

The Progress of Psychological Medicine since the time of Dr. Caius: being the Thurston Speech for 1862. By C. LOCKHART ROBERTSON, M.B. Cantab., &c. &c. &c.

(Read in the Chapel of Gonville and Caius College, Cambridge, on Dr. Wendy's Commemoration Day, May 12th, 1862.)

THERE is no branch of the healing art in which modern medical science can point to greater results than in that which concerns itself with the care and treatment of mental disease—none which has made such progress since the time of our third and greatest founder.

Dr. Caius was in the height of his fame and practice when Henry VIII, in 1547, granted the revenues of the suppressed priory of S. Mary of Bethlehem to the City of London, for the reception of their lunatics, being the first authentic record we possess of the foundation in England of a hospital specially devoted for the reception of persons of unsound mind. It is, therefore, in the treatment of the insane in this and similar asylums that I propose tracing the progress made, since 1547, in the theory and practice of psychological medicine.

If I claim for this department of medicine the great advances which it has made since the days of Dr. Caius, I am also bound to admit of how recent origin this progress is. Indeed, it is only within our own generation—I might almost say, since the year 1839, when Dr. Conolly presented his first report to the Visitors of the Hanwell Asylum—that the system of non-restraint—on which all advance, past and future, in the treatment of the insane must be based—has been recognised as of universal application.

“Nothing, in fact,” says Dr. Conolly, “is more difficult to account for than the long neglect, in communities calling themselves civilised, of those afflicted with a malady so much the more dreadful than other maladies, that, before it destroys life, it may be said to destroy all that makes life valuable or desirable. No malady effects such wide destruction, or creates so much and such varied distress. It extinguishes knowledge, confuses eloquence, or buries it in everlasting silence; it lays waste all accomplishments; renders beauty itself painful or fearful to behold; whilst it breaks up domestic happiness and perverts or annihilates all the habits and affections which impart comfort, and joy and value to human existence. Yet nothing is more certain than that this complicated misery, including every other form of misery and mental suffering, has been not only the subject of neglect, but of most general abuse and cruelty in all ages, and even down to the times in which we live.”

The Hospital of S. Mary of Bethlehem, which, according to Stowe, as edited by Strype (little or nothing, save the name, occurs in the earlier editions), stood in Bishopgate Ward without the city

wall, in what was then open country, was first founded by Simon FitzMary, one of the sheriffs of London, in the year of our Lord 1246.

The original deed of gift sets forth a grant of his lands in Bishopgate without, to Godfrey, Bishop of Bethelam, and to his successors, and to the chapter of the Church of Bethelam, "to make there a priory, and to ordain a prior and canons, brothers, and also sisters, when Jesus Christ shall enlarge his grace upon it. And in the same place the rule and order of the said Church of Bethelam solemnly professing which shall bear the token of a starre openly in their copes and mantles of profession, and for to say divine service there for the soules aforesaid, and all Christian soules and specially to receive there the Bishop of Bethelam, canons, brothers, and messengers of the Church of Bethelam for evermore, as often as they shall come thither."

King Henry VIII gave this house to the City of London; they converted it to a house or hospital for the cure of lunatics. "This hospital (says Stowe) stood in an obscure and close place, near unto many common sewers, and also was too little to receive and entertain the great number of distracted persons, both men and women." The site of old Bethlehem is now occupied by Bethlem Court, off Bishopgate Street.

In 1675 the second Bethlehem Hospital was built in Moorfields. Stowe speaks of it as a stately and magnificent structure, "containing in length, from east to west, 540 feet, and in breadth 40 feet, besides the wall which encloseth the gardens before it, which is neatly ordered with walks of freestone round about, and grass plats in the middle. And besides this garden there is at each end another for the lunatic people to walk in for their refreshment when they are a little well of their distemper; this wall is in length 680 feet, and in breadth 70 feet, at each end being very high; and that part fronting the fields hath iron gates in several places of the wall, to the end that passengers, as they walk in the fields, may look into the garden. This large fabric is built of brick and freestone; the gate or entrance all of stone, with two figures of a distracted man and woman in chains (a curious piece of sculpture) over the gate. And in this, as well as in the building, the architecture is good. It hath a large cupola with a gilded ball, and a vane at the top of it, and a clock within, and three fair dials without. And behold, here is a map or prospect of the building fronting the fields."

