment ; and we had better, therefore, with a good grace, bow with submission to the *vox populi*, and consent in this particular to some modification of the law.

It has been proposed, with a view of obviating this difficulty, and bringing the Act of Parliament more in harmony with the force of public opinion, that a quasi judicial investigation should be instituted in every case previously to confinement. The Law Amendment Society suggested that

an enquiry similar to a commission of lunacy should take place prior to the exercise of restraint, and advised that no person should be removed to a lunatic asylum who had not been pronounced by a competent jury to be of unsound mind, and in a condition to justify this mode of treatment. I am sure I need not occupy your valuable time in pointing out the absurdity and impracticability of this suggestion.

With a view to the institution of a less exceptionable and incorruptible tribunal, it is proposed that a "Court of Commissioners of Insanity" should be formed, consisting of six or seven experienced men of high repute, who should be empowered to decide on the necessity of restraint in every case of alleged insanity. This court is to be delegated with the authority of examining the medical men who certify, upon oath, and, if necessary, seeing the person presumed to be insane, prior to his being placed under restraint. Were such a preliminary course necessary in order legally to confine the insane, I very much fear it would greatly add to the statistics of chronic and incurable insanity. I think it most unwise, injudicious, and impolitic to throw any very stringent or vexatious impediments or obstructions in the way of confining the insane. Sensible as all must be who practise in this department of medicine, the curative advantages which result from the immediate removal of cases of acute insanity from the associations of home to a well organized and humanely conducted institution for the treatment of morbid conditions of mind, it behoves us to sanction no alteration in the law that would obviously and seriously interfere with this important principle of treatment.

What is the alteration, it may be asked, that I would suggest to meet the difficulties referred to? The law at present requires that two qualified medical men should personally, and apart from any other practitioner, examine the patient and certify to the fact of insanity, specifying, at the same time, the facts upon which they have based their opinion. It has been proposed, with a view of altering the law and satisfying the requirements of public opinion, that, instead of two medical certificates, three or even four should be required in every case previously to the imposition of restraint, and that at least one or two of the certificates should bear the names of physicians of high character and of known repute and experience. I am bound, however, to confess, from what I personally know of the state of public feeling on this point, that even this great concession to the popular outcry would not be satisfactory. To meet the

objections raised, and to place this matter beyond all further cavil and dispute, I would suggest the appointment of educated, respectable, and experienced practitioners, delegated with *quasi*-judicial and magisterial functions, to be summoned for the purpose of countersigning the certificates of the medical men, thus sanctioning, if they thought proper, the proposed measure of confinement. These Inspectors of Lunacy, or medico-legal jurists, might be appointed to preside over certain districts in the metropolis as well as in the provinces. Being unconnected with and unknown to the relations and friends of the patient, and strictly independent of the medical men called in by the family to certify to the fact of insanity, I feel assured that the signatures of gentlemen holding such independent official appointments would relieve the public mind of all undue anxiety relative to the unjust confinement of persons alleged to be insane. I think, also, it would be considered as a boon to the medical men certifying to the fact of insanity, as well as to the family of the invalid, by placing their conduct in the matter beyond all doubt and suspicion.

There are one or two other points in connection with the medical certificates to which I would beg to call the attention of the Association. Having dwelt upon the importance of adopting efficient measures of protecting the alleged lunatic from unjust confinement and detention in an asylum, I would suggest that in some cases of mental disorder, and mental disorder of such a kind and degree as to justify residence in an asylum or private house, the certificate of insanity should, under specific and peculiar circumstances, be altogether dispensed with. In the existing state of the law no person alleged to be of unsound mind can be placed under medical, moral, or general supervision in an asylum, or in a private house or lodgings (the party keeping such house or lodgings receiving payment for the board and maintenance of such patient), without two certificates of insanity. The Act of Parliament makes it also imperative on the part of the person admitting such patient into his private dwelling to make an official return to the Commissioners in Lunacy of the fact, accompanying such representation with a copy of the certificates and order upon which he was admitted.

