

## CRIMINAL ANTHROPOLOGY.

*By Havelock Ellis.*

*The Elmira Reformatory.*

The nineteenth *Year-Book* (1894) of the New York State Reformatory reflects, even at the first glance, the period of trouble from which the Reformatory has only lately emerged. It is a very plain and unpretentious document, without even a single illustration. Although the charges which have been brought against the Superintendent, Mr. Brockway, do not affect the special characteristics of the institution, *i.e.*, the indeterminate sentence and the system of physical and psychic treatment now familiar to readers of this Journal, they tended to throw discredit upon the Reformatory, and moreover random and ignorant statements of the case appeared from time to time in England, even in influential medical journals. As the matter has now been fully investigated and finally settled, it may be worth while briefly to set forth the results.

The main charge was of cruel and excessive punishments, and it was supported by a preliminary investigation, practically the work of a single man. In 1894, however, Mr. Flower, the Governor of New York, appointed a committee of three—Dr. Austin Flint and two lawyers, the Hon. William Learned and the Hon. Israel Deyo—who have fully investigated the matter. Three documents resulted: a majority report prepared by Dr. Flint and Mr. Deyo, a minority report—dissenting at certain points—by Judge Learned, and the careful and judicial decision of Governor Flower, who, besides using the two reports as a basis, independently investigated the matter. The first and third documents are contained in this *Year-Book*; the second I have obtained independently.

The committee did its work very thoroughly, and no less than 150 witnesses were examined. As a result the majority report finds that certain defects and errors existed, but at the same time recognises "the magnitude and general excellence of the work that is being accomplished." The corporal punishment consisted in "spankings," administered by the Superintendent in person, with a strap twenty-two inches long and three inches wide, and applied to the bare buttocks. Before 1882 it was very rarely employed; since 1889 it has been very frequently applied. The report finds that, assuming that corporal punishment is reasonable, this method was suitable and effective, not involving cruelty, and they only find evidence of excess in one case. They consider also that corporal punishment, under proper restrictions and regulations, is preferable to the modes of punishment which must necessarily take its place if abolished. The chief changes in the Reformatory which they consider desirable are—(1) a decrease in the excessive

population, 600 inmates being preferable to 1,200 (for this, of course, the managers of the Reformatory are not responsible); and (2) the appointment of an assistant to the physician. These changes would make the institution, they say, an ideal establishment. "As it is organised and conducted, however, it is a model reformatory. Its results have been extraordinary as regards its success in the reformation of criminals. It probably stands pre-eminent among the reformatories of the world. These results are due to the unselfish devotion of the managers and the extraordinary qualities of Mr. Brockway as an organiser and an executive officer, added to his intimate knowledge of the criminal character."

Judge Learned, in his minority report, while agreeing at many points with the majority, and fully recognising Mr. Brockway's sincerity and good motives, considers that there was a certain amount of cruelty, although no permanent injury was ever caused, and the strap was only applied to the buttocks. He details a case in which, owing to a misunderstanding between the physician and the Superintendent, an insane man received corporal punishment. He sets forth Mr. Brockway's view of such applications, *i.e.*, not as a punishment, but as a method of permanently influencing nervous action, as of "the nature more of surgery," with reference to the future rather than to the past, not retributive but remedial; he regards it, however, as a method which should not exist in such an institution. He also points out that it was kept in the background, and he refers, quite correctly, to the ignorance of the present writer, some years ago, concerning its use at Elmira. At that period it was, in fact, seldom resorted to.

The Governor's decision, in the main dismissing the charges brought against the Reformatory, is a sensible and sagacious document. He points out, in reference to Judge Learned's conclusion, that "such a conclusion depends largely upon definitions and upon individual sensitiveness. Corporal punishment necessarily implies physical pain, but all pain is not cruel. All the Commissioners agree that the evidence exonerates Mr. Brockway from any cruelties which inflicted serious or permanent injuries upon convicts. . . . In the main he seems to have exercised his authority to inflict corporal punishment with great moderation and care, and his occasional lapses have not justified a sweeping or general condemnation of his methods and practices."