Stowe proceeds to give an account of the general management of the hospital, from which I would gather, that in the earlier days of new Bethlehem—*i.e.*, in the latter part of the seventeenth century—a more humane system of treatment was pursued there than in the following century.

Besides the in-door patients, the governors of Bethlehem had out-

door patients or pensioners, who bore upon their arms the licence of the hospital. It was not until 1675 that this licence was in the 'London Gazette' thus formally withdrawn :

"Whereas several vagrant persons do wander about the City of London and counties, pretending themselves to be lunaticks under cure in the Hospital of Bethlehem, commonly called Bedlam, with brass plates about their arms, and inscriptions thereon. These are to give notice that there is no such liberty given to any patient kept in the said hospital for their cure, neither is any such plate, as a distinction or mark, put upon any lunatick during their time being there, or when discharged thence. And that the same is a false pretence to colour their wandering and begging, and to deceive the people, to the dishonour of the government of that hospital."

These out-patients, or discharged pensioners of Bethlehem Hospital, have acquired an undying celebrity through Edgar's feigned insanity, to save his life, as a bedlam beggar.

The figure is evidently drawn from life :

"Whiles I may 'scape
I will preserve myself: and am bethought
To take the basest and most poorest shape
That ever penury in contempt of men
Brought near to beast: my face I'll grime with filth,
Blanket my loins; elf all hair in knots
And with presented nakedness out-face
The winds and persecutions of the sky.
The country gives me proof and precedent
Of Bedlam beggars who with roaring voices
Strike in their numb'd and mortified bare arms
Pins, wooden pricks, nails, sprigs of rosemary;
And with this horrible object from low farms,
Poor pitting villages, sheep cotes, and mills,
Some time with lunatic bans, some time with prayers,
Enforce their charity."

D'Israeli, in his 'Curiosities of Literature,' devotes a chapter to the "Tom o' Bedlams," as these patients were called, and to which I would refer for further information.

"In consequence of the limited resources of the hospital," he says, "the governors relieved the establishment by frequently discharging patients whose cure might be very equivocal. Harmless lunatics thrown thus into the world, often without a single friend, wandered about the country chanting wild ditties, and wearing a fantastical dress to attract the notice of the charitable, on whose alms they lived. They had a kind of costume, which I find described by Randle Stowe, in a curious and extraordinary work ('The Academy of Armoury')—'The bedlam has a long staff, and a cow- or ox-horn by his side; his clothing fantastic and ridiculous; for, being a madman, he is madly decked and dressed all over with ribands, feathers, cuttings of cloth, and what not, to make him seem a madman, or

one distracted, when he is no other than a wandering and dissembling knave.' This writer here points out one of the grievances resulting from licensing even harmless lunatics to roam about the country; for a set of pretended madmen, called *Abram men*, a cant term for certain sturdy rogues, concealed themselves in their costume, covered the country, and pleaded the privileged denomination when detected in their deprivations."

Steele, in the 'Tatler,' (June 18, 1789,) gives us a glimpse of how things in his day went at Bethlehem. "On Tuesday last (he says) I took three lads who are under my guardianship a rambling in a hackney coach, to shew them the town; as the lions, the tombs, Bedlam, and the other places, which are entertainments to raw minds, because they strike forcibly on the fancy." Again, in 'The World,' June 7, 1753, there is a paper by Moore, the editor, on the shameful practice of exhibiting lunatics in Bedlam, from which I make the following extract:

