

The CHAIRMAN voiced the members' sympathy with the President and Mrs. Campbell and their family following the serious accident to their second son soon after the Annual Meeting at Stirling, and the gratification all felt that his recovery was so complete that he had now resumed his medical studies.

The minutes of last meeting were read, approved and signed by the Chairman.

Apologies for absence were intimated from Sir Arthur Rose, Prof. D. K. Henderson and Drs. A. Dick, T. C. Mackenzie, J. H. C. Orr, D. J. Forbes, C. J. Shaw, C. C. Easterbrook, J. H. Skeen and Patrick Steele.

The SECRETARY submitted letters of acknowledgment from Mr. F. G. R. Robertson and Dr. David Yellowlees thanking the Division for its kind letters of sympathy.

The following candidates, after ballot, were unanimously admitted as ordinary members of the Association :

WILLIAM BLYTH, M.B., Ch.B., Assistant Medical Officer, Riccarton Mental Hospital, Paisley.

*Proposed by* Drs. Mary R. Knight, Neil T. Kerr and Wm. M. Buchanan.

DOUGLAS CAMPBELL DEWAR, L.R.C.P.&S.E., L.R.F.P.S.G., D.P.M.Lond., Assistant Medical Officer, Renfrew District Asylum, Paisley.

*Proposed by* Drs. R. D. Hotchkis, Neil T. Kerr and Wm. M. Buchanan.

CHARLES DAVID BRUCE, M.B., Ch.B.Edin., Dipl. Psych. Ed., Medical Superintendent, Criminal Lunatic Department, and State Institution for Defectives, Perth.

*Proposed by* Drs. W. McAlister, C. A. Crichlow and Wm. M. Buchanan.

THOMAS DYMCK, M.B., Ch.B.Glas., Second Assistant Medical Officer, Edinburgh District Mental Hospital, Bangour, West Lothian.

*Proposed by* Drs. W. McAlister, C. A. Crichlow and Wm. M. Buchanan.

ARCHIBALD MENZIES, L.R.C.P.&S.E., L.R.F.P.S.G., Senior Resident Medical Officer, Hawkhead Mental Hospital, Glasgow.

*Proposed by* Drs. J. H. Macdonald, A. A. Bell and Wm. M. Buchanan.

ROBERT GOW McINNES, L.R.C.P.&S.E., M.R.C.P.E., Senior Assistant Physician, Royal Edinburgh Hospital for Mental Disorders; Physician, Jordanburn Hospital; West House, Morningside, Edinburgh.

*Proposed by* Prof. D. K. Henderson, and Drs. T. R. C. Spence and Wm. M. Buchanan.

After explanations by the Chairman and Secretary of the constitution and activities of the Scottish Association for Mental Welfare, Dr. McALISTER moved "that the Division approach the Council of the Royal Medico-Psychological Association for sanction to support the Scottish Association for Mental Welfare by annually subscribing to its funds as an affiliated body, and by electing official representatives to its Executive Council". The President seconded. Dr. DOUGLAS McRAE moved a direct negative, which was seconded by Dr. R. MARY BARCLAY. On a vote only two members supported the negative, and the Chairman declared Dr. McAlister's motion carried. The Secretary was instructed to take the necessary steps.

Members were then conducted over representative portions of the hospital by Dr. McAlister and his assistants. Visits were paid to the Male Reception Hospital, the Sanatorium—a large villa with 180 beds for senile patients—the Special Treatment Department, where X-ray, dental and similar work is done, and the recently dedicated church, where members had an opportunity of hearing the organ.

Members were kindly entertained to lunch in the hospital, after which Councillor Mrs. SOMERVILLE, Convener of the Mental Health Services Committee of the Corporation of Edinburgh, welcomed the Division to Bangour, and the CHAIRMAN and the PRESIDENT thanked the Committee and Dr. McAlister and his staff for their kind hospitality, and for the arrangements made in connection with the meeting.