In common with many medical men engaged in the treatment of the insane, I viewed this provision of the Lunacy Act as an obvious and important improvement upon the previously existing statute. I consider, however, it now to

be my duty to state that I have seen good reasons for modifying my opinion of this section of the Act of Parliament. I think the law with regard to confinement of persons in private lodgings and in unlicensed houses to be too stringent in its operation. There is a vast amount of incipient insanity and morbid conditions of mind connected with obscure brain disease that require, with a view to the adoption of efficient medical curative treatment, to be removed temporarily from the irritation and excitement often necessarily incidental to a continuance among relations and friends. In many of these cases no progress towards recovery can be made until the patient is taken from home, and ceases for a time to be a free agent. Under kind and skilful treatment these patients rapidly recover; but in order to effect so desirable a consummation, it is essential that they should be placed among strangers and under judicious control. Is it not unwise, I would ask, that the law should make it imperative that this class of mental invalids should be formally certified to be insane, and registered as such at the office of the Commissioners in Lunacy? The fact of a patient being placed under temporary restraint while suffering from an attack of transient mental aberration does not at all affect his social position should he recover and return home to his family; but the position of this patient would be materially altered if he has been certified to have been insane, and visited as such by the gentlemen appointed by the Act of Parliament to examine all persons legally confined as lunatics.

I am quite satisfied that there are many patients who are kept at home under great disadvantages, as far as the question of recovery is concerned, in consequence of this stringent provision of the law. So great is the horror which some sensitive persons exhibit at the bare mention of a certificate of lunacy, that they have confessed a determination, rather than submit to what they conceived to be a seriously damaging stigma, to abandon all idea of bringing those near and dear to them within the range of remedial measures! Could not some modification of the law be suggested to meet this class of cases? Would not the public be sufficiently protected from the improper interference of their friends and relations if any person admitting such uncertified cases into his house or lodgings were compelled to make a return of the fact to the proper authorities—viz., the Commissioners in Lunacy, or to the district medical inspector, medical jurist, officer of mental health, or by what

other name it may be thought proper to designate these official personages? There are numerous cases that require for their own safety, as well as the security and happiness of others, to be sent from home in consequence of some apparently trifling mental infirmity. It is often essentially requisite that such persons should be placed under the control and supervision of strangers. In this type of case no kind of justification can be urged for having them certified as lunatics.

Again, I would suggest an alteration in the certificates required for the admission of private patients into licensed establishments for the treatment of the insane. It has often occurred to me, and I have no doubt to all officially associated with private asylums for patients conscious of their mental disorder, fully recognising the loss of self-control, bitterly bewailing being a prey to morbid impulses, to express a wish to be placed under restraint. I have known patients to drive up to the door of the asylum and beg to be received within its walls, being painfully and acutely conscious of the necessity of close supervision. Great have been the lamentations when they have been informed that they could not be admitted even for one night into the asylum without being certified by two medical men to be in an insane state of mind. I have known such persons take the printed form of admission, and go themselves to the medical men in the neighbourhood, and beg them to sign the legal certificate of insanity. Why should there not be some alteration of the legislative enactment to remedy this defect? If a person, recognising his morbid condition of mind, and anxious to subject his case to medical treatment, voluntarily offers to surrender his free agency into the hands of the medical head of a lunatic asylum, the law should not force him against his will to be formally certified and registered as a lunatic. In such cases I would compel the patient to sign, in the presence of a Justice of the Peace or Magistrate, a paper to the effect that he, in consequence of mental indisposition, freely, voluntarily, and without compulsion, places himself in a licensed asylum for the treatment of the insane. A copy of this document, with all the particulars of the case, should be transmitted to the Commissioners of Lunacy within a few hours of admission. If it were thought desirable for the protection of the public that these patients should go to the Commissioners themselves and obtain their authority for entering the asylum as patients uncertified to be insane, no possible objection can be raised to this course of procedure.

In all legislation on the subject of lunacy, it is most important to studiously avoid throwing any vexatious impediment in the way in bringing the insane as speedily as possible within the reach of curative agents. A full and liberal recognition of this great principle of treatment, is quite consistent with the adoption of very stringent means for the protection of the public against all unjust interference and confinement on the ground of insanity.