"To gratify the curiosity of a country friend, I accompanied him a few weeks ago to Bedlam. In one cell sat a wretch upon his straw, looking steadfastly upon the ground in silent despair. In another, the spirit of ambition flashed from the eyes of an emperor, who strutted the happy lord of the creation. Here a fearful miser, having a fancy, converted his rags to gold, sat counting at his wealth, and trembling at all who saw him. Here the prodigal was hurrying up and down his ward, and giving fortune to thousands. On one side, a straw-crowned king was delivering laws to his people, and on the other, a husband, mad indeed, was dictating to a wife that had undone him. Sudden fits of raving interrupted the solemn walk of the melancholy musician, and settled despair sat upon the pallid countenance of the love-sick maid. * * * * I am sorry to say it, curiosity and wantonness, more than a desire of instruction, carry the majority of spectators to this dismal place. It was in the Easter week that I attended my friend there, when, to my great surprise, I found a hundred people at least, who, having paid their twopence a-piece, were suffered, unattended, to run rioting up and down the wards, making sport and diversion of the miserable inhabitants—a cruelty which one would think human nature hardly capable of! Surely if the utmost misery of mankind is to be made a sight of for gain, those who are the governours of this hospital should take care that proper persons are appointed to attend the spectators; and not suffer indecencies to be committed, which would shock the humanity of the savage Indians. I saw some of the poor wretches provoked by the insults of this holyday mob into furies of rage; and I saw the poorer wretches, the spectators, in a loud laugh of triumph at the ravings they had occasioned."

So also Mr. Pepys enters in his diary, "Stept into Bedlam, where

I saw several poor miserable creatures in chains; one of them was mad with making verses."

Hogarth's eighth picture in the "Rake's Progress" (at this moment in the Great Exhibition) drawn in 1735, and retouched in 1763, is evidently a sketch from the wards of old Bedlam. The ankle chains are on the rake who is dying in his wife's arms, the physician leaning over them; in one of the cells is seen a naked figure on a straw bed, the wrist-chains hanging over the bedstead; a crowned king sits in another cell; the mad astronomer is in the centre of the picture, while the cells are only dimly lighted by the small, unglazed high window, placed near the roof window—just as they were in the present Bethlehem so recently as in 1852.

"I have sometimes (says Charles Lamb) entertained myself with comparing the 'Timon of Athens' of Shakespeare, and Hogarth's 'Rake's Progress' together. The story, the moral in both is nearly the same. The wild course of riot and extravagance ending in the one with driving the prodigal from the society of men into the solitude of the deserts, and in the other with conducting the rake through his several stages of dissipation into the still more complete desolations of the madhouse, in the play and in the picture are described with almost equal force and nature. The concluding scene in the 'Rake's Progress,' is perhaps superior to the last scenes of 'Timon.' If we seek for something of kindred excellence in poetry, it must be in the scenes of Lear's beginning madness, where the king and the fool, and Tom-o-Bedlam, conspire to produce such a medley of mirth checked by misery, and misery rebuked by mirth—where the society of those 'strange bed-fellows' which misfortunes have brought Lear acquainted with, so firmly sets forth the destitute state of the monarch; while the lunatic bans of the one and the disjointed sayings, and wild but pregnant allusions of the other, so wonderfully sympathise with that confusion which they seem to assist in the production of, in the senses of that 'child changed father.'

"In the scene in Bedlam which terminates the 'Rake's Progress' we find the same assortment of the ludicrous with the terrible. Here is desperate madness, the overturning of originally strong thinking faculties, at which we shudder, as we contemplate the duration and pressure of affliction which it must have asked to destroy such a building; and here is the gradual hurtless lapse into idiocy of faculties, which, at their best of times never having been strong, we look upon the consummation of their decay with no more of pity than is consistent with a smile. The mad tailor, the poor driveller that has gone out of his wits (and truly he appears to have had no great journey to go to get past their confines) for the love of 'Charming Betty Careless'—these half-laughable, scarce-pitiable objects, take off from the horror which the principal figure would of itself raise, at

the same time that they assist the feeling of the scene, by contributing to the general notion of its subject :

“ ‘Madness, thou chaos of the brain,
 What art that pleasure giv’st and pain?
 Tyranny of fancy’s reign!
 Mechanic fancy that can build
 Vast labyrinths and mazes wild,
 With rule disjointed, shapeless measure
 Fill’d with horror, fill’d with pleasure!
 Shapes of horror that would even
 Cast doubt of mercy upon Heaven,
 Shapes of pleasure that but seen
 Would split the shaking sides of spleen.’

