

"The suggestion as to the necessity for some alteration in the regulations governing the management of the examinations for the nursing certificate, which was referred to the Educational Committee at the last annual meeting, has been under consideration on several occasions during the year, and a report has been prepared, suggesting several modifications in the rules, with the view of raising the standard of training and examination, and providing further safeguards against the granting of the Association's certificate to insufficiently qualified persons. The question of the regulations for the conduct of the nursing examination for attendants in the Colonies was referred to the Educational Committee, and it is still under consideration.

"During the year 743 candidates (males 357, females 391) entered for examination for the nursing certificate. Of this number 637 (males 299, females 338) were successful; 79 (males 44, females 35) were referred; 32 (males 14, females 18) withdrew; and the result of the examination of two candidates from Cape Colony has not yet been received.

"Twelve candidates were examined for the professional certificate granted by the Association, and it was suggested to one of these gentlemen that he should come up again for examination on another occasion.

"In connection with the valuable Gaskell Prize, which is open annually to competition, the Council have decided that the examiners shall have power to award a second prize whenever, in their opinion, there are two candidates of sufficient merit, and that this second prize be given from the unawarded funds of previous years."

On the motion of Dr. PERCY SMITH, seconded by Dr. CLOUSTON, the report was adopted.

This concluded the business meeting.

AFTERNOON SITTING.

MEMBERS PRESENT.

T. W. McDowall, T. S. Clouston, H. Hayes Newington, H. Rayner, R. Percy Smith, Fletcher Beach, W. Julius Mickle, A. R. Urquhart, J. T. Callcott, E. Powell, David Bower, A. R. Turnbull, Walter Smith Kay, D. Yellowlees, T. Outterson Wood, R. L. Rutherford, G. Hare Philipson, James Rorie, J. Tregelles Hingston, A. W. Campbell, Frank A. Elkins, C. Hubert Bond, Margaret C. Dewar, J. W. Eastwood, W. F. Robertson, Bedford Pierce, T. Seymour Tuke, James Rutherford, J. G. McDowall, J. Carlyle Johnstone, R. D. Hotchkiss, James R. Whitwell, Sir James Crichton Browne, Crochley Clapham, W. L. Ruxton, G. Stevens Pope.

At the afternoon sitting the PRESIDENT (Dr. T. W. McDowall) took the chair. After thanking the members, for the honour they had conferred upon him, in appropriate terms, he moved a vote of thanks to the retiring President (Dr. Mickle).

This was carried with acclamation.

The PRESIDENT then moved that an address be presented to the Queen, expressing the congratulations of the Association on the attainment of the sixtieth year of her reign.

This motion was also carried with acclamation.

The PRESIDENT next alluded sympathetically to the loss the Association had sustained by the deaths of Sir John Bucknill and Dr. Lockhart Robertson. Their personal characteristics were well known. He would refrain from speaking at length upon their professional eminence, and the many debts the Association lay under to those gentlemen, if only for what they did in the early years of the Association. They would all remember how Sir John Bucknill worked, and how he started their *Journal*. (Applause.) He was an energetic and determined man, and an efficient editor. The two gentlemen were bound up with the history and the advance of their Association as

general secretaries. He moved that a communication be sent to the relatives, expressing their great admiration, and at the same time their sincere sympathy.

The motion was unanimously agreed to.

The PRESIDENT announced that Dr. A. E. Macdonald was present as a delegate from the American Medico-Psychological Association, and warmly welcomed him on behalf of the Association.

Dr. McDOWALL then read his address, which, with the subsequent discussion, is printed at page 683.

DR. MERCIER'S MOTIONS ON MEDICAL RETICENCE.*

Discussion on Dr. Mercier's paper, November 19th, 1896.

Dr. RAYNER thanked Dr. Mercier for having brought this subject before the Association, and expressed his agreement with the principles laid down.

Dr. BLANDFORD expressed full agreement with what Dr. Mercier said about professional secrecy in general, but thought that with the insane the question is attended with a good deal more difficulty than in the abstract law and principle that professional secrecy is to be observed. He observed—A patient may come before us, and in a condition of melancholia may not only confide to us delusions and ideas that he may possibly commit suicide, but he may confide to us ideas about his property which may be of very great importance to that property and to his relatives. He may have gloomy ideas with regard to the property which he possesses, and he may be willing, and in fact desirous, of getting rid of that property, perhaps at an enormous sacrifice, and half ruining himself in the process. There are also many cases which come before us which are of very great difficulty, and where we have to observe great secrecy among the different members of a patient's family. We hear things from the patients which we do not care to reveal perhaps to any of the family, or to certain portions of the family. There is scarcely any case about which we are consulted when there is not more or less of family dissension in all directions. I think it a very salutary principle to lay down, that, as far as we can, we must reserve that professional confidence with regard to insane patients that we do with the sane.

