

As supplementary to this and also to that section of my Presidential Address dealing with this matter I venture to send you the memorandum on the reverse side of this which I trust may be helpful in enlisting the sympathy and support of the Visiting Committee, especially in regard to (c).

Memorandum.

- (1) The meetings are not intended primarily for the education of individual medical officers.
- (2) They are not for the purpose of improving the pay, conditions of service or the professional status of the medical staff.
- (3) They are for the purpose of stimulating scientific psychiatric work; and to further the better treatment of cases of mental disorder, individually and collectively, especially of the recent and acute type.
- (4) They will be of great benefit to the patients examined, especially those presenting difficulties in diagnosis, prognosis or treatment.
- (5) They will permit of the wider study of groups of cases presenting similar symptoms and the better ascertainment of the result of treatment spread over a larger number of cases. Clinical papers are more illuminating and instructive when accompanied by a demonstration of the actual cases to which they refer.
- (6) In a sense the medical officers attending will be on duty, *i.e.*, doing medical work.
- (7) It is hoped to have not less than 12 such meetings a year in each area. Large meetings for clinical purposes are not desirable; gatherings from 6 to 24 persons are more effective.
- (8) Divisions will need subdividing into convenient areas having regard to the number and situation of the mental hospitals and so reduce the amount of time spent in travelling. Another scheme is for each mental hospital in turn, at a month's interval, to hold a clinical meeting for all mental hospitals within say a 30-mile radius.
- (9) The general practitioners who care to attend will have a further opportunity for psychiatric education and experience which will in time go to lessen the number of mental patients requiring institutional treatment.
- (10) It is hoped that such meetings will foster the holding of regular clinics at the larger hospitals and encourage team work.
- (11) As regards the capacity of the medical staff to finance the scheme, the position has changed since the war. Instead of medical officers being for the most part single men, the opposite is now true. Many have also to provide for growing-up and expensive families.
- (12) The local authorities have now a opportunity of helping to raise the level of medical work in their mental hospitals. The isolation of mental hospitals has been one of the great drawbacks to the advancement of psychiatry. By the proposed scheme the work of each hospital will frequently be brought into close touch with that of every other mental hospital in its area. With the local authorities behind it, the scheme is assured of success; without their assistance it cannot become of general applicability.

MENTAL AND GENERAL HOSPITAL RECIPROCITY AND AFFILIATION.

LT.-COL. J. R. LORD, *C.B.E.*, speaking as President of the Royal Medico-Psychological Association at the Annual Dinner of the Medical Society of London on March 12, took the opportunity of pleading for affiliation and reciprocity between mental and general hospitals. He said:

"It must be known to some of you that any obstacles there may have existed in the past to such a tenure are in the process of removal or have been removed, and that as between public mental hospitals on the one hand and general hospital and medical schools on the other, schemes of working affiliation and reciprocity are now practical propositions."

Illustrative of this we are now in a position to report the schemes adopted by the London County Council and the Springfield Mental Hospital Committee, and

both bodies are to be congratulated on the important steps they have taken in this matter.

ABSTRACT FROM THE MINUTES OF THE LONDON COUNTY COUNCIL, NOVEMBER 16, 1926.

Affiliation to General Hospitals—Appointment of Consultants.

We have had under consideration from time to time the desirability of securing, if possible, the affiliation of the mental hospitals to general hospitals, and we have come to the conclusion that it probably would facilitate attainment of the object in view to deal only, in the first instance, with the question of the appointment of consultants, leaving further arrangements to develop as may be found mutually advantageous to the mental hospital and the general hospital concerned.

The proposal is that the following consultants should be appointed, *viz.*, (i) a physician, (ii) a surgeon, (iii) a gynaecologist, (iv) an ophthalmologist, and (v) a throat, nose and ear surgeon, and, as a first step in this direction, arrangements have been made for consultants from the London and Guy's hospitals to attend Claybury and Bexley mental hospitals respectively at an honorarium, in each case, of £4 14s. inclusive of travelling expenses. We propose that during the first year of this arrangement the total expenditure should be limited to £400, £100 in 1926-27 and £300 in 1927-28, which will permit of 42 visits being made at each hospital during this period. There is no provision for this expenditure in the annual maintenance votes, 1926-27, because it was not expected, when the estimates were prepared, that negotiations then about to be instituted would progress so speedily as they have since done. The arrangement which is now possible is, however, of such manifest advantage that we feel justified in putting forward recommendations to permit of its immediate adoption.

(Agreed.)

[COPY.]

MEMORANDUM OF AGREEMENT OF CO-OPERATION BETWEEN WESTMINSTER HOSPITAL SCHOOL OF MEDICINE AND THE COMMITTEE OF VISITORS OF SPRINGFIELD MENTAL HOSPITAL.