[*Lines inscribed under the Plate*].

“ It is carrying the comparison to excess, to remark that in the poor kneeling weeping female, who accompanies her seducer in his sad decay, there is something analogous to Kent or Caius as he delights rather to be called in Lear—the noblest pattern of virtue which even Shakespeare has conceived—who follows his royal master in banishment, who had pronounced *his* banishment, and, forgetful at once of his wrongs and dignities, taking on himself the disguise of a menial, retains his fidelity to the figure, his loyalty to the carcass, the shadow, the shell, the empty husk of Lear.

“ The Rake of Hogarth, when he is the madman in the Bedlam scenes, is a face which no one that has seen can easily forget. There is the stretch of human suffering to the utmost endurance—severe bodily pain brought on by strong mental agony, the frightful obstinate laugh of madness—yet all so unforced and natural that those who never were witness to madness in real life, think they see nothing but what is familiar to them in this face. Here are no tricks of distortion, nothing but the natural face of agony. This is high tragic painting; and we might as well deny to Shakespeare the honours of a great tragedian, because he has interwoven scenes of mirth with the serious business of his plays, as refuse to Hogarth the same praise for the two concluding scenes of the ‘Rake’s Progress,’ because of the comic lunatics he has thrown into the one, or the alchemist that he has introduced in the other, who is paddling in the coals of his furnace, keeping alive the flames of vain hope within the very walls of the prison to which the vanity has conducted him, which have taught the darker lesson of extinguished hope to the desponding figure who is the principal person of the scene.”

“ The Report and Minutes of Evidence from the Committee appointed to consider of provision being made for the Better Regulation of Mad-Houses in England (ordered by the House of Commons to be printed 11th July, 1815),’ including as it does a full inquiry into the condition of old Bethlehem, at Moorfields, (new Bethlehem was just then building), will enable us to follow the history of that metro-

politan asylum, and thus obtain, doubtless, a fair sample of what asylums in England, even in 1815, were; and so shall we better be able to judge of the progress now gained in this department of medicine.

Mr. Wakefield gives evidence of a visit he made to Bethlehem, on the 2nd of May, 1814, in company with one of the governors and Mr. Western, M.P. for Essex. Attended by the steward of the hospital and a female keeper, he visited the women's galleries. One side of the room (he informed the committee) contained about ten patients each chained by one arm, or by the wall, the chain allowing them merely to stand up by the bench or form fixed to the wall, or to sit down on it. The nakedness of each patient was covered by a blanket-gown only; the blanket-gown being a blanket formed something like a dressing-gown with nothing to fasten it with in front; this constituted the whole covering; the feet even were naked. Many of the patients at this visit were found locked up in their cells, naked, and chained on straw, with only one blanket for a covering. One who was in that state by way of punishment, the keeper described as the most dissatisfied patient in the house. She talked coherently, complained of the want of tea and sugar, &c., &c.

In the male wing these visitors found six patients chained close to the wall, five handcuffed, and one locked to the wall by the right arm as well as by the right leg; he was very noisy; all were naked, except as to the blanket-gown, or a small rug on the shoulders, and without shoes. The nakedness of the patients and the mode of confinement gave this room (said the witness) the complete appearance of a dog-kennel. They saw a quiet, civil man, a soldier, a native of Poland, brutally attacked by another soldier, the keepers informing them that he always singled out the Pole as an object of resentment, and that there was no means of separating these men except by locking one up in solitary confinement. In the men's wing were about seventy-five or seventy-six patients, with two keepers and an assistant, and about the same number of patients on the women's side; those of the patients who were not walking about or chained in the side-rooms were lying "stark naked" upon straw on their bedsteads, each in a separate cell, with a single blanket or rug in which the patient usually lay huddled up as if impatient of cold, and generally chained to the bed-place, of the shape of a trough; about one-fifth were in this state or chained in the side-rooms. It appeared that the weak patients, and all who were inclined to lie abed, were allowed to do so from being less troublesome in that state than when up and dressed.

