

general paralysis was treated with "606." Considerable constitutional disturbance followed the injection of .3 grm. The bodily symptoms improved, but not so with the mental condition. Dr. Taylor thinks that to do any good this treatment must be adopted before there is any extensive destruction of neurons. Heredity was found in 50 *per cent.* of the admissions of both sexes, after excluding cases with insufficient history.

West Ham Borough, Goodmayes.—The admission-rate is falling here steadily. The rate of first-attack patients admitted was 11.76 per 10,000 of population in 1902, and has now come down by progressive decreases to 3.51. The ratio for pauper admissions per 10,000 population for all England is 5.40 for 1910. Looking to the locale of the population supplying the asylum, one would expect to find certain ætiological factors much in evidence. Privation and starvation account for a small percentage in excess of the all-England rate. Prolonged stress is much more marked than in the general rate, while sudden stress gives less. Alcohol and syphilis are also in excess. Heredity is heavy, being found in 50 *per cent.* General paralysis was diagnosed in a little under 8 *per cent.* of both sexes combined, while the males supplied just 15 *per cent.* Recent melancholia among 182 cases accounted for 31, and recent mania for 19, while the recurrent cases of each were 16 and 18 respectively. The large number of primary dementals (12) is recorded. We find that among the 55 recoveries no less than 8 were of this classification on admission. Dr. Hunter evidently does not bow the knee to the idea of irrecoverability arbitrarily given to dementia by some authorities. The occupations were many and diverse, being in keeping in these respects with one's estimation of the character of the population. The docks, shipping, factories and the customs all sent representatives. In an extra table Dr. Hunter gives the weight results in each recovery. Three females lost less than a stone between them, while the others put on several hundredweights in the bulk. Such a table affords much support to the gospel of fat. It would be interesting if, when some one has the spare time, the weight of each non-recovered patient of the year's admissions could be taken, so that the general effect of rest, plus suitable and sufficient food and medical treatment, could be contrasted with the gains and losses connected with recovery. Among the 79 deaths, tuberculosis of lung caused 8, four of each sex; general paralysis caused it in 17 males and 1 female.

Some Registered Hospitals.

Barnwood, Gloucester.—The recovery-rate dwindled in 1910 from 40 to 28.2 *per cent.*, when the rate is calculated on total admissions. If, however, the transfers are eliminated the rate rises to 47.8. The recoveries included two female cases of over ten and six years' detention respectively. Each case was the subject of profound melancholia, associated with intractable anæmia. In each case improvement, both in body and mind, happened repeatedly, to be followed by relapse, till a healthy condition of blood obtained and remained. In both the resistiveness of the melancholiac was a marked symptom. As Dr. Soutar

happily remarks, there are certain cases in which the experienced physician can foretell results fairly well, but beyond these are many in which it requires the "audacity of inexperience" to say what is going to happen. He further points out that in such cases, with a potentiality either way, the hope of "going home" is an essential stimulus to recovery. The enforced rupture of the marriage bond would take this away with fatal results, while, in addition, it would add indefinitely to the grinding torments which such cases have to endure by reason of their disease. Before the great divorce question is settled it is very necessary that our almost unanimous opinion shall be brought strongly before the intellects, and we might add the consciences, of the people of the land. He gives a very interesting account of the mental operations in a case where parole had been given, and "the voices" exercised their usual mischievous influences. The young man owned that one evening "he was very nearly gone." The voices had during the whole afternoon been repeating the word "escape" to him. Even when at the door of the hospital he mounted his bicycle again and rode off some distance, but in the end his promise prevailed. Next morning he was acutely excited.

