

IRISH DIVISION.

The **SPRING MEETING** of the Division was held at Hampstead, Glasnevin, and Highfield, Drumcondra, on Thursday, April 14th, 1910, by the kind invitation of the Drs. Eustace, who showed the members over Hampstead, and afterwards entertained them at luncheon.

The subsequent meeting was held at Highfield, Dr. H. M. Eustace being voted to the chair, and there were also present: Drs. W. N. Eustace, T. Drapes, H. R. C. Rutherford, J. Mills, James J. Fitzgerald, J. A. Oakshott, R. R. Leeper, and W. R. Dawson (Hon. Sec.). Apologies were received from Drs. W. Graham, C. E. Hetherington, F. C. Ellison, and F. E. Rainsford.

The minutes of the previous meeting were read, confirmed, and signed, and the Hon. Secretary reported on several matters arising out of them, including the position of the question regarding the payment of the Divisional Secretaries' expenses.

A resolution was thereupon proposed by Dr. DRAPES, seconded by Dr. OAKSHOTT, and carried unanimously, urging upon the Council the desirability of coming to a decision on the last-mentioned point without further delay.

Dr. W. R. Dawson was elected Divisional Secretary, and Drs. W. Graham and James J. Fitzgerald representative members of Council for the ensuing year. Dr. R. R. Leeper was nominated as examiner.

The following dates for the meetings of the Irish Division during the ensuing session were agreed on, *vis.*, Saturday, November 5th, 1910, and Thursday, April 27th, 1911. It was decided not to hold a summer meeting in 1911, as it was understood that the Annual General Meeting would take place in Ireland.

Two invitations (from Drs. W. Graham and Hetherington) having been received for the summer meeting on July 7th, 1910, it was unanimously decided to accept with thanks the former, which had the priority in time.

Dr. RUTHERFORD then read a communication, entitled "The Results of a few Leucocyte Counts in Mental Cases," in which he gave his findings in six maniacal and seven depressed cases. The observations were confirmatory of those of other workers, and seemed to indicate that there is a greater tendency to leucocytosis in mania than in melancholia. The paper was discussed by the CHAIRMAN and Drs. DAWSON, MILLS, DRAPES, and LEEPER, and Dr. RUTHERFORD replied.

The HON. SECRETARY read for Dr. ELLISON (who was absent) "Notes on Three Clinical Cases": that of a man who made a practice of kissing the gluteal region of all whom he could reach, having been told by voices that in this way he would cure his wife of piles; that of a man in whose rectum a large number of objects were found which he had swallowed; and a case where, after death, a briar pipe was found in the ileum. Drs. FITZGERALD, MILLS, OAKSHOTT, DAWSON, DRAPES, and the CHAIRMAN spoke.

Dr. DRAPES then took the chair, and Dr. H. M. EUSTACE read the following paper:

A NOTE ON THE PROPHYLAXIS OF INSANITY.

In the first place allow me to express the pleasure we feel in your presence here to-day, and to thank you for your attendance at this Spring Meeting of the Irish Division of the Medico-Psychological Association.

I wish to bring under your notice some brief and imperfect remarks on the possibility of more work being accomplished as regards the prophylaxis of insanity.

Wright says, in the preface to some of his writings, that "the physician of the future will be an immunist." Knowing the progress that bacteriology and its applied science, *vis.*, vaccine-therapy, have made in recent years, he is probably correct, and this transformation may take place in our generation.

In the meantime it is well to encourage all branches of preventive medicine, and to attempt to blot out of existence some of the awful diseases which ravage mankind.

Simple measures often succeed where costly ones fail, *e.g.*, Haffkine's plague antitoxin has done little in India to prevent the spreading of plague, as compared with the highly efficient work performed by domestic cats, introduced into Indian villages, as the natives had noted that where there were no rats there was no plague.

We may be encouraged by our success in dealing with such dirt diseases as

typhus fever and puerperal fever, and the conquest of yellow fever, malaria, and Malta fever. In the veterinary field we note the triumph of the officials, who, by bold measures, have exterminated rabies in the United Kingdom. The obvious remark will be made that it is comparatively easy to stamp out disease in animals by ordering compulsory muzzling and compulsory slaughter of the diseased, but such procedures cannot be adopted with human mammals.

This is quite true, but cannot much be done by compulsory notification of such diseases as pulmonary tuberculosis and syphilis. The former is now a notifiable disease, and we are entitled to hope that its notification, by drawing the attention of the authorities to each case, and by nurses imbuing the poor consumptives with the absolute necessity for taking all the steps necessary to prevent the spread of the "white plague," will in time reduce the appalling death-rate from this disease in Ireland. (Even this year the Registrar-General's figures show an improvement.)

