

## Part II.—Reviews.

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### **Twentieth Annual Report of the Board of Control.** H.M. Stationery Office, 1934.

This report is, as usual, issued in two parts. Part I begins with the question of existing and required accommodation. This introduces statistical matter, to which the lay newspaper reviewer turns at once, in order that he may compile notes, alarmist or reassuring, upon the increase of "insanity". But the question is firmly bound up with financial considerations which cannot be ignored. The aggregate number of patients in excess of the authorized bed space fell during the year from 1,717 to 843. This improvement, however, is mainly due to the opening of the new Middlesex hospital at Shenley; and there is still a serious shortage of accommodation in certain areas. Such a shortage retards admissions, and so leads to an apparent reduction in the incidence of mental disease. The total number under care in public mental hospitals increased during the year by 1,348—a figure which is below the quinquennial average. The Board regrets that more extended use is not made of boarding-out. This system may obviate the necessity for capital expenditure. But much care is needed to ensure success. Patients and guardians must be selected with great discrimination, and the assistance of trained social workers is absolutely essential.

Good progress is reported in the provision of separate admission hospitals. These should be situated well away from the main buildings, and there are advantages in giving the admission hospital a name of its own; such a nomenclature tends to minimize the connection with an institution too often associated in the public mind with permanent mental disorder. Assuming that all new admissions are received into the admission unit, provision must be made for the isolation of noisy and excited patients, preferably by means of single rooms at the extreme ends of the building.

Progress in the working of the Mental Treatment Act has not been as rapid as could have been wished. But there is a slow improvement in the number of voluntary admissions to public mental hospitals, the year showing an increase of 666 as compared with 1932. There has also been a gratifying increase in the number of out-patient clinics, and this must ultimately be reflected in a growing voluntary admission-rate. The local distribution of these clinics is still, however, very uneven; and it is most desirable that additional centres should be provided in rural areas, and that sessions should be held at hours convenient to those who desire to attend. The extra work which these clinics entail for the medical staff is duly recognized.

Attention is given to occupation therapy, of which the Board highly approves. For such treatment to be successful, adequate training of the nursing staff is essential, and this involves a complete change of outlook towards the nursing of mental cases. Choice of employment must be determined primarily by therapeutic rather than economic considerations. We cannot but feel that a considerable degree of uncertainty and confusion still exists on the subject.

As regards parole, there is a marked divergence in different hospitals. The Board believes that it is better to err on the side of giving too much rather than too little freedom. "Safety first" is not the best motto for a mental hospital. Interchange of patients between hospitals in adjacent districts is recommended, in the interest as much of the patient as of the institution. There are some wise remarks on the answering of inquiries from patients' relatives. Care taken on this point may avoid many complaints.

There was a fall in the number of cases of dysentery reported, and a small decrease in the incidence of tuberculosis. The enteric group of infectious diseases showed a rise, but this was largely due to an epidemic at one hospital. The solution of the problem presented by the "carrier" depends upon improvements in bacteriological technique as well as upon general sanitary measures.

Service in a mental hospital involves special physical dangers, which are not always sufficiently appreciated by the public. It is with great regret that we note the murder of a male nurse by a patient.

The number of patients in registered hospitals shows a small decrease. Not quite 32% of the admissions were upon order and certificates; but the percentages for individual hospitals exhibit wide variations. There is a definite decrease in the number of patients resident in licensed houses; 54.5% of the admissions were voluntary patients.

