

forth by the Association in their last published resolution on the subject would be quite insuperable. The Commissioners, desirous of supporting as far as possible the interests of the Superintendents, propose simply to seek an excision of the Statutory proviso which now renders confirmation by the Quarter Sessions necessary to any valid grant of superannuation. Should the Committee, after this communication, desire to press their views upon the Commissioners, it is requested so to do without delay. A meeting of the Board takes place on Monday next, at 12 o'clock, and would afford an opportunity of discussing the matter which may not again occur in time for legislation this Session.

" I am your obedient Servant,
" CHARLES PALMER PHILLIPS,
" Secretary."

" Dr. Lockhart Robertson,
" Haywards Heath Asylum."

I attended the Board at the time specified, accompanied by our Honorary Secretary. The result of this conference was to confirm my impression that no hope could be entertained of Parliament placing the retirement upon the footing this association desired, viz., as a matter of right. Acting on an invitation from the Commissioners, I subsequently transmitted to them the following memorandum on the question, accepting their facts, and rather endeavouring after what might be attainable, than adhering to an impracticable resolution:—

Memorandum on the Superannuation Clause submitted to the Commissioners in Lunacy, by the President of the Medico-Psychological Association, February, 1868.

1. I desire respectfully to thank the Commissioners for their courteous reception of the claims I have on several occasions made on them to aid the Medico-Psychological Association to obtain a revival of the superannuation clause of the "Lunatic Acts Amendment Act," 1862.

2. The following illustrations will serve to show the unequal and unjust operations of the existing superannuation arrangements in the County Asylums.

Dr. Williams retired from the superintendence of the Gloucester Asylum, after seventeen years' service, disabled by an injury received in the performance of his duty. Two-thirds of his salary and allowances would have been £532 a year. Dr. Williams received £350.

In 1862 Dr. Huxley retired from the superintendence of the Kent Asylum, after a service of fifteen years. The value of his salary and allowances was equal to Dr. Williams', viz., £800. He only received £450, instead of £532 (two-thirds).

In 1866 Mr. Hill received, on his retirement in grave ill health from the superintendence of the East Riding Asylum, the full allow-

ance sanctioned by the Act, viz., £575, being two-thirds of his salary and allowances.

In 1867 Dr. Lawrence retired from the superintendence of the Cambridge Asylum, after seven years' service, utterly broken in health. The sessions granted him, by way of superannuation, an allowance of £50 a year for twelve years.

In 1868 Dr. Boyd, on his retirement from the Somerset Asylum, received an annuity of £450, instead of £530, which would have been two-thirds of his salary and allowances. Mr. Ley, with a larger allowance than Dr. Boyd, and the same salary, received only an annuity of £250 from the Mixed Committee of the Oxford Asylum.

3. I regard the requirements of the 12th section of the act—that no annuity by way of superannuation, granted by the visitors of any asylum, shall be chargeable on or payable out of the rates of any county until such annuity shall have been confirmed by a resolution of the justices in general or quarter sessions assembled—as the cause of the above unsatisfactory results in the working of so important an arrangement, and one so intimately related to the well-working of the public asylum system as the superannuation of its officers.

4. Referring to my last interview with the commissioners I am prepared to say that I accept the weight of their arguments against the possibility of obtaining a compulsory pension clause, as proposed by the committee of this association. I believe that much difficulty will be removed by the proposal of the commissioners to revert to the original provisions of the 16th and 17th Vict., c. 97, s. 57, and to leave the granting of superannuation allowances at the uncontrolled discretion of the Committees of Visitors, and I accept this proposal as an additional evidence of the traditional policy of the board to benefit by all means in their power the officers of the County Asylums. It is to the evidence of their chairman, the Earl of Shaftesbury, that we are indebted for the important statement in the report of the Select Parliamentary Committee on Lunatics (27th July, 1860), that, looking to the peculiar nature of our duties and to the painful consequences which are known to result from incessant intercourse with the various forms of mental disease, when prolonged for many years, the period of service was reduced from twenty to fifteen years. The proposal of the Board to endeavour to obtain a reversal of the provision which placed the retirement on the hazardous and chance approval of so varying a tribunal as the quarter sessions, and to restore the decision of the question to the Committees of Visitors, is as favourable a settlement of the question as we can venture to hope for, and I shall certainly feel that the Commissioners have aided us to the best of their ability, should this arrangement be sanctioned by parliament this session.

C. LOCKHART ROBERTSON,
President of the Medico-Psychological Association.

Haywards Heath, February, 1868.

VOL. XIV.

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The Board acknowledged this memorandum in the following letter :—

“ Office of Commissioners in Lunacy,
“ 19, Whitehall Place, S.W.,
“ 28th February, 1868.

“ SIR,—I am directed to acknowledge with thanks receipt of your letter of the 22nd instant, enclosing memorandum on the superannuation of Medical Superintendents, and to inform you that the memorandum was read at the last board meeting at this office.

“ I am, Sir, your obedient servant,
“ CHARLES PALMER PHILLIPS,
“ Secretary.”

“ Dr. L. Robertson.”

As the result of this communication, I wrote the *Note on the Superannuation Clause* which was published in the “ Occasional Notes of the Quarter ” in the *Journal of Mental Science* for April last. I also related there the past history of our discussions on this question.

