imagine someone quite properly asking what results of a tangible nature had been achieved by them. It might be asked, for instance, "Has insanity decreased? Are we any nearer a knowledge of its nature, its causes, or a method of curing it?" He feared none of these questions could be answered in the affirmative. But he would ask them to consider three of the great advances and reforms in medicine and surgery—vaccination by Jenner, chloroform by Simpson, antiseptics by Lister. These discoveries did not abolish disease, but they diminished some of its most loathsome and most horrible features to the irreducible minimum. It was exactly the same thing that had been achieved by reforms in the care of the insane. By the hospitalisation of asylums, skilled nursing, open-air treatment, open-air work, and as great an extension of liberty as was consistent with actual safety, features that formerly were loathsome enough had become not unpleasant to look upon, suffering had been relieved, and life under abnormal conditions had been rendered more endurable. (Applause.)

Of the nature and causes of certain forms of insanity, those who had devoted their lives to investigation would be found most ready to admit how little was really known. Although insanity was not decreasing, although the recovery-rate in mental hospitals was very slightly but perceptibly decreasing, and although no preventive or curative measures had as yet been devised to combat it, the prospects were never more hopeful than at the present time. Throughout the whole field of scientific medicine constant advances were being made, many of them having a bearing on their subject. Some day—it might not be in their time—a light would be thrown upon problems which were now obscure. Even when that day came problems would remain presenting themselves, as now, under two aspects—a constant and a variable one. The constant was the insoluble problem of life; the variable was the view they chose to take of it. From their views of life all their civilisation had proceeded. It was the same with insanity. The constant was the problem of its nature and causes. From the variable had proceeded all the advances and reforms in its treatment, which had resulted in Scotland in such a uniformly high standard of excellence. (Applause.)

On the motion of Dr. Marr, a vote of thanks was accorded to the chairman; and on the call of Mr. A. D. Woop acknowledgment was made of the services of Dr. R. B.

On the motion of Dr. MARR, a vote of thanks was accorded to the chairman; and on the call of Mr. A. D. Wood acknowledgment was made of the services of Dr. R. B. Campbell, medical superintendent, Stirling District Asylum, Larbert, who had acted as hon. secretary and treasurer.—Scotsman, June 9th, 1922.

PSYCHIATRY IN AUSTRALIA.

SIR JOHN MACPHERSON, C.B., Edinburgh, who lately retired from the post of Commissioner of the Board of Control for Scotland, has been offered, through the Agent-General for New South Wales, and has accepted for a period of three years, the post of Professor of Psychiatry in the University of Sydney. This Chair is the first of its kind in any university in Australia.

AMERICAN PSYCHIATRIC ASSOCIATION.

At the last meeting held at Boston, 1921, the American Medico-Psychological Association changed its name to the American Psychiatric Association. At the same meeting the Journal of Insanity became the American Journal of Psychiatry.

LONG GROVE MENTAL HOSPITAL, EPSOM.

The charges made by a witness against the staff of one of the most up-to-date mental hospitals in the United Kingdom, before the Departmental Committee appointed by the Ministry of Health to consider the allegations made against asylum administration contained in Dr. Lomax's Experiences of an Asylum Doctor, were sown broadcast by the Press, but, carrying out its usual inconsiderate attitude to mental hospital employees, the same publicity has not been given to rebutting evidence.

We are glad, therefore, to be able to record that at a sworn inquiry held by the Board of Control on April 24th and 25th, 1922, into these allegations, Long Grove Mental Hospital and its medical and nursing staff emerged triumphantly. The Commissioners, after a very searching investigation, came to the conclusion that the charges made as to cruelty against the attendants in the wards were untrue and had no foundation in fact. Referring generally to the allegations they conclude their report by stating—"Our task has been to decide whether his allegations are true, and as to their falsitude we have no shadow of doubt." We regret that the exigencies of space do not permit of us reproducing in its entirety this most interesting and instructive report.

OBITUARY.

JOHN TURNER, M.B., C.M. Aberd.

JOHN TURNER was born at Portsmouth on March 11th, 1860. He was the eighth child in a family of nine. One of his brothers, Sir George Turner, became famous for his work on leprosy and other diseases. He was at one time M.O.H. for Portsmouth, and afterwards became M.O.H. for the Transvaal and Medical Superintendent of the Leper Asylum at Pretoria. Turner graduated in Medicine at Aberdeen in 1883, and soon afterwards became a medical officer at Brentwood Asylum, in which institution he spent the whole of his professional career. During the greater portion of his service he occupied the position of Assistant Medical Officer, and succeeded the late Dr. George Amsden as Medical Superintendent in 1910. He became a member of the Medico-Psychological Association in 1890.

Asylum, in which institution he spent the whole of his professional career. During the greater portion of his service he occupied the position of Assistant Medical Officer, and succeeded the late Dr. George Amsden as Medical Superintendent in 1910. He became a member of the Medico-Psychological Association in 1800. Turner had the spirit of the true scientist. He was extremely modest, had no desire for publicity, sought no honours, and was quite free from the modern disease of self-advertisement. He loved knowledge for its own sake, and was a patient, accurate and zealous scientific investigator. His passion for research soon became evident, and in 1888 we find what appears to be his first contribution to our Journal—a record of a case of post-febrile mental stupor. His investigation of this case reveals his unswerving adherence to the biological methods of research; he had but little sympathy with the modern psychological trend in psychiatry. The bibliography appended to this notice will indicate in some slight measure Turner's unflagging industry. These papers only include his contributions to the Fournal of Mental Science. He wrote many others, and was a valued contributor to Aldren Turner's well known work on Epilepsy.

Dr. J. C. Shaw, of Goodmayes Asylum, an intimate friend of Turner, has supplied the following personal details of his character and interests: "With Dr. Turner others always came first; he was kindness itself to all classes and was much beloved by his patients and staff. There was hardly a subject on which he could not converse; he was a great reader of the classics and of fiction—especially detective stories. He never wasted a minute; he spent hours in the post-mortem room and the laboratory, but nevertheless knew all about his patients. He had numerous hobbies; he was an enthusiastic but not very competent golfer, a keen motorist, a skilled photographer and an antiquarian. During his later years he devoted much attention to antiquarian pursuits; he used his motor very largely to survey Essex for the purposes of his hobby, and this was his chief interest after he retired from Brentwood. He was especially keen on the "windmills" of Essex and had some intention of publishing a book on the subject. He left all his books, MSS. and other materials to the Southend-on-Sea and District Antiquarian Society, of which he was one of the founders."

Dr. Turner was not a strong man, and his extensive scientific contributions are all the more remarkable from the fact that he had to battle against ill-health for the last twenty years. As long ago as 1904 he was taken seriously ill when attending a congress in Canada as a delegate from England. It was hoped that after the severe illness which had brought about his retirement had cleared up, he would have had many years of rest and leisure. This was not to be, however, and he died on March 6th, 1922. Dr. Turner was married and his widow survives him, but he had no children.