

and but few attendants, it is not to be wondered at that one patient went as far as Mount Thom, one to Lawrence-town, one to Hammonds Plains, one to Preston, two to Dartmouth, one to Newport, and another to Windsor Road. With a single exception, all were overtaken and brought back, and the epidemic appears to have subsided."

It has been pleasant to remark, from the paragraph in the Halifax report above quoted, that the pages of this journal sometimes carry instruction to remote parts of the world; it is by no means the first time that we have had the gratification of being assured of this fact. We indeed receive the strongest assurances from the colonies of the high estimation in which the governors and superintendents of asylums hold the information conveyed to them by this journal, and of which, in their inability to avail themselves of more direct means of information on asylum management, they stand much in need.

*Report of the Cheshire County Asylum.*

This asylum, containing 365 patients, has been enlarged so as to afford accommodation for 510 patients, the full amount of which, however, the visitors hope will not be wanted for eight or ten years to come. To employ the unoccupied portion of the building usefully and profitably, they are determined to take in private patients at the rate of fourteen shillings a week. Mr. Brushfield, the medical superintendent, remarks on the gradual decrease of the curable patients who are admitted into the asylum, which he attributes to the gradual increase of aged and broken down cases which are admitted. We observe that he, as well as several other superintendents, are in expectation that the clause in the new poor-law removal act, which imposes the cost of pauper lunatics upon the common fund of unions, instead of on the parishes where they have settlements, will operate by inducing the local authorities to send cases of insanity to the asylum in an early and curable stage of disease. We are inclined to think that if the clause does operate in this manner it will also have the effect of inducing the local authorities to press upon asylums many chronic cases of aged persons who would otherwise receive relief in union houses, or in their own homes. An octogenarian pauper, in the second childhood of old age, so long as his condition is looked upon as the natural result of senile decay, will receive relief from the funds of his parish; but if the overseers can make out that he is a lunatic, and obtain his admission into the asylum, they will shift the charge of maintaining him from their own local rates to the general fund of the union. Those who are best acquainted with the motives under which overseers and guardians generally determine to act, will be able to foretell whether there will now be no tendency to press patients into the asylum, not for the sake of any benefit they may receive there, but with the penny-wise motive of saving the parish rates. We by

no means object to this clause in the poor removal Act, and, indeed, we think it a just and good one, and one which, fairly carried into execution, will work well; but the tendency to work it, in the manner we have pointed out, will require to be carefully watched.

*Report of the Lunatic Asylum for Salop and Montgomery.*

Dr. Oliver mentions that in this asylum the power of the visitors to grant allowances to patients out on trial, under the seventy-ninth section of the Asylums Act, has been largely resorted to, and with the best effects. He says that 236 patients have at various times been sent out on trial, most of whom have been assisted by the allowance ordered by the visitors. In only forty-one of these cases has the experiment failed; by which we suppose Dr. Oliver to mean that in only this number of cases, patients, who have been sent out a month on trial, have not been able to remain out permanently. A difficulty has, however, unfortunately arisen which threatens to prevent the continuance of Dr. Oliver's practice of putting in force the powers of this seventy-ninth section. He says that the parish authorities have up to a late period made no objection to the payment of money for the relief of patients going out of the asylum on trial, but that recently they have asserted that no money can be legally advanced for this purpose beyond the first week's instalment, except an officer of the asylum shall assume the office of relieving officer, and pay the allowance to the patient or his friends every week during the period of the patient's experimental absence from the asylum, which is usually four weeks.

Dr. Oliver does not tell us whether, up to the present time, the parish authorities have themselves consented to be the medium through which the payment should be made, and that their objection would, therefore, mainly apply to the medium, and not to the period of the payment. We think they would be so far right, and that the proper person to make the payment is undoubtedly an officer of the asylum. But there is nothing in the act to say that the payment shall be made every week or every month. We remember an instance in our asylum, in which a recovered patient, who had got his livelihood by teaching, was maintained out of the asylum on trial for three months, during which he gathered pupils and self-confidence, and has supported himself ever since, whereas, if left without aid, he would probably by this time have become a chronic lunatic. In his case he appeared in person, and received his allowance once a month, and we have no doubt the visitors of an asylum have the full power to make an advance of this kind for a month, or for any other period which they may think right; the words of the act being, "It shall be lawful for such visitors to make such allowance to such last-mentioned person, not exceeding what would be the charge for such per-