II.—I would express an earnest hope, which I know many of our most valued members share, that we may be enabled to-day to conclude those weary discussions as to the rules, to which already so much valuable time has in past years been devoted. The discussion to-day will turn on the construction of Rule IX., as it relates to the election of President. I hope we may to-day, once for all, complete our discussion of these subjects, and which, I am bound to add, excite abroad considerable ridicule when they are published in the ordinary proceedings of the annual meetings of the Medico-Psychological Association. I lay on the table, by way of contrast to our proceedings in 1867, under my presidency, the official reports of the transactions at the annual meetings of the American Association of Medical Superintendents of Asylums, held at Philadelphia, May, 1867; and of the *Versammlung Deutscher Irrenärzte*, held at Hepperheim and Frankfort in September, 1867. I believe that the proposal to be brought before us to-day by Dr. Belgrave and Dr. Rhys Williams—“ That quarterly meetings of the Association be held for the purpose of scientific discussion ”—is a step in the right direction.

As one of the committee appointed in 1864 to revise the Rules, I may perhaps be permitted so far to forestall the discussion of which notice has been given by Drs. Christie and Davey, who will move resolutions as to the mode of election of the President, and to say that in framing the rule for the election of President, we desired to place it on the widest basis, and thus consented to add to the previous requirement of the President being elected at and by each annual meeting *that balloting papers be used*, in order that freedom of choice might be enjoyed by all.

A similar practice exists elsewhere. Thus I lay on the table a copy of the charter, rules, and balloting paper of the Royal Medico-Chirurgical Society, than which we could have no better guide. The principle which the Council of our Association have hitherto adopted of recommending a candidate for the Presidency, leaving it to the option of any member to propose any other candidate, is the practice followed by that most distinguished of our medical societies, and I should regret if our discussion to-day led us to deviate from this precedent. Between the Council recommending a candidate and the Council electing the President, there is the widest difference. It is only the former practice which, for the sake of order, I advocate.

Notice of another resolution was given at our last annual meeting by Dr. Maudsley and Dr. Tuke, as to the duration of the President's office.

I can say, for others who have filled this chair as for myself, that we have felt the limited tenure of our office an obstacle to our usefulness. If the President of this Association is to exert any personal influence at the Home Office or at the Lunacy Board in questions affecting our interests, he must, in my humble judgment, be a man whose authority to represent us should be recognised by a longer tenure of office than is now by our rules conferred.

III.—Lastly, I have received several communications during the year, reminding me that the Medico-Psychological Association has not visited Ireland since 1861. I am a willing advocate of her cause. We were in Scotland in 1858, and again in 1866. I venture to suggest that the claims of Ireland be not longer overlooked, lest we alienate from the Association the many valued friends we possess there, and who, at great inconvenience and cost, come year by year to London to attend our meetings.

IV.—I cannot leave this chair without publicly acknowledging in my name and in yours the high honour which this college—to the President and Fellows of which we are indebted for the great privilege year by year of meeting within its walls—has conferred on our Association in the late election of its President and Honorary Secretary into the Fellowship. Dr. Harrington Tuke and I are both fully aware how much we are indebted to our official connection with the Medico-Psychological Association for our new honours, and I trust we may learn to bear them worthily, to your credit and to ours.

On the conclusion of his address, Dr. Robertson vacated the chair to his successor,

Dr. W. H. O. Sankey, whose address, as president for the year, was listened to with great attention.

[*For President's address see Part I.—Original Articles.*]

Dr. Maudsley moved, and *Dr. Monro* seconded, a vote of thanks to the President for his excellent address, and the proposition was carried unanimously.

The minutes of the last meeting were affirmed to have been correctly recorded.

The *President* stated that the next business was to select the place of meeting for the year 1869.

Dr. Tuke, the secretary, stated that the council recommended that they should meet in London again next year. They were willing and anxious to go to Dublin, but understood that the members of the association in that city were not quite ready to receive them, and therefore it was thought better to postpone their visit to Dublin for a time.

Dr. Christie suggested that the next meeting should be held in the north, and was sure that whether they met at York or Leeds, the association would have a most hearty reception. There were several asylums close by, and he thought it would be well to have a meeting at one of the towns he had named.

Dr. Duncan, of Dublin, explained the circumstances which had led the Council to recommend that the visit to that city should be deferred for another year, and expressed the pleasure it would give the Irish members to receive a visit from their brethren in England.

Dr. Christie proposed, and *Dr. Tuke* seconded, that the next meeting be held at York.

Dr. Maudsley moved, as an amendment, that the meeting should be held in London.

Dr. Robertson seconded the amendment, and said that when held elsewhere the meetings had been failures. At Liverpool, only about six members attended. He thought it was better for the meetings to be held in the metropolis, with an occasional visit to Dublin and Edinburgh.

Dr. Christie—*Dr. Robertson* is mistaken in saying that only six attended the meeting at Liverpool. There was a very good attendance (hear, hear).

On the amendment being put, that the next meeting be held in London, 13 hands were held up for, and 19 against. *Dr. Christie's* motion was then put, and 15 voted for it. Consequently, the next annual meeting will take place at York.

Mr. Mould proposed that the meeting should be held on the day previous to the British Medical Association meeting at Leeds. York and Leeds were within an hour and a half's ride of each other, and he believed that many would like to have the opportunity of attending both meetings (hear).

Mr. Ley seconded.

Agreed to.

The President—The next business will be the election of President for the ensuing year.

Dr. Tuke said the Council recommended *Dr. Boyd* and *Professor Laycock* as gentlemen well fitted for the office. The names were now put alphabetically.

Dr. Christie had a strong feeling in reference to *Professor Laycock*. There were good reasons why they should elect that gentleman to the presidential chair, and one particular reason he must mention. When the meeting of the Association was held in Edinburgh, *Professor Laycock* was then asked to take the chair, but being then seriously ill, he declined, not knowing whether his life would be spared; but his health was, happily, now restored, and they had the pleasure of seeing him amongst them that day. He hoped, therefore, that the Professor would be unanimously elected.