It may seem that this is not a very serious matter to arouse so much disturbance. In English prisons a much larger proportion of prisoners are punished in one way or another, 57 per cent. as against 34 per cent. at Elmira. The Reformatory is, however, a place of international interest and importance, a model which other countries are learning to imitate, and this investigation will have done good service in clearing its reputation from baseless charges, and incidentally also in showing that it is not, as Mr. Tallack and others have idly imagined, a comfortable and luxurious establish-

ment to which criminals are glad to go. (As a matter of fact they much prefer the ordinary prison where no strenuous effort is required of them). It is to be hoped, also, that the investigation will induce the Legislature to put an end to the overcrowding which is really the most serious defect of the Reformatory.

An unavoidable delay in the appearance of this retrospect makes it possible to include notice of the *Year-Book* for 1895. This volume is nearly as attractive as of old. In addition to copious tables dealing with the relations of age, height, weight, breathing-capacity, strength of chest, back, arms and legs, there are a large number of process and other illustrations, showing the men in the gymnasium and reproducing typical examples of the various kinds of foreheads, ears, noses, foot-prints and tattoo-marks commonly found at Elmira. Deficiency of chest development is very marked; 75 per cent. of the men are defective in breathing-power. It is not considered that ear anomalies are more frequent than outside the prison; this, however, is only given as an opinion, and the figures show at least a very large proportion of outstanding ears. Flat-foot is very common; foot-impressions were taken of 529 men, 23 per cent. were absolutely and congenitally flat-footed and 19 per cent. showed an unusually low arch. Tattooing was found among 34 per cent. of the men. Dr. Case, who has examined the inmates for eye-defects, makes some interesting remarks; he finds strabismus very common and attributes it chiefly to lack of symmetrical development due to degeneracy; unequal refraction of the eyes is also common; the interpupillary distance is very frequently either too narrow or too broad, giving a peculiar expression to the eyes noted by Dr. Case, as by many others before him. The average age of 529 men was found to be 20 years 8 months; the average weight 133 lbs., average height 5ft. 5½in., lung capacity 202 cub. inches, strength of chest 69lbs., of back 270lbs., of legs 375lbs. In all these respects the average inmate of Elmira is far below the average American man of the same age; in height he is even below the average girl student of Wellesley College, and in the other measurements given he is little if at all superior to the girl students.

The whole *Year-Book* bears witness that Dr. Wey and his assistants are anxious to live up to their reputation as almost the only investigators of criminal anthropology outside Europe. Both in England and America the tendency is still to indulge in theory or criticism about criminality, rather than to engage in the more arduous but far more important task of collecting reliable facts on which alone theory and criticism can safely work.

The *Year-Book* is also of interest to English readers because it throws some light on the recent *Observations* of our Prison Commissioners concerning the recommendations of the Departmental Committee. It does this not only by showing the advantages of a reformatory for an older and more radical class of prisoners than

our reformatories are provided for—granted always that the indeterminate sentence is introduced together with genuine scientific treatment—but also in matters of detail. Thus our Commissioners disparage gymnasiums and baths. The *Year-Book* demonstrates that the Commissioners' objections are the outcome of inexperience. At Elmira the advantages of the baths and gymnasium as tonics to the enfeebled nervous system of criminals are more clearly realised every year. Last year all prisoners during the first month after admission were subjected, during half a day, to a daily course of this character, and in appropriate cases (125 last year) the treatment was continued for a much longer period. "It is difficult," we are told, "to formulate in figures or phrases the advantages of baths and exercises, continuously and scientifically administered; it is unquestionably of the greatest usefulness in every way;" a considerable percentage, it is said, without that experience, would break down in health, and deteriorate to a degree of degeneration beyond recovery. The objections imagined by our own Prison Commissioners are non-existent. The questions involved in the treatment of criminals are mainly medical questions, and we still confide the control of this treatment to Commissioners who are exclusively laymen.

*"Moral Insanity."*

The conception of "moral insanity" and its identification with "congenital criminality" has long been an apple of discord among psychiatrists. It is, however, largely a matter of definition, and Dr. Näcke has recently laid down with much clearness and precision, though perhaps no great novelty, the doctrine of "Moral Insanity" ("Die sogenannte 'Moral Insanity' und der praktische Arzt," *Aerztliche Sachverständigen-Zeitung*, 1st July, 1895). He begins with the proposition, which should now meet no opposition, that "'Moral insanity' as a specific disease does not exist, but what is so called is a variety of imbecility." It differs from ordinary imbecility, because (1) intellectual disturbance is not obvious, (2) there is a predominance of ethical and æsthetical defects; (3) there is an inclination to immoral and dangerous conduct producing conflicts within and without the family; and (4) when congenital there are certain peculiarities in its course. Näcke points out that morality is not congenital, the only congenital element being the aptitude to be morally influenced by education and environment, but this aptitude involves nearly the whole of the nervous system, so that development of morality with defect of the other mental powers is scarcely conceivable. The diagnosis is practically important since moral insanity is more difficult to combat than mere bad environment. The earlier it is recognised and treated the better. The heredity is usually very bad, and sometimes there have been intra-uterine troubles or serious illness during infancy. In spite of care the child is a

