

2nd. That this is one of the most curable forms of insanity accompanied by melancholia.

3rd. That the duration of the insanity in curable cases rarely exceeds from three to six months.

4th. That this form of insanity, apart from suicide and organic disease, rarely tends to a fatal termination.

5th. That the most important indications of treatment are, the early removal from associations and friends; careful watching; nutritious diet; and the judicious administration of narcotics.

PART IV.—NOTES AND NEWS.

Gheel in the North.

(From a Correspondent.)

"It is not surprising that among a population debased by misery, the feelings of humanity should frequently be blunted, and that parents should seek to profit by the misfortunes of their children." "The habitual presence of an insane person is apt to induce the disease in others, especially where there happens to be a hereditary tendency. The comfort of the household is destroyed, habits of regularity and industry are broken through, and not unfrequently the constant sight of the sufferer engenders a feeling of despair and induces a habitual resort to intoxicating liquors." "It must, however, be borne in mind, that the comforts of the people vary very much in different districts and hence the miserable condition of the insane poor in the northern and north-western counties cannot be received as equal evidence of neglect, as in the midland and southern counties and in our large towns."—*Reports, General Board of Commissioners in Lunacy for Scotland.*

UNLESS an Alienist be utterly Gheel-struck, he must needs concur in the well-considered and wise views of the vast majority of the members of the Medico-Psychological Society of Paris, expressed during a discussion at the fortnightly meetings throughout the past winter, upon the management of the Insane. The comprehensiveness, the sound philosophy, the philanthropy, and experience displayed in these deliberations constitute an era in the history of Psychology, and place our fellow-labourers in France in a most prominent and enviable position in what may be called the science of moral economy.

The subject under investigation, the real question at issue in this tournament, was the comparative merits of asylums and private dwellings in the disposal or management of the insane; although a vast number

of collateral and subsidiary ramifications were obtruded, or arose naturally, as elements or adjuvants in the controversy. The Farm, the Cottage, the Colonial Asylum; the percentage of the insane that can be employed; the value of their labour; the mental and moral influence exercised, where there is no pecuniary or other profit, even where there is loss involved in the experiment,—had their respective advocates or opponents. It would be presumptuous rigidly to classify the supporters of the various opinions advanced; but while it is painfully obvious that the most extreme, and extravagant, and revolutionary views found champions; that while Brunet denounces asylums, Mundy extols Gheel, and Auzouy derides, and, we think, calumniates home treatment; it is consolatory that a very large number, and these the most distinguished and practical physicians, including Falret, Foville, Girard de Cailleux, Billod, Parchappe, have propounded discriminating, and moderate, and conservative doctrines, which appear to be founded upon a fair judgment of the characteristics and working of the antagonistic systems proposed. It is, however, worthy of profound consideration, that a large number of those who seek to introduce such a change as would reduce asylums to mere hospitals for the treatment of acute, or lock-ups for the safe custody of violent and dangerous cases, and would convert every village or homestead into a Gheel, are, though able and benevolent theorists, either nonprofessional, as Duval, Mundy; or though professional as Bulkens, Parigot, &c., are utterly ignorant of asylum life. They have never lived in close contact with the insane; and, if familiar with cottage scenes, such as are pictured in Burn's "Cottar's Saturday Night," or with the charitable missions of such idiots as "Betty Foy's Boy," cannot pretend, and do not, we conceive, pretend to know anything of the inner and habitual life of the insane, nor of the forbearance, the outpourings of kindness, and attention, and adroitness, if not the delicacy, required and positively exercised towards them by their guardians, even in the worst asylums. These writers are amiable amateurs, sanguine optimists, who, strong in a non-medical theory as to mental disease, and electing a few glimpses of the superficial and favorable relations between the insane and sane, conceive that, given a tolerably clean and comfortable house, swept and garnished, though it may be by the spirits of gain and greed, and an honest or enterprising clodhopper; a chronic lunatic is, under such circumstances and governance, safe, well treated; or, as well cared-for, and with as good chances of amelioration and happiness as if he were in an asylum surrounded by every scientific contrivance and source of health, and under the constant supervision, and, in one or more senses, under the care and treatment of an educated and experienced physician. But to turn from such unweening and illusory confidence, with as great doubt as from the equally deceptive and sceptical convictions of

M. Auzouy, who, in order to illustrate the "patronage familial" cites the cases of an excitable deaf mute, who, transferred from acting as swineherd in an asylum to his own commune, became erratic, vagabond, and nearly perished from hunger; and of a melancholic who, on liberation, under excitement attempted incendiarism, murder, &c.;—and let us consider a fair formulisation and epitomisation of the opinions of the French, and, we believe, of English practical psychologists upon this subject.