Syphilis is a world-wide disease, and especially poisonous to the nervous system. What physician can assert with an easy mind that a patient, who has been under his treatment for syphilis, is absolutely cured by a certain date? Locomotor ataxia and general paralysis of the insane frequently occur after all tertiary symptoms have cleared away. The problem of the marriage of a man who has at any time suffered from syphilis is frequent; and a great responsibility rests on the physician consulted. One of the most piteous sights in life is the congenital syphilitic infant. If syphilis was made a notifiable disease the patient would certainly feel his moral and physical leprosy more, and, shunning society, would be less likely to marry.

Why should not everyone contemplating matrimony be obliged to undergo a medical examination, and procure a certificate of physical and mental soundness, just as one does when contemplating a life insurance policy? Those who know and feel themselves to be sound would never object to such an examination, but the weakling and vicious might be deterred by the thought of having to submit themselves to the search-light of the medical officer of health.

Our rulers, in all their wisdom, at present make it compulsory for one of the contracting parties in a meditated matrimonial alliance to sleep so many nights in the parish in which the marriage is about to be solemnised, and he has to present a certificate to that effect to the officiating clergyman. Surely this law is worthy of the satire of W. S. Gilbert. Of what real advantage it would be to the health of the nation and the happiness of the bride and groom if they had to produce instead the suggested certificate of perfect health.

As regards "Eugenics," there was an interesting leading article on "Eugenics and Pauperism" in the *Medical Press and Circular* of November 17th, 1909. The editor lamented that no effective steps had been taken to prevent the propagation of lunatic and other diseased and degenerated persons. He referred to the fact that lunatics were often discharged from asylums as "cured," only to return after a few years' interval, during which they have propagated more insane stock. He concluded by recommending that "asylum patients should be kept under such restrictions that would render their procreation of children impossible."

[*Note.*—The writer, I presume, uses the term "asylum" patients to refer to all patients who have been at any time in an asylum, but in my opinion it is the unregistered insane who have not been treated in asylums who bring the largest number of mentally defective children into existence.]

In this connection we may note that the Royal Commission on the Care and Control of the Feeble-Minded state that feeble-mindedness "tends strongly to be inherited"; also in view of the evidence they received of the frequency with which feeble-minded women were admitted to the lying-in wards of the work-houses, to be delivered of illegitimate children, they are of the opinion that the prevention of mentally defective persons from becoming parents would tend largely to diminish the number of such persons in the population. They therefore advise that the mentally defective living at large and uncontrolled, both men and women, should be placed in institutions and kept under efficient supervision so long as may be necessary!

As regards "asylum" patients, we all realise the difficulty of detaining any patient in an asylum who is apparently "recovered," although we feel quite convinced that shortly after the hygienic and disciplinary life of the asylum is removed, many of such cases will most certainly relapse.

Dr. Robert R. Rentoul has had the courage to advocate the "proposed sterilisation of certain degenerates." Already two states in America have adopted his proposal, and it has been brought before the Government in Ontario (Canada).

As regards the abuse of alcohol in the causation of insanity, we all know what a high percentage of cases it is responsible for both directly and indirectly. As Dr. Clouston said in his Morningside report of 1901, "Liberty to drink himself to death or into an asylum was dear to the Briton, but it was an irrational application of the doctrine of liberty to say that every man had the inalienable right to render himself a burden on other people, and a source of degradation and danger to the community."

All children and adolescents should be taught to do without any form of alcohol; and a wise step has been taken in abolishing beer from schools. It is often said by the cynic, "You cannot make a nation sober by Act of Parliament." Very few Parliaments have tried to do so, but remember Norway and Sweden, who, finding themselves in a perilous and rotten condition, owing to the almost universal excess in the use of alcohol, and no restriction on its manufacture, adopted sternly repressive legislative methods about sixty years ago, and have now become comparatively sober nations.

Although the secretary to the United Kingdom Alliance is able to show that in the year 1909 there has been a decrease of £5,000,000 on alcoholic liquors as compared with 1908, the amount consumed in the British Isles is still far too high, and there is more need at the present moment in England for a "drink scare" than a "war scare."

National degeneration increased *pari passu* with the national drink bill up to 1909.

Ford Robertson (in Dr. Clouston's admirable book, *The Hygiene of Mind*) wisely states: "My study of the question forces me to the conclusion that the effects of alcoholic intemperance upon the people of this country are much more grave and far-reaching than has generally been suspected. Most people have seen with any degree of clearness only its most immediate effects. The influence it has upon the race has only been dimly suspected by a few, and they have been derided as ignorant and unscientific. The evidence of science is, I maintain, entirely on their side."

