

that "crimes are now nearly five times as numerous as forty years ago"—which we venture to doubt; and (2) "that New York has grown wickeder in the last ten years"—which we are inclined to consider probable if possible.

Dr. Christison wanders off occasionally into what he would call Psychologics, during which he formulates the proposition that "mind molds (*sic*) matter, while matter conditions mind by its inherent limitations." Notwithstanding the above lamentable restrictions, he considers that "it is in every-day evidence that a fortunate education will produce the best character in spite of the physical deformities we call degenerate stygmata (*sic*). External features do not indicate the moral character, though they must always represent energies which, if not well directed, will run wild. It thus would seem that environment explains heredity, and that, strictly speaking, nothing is inherited but specie characteristics." "Specie" is good, and no doubt some reference is intended to the "stygmata" observed amongst the gatherers of the almighty dollar.

Another interesting observation of our author's is, "According to statistics, as woman encroaches upon man's sphere she becomes more and more liable to become insane or to commit crimes." This is rather rough on the New Woman.

We really cannot follow our author further through his tangle of "repeaters," "hard cases," "safe blowers," &c. &c. He winds up with a chapter on the degenerate ear, concluding as follows:—"But the ear is very sensitive to emotion, as it is but little influenced by the will, and thus it may betray emotion when no other part of the body does." It is just possible that the author's ears may "betray emotion" should he come across this review.

PART III.—PSYCHOLOGICAL RETROSPECT.

SOME ASYLUM REPORTS, 1897-8.

English County and Borough Asylums.

Berkshire.—This report, the first one which we take in hand, raises the cry of want of room, either immediate or in the near future—a cry which is met with in almost every other report received by us. The accommodation is in process of being raised from 630 to 800 beds, but before this addition is ready it is feared that the authori-

ties will be in sore straits. Dr. Murdoch is of opinion that several cases, sent from workhouses, did not require asylum care.

Bristol.—A change of the city boundaries in 1897 added no less than 139 patients to the number for which the city was already responsible. This and similar additions have led to the further erection of blocks, and the 1000 beds, for which the administrative centres were provided, will soon be in existence.

Chester (Upton).—The electric light has superseded gas, and has demonstrated its practical and financial superiority. The weekly maintenance rate is 7s.

Derby (Borough).—Of the 82 admissions, more than one quarter were readmissions. These included cases sent to workhouses, every one of which was returned as unsuitable. In speaking of the number of cases sent in, for the reception of which the asylum was not intended, Dr. Macphail says:

Another unsatisfactory feature about the admissions must be mentioned—the fact that 5 children under 16 years of age were sent here for treatment. Although in each case they were certified as violent and dangerous, and requiring asylum treatment, we found them only troublesome in the sense that their habits were not clean.

Dorset.—This report contains several excellent photographs of wards, &c. We think this is desirable, as giving an opportunity to the outside public of seeing what asylum wards are really like. The accommodation for private patients is evidently excellent. £2500 profit was made on out-county and private patients. We hear that already steps are being taken to add to the accommodation. Ninety per cent. of the admissions were “first” cases. This is an undoubtedly high proportion, and seems to justify Dr. Macdonald’s opinion that, in Dorset at least, “occurring” insanity is on the increase. In 80 per cent. of cases coming from Portland heredity was found.

Glamorgan.—Dr. Pringle is not only right, but he is wise in preaching to his local authorities their duty in sanitary matters.

Now whilst many of these causes are avoidable, others are wholly beyond the control of the individual, and must be dealt with by the community, whose duty it is to provide healthy surroundings, so as to enable everyone who wishes to lead a wholesome life. When one sees, even in the homes of the wealthy, no provision for letting either fresh air in or impure air out, it need not be a matter of surprise that in the homes of the working classes the only ventilation is by doors or windows, which practically means that during the winter months the same air is breathed over and over again, a lower vitality results, and, too frequently, a craving for alcoholics, owing to the sense of temporary comfort and well-being that they give.

The following statement may well be added to our vaccination facts.

A female patient was found to be suffering from smallpox shortly after the visit of her friends, who, I believe, infected her. She was isolated as well as we could in our overcrowded condition, and she made a good recovery, and no other cases occurred; but we took the precaution of vaccinating all the inmates, sane and insane, who had not been recently protected.

Gloucester.—This report invites criticism, in the first place as to the unsatisfactory statistical information supplied. As we have frequently pointed out, this is one of the very few institutions in which the Tables of the Association are seriously departed from. But it also is, in places, unnecessarily aggressive. Because Mr. Craddock has much dementia to complain of (how much cannot be discovered in his tables) he, in despair, writes:

When I read reports of a recovery rate of 50 per cent. on admissions, I can only admire and envy, though sometimes sorely tempted to wonder with the old gillie, whether "higher up stream there are bigger fish or bigger leears!"

There is a *tertium quid*, which no doubt the gillie hid from his master—big fish require much art in catching. Anyhow, it is not for one medical superintendent to suggest to the public that any of his more fortunate colleagues may be fraudulent in his returns. The Committee in 1896 ordered that "no references should be given to those leaving to undertake similar work in other asylums," with a view to "checking the restless spirit and love of change." This has had a marvellously good (?) effect. We take leave to question the morality and wisdom of such a procedure. How can it be expected that good and suitable candidates will apply in the face of an unusual and harsh condition? The right way to check restlessness is to give good wages and a fair pension. This might well have been tried at Gloucester in the first instance. We wonder whether the same provision is attached to the junior medical staff.