Dr. Maudsley said, in the election of President, the rule was to vote without discussion, and he thought it would be best to at once proceed to the ballot.

Balloting papers were handed round to the members.

The President was sure they were all unanimous on one point—they wished that the election should be proceeded with in the most fair and liberal manner. It was competent for any gentleman to propose a member as President.

Dr. Christie thought it was rather an unusual course for the Council to recommend two names. He thought, too, that having proposed a member, it was perfectly competent for him to state his reasons for doing so.

The President—*Dr. Boyd* has just handed up a card, on which are the words: "Please to withdraw my name, and elect *Dr. Laycock*" (applause).

Dr. Christie proposed that *Professor Laycock*, of Edinburgh, be elected President for the ensuing year.

Dr. Belgrave seconded.

Upon the ballot being taken, there appeared 31 votes for *Dr. Laycock*, and one for *Dr. Davey*.

The President declared *Dr. Laycock* duly elected by two-thirds of the members present.

Carried unanimously.

Dr. Laycock.—I beg to return thanks for the honour you have done me. It will be both my pleasure and my duty to do what I can for the association (applause).

On the proposition of *Dr. Duncan*, seconded by *Dr. Down*, *Dr. Paul* was re-elected treasurer.

Dr. Down proposed that *Dr. Tuke* be re-appointed general secretary.

Dr. Monro seconded.

Carried unanimously.

Dr. Tuke returned thanks for the honour which had been done him. He had to apologise to the members for the alteration which had been made in the day of meeting, which had led, perhaps, to some incon-

venience to London members. It was done at the express wish of their Irish and Scotch friends, who were desirous of being at Oxford on the following day.

Dr. Stewart and *Dr. Rorie* were re-elected hon. secretaries for Ireland and Scotland.

The meeting then proceeded to the election of Editors of the Journal.

Dr. Manley proposed that *Dr. Robertson* and *Dr. Maudsley* be re-elected in that capacity, and remarked upon the able manner in which those gentlemen had conducted the Journal.

Dr. Monro seconded.

Dr. Belgrave moved that *Dr. Down* be requested to assist the present Editors in the conduct of the Journal. *Dr. Down* had written some able papers, and was well qualified for the office; and without casting the slightest reflection upon their Editors, he thought it would be well for those gentlemen to have assistance.

Dr. Eastwood seconded the amendment proposed by *Mr. Belgrave*.

In the opinion of those present, it was, however, thought not advisable to further divide the responsibility in the conduct of the Journal.

Dr. Down did not wish his nomination to be forced upon the meeting.

The amendment was withdrawn; and *Dr. Robertson* and *Dr. Maudsley* were re-elected Editors, *nem. con.*

Dr. Paul thanked the members for the compliment they had paid him in re-electing him as treasurer. He read the report, which was adopted.

The Treasurer's Annual Balance Sheet, July, 1868.

RECEIPTS.		EXPENDITURE.	
	£ s. d.		£ s. d.
To Balance Cash in Hand 1866-7	25 4 8	Annual Meeting	16 6 0
To Subscriptions received	157 10 0	Editorial expenses	15 8 0
By Secretary for Ireland	26 5 0	Printing and publishing	165 9 9
By Secretary for Scotland.. ..	25 4 0	Sundries—	
		Treasurer	3 4 6
		Secretary for Ireland	0 7 2
		Secretary for Scotland	0 8 11
		General Secretary	7 1 6
		Balance in Treasurer's hands	25 17 5
	<u>£284 3 3</u>		<u>£284 3 3</u>

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Audited by G. FIELDING BLANDFORD.

(Signed) J. H. PAUL, M.D., Treasurer.

ROYAL COLLEGE OF PHYSICIANS,
August 4th, 1868.

The *Secretary* then read the following list of candidates for admission as members of the Association:—

Dr. William Macleod, M.D. Edin., Deputy Inspector General, Naval Lunatic Hospital, Great Yarmouth.
 Dr. Hearder, M.D. Edin., Medical Superintendent, County Asylum, Carmarthen.
 Dr. Arthur Strange, M.D. Edin., Assistant Medical Officer, County Asylum, Chester.
 Dr. John H. Davidson, M.D. Edin., Medical Superintendent, County Asylum, Chester.
 J. Hullah, M.R.C.S., Assistant Medical Officer, City of London Asylum, Dartford.
 William Orange, M.D. Heidelberg, M.R.C.P. Lond., Deputy Superintendent, State Asylum, Broadmoor, Wokingham.
 John J. Jackson, M.D., Medical Superintendent, Lunatic Asylum, Jersey.
 G. Fowler Boddington, M.D., Somerville House, Sutton Coldfield.
 C. F. Knight, Esq., Sibford Ferris.
 Joseph Marsh, M.D., Assistant Medical Officer, County Asylum, Littlemore.
 John Alfred Lush, Esq., Assistant Medical Officer, Leicestershire and Rutland County Asylum.
 Dr. De Berdt Howell, F.R.C.S., Five Houses, Clapton.
 Edward Lister, Esq., L.R.C.P. Edin., Haydock Lodge Retreat.
 Professor Banks, of Trinity College, Dublin.
 Dr. W. T. Gairdner, Professor of Medicine, Glasgow.
 Edmund Lawless, Esq., B.N., St. Patrick's Asylum, Dublin.
 Joseph H. Hatchell, M.D., Resident Physician, Maryborough Asylum.
 George St G. Tyner, M.D., Resident Physician, Clonmel Asylum.
 William Daxon, M.D., Resident Physician, Ennis District Asylum.
 James Stewart, Esq., B.A., R.N., H.M.S. "Constance."

The names of the above gentlemen were put to the ballot, and all were received as members of the Association.

