

*The Factors of the Unsound Mind, with Especial Reference to the Plea of Insanity in Criminal Cases, and the Amendment of the Law.* By WILLIAM A. GUY, M.B., Cantab., F.R.S. 1881.

As a step towards the just conception of the plea of insanity in criminal cases, Dr. Guy commences his book with the study of Illusions. The use he makes of them is this. He who knows right from wrong, whatever may be the condition of his mind in other respects, or the force of his impulses, is considered to be responsible for any act he commits. Illusions, he thinks, help us to understand "the surpassing reality of the brain's own creations, and the tyranny they exercise over men's actions, even in presence of the most perfect knowledge of their true nature and condition." And if so, what shall we say of those illusions of the sense of hearing which assume the form of actual commands to commit murder?

Here no doubt is a factor of an unsound mind, by which we are able to realize the brain's spontaneous creative power to a greater degree than by any other.

Then as to delusions. As there are illusions which cannot be traced to the action of what is called the imagination, so delusions arise without the influence of the imagination or reason in their production. They are, of course, as involuntary as the movements of chorea or epilepsy.

Dreams, again. Dr. Guy's main object in his disquisition on dreams is to trace their analogy to insanity.

Somnambulism, whether spontaneous or artificial, offers a still more striking analogy, and bears directly and practically upon criminal responsibility.

Dr. Guy draws a very good parallel between delirium and insanity.

Other factors of an unsound mind—Incoherent Speech and Convulsive Movements—pass in review.

Under the head of Emotions and the Will, the author approaches more nearly the ultimate design of the book, and he observes that he has made no separate allusion to conscience, though a knowledge of right and wrong is so prominent a test of criminal actions in law courts, because he does not see good reason for treating conscience "otherwise than as one of the group of emotions which answer swiftly and certainly to the objects or thoughts fitted to call them into play; or if differing from them in any particular,

in this, that conscience is maintained in a highly sensitive state by the constant and sustained efforts of the teachers of religion," and *vice versa*. Hence, doubtless, morbid excess and insanity, as well as beneficial consequences, but we are surprised Dr. Guy should make so strong an assertion as that "religious mania" would be universally recognised as the prevailing form of unsoundness of mind if it were not for the unwillingness of mankind to affix the seal of insanity to any dogmas which many men hold in common.

In treating of the emotions, the author enforces their connection with illusions, &c., and so prepares the reader to accept the doctrines of Pinel and Prichard in respect to "moral insanity," and assumes that if Griesinger is correct in asserting that "the mental affection which at the commencement was only an insanity of the feelings and emotions, becomes also an insanity of the intellect," which is in accordance with Dr. Guy's experience, there must be a stage of moral insanity.\*

In the second Part of the book, after classifying mental affections into the undeveloped, the degenerate, and the disordered, the author shows that the facts adduced in the first Part would have led to the inference *a priori* that apparently harmless people would, from time to time, startle the world by mischievous and bloody acts had we not known the annals of insane crime. He adopts and amplifies the opinion that Illusions are epilepsies of the senses, Delusions of the organs of thought, Incoherence of those of speech, and so on with other factors of an unsound mind—Mania and Monomania. A classified *resumé* of cases of insane crime follows, and under the head of impulsive insanity he gives an analysis, based on that made by Dr. Hack Tuke, which is of interest. We quote his words: "I arrive at the somewhat unexpected result that, setting aside 10 cases of chronic homicidal monomania, 35 out of the 100 that remain were cases of destructive impulse without ascertainable motive, or with motives of the most trivial kind, 33 of the impulse coupled with or caused by delusion, 13 of the impulse showing itself in imbeciles, 3 in persons subject to epilepsy, 5 suggested or stimulated by witnessing or reading about trials and executions, 4 under the influence of misdirected religious emotion, and 7 in girls and women due to recurring causes or to partu-

\* In a later portion of the work Dr. Guy says, "I would no longer object to the Plea of Insanity being set up in the difficult cases of Moral Insanity and Destructive Mania, the existence of which it is not possible to ignore" (p. 229).

rition. All these are illustrative cases, in some of which the mysterious impulse was confessed with horror and anguish, and resisted with pain and difficulty, in others met by voluntary submission to restraint" (p. 182).