ne'er-do-weel in the family and the school. The morbid character of the trouble is indicated by its well-marked periodicity, commonly found in all so-called "degenerative" psychoses. Nor are plentiful indications of degeneration lacking in skull and face and the rest of the body, as well as functional signs such as choreic movements and strabismus. The intellectual condition is decisive as regards the diagnosis between "moral insanity" and ordinary imbecility. If the intellect is but slightly disordered, and especially if there is marked immorality, Näcke considers that we may speak of "moral insanity," but he believes that in every case careful investigation will reveal a lack of mental equilibrium and defective attention, memory, etc. To illustrate the difficulties of diagnosis he brings forward the case of a girl of thirteen, who brought gross accusations of immorality against her father. The father was healthy; the mother had been insane; the girl herself was considered physically and mentally healthy and of normal intellect, though on consulting her teachers it was found that she was regarded as lacking in intelligence, diligence, and attention. She showed no feelings of affection, not only towards her father but also towards her dead mother. She was chlorotic. At first Näcke was not inclined to consider the case one of moral insanity, but ultimately he decided that it might fairly be so regarded. At the same time he admits the probability of an element of suggestion, and the influence of chlorosis and puberty. (The possibility that the accusations were true seems to be fairly excluded, though that is a contingency to be borne in mind.)

In a subsequent paper ("Zur Frage der sog. Moral Insanity," *Neurolog. Centralblatt*, No. 11, 1896), Näcke develops his views on this point in their broader bearings, and with full reference to the opinions of others. He accepts the identification of the "moral idiot" with the "congenital criminal," but considers that in the strict sense this phenomenon occurs so rarely that it would be best to give up both terms. Taking "moral insanity" in the broad sense, he considers that the cases really fall into three groups: (1), The largest group, that of the feeble minded, including both the "physiological" feeble-minded who are still able to earn their own living, and the "pathological" feeble-minded who are unable to do so; (2), an insane group (*Gruppe der originär Verrückten*) which Näcke is inclined to call "paranoïd;" (3) moral idiots in the narrowest sense, "degenerates," not insane in the practical sense of the word, but standing on the borderland of insanity, and usually exhibiting many of the physical and psychic signs of degenerescence.

#### *The Dean Case.*

The telegraphic news in the London newspapers last year contained frequent references to a trial for attempt to murder which was exciting much interest in Sydney, New South Wales; they were,

however, not very intelligible. A pamphlet has now been issued at the *Sydney Bulletin* office, bringing together all the documents bearing on this case, which is of considerable interest both from the psychological and the medico-legal points of view, with which latter, however, we are not here concerned.

George Dean, 28 years of age, the master of a ferry steamer in Sydney Harbour, was in March, 1895, charged with administering poison (arsenic mixed with strychnia) on several occasions to his wife. He was tried, found guilty, and sentence of death was pronounced. The evidence, however, was not absolutely conclusive, and a certain amount of prejudice was imported by the dictatorial attitude of an unpopular judge. (It was the same judge who tried, ten years ago, the Mount Rennie case, which will still be remembered in England. On that occasion a number of men and boys were convicted—chiefly, as was afterwards found, on the evidence of criminals—of outraging a girl of uncertain character; four were hanged and five still linger in prisons and asylums.) Dean consequently became the hero of a popular agitation, and a Citizens' Defence Committee was formed, forcing the Government to appoint a Commission (consisting of Dr. Sydney Jones, Dr. F. N. Manning, and Mr. Rogers, Q.C.), who practically re-tried the case. The majority of the Commission (the two medical members) reached the conclusion that the wife had for some unknown reason administered the poison to herself; Mr. Rogers, in a minority report, re-affirmed the result of the original trial. The outcome was that Dean, amid general acclamation, received a free pardon. But then fresh evidence began to accumulate; the chemist who (illegally) sold Dean the poison came forward, and it was gradually elicited that Dean's own counsel had by a ruse obtained from him a confession of guilt. (It may be noted in passing that that counsel's love of certainty, and all that it involved, ruined his career.) Dean was consequently tried a third time (the judge not being the same as in the original trial), found guilty, and sentenced to 14 years' penal servitude.

