

the part of the person bringing the patients, would he be liable to an action for damages at the instance of the proprietor of the house? Mr. Justice Kennedy thinks that this question should be answered in the affirmative. It certainly ought to be.

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*Adelaide Asylums.*

The recommendation of a coroner's jury that additional medical assistance should be given in these asylums is one that should command the immediate attention of the Government of South Australia.

The Parkside Asylum, containing upwards of 700 patients, is under the sole charge of Dr. Cleland, who is also the responsible head of the Adelaide Asylum, with more than 200 patients, and a resident medical officer. The admissions are entirely dealt with at the Parkside Asylum, which must therefore yield an amount of work that one man cannot possibly deal with satisfactorily.

The prison for lunatics idea of an asylum is gradually dying out in England, and it is with regret that we find it lingering in the colonies. That an asylum should be a hospital for the medical treatment of mental diseases is not only true from a humanitarian point of view, but is a fact which tends to economy: and if the authorities concerned could be convinced of this, there would probably be little delay in granting the additional medical assistance so obviously needed in the Adelaide asylums.

The reports of the English Commissioners on Lunacy would afford the colonial authorities valuable assistance if they gave definite information of the proportion of medical officers to patients in the asylums under their jurisdiction.

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*The Abolition of Asylums.*

The *New York Herald* (June 11th) devotes its front page to a report of the Pathological Institute, with head-lines on the "reversal of the treatment of the insane," and the statement

that "asylums may be totally abandoned." The pictorial illustrations, including a portrait of Dr. Ira van Gieson, although large, are not as startling as the head-lines.

The marvellous methods by which the abolition of asylums ("palatial hotels for the insane," we glean from the report, is the correct designation) is to be achieved are not described. Electrical force is vaguely talked about, but beyond the fact that all existing methods need reversing, nothing definite can be learned except that this is all based on or illustrated by the treatment of one case. This seems to have been a case of double consciousness following injury, which recovered after about two years of treatment. If this is exact, the time element in treatment does not appear to have been reversed to any great extent by the new procedure.

The first impression of this very amusing production is that the reporter had been hoaxed; but the pictorial representation of the patient in the doctor's studio makes it possible that some sort of interview occurred. In this latter aspect we must sympathise with Dr. van Gieson and his colleagues in being thus associated with the reporter's absurd exaggerations and perversions.

The danger to the advancement of science which results from sensational reporting on matters which the lay mind cannot easily grasp is a very real one, and we trust that neither the well-being of the Institute nor the reputation of its scientific staff will be harmed by the swaggering claims formulated by the *New York Herald* on their behalf.

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## Part II.—Reviews.

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*The Ninth Annual Report of the New York State Commission in Lunacy (1896-7).* New York, 1898, pp. 1612.

THIS interesting and important volume is seriously handicapped by its bulk. Sixteen hundred pages of printed matter are considerably more than can be bound into a single volume of convenient size to be read with comfort. It is presumed that the book is intended to be read, for there is much important information in it, but its size is a distinct