The question of the punishment of the madman is next discussed, and Smollett's well-known dictum canvassed and repudiated. It is aptly remarked that if he, a medical man, writing calmly as an historian of the execution of the mad Earl Ferrers for the murder of his steward, approved of the punishment inflicted by the law, although admitting his insanity, how much more likely is it that newspaper writers should pursue a parallel course in reference to contemporary events of the same character happening in our own day. He thinks Smollett's view "largely prevails at the present moment. . . . The gallows must expiate alike the crime of the murderer and the misfortune of the maniac." In these cases of insane homicides, the lash equally fails. "Meanwhile," says Dr. Guy, "that great charlatan, known in these days as *Public Opinion*, coolly ignores the failure of his panacea, and shows, by one more example, to what order of practitioners he belongs." Yet the author hastens to make it clear that he does not object to either the gallows or the lash in their proper places. His own experience leads him to regard the latter as the only deterrent to minds of the worst character.\* Of the punishment of death, he says that to the madman it has always been more attractive than imprisonment for life, whether in a prison or an asylum, and therefore he does not think justice to society calls for the adoption of Smollett's proposition, although, had it been a question of mercy and not justice, he should have sympathised with, though not assented to it, on the ground that "the very kindest thing we could do to most of them would be to kill them."

Dr. Guy proceeds to submit the question of the proper treatment of the Insane Homicides to the test of figures, which are valuable as facts, whether the inference drawn from them is warranted or not. Thus: *Trials* for murder, on an average 67 per annum, sink to *executions* averaging 11, and even 4 per annum, as happened in 1871. Three times in 70 years (1805-74) the number fell to 5, namely, in 1806, 1838, and 1854. The highest number was 25, once in 1813 and in 1817, but never since. Statistics show that crimes of

\* "The incessant outcry against hanging and flogging disgraces the times in which we live" (p. 194).

violence (at home) decrease in times of violence (*i.e.*, war) abroad, as might be expected. In times of peace evil is concentrated within our own island. Bad men “naturally transfer their operations to foreign lands,” whose inhabitants enjoy the benefit of their “deeds of violence,” or so-called glorious war. In the above chosen seventy years the following figures represent the executions during seven periods of ten years, calculated to the scale of the population of England and Wales:—312, 351, 222, 171, 127, 171, 116.

With the exception of the last number but one, there is a progressive decrease from the maximum (351), the decade comprising the early years of peace down to 116, which is barely one-third of the maximum. During the last decade, the average number of annual executions has been barely 12, or 1 per calendar month, or much less than 1 in 2,000,000 of the population. This happy result supplies us, Dr. Guy holds, with a strong motive to pause before we change the present law, till we have seen what further effect will follow the “great reform” of private executions. Dr. Guy adopts the doctrine of “the greatest good of the greatest number” as the proper ground of State action, although he says “the wrong-doer is not punished as an example.” Surely, however, this is not distinct from, but forms a part, and a very important part, of the utilitarian doctrine.

However, Dr. Guy endeavours to prove by figures that the prevalent doctrine of the Bench, that every time a murderer is not executed on the ground of insanity, an “example” is lost, is statistically false. He takes 30 years, during which period five notorious murderers were executed, Bellingham, Thurtell, Corder, Burke, Bishop, and Williams. For the years following these executions these figures and commentary are given:—

*Increase*, 9, 1, 3. Total, 13. *Decrease*, 5, 5. Total, 10. The execution of these (five) notorious shedders of blood (for I do not speak of Bellingham as a sane murderer) did not therefore act as a discouragement, but rather otherwise; and it is not a little remarkable that the large increase of 9 executions took place in 1813, the year following the assassination of Mr. Perceval, which must have largely occupied the public mind and greatly excited it. The executions, which numbered 12 in 1862, rose to 25 in 1813, and this is the highest figures which the tables record. Bellingham, on whose behalf the plea of insanity was set up and disallowed, was executed, but with the unlooked-for result of encouraging the very acts which the death punishment is held to discourage.

