members of the Scottish Division of the Medico-Psychological Association desire to express their deep sense of the loss sustained through the death of Sir Thomas Clouston, and their sympathy with the members of his family in their bereavement. The Secretary was instructed to transmit an excerpt of the minute to Lady Clouston.

The minutes of the last Divisional Meeting were read and approved, and the

Chairman was authorised to sign them.

Apologies were intimated from Drs. John Fraser, Carlyle Johnstone, Turnbull, Oswald, Hotchkis, Alexander, McRae, Shaw, Ross, and Crichlow.

The Business Committee was appointed, consisting of Drs. Carlyle Johnstone,

G. M. Robertson, Kerr, Orr, and the Divisional Secretary.

Drs. J. H. Orr and C. C. Easterbrook were nominated by the Division for the position of Representative Members of Council, and Dr. R. M. Campbell was nominated for the position of Divisional Secretary.

The following two candidates after ballot were admitted to membership of the

(1) David Kennedy Henderson, M.D.Edin., Senior Assistant Physician, Royal Asylum, Gartnavel, Glasgow. (Proposed by Drs. Oswald, G. M. Robertson, and Campbell.)

(2) Charles James Lodge Patch, L.R.C.P. and S.Edin., Assistant Medical Officer, Renfrew District Asylum, Dykebar, Paisley. (Proposed by Drs. Hotchkis,

Campbell, and Gostwyck.)

Dr. FORD ROBERTSON read an instructive and interesting paper on "Some Examples of Neurotoxic Bacterial Actions." He maintained that the part played by bacteria in the causation of disease was much more extensive than was generally believed, and that the infective agents that produced the most prevalent forms of disease were those that were more or less generally distributed, such as, for example, the pneumococcus, Bacillus coli communis, and Streptococcus pyogenes. As a means of determining the relation of common bacteria to morbid conditions in the human subject, animal experiment was of little value; the method of focal reaction and therapeutic immunisation had, on the other hand, proved capable of determining many of the questions at issue. Evidence had been collected that served to show that very many forms of mental disease were dependent upon bacterial action; the infective conditions were, for the most part, those that were commonly found in other patients; the mental disturbances were the expression of an individual reaction, consequent upon an inherent tendency to fix toxines in the cortical nerve cells. Some bacterial toxines were specially prone to exercise a neurotoxic action. Cases were cited illustrating the neurotoxic action sometimes manifested by various species of streptococcus, the bacillus of influenza, diphtheroid bacilli, and bacilli of the coli-typhoid group. In cases of mental disease the infected conditions were often complex; this fact rendered their bacteriological investigation difficult, but it did not necessarily prevent the successful application of therapeutic immunisation.

Drs. G. M ROBERTSON and CRUICKSHANK afterwards discussed the paper.

Dr. CRUICKSHANK also read an interesting paper on "The Cholesterol Content of the Serum in Mental Diseases" (see p. 168).

A vote of thanks to the Chairman for presiding concluded the business of the meeting

No dinner was held after the meeting.

IRISH DIVISION.

THE AUTUMN MEETING of the Irish Division was held on Thursday, November

4th, at the Royal College of Physicians, Kildare Street, Dublin.

Present: Drs. Drapes, J. A. Greene, Redington, Dawson, Lawless, Rainsford,
Eustace, and Dr. Leeper (Hon. Secretary).

Dr. Drapes having been moved to the chair, the minutes of the previous meeting were read and signed.

A letter of apology for unavoidable absence was read from Dr. Oakshott, of Waterford.

A telephone message having been received from Dr. J. O'C. Donelan that he was unavoidably prevented from attending the meeting, Dr. Dawson kindly consented to introduce the discussion upon "Alcoholism and Insanity," which was the principal item of the agenda. He cited extracts from a former paper upon the subject, read by him before the Academy of Medicine, a valuable contribution to the literature of the subject, which were most opportune, more especially as little light had recently been thrown upon the particularly interesting and difficult questions which must inevitably arise during any debate upon the subject. The matters discussed in Dr. Dawson's paper were of a wide and far-reaching significance, and dealt with the scientific and eugenistic problems inseparable from the consideration of the effects of alcohol upon the human subject, together with the statistics of alcoholically produced insanity in asylums, and were of much interest.

After some remarks by the Chairman, who expressed himself as very gratified by the kindly act of Dr. Dawson in so ably introducing the discussion in the absence of Dr. J. O'C. Donelan,

Dr. RAINSFORD said that alcoholism as a cause of insanity was much overestimated. In Bristol Asylum, where he had had considerable experience, the admissions directly due to alcohol were not more than 5 per cent. As regards the effects of alcoholism in the parents as a cause of imbecility in the offspring, he had decided opinions. He believed alcoholism was a cause of imbecility, and more especially of imbecility associated with epilepsy as a marked condition. As regards the causation of insanity, he regarded alcoholism as playing a small rôle, and being responsible for not more than from 3 to 5 per cent. of the admissions to asylums.

Dr. Redington drew attention to the curious fact of the small number of alcoholic patients who suffer from cirrhosis of the liver. He had had only one such case in a number of years at Portrane Asylum, and only two cirrhosed livers in alcoholic patients had been found in the Richmond Asylum during a number of

Dr. J. Adrian Greene gave the members the benefit of his large experience of inebriates in the Ennis Inebriate Institution. Many of the sases were feeble-minded on admission, and he considered that a lengthened period of detention was necessary if any good result was to be achieved. He humorously referred to the fact mentioned by some American wiseacres that a condition of teetotalism was a more frequent forerunner of insanity than alcoholism.

