

Occasional Notes.

The Lunacy Commission.

The Lunacy Commission, it is rumoured, is to be increased to the extent of an additional medical and an additional legal member, but the amalgamation of the Medical Chancery visitors with the Commission is not yet carried out, even if seriously contemplated.

The supervision of the insane in England and Wales, judging from the present composition of the Lunacy Commission, would appear to require different provision from that which is demanded in Scotland, Ireland, our Colonies, the United States, and all Continental countries. This difference consists in the very large proportion of legal members.

It would be interesting to have a definite pronouncement on the real reason for this. Is it due to difficulties in the interpretation of the law? This, however, cannot be the cause, since so very few questions arise, and even these are dealt with by outside tribunals.

Is it that the persons who apply the law, the judges and justices of the peace who sign orders, the medical men who sign certificates, and the medical officers of asylums, are of such a character as to need all this extra legal supervision? The small number of cases in which questions arise relating to the legal procedure in this aspect would certainly not seem to demand any large legal services, and the few cases that do occur are also dealt with by outside tribunals.

Is the additional legal supervision necessitated by any special proneness to break the law on the part of the medical men or of the attendants who detain and control the insane? Here again it would seem that these officials are not of a less law-abiding character than those in Scotland, or the other countries mentioned.

It would be absurd to suggest that the able members of the legal profession who act as Commissioners are specially useful in the medicinal treatment of the insane, or that any complaints in regard to property, detention, etc., could not as well be attended to by the visiting magistrates. Such complaints have always to be sifted primarily from a medical point of

view to determine whether they are delusions or not, and when so sifted are not usually of such a complex nature as to demand the attention of an experienced barrister, and might equally well be referred to a visiting justice.

It has been argued that the insane in English asylums are more satisfied by having their complaints answered by a legal than by a medical authority, but it is to be doubted whether the majority of medical superintendents would endorse this view, or that it would have escaped the observation of other countries.

There must exist some very urgent reason for the predominance of legal members on the Commission, but it obviously does not exist outside of England and Wales.

It is to be regretted that the Commission has not been strengthened by the appointment of Medical Deputy Commissioners, who would relieve their seniors of much of the work, which could quite well be done by less experienced persons. A great deal of the work is mere drudgery, entailing a vast amount of travelling and discomfort on men whose experience and energies would be expended more advantageously in the more important parts of the work of the Commission. This has been found to work satisfactorily in Scotland, and is a plan commonly adopted in other public departments.

The Care of the Poor Insane.

Between the class of patients who can pay one pound a week and those who only pay the ordinary rate of maintenance in county and borough asylums is a large class of patients who could pay something less than the cost of the private annex and something more than the pauper rate of maintenance.

This class includes many persons of good education, to whom it is a serious disadvantage to be driven, as many of them are, into the ordinary wards of the (so-called) pauper asylums.

Some of the private annexes do take cases at less than £1 per week, but many draw the line at this, although they make very considerable profits, which are either used in diminution of the rates or in improving the structure, etc., of the annexes, thereby making them more attractive for patients capable of paying higher rates. It is most desirable that full consideration