

After all it is but few who will press their claims. The great majority are attached for better or worse to the institutions where they have qualified for their high vocation. The public interest, however, is paramount. Certain attendants and nurses, after their training is completed, enter the field of private work, and the medical profession should be assured that those whose services are available in that domain are trustworthy and efficient. If the Royal British Nurses' Association is to command the confidence of the nation, it must hold at disposal the names of those of the nursing profession who are qualified to minister to the sick in mind. It is possible that some may be found to combine in one person a knowledge of surgical and mental nursing, as well adapted by nature and training to tend an ovariotomy case as a general paralytic, just as a country practitioner has to face all sorts and conditions of diseases. For good or for evil, nevertheless, specialised work is the order of the day; and we are convinced that the man in the street will have his doctor's approval when he secures a surgical nurse for a surgical case, and a mental nurse for a mental case.

The question has been carefully considered by the Council of the Medico-Psychological Association, and a trustworthy committee has the matter in hand. We hope that their deliberations and consultations with the officials of the Royal British Nurses' Association will result in an open register for every nurse who is qualified to act in relief of human suffering.

The New Divisions.

At the last meeting of the Council, held in Nottingham, a most important and far-reaching decision was achieved. In accordance with the Articles of the Medico-Psychological Association, application had been made to constitute two new divisions for England. These representations were backed by some of the most active and influential members of the Association, and two capable and tried physicians have been named as divisional secretaries. There can be no doubt that the time had fully arrived for this evolution of energy; and the success of the South-Western Division in the hands of Dr. Macdonald will be emulated by Dr. Crochley Clapham in the north and by Dr. Ernest White in the south-east. It is many years since Ireland and Scotland attained the

privileges of carrying on the work of the Association within their borders, and the fact had become so familiar that it was in danger of neglect. Just as the British Medical Association has been vitalised and reinforced by the formation of branches throughout the Empire, so will it be with the Association which has even stronger claims on our support. It is a healthy growth from the parent stem, a natural development in accordance with the best traditions of former days. Meanwhile the Council have appointed a small committee to settle the boundaries of the new divisions, and their report for the current year will, no doubt, place the matter before the Association in detail.

Asylum Water Supply.

We direct the attention of our readers to an important note by Dr. Carlyle Johnstone on another page of this issue. There is no question more intimately affecting asylum administration than that raised by the Roxburgh Asylum Board. Apart from the principle established from the legal point of view—the admission that a District Lunacy Board is entitled to promote a Parliamentary Bill, the committee is to be congratulated on having at last obtained a sufficient supply of potable water.

The first difficulty to be disposed of in proceeding to the erection of an important institution is relative to water supply, and it would appear from the careful statement of Dr. Carlyle Johnstone that opinion as to the quantity hitherto generally thought sufficient must be revised. He has come to the conclusion, after the investigation detailed, that the absolute minimum should be fixed at fifty gallons daily for each person resident. This seems, at first sight, a high estimate, for the English Commissioners, as lately as 1892, stated the quantity at forty gallons, while Burdett, in 1891, put it as low as thirty. The point is certainly one which commands serious consideration at present, while so many asylums are being built or enlarged.