Passing to the section of the Report which deals with mental deficiency, there is noted a disturbing diminution in the number of cases notified by local education authorities. In this respect, as in that of the accommodation provided for mental defectives, there are still great divergences in different localities. The most important event of the year was the opening of the new Hertfordshire colony at Cell Barnes. The actual cost of building worked out at just under £300 a bed—a sum much below the cost of constructing a new mental hospital. It is both cheaper and more satisfactory to build on a clear site than to add buildings to an adapted country mansion. It should be the aim of local authorities to reduce to a minimum the number of defectives who need to be detained permanently in an institution, and the report discusses the different ways in which this objective may be achieved. It is of interest to note that experience at the Royal Eastern Counties' Institution shows it to be exceptional for a licensed patient to be recalled to the institution on account of sexual misconduct. There is still an undue number of defectives detained in mental hospitals. An excellent analysis is made of the connection between mental deficiency and crime. The number of mental defectives who commit criminal acts is so small that, in this respect, no special problem is involved. The figures should prove an antidote to the exaggerated statements which are often made on this head. But a large proportion of the offences actually committed by defectives are of a sexual character, and are serious in their social results. This fact provides yet another argument for the intensive mental examination of all sexual offenders.

Part II describes in detail the scientific research work carried out during the year at the institutions within the purview of the Board. There is a marked preponderance of physiological and bio-chemical as compared with psychological work. Without wishing, in the slightest degree, to depreciate the value of the former class of work, and while remembering that much of it represents routine clinical investigations which must be performed, the comparative paucity of strictly psychological research is (judging from the report) very disappointing.

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Miss Mary Dendy, who will be remembered as the first woman Commissioner, died during the year. A graceful appreciation of her life and work is given. It is pleasing to learn that the Sandlebridge Colony will be known, in future, as the "Mary Dendy Home".

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**Mortality among Patients with Mental Disease.** By BENJAMIN MALZBERG, Ph.D. New York: State Hospitals Press, Utica, 1934. Pp. 234.

This book describes an investigation into the mortality-rates of patients in the mental hospitals in the New York Civil State for the three years commencing July 1, 1928, and terminating June 30, 1931.

Following introductory remarks, the mortality-rates from physical processes are discussed without reference to the mental conditions. Chapters then follow dealing with the causes of death in dementia præcox, manic-depressive psychoses, psychoses with cerebral arterio-sclerosis, general paralysis and alcoholic psychoses.

The data are compared with those of the general population. Approximately 25 per cent. of deaths in the mental hospitals were subject to autopsies, and doubtful classifications of psychoses and causes of death were discussed at staff conferences. The data are consequently more accurate than those of the general population. The total deaths from all causes occurring in the mental hospitals during the period under review were 12,613.

At early ages, the death-rate from all causes was much greater amongst the mental hospital patients than amongst the general population. From 15 to 19 years of age the rate was 24.3 times as great, whereas at 85 years and over the rate was only 1.6 times as large. Similar proportions occur in each sex.

Of the total deaths amongst the mental cases, 33 per cent. were due to diseases of the heart, 11.9 per cent. to pneumonia (all forms), 10.1 per cent. to general paralysis, 9.5 per cent. to tuberculosis (all forms), 8.9 per cent. to diseases of the arteries, and 6.1 per cent. to nephritis.

The author finds that pulmonary tuberculosis is the leading cause of death in dementia præcox, diseases of the heart in the manic-depressive conditions and in cerebral arterio-sclerosis. In the latter, deaths from diseases of the arteries were less than half as frequent. In the alcoholic psychoses, diseases of the heart are also the most prominent cause of death.

The work in this book is a painstaking study of the subject purely from the statistical view-point. No reasons are suggested for the variations in the death-rates from those of the general population, nor for the variations between the different rates associated with the various mental conditions. The author gives the figures without arranging or sorting them in order to make an attempt to determine the reasons for the variations.

The work must have involved a considerable amount of labour, and can be recommended to all those who are interested in the study of the causes of death amongst sufferers from mental disorders in institutions.

G. DE M. RUDOLF.

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**Psychology and Psychotherapy.** By WILLIAM BROWN, M.D., D.Sc., F.R.C.P. Third edition. London: Edward Arnold & Co., 1934. Pp. vii + 252. Price 12s. 6d.

If one had to criticize any particular statement in this work, it would be Dr. Brown's claim (in the Introduction) that it is "synthetic rather than