

thyroid deficiency probably only occurring in cretins. Several explanations have been put forward, but the one most acceptable, in my opinion, and that best supported by surgical and experimental inference, is that goitre and cretinism are not antagonistic, but consecutive effects of the same unknown cause (Fagge), that endemic goitre is not a true hypertrophy, but a degeneration of the thyroid, and although a local disease, yet when inherited or supervening early, or when the thyroid is congenitally absent, it produces more widely spread and serious disturbances so as to affect the nutrition of the whole body. This then is a typical case, where the thyroid extract has supplied the exact want, the ichthyosis has almost disappeared, the lipomata are decreased in size, and the intelligence of the boy has improved. Whether or not the congenital absence of the thyroid gland is the primary cause of all his symptoms is at present difficult to say, although the marked improvement strongly points in that direction.

OCCASIONAL NOTES OF THE QUARTER.

The Insane in India.

The Presidential Address on this subject, we may hope, will direct the attention, not only of this Association, but of the Government and the public, to the vast amount of insanity in our imperial dependency, which has been hitherto most grievously overlooked and neglected.

No subject more consonant with the objects of this Association, or more deserving of its most strenuous efforts in improving the treatment of this mass of suffering humanity, has ever been brought before it, and Dr. McDowall is to be congratulated on being the pioneer in so important a field of reform.

Astonishment, that so huge a defect in our Indian administration has hitherto escaped serious notice, is the first feeling that arises in considering the statistics which are placed before us. The reflection quickly follows, that this oversight could not have existed so long unnoted if a Ministry of Public Health formed part of the Government at home and in our dependencies.

Reform under existing conditions we may fear will be both difficult and tedious. The obstacles arising from the prejudices of the people are of the gravest character, as has

recently appeared in the attempts to introduce sanitation against the plague; while the exigencies of the Indian Treasury offer considerable hindrance to improvements involving increased expenditure. Fortunately, however, the existing institutions could probably be made much more efficient by the appointment, as Dr. McDowall suggests, of trained specialists to their management, in place of the turns of duty, by medical officers having no special experience or liking for the work, which now obtains. This much at least could be done with comparatively little outlay, and would, without doubt, lead in a short time to our becoming better acquainted with the needs of the Indian insane, and of the best methods of dealing with them.

The special necessity for additional means of treatment for women is emphasised by the fact stated, that only one woman in 131,578 is confined in an asylum, as compared with one in 33,460 of the men.

That insanity is less frequent amongst women than amongst men in India is not probable, and that many of these women, unaccounted for statistically, have died under more or less dubious circumstances, is certainly not beyond belief.

Lady medical specialists have obviously in this field a great opportunity for useful work, and it is a subject for congratulation that already a number of ladies have gained experience in our British Asylums, and are qualified to undertake this duty. That the earliest workers will have an easy or pleasant task is not to be anticipated, but the honour will at least be commensurate with the difficulty.

Definite action to promote the reforms suggested by this careful and laborious investigation should certainly follow. Our President fortunately is not one of those who "roasteth not that which he hath taken in hunting;" he may be trusted to be as forward in action, as careful in thought, and in any procedure he may desire to adopt there is little doubt that he will be supported by the unanimous voice and influence of the Medico-Psychological Association.

Lunacy Legislation.

The Lunacy Bill of 1897 is dead; it was never expected, indeed, to arrive at the maturity of an Act in the past session, and its demise on reaching the House of Commons was not unexpected, although it occurred so suddenly.