It was my intention before concluding this address to have called the attention of the Association to some other suggestions that have occurred to my mind relative to the state of the lunacy laws, not restricting my remarks to the Acts of Parliament which take special cognisance of the insane subject to restraint in licensed and unlicensed houses. I was anxious to make some remarks respecting the defective state of the law bearing upon cases of alleged mental unsoundness and incapacity, which so often come before our courts of law in the form of commissions of lunacy. I am of opinion that the law relating to these cases requires careful revision. At present no condition of mental incapacity is recognised by the jurists of this country apart from actual unsoundness of mind in its legal signification; and such a condition of the intellect must be established by evidence, before the Court of Chancery will appoint a guardian or a committee to administer to and protect the property of the person alleged to be of unsound mind, and thereby incapable of managing his own affairs. The writ *de lunatico* directed by the Court of Chancery to the masters in lunacy authorises these judicial functionaries to enquire into the insanity, idiocy, or lunacy, of A. or B.; and no type of case can be legally dealt with by the master which is not embraced within one of these three divisions. It is true that the modified and less offensive phrase, "unsoundness of mind" (which never yet has been satisfactorily defined by lawyers or physicians) is adopted during the proceedings preliminary to the issuing of the writ *de lunatico*, and at the time of the judicial inquiry; but if the party be declared to be of "unsound mind" either by the master or by the jury, he is in all subsequent proceedings designated as a "Chancery lunatic;" and in the eye of the law he is so considered, should he not recover, until the day of his death! But may not a person be quite incompetent to take care of himself and manage his property without being either insane or a lunatic, and would it not be a gross, unjustifiable, and cruel misapplication and perversion of language so to consider

and designate those who, either from cerebral disease, accidental cause, or premature decay of intellect, are reduced to this sad condition of physical and mental helplessness?

There is a vast body of persons in this state of infirm and enfeebled mind, who are entitled to, and who should have extended towards them, legal protection. Men in this state of quasi insanity contract foolish and improvident marriages; are facile in the hands of designing domestics and unprincipled knaves; they are persuaded to squander recklessly their property, large sums are often exacted from them; they are induced to make testamentary dispositions adverse to the claims of relationship and ties of consanguinity, and in conformity with the wishes and interests of those who have obtained improper and undue influence over the poor broken down and impaired intellect. To meet the exigencies of this numerous class of cases, there should be some short summary inexpensive mode of legal procedure, quite distinct in its character from ordinary commissions of lunacy. Persons so enfeebled in mind as to be palpably unfit for the management of their property might be placed under the guardianship or tutorship of one or two members of the family by some simple judicial process, without rendering it necessary that they should be formally declared to be of unsound mind by the judge, and registered as lunatics in the records of the Court of Chancery. Protect the property and persons of these unhappy individuals by the most stringent means that can be devised and concocted, but save them and their families from the social disadvantages that would result from their being declared to be insane. I feel satisfied that an alteration in the law similar to that I have suggested is imperatively demanded, and would, if carried into effect, be productive of a vast amount of good to the community.

Dr. CONOLLY, the President for the year, then took the chair vacated by Dr. Forbes Winslow, and briefly thanked the Association for the honour they had done him in electing him as their president.

On the motion of Dr. BUCKNILL, seconded by Dr. W. A. F. BROWNE, a vote of thanks was passed to Dr. Winslow for his services as president, and for the able and interesting paper he had just read.

**ELECTION OF PRESIDENT AND PLACE OF  
MEETING FOR 1859.**

Dr. WINSLOW said—Before passing to the ordinary business of the meeting, he believed that at that stage of the proceedings they were entitled to propose their future president, the successor of Dr. Conolly; and it was with very great satisfaction to himself that he begged to propose as the President of the Association for the following year Sir Charles Hastings, D.C.L., of Worcester. He made that proposition with great pleasure personally to himself; and he was sure in doing so he was only acting in unison with the wishes of the great body of the Association. The profession was greatly indebted to that gentleman for the exertions he had made to place their social relations upon a right and legitimate basis. No one not intimately connected with Sir Charles knew the amount of exertion he had expended on that great cause, regardless of all personal consideration and interests. Those who knew how much he was occupied by the exercise of his profession could well appreciate the amount of time which he had devoted to the consideration of the great question of medical reform. That question being now finally settled, and he hoped set at rest for many years to come, he thought that the Association would only be paying Sir Charles Hastings that compliment to which he was fully entitled, if they elected him as their future president. He moved accordingly.

Dr. HITCHMAN seconded the resolution, which was carried unanimously.

Sir CHARLES HASTINGS said he was really taken so completely by surprise, that he could scarcely say at that moment whether the numerous calls on his time would permit him to undertake the duties of this office. He fully appreciated the honour they wished to confer upon him, but he would like to consider the matter before coming to any decision. Would they allow him to ask where the meeting was to take place next year?

Dr. LOCKHART ROBERTSON believed the feeling of the members was very much in favour of London.

Dr. STEWART put forward a claim on behalf of Ireland, as entitled to a visit from the Association, and hoped the next meeting would be held in Dublin. It would create a stronger and closer bond of union between the members of the Association in the two countries.

