

truthful, and well adapted for the general class of medical readers for whom it is intended, being neither too scant nor too full. Dr. Bristowe acknowledges the assistance he has received from Dr. Savage, both in the preparation of the article and in the clinical information obtained during visits to the wards of Bethlem Hospital, which, it is not too much to say is, at the present moment, the acknowledged School of Medical Psychology in this country.

We have scarcely a criticism to make, but there is just one we cannot omit. Dr. Bristowe says at p. 1099, "The reasoning powers are doubtless impaired in all cases of insanity." Yet we read at p. 1104, "It is a fact that the patient may never pass beyond the stage of affective insanity." Again, he admits Hypochondriasis as "a form of melancholia, in which there is mental depression without necessary delusion or impairment of the reasoning powers"—properly a *folie raisonnée mélancolique*. On cases also in which there has been a partial recovery after acute mania, in which, however, "the sensibilities are blunted," and the patient "has lost all the higher and holier impulses," &c., so that there is "a profound change" mentally, Dr. Bristowe remarks, "he retains his reasoning powers," and "he can perhaps reason as acutely as ever" (p. 1116). The passage cited from p. 1099 is doubtless an oversight, and we hope it will be omitted in subsequent editions as incorrect, and certainly inconsistent with the succeeding paragraphs quoted, which are true to nature.

H. T.

The Lunacy Blue-Books.

Thirty-fourth Report of the Commissioners in Lunacy.

The Commissioners in Lunacy here present us with a Report which, as usual, affords unmistakable evidence of a year's painstaking and successful work. It has, however, unfortunately still to chronicle a steady increase in the total number of persons of unsound mind brought under their supervision. And limited consolation only can be derived from the statement that this increase has been altogether confined to pauper patients—the number of private patients showing a considerable diminution—for as the accommodation for patients of the private class who can pay only low rates is very limited, many who would otherwise be main-

tained by their friends in institutions of their own choice are compelled to be placed in county and borough Asylums, where they are either paid for at low charges by their relatives, or maintained partly or altogether by the rates. During the past year this state of things has no doubt been intensified by the continued depression of trade, and by the super-added agricultural distress, which has reacted in so many directions.

According to the annual returns made to the Lunacy Office, the number of lunatics, idiots, and persons of unsound mind on the 1st January, 1880, was 71,191, as compared with 69,885 on the 1st January, 1879—an increase in the year of 1,306. This increase, however, is smaller by 41 than in the previous year, and less by 596 than in 1878. These patients were distributed as shewn in table on opposite page.

There are, in addition, 208 insane persons, so found by inquisition, residing with their Committees.

The statistics of the year show a decrease of 158 private patients, no decrease in this class having occurred since the year 1868; but, as we have pointed out, this probably does not indicate an actual diminution in the number of persons of the private class who have become insane, but lessened ability to pay, and a deficiency of accommodation for private patients of small means. According to the report before us, it has been *immediately* due to a diminished number of admissions, and an increased proportion of deaths. The decrease has been chiefly in the inmates of licensed houses, for, while in county and borough asylums there has been an increase of 8 in the number of these patients, and in establishments of all other classes a decrease of 162, no less than 127 of these latter have been in licensed houses.

Pauper lunatics have increased to a greater extent than in 1878, but their increase of 1,306 is below the average of the last 10 years, in which it was 1,510.

Year by year, since 1872, the decrease in the number of out-door pauper patients has been steadily going on. This year they are fewer by 250, and since 1872 by 1,456.

As the Commissioners remark, this has probably been, in great measure, due to alterations in the law, which have promoted the removal of patients to asylums, and partly to the growing disinclination of guardians to grant outdoor relief. There are, of course, numerous weighty arguments in favour of the policy of the Poor-law authorities in this direction,

Where Maintained on 1st January, 1880.	Private.			Pauper.			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.

In County and Borough Asylums	211	273	484	17,903	21,701	39,604	18,114	21,974	40,088
In Registered Hospitals	1,409	1,293	2,702	81	48	129	1,490	1,341	2,831
In Licensed Houses:									
Metropolitan	1,026	828	1,854	180	428	608	1,206	1,256	2,462
Provincial	745	809	1,554	247	286	533	992	1,095	2,087
In Naval and Military Hospitals and Royal India Asylum	309	19	328	...	...	...	309	19	328
In Criminal Lunatic Asylum, Broadmoor	180	60	230	188	65	253	368	115	483
In Workhouses:									
Ordinary Workhouses	...	...	...	5,126	6,865	11,991	5,126	6,865	11,991
Metropolitan District Asylums	...	...	...	2,080	2,393	4,473	2,080	2,393	4,473
Private Single Patients	186	282	468	...	...	...	186	282	468
Out-door Paupers	...	...	...	2,293	3,687	5,980	2,293	3,687	5,980
Total	4,066	3,554	7,620	28,098	35,473	63,571	32,164	39,027	71,191

but it may reasonably be doubted whether its operation, as affecting the class of persons who can be maintained as out-door pauper lunatics, is an altogether unmixed advantage.