1. The annexation of farms to asylums is the best means of ameliorating the lot of robust and inoffensive lunatics, as it provides for a considerable proportion of patients that comparative freedom and mode of life and occupation most in keeping with their previous social condition. Such agricultural colonies, or offshoots, far from creating a new system in opposition to the established practice of existing asylums, form a legitimate development and complement of what has long been in operation. They constitute the organization of labour in the interest alike of the patient and the hospital; they recognise the necessity for preserving for labour the rank and characteristic of a hygienic remedy, while imparting to it a lucrative direction.

2. The improvised erection of villages similar to that of Gheel cannot, under existing circumstances, be accomplished. But even admitting that, therapeutically, such an arrangement may offer advantages for certain classes of cases, which are neither curable nor dangerous; it is very doubtful whether such a plan would be more economical than the cloistered or farm asylum, especially seeing that the cost of the former might, without detriment, be greatly diminished; and provided the productiveness of succursal farms be not exaggerated. This ingredient should, if possible, be eliminated from such an inquiry. As physicians we are called upon to heal and not to economise; our concern should be confined to the medical and moral aspect of each case, to the best and readiest means of cure; or, should the eradication of the disease be impracticable, to that amelioration which secures the greatest amount of happiness and comfort compatible with such an affliction; and which prevents that degeneration which is inevitable under neglect, low diet, and depressing circumstances. To allow the expense of the course to be pursued to enter into, or to sway, our mode of treatment, is to chaffer with the most sacred interests of our profession and of humanity; and to save money at the risk of sacrificing reason and of adding suffering to incurability. It is to prescribe Salicine, which is less efficacious, in place of Quinine, which is less expensive.

3. The placing of tranquil lunatics with peasants, or attendants, or nurses in the vicinity of an asylum, may be advantageous for certain patients; but the proportion of those who could benefit by such an arrangement must always be limited by the small number

of families, at a convenient distance, who could be confided in so far as to be constituted the guardians of the insane.

4. There is, and will always be, a certain number of lunatics who may be left, and who have actually been left, under the charge of their friends, supported by public funds, but upon conditions that they shall be frequently and regularly seen by medical officers, who shall satisfy themselves that their patients are properly cared for; that their malady does not assume an aggravated or dangerous form, and who shall employ whatever curative or palliative means may be admissible. The proportion of patients who may be intrusted to this domestic management ought not to exceed a sixth of those placed in asylums.

That many lunatics, in many if not in all countries, will never be subjected to treatment at all, and will remain in private dwellings, is a point that has long ago been settled by the influence of the best, as well as by the basest, motives of which the heart is susceptible, and will certainly not be unsettled by medical or popular views as to centralisation or colonisation, nor perhaps by any general considerations. Affection, a mistaken sense of duty, will detain in the bosom of a family many who should have been sent to an asylum; and selfishness and sordidness will send away many who might have lived and died under the shelter and sunshine of domestic care. The numbers of this class will be in proportion to the population and to the characteristics of their dwellings; and will, necessarily, vary according to the social habits—the degree of civilisation in particular countries; but there are perhaps few countries in which they are more numerous, or in which their actual condition has been more thoroughly ascertained and laid open to the public view than in Scotland. In England 18, in Scotland 31·7, and in France 50 per cent. of lunatics, live with their relatives, or with those who act in that capacity. The inspection and published reports of the officers of the Board of Lunacy have brought about this publicity and presented much, perhaps all, that is objectionable and all that is attractive in the arrangement. It may be a profitable inquiry, while so many alienists are engaged in determining the cases, or the class of cases, which may safely and beneficially be withdrawn from treatment, or where direct treatment is inadmissible or useless, from the comforts and protection of an asylum, to take advantage of information derived from similar sources, in order to obtain some definite notion of the homes to which these cases will be removed, and the circumstances in which they, in their emancipated state, will be placed. This must be effected, not by any generalisation or opinion founded upon some vague and variable standard as to the favorable or unfavorable position of the class now so disposed of; but upon a description of some of the characteristic members of class itself, of their suitableness for partial independence, and of the

suitableness of private dwellings, however homelike and well conducted these may be, for their sphere of action.