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Dr. SHERLOCK proposed that the meeting should be held at Worcester, where there was a large establishment well worthy of a visit. Worcester, also, was but a short distance from London.

Dr. FOBBS WINSLOW said that perhaps as a metropolitan man he might appear to be unduly biassed in moving that the meeting should be in London; but, apart entirely from any question of personal convenience, he thought as a principle it was most important that the Association should meet in some great city. They had tried meetings in the provinces, and had found that they led to very small gatherings; and then, besides, there was not the same amount of influence exercised by the Association when it met in a rural district, as when it met in Edinburgh, or Dublin, or London.

Dr. BUCKNILL seconded Dr. Stewart's motion in favour of Dublin.

Dr. L. ROBERTSON seconded the motion for Worcester. He thought the great county asylums offered very great attractions to the members to visit them; and it would be only an appropriate compliment to Sir Charles Hastings to meet at his own beautiful city, and so visit the Worcester County Asylum, presided over by his friend Dr. Sherlock, from whom he would venture to promise the Association a most hospitable welcome.

Dr. STEVENS said there was still a great deal to be done in altering the laws regarding the insane, and that could only be done properly in the metropolis, where the heads of the law were collected. It was very pleasant to meet in Edinburgh, and it would be so, no doubt, to meet in Dublin; but these meetings led to comparatively no practical ends. He seconded the motion for London.

Mr. BOOTH EDDISON thought a good meeting might be had in Liverpool, where the British Medical Association were, he understood, to meet next year.

On a vote being taken, the numbers were as follows: for Liverpool, 1; Worcester, 4; London, 8; Dublin, 10. It was accordingly resolved to meet next year in Dublin.

Sir CHAS. HASTINGS, at the unanimously expressed desire of the meeting, accepted the presidency for 1859, and promised to attend and take the chair at the meeting in Dublin.

## TREASURER'S ACCOUNTS.

In the absence of the Treasurer, Mr. Ley, Dr. LOCKHART ROBERTSON read the following statement of the accounts of the Association of Medical Officers of Asylums and Hospitals for the Insane, for the year 1857-8 :

*Receipts and Expenditure for the year ending July 1, 1858.*

RECEIPTS.		EXPENDITURE.	
	£ s. d.		£ s. d.
By Balance in the hands of the Treasurer, July, 1857 . . . . .	9 5 5	By Treasurer.	
By Balance in the hands of General Secretary . . . . .	5 10 6	1857. July. On account of Annual Meeting . . . . .	2 2 0
By Subscriptions and Donations received by Treasurer . . . . .	131 0 0	Oct. Postage Stamps . . . . .	0 10 0
By Subscriptions to Journal of Mental Science . . . . .	29 18 8	Nov. Asylum Journal, No. 22 . . . . .	29 1 10
By Subscriptions paid to Secretary for Ireland . . . . .	12 12 0	"    "    No. 23 . . . . .	40 0 1
By Subscriptions paid to General Secretary . . . . .	13 18 4	1858. Jan. 250 circulars (for Subscriptions) . . . . .	0 12 6
Total . . . . .	202 4 11	Mar. Asylum Journal, No. 24 . . . . .	30 15 7
By Expenditure . . . . .	148 2 3	"    Lithograph for ditto . . . . .	1 16 6
Balance . . . . .	54 2 8	"    Postage Stamps . . . . .	0 10 0
Being in the hands of Treasurer . . . . .	44 17 10	July. Asylum Journal, No. 25 . . . . .	32 4 9
"    "    Secretary . . . . .	9 4 10	Total . . . . .	137 13 3
		By Secretary for Ireland . . . . .	0 5 0
		By General Secretary . . . . .	6 0 0
		Reporter at Annual Meeting . . . . .	4 4 0
		Circulars and Sundries . . . . .	148 2 3
Audited and found correct.		D. C. CAMPBELL, } Auditors.	
London, July 14, 1858.		HENRY STEVENS, }	

Dr. ROBERTSON pointed out the satisfactory statement of Mr. Ley's accounts, by which it appeared that a balance of about £54 was in the hands of the treasurer, to meet the expenses of the current year.

Dr. ROBERTSON also alluded to the increasing circulation of the journal of the Association. The publishers had furnished him with a statement, by which it appeared that the sale in London of the two numbers for July and October, 1857, had realized £18 18s, and this was quite independent of the sale of the journal to the regular subscribers (non-members,) who were supplied direct from the printer in Exeter. He concluded by moving the adoption of the Treasurer's report, which was carried unanimously.