The total admissions of the year were 14,867, of whom 1,576 were transfers. Deducting the latter, a diminution of 279 in the admissions of the year is shown in comparison with 1878.

Excluding the various idiot asylums, as not receiving curable cases, and eliminating the transfers, the total recoveries of the year 1879, as compared with the admissions, gave a percentage of 37·25 for the males, and 43·54 for the females; or 40·50 for both sexes. The deaths of the year, calculated upon the average numbers resident, and still excluding the idiot establishments, were in the ratio of 12·55 per cent. for the males, and 8·93 per cent. for the females, or 10·60 per cent. for both sexes.

These figures differ but slightly from the averages of the last 10 years.

The statistical tables which accompany the Commissioners' report, are of a very elaborate character, and are beginning to afford the basis for many important deductions.

They show that the percentage of paupers to population, which had been steadily decreasing from 1872 to 1878, began again to show a rise in that year, and has since, slowly but steadily increased, although it is still much below the average of preceding years. In 1860 it was 4·24; in 1878 it had fallen to 2·98; while in 1880 it had again risen to 3·31.

They also show that, whereas the proportion of pauper lunatics to paupers has exhibited a fluctuating increase for the last 20 years, and has risen from 3·68 per cent. in 1859 to 7·53 in 1880, the percentage of 1880 is the smallest of any year since 1875.

The proportion of insane to population, which last year was 27·77 in 10,000, or 1 in every 360, this year bears the proportion of 27·94 to 10,000, or nearly 1 in every 357.

The percentages of stated recoveries to admissions, excluding transfers, and of deaths to the average number resident, in the various classes of patients, during the last 10 years, have been as follows:—(See table on opposite page).

Of the total number of 13,101 patients admitted into the three classes of asylums during 1879, the attack of insanity was stated to be the first in 8,487 instances, a proportion per cent. to the total number admitted, of 64·8.

TABLE SHOWING THE PERCENTAGES OF RECOVERIES TO ADMISSIONS, AND OF DEATHS TO THE AVERAGE NUMBER RESIDENT.

	County and Borough Asylums.			Registered Hospitals, excluding Idiot Establishments.			Metropolitan Licensed Houses, excluding Idiot Establishments.			Provincial Licensed Houses, excluding Idiot Establishments.			Naval and Military Hospitals, and Royal India Asylum.			Criminal Asylum, Broadmoor.			Private Single Patients.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
Recoveries	36.01	44.46	40.28	40.06	52.77	46.84	27.26	33.28	30.51	31.14	38.08	34.74	46.49	—	46.41	22.63	41.03	26.09	14.36	15.67	14.95
Deaths	12.96	8.69	10.59	10.37	6.24	8.12	12.93	9.38	11.01	10.70	7.16	8.81	9.25	.66	8.89	2.90	3.22	2.94	7.96	5.81	6.37

The percentages of the assigned causes of the insanity in the 13,101 patients thus admitted are stated to have been as follows :—

	M.	F.	T.
Moral :			
Domestic trouble (including loss of relatives and friends)	3·8	9·5	6·7
Adverse circumstances (including business anxiety and pecuniary reverses)	8·3	3·6	5·9
Mental anxiety and worry (not included under the above two heads) and overwork	6·7	5·7	6·2
Religious excitement	1·8	3	2·4
Love affairs (including seduction)	·9	2·6	1·7
Fright and nervous shock	·9	1·5	1·2
Physical :			
Intemperance, in drink	21·1	7·6	14·2
" sexual	·9	·6	·7
Venereal disease	·8	·2	·5
Self-abuse (sexual)	2·1	·1	1·1
Over-exertion	·5	·4	·5
Sunstroke	2·4	·2	1·3
Accident or injury	5·2	1·3	3·2
Pregnancy	—	1·1	·6
Parturition, and the puerperal state	—	6·2	3·1
Lactation	—	2·1	1·1
Uterine and ovarian disorders	—	3·3	1·7
Puberty	·1	·4	·2
Change of life	—	3·4	1·7
Fevers	·9	·6	·8
Privation and starvation	1·2	2	1·6
Old age	3·3	4·5	3·9
Other bodily disorders	10·3	10·1	10·2

The number of patients in whom a suicidal propensity was stated to exist, admitted into asylums of all classes during the year, was 3,877, giving a percentage of 29·5 per cent. of the total admissions, while the deaths from suicide in those establishments have been only 11, which, of course, have to be spread over, not only the suicidal patients newly admitted, but the whole number of such patients previously under care.