The physician, according to the steward's evidence, attended but seldom—"I hear he has not been round the house but once these three months." The apothecary attended for about half an hour daily. In certain months of the year particular classes of the patients were "physicked, bathed, bled, and vomited at given periods." The

patients, said Dr. T. Monro in his evidence, are ordered to be bled about the latter end of May or the beginning of May, according to the weather; and after they have been bled they take vomits once a week for a certain number of weeks; after that they are purged. That has been the practice invariably for years (said Dr. Monro) long before my time; it was handed down to me by my father, and I do not know any better practice.

A male keeper (the apothecary reluctantly witnessed), was appointed to the service of the refractory female patients. One female patient he also admitted had been pregnant twice during the time she was in the hospital.

The iron-barred windows of the cells, the steward stated, were not generally glazed, but closed only with a shutter. There was no warm bath in the asylum, and the one cold bath was so out of the way that it was rarely used.

The straw in the cells and beds was changed once a week, unless very wet; the patients in large numbers were locked by the hand to the bed at night. There was no night-watch in all the asylum.

The offices of religion were apparently unknown in the asylums of this date.

Verily the insane were then an outcast multitude.

In order vividly to see the progress which medical science has made since Dr. Caius's time, let us look at one of our English county asylums of to-day. A very good specimen is the Cambridge Asylum at Fulbourne, under the able administration of my friend Dr. Lawrence.

The first great fact observed is the entire absence of all means of mechanical restraint. Neither belt, strait-jacket, manacle, strong chair, or any other means whatever for restraining the patient, are to be found there. All appearance of a prison has also been removed. The windows have no bars, the doors no bolts, the entrance hall stands open, and apparently no external distinction is observed between this and any other large hospital for the treatment of disease. The whole asylum bears the aspect of some large house of industry. The female patients, seated at needlework in their day-rooms, or washing in the laundry, or cooking in the kitchen, or engaged in the various household arrangements, would hardly by a casual observer be recognised as persons of unsound mind. So, also, in turning to the male department. Parties of ten or a dozen working in the garden, or engaged in the detail of agricultural labour present little evidence of insanity. In the several workshops of the tailor, the shoemaker, the carpenter, the smith, the basket-maker, the baker, the brewer, are patients daily engaged at their respective trades. Employment and the confidence shown by the implements and tools intrusted to the patients have evidently replaced the old means of coercion and restraint. In visiting the several rooms at meal time

the greatest order and quiet reign. Grace before and after meals is repeated with all reverence, standing; the food is served on earthenware plates, the beer in mugs or tumblers, as in any other hospital. On the tables in the wards inhabited during the day are books and newspapers, and games—cards, dominoes, bagatelle-boards, &c. The walls are hung with prints—easy chairs stand before the open fire, burning brightly without any guard or protection whatever. The windows apparently open at will (only the opening is so arranged that no patient can throw himself out of it), and look on a wide landscape, and, being generally with a south aspect, the house is filled with the brightness of the morning sun.

One constant, careful, and anxious system of watching pervades all this apparent freedom. No patient is ever left at any time alone; the sense of moral control of his attendant is never away from his mind. By night the wards are hourly visited, and the slightest noise or restlessness seen and attended to with the prescribed remedies.

The means of employment are carefully adapted, under the control of the several officers of the asylum, to the peculiarities of each individual case.

The nurses who thus tend the insane are of the stamp of the S. John's Sisterhood, who now have charge of King's College Hospital. They are generally selected young, it being found by experience that young girls of twenty-three or twenty-four better adapt themselves to the varying character of their patients than those who commence the work with more formed mind and opinions.