## ELECTION OF OFFICE-BEARERS, 1858-9.

The following office-bearers for 1858-9, were unanimously elected :—

*President*—Dr. CONOLLY, D.C.L., Hanwell.

*President Elect*—SIR CHARLES HASTINGS, D.C.L., Worcester.

- Ex-President*—DR. FORBES WINSLOW, D.C.L., London.  
*Treasurer*—WM. LEY, Esq., M.S. Co. Asy., Oxford.  
*Auditors*—DR. CAMPBELL, M.S. Co. Asy., Essex ;  
 DR. HARRINGTON TUKE, Manor House, Chiswick.  
*Hon. Secretary (General)*—DR. LOCKHART ROBERTSON, M.S.  
 Co. Asy., Sussex (Hayward's Heath).  
*Hon. Secretary for Ireland*—DR. STEWART, M.S. Dist. Asy.,  
 Belfast.  
*Hon. Secretary for Scotland*—DR. WINGETT, M.S. Roy. Asy.,  
 Dundee.  
*Editor of Journal*—DR. BUCKNILL, M.S. Co. Asy., Devon.

#### TITLE OF JOURNAL.

On the motion of Dr. HARRINGTON TUKE, seconded by Dr. W. A. F. BROWNE, the title of the *Journal* was altered by the omission of the word "Asylum," so as to stand "*Journal of Mental Science, &c., &c.*"

#### CONSTITUTION OF MANAGING COMMITTEE.

Dr. DAVEY then proposed certain alterations in the system of electing the office-bearers, by which he would give each individual member of the Association a more decided control in the matter. He referred to the system followed in the British Medical Association, the Bath and Bristol Association, the Gloucester Medical and Surgical Association, the Medical Society of London, the Harveian Society, &c., where lists of candidates to be proposed for vacant offices were previously sent round to all the members, who marked those who were approved of, and returned the lists. With certain modifications of details this was substantially the course taken in the societies he had mentioned; and he thought a similar system might with advantage be introduced into this Association.

After a long discussion it was resolved on the motion of SIR CHARLES HASTINGS, seconded by Dr. HARRINGTON TUKE, to refer the matter to a committee to report at next annual meeting; the Committee to consist of

DR. DAVEY.	DR. STEVENS.
DR. BUCKNILL.	BOOTH EDDISON, Esq.
DR. HARRINGTON TUKE.	JAMES CORNWALL, Esq.
DR. LOCKHART ROBERTSON.	DR. THURNAM.

The Association then adjourned till three o'clock, at which hour they resumed.

## PRESIDENT'S ADDRESS.

Dr. CONOLLY, the President, then delivered the following address:—

I enter upon the office of President of this Association with much gratification, really rejoicing that the close of my life should be distinguished by the privilege of presiding, in a city endeared to me by all the recollections of a student, over an assembly of men whose pursuits are similar to my own, and whose minds have long been directed to some of the highest branches of professional inquiry, with a view of benefiting their fellow-creatures in the worst of all the woes incidental to our common nature. My only apprehension is, that the encroachments of time, since I first attained medical honours under this collegiate roof, thirty-seven years ago may have made deficiencies in my power of worthily and efficiently filling the office too perceptible.

But I am animated, and pardonably I trust you will think, by finding myself once more in this glorious city, of which the romantic beauty alone must well have repaid any of you, from whatever distance travelling, who never before visited Edinburgh, and to which the fame and memory of a long list of men distinguished in every department of philosophy and literature, and in every branch of the public service, have imparted a sort of hallowed character. Of this character it is honourable to our Scottish friends that they should feel proud; and they may be assured that there is not, in all our Association, nor in all the English part of our island, any educated person who has not learned to connect all ennobling thoughts with the names of their great men—of Buchanan, Robertson, Hume, Adam Smith, Dugald Stewart, Allan Ramsay, Robert Burns, Horner, Macaulay, John Wilson, the faithful depicter of the lights and shadows of Scottish life, and Walter Scott, whom we may almost call the William Shakespeare of Scotland. To this list of illustrious dead, names many in number may be justly added, even without the addition of those of men who gave, and continue to give, eminence to the medical school of Edinburgh. Among those yet living whose names I cannot resist mentioning on this occasion, one is George Combe, whose psychological writings, and their constant tendency to the improvement of education and the general regulation of human character, entitle him to our especial gratitude. Another name, that of HENRY BROUGHAM, is the name of one of the most extraordinary

men of our age, identified with Edinburgh as one of its most distinguished students, and whose early acquirements threw a glory over the college in which we are assembled. As a philosopher, a statesman and a man of science, he is known to us all. He is one whose mind has been indeed described, and without exaggeration, as encyclopædic. But his greatest praise is, that he has devoted a life, now extended to nearly four-score years, and all his vast influence, to the general improvement and advancement of mankind.