On the meeting reassembling, Dr. W. R. D. FAIRBAIRN, Lecturer in Psychology, Edinburgh University, read a paper entitled "**The Role of the Aggressive Instinct in Manic-Depressive Insanity and Allied Conditions**". An excellent discussion followed, contributed to by Drs. CONNELL, McNIVEN, ROSS, ROGERS, CHAMBERS and the CHAIRMAN. Dr. FAIRBAIRN briefly replied to the points raised.

Members were thereafter kindly entertained to tea by Dr. and Mrs. McAlister.

#### IRISH DIVISION.

THE AUTUMN QUARTERLY AND CLINICAL MEETING of the Irish Division was held in the Royal College of Physicians, Kildare Street, Dublin, by kind permission of the President and Fellows, on Thursday, November 3, 1932.

The following members were present : Dr. J. O'Connor Donelan, in the Chair, Drs. Dore E. Allman, S. Blake, Catherine Carey, Kathleen Dillon, Nora May FitzGerald, John FitzGerald, Dorothy Gardner, Norman Graham, G. J. Harrison, B. Honan, R. R. Leeper, J. C. Martin, P. Moran, John Mills, Eveleen O'Brien, R. Taylor, F. O'C. Walsh, R. Thompson (Hon. Sec.).

Apologies for unavoidable absence were received from the President (Dr. Campbell), Dr. M. J. Nolan, Dr. G. H. Keene and Dr. R. H. Taylor.

The minutes of the previous meeting were read, approved and signed by the Chairman.

The following nominated candidate was, after ballot, unanimously elected a member of the Association :

PATRICK J. COURTNEY, M.D. (N.U.I.), Assistant Medical Officer, Donegal District Mental Hospital, Letterkenny.

*Proposed by* Drs. J. C. Martin, R. R. Leeper and John FitzGerald.

The meeting accepted, with pleasure, Dr. Leeper's invitation to hold the Spring Meeting at St. Patrick's Hospital, Dublin, on April 6, 1933, and Dr. Martin's invitation to hold the Summer Meeting at Donegal District Mental Hospital, Letterkenny, in July, 1933.

Dr. DONELAN then introduced the question of the setting up of a Central Laboratory for the furtherance of research in Mental and Nervous Diseases, and, following a discussion, the following resolution was proposed by Dr. MILLS, seconded by Dr. MARTIN, and carried :

"That this Division is convinced that the provision of a Central Pathological Laboratory specially devoted to Research in Nervous and Mental Diseases is most desirable."

The Secretary was directed to forward copies of this resolution to the Medical Superintendents of the district and private mental hospitals, and to ask them to bring it to the notice of their respective committees.

#### CLINICAL MEETING.

Dr. FITZGERALD, Grangegorman Mental Hospital, demonstrated a case showing typical post-encephalitic Parkinsonian sequelæ, and a case of achondroplasia associated with symptoms of alternating insanity.

Dr. NORMAN GRAHAM read a very interesting communication entitled "**Some Remarks on the Treatment of General Paralysis by Diathermy**" (*vide* p. 89).

Dr. Graham's paper was followed by a lengthy discussion. The CHAIRMAN and many members expressed their appreciation of the gratifying results so far obtained by Dr. Graham in this comparatively new method of treatment.

Dr. MORAN read a communication on "**Anti-Typhoid Inoculation in Mental Hospital Practice**" (see below). Dr. Moran's paper also gave rise to a lengthy discussion on the difficult problem of combating outbreaks of typhoid and endemic typhoid in mental hospitals.

Dr. THOMPSON then read a communication on "**The Causes of Death in Female Admissions to St. Patrick's Hospital**". This was discussed by the members present.

Dr. LEEPER then proposed that the Secretary should send a letter to Dr. Nolan expressing the sympathy of the Division in his recent serious illness and their gratification at his recovery. This was seconded by Dr. MARTIN, and carried unanimously.

PAPER.—"**A Note on Anti-Typhoid Inoculation in Mental Hospital Practice,**" by PATRICK MORAN, M.B., D.P.M., Assistant Medical Officer, Mental Hospital, Mullingar.

Prophylactic inoculation with T.A.B. vaccine has been adopted as a routine procedure in the Mullingar Mental Hospital since 1927. In that year there was a serious outbreak of typhoid in the hospital—40 people were affected and 6 died. An exhaustive analysis was made of the order of occurrence of the cases, of the wards in which they occurred, the lines of distribution of food, milk, etc., but it was found impossible to fix the source of infection.