The *President* stated that Dr. Duncan and Dr. Boyd retired by rotation from the council, but were eligible for re-election.

Dr. Christie would be sorry to oppose the election of those gentlemen, but thought it was advisable now and then to have an infusion of new blood. In this instance, however, he should not oppose the re-election.

On the proposition of *Dr. Monro*, seconded by *Dr. Wood*, Dr. Langdon Down was elected auditor, and Dr. Duncan and Dr. Boyd were re-elected on the council.

The following notices of motion were given:—

Dr. Arlidge—(Notice of alteration of Rule XII.) "That the officers of the Association, with the President elect, the President of the past year, and twelve other members, do constitute the Council of the Association. That twelve ordinary members shall be appointed by the annual meeting, three of such members retiring by rotation each year in the order of rotation, and be not eligible for re-election."

Dr. Duncan—I shall move at the next annual meeting that Rule IV., as to the election of ordinary members, be altered in this way—

“That the election of members take place by ballot at the annual meeting, by means of papers, upon which shall be printed (written if the nomination takes place on the day of the meeting) the name of the candidate, upon which each member voting shall make a mark, intimating his wish either for the admission or rejection of each candidate—a majority of two-thirds of those voting being required for the election of each candidate.”

Dr. Shaw—I beg to give notice of a motion to inquire next year into the general mode of conducting the Journal.

Dr. Christie moved the resolution of which he had given notice,—“That in Rule IX., after the words, ‘at each annual meeting,’ and in place of the last sentence, it should be, ‘and that in the election of President, the candidate be proposed and seconded at such meeting, balloting papers being used in the election.’”

The motion was seconded by *Dr. Williams*.

Dr. Davey rose to move the resolution of which he had given notice, which might be accepted or not, as an amendment on the last proposition. Having a regard for the welfare of the Association, and for the peace of their annual meetings, he had a resolution to put before them which was directly opposed to the principle which had been, although against the law, acted upon year by year. For the last eight or nine years he had perceived with pain that there had not been that strict relationship between the acts of the council on the one hand and those of the mass of members on the other which was so desirable. He had observed that upon many occasions the council had taken too much upon themselves, and that the members had been used as means to an end. This was a state of things which ought not to exist. If the members had due regard for the welfare of the Association, they would take care to make it distinctly representative. They were of equal position, having privileges very similar to each other, and therefore he desired to see this Association essentially democratic. If a manhood suffrage was desirable anywhere, it certainly was in an association like this, where they were all on an equality. Year by year they had had a tumult in the election of President. One name having been mentioned for the office, others were immediately proposed, and this placed both the council and members in a very awkward position. They would remember that at the last annual meeting, *Dr. Monro* expressed an opinion that the nomination of a member for the presidency was incompatible with the ballot, and he (*Dr. Davey*) believed it was the general opinion that, according to Rule IX., the voting ought to be by balloting papers, without any name being previously mentioned. He thought that no name ought to be proposed or seconded, or given by the council for the acceptance of the society, and he begged, therefore, to move that in future no gentleman be nominated or recommended by the council for the office of President; but the election to the office should be purely by the BALLOT.

Dr. Monro did not agree with all that *Dr. Davey* had said, and did not think there had been that amount of wrangling which his words would seem to imply.

Dr. Wood seconded the amendment, believing the principle was a correct one. There seemed to him great objection to the practice of bringing forward the name of one gentleman, and leaving it open for a member to propose another—thus pitting one against the other. If they used the ballot, they should have the full benefit of it, and this they did not do at present. He thought, therefore, they could not do wrong in adopting the practice of the College of Physicians, and proceed to the election by ballot, without the names being first given.

Dr. Christie objected to the proposed alteration of the Rule, and said the usual twelve months' notice must be given before such an alteration could be made.

After some discussion, *Dr. Davey* consented to his amendment standing thus: "That the election of President be by balloting papers, as at present conducted by the Royal College of Physicians."

Dr. Manley explained that this Association was not in the same position as the College of Physicians, and that with the latter it was not unusual for the same man to be re-elected for a number of years. He thought it should be competent for the council to nominate a member for the Presidency, but did not think that speeches should be made in support of the gentlemen proposed.

Dr. Sibbald proposed that the election should be carried on as in previous years.

Dr. Manley seconded this.

Dr. Duncan thought that if the rules were revised they should be so framed as to leave no room for dispute hereafter. As far as he understood *Dr. Davey*, he would exclude the council from nominating any one, but would leave it open for the members to do so.

Dr. Davey—I would leave it to no one.

The President said that at the College of Physicians a list was sent round of the members proposed, and each one wrote a name upon a slip of paper and handed it in.

Dr. Arlidge thought that the Council should issue a list of the gentlemen eligible for the office, and that a copy should be sent round to each member some time previous to the annual meeting.

The President put *Dr. Davey's* amendment, and it was rejected.

Dr. Manley proposed, and *Dr. Mackenzie* seconded: "That any member wishing to propose a gentleman for the office of President for the ensuing year, shall send in to the Secretary, at least two months before the present meeting, the name of such gentleman, with his consent; and that the Secretary shall, in summoning the present meeting, mention all the names forwarded to him; and that the ballot shall take place on such names."

Dr. Christie—I have not the slightest objection to withdraw my amendment in favour of that; it is just what I wanted (hear).

Dr. Tuke said it was now perfectly competent for any gentleman to send in a name to the Council—as was done by *Dr. Christie* six weeks ago—without any fresh rule being made.

Dr. Christie—The object is to have the names on the agenda.

Dr. Tuke—We cannot do that unless we have their permission.

Dr. Arlidge thought it would be sufficient if the names were given in the previous number of the Journal.

