

*The Lunacy Bill.*

As was anticipated, the Lunacy Bill introduced by the Lord Chancellor into the House of Lords is very similar to that which his predecessor, Lord Selborne, had prepared last year. Baron Herschell spoke with the ability and lucidity which have always characterised Sir Farrar Herschell at the bar. It has proved a great advantage to the new Lord Chancellor, and to those concerned in proposing amendments to the Bill, that he sat upon the Select Lunacy Committee of the House of Commons in 1877, and took an active interest in its proceedings. On the occasion of the second reading of the Bill the Lord Chancellor began his speech by stating that none would deny the necessity of legislation on lunacy, inasmuch as the public mind was more and more convinced that it was far too easy to "incarcerate" any person as a lunatic, and that the safeguards were quite too few. He allowed that it was highly creditable to the medical profession that there had been so little abuse of the powers granted them, and he gave credit to the Lunacy Commissioners for these abuses not being greater. The interposition of a County Court Judge, a Stipendiary Magistrate, or a Justice of the Peace, chosen by Quarter Sessions, is the chief means by which a proper safeguard may be obtained. The petition for confinement in an asylum must be presented, if possible, by a relative of the alleged lunatic. A report of each lunatic under detention must be forwarded at the end of the three years for which the order will last, and if not satisfactory the patient will be discharged. Superintendents of asylums are to forward unopened all letters written by the patients to public officials. No person not actually a pauper is to be confined in a pauper asylum. The Lord Chancellor laid it down as an axiom that "so long as there are institutions the keepers of which have a pecuniary interest in the detention of patients in them, there can be no absolute security against improper proceedings." Private asylums are not to be abolished, but no new licenses are to be granted, and no increase will be allowed in the number of lunatics who can be kept under any existing licenses. "This," observed the Lord Chancellor, "will produce a gradual cessation of the number of licensed houses, and thus prepare the way for public asylums." These were the main points referred to by Baron Herschell as characterizing the objects the framers of the new Lunacy Bill have in view.

Having in a former number of this Journal stated our opinions in regard to the previous Lunacy Bill, it is unnecessary to comment upon the provisions of the new one, so far as they are identical. The Parliamentary Committee of the Association took the earliest opportunity of considering the proper course to pursue in order to minimise the very objectionable clauses in the Bill, and to introduce other clauses in the interests of the superintendents of asylums, whether public or private, and they communicated their views as quickly as possible to the Lord Chancellor.

It may be observed that in the debate on the second reading, the Earl of Milltown expressed his disappointment that the Bill was not of a more drastic character as regards private asylums, and also urged an increase in the number of the Commissioners. Lord Coleridge was in favour of the entire suppression of licensed houses, and asserted that he had seen, both as counsel and as a judge, many cases in which it had been manifest that persons perfectly unfit to be detained in a lunatic asylum had been kept there because it was to the interest of the keepers to do so. It was surely unnecessary to remark that it had come to his knowledge that the proprietors of private asylums are not regarded in an altogether favourable light by other members of the medical profession. A certain suspicion, he hinted, attached to these unfortunate men. The general tone of Lord Ashbourne's speech was one which likewise indicated singular misgivings as to the mode in which patients are treated by those under whose charge they are placed. With scarcely any exception, indeed, the current of sentiment was anti-medical, although the Lord Chancellor paid a high compliment to the profession in general, and even Lord Coleridge expressed the opinion that no examination of a supposed lunatic before a magistrate should take place without the assistance of a medical man. It might have almost been supposed that we were living at the time when little had been done to increase the comfort and prevent the improper detention of those confined in asylums, and we regret to observe the continual use by the peers during this debate of the terms "incarceration" and the "keepers" of private asylums in an obnoxious sense.

We have said that the present resembles the former Bill. There are, however, several extremely important additions, and to some of these the Lord Chancellor did not refer in his speech. Clause 26 enacts that "After the

passing of this Act, except in the case of lunatics so found by inquisition, no order shall be made for the reception of a lunatic as a single patient." Granting that this is the logical conclusion of the clause which aims at the gradual extinction of private asylums, it is none the less a very objectionable proposal, and we trust that it will never become law. As we write (March 8th), the Parliamentary Committee of the Association has asked permission to form a deputation to the Lord Chancellor, in order to urge their objections against this as well as other clauses, the passing of which would seriously affect the interests of patients and their friends, not to mention those of a large number of medical men. There are, we contend, special advantages connected with the placing of many cases of unsound mind in the houses of medical men as single patients. One of these obviously is the avoidance of the stigma which still unfortunately clings to a residence in either a public or private asylum. Another advantage is the family treatment of a first attack, and one perhaps of short duration, in which asylum associations may be actually injurious, and give unnecessary pain to the feelings of the patient. A third reason for permitting single patients is the fact that in many instances the relatives are willing to remove the lunatic from home, but will not listen to the advice given by the medical attendant or the mental physician to send the patient to a lunatic asylum. Should this objectionable clause be passed, the consequence will be that those suffering from attacks of insanity will be kept at home far too long, or they will be removed to asylums out of England.

Another important clause which appears for the first time in this Act, confers upon the Lord Chancellor the power to amalgamate the Lunacy Departments, namely, the office of the Masters in Lunacy, of the Chancery Visitors, and of the Commissioners in Lunacy. He may also give such directions as he thinks fit for the reconstruction of a Lunacy Board. This certainly is a power which, if exercised, will involve a great change in the Central Lunacy Department.

The new clauses, then, which propose these changes in the Lunacy Board, single patients, and private asylums, are, it must be allowed, of a serious character, although so few in number. Proprietors of the latter justly complain.