The names of the celebrated physicians of Scotland will, no doubt, be remembered by the larger and more general Medical Association, whose meetings will succeed ours. There are, however, two especial recollections in relation to them in which I feel that you will permit me to indulge. These are recollections entwined in my own heart, and in the hearts of several who hear me, with the grateful feelings due from students to preceptors whose lessons, in all the emergencies of professional and varied life, have been usefully remembered. We still honour the memory of Professor James Gregory, who filled the professional chair of medicine in our early days with so much dignity, and whose example taught us to regard and worship truth, and to scorn all the devices and disguises of quackery, and gave, as I believe, a character to the Edinburgh school that has never since left it, and which has even indirectly influenced the whole of the British medical theory and practice all over the world.

I need scarcely mention the second medical recollection, that of one still living among us ; so dear to all who know him is the name of Alison ; so universally recognised is his professional wisdom ; and so admirably—I could almost say, so divinely—are his intellectual qualities blended with the virtues which are the highest attributes of man, and without which mere intellectual gifts are deprived of half their value, and capable of evil as much as of good.

I must not trespass upon you further, even respecting these great men ; but I may add with perfect truth, that the Edinburgh school seems still to maintain its high position. And you already know that in our visit to this city we have still the advantage of meeting many of our professional brethren who are pre-eminently distinguished in every branch of medicine and surgery, and in the collateral sciences ; so that it is not only a gratification, but an honour to find ourselves moving about among them, and becoming personally acquainted with them.

When my thoughts turn towards the asylums for the

insane and their officers, in which our Association makes us more especially interested, I cannot but indulge in the recollection that it was after an accidental visit to the old Glasgow Lunatic Asylum, in 1818, (forty years since!) that I first became impressed with the importance of the study, and of the treatment of mental disorders. From that afternoon I was unconsciously devoted to the insane. After all the years that have since passed, I still look back with pleasure and with respectful admiration to that institution, to which the elegant and accomplished Dr. Cleghorn was then physician, but already far advanced in years. The old building has now long been replaced by a newer and larger, founded and built under the especial direction of the late Dr. Hutcheson, one of the kindest of men, and on the express principle that within its walls no mechanical restraint should ever be introduced. Seeing all that I have since seen, I still remember my walks with good Mr. Drury, the resident medical officer, in 1818 and 1819, through the free wards and pleasant courts of the old Glasgow Asylum!

Edinburgh had not at that time taken a high place as respected the arrangement of its asylums. That for the borough was in every respect wretched; and an asylum then existing at Morningside was rather jealously shut against inquiring students. We have now the satisfaction of associating the name of Morningside, and that of its physician, Dr. Skae, with all that is liberal, and cheerful, and salutary, in the management of the insane. With the character of the Crichton Institution, near Dumfries, that of Dr. Browne can never be disconnected; and the state of all the public asylums of Scotland seems to have been much modified by the example there for many years now presented. If certain defects still exist in Scotland as regards provision for the insane, we have the strongest assurance, in the experience and in the principles of the recently appointed Medical Commissioners, that in a few years not a trace of such defects will remain.

Gentlemen, I will not detain you much longer from the proper business of this meeting. Your assembling together, almost all of you from the scene of your daily labour, yet not for mere holiday or relaxation, but for useful conference and intercommunion, and to further the progress of whatever knowledge and practice may enlarge the means of relieving or removing the disorders of the mind, is most honourable to you. The former meetings of this Association, and the contents of the *Asylum Journal*, have sufficiently proved the liberal feelings by which you are animated, and the indepen-

dence of character by which you are distinguished. You have aided greatly, and now for several years, in advancing both the pathology and the treatment of mental disorders, and have ever shewn a wish to do justice to those who laboured before you, to do your own duty, and to point out what must probably still remain to be done when you can yourselves work no more.