Dr. SAVAGE—I quite agree with Dr. Blandford and most thoroughly with Dr. Mercier that there can be only one law. Of course there are exceptions, and one finds many. For instance, a minor consults an alienist, and there are certain symptoms in his history that one thinks should be communicated to his parents. But are you justified, in the case of a young man of 21 presenting certain symptoms, in telling his father and mother that you believe his malady to depend upon this and that? In relationship to this I would mention a somewhat similar case. A father consulted me about his daughter, whom I had not seen, giving me certain symptoms, and I gave certain advice. The patient heard that certain advice had been given problematically on her case, and she demanded particulars as to what information I had received from her father as to her symptoms and what advice I had tendered to him, and when I declined to give any information I was threatened with legal proceedings. So that there are many other points to consider in this relation. I would mention also another case which may be interesting to our profession, and which came before my observation. A child, whom I had seen, the child of a lunatic, was extremely delicate, and it is a question whether that child can be reared. An enormous fortune depends upon the living of that child. It is of the utmost importance for the mother that this child or its representative should live, and the lawyers are afraid that this child may disappear or die, and might be replaced by somebody else. I was requested by the lawyers to examine the child and supply such information to them, as lawyers, as would enable them to write down a description, so that they themselves might be able to identify the child. As this child had been seen by a surgeon I preferred to send the letter on to him, and, as I expected, he declined to have anything to do with it, considering it would have been a breach of professional etiquette. One

* *Journ. Ment. Science*, p. 277, 1897.

feels most strongly that there is only one rule in relationship to this, viz., to "do unto others as you would that others would do unto you."

Dr. KRISTEVEN illustrated the difficulty of the question by a case of incestuous seduction under the age of 16, and asked—What is my position? I knew of this crime that the lad had committed. The fact was not confided to me by the patient herself; she was a minor. It was the mother who brought the case to me. Supposing the matter had come to the ears of the police, what is my position?

Dr. WHITE thanked Dr. Mercier, and continued—With regard to the last speaker, it has probably occurred to many of us, as it has occurred to me, that in the case he mentioned the medical man would not be in any way justified in betraying the secret committed to his care, for I take it that the mother in that case was the legal representative of the patient, and as such, the secret is the secret of the patient confided through the mother, and therefore it is as important that it should be carefully preserved by the medical man to whose care it is entrusted as though it were one of the most important secrets that he possessed.

*Discussion.**

Sir JAMES CRICHTON BROWNE said he would venture to suggest that the subject might be referred to a committee, who could discuss the practical application. Perhaps Dr. Mercier himself would rather wish for it to go to a committee who could think the whole matter out in all its bearings, and ascertain whether it was covering the ground, or did not cover too much. He could understand cases arising where a man might not be able absolutely as a member of that Association to conform strictly to the terms of the two resolutions which Dr. Mercier moved. All sorts of difficulties and problematical questions might arise, and it would be difficult to lay down a regular rule. The question required the most careful consideration. He would like to recall to Dr. Mercier's mind the question of official reticence. The Commissioners in Lunacy bound themselves to decline information on oath. In 1890 they were ordered not to disclose without permission, and to keep secret everything that came to them in an official capacity till they were by legal authority required to divulge. It was no use binding those who were already bound by that professional confidence. He would strongly urge careful consideration before they bound themselves to any definite policy.

Dr. MERCIER said the matter had been considered with very great care. He expressed in those resolutions a very definite opinion on the subject, and they were framed to be binding after mature and careful consideration. There was no doubt something to be said for the postponement of further consideration. Something was to be said for the other side. Sir J. Crichton Browne said it was a difficult and delicate matter, and it did occur that there might arise cases in which it would be very difficult to apply these conditions regularly; but, as he said when he introduced the subject, hard cases made bad law—*i.e.*, if they allowed the exceptions of any particular case to induce them to make an exception to one general official law, they had better abolish the law altogether. He would not like the members to come to a decision upon the matter without mature consideration, but he must remind the members that they had had ample time—nearly six months—in which to make up their minds. He did not think it too much, therefore, to ask the meeting to come to a conclusion upon the subject that afternoon.

Dr. PERCY SMITH pointed out that the College of Physicians entirely refused to pass any resolution which would become a public dictum on this subject, and for which they would be held responsible. As to the second resolution, he thought it would prevent any publication in the *Journal* of any medical cases in which the patient had told them something. It would take away the opportunity, through non-publication, of spreading anything that would be for the welfare of and conducive to the public safety. He thought it inadvisable that they should pass the resolutions.

* Newcastle Meeting.

Dr. CLOUSTON said that was the first ethical question that had been brought before the Association. It seemed to him for that Association to solemnly bind the members to the thesis that information got from their patients was only to be revealed when it was expedient for the welfare of the patient, or for the public safety, was a large and serious proposition indeed. What Dr. Percy Smith had said applied to a certain extent. For the publication of their clinical cases they used a great deal of information which they got from their patients, and he saw there was no provision when they were placed in the witness-box by which they could answer plain and simple questions of no real significance. He would not like to be the witness standing up before counsel and refusing to answer relevant questions by saying that the association of which he was a member had come to that resolution and bound him not to give information because he got it from a patient. That would look foolish in a law court. (Laughter.) It was a question whether the membership of that Association gave any right or title to bind men's consciences. He held that they could not use the Association for any such purpose, its whole object being for an entirely different purpose. They did not become members to be in any way controlled or influenced in their ethical conduct by any opinion of the other members of the Association. (Applause.) On general principles he was sorry, but he did not possess any faith with regard to the subject, and he thought it would be wrong to commit themselves to any such proposition.