Dr. Eustace dealt with the treatment of acute cases of alcoholic mania. He

usually treated these cases by immediate deprivation of alcohol and saline enemata, together with atropine injections in suitable cases, and with in his hands excellent

results, some of the patients so treated having remained well for years.

Dr. LEEPER drew the attention of the members to the fact that so many alcoholics came under treatment suffering from delusions of persecution. These distressing delusions often deterred the relatives of such patients from placing them under control until they had done much injury to their families. Legislation was urgently needed to deal with both the entrance and exit of alcoholic patients into and out of asylums or other institutions where alone alcoholics could hope for any amelioration of their condition, or where any curative treatment was possible.

The CHAIRMAN commented on the fact that statistics as regards the rôle of alcohol in the causation of insanity were contradictory and misleading. Dr. Rainsford's estimate of 3 to 5 per cent. as the ratio of cases due to alcoholism he considered far below the mark; and he believed that most authorities regarded 15 to 20 per cent. as about the true proportion. One fruitful source of error and ambiguity in determining this question was the fact that for many years in the official statistical returns from asylums only one cause of insanity was allowed to be given, whereas in probably every case the causes are multiple. Where, then, alcohol and some other cause or causes were combined, as where alcoholism and heredity coexisted—a very common occurrence—the medical man making the return had to take his choice as to which cause he would enter, and his decision was absolutely dependent on the personal equation. In recent years both principal and contributory causes are entered in the return, and it was probable that many years would have to elapse before reliable deductions could be drawn from these amended and more accurate returns. He next drew attention to the modern methods of treatment of alcoholics in America, and especially to the colony system which, combined with watchful after-care and supervision by medical men

specially appointed for the purpose, seemed to give more excellent results.

An expression of thanks to the President and Fellows of the College of Physicians for the use of the college rooms for the purpose of the meeting terminated the proceedings.

EXAMINATION FOR NURSING CERTIFICATE.

List of Successful Candidates.

FINAL, NOVEMBER, 1915.

Fort Beaufort, S. Africa.—Letitia Brandt, Janet Olive Wallace. Brentwood, Essex.—Annie Josephine O'Donovan, Sarah Collins.
Barming Heath, Kent.—Dora Louisa Henwood, Florence List. L.C.C., Bexley.—Beatrice Brawn, Eva Thornton, Ethel Hallam. West Sussex.—Elsie Rose Cording.

Cheddleton, Stafford.-Ada Godber (distinction), Nellie May Bright, Matilda Sharpe Givin.

Menston, West Riding.—Amy Longstaff, Hilda Mary Marsh, Maggie Nolan. Wakefield, West Riding.—Nellie Clayton, Alice F. Cottam, Cissie Harriet Millns. Winson Green, Birmingham.-Edith Emma Lowe.

Cardiff City.—Lilian Emily Downes. Hull City.—Ethel Kirkby.

Bethlem Hospital.-Elizabeth Ellen Maddick, Etta Trevethan, Ernest Charles

Coton Hill Hospital.—Amelia Lawton Cooke.

Fountains Temporary Asylum.—Priscilla Elizabeth Knott.

Camberwell House.—Mary Smith, Hilda Kemp, Olive Florence Crook, Eva May Fauk, Mary Ellen Jackson Watt.

Virginia Water, Holloway Sanatorium.—Ethel May King.
Redland, Tonbridge.—Colin Roots.
The Retreat, York.—Lily Evans, Elizabeth Alison Gracie (distinction), Dorothy Hughes, Constance Evelyn Kent.

Norfolk County.—Lilian A. Lyon, Ethel Maud Fiddaman.

Aberdeen Royal.—Mary Jane Aitken, Elizabeth Stevenson Watt, Margaret

Hutchison, Margaret Milne.

Aberdeen District.—Margaret Henry Kennedy.

Craig House.—Mary A. Goodsir, Flora Macrae, Elizabeth Paton, Margaret D.

McInnes, Lillie Fry, Maggie Stuart.

Murray. Bath Flora Simpage.

Murray, Perth.—Elsie A. Simpson.
Edinburgh, Royal.—Janet Macphail, Elizabeth Milne Finingham, Caroline Green Robinson, Laura Augusta Stuart Forsyth, Jessie Carmichael McArthur, Charlotte Margaret Ross, Mary May Ross, Margaret Nicol Birrell Reith.

Gartloch, Glasgow.—Jane Lyall Milne (distinction), Jane Annie Oselton, Isabella Newlands (distinction), Catherine McNiven Wynd, Jessie Sinclair, Mabel Beatrice Parfitt.

Woodilee, Glasgow .- Sarah Annie Streetley, Mary Downie, Agnes Doig Howie.

Haddington District.—Isabella Macdonald Chisholm.

Montrose Royal.-Mary Helen Matthew Coull.

Larbert, Stirling.—Alice Jane Duff, Jessie Finlay Robertson.

Edinburgh District.—Janet Adams, Alison Wright Ferguson, Susan Theresa McGarvey.

Portrane, Dublin.-Ellie McCormack.

PRELIMINARY, NOVEMBER, 1915.

Fort Beaufort, S.A.-Maggie Grant, Elvin Leslie Yorke. Grahamstown, S.A.—Ivy Muriel Boardman, Annie Catherine Dew Rand, Katherine Dew Rand, Katherine Bosch, Frank Norman Emslie, William Davidson.