Whatever may be your own ambition, you never fail to look back with grateful feelings to Pinel, who first struck fetters from the lunatic in Paris, when all the rest of the city was under the reign of terror. You respect the name of Esquirol, who followed in the same path, and to whom we are all deeply indebted. You never forget the founder of the York Retreat, but cherish his memory and that of his philanthropic brother, Samuel Tuke, as affectionately, as sacredly, as that of a parent. You acknowledge the great merit and inexhaustible patience of Dr. Charlesworth, through many long years at Lincoln, and the benevolence and energy of his younger colleague, Mr. Gardiner Hill, who brought his plans to completeness, and was the first to declare, boldly and without reservation, against all mechanical restraint. Let us thank the Author of our being—I hope I do so daily—that we have been permitted to follow in the track of great and good men, and that each of us, in his own sphere, has had the privilege of maintaining, of enlarging, of diffusing, and, let us hope, of for ever establishing the merciful principles by which those benefactors of the afflicted in mind will ever remain immortalised.

Still, gentlemen, let us be watchful. Let us carefully consider the point at which we have arrived, and not deceive ourselves as to the possibility of a retrograde motion as respects the treatment of lunatics and the management of asylums. I speak especially of asylums for pauper lunatics in England.

I shall not enter into details, too familiar, I fear, to many of you, which incline me to the opinion that there is a tendency to revert to former negligences. But I must say that I think the general government of our county asylums is evidently and highly defective, and more especially that of our large county asylums near the metropolis of England, to which the provincial asylums look for an example. The governing bodies of these institutions appear to me to entertain an unfortunate jealousy of those who could best assist them: they discourage and, as far as they can, repudiate the aid of the medical officers, and disregard their advice,

restricting their duties and their influence with an apparent want of discrimination between the requirements of the insane and those of mere paupers, or of prisoners in jails. The faults thus occasioned, and the caprices thus resulting, have sometimes been such as could never have been practised, if there had been any authority in the State to enforce proper attention being paid to the proper care and protection of the insane poor. One result of this kind of government of lunatic asylums will, I fear, be that the best educated men of our profession will be found less and less willing to devote themselves to duties which, although among the highest that can devolve upon medical men, are not appreciated. The inducements to devote themselves to the speciality of mental diseases, and to take the superintendence of large asylums, cannot but be lessened by the reflection that they will often be regarded by the governing bodies as little better than inconvenient appendages to the institutions to which they may be appointed. Men peculiarly qualified for the medical duties of asylums, by disposition and by education, are precisely the men to be most disheartened and pained by finding themselves so placed, and will gradually retire from duties not unwillingly transferred to persons of less sensibility, persons of the older school, who, having no claim to influence, will be content not to possess any. This will assuredly be a step in the direction of all the old negligences, and perhaps of all the old brutalities, and of all the old cruelties.

Those whose attention has not been especially attracted to asylum government will suspect me, perhaps, of exaggeration, if not of delusion, in this matter, concerning which I confess an extreme, but I think not an undue anxiety. But I would particularly request your serious attention to the enormities, I deeply regret to have to say, committing by the Visiting Magistrates of the county of Middlesex, who are enlarging their already far too large asylums, adding wing to wing, and story to story, and thus constantly accumulating impediments to any proper system being pursued in them. The works now in progress will make efficient inspection impossible, and leave the patients exposed to violences and accidents which, in turn, will become the pretexts for the revival of strait-waistcoats, and straps, and chains, and gags, and all the horrors of times thought to have gone by.

The mere accumulation of people contemplated in these buildings, who are to be crowded together from underground basement to roof, will be disgraceful to England in this age, even in a sanitary point of view. In some cases

twelve or fifteen hundred lunatic patients, all more or less disordered in bodily health, are to be placed in one building. The frequent impairment of health of both officers and servants of asylums of less magnitude is a matter of common observation ; and the peculiar atmosphere in which they live has the effect, in many cases, of disqualifying them by slow degrees for the mental exertions and the physical toil inseparable from a conscientious discharge of their daily duties. In these monster asylums, effective ventilation of the rooms and galleries, and of the dormitories and separate sleeping apartments, must become more difficult, and perhaps quite impossible. The increased height of the buildings will further exclude air and sunshine from the airing courts ; and the vast extent of gallery and stair to be traversed whenever any ward is to be visited, or any communication from any ward to the surgeries or the kitchen is necessary, must inevitably lead to the frequent neglect of the attentions required by a houseful of helpless people, whose various troubles require various aid at all hours of the day and of the night.

Possibly it may be said that these errors, which I hold to be undeniable, are inadvertently or ignorantly committed by the magistrates composing the committees ; that they are men of humanity and of understanding, and possess much general information, and, being chiefly anxious to maintain a zealous economy, forget the peculiar requirements of persons disordered in mind. But I believe the truth to be, that the errors committed were long ago, and whilst merely under consideration, pointed out by the Commissioners in Lunacy, whose objections were overruled, and whose advice was rejected. The physicians of the establishments are certainly blameless, for the Visiting Justices did not think it important to ask their opinions in the matter at all.