Dr. RAYNER agreed with the previous speaker as to their refusal to be bound by dogmas, and on that ground alone he would prefer not to pass the resolutions.

The PRESIDENT—I must say for myself that if a small committee passes these resolutions I shall protest against them. (Laughter.)

The motions were not seconded, and the next business was called.

Dr. ERIC FRANCE then read his paper on "Tuberculosis in the Insane: its Prophylaxis." (Printed, with discussion, at page 723.)

SECOND DAY.

The Association resumed its sitting on Friday morning in the Lecture Hall at the College of Medicine, Dr. T. W. McDowall (President) again in the chair.

Dr. HAYES NEWINGTON read a paper on "Some Mental Aspects of Music." This, together with the discussion, will be found amongst the original articles at page 704.

Dr. FORD ROBERTSON next read a paper on "The Normal Histology and Pathology of the Neuroglia in Relation Specially to Mental Diseases." (See original articles, page 733.)

FRIDAY AFTERNOON.

Dr. A. W. CAMPBELL read a paper "On the uses of Formol in the Neurological Laboratory" (with microscopical demonstrations), and another, "On the Course of the Pyramidal Tract" (with lantern demonstration).

Discussion.

Dr. HOWDEN, of the Durham College of Medicine, placed before the members several specimens which showed the difference between the preservative action of alcohol and formol. Dr. Howden said he should certainly recommend all the members present to use this method of mounting biological specimens. He thought it would completely reorganise the method of working in use in many biological laboratories.

The CHAIRMAN said they had tried the formol mounting at Morpeth, and found that it worked admirably.

Dr. HOWDEN said the formol method was cheaper because of the time it saved. One of the specimens which he showed them had been, he said, mounted for several months, and looked as well as ever.

Dr. CLOUSTON remarked that he was very much impressed by its efficacy.

Dr. NEWINGTON said, as a non-pathologist, he must express his great appreciation of the use of those little excursions into science. He was perfectly sure that gentlemen like Dr. Ford Robertson and Dr. Campbell were not only doing individual members good, but also doing the Association as a whole an enormous amount of good by directing public attention to its work. (Applause.)

Dr. CLOUSTON agreed with Dr. Newington in regard to the great value of these demonstrations, and suggested that the divisional meetings might well take up the question of scientific pathology, and take some steps by which the investigators in this field of science in individual asylums could have some inducement offered them to stay at this branch of work, instead of being, as at present, somewhat shifting members of the community. (Hear, hear.) These gentlemen had thrown themselves into this special and elaborate branch of work, and he thought it was for them to endeavour to see if we could not secure their services for medicine and science for a longer time. He thought it was one of the most important questions before them at the present time. (Hear, hear.)

Dr. MERCIER said that it was, in his opinion, a great source of congratulation that at a provincial meeting they could have two gentlemen who could produce such absolutely unique specimens as had been shown on that occasion. (Hear, hear.) After highly eulogising the work of Dr. Robertson and Dr. Campbell, he moved a vote of thanks to them.

The CHAIRMAN said he was sure it would be the wish of all present that he should thank Dr. Campbell very specially, and express to him their sincere admiration of the things he had shown them, both on the lantern screen and in the psychological laboratory. He was not in the habit of paying compliments, but he must say that the demonstrations of Dr. Ford Robertson and Dr. Campbell had been most admirable and most excellent.

The CHAIRMAN then conveyed the thanks of the Association to Dr. Campbell, who duly acknowledged them.

The CHAIRMAN then proposed a vote of thanks to a body to which he had the honour to belong, namely, the Durham University College of Medicine, for the many kindnesses which had been shown them during their meeting, and also for their courtesy in allowing them to meet in that building.

Dr. NEWINGTON seconded, and the motion was carried by acclamation.

This concluded the proceedings.

THE ANNUAL DINNER, ETC.

The annual dinner of the Association was held on Thursday evening, the 29th July, at the Grand Hotel, Newcastle-on-Tyne.

The attendance was large, and included amongst the visitors J. Blencowe Cookson, Esq., Chairman of the Committee of Trustees of the Northumberland County Asylum, and other members of this Committee, Professor Philipson, President of the College of Medicine, Professor Howden, and other leading members of the profession in Newcastle.

Professor Philipson entertained the members at lunch on Thursday in the most hospitable manner, and Dr. Callcott exercised a similar hospitality on Friday at the Borough Asylum.

The excursions to Hexham and Durham, and to the great Elswick Works, which had been arranged by the President, were not carried out, owing to a very large proportion of the members leaving before Saturday.