The sanitary arrangements of these asylums are most carefully studied. Every ward is supplied with hot and cold water, and a warm-bath and a hot and cold shower-bath, and a filter to clear the drinking-water, and water-closets and urinals of the most approved construction. The infirmaries for the sick are supplied with every requisite treatment, and medical comforts are administered with a lavish hand. Every appliance that modern skill can furnish for the relief of suffering—German spring- and water-beds for the bed-ridden, sofas, reclining chairs, every variety and contrivance of bath, &c., &c., are to be found there. The English county asylum of to-day can challenge comparison in its healing resources, its quiet and comfort, its fittings, diet, and domestic arrangements; and, may I add, in the professional skill and reputation of its physician? even with the metropolitan general hospitals; nor will the Cambridge County Lunatic Asylum at Fulbourne suffer by contrast in these particulars with Addenbroke's Hospital.

There is, however, a dark side to this, as to every other picture of human affairs. There are a large number of hopeless cases of insanity—the idiot, the confirmed epileptic, the paralysed, the utterly demented—on whose weary path no remedial agencies can throw any

light or change, who are also the objects of our care. They are physically incapacitated for work ; amusement they cannot share in, but still they can be kept clean and quiet, and carefully nursed and fed, and so tended while life lasts. They require, indeed, a daily and hourly care and watching, often of the most varying and harassing kind, yet of which labour the remedial results can only be seen and recognised by those familiar with the symptoms and progress of chronic mental decay.

Again, we have recent and acute cases to treat, and in this task the resources of modern medicine are most triumphant. I cannot in this place linger on them, I can only affirm that the most violent cases of raving madness are all treated in our county asylums, without any mechanical restraint whatever, and that a week or ten days active treatment usually suffices to calm the violence and to remove the urgent symptoms of the disease.

The asylums on the Continent are still, in some places, much as they were in 1815 in England. Thus Dr. Corrigan, President of the Irish College of Physicians, so recently as the present year ('Ten days in Athens, with Notes by the Way;' London, 1862), gives a description of the asylum at Florence, which would almost apply to Bethlehem of 1815. "The building," he says, "is ill-designed—a horrid array everywhere of iron gratings; the sleeping rooms with square-barred openings into them, exposing the inmates, male and female, to the gaze of visitors. One of the first objects that pained me in my examination, was a weakly-looking young man under restraint. On his shoulders, and extending some way down his arms, was a cape of hard, thick leather, which had been let down over his head ; this, secured below, prevented his raising his shoulders. Round his middle was a thick leather strap, secured with an iron screw ; to this were attached handcuffs, in which his wrists were confined. Attached to the front of the seat of the wooden chair on which he sat was an inclined plane, in which were holes at intervals, and through these cotton straps were passed and tied on the under side of the inclined plane, securing his legs to it, as we see patent pens and pencils secured in a paste-board for exhibition in a stationer's window. I asked the particulars of his case. He had been five months ill, and had been for the last two months secured—confined as I saw him—because he had attempted his own life or been violent to others. The next patient I saw under restraint, was a man secured in bed by arm-straps, stretched and tied on his back, as we sometimes see St. Lawrence represented on a gridiron in a painting of his martyrdom ; but, in addition, there was stretched over this man, about a foot above his body, a strong web net, firmly strapped from side to side on the railings of his bed. I saw in the sick ward a very young man, neither sick nor violent, secured in like manner as the other, with body-straps not permitting him to turn

his body, with strait waistcoat, with legs in like manner secured to the foot of the bed. I was informed he was epileptic; that he had once broken his arm in an epileptic fall; that he had an attack the night before, and that he was thus secured lest he might have another. In one day-room I reckoned eleven or twelve of the men under restraint, with leather muffs on their hands, and handcuffs on their wrists, fastened by iron rings to a leathern belt round the waist, secured behind by an iron screw, which projected at least half an inch through an iron plate against the spinal region. I asked to have the strap loosened, and through all the clothes the skin was reddened by the working against it of the end of the iron screw. Lying or sleeping on the back, or even leaning against the back of a chair, was impossible with such an apparatus, and an accidental blow or push on the back would drive the projecting point of the screw against the back, causing pain or more serious injury. In every day-room there was one or more of the restraint chains, such as I have already described."