This certainly speaks well for the care and precautions which are exercised by the officials, and it probably bears some close relation to the system of collecting this class of patients into a focus at night, and having them watched by special attendants, a plan of which the Commissioners have been zealous advocates.

The Commissioners give, upon the whole, a good report of the condition of the insane in Workhouses, but they draw

attention to the fact which cannot too strongly or too frequently be adverted to, that in various Unions practices prevail which are in error in opposite directions. They say—

It will be observed that, at the present time, there are a large number of each sex in Workhouses who are classed as of unsound mind, and who are consequently visited by us. There has been, on the whole, considerable improvement in the accommodation and treatment of the classed imbeciles, during the past 10 years, and we can, with pleasure, report that, in a large number of instances, the recommendations made by us have been favourably received by the guardians, and supported by the Local Government Board.

It should be borne in mind that chronic harmless lunatics, or imbeciles, are the only cases that ought to be detained in a Workhouse, and our efforts are always strongly directed against the reception and detention of acute cases. We have often found it necessary to order the removal of decidedly insane patients, who ought, in the first instance, to have had the benefit of asylum treatment; and, in some of the larger Workhouses, we frequently meet with inmates suffering from long-standing melancholia, where the history of the case gives the impression that early treatment might have resulted in cure. The Act of Parliament has clearly defined the duties of both medical officers and parish officials, and it is to be regretted that false ideas of economy, or other reasons, should be allowed to have weight, and a course be pursued which cannot fail of being prejudicial to the patient, and, ultimately, of increasing the number of the incurable insane dependent on the rates.

On the other hand, in many instances an inclination exists to send off to an asylum old chronic cases, because they are a little troublesome and difficult to manage. We thus find in our county asylums many old chronic patients who, under proper supervision, might be well cared for in Workhouses.

We must not be understood to be advocating the removal of all working patients, of a chronic type, from county and borough asylums, as this might lead to serious inconvenience.

Neither do we lose sight of the fact that the experience of medical superintendents of asylums shows, that where patients have been discharged to Workhouses, *where the conditions of proper supervision, cheerful rooms, suitable clothing, a liberal dietary, and the means of bodily exercise do not exist*, they have degenerated rapidly, and have been returned to the asylums as unmanageable.

Still, under suitable arrangements, a large number of the chronic imbecile class might be well cared for in the Workhouses, and room would thus be found in the county asylums for the treatment of recent cases, thus, to some extent, meeting the urgent want of asylum accommodation, which is at present so generally felt.

The Commissioners direct renewed attention to the im-

portant question of securing and retaining the services of suitable attendants, and have issued a circular to the proprietors of licensed houses in their immediate jurisdiction, with reference to the rates of wages and arrangements for the comfort of these persons. The subject is no less difficult than it is important. The qualities of the attendant react with enormous influence upon the patient, especially when of the higher class, and it is, therefore, of the greatest moment that suitable persons should be induced to enter upon, and continue in the service. It is greatly to be desired that some central sources of supply could be established, where they could be trained efficiently, and perhaps be provided with an official license, to be revoked or endorsed upon the commission of any serious offence. The black list, which is kept at the office of the Commissioners, might probably be more practically useful if it were known that a copy of it was sent to the superintendent of every asylum, say once in a few months, if such a course were practicable.

In conclusion, the Report, which affords such abundant evidence of the earnest and very able manner in which the Commissioners continue to discharge their important duties, gives the entries made by them on the occasions of their visits to the county and borough asylums and the lunatic hospitals, and from them we can but gather that, despite the unreasonable and unreasoning clamour which has recently prevailed with respect to the insane and their care, the best assurance is given that, although their treatment may be susceptible of improvement, there is no evidence, in the state of our asylums, of placid contentment with the things that are, but every indication of a progressive advance, which will bear favourable comparison with that which is proceeding in any other department of philanthropic effort.

Twenty-second Report of the General Board of Commissioners in Lunacy in Scotland, 1880.

The Report of the Commissioners for Scotland shows that though there has been an increase of registered insane during 1879, amounting to 27 private and 199 pauper patients, this addition is smaller than in any of the four years immediately preceding. The increase in numbers, it is again pointed out, does not necessarily imply a greater production of lunacy in the country, but is probably mainly due to such causes as