The President said the whole question involved two principles—first, the representative faculty of the council, and secondly the general election of members individually, which latter would annihilate the office of the council on this point. He would not say which way his own feelings went, but the question really was whether or not they should have the intervention of the council in the election of President.

Dr. Manley's proposition was then put to the meeting.

Nine voted for it. On the contrary, thirteen hands were held up. Consequently it was declared lost.

The original resolution, as moved by *Dr. Christie*, with reference to the alteration of Rule IX., was then put, and was carried by eight to five.

Dr. Maudsley said he would withdraw the motion of which he had given notice, with regard to lengthening the term of the President's office, as the general opinion of the members seemed to be that the President should not be eligible for two or three years.

Dr. Belgrave briefly moved a resolution, of which he had given notice, that quarterly meetings of the Association be held for the purpose of scientific discussion. The only difficulty was as to the place of meeting, but probably they might meet at Bethlehem Hospital.

Dr. Rhys Williams seconded the motion. The very fact of their having met there and spent three hours in that discussion, showed the need for quarterly meetings, so that they might be brought more together and understand each other better. The question was, what should be the object of the meetings?—what should be done? If it was only to read papers, it was doubtful whether the Association would go with them, but they must leave it to the Council of the Association to say what should be done. He was not sure whether they could meet at Bethlehem, but at all events there were other places they could go to; and he seconded with pleasure the proposition that meetings should be held for scientific discussion.

Dr. Kempthorne, as a young member of the profession, cheerfully supported the proposition. There were fifteen or sixteen asylums in London, the physicians of which could easily meet for the discussion of those subjects in which they were all so deeply interested, and such meetings would no doubt be productive of a great deal of good.

Dr. Tuke proposed that the quarterly meeting be called as soon as possible, and that the members who should be then present should draw up resolutions for the conduct of such meetings, and report the result to the next annual meeting.

The President—After what I have mentioned in my address, I need scarcely say that I think that this resolution for the holding of quarterly meetings is a very good one, and it has my hearty support. I think there is little doubt but what we could obtain a room for the meetings. There must necessarily be discussion as to whether papers should be read and other matters, but at present the question simply is whether quarterly meetings shall be held for the purpose of scientific discussion.

The motion was carried unanimously, and on the proposition of *Dr. Arlidge*, it was resolved that the Council of the Association should arrange the details of the quarterly meetings.

This concluded the business of the morning meeting.

THE AFTERNOON MEETING.

On the re-assembling of the members, *the President* called upon Professor Laycock to read his paper on "*Suggestions for the better application of Psychological Medicine to the Administration of the Law.*" (See Part I.—Original Articles.)

The learned Professor concluded his paper by moving the appointment of a Committee.

Dr. Christie seconded the proposition with great pleasure. He was quite sure that every one present had been deeply interested in the details which had been laid before them. These matters demanded strict enquiry, and the appointment of a Committee, as recommended by Professor Laycock, was the best thing they could do.

Dr. Maudsley deeply sympathised with the object in view, but would remind the meeting of the fact that the Government had already proposed to issue a Commission to enquire as to State medicine. The Committee of the Social Science Association had had an interview with the Government, and this subject of the application of psychological medicine was amongst the scientific matters which were brought before them. He did not think the Government promised to enquire into all these matters, but they said that the subject should engage their attention, and they would do what they could. *Dr. Rumsey's* scheme had been submitted to the Government, and whether they could now do anything more by a committee was doubtful.

The President thought that the subject which had been introduced by Professor Laycock was one that very properly came before the Association. It was a subject so wide that the details had been neglected; and he was of opinion that a committee would greatly assist in bringing influence to bear, if not on the Government, at all events on the Social Science Association. The paper which had just been read was one of great importance, and exhausted the subject. If this Association had a standing committee, it would at least give a moral weight to those who were at work on the subject. He considered their functions, as a society, had been lost sight of, and as he

had said in his address, he thought they were capable of doing a great deal more for the public.

Dr. Tuke said that Professor Laycock had opened up a very great subject, but he thought that the Professor had weakened his case by the last paragraph, that a committee should be appointed to investigate the causes of lunacy and crime. If restricted to crime in connection with lunacy, he should go with him most fully, but thought that they trenched on another province altogether if they entered on the question of prevention of crime. It would be well, he considered, if they had a standing committee to point out to the Government the mistakes in the law—the same as they did about the distinction between right and wrong—showing the absurdity of the law in relation to criminals. In one case a man was accused of forgery, who was suffering from organic disease of the brain. The judge, in summing up, said it was useless to convict him as a lunatic, for if they did he would have to be confined for life, while otherwise he should sentence him to a short term of imprisonment. The jury, however, considerably acquitted the man, without technically declaring that he was insane. That eminent lawyer, Baron Bramwell, had said it was impossible that homicidal mania should escape with impunity. Psychologists did not say that it should, but they asked that a person thus afflicted should be treated as an object of disease, as Dr. Laycock had pointed out. To a sane man nothing was more terrible than confining him for the rest of his life as a lunatic criminal, and he might instance the case of Townley, who a few years ago committed suicide in an asylum. He thought it would be better if the attention of the committee were confined entirely to lunacy in connection with crime, and he would willingly assist Dr. Laycock in any possible way.

The President said the opinions of the association, as expressed through the committee, on that particular subject, which was their special work, would carry great weight. Dr. Rumsey was a very able man, but could have had no experience whatever on that particular subject, and therefore he (Dr. Sankey) was sure that he would hail with pleasure the appointment of a committee of their body to assist him in the work.

Dr. Tuke was sure the meeting would be very pleased to hear Mr. Hume Williams, an eminent member of the bar, now present as a visitor. Mr. Williams had written an able work on the subject of medical jurisprudence, and was well calculated, from his legal and medical knowledge, to discuss the question (hear, hear).

