

The amendment having been put to the vote, there appeared: For the amendment, 11; against the amendment, 8. The original motion was then put to the vote and rejected, there being 8 votes in its favour and 11 against it. It was therefore agreed that the next annual meeting should be held in London.

If the desire to visit the Metropolis and other reasons induce members to prefer the annual meeting being held in London, a legitimate argument may be used in favour of an occasional quarterly meeting being appointed in the Provinces, thus recognizing and fulfilling the intention of the founders of the Association, that it should be a peripatetic body visiting the principal asylums of the insane in the various counties of Great Britain and Ireland.

We are glad to observe that, at the Irish Meeting of the Association, held in Dublin, November 29th, 1888, the propriety of holding one of the quarterly meetings in the course of a year in one of the district asylums was discussed, and it was resolved:—

“That at least one in every year of the ordinary Quarterly Meetings of the Irish branch of the Medico-Psychological Association be held at some asylum in Ireland, the name of which shall be decided at the previous Quarterly Meeting.”

We have no doubt of the wisdom of this decision, and believe that it will greatly tend to increase the vitality and utility of the Association in Ireland.

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*The Washington Congress.*

We congratulate Dr. John B. Hamilton, the editor of the “Transactions of the Congress held at Washington in the Autumn of 1887,” upon the completion of this laborious work. It bears evidence of great care, and, when we consider the illegible writing which some authors regard as a mark of genius to indulge in, and the impossibility in many instances of submitting “proofs for corrections to authors, scattered as they were throughout the world,” it would be surprising if no errors had been made. For these it is probable that the writers have only themselves to thank.

The report of the Psychology Section commences with the address of the President, Dr. Judson B. Andrews, on "The Distribution and Care of the Insane in the United States," a practical paper which will well repay perusal. A few paragraphs are devoted to the subject of non-restraint. It is observed that "the position of the profession in America, as I interpret it, is, that the employment of some form of mechanical restraint in certain cases is legitimate, and its members are unwilling to deprive themselves of its advantages, when in their deliberate judgment it is necessary or preferable to other modes of treatment in the individual case. While it is not ruled out by the tyranny of public or official opinion, which may overcome the judgment of the physician who is responsible for the proper care of the patient, it is only prescribed like any other medical or moral treatment."

The same subjects were treated, by a pure coincidence, by Dr. Tuke in his paper entitled "On the various modes of providing for the insane and idiots in the United States and Great Britain, and on the *rapprochement* between American and British Alienists in regard to the employment of mechanical restraint." The results arrived at have already been given in this Journal. In his observations on non-restraint, the writer rejoices to find that "the experience of superintendents of asylums in the United States increasingly favours the treatment of the insane without resort to the old-fashioned methods of coercion." In regard to Great Britain, he believes that "while the old mode of restraint is dead and buried beyond resuscitation, there is far less disposition to sit in judgment upon those, whether in Britain or America, who honestly believe that as a last resort, use may be made of some form of mechanical restraint."

Hence he concludes that "to-day it is much easier for the two countries to understand their apparent differences, and to 'take sweet counsel together,' as in truth it is but fitting that the mother and her illustrious child should, and as I trust will do, at this Congress."

In the discussion which followed, Dr. Savage observed: "If a man be properly trained to supervise patients and attendants, it is for him to judge and act according to his deliberate judgment—not in the hasty way that within a month I have heard a doctor say he would act—that rather

than restrain a man who threatened to tear out his eyes, he would prefer that the man should succeed in his purpose.' The sooner such an idea is destroyed as that, the better."

It is impossible to present an analysis of the many interesting and valuable papers which were read before this Section followed by discussion. Our present object is to express our appreciation of the labour which must have been taken, both by those who carried out the programme, and those who made the Section a success by their contributions.

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## PART II.—REVIEWS.

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### *Forty-Second Report of the Commissioners in Lunacy.* 18th July, 1888.

In their Reports for 1886 and 1887 the Commissioners were able, for the first time, to draw attention to a distinct break in the gradually-advancing annual increase in the number of persons of unsound mind and their ratio to the population.

In the Report before us they are no longer able to make this satisfactory statement. While the average annual increase of the previous ten years was 1,425, that of this year has been 1,752, the total number of insane persons registered in the department on the 1st January, 1888, being 82,643, who were distributed as shown in the table on next page.

The ratio of insane persons to population, which declined in the past two years, has again begun to rise, but the increase has been almost entirely among the pauper patients, who have accumulated about four times as rapidly as those of the private class.

The Commissioners attribute this accumulation in great measure to a lower recovery and death-rate. They consider that upwards of 600 out of the total increase of 1,752 may thus be accounted for. Whatever the explanation, there is now in this country one person of unsound mind in every 346 of the population; but there is nothing to show that there is any disproportion between the increase in occurring