

Superintendent of Bristol City Mental Hospital, had examined the prisoner, and had found him apathetic, confused and with defective memory. He considered that the prisoner's story of loss of memory was possible, but he would not go further than that.

Dr. R. Fitzroy Jarrett, Medical Officer of Cardiff Prison, who had kept the prisoner under observation, was called, by the Prosecution, as rebutting evidence. He stated that he had been unable to find any evidence that the prisoner was insane.

The judge's summing-up appears to have been strongly against the theory put forward by the Defence. But the jury found a verdict of "Guilty but Insane," and seem to have made use of the expression "temporary insanity."

REX *v.* LESLY GARDINER.

THIS case was tried at the Central Criminal Court on November 15, 1926, before the Common Sergeant. The accused is about 30 years of age, and the wife of a wealthy man. She was charged with stealing a dispatch box, and other articles, from an establishment in the West End of London. The stolen property was valued at £320. The theft occurred on October 7. There were other charges of stealing from a London club. Some of the stolen property had been sold, but it was stated that the owners had been compensated by the accused's husband. There had been a previous conviction for larceny in 1914, when she had been "bound over." The facts of the case were not disputed.

It was urged by the Defence that the accused, although not legally insane, was of disturbed mind. Dr. Porter Phillips stated that he had had her under his care since October. She had recently undergone two operations, and was in a bad state of blood-poisoning. He would not describe her case as one of kleptomania, but he considered that she had a morbid desire to acquire other people's property under an irresistible impulse. The judge remarked that "irresistible impulse" was not a term accepted by that court. Dr. Taplin, of Liverpool, said that he examined the accused in 1914, after her previous act of stealing, and came to the conclusion that she was suffering from what might be called moral insanity. The judge asked what was meant by "moral insanity," adding that he had not heard that expression before. The witness replied that it was a term, well known in medicine, to cover that condition in which people have a bent in a certain direction, and are not able to control it.

The judge declined to accept the view put forward on behalf of the woman. He stated that he could not treat her as a first offender,

and that, if he did so, there might be ground for the suspicion that the law differed as between rich and poor offenders. He sentenced her to six months' imprisonment in the second division.

While we recognize that morbid impulses and compulsions do occur (although this case may, or may not have been an example), and that the commission of offences may result therefrom, the practical difficulties in setting up such a defence are obvious. The chief point of interest in the case would appear to be the judge's remarks about irresistible impulse. It will be remembered that Lord Justice Atkin's committee reported, in 1923, that "there are cases of mental disorder where the impulse to do a criminal act recurs with increasing force until it is, in fact, uncontrollable," and made a recommendation that the law should recognize irresponsibility "when the act is committed under an impulse which the prisoner was by mental disease in substance deprived of any power to resist." This committee consisted exclusively of lawyers. It would appear that the suggested new criterion is far from commanding universal acceptance.

Occasional Notes.

The Mental Deficiency Bill (England and Wales).

THE main provisions of this Bill and the fact that it had left the House of Lords, where it was introduced in July, 1926, for the more contentious atmosphere of the Commons were reported to the Council at the November Quarterly Meeting. The Council referred the Bill to the Parliamentary Committee for examination and report.

It has so happened, however, that the Association has been denied the opportunity of taking any further action, for the consideration of the Bill commenced in the Commons almost immediately. The Bill passed its second reading on November 29 with but little emendation, though the occasion gave rise to considerable discussion and not a little opposition to the proposed measure.

The Bill was referred by the Commons to Standing Committee C, where it was dealt with on December 7. Two amendments to widen the definition of defectives in clause 1 so as to include cases of "mental disturbance" and "perverted development of mind" were negatived. Three new clauses amending Sections 4, 8 and 15 of the Mental Deficiency Act, 1913, were added to the Bill. The discussion took up a whole morning, and the Bill, as amended, was ordered to be reported to the House. The Bill came up for third reading on December 13, but a sheaf of further amendments