Mr. Williams, in responding to the call, said the paper which had been read invited to considerations of the utmost importance. He was glad to perceive that the shortcomings of the law in reference to psychological questions were daily becoming more impressed on the minds of those most competent to deal with them. No doubt the administration of justice required the closest approximation to a fixed standard for judicial guidance—a test practically, if not absolutely

true. The knowledge of right and wrong might be accepted as so far an evidence of mental capacity, but such should be distinguished from moral responsibility, inasmuch as before physicians could affirm the latter to exist, and therein rested the fact of criminality, it was necessary to determine whether the accused possessed the capacity of acting according to that knowledge. The impulse to commit crime was in many instances the chief, if not characteristic, indication of mental disease, and in the absence of other symptoms frequently led to subtle inquiries, in which, according to their experience, men of eminence occasionally expressed conflicting opinions. In such cases, what was to guide the direction to the jury unless a standard, at least theoretically true, be adopted. Some years since, in a correspondence with an eminent judge on this most interesting question, the conclusion arrived at was, that in the absence of other evidence, the knowledge of right and wrong as to a particular act should be the test of responsibility for that act. The admission of "other evidence" must always render such inquiries questions of medicine rather than of law, wherein legal dicta, facts, and medical opinions are submitted to the finding of a jury. It is important that insanity be regarded as essentially a medical inquiry. The various practical tests which explained the actions of ordinary life, failed when applied to mental disease. Motiveless crime was a deeply interesting study. In some cases motives were only discoverable by the medical expert. In others, motives, apparently present, were entirely out of proportion, so to speak, with the character of the crime and the knowledge of its consequences. The recent case of the murder at Dover was an illustration. A porter in the employment of the railway company was reprimanded for firing at a target in the station yard. He was insolent in his reply. The inspector and station master both spoke to him. They bid him retire for ten minutes to consider his apology. He occupied the time so allowed in loading a gun, with which he shot the station master through the head. He made no attempt to escape. On his trial the plea of insanity was raised, without other grounds than the insufficient motives for so foul a crime. No medical witnesses of experience gave evidence. In all cases in which the plea is intended to be raised notice should be given to the Crown, and experts, at the expense of the State, be ordered to examine and report on the condition of the accused. In many cases there had been a miscarriage of justice from such a want. Expressions of opinion as to the propriety of such a course, coming from so distinguished a body, could not fail to command respect. The plea of insanity was one too frequently abused in its adoption, and sought to be supported by physicians without any special knowledge or means of observing mental maladies, in the absence of which Mr. Williams considered their evidence as worse than useless. Much practical good had followed on the discussions of the association. Some years since the relations of insanity and crime were closely investigated. Reformatory schools, rather than criminal prisons, were the

result. These schools had, by means of physical training and moral culture, as well as by disassociating young from older criminals, been the means of reclaiming many juvenile offenders, and restoring them to society as useful members. In similar directions, as indicated in the paper which had been read, the influence of the Society might with advantage be exercised, and no doubt equal good would follow. The present state of the law, where weakness of mind and incapacity to manage affairs existed, not amounting to insanity, was a subject well worthy the consideration of the Society. Whether we might not with advantage follow the example of the Roman law, and, as Lord Thurlow long since suggested in certain cases, appoint a curator, was a question daily assuming importance. With such a provision, what different results might have followed in the Wyndham and other cases, with which all present were familiar. Mr. Williams concluded by expressing his sense of the honour and privilege of being permitted to take part in a discussion with so many whose writings and labours in the cause of mental science had rendered them deservedly distinguished.

Dr. Laycock replied to some of the remarks which had been made. With reference to what his excellent friend the Secretary had stated, he thought he had misapprehended the scope of his paper. It was not that enquiry should be made by them—he believed that would be futile—but by Government, who should, by Royal Commission, or otherwise, seek to obtain all the knowledge they possibly could on these subjects, with a view to the prevention of lunacy and crime. Chief Justice Hale spoke truly, though obscurely, when he referred to the “indivisible line,” and there was no line traceable between sanity and insanity if they considered it from a purely scientific point of view. But by a Government enquiry they would better understand the intimate relation between lunacy, imbecility, vice, and crime, and could ascertain from facts whether a person was capable of conducting himself as society required. He was glad to hear such a distinguished member of the bar as Mr. Williams endorse the fact that experts were required. The difficulty was that those who had the administration of the law would not admit their incapacity to deal with this question. As he had said in his paper, he was astonished that a distinguished Lord Chancellor should express his opinion that insanity was merely a question of common sense for the jury. Facts were against such an assertion, and he thought they ought to be prepared to give their opinion to Government, and not offer it to them (hear, hear). Then as to what Dr. Maudsley had said as to the question being discussed by the Social Science Association, with all respect for Dr. Rumsey, he must say that the mixing up of the questions of science and medicine with sewerage and engineering was quite incompatible. Thirty years ago he wrote on the connection between poverty and moral degradation, but there was no reason why the two questions should be brought together. The Professor referred to the law of hereditary transmis-

sion, and said that this question of mental science must come before the legislature. The great fault he found with courts of law was that they did not apply to cases of insanity those principles which were the perfection of reason and of common sense; and not doing so, they had to refer to expediency. But was this right? Was it right that a man should be condemned or acquitted because it was expedient so to do, rather than that he should be confined as a lunatic? Great provocation was pleaded in some cases, and the judge and jury sympathising, the man was let off with three months' imprisonment, although others received seven years; and surely they might admit extenuating circumstances in cases of infirmity of temper of mind, and they might ask a jury to bring in a verdict of guilty, with extenuating circumstances. But the state of the law was such that great injustice and disorder, and consequent injury to society, was done. The case at Dover was decidedly a doubtful one. If in such a case insanity was pleaded, he should place it first before a grand jury, and if they considered the plea valid he would have the culprit sent back to prison for investigation by experts. This was done on the continent, and would not be the means of preventing justice being done ultimately. He thought therefore a committee should be appointed to enquire into these questions of medical and mental science.