Kesteven.—We have to congratulate Dr. Ewan on his appointment to the asylum of this newly separated area. The patients, to the number of 102, have been temporarily lodged in the old Grantham Workhouse, which has been adapted to requirements. Land has been purchased for a new asylum at Quarrington, near Sleaford, and plans are being prepared.

Middlesex.—The Annexe for Idiots has been opened. The Commissioners at their visit recorded their opinion thus: "We can hardly adequately express our satisfaction at this arrangement; and the neatness of these children in person and dress, together with their contented looks, show clear indication of the care and kindness bestowed upon them." A similar opinion was formed by those members of the S.E. Division of the Association who attended the meeting at Wandsworth in March of this year, on the hospitable invitation of Dr. Gardiner Hill. Notwithstanding this substantial addition, a committee has been appointed for the purpose of providing a new asylum, where it is proposed to have accommodation for private patients.

Monmouth.—The County Borough of Newport is leaving this asylum, and must remove its patients before the end of 1906. The union between Monmouth, Brecon, and Radnor has been dissolved also, the latter two counties having to provide accommodation for

themselves. Thus there will be much building activity in these parts. The committee gave each of the seventeen attendants who obtained the Association's certificate a silver medal, a gratuity of £2, and a substantial addition to his or her wages.

Nottingham (City Asylum).—Dr. Powell suggests to the committee the provision of accommodation for private patients of slender means, since it is difficult to find such accommodation anywhere in the Midlands. 14.3 per cent. of the admitted cases were general paralytics, and 20 per cent. were due to intemperance.

Salop and Montgomery.—The admissions showed the unusually high proportion of 60 per cent. of acute cases, no less than 16 cases out of 202 being acute dementia. We could wish that Dr. Strange would adopt the Association's Table of Causes. A considerable addition to the accommodation is called for by the crowded state of the wards.

Stafford (Burntwood).—We are glad to see that arrangements are being made for erecting on the male side an infirmary block on the same lines as the admirable accommodation recently provided for the females.

The farm has, as hitherto, been invaluable in providing an outlet for the energy of many of our troublesome cases—especially of our turbulent epileptics, of whom we have a very large number; and as a restorer to health of those recovering from various mental disorders its usefulness cannot be exaggerated. The past year has, in addition, enabled us to show a good balance at the right side of the profit and loss account, and the professional valuers in their report write that they “found the farm in a very good state; in fact we have seldom, if ever, seen a better lot of stock or in better form.”

Sunderland (Borough Asylum).—Dr. Elkins has had but a short tenure of office here, having been promoted to the Leavesden Asylum in place of Mr. Case, whose death shortly after his retirement we greatly regret. Dr. Middlemass has succeeded him. The drainage has continued to give trouble, but it is hoped that this will now cease. The admissions have increased by leaps and bounds. The number of cases becoming chargeable and sent to the asylum (Durham County till 1895) have been in the last eight years respectively—59, 48, 72, 63, 73, 71, 103, 102. On turning to Table XI to see whether the large increase in 1897 has been due to the filling up of vacant accommodation with troublesome work-house wrecks, we find no case of chronic mania or chronic melancholia, and only one of secondary dementia, among the admissions. We are forced to the conclusion that there is in Sunderland a substantial increase in “occurring” insanity. Heredity was proved in 41 per cent., general paralysis accounted for nearly 10 per cent., and intemperance was assigned in 22 per cent. as a cause.

We are pleased to see that in addition to table x, Dr. Elkins (who makes the report) gives another, in which the forms of

insanity on admission are arranged according to Skae's classification.

Sussex (East).—Dr. Saunders, as usual, gives a valuable little table in the body of his report showing his prognosis of cases on admission. Of the 243 admissions 65 had good, 52 fair, and 125 bad or hopeless prospects, the latter being in striking contrast with the analogous proportion at Sunderland. More than a quarter of the admissions were actively suicidal.

A large number of senile cases are sent here—let us hope it adds to their *euthanasia*—but sometimes the thought springs to mind that, for a mere senile breakdown, a person might be spared the association of a lunatic asylum with their life's history. In this connection it may be mentioned that the combined ages of four out of nine females admitted in the month of February amounted to no less than 302 years.

This report always contains a table (which might well appear in all other reports) showing the exact disposition of every pauper lunatic of the county, whether in the asylum, workhouse, with friends, &c. On comparing this year with last year we are struck with a great diminution in workhouse patients. A foot-note accounts for this as follows:

Some re-classification of the infirm in mind has been made in the Brighton Workhouse, and these figures show a decrease of 94 persons now certified as compared with last year's return.

It is cheering to hear of another way of reducing the total amount of insanity in the country.

Worcester.—The present report of the superintendent is made by Dr. Braine-Hartnell, who has succeeded to the office vacated by Dr. Cooke on his appointment to a commissionership in lunacy. The latter event is recorded by the Visiting Committee in terms of congratulation, regret, and warm appreciation of the work which Dr. Cooke has done for the county.

GERMAN RETROSPECT.

By William W. Ireland, M.D.

The Significance of Deficiency of the Corpus Callosum.—It might appear that it would be easy to find out the function of the corpus callosum (*trabs cerebri*), of which the situation is so suggestive and the anatomical relations so clear and definite, yet neither dissections nor vivisections nor the study of degeneration nor development have solved the *Balkenfrage*. Dr. H. Zingerle has a long paper on this subject in the *Archiv für Psychiatrie*, Band xxx, Heft 2. He describes the case of a little boy three and a half years old in whose brain only the genu of the *trabs* was remaining; there was hydrocephalus internus sufficient to mask any possible symptoms following the destruction of the corpus callosum. Dr. Zingerle has made a diligent study not only of his