It will be observed that the medical majority of the Commission chose the wrong alternative. Little blame can be attached to them on this account, for the evidence with which they dealt was largely not of a medical character, besides being inconclusive, and it seemed best to them to err, if at all, on the side of mercy. In balancing probabilities they entirely ignored the character and mental history of the man. One of the Commissioners is the leading mental expert in New South Wales, but as the medical Commissioners decided that the man was innocent they naturally refrained from investigating his mental condition. The real medical evidence only leaked out subsequently. On both sides of Dean's family there are signs of unstable mental equilibrium. His father, a police constable, committed suicide merely because a prisoner escaped him. His mother is described by

Dr. Crooke as "mentally weak." She seems, indeed, to have suffered from delusions of persecution, for she had a constant dread of being poisoned; it was said that she would take her own tea and sugar out with her when on a visit, that she sometimes awakened the neighbours by screaming that powdered poison was on the sheets of her bed, and that on one occasion she let herself into a dry well and remained there for a long period to avoid persecution. Her sister is also mentally weak. Regarding Dean's own condition there is not much information. It appears that, as a boy of thirteen, he was convicted (illegally it seems) of using a horse without permission, and sent to prison to associate with criminals for three months. In his photograph Dean's features appear to be anatomically regular, but the expression, though good-natured, is weak and fatuous. There was no adequate motive for the crime; all that could be said was that the couple had lived together unhappily for some months, on account of Dean's dislike of his mother-in-law. It was alleged that he was always kind to his wife and children.

So far as the evidence goes, Dean was clearly sane according to all currently accepted tests. But he seems to have possessed a certain degree of feeble-mindedness, ultimately showing itself in his easy and callous indifference to moral considerations when an obstacle stood in his way, whether or not he may fairly be regarded as coming within the class of instinctive criminals. Such a case is worthy of attention, if only as further evidence that when we are compelled to pronounce a criminal "sane" we have by no means necessarily said the last word about him.

*The Histology of the Cerebral Cortex in Epileptics and Criminals.*

Dr. Roncoroni, an assistant in Lombroso's laboratory at Turin, has recently published a study on this subject ("*La Fine Morfologia del Cervello degli Epilettici e dei Delinquenti*," *Arch. di Psichiatria*, fasc. i.-ii., Vol. xvii., 1896). In obtaining his material he was assisted by Tamburini, Giacomini, Bianchi, and other well-known workers. He investigated on an average three points in the frontal lobes of the brains of 10 normal persons, two new-born children, 25 epileptics, 11 recidivist ("congenital") criminals, eight occasional criminals, 10 insane persons, and 14 animals. The sections were prepared in accordance with a special method. Of the 25 epileptic brains five were normal; of the 11 recidivists six were normal, or only slightly abnormal; of the eight occasional criminals five were quite normal and the remainder only slightly abnormal. The decreasing order of normality was thus:—Occasional criminals, recidivists, epileptics. The chief anomalies noted are (1) absence or great reduction of deep granular layer, (2) unusual prevalence of large pyramidal and polymorphic cells, (3) frequency of cells in white matter. Roncoroni then proceeds to discuss the significance of these anomalies. Analysing the factors

in epilepsy, he concludes that these anatomical phenomena represent the hereditary element. "The morphological anomaly reveals to us the disordered development of the nervous system, a development which predisposes to chemical alterations, if indeed the same cause does not produce both these disturbances," although the morphological anomaly is not essential. The changes in the criminal brains are the same in kind though less in degree and frequency, and Roncoroni regards them all as morbid changes due to atavism or arrest of development during foetal life.

*The Wisdom Teeth in Criminals.*

A certain degree of inquisitiveness has been expressed as to the position of the wisdom tooth among criminals. The matter has at length been investigated in considerable detail by Dr. Carrara ("Sullo Sviluppo del Terzo Dente Morale nei Criminali," *Arch. di Psich.*, 1895, Fasc. i.-ii.). He examined nearly 400 criminals of the age of 19 and upward, all belonging to Piedmont, as compared with 57 normal individuals. Comparing normal and criminal persons of the same age, Carrara found the wisdom tooth much more frequently present among normal persons. The percentage number of criminals showing no last molars is nearly quadruple that of normal individuals, according to Carrara's figures. Among normal persons, Mantagazza and Amadei place the frequency of absence of third molars as between 18 and 23 per cent. Carrara, among his criminals, finds it 33 per cent. It may be worth mentioning that Talbot, of Chicago, has found that out of 670 persons the percentage of missing third molars is still higher, *i.e.*, 46 per cent., but Talbot thinks that this large percentage is due to the high proportion of neurotic and degenerate persons in his practice needing special treatment.