Two hundred cases will be taken for this purpose, now resident in the south-eastern and some of the best cultivated and most prosperous districts of Scotland; in fact, a majority of the pauper lunatics of these districts which are not included in the sweeping condemnation contained in the quotation from the Commissioners' Blue Books, at the commencement of these observations. But what and where are these private dwellings? It will not do to form a fancy picture of a sylvan retreat, a cottage-home remote from public view; for the majority are situate in towns and villages, and not necessarily the loveliest of the plain. This proportion may differ in various counties; but it has been observed that the more distant from the haunts of men, and consequently from that supervision and criticism to which the haunts of men are more or less subjected, the less comfortable and creditable these dwellings are; the greater the neglect, and, it is suspected, the greater active or passive harshness, to which their insane inhabitants are subjected. In villages they are generally the worst and smallest and most dilapidated houses obtainable; in towns, they are single rooms in the second or third story, sometimes subterranean, in the columbaria in which the poorer classes are densely packed together. Nor must it be inferred from the mere comfort and judicious appointments for the sane inmates, that the management of the pauper lunatic is such as can be approved by a public inspector. Though much of the comfort may be due to his toil he may not share in the results, and may occupy the cellar, the garret, or the worst bed. Nor will facts bear out the pleasing theory that this is a productive, even an industrial class. A large number are idiots, advanced dements, aged, infirm and feeble, and are physically incapable of work of any kind, and where able they may be neither trustworthy, nor competent except as mere animals of burden. Those who combine capacity with a docile disposition are exposed to the danger of being overtaxed. They become what they have been, in irony, called—white slaves and drudges. In estimating the value of the labour of robust lunatics under discipline it has been customary to regard three as equivalent to an ordinary labourer. Falret regards the work of a lunatic as about the fifth of a sane individual of the same trade. But such rules cannot be fairly applied to the insane in private houses, as they are domiciled there because in general they are neither robust nor competent.

The asylum deliverance movement proceeds upon three assumptions:—1. That asylums should be employed chiefly, or exclusively, as hospitals for the treatment of acute cases, and that chronic cases may be beneficially withdrawn from them. 2. That chronic cases may be better disposed of elsewhere, better for themselves, and espe-

cially better for those who pay the public burdens ; and 3, That the cottage life in Britain is so happy, harmonious, parental, pure and comfortable, that it will be found to supply the homes and sanatoria to which the incurable and inoffensive and industrious insane may be transferred. We would deal with the latter aspect of the question.

In passing through the sad, and, even when well ventilated, the oppressive and cheerless wards of an hospital, we encounter many incurable patients ; many incapable of receiving direct aid from drugs ; many who sigh for emancipation from rigid rule and discipline ; and many who crave emancipation even from the treatment undertaken to restore them to health. It is, however, probable that very few of these, although failing to obtain the cure they seek, do not derive some benefit from the position from which they desire to escape—some alleviation of suffering, some brief arrestment of the downward course, some comfort, some professional or humane attention, of which the coveted emancipation would deprive them. The same observations apply to the occupants of an asylum. Many of these are in the advanced stages of disease and degeneration ; they are beyond the reach of art and sympathy ; they are entrusted to the charge of official guardians, because they have outlived, because their offensive and disgusting habits have worn out and exhausted, the natural ties and duties of kindred ; or they are robust industrious, under the omnipotence of discipline, and inoffensive, and they prate of liberty and home and independence, as if they comprehended the terms and could undertake the responsibilities which these imply. Yet, if not doubtful, it is worthy of consideration whether such individuals are not *what* they are in virtue of the *where* they are ; whether they could secure the same amount of reason, happiness, and comfort under any other circumstances ; and whether, while no one gainsays that they might be domiciled elsewhere, in the same sense that the hospital incurable might live and die at home, they are not in that position which is best for themselves and for the community from which they are outcasts.

A pernicious and absurd error has crept into the very initiative of this inquiry which vitiates the whole speculation. The proposition, or the general acceptance of the proposition, amounts to the domestication and utilization of lunatics in private dwellings ; and a utopia is conjured up where those who, under a different and sterner creed and regimen, would have been “fast bound in misery and iron” within the lofty walls of an asylum, now work, or wander about, or enjoy freedom, fresh air, and country doings. It is a startling comment upon this picture, that of lunatics, properly so called, there is merely a vestige in the less inviting reality, as it is presented in Scotland, and that the vast majority of the insane, so

emancipated, consist of dwarfed, deformed, juvenile idiots; dreamy, aged and feeble demented; and useless, or only partially useful, imbeciles. The following table will illustrate this. Of those examined there laboured under