I am sure that many gynæcologists do harm by ordering various forms of alcohol in their treatment of dysmenorrhœa. As a recent writer on this subject neatly put it, "the periodic recurrence of the pain leads to a periodic desire for alcohol, which is taken in increasing doses."

The present Government deserve praise for endeavouring to tackle this grave matter of the Nation's alcoholic intemperance; and although it may not matter to us whether there are ten public-houses in a street or only one, we know that it often makes a difference of ten drinks or one to our weak-willed fellow citizen, who, maybe, is wrestling with his enemy under these adverse conditions.

It is interesting to note here that popular lectures on personal hygiene, temperance, and venereal diseases are now given by the fleet-surgeons in the Royal Navy to the crews; and it is encouraging to find that Dr. B. Leppington (signing himself a member of the International Society for the Prophylaxis of Venereal Disease), in a letter to the *Medical Press and Circular*, points out that the number per 1000 admitted to the Army hospitals suffering from venereal diseases has gradually dropped from 275 in 1885 to 72 in 1907, while the writer states that other statistics, official and unofficial, seem to indicate the same thing, *vis.*, a reduction of these diseases in our population, both civil and military. He points out the influence that doctors have, if they would only use it, and advises the profession "to work on, not as those without hope."

I now come to the medical inspection of school-children. Much valuable work was performed by the recent Royal Commission on the Feeble-minded, and it is to be hoped that their valuable suggestions will be adopted. That the general public are gradually awakening to the importance of this subject is shown by the Government appointing such a commission; and also by the fact that the Third International Congress on School Hygiene will be held in Paris during August this year.

When medical inspection of the board schools in England was determined upon, it was recognised that the duty of treating the defects disclosed must be

undertaken by the State, but the problem was not fairly faced, and as the *British Medical Journal*, in a leading article entitled "A National Emergency," points out, "the central and local authorities were anxious to avoid responsibilities—more especially as they involved expenditure. They turned to existing voluntary hospitals with a view of seeing how much could be got out of them and the medical profession for nothing."

This is altogether wrong, and if the scheme of district school clinics staffed by the local practitioners is carried, they should be highly paid by the State. From a national health point of view, it is much more important to take care of the coming generation than to medically inspect the flotsam of society in our asylums.

Now that the old-fashioned family physician has almost disappeared, I think a great responsibility rests upon the school physicians appointed to the public schools. He has great opportunities of detecting the early symptoms of disease of body and mind, if he is paid sufficiently well to inspect the boys frequently.

This has not been so in the past. Indeed, at my public school you only saw the doctor if you happened to break your neck or developed diphtheria!

"*Obsta Principiis*," as Dr. Clouston truly says, is the most valuable motto in all effectual mental hygiene; and who is in a better position than the school doctor to detect the stigmata of degeneration, the necessity for rest, the appearance of vice, in the various pupils? He should be their mentor as well as their physician, and should give friendly addresses on the problems of sex to the senior classes, who are much troubled by a natural appetite. Such a friend would be a great help to many school boys, and he would without doubt assist to avert the sad breakdown of many adolescents after leaving school.

This, gentleman, brings to a conclusion a discursive paper. If it succeeds in stimulating a discussion it will achieve its object.

DISCUSSION.

Dr. DRAPES said that the paper was highly suggestive. The nineteenth century had been eminent in preventive medicine and hygiene, but mental hygiene had been omitted—Hamlet without the Prince. Medical examination before marriage was good in theory, but stopping marriage would not stop procreation. The public must be educated, and the teaching of the structure and function of the body should commence from infancy. Sterilisation would be even more necessary in improvable cases, those which were discharged quasi-recovered, and these should be given the choice of sterilisation or perpetual detention. He also alluded to the necessity for better teaching of medical men in psychology and psychiatry.

Dr. FITZGERALD expressed his agreement with Dr. Eustace. He knew of a case where a high dignitary of the Roman Catholic Church had used his influence against the marriage of a girl to a man of bad heredity. There were few weak-minded girls who had not been parents, but he did not think sterilisation a feasible measure.

Dr. LEEPER attributed the increase of insanity to the fact that every workhouse was a lunacy manufactory run by State aid. Weak-minded girls ran there to be confined of illegitimate children. As regarded syphilis, where notification had been enforced the disease increased, owing to concealment. Educational methods were the only ones likely to be successful. He quoted cases of a girl who had been four times insane at four deliveries, and another in which the same thing had occurred in five or six consecutive confinements.