The old method of treatment, of which I have, in my account of Old Bethlehem, faintly traced an outline, and which apparently still lingers in Florence, had for its guiding principle the doctrine that the insane were dangerous and ill-disposed persons, requiring for their safe custody the most powerful means of restraint, and for their guidance the stimulus of fear. Hence, as we have seen, every means of intimidation were freely resorted to, and cruel physical restraint was an every day practice. Such was the system of treatment from Dr. Caius' time down to our own day. So recently, indeed, as in 1859, the Commissioners in Lunacy reported to Parliament, that this principle of coercive treatment, with its restraints, its neglects, its filth, was still practised by the Poor Law authorities on the lunatic inmates of the union houses; while the Royal Scotch Lunacy Commission, of 1858, exposed the existence of a similar plan of treatment by the parochial authorities in that country.

The recent progress made in the treatment of mental disease is based on the recognition of the physical origin of the disease, and still more on a fuller study of the laws of mental pathology, resulting in a knowledge of the motives and springs of action which influence the thoughts and conduct of the insane.

Prejudice and fear of personal injury, together with the general ignorance of mankind of the relations existing between mind and body, and of their mutual influence in health and disease, long impeded the application of the principles of rational medicine to the practice of lunacy. "The old system," says Dr. Conolly, "placed all violent or troublesome patients in the position of dangerous animals. The new system regards them as afflicted persons whose brain and nerves are diseased, and who are to be restored to health, and comfort, and reason. This simple difference of view it is which

influences every particular in the arrangement of every part of an asylum for the insane."

The modern medical treatment of the insane is thus directed to influence the mutual relations of mind and body; to soothe nervous irritation; to relieve congestion of the brain; to remove all cause of sympathetic irritation or disorder in other organs of the body, which may influence the mental manifestations; to improve the quality of the blood, on which, perhaps alone, the disease may depend; and generally, to apply the principles of rational medicine to the treatment of the special symptoms of each individual case.

I quote from a lecture of Dr. Conolly's read at Hanwell in 1847, and published in the 'Lancet,' the following apt illustration, both of the influence of physical disorder on mental disease, and of its treatment in the same case under the old system of coercion, and then by the recognition of the influence of the existing physical disorder, on the mental manifestations:

"It was in the female infirmary at Hanwell, exactly seven years ago, that I found, among other examples of the forgetfulness of what was due either to the sick or insane, a young woman lying in a crib, bound to the middle of it by a strap round the waist, to the sides of it by the hands, to the foot of it by the ankles, and to the head of it by the neck; she also had her hands in the hard leather terminations of canvas sleeves. She could not turn, nor lie on her side, nor lift her hand to her face, and her appearance was miserable beyond the power of words to describe. How long she had been in this state it is not material to record. That she was almost always wet and dirty, it is scarcely necessary to say. But the principal point I wish to illustrate by mentioning this case is, that it was a feeble and sick woman who was thus treated. At that very time, her whole skin was covered with neglected scabies, and she was suffering all the torture of a large and deep-seated abscess of the breast.

"Let it be considered what must be the effect on the attendants of having customary recourse to the imposition of restraints, when such complicated suffering as this became comparatively disregarded by medical men, in consequence of the spectacle presented to them being at each visit, not that of a sick person requiring aid, but of a dangerous lunatic cruelly fastened and bound.

"But this patient was neither dangerous to herself nor to others. The excuse alleged for this mode of treatment was, that she would eat the poultices employed, and which contained lead, and that she was very mischievous: that was all. However, she was liberated; no bad consequences ensued, and, in a few weeks, I saw the poor creature at the chapel, and even heard her play the organ, which she had been accustomed to do, in the church of a village in Middlesex, before her admission. This patient died very recently, having, from

the time of her liberation from restraints, scarcely ever given any trouble to the attendants. Perhaps, if I had never seen such a case, I should have been less earnest to adopt the system which I knew had been tried at Lincoln, and slower to try to manage the patients of this great asylum entirely without restraints.

