

his personal experience, the author discusses the advantages and disadvantages of the system. He thinks the consciousness that they are earning money and that they may aid their families is of excellent effect with certain patients; on the other hand, many of the insane, notably the imbeciles and the alcoholics, misunderstand their position—think they do not receive a just wage, and are discontented. On the whole, the author thinks that the drawbacks outweigh the advantages, and the same opinion seems to be entertained by the majority of asylum superintendents in Austria-Hungary and Germany. Dr. Berze suggests that the present system in Austria be abrogated, that working patients be rewarded, not by payment in money, but by special privileges, and that the money value of their labour, estimated as a whole and in accordance with the old standard, be assigned to a common fund for the relief of the necessitous relatives of patients and for the aid of the patients themselves on discharge. The distribution of this fund should be at the discretion of the asylum physician. This more communistic method would secure, among other advantages, that help should be given to the cases that most need it, viz. acute curable patients, who on the old individualist system would receive little, as they are precisely the cases least capable of performing remunerative work.

In Kierling-Gugging the experiment of letting the patients hire out as labourers has also been tried, but has been abandoned owing to the complaints of unfair competition with free labour.

W. C. SULLIVAN.

*The Boarding-out of Lunatics in Dun-sur-Auron [Die Familienpflege in Dun-sur-Auron]. (Psychiat. Wochens., No. 1, 1900.) Paetz.*

This is an interesting article on the subject. Full details of the housing and supervision of the patients are given, with a general description of the whole system. This has been in actual work since 1892, and in March, 1899, some 700 patients were under treatment in Dun Levet, and the surrounding districts. Up to the present, women only have been thus cared for. The no-restraint system has throughout been maintained. Senile dementia is the commonest form of insanity among the patients, and with the organic dementias constitutes some 45 per cent. of all the cases. Patients with epileptiform seizures, with contractures, and even with hemiplegia are successfully cared for in this way. It is interesting to learn also that suicidal cases can also be treated on this plan, and, indeed, that the average of suicides is rather under that of ordinary asylum statistics. HARRINGTON SAINSBURY.

*Epilepsy modified by Treatment and Environment, with some Notes of Two Hundred Cases. (Alien. and Neur., Jan., 1900.) Barr, M. W.*

Dr. Barr is very sceptical as to ultimate positive cure of idiopathic epilepsy, though he gives the statistics of the Bielefeld and Craig colonies, which record some 6 to 7 per cent. of cures. He is not impressed by the results of surgical interference. Of the powers to

ameliorate the condition of epileptics he has no doubt, and whilst laying stress on the great value of the colony system, of which Bielefeld is the most striking instance, he does not despise drugs, among which he selects bromides combined with arsenic as most effective. *Solanum carolinense*, *Eupatorium perfoliatum*, and *hydrastin* have failed in his hands to give any good results. Nitrate of silver proved beneficial in one case for a time. In anæmic cases, he finds arsenic combined with iron and bromide efficacious.

HARRINGTON SAINSBURY.

*The Bromide Sleep: a New Departure in the Treatment of Acute Mania.* (*Brit. Med. Journ.*, Jan. 20th, 1900.) *Macleod, N.*

In 1897, and again in 1899, Dr. Macleod drew attention to a new method of employing the bromides as sedatives. His method might be described as that of the massive dose, two drachms of the drug being given in half a tumbler of water every two hours (during the day) till an ounce is given. On the second day a similar amount is given in the same way, and this may suffice to induce a sleep lasting from five to nine days. During this sleep the patient is not so deeply unconscious that he cannot be roused to micturate, or for the bowels to act, or for the administration of food; but left to himself he would starve, and the organic functions work unnoticed. Feeding must be rigorously maintained, and a tumblerful of milk every two hours up to seven tumblerfuls will suffice to maintain nutrition. Following the sleep is a gradual return of consciousness; this takes some fourteen days, the whole treatment lasting some twenty-one to twenty-four days.

HARRINGTON SAINSBURY.

*Psychical Treatment of a Case of Delusional Insanity—Zwangsirresein* [*Traitement psychique d'un cas de folie délirante*]. (*Rev. d'Hyp.*, May, 1900.) *Städemann, H.*

The case related is that of a man, æt. 30 years, without nervous heredity. As a boy, he was given to speculations, and much troubled concerning the nature of the deep problems of life; but as time passed he became tormented with trivial thoughts—the fate of a fly in his room, of a bit of match on the floor, of a spot of grease dropped from a candle, etc., etc.—amounting to painful obsessions. A cure rapidly followed treatment by hypnotic suggestion—two daily *séances* for fourteen days. Fifteen months later he remained well.

H. J. MACEVOY.

*Hysterical Polyuria and Suggestion* [*La polyurie hystérique et la suggestion*]. (*Rev. d'Hyp.*, May, 1900.) *Souques.*

Although rare, hysterical polyuria is occasionally met with. The amount of urine passed may be four, five, eight—up to twenty-five litres a day. Its pathogeny is still obscure. The diagnosis is easy, for although in a given case hysterical stigmata may be absent, the polyuria is of hysterical origin, when, as Babinski has shown, it may be made to vary by suggestion; hence the line of treatment is clearly indicated