This result of Carrara's investigation is interesting, because it does not altogether harmonise with the atavistic view of the criminal as a reversion to savagery. The criminal, it is usually held, has a large and massive jaw. It might have been suspected that his teeth would correspond, but apparently this is not so, and in this respect, at all events, criminals are not so much behind as in front of their normal fellow creatures.

The question, however, is not yet settled, for Ascoli has more recently criticised Carrara's results and brought forward new results of his own (*Arch. di Psichiatria*, 1896, fasc. iii.). He points out that Carrara's subjects were mostly petty criminals who usually show few hereditary degenerative characters, and that they belonged to Piedmont, where the brachycephalic type of skull predominates and affects the form of the jaw. He has himself examined, in the prison at Ancona, 170 criminals, who belonged to all parts of Italy and were mostly guilty of grave offences. He found that for ages above 30 only 8.8 per cent. were absolutely without the third molar, as against Carrara's 22 per cent. and



Mantegazza's 42 per cent. for normal persons in Italy generally. The average was 12 per cent. as against Carrara's 33 per cent. Thus Ascoli supports the atavistic view, and the question must await further investigation.

*Instinctively Criminal Children.*

A very important branch of criminological study is the investigation of the classes which are most prolific in criminals, especially the class of tramps and vagabonds. To study these it is necessary that someone with scientific aptitudes should actually live among them. It is very rarely, however, that the properly-qualified individual is both able and willing to acquire the confidence of this class of moral cripples, and peculiar value, therefore, attaches to the careful and detailed investigations which have for some years been carried on by "Josiah Flynt," the *nom de guerre* of a gentleman belonging to a well-known and distinguished American family. Hitherto he has only published his results in magazine articles, which possess considerably greater scientific value than we are wont to find in magazines. In the *Atlantic Monthly* for January, 1896, he has an interesting article on "The Children of the Road."

Young tramps, from an etiological point of view, fall into four groups. The first group consists of those whose parents are tramps, and who are born in the road. In this group environment is everything. The second class, not a large one, consists of those who are forced by starvation to beg and pilfer. The size of this group is often immensely over-rated. The third class, a large one, consists of those who are enticed on to the road, sometimes by "penny dreadful" literature, sometimes by a curious *wanderlust* which Josiah Flynt regards "as quite as much of a disease as the craze to steal which is found now and then in some child's character" (it seems a little doubtful whether the victims of *wanderlust* should come into this group), more often decoyed by an older tramp who wants an apprentice with whom his relationship, though the writer does not here make the statement, is often one of perverted sexuality.

The fourth class, small but important, consists of children who possess an intuitive bent towards crime and vagabondage which is "almost uncanny." Josiah Flynt has known about twenty children of this kind whom he regards as "morally delinquent at birth." "These boys have in largest measure what the entire body of moral delinquents possesses in some degree." They are like "dwarfed men born out of due time;" they instinctively possess the skill of "trained criminal artists," and are the delight of the whole criminal world. In physical appearance "most of them have seemed to me to have fairly well-formed bodies, but something out of the ordinary in their eyes, and in a few cases in the entire face. Sometimes the left eye has drooped very noticeably," and one boy could at will "throw a film over the eye in the most

distressing fashion" (apparently an atavistic development of the *membrana nictitans*, not uncommon in some lower races). "The faces were not exactly deformed, but there was a peculiar depravity about them that one could but notice instantly," and which was not visible in the parents' faces, when these latter came under observation. "I believe that the parents of these children, and especially the mothers, could tell a great deal concerning them, and the theorists in criminology will never be thoroughly equipped for their work till all this evidence has been heard."

With regard to the treatment of "the children of the road," Josiah Flynt insists that we need, above all, "the reform of the reformatories." "First of all we must have a humane and scientific separation of the inmates in all these reformatories, for the law of the survival of the fittest in this field means that the partially good will be dominated by the wholly bad." "Second, the management of reformatories should be in scientific hands," and young men and women should be specially trained for such institutions. "There is a moral hospital service to be carried on in penal and reformatory houses." These recommendations (which coincide with those brought forward by the present writer eight years ago as regards both reformatories and prisons) are undoubtedly gaining ground, and must, indeed, commend themselves to all who have the slightest knowledge of these matters.