The President—The committee might separate details, and I think it would be better to move step by step. Your object is to move the Government?

Professor Laycock—Precisely; I would leave to the committee the form in which they would move the Government.

The resolution was then put and carried unanimously. The committee appointed consisted of Professor Laycock, Dr. Rhys Williams, Dr. Christie, Dr. Sankey, Dr. Robertson, and Dr. Maudsley, with power to add to their number.

Dr. Kirkman was sorry to have to bring before the members a matter of pounds, shillings, and pence, but knew that anything which had reference to the superintendents of asylums must be interesting to them. He greatly regretted the absence of Dr. Robertson (who was unable to attend the afternoon meeting) because, while agreeing with most that he had said in his address, there were some things he was disposed to controvert. At that late hour, however, he would simply read the resolution:—"In the event of any alteration or amendment in the existing superannuation clause in the Lunatic Asylums Amendment Act, it is desirable that the pensions granted to the Medical Officers of Asylums, after fifteen years' service, should be made compulsory to a certain amount; and that discretionary power should be retained by the Visitors to take into their consideration the length of service, value of lodgings, rations, or other allowances enjoyed by the person superannuated in their estimate of addition to be made beyond the defined and certain amount." The Clerk of the Peace for the County of Suffolk had said to him "You will find that the magis-

trates will not give up their controlling power," but it was just that which the superintendents of asylums objected to. He had for forty years been the superintendent of a county asylum, and was quite sure if he retired to-morrow that his feelings would be very much hurt at what would transpire at their county sessions. For himself he should not be satisfied with anything less than a compulsory clause. One of the Commissioners in Lunacy had expressed to him the opinion that there should be compulsory powers. He had read the resolution to the superintendent of one asylum, who was of opinion that the pension should be made compulsory after twenty years' service; he (Dr. Kirkman) thought it should be fifteen, but would not object to the alteration to twenty, nor contend for the amount of two-thirds of the salary. But what he contended was that what they had they should have by right, and not let it be said, "Can no more work be got out of him?" or "Won't £50 less do?" He wanted to avoid those designing, quibbling discussions at petty sessional meetings.

Dr. Maudsley said that Dr. Robertson had taken a great deal of trouble in this matter, and after seeing the Commissioners it was felt that they could not get their help in asking for a compulsory clause, and therefore they were obliged to give it up. The Commissioners had plainly told them that they could not assist the superintendents if they insisted on a compulsory enactment, and without their help it seemed impossible to get what was desired.

Dr. Sibbald might mention what was perhaps not generally known that the superintendents of district asylums in Scotland had no superannuation allowance, either optional or compulsory. If he was a medical officer of an asylum for twenty-five or even forty years, boards in Scotland had no legal power to make a grant, which was only given to public asylums, such as Edinburgh and Glasgow, which were incorporated by royal charter, while district asylums did not come under that denomination. If they could include in the resolution the superintendents of the district asylums in Scotland he should be glad, but he doubted whether the present was just the time to press the claims of the superintendents of asylums.

Dr. Kirkman said that by the Financial Bill which had just passed the House of Commons, and would doubtless become law next session, they were thrown upon Boards of Guardians, and that was not at all a pleasant position for medical men to stand in.

The President thought the pension should be made compulsory. Superintendents of asylums having calculated upon a pension, it was not right that they should be disappointed in the end.

Dr. Christie considered it would be far better to abolish the whole system of pensions, and pay them proportionately. He thought that fifteen years was too short a time for a compulsory pension, and they could not expect men of experience in the House of Commons to give them a pension of two-thirds at that time. The largest sum that he knew of was granted to his predecessor, and he fully believed that if

nothing had been said about pension, the salary would have been £150 a year more. He thought that the period of service should be altered from fifteen to twenty years, and that ill-health and other circumstances should be taken into account.

Dr. Kirkman—I am quite willing to alter it to twenty years.

Professor Laycock thought that medical officers should be placed on the same footing, as regarded pensions, as officers of the civil service.

The President said it was high time that something was done.

Dr. Christie was of opinion that pensions should be left to committees of asylums, instead of being got through magistrates in quarter sessions.

It was ultimately resolved, on the motion of *Dr. Maudsley*, who deprecated the hasty adoption of *Dr. Kirkman's* resolution, that a committee should be appointed to consider the whole question.

Dr. Maudsley proposed a vote of thanks to the President and Fellows of the College for again kindly granting them the use of that room for their annual meeting.

Dr. Paul seconded the motion, which was carried unanimously.

On the proposition of *Dr. Williams*, seconded by *Dr. Sibbald*, a vote of thanks was accorded to the President for his conduct in the chair, and the proceedings terminated.

ANNUAL DINNER OF THE ASSOCIATION.

The annual dinner was held in the evening at Willis's Rooms, *Dr. SANKEY*, President, in the chair. There were present—*Mr. R. Quain*, Professor Laycock, *Dr. Richardson*, F.R.S., *Hume Williams*, Esq., and a large attendance of members.

The following Memorandum, by Dr. Stewart, of Belfast, was intended to have been read at the Annual Meeting of the Association, but was unfortunately delayed in transmission by the post:—

MEMORANDUM ON THE SUPERANNUATION OF OFFICERS, &C., IN THE DISTRICT ASYLUMS FOR THE INSANE IN IRELAND.