	Males.	Females.	Total.
Idiocy	37	24	61
Imbecility	34	25	59
Dementia	15	21	36
Chronic Mania	4	5	9
Recurrent Mania	1	1	2
Monomania of Suspicion	1	1	2
Melancholia	—	3	3
Dipsomania	1	—	1

But these numbers must suffer a considerable diminution by deducting the unfortunates who are physically incapacitated from rationally or freely participating either in the pleasures or labours of freedom. Twenty-two are confined to bed; twenty cannot walk; six are lame from dislocation of hip and other causes; eight totter or stagger during locomotion; eleven fall from syncope or other causes; four bear the marks of bruises and burns on their body; thirty-six, from inability, or disinclination, never leave the house either for exercise or any other object; eighteen do so rarely, and thirteen never go beyond the cottage garden. But even when in a state to go beyond the threshold, the capacity of many to take advantage of the privileges of their position must be greatly limited by infirmity and disease, as twenty-five are described as epileptic, eleven as paralytic, four as choreaic, seven as deaf, eight as being of imperfect vision, eleven as bronchitic and asthmatic, two as rheumatic, six as labouring under strumous sores, one under otorrhœa, one under incontinence of urine, and thirty-one as of dirty habits. Yet notwithstanding this sad catalogue of maladies and frailties, many are never visited by a medical man, others at rare and long intervals, the majority quarterly. Five, however, occasionally receive daily visits. Of the whole number only sixty-four were found employed, twenty-five in domestic work, four females in gardening, twelve in occasionally carrying messages, three in field work, three in sewing, and one in keeping a coal store, in chopping wood, as a bookseller, as a butcher, &c. It is very doubtful that above two or three could have maintained themselves, and only one actually did so: the work of a vast proportion was mere play. Even the romance of rural life, of the sights and sounds and smells and associations of country life, the sequestered cot, the upland farm, which have been cast around this scheme, must be sorely invaded if not dispelled, for of the two hundred visited one hundred and seventy-six lived in towns or hamlets, and only twenty-two in detached houses or farms, and one hundred and fifty in streets or by the side of the road. When the analysis is carried further, it is discovered that fifty-one live in dirty and confused houses, eight in others so foul

as to be unhealthy, that four live in solitude, ten in poor-houses ; that three have notorious erotic tendencies, one of whom has borne three illegitimate children ; that seven are drunkards, and one is a drunkard in intention, while four live under the guardianship of drunkards, and three under that of immoral persons. The qualifications of this class may further be conjectured from the wardrobe of their charges : we do not allude to the careful patch, the ingenious darning, for such are the fruits of industry as well as the confessions of "honest poverty," nor to the wind-ventilated tatterdemalion ; but to eighteen dements with filthy, greasy, redolent clothes ; to thirty-seven with dirty, untidy, neglected dresses ; to six stalwart idiots arrayed in petticoats ; to nineteen of whom the skin and person were uncleanly ; to one who is reported to have been naked for twenty-three years ; to forty-two of whom the bed and bedding were cold, comfortless, wretched ; and to three instances in which adult men occupy the same bed with their mothers. It cannot even be claimed as a merit of the "air libre" system in Scotland, that thirty-six go at large and to long distances, disappearing for days ; that seven roam within the boundaries of their native village ; that thirteen are so free as to be destructive ; eight so insubordinate under the mild dominion to which they are subjected, as to require, or at all events to receive, corporal castigation ; that five are exposed to one of the penalties of unrestricted liberty, in being molested and persecuted and struck by children, who are, however, stronger or more intelligent than themselves ; and five earn the designation of white slaves by toiling in the performance of the work of the family toward whose support they at the same time contribute their parochial allowances. We have not now examples of caged men. The bed of one lunatic was constructed and used as a cage. They have disappeared before the benign authority of the commissioners in lunacy, and have been absorbed among the decencies and comparative freedom of asylums ; but as substitutes we have the domestic oubliette in the form of a box-bed ; the durance vile of solitude, or seclusion in a cottage, while the family are at harvest, or church, or market ; or the rope and the sheet which limit motion ; or the dread of bludgeon law, as in those cases above specified, in which its enforcement was admitted, and in many others where it is suspected but concealed, in recognition of the popular respect for humane treatment, which they practically disregard. And although the straps and strait jackets which at no distant period hung ostentatiously among the horse furniture upon cottage walls have disappeared, the wrists and ankles of individuals received into asylums within the current month prove that restraint, though banished from such establishments, is still resorted to, and is perhaps justifiably, or at all events unavoidably resorted to in the homes and by the friends of the insane.