1. (a) That the Visiting Staff of Westminster Hospital (a list of whom is appended) will act as Honorary Consultants to the Springfield Mental Hospital.

(b) The Consulting Staff will be available when required for attendance at the Springfield Mental Hospital and to act as deemed necessary.

(c) The Pathological and Bacteriological Departments will give such assistance as may be required from time to time.

(d) The question of a grant to cover the travelling expenses in connection with the visits of Officers of the Westminster Hospital to Springfield Mental Hospital will be a matter for mutual arrangement.

2. (a) The Springfield Mental Hospital will nominate a Medical Officer to attend the Out-Patient Mental Clinic at the Westminster Hospital and act as Joint Lecturer in mental diseases at the Hospital School of Medicine if so desired.

(b) The Springfield Mental Hospital will undertake to provide the course of instruction in mental diseases specified in the curriculum of the University of London to the medical students of Westminster Hospital.

(c) Facilities will be given to the Staff of Westminster Hospital to demonstrate cases of physical disease at the Springfield Mental Hospital.

(d) The members of the Medical Staff of Springfield Mental Hospital shall have the same authority and control over the students as is held by members of the Visiting Staff of Westminster Hospital.

3. That subject to the requirements of Springfield Mental Hospital, the Medical students of Westminster Hospital shall, at fixed times, enjoy the privileges of the sports ground of the Springfield Mental Hospital, and shall co-operate with the staff of Springfield Mental Hospital in the promotion of sport.

We are of opinion that co-operation on the lines suggested above will unquestionably be to the advantage of both hospitals, and should lead to developments in the future in many directions, including the possibility of interchange of nurses, and the appointment for short periods of students as Resident Clinical Assistants at Springfield Mental Hospital.

4. This co-operation between the two hospitals to be subject to termination by six months' notice by either Hospital authority.

Dated this 8th day of March, 1927.

(Signed) AUSTIN TAYLOR, Chairman,
Westminster Hospital.

(Signed) A. S. WOODWARD, Dean,
Westminster Hospital School
of Medicine.

(Signed) CHARLES L. ATTENBOROUGH,
Chairman of Springfield Mental Hos-
pital Committee.

(Signed) R. WORTH, Medical Superintendent,
Springfield Mental Hospital.

JOINT BOARD OF RESEARCH FOR MENTAL DISEASE (CITY AND
UNIVERSITY OF BIRMINGHAM).

ANNUAL REPORT OF THE LABORATORY FOR YEAR ENDING MARCH, 1927.

(Abridged.)

AFTER commenting on the loss the Board and Laboratory sustained by death of its first director, Sir F. W. Mott, and announcing the appointment of his successor, Dr. F. A. Pickworth, the Report continues as follows:

"*Bacteriological*.—As in previous years, a large number (one-third) of the specimens of faeces show organisms other than *coli*. *B. typhosus* has been found on one occasion, dysentery *Flexner Y* on two occasions, and dysentery *Shiga* on one occasion. Many organisms have been found resembling very closely the typhoid-dysentery organisms, but giving no marked agglutination with the pathogenic antisera available. A large number of *B. Friedlander* is found, and streptococci are occasionally numerous. Another case of bacteriæmia, occurring during the acute phase of mental disorder, has been found. The organism gave the cultural and fermentation reactions of *Bacillus alkaligenes* and was found on two different occasions at an interval of 10 days in the blood in pure culture. This organism was also present in the faeces, together with streptococci, but not in the urine, which contained streptococci only. The blood showed a negative agglutination to *B. faeces alkaligenes*, but a strongly positive (50 Oxford units) to paratyphosus A. The blood became sterile coincident with physical and mental improvement of the patient's condition."

"Streptococci have been found in one case in the brain *post-mortem*; being, as previously found in other cases of positive brain swabs, of the *Streptococcus mitis* class."

"A complete bacteriological examination of a few cases shortly after death has been made, and such work is being continued. The examination of swabs, taken by the Visiting Gynæcologist, with special aseptic precautions, from the interior of the cervical canal confirms our previous findings of the presence of diphtheroid organisms, gram-positive diplococci and various streptococci in the majority (two-thirds) of the cases. In this connection it may be mentioned that in only one case have we found *B. coli*. Material from the nasal sinuses is being investigated by dark-ground illumination and by special bacteriological technique which at present is yet in the experimental stage. Five per cent. of diphtheria swabs have been positive. Serological agglutination tests have now been done on specimens from nearly all the patients in the Birmingham mental hospitals; and in the course of the research upon the antibody-forming capacity of patients treated by vaccine for special therapy."

"*Basal metabolism*.—Work during the past year consisted largely in the investigation of the basal rate of normal subjects under varying conditions. This was rendered necessary by the very low results occurring with patients when tested by the new method. Metabolic rates of the normal subjects investigated differed