At the annual meeting of the Medico-Psychological Association for 1867, some discussion ensued in reference to the superannuation question as it affected the officials in the District Asylums for the Insane in Ireland. *Mr. Blake*, M.P., honorary member of the association, was present on that occasion, and in the course of his remarks stated that a more liberal clause should have been introduced in the Act of 1867, viz., "30 and 31 Vic., c. 118, to provide for the appointment of the officers and servants of district lunatic asylums in Ireland;" and further, that "he would be very happy to do anything in his power for

that object." Now it so happens that during the late session another Act has been passed connected with the district lunatic asylums in Ireland, having reference to the auditing the accounts of those institutions, and during the progress of which it was confidently hoped that Mr. Blake—who, to a certain extent, has been looked upon as the "Shaftesbury" friend of the Irish asylums, as the distinguished nobleman of that name has proved himself to be of the English county asylums and their responsible officers—would have taken so favourable an opportunity of having the grievous injustice removed under which the Irish medical superintendents labour, and who consider the same as making a most invidious distinction between them and their brethren in England and Scotland. Even had the subject been mooted in the House of Commons upon the above very appropriate occasion it would have been satisfactory, as affording an evidence so far that the only fair and reasonable claims of the Irish superintendents were not altogether forgotten or overlooked by their Parliamentary friends. The way in which the superannuation question stands between the Irish medical superintendents and their brethren elsewhere is simply this: In Ireland the superintendents, &c., of the district asylums have been placed under the operations of the "Civil Service Superannuation Act," which allows, as the maximum, three-fourths of the salary and allowances after a service of *forty* years, and being *sixty* years of age. In England the same retiring allowance can be claimed after *fifteen* years' service, and being *fifty* years of age. Formerly, the actual service required in England was *twenty* years, but through the active and ever zealous services of Lord Shaftesbury the above period was very properly reduced to fifteen years, the former being considered unreasonably long in the discharge of duties confessedly allowed to be of the most constantly anxious and harassing nature. The Irish superintendents consider their case a still harder one, inasmuch as they each and all have imposed on them duties which are unknown in England and Scotland, they having to be accountable for the entire fiscal business of their respective institutions, and, too, to act as their secretaries; in fact, the *whole* weight and responsibility of the conduct of their institutions, even in the minutest details, devolve upon their shoulders. And yet this is the encouragement which is held out to them for a faithful performance thereof—the requirement of "the pound of flesh" with a vengeance—viz., *forty* years' service, and to have arrived at the age of *sixty* years, instead of *fifteen* years and *fifty* years, respectively, as in England and Scotland.

Should Mr. Blake, M.P., be present at the annual meeting of the 4th of August, 1868, of the "Medico-Psychological Association," his attention to the above statement is respectfully requested, and under any circumstances the Irish medical superintendents feel assured they have the strong sympathy of the association with them, and that it will not be wanting in affording to them its influence to the utmost in having their most reasonable claims for a more liberal superannuation awarded as a simple matter of common justice.

Before closing these few remarks it should not be forgotten to be stated that on two occasions, within the last ten or twelve years, the Irish Government had introduced a superannuation clause in Bills connected with the district lunatic asylums, which provided that after *fifteen* years' service three-fourths of salary and allowances might be granted in the event of infirmity, physical or mental, preventing the due discharge of the duties of the officials of those institutions, and the full salary and allowances after twenty years. This clause, be it remembered, was agreed to without any objection whatever at the time, but owing to other matters in the Bills in question being objectionable they were withdrawn. Subsequently a Bill was brought in by the late Sir R. Fergusson, Bart., M.P., in 1856, which confined itself to the above superannuation alone, and which passed through committee in the House of Commons without any opposition whatever; but at its *third* reading an entire change was made in it by substituting the provisions of the Civil Service Superannuation Act. At the time that was supposed to be a mere *ad interim* arrangement until the next session, that one being then just expiring; and for reasons best known to the late Sir R. Fergusson, the Bill was thus suddenly changed at the last moment, and so became an Act, and has so continued to the present time.

THE LATE DR. ELLIOTSON.

THE death of Dr. Elliotson forcibly recalls the stormy debates upon the subject of animal magnetism to which his advocacy of it gave rise so many years ago. The able and dispassionate review of his life in your issue of August 8, leaves little to be desired. At the same time there are one or two allusions and statements which we should like still further to confirm and somewhat amplify, although without any direct reference to the judicious remarks the writer makes.

Now that the struggle and the main cause of it have passed away, we are able to regard the combatants with the equanimity which distance from the conflict and the dulling influence of the lapse of time inspire. We have most carefully, and without bias, gone through the discussions which took place thirty years ago and subsequently, and placing side by side these and the standard works of the present day on physiology and psychology, we have endeavoured to answer the question, Who was right? Well, our conclusion is, the latter support the correctness of the opponents of Dr. Elliotson as to *theory*; while they support, *in the main*, the correctness of Dr. Elliotson as to *fact*. These works tell us that animal magnetism is a myth; but they also tell us that the facts which appeared to establish it are, for the most part, confirmed by subsequent observation, proving certain important and highly interesting physiological and psychological laws, quite independent of animal magnetism. Dr. Elliotson was wrong; his opponents were right. Dr. Elliotson was right; his opponents were wrong. And so, as in most fierce disputes, it turns out that "both were right, and both were wrong." Unacquainted, or at least unfamiliar, as we then were with the marvellous influence of expectant attention, suggestion, monotonous sounds and movements, excito-motor and ideo-motor acts, reflex action of the brain, &c., we may, perhaps be excused if we were too ready to explain all the phenomena of so-called animal magnetism by the easy solution of "it's all imposture." It is