The Retreat, York.—Dr. Bedford Pierce, in adverting to the absurd and mischievous reports in the Glasgow papers as to the curability of insanity by newly discovered means, states that he had the pleasure of hearing Professor Ehrlich in Berlin on the subject. The Professor distinctly stated that he did not think that the remedy which is designed against syphilis is of avail when the process has reached the nervous system, giving theoretical reasons for this opinion. So there is another Dagon thrown down and in pieces. In five out of fourteen female first admissions, with a history, parental alcoholism was found. He notes one case of determined suicidal intention in a lady who was usually cheerful and even merry, full of resource, and highly intelligent, which made the care of her a very anxious responsibility. The mental pathology of such a case would be far beyond the comprehension of a coroner's jury, if occasion called for the services of such a body. But it is well to have such instances of merriment combined with desire for death to refer to on such an occasion. It would be interesting for such as ourselves to discover what, if any, was the prime motive in a case like this. The lady eventually recovered. In referring to the care needed by voluntary admissions, and to the less frequency of recovery taking place than might be looked for, Dr. Pierce states that in two cases recovery began to take place on their being certified. He thinks that the sense of security, together with the removal of hesitation and doubt about giving notice to leave, have a really steadying effect on the unstable mind. We can quite endorse that opinion. One other contributory element must be that certification leaves the medical man in no doubt how far he can go in applying such measures as are required by the insanity, without having to reckon with the patient's approval.

Large success is attending the trained nurses' department which he has started. It is financially entirely independent of the asylum itself. The entrants have all obtained the Association's certificate, and, further, they have obtained the Retreat special qualification after four years' training. As he trains far more nurses than can possibly be provided

for in the senior posts of the ward, a career of usefulness to themselves as well as to others is hereby provided. They are useful for taking patients on trial, etc., thus leaving the nursing of the wards at full strength.

Warneford, Oxford.—A curious feature of this institution is, that of 98 patients in residence no less than 46 have been transferred from other places. Some of these are brought for the medical effect of a change, others to meet the convenience of friends residing near Oxford, others on account of dissatisfaction with precedent conditions. Some had been refused further care elsewhere, but the majority suffered from the pinch of finance. Of the 46 transfers, 23 were from other hospitals, 18 from private asylums, 3 came from county asylums, and the balance from single care. As Dr. Neil says, these occurrences may be claimed as evidence of the benevolent work done, but they do not promote the recovery-rate. Nevertheless, he can show a rate of 73 *per cent.*, calculating the total recoveries on direct admissions, the rate falling to 28, when they are calculated on the direct basis in regard of both admissions and recoveries. We know that in some institutions it is more than a moot question whether they, designed possibly in the first instance for promoting recovery, shall continue to have their energy dulled by chronic incurability. But even so, it is cause for thankfulness that there can be found other institutions which recognise that much insanity is incurable, and is in urgent need of protection and that betterment which falls short of cure. *Chacun à son goût.*

Wonford House, Exeter.—Year by year the finances of this hospital, which not long ago gave considerable cause for anxiety to its governors, become more confirmed in stability. In view of the fact a new recreation hall is contemplated, while a nurses' home is in process of creation. This will cost about £3,500, and as it will release accommodation now taken up by twenty-three nurses in the hospital itself, it would seem to be a reasonable way of extending the accommodation for patients, which is much desired. Among the 51 certified admissions, Dr. Morton had to reckon with no less than 36 with definite suicidal tendencies. He has found great benefit to arise in the treatment by adapting a shelter in one of the ladies' gardens for more regular habitation by recent cases in feeble bodily health. There is evidently a strong football team among the employees, which has been successful in winning, as well as in rousing interest in the patients.

Some Scottish District Asylums.

Aberdeen, Kingsseat.—Dr. Alexander, in speaking of "606," adds two reasons for its unsatisfactory results in the treatment of general paralysis. One is that the syphilisation usually occurs long years before it manifests itself by insanity. Beyond that, the man who is to become a paralytic is one of the last people to take proper care of himself after being inoculated. Alcohol, as a factor, occurred more frequently in the female cases. He speaks somewhat hopelessly of the likelihood of the new Superannuation Act being of any service to the nurses, as they are worn out by twenty years' service long before the age of fifty-