Dr. Austin Flint, compelled by his duties in connection with the Elmira investigation to devote close attention to the methods of treating criminals, has recently stated his views on the question generally in a presidential address to the New York State Medical Association on "The Coming Rôle of the Medical Profession in the Scientific Treatment of Crime and Criminals." He here eloquently expounds the important nature of "the task to which the medical profession will more and more be called in criminal administration." The treatment of criminals, he goes on to say, is the great social question of the present day. There is no good reason why we should not take advantage of the studies and experience of criminologists and penologists, treating without malice or resentment the criminal as a patient as well as crime as a disease; and there is every reason why we should study crime in our prisons in the same spirit in which we study disease in our hospitals and insanity in our asylums, with the object of curing the curable by reformation, protecting society against the incurable and devising means of dealing with them, preventing the development of criminal tendencies in the young. The day of punishment, based on an extinct theory of revenge, is over, and Dr. Flint quotes, with approval, the words of Laurent, "The physician should be the friend and student of the criminal as he is of the insane; should know how to distinguish the alcoholic, epileptic, insane, the vagabond, and morally insane. The prison may be a prison, and yet be transformed through the results of criminal anthropology."

*The International Medico-Legal Congress.*

This Congress was held at New York in September of last year. It is said to have achieved a success far beyond the most sanguine expectations of its promoters, and to have given an impetus to the advance of medical jurisprudence which cannot be estimated. Certainly every movement which tends to bring the medical and legal professions into closer touch is deserving of all success. Between 60 and 70 papers were presented at the Congress, more than half of them belonging to psychiatry, criminal anthropology, and allied psychological departments. A few of these papers, of varying quality, have been published in the *Medico-Legal Journal*; it is proposed to print them all in a *Bulletin*, at a price low enough to bring the volume into the hands of all whom it may concern. The volume can scarcely fail to be of considerable interest. Subscriptions (five dollars) are received by Mr. Clark Bell, 39, Broadway, New York.

## PART III.—NOTES AND NEWS.

## MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

## ANNUAL MEETING.

The Annual Meeting was held in the Rooms of the Association, 11, Chandos Street, London, W., on Thursday and Friday, July 23rd and 24th.

At the meeting on Thursday morning Dr. David Nicolson, President, occupied the chair.

Dr. FLETCHER BEACH, Honorary General Secretary, read the minutes of the last Annual Meeting, which were thereupon confirmed.

The election of officers and Council for the ensuing year then took place, Dr. Oscar Woods, Dr. E. W. White, Dr. A. R. Turnbull and Dr. C. Mercier having been appointed scrutineers. They reported that "the nominations of the Council are endorsed by an overwhelming majority, but two voting papers strike out two of the Editors as a protest against the plurality of Editors."

The PRESIDENT declared the election to have resulted in the following appointments:—

<i>President-Elect</i> . . . . .	T. W. McDOWALL, M.D.
<i>Treasurer</i> . . . . .	H. HAYES NEWINGTON, M.R.C.P.E. <sup>1</sup>
<i>General Secretary</i> . . . . .	R. PERCY SMITH, M.D.
<i>Registrar</i> . . . . .	J. BEVERIDGE SPENCE, M.D.
<i>Editors</i> . . . . .	H. RAYNER, M.D.
	A. R. URQUHART, M.D.
	CONOLLY NORMAN, F.R.C.P.I.
<i>Auditors</i> . . . . .	E. GOODALL, M.D.
	T. OUTERSON WOOD, M.D.
<i>Divisional Secretary for Scotland</i> .	E. B. WHITCOMBE, M.R.C.S.
<i>Divisional Secretary for Ireland</i> .	A. R. TURNBULL, M.B.
<i>Divisional Secretary for South Western Division</i> . . . . .	OSCAR WOODS, M.D.
	P. W. MACDONALD, M.D.
<i>New Members of Council:</i>	
G. H. SAVAGE, M.D.	ROBERT S. STEWART, M.D.
E. W. WHITE, M.B.	H. A. BENHAM, M.D.
FLETCHER BEACH, M.B.	J. A. CAMPBELL, M.D.