The obvious teaching of these figures seems to be that executions, at any rate in public, do not deter from crime, and unless it is clearly proved that private executions are more deterrent than penal servitude for life, we should have expected Dr. Guy to disapprove of capital punishment altogether, especially as he holds that "neither to the sane nor to the insane class among our criminals does the prospect of long imprisonment or detention for life in a lunatic asylum offer any attraction or temptation, while to the weak-minded and insane it is a positive fascination."

On analysing the figures relating to the cases of M'Naughten, Townley, Buranelli, and Brixey, Dr. Guy found that "of the four cases, there is not one that does not exhibit, for the year following the trial, figures in direct opposition to the popular theory respecting the victim of insanity." In M'Naughten's case, the trials for murder, which were 85 in the year of the trial and acquittal, fell to 75 in the following year; in Buranelli's case (who was executed) they rose from 57 to 82! Certainly, in the action *Guy v. Smollett*, we have no alternative but to give our verdict in favour of the plaintiff.

Murders reach their highest point during periods of public excitement or anxiety, *e.g.*, cholera, the Indian Mutiny, the cotton famine, parliamentary elections, and exhibitions.

Into Dr. Guy's sensible observations on the test of criminal responsibility, we need not enter. They are in accordance with those always maintained in this Journal and the final judgment of the Lord Chief Justice of England, Alexander Cockburn (probably second to none among those who have adorned the Bench), so far as relates to the test of the knowledge of right and wrong, and the appreciation of the nature and quality of the act. Dr. Guy does not, however, substitute for this test that of the power of controlling certain acts and impulses, but reduces the question to one simply of the *unsoundness of mind* of the culprit about the time when the act was committed or contemplated. Perhaps it would be fairer to Dr. Guy to say that he assumes that any one who is of unsound mind is unable to control himself. We are not sure, however, that this is his contention, or whether he considers that no person of unsound mind should be punished.

Dr. Guy has our full sympathy when he advocates the substitution of skilled witnesses or experts for witnesses brought forward at the pleasure of either side, and when he pleads for the confinement of a larger number of imbeciles addicted to crimes, in order to lessen the number of the latter.

Were we to criticize this book, we should say that but little of the first Part materially strengthens the object which the author has in view, while the second Part is really all that is required for the purpose, and forms a valuable contribution to the subject of "the Plea of Insanity" from one who may justly claim to have "a paramount love of the truth." We are afraid that many readers will be deterred from doing justice to the latter by the length of the preliminary enumeration of the well-known signs of mental disorder.

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*Fichte.* By ROBERT ANDERSON, M.A. Blackwood and Sons, Edinburgh and London.

This is one of the series of "Philosophical Classics for English Readers," edited by Professor Knight, LL.D., which we have already had occasion warmly to commend for the manner in which they are prepared. Mr. Anderson has done his work well, and those who wish to acquaint themselves with Fichte and his philosophy in general cannot do better than read this book before proceeding to study him in detail.

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### PART III.—PSYCHOLOGICAL RETROSPECT.

#### 1. *American Retrospect.*

By D. HACK TUKE, F.R.C.P.

*The American Journal of Neurology and Psychiatry.* Edited by T. A. McBRIDE, M.D. Associate Editors, LANDON CARTER GRAY, M.D., EDWARD C. SPITZKA, M.D. Vol. i., May, 1882.

Does the multiplication of journals in America bearing on neurology and medical psychology indicate the increased study devoted to them, or does it also prove the spread of nervous disorders? The former is certainly shown; the latter we must fear to be also the case, and according to some asylum superintendents in the States, the fact admits of demonstration. Be this, however, as it may, we have to welcome another journal devoted to a branch of medical science, still so obscure and presenting so many difficult problems for solution, that there is no danger of there being too large an amount of study and research expended upon it.