When faced with the possibility of a general epidemic it was decided to inoculate the entire hospital population, although it was recognized that this procedure would increase the difficulty of tracing the carriers, since it destroyed the value of the Widal test.

Other steps were also taken to deal with the problem. The water supply was unfiltered and not above suspicion. A scheme for mechanical filtration of the existing supply was prepared and passed by the Committee.

The hand-milking of the large dairy herd was considered another potential danger, and a mechanical milker was installed.

The sanitary annexes and fittings are old and defective, and a scheme for reconstructing and refitting these is under consideration.

A big building scheme to provide an admission hospital and relieve overcrowding is now being formulated.

A systematic examination of the entire population with a view to discovering and isolating the carriers was decided on. This was rendered more difficult by the fact that the Widal test could not now be used to narrow the field; but in spite of the difficulties this investigation is now being carried out.

I have examined the hospital records for the twenty years prior to 1927, and I find that the yearly incidence of typhoid was an average of 8 cases, and that the average mortality rate among these was 16%.

Since general inoculation was adopted the case-incidence has not altered, but the mortality-rate has dropped to 2%. Besides this, a very striking feature has been a marked diminution in the severity of the symptoms, and an almost complete absence of the common complications and sequela. Heretofore phthisis was an almost invariable sequel to the disease, now we rarely see it. Haemorrhage and perforation never occur now.

The duration of the immunity is generally considered to be about three years. We found it diminished after two years, and we have a general re-inoculation every two and a half years.

Every new case and every new employee is inoculated immediately on arrival. An initial dose of 500 million typhoid and 250 million each paratyphoid A and B is followed, after ten days, by a second dose double the first.

Prophylactic inoculation does not solve the problem of endemic typhoid in a mental hospital. It raises the immunity and so reduces the risk and the mortality, while the necessarily slow sanitary measures are being undertaken. When our overcrowding is relieved, our water supply and sanitary equipment reorganized, and the carriers detected and isolated, we hope that the incidence of the disease will shrink to the level prevailing among the general population.

Even at that level I would agree with the authority who recommends inoculation as a routine for all congested populations.

I have to thank my Medical Superintendent for his kind permission to use the hospital records and to read this note.

#### PSYCHOTHERAPY AND PSYCHO-PATHOLOGY SUB-COMMITTEE.

##### Psycho-pathological References for 1931.

*English and American.*

Members are reminded that the Secretary of the Sub-Committee, Dr. J. Ernest Nicole, Winwick Mental Hospital, Warrington, will be pleased to submit further lists, including the *Monthly Bibliography of the National Committee for Mental Hygiene (U.S.A.)* to any who apply for them. The Book-list, comprising all more important works on Philosophy, Pure and Applied Psychology, Psychiatry and Psycho-pathology, Educational and Social Psychology, Ethnology, etc., is now complete to December, 1932, and includes nearly 4,000 titles.

#### AMERICAN JOURNAL OF PSYCHIATRY.

- Bowman, K. M., and Raymond, A. F.—Hallucinations in Manic-Depressive Psychosis.  
 Farrar, C. B., and Franks, R. M.—Menopause and Psychosis.  
 Gardner, G. E.—Measurement of Psychotic Age.  
 Horton, C. B., and Clarke, E. K.—Transvestism or Eonism.  
 Kasanin, J.—Affective Psychoses in Children.  
 Klüver, H.—Do Personality Types Exist?  
 Krout, M. H.—Personality Testing.  
 Langenstrass, K. H.—Treatment of Stupor.  
 Levin, M.—Basic Symptoms of Schizophrenia.  
 Levy, J.—Quantitative Study of Behaviour Problems.  
 Lewis N. D. C., and Blanchard, E.—“Recovered” Cases of Schizophrenia  
 May, J. V.—The Dementia Præcox—Schizophrenia Problem.  
 Miller, W. R., and Malamud, W.—Psychotherapy in Schizophrenias  
 Partridge, G. E.—Sociopathic Behaviour in Women.