It does not appear that the Commissioners in Lunacy have any power to prevent these things ; and we can but hope that among the expected changes in the lunacy laws it may be given to them. If there already exists any power of the kind in the hands of the Secretary of State, we can scarcely expect that the subject should attract much of his attention ; and the local and political influence of the magistrates will always concur to prevent their being interfered with. The unhappy lunatics must submit, unpitied and unheard ; their mental and bodily health, and even their lives, disregarded.

As some valuable papers are to be read to you at this meeting, and our time is limited to one day, I am anxious not to occupy your attention longer ; but I would beg to recom-

mend to your consideration, as important to all who are connected with institutions for the insane—

1. The means of ensuring a proper position for the officers of public asylums.
2. The desirableness of affording opportunities of clinical instruction to medical students in all our large asylums, during some portion of each year.
3. The propriety of requiring from every candidate for a medical appointment in an asylum, and from medical men desirous of taking the charge of insane persons in private asylums, and in private houses, a certificate of having attended such a course of instruction.
4. The practicability of securing some provision for male and female attendants on the insane, in old age, or when disqualified for further service.

There is but one subject more which I wish to mention on the present occasion. For many years past I have been very desirous to promote increased accommodation, by some means or other, for the insane of the *educated* classes, destitute or almost destitute of pecuniary resources. Applications for help in cases of this description are constantly occurring, from persons of various professions and occupations, who are impoverished by the endeavour to provide for young men and young women, their children, or their relatives, whose resources fail if insanity attacks them, and makes them dependent on their friends. Professional men, clerks in offices, teachers and governesses, officers in the army and navy and their families, poor artists, and various other persons, whose income entirely depends on the exertion of their minds, are too often without any suitable place of refuge when their intellects become even temporarily impaired. Bethlem and St. Luke's are not sufficient to meet the difficulty created by these cases, nor the admirable hospital for the insane near Northampton, nor the excellent institution at Coton Hill. The terms of the cheapest private asylums are often beyond the means of the patients, and the only resource is a county asylum, where they are unavoidably associated with paupers. About twelve years since, strenuous exertions were made in London to supply this deficiency; but although the proposition was not only patronised, but its object actively promoted, by the Earl of Shaftesbury, whose interest in whatever relates to the welfare of the insane is always to be depended upon, it was found impossible to raise sufficient funds. Reflecting often since on this mortifying failure, I have been inclined to think that our views were too ambitious, and that by avoiding the

expense of building it might be quite possible to establish moderate sized asylums for the middle or educated classes, not near London alone, but in several of the counties of England. Certainly, if such establishments could be instituted, they would be the means of relieving many persons of refined education, and accustomed to all the decent comforts or even the elegances of life, from a great aggravation of their sufferings, when unhappily bereft of guiding reason, and unfit for the duties in which they were once honourably, usefully, and even profitably engaged.

This, as well as various other matters, at this time very important to all medical officers of asylums and hospitals for the insane, will, I feel sure, have the advantage of your best consideration during the interval between this and our next meeting.

*Dr. Harington Tuke's Paper on the Diagnosis of General Paralysis.*

Dr. TUKE read a very careful Paper on the Diagnosis of General Paralysis, as illustrated in the case of Sir Henry Meux, so recently before the Courts.

[Dr. TUKE's Paper, in an enlarged form, will appear in an early number of this Journal.]

Dr. SKAE said—I had prepared a Paper to read before the Association, upon the same subject as I now find Dr. Tuke had chosen; and I will not therefore take up your time by reading it, but will content myself with a few general remarks upon the valuable communication which we have had from Dr. Tuke.

I am, I confess, very much inclined to take different ground from Dr. Tuke with regard to this malady, and to regard it as a general paralysis complicated with insanity, rather than as a form of insanity complicated with general paralysis. And I do so for many reasons, but more particularly for this—that the paralytic symptoms are the essential, the pathognomonic signs of the disease, they are constant, some of them are always present; whereas the mental symptoms are sometimes absent; they vary in their character in different cases, and in their progress and termination. I think I have seen cases of clear and progressive general paralysis, in which there has been no mental affection at all up to the period of death, at least nothing beyond a slight impairment of the mental powers, but without the existence of any delusion.