The SECRETARY agreed on the whole with Dr. Eustace as to the causative importance of alcohol, though as sole or chief cause he thought it had been over-rated, and did not account for more than 10 *per cent.* of cases or less. As regarded detention, it should be borne in mind that, though an onerous measure at first, if it were strictly enforced the numbers requiring to be so treated would progressively diminish, it might be hoped almost to vanishing point. He concurred, however, in the view that education of the people was the most important remedial measure.

Dr. OAKSHOTT thought that the churches of all denominations could do much to educate the people.

Dr. FITZGERALD mentioned that the young clergy at Maynooth were now lectured on physiology and hygiene.

Dr. EUSTACE made a few remarks in reply.

The meeting terminated with a cordial vote of thanks to the Drs. Eustace for their kind hospitality, and for the pleasant day which had been spent.

SPECIAL MEETING.

A special Meeting of the Division was held, with the sanction of the President of the Association, on Thursday, May 18th, 1910, at the Royal College of Physicians, Dublin. Dr. M. J. Nolan was voted to the chair, and there were also present: Drs. W. Graham, R. R. Leeper, W. Smyth, J. Mills, J. O'C. Donelan, J. M. Redington, T. A. Greene, F. O'Mara, and W. R. Dawson (Hon. Sec.). Apologies were received from Drs. C. E. Hetherington, E. O'Neill, J. A. Oakshott, B. C. Harvey, T. Drapes, and H. M. Eustace.

The HON. SECRETARY explained that it was a matter of common rumour that amongst the applicants for the post about to be vacated by Sir George O'Farrell were men who had had no special training in lunacy, and there was also the possibility that a man might be transferred from some other Government Department. Under these circumstances the meeting had been summoned in haste, as the Quarterly General Meeting of the Association would take place on May 24th, and the Division might wish to ask them to make representations on the subject.

The discussion was opened by the CHAIRMAN, who expressed warm appreciation of Sir George O'Farrell's work, in which all concurred. A general debate followed, in which most of the members joined, and it was finally proposed by Dr. GRAHAM, seconded by Dr. DONELAN, and passed unanimously:

"That the Irish Division of the Medico-Psychological Association would strongly urge the Association at large to represent to the Irish Government the extreme importance, in filling the posts about to be vacated by the Inspectors of Lunatics, of selecting candidates who are thoroughly conversant, by training and experience, with the administration of lunatic asylums and the practical treatment of the insane."

A resolution in somewhat similar terms was proposed by Dr. O'MARA, seconded by Dr. LEEPER, and directed to be sent to all the Irish Members of Parliament.

In view of the fact that this was the first meeting of the Division since the lamented death of His Majesty King Edward VII, a resolution expressing sorrow and sympathy with the Royal Family was proposed by Dr. GRAHAM, seconded by Dr. LEEPER, and passed unanimously in silence.

The meeting terminated.

NOTE.

The mention of Dr. John Gideon Van Millingen in Dr. Bailey's interesting article upon Hanwell Asylum deserves a note on the family. Dr. Bailey characterises Dr. Millingen's period of service in Hanwell as brief and stormy, and Millingen himself did not hesitate to make that known to the public. His father was a Dutch merchant who eventually settled in Westminster. One of his brothers died at the age of fourteen, and was buried in the Abbey Cloisters, the epitaph having been written by William Cowper. In 1790 the family migrated to Paris, and passed through the horrors of the Revolution, after which the brother James went to Italy, and wrote valuable works on antiquities before his death in 1845 in Florence. John repeatedly met the Jacobin leaders in Paris in his boyhood, and after adventurous service in the army he retired with the Waterloo and other medals. He was connected with the Military Asylum at Chatham when appointed to Hanwell, and after his service there he is said to have opened a private asylum in Kensington. He died in London in 1862. He produced various dramatic writings, one of which, "The Illustrious Stranger," is yet sometimes played by amateurs, and also a novel, and various compilations more or less medical in character. His *Aphorisms on Insanity*, and another work on *Mind and Matter*, are not uncommonly found on the lists of secondhand booksellers. Julius Michael Millingen, John's nephew, was also a physician, and is chiefly remembered owing to his connection with Lord Byron, knowledge of whose last hours is principally gained from Millingen's memoirs. He was Court Physician to five successive Sultans of Turkey, and persuaded David Urquhart to establish a Turkish bath in London. He died in 1878 in Constantinople. His son still resides in Dunblane, after a business life spent chiefly in Turkey.—U.

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