Were any good purpose to be served by the description of what may fairly be designated sensational cases, such as those of Flushing and Earl Soham, neglect and harshness could be demonstrated to exist, especially in the class of peasantry immediately above, but on the verge of, pauperism; where are the irresponsibility of private life, many motives for concealment, and many more for penurious provisions, in fact where the evils and vices, as well as the virtues of the "patronage familial" flourish in rank and unrestrained luxuriance. We prefer to present such illustrations as occur under public inspection, or that faint infrequent supervision which is practicable, which appear inherent to the general development of such a measure, and which could not occur in an hospital, or which, if they did occur, would, at once, be corrected. It is not even proposed at present to embrace the effects of such an arrangement upon the mental or moral condition of its objects; but to present what is palpable, inevitable, and irremediable in their position, surroundings, and supposed privileges.

There are many happy and well-constituted homes among the thousands which contain an insane inmate; these are the expression of the best elements of the national character, of individual manifestation, and of a sense of propriety, good feeling, and good taste. They have always been good; and will, in spite of privations and bad seasons and bad houses, continue clean, cosy, and judiciously administered. The dispositions of the population of Gheel are said to be the result of a thousand years' training and consuetude; and the few glimpses of national philanthropy and higher culture which may be obtained among the peasant custodians of the insane in this land, are, assuredly, *not* to be traced to annual, or occasional visits of some few minutes' duration, by Inspectors of poor and other officials, but to idiosyncracies, or principles enshrined in our common nature, and to be found whenever and wherever circumstances favour their development. That supervision and instruction and example have influenced, and will influence, the growth and extension of the comfort and decencies of cottage life, cannot be doubted; and that such agents should be kept in constant operation is indispensable; but for ages to come such machinery must be powerless against prejudices, peculiarities of race, habit, &c.; and must leave the good and bad cases of domestic treatment of lunatics, in almost all important respects, where it found them. When civilization, and a higher standard of living, and a keener appreciation of minor morals shall have penetrated more deeply into the substrata of society, to the indigent and industrial classes, and assimilated cottage interiors and management to the infirmities and habits and requirements of the insane, the substitution of private dwellings for public hospitals for certain classes of the insane as a general economic and national measure may be useful, as well as practicable; whereas, a

present, it can only be regarded as an evil which it is a public duty to mitigate as much as may be possible.

Roman Catholic Middle Class Lunatic Asylums.

THERE is no hospital or asylum at all for Catholic patients of moderate or limited means, where they would be cared for by members of their own faith, or visited by a priest, though there are probably at least 700 Catholic lunatics in England, by whom such an establishment is needed. The question is, as we have said before, are Catholics prepared to permit this state of things to continue? What have they done, or what are they willing to do, to remedy it? We may be quite sure, now that attention has been called to the existing want of middle-class accommodation for lunatics, that suitable hospitals will be quickly forthcoming; indeed, with an enterprising energy which does them honour, efforts in that direction have already been made by numerous individuals; plans have been drawn out, the necessary calculations have been made, and we may expect soon to see the visible fruits of their labours. But it should be distinctly understood, that the promoters and organisers of such schemes being Protestants, there will not be the smallest element of Catholic control in carrying them out, neither will the poorer patients of our own faith be one whit benefited by such measures. It may here be stated, that in insanity, more frequently than in almost any other disease, there is a quiet and lucid interval just before death; is it right that we should by neglect prevent these our poorer brethren, so afflicted on earth, to depart this life with none near to offer the last rites of the Church? Will Catholics still sit with their arms folded and do nothing in this matter? It is true that a minority, which has long been treated with severity and injustice, is apt to degenerate into a chronic state of apathy and almost hopelessness; but it is an evil sign when the vanquished become as the dead. In the sister island, Government has hitherto, we regret to say, thought it expedient to deny us a charter for our University; it will, we venture to hope, not refuse us a license for our lunatic asylums.

Our object in this article is to propose a practical scheme by which lunatic hospitals for the middle and poorer classes of Catholics may be erected, and made, not only self-supporting, but a reasonably lucrative investment, and also form a basis for further operations, and be the foundation of a fund to which the charitable contributions of the rich should be solicited. These contributions should form an endowment for the reception, support, and cure of poor but deserving cases. The hospital, duly licensed, would of course be under the supervision of the Commissioners in Lunacy; but the patients would be the especial charge of members of a religious order,

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