“Many a case was yet to be managed, in which every ingenious difficulty was created or encouraged to baffle this attempt; many anxieties were to be endured, many misapprehensions to be submitted to, and much suffered; but all is now passed, and I thank God, with deep and unfeigned humility, who has permitted this great experiment to proceed for full seven years without one accident calculated to discredit it, and with a general result on the asylum best known to those who knew the asylum before, and a general effect on all other asylums, in almost every region of the globe, which can never be entirely lost.”

Insanity is, however, a mental as well as a physical disease, and we are only one step forward in the modern progress of its treatment, by applying to the relief of the physical symptoms the principles of rational medicine. Another, and I think a more important, part of the duty of those called to “minister to the mind diseased,” consists in the careful study and application, both to the general conduct and government of the asylum, and to the treatment of each individual case, of the principles of mental pathology—of the laws which regulate the manifestations of the mind in disease.

Thus, in illustration of the application of the laws of mental pathology to the government of an asylum, may be quoted the law, slowly evolved through careful trials and observation, that insanity does not necessarily destroy the influence which order and regularity, and the force of example, exert on conduct, but that, on the contrary, the most riotous and disorderly patients, after arriving at the asylum perhaps bound hand and foot, and under strong escort, yet in a few weeks, often without any treatment, save the influence of the discipline and order of the house, become, though still as insane as before, quiet and orderly in their conduct, industrious, and obedient to the rules which regulate the daily life of those with whom they are associated. Were this influence not a law of mental pathology, we should have no alternative but to revert to the old restraint system.

Again, in the treatment of an individual case, the recognition in mental pathology of the law, that the mind and conduct of the insane may yet be influenced through the medium of the sympathies, at once gives us a powerful moral therapeutic agent, with which to combat insane delusion and conduct. This power of influencing the morbid sympathies of the insane, and so winning them to a healthier frame of mind, through lessons of patience and contentment, is a gift possessed in very unequal degree by the physicians and attendants who undertake their care—yet a power on the presence of which

their comparative success materially depends. "A faculty (says Dr. Bucknill) of seeing that which is passing in the minds of men is the first requisite of moral power and discipline, whether in asylums, schools, parishes, or elsewhere. Add to this a firm will, the faculty of self-control, a sympathising distress at moral pain, a strong desire to remove it, and that fascinating biologising power is elicited which enables men to domineer for good purposes over the minds of others. Without these qualities no one can be personally successful in the moral treatment of the insane. A mere amiable and feeble, or a coarse and uncontrollable mind, alike fail in this delicate duty; and if the possessor of such a mental constitution has the wisdom to estimate this duty at its full value, he must perform it vicariously. That so much of it may be so well done vicariously, by ordinary attendants, is a most happy circumstance for mental sufferers, and proves that the possession, at least in a moderate degree, of the qualities indicated, is consistent with a defective education, and a lowly social rank."

So, in the case of a strong delusion, the laws of mental pathology teach that reason and argument—owing, probably, to the excited or perverted state of the emotions—have no power in convincing the patient of his error, and of the unsoundness of his conclusions; but that, on the other hand, new scenes and active employment, which call healthy emotions into exercise, gradually lead the way to a cure, and that the delusion, thus avoided and treated, by degrees fades from the mind. Such cures of intellectual delusion, by work and by the moral discipline of an asylum, are of frequent occurrence.

Great thus though the measure of moral and physical liberty is, which the asylums of 1862 give to the insane, compared with the cruel bondage of irons, and of fear, which, as we have seen, was their portion from the time of Dr. Caius, even to our day, the asylums of the future will, I believe, through the fuller study and application to practice of the principles of medicine, and of the laws of mental pathology, extend yet wider the circle of their liberties, until, perhaps, the asylum itself become a needless therapeutic agent, and the treatment of mental disease (in the modified shape it will then assume) come to be applied, like that of any other malady, in the ward of a general hospital, and amid the yet healthier influences of home life.