

J. R. Lord, medical superintendent, nineteen secretaries of voluntary associations for mental welfare received a week's course of instruction in mental diseases with a view to their better equipment to deal with the borderland cases about which they were frequently consulted. Lectures were given by Col. Lord on the following subjects: Historical Retrospect of Insanity; the Normal and Disordered Mind; Causation of Insanity and Early Symptoms of Nervous Exhaustion; Clinical Forms of Insanity; Lunacy Law; Institution and Home Care of the Insane (including suggestions for reform). A special demonstration on clinical types was given, and the students paid visits to the wards of the hospital and attended the patients' weekly dance. In addition to the instruction at Horton, lectures were given at the offices of the Central Association for Mental Welfare by Dr. E. A. Hamilton-Pearson on Nervous and Unbalanced Children, and by Dr. W. Norwood East on Co-operation with the Work of Medical Officers of Prisons, whilst visits were paid to the Manor Institution for Mental Defectives recently opened by the L.C.C. at Epsom, and to the Ministry of Pensions Neurological Hospital at Ewell. The students also had an opportunity of discussing with the secretary of the Mental After-Care Association the possibilities of co-operation between that association and associations for mental welfare.

Although a week's course cannot obviously be looked upon as an adequate training in this branch of mental welfare work, the experiment has nevertheless fully justified itself. The students not only gained a clearer idea of the nature of insanity and of its several forms and their varying prognoses, but they were also given opportunities of realising the difficulties inherent in the problem of mental hospital administration, and the impossibility of making any serious contribution to the cause of lunacy reform without a foundation of first-hand knowledge. Such opportunities have hitherto been lacking. This pioneer effort may be the forerunner of developments on a much larger scale, when courses of longer duration will come to be regarded as an indispensable part of the training not only of secretaries of associations for mental welfare, but of social workers in general, most of whom are at some time or other brought into contact with the problem of the unbalanced mind.—*The Lancet*, Nov. 11, 1922.

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#### THE BOARD OF CONTROL: COMMITTEE ON DIETARIES IN MENTAL HOSPITALS (ENGLAND AND WALES).

The Board of Control have added the following members to the Committee which is inquiring into the dietaries in mental hospitals:

Dr. P. T. Hughes, Medical Superintendent of the Worcester County Mental Hospital, Barnsley Hall, near Bromsgrove.

Mr. W. J. Gibbs, Clerk and Steward of the Tooting Bec Mental Hospital, S.W. 17.

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#### CORRESPONDENCE.

*To the Editors of the JOURNAL OF MENTAL SCIENCE.*

REX v. ERNEST ALBERT WALKER.

(*With the permission of the Prison Commissioners.*)

SIRS,—In the October number of the Journal appears a report by Dr. Hamblin Smith on this case. I desire to comment briefly upon certain matters to which he refers; it is not, however, my intention to discuss at length the reasons which prevented me from supporting the defence of insanity at this trial.

Dr. Hamblin Smith states there was evidence that the prisoner had suffered from fits since he was five years of age. The evidence on this point was not as decisive as this statement suggests. The prisoner told me he had no recollection of any fits, but his mother (recently deceased) told him he had had none since he was three years old. His father at my first interview said the prisoner had had no fits after three years of age; at a later interview he amended this to five years of age, and was sure the accused had had none since he had grown up. A witness at the trial described fits and bed-wetting, but was sure accused was "well of fits" in 1912, when he would be seven to eight years old, and the bed-wetting ceased

about that time. A schoolmaster said accused was absent-minded at school, and more vacant at times than ordinary boys. And a gardener with whom prisoner had worked in 1919 said prisoner would stand with mouth open, eyes looking in front of him, and with his hands to his side, and would suddenly pull himself together; that he would hide keys and lock places up for no reason, and would hide himself in the hay-loft for no apparent reason. Even assuming he had fits up to the age of seven or eight years of age, there was no evidence whatever of major epilepsy after, and the evidence of minor epilepsy can hardly be considered conclusive.

Dr. Hamblin Smith refers to what he calls the "very characteristic flight" of the prisoner, which from its context can only mean characteristic of epilepsy. The points concerning this "flight" as narrated by Walker to the police on arrest, amplified to a certain extent later to me, are these: A few minutes after the murder he put on his coat and hat, left the house and walked to the nearest tube station. He travelled by this means to Charing Cross station, and on entering the electric train knocked his hand on the carriage door, making it bleed, and it became necessary for him to wrap his handkerchief round it. Arrived at Charing Cross station he purchased a single ticket to Tonbridge, near which place he had relatives; he also purchased a magazine at the station bookstall, and walked up and down within the precincts of the station until the time arrived for him to get a seat in the train. He informed me he did not read the magazine during the journey, being too preoccupied in turning over in his mind the recent events. When he alighted at Tonbridge he had made up his mind to give himself up to the police. He did not give himself up to the first police officer he saw as he thought there were too many people about, but to the second officer, whom he first walked past for a distance of one hundred yards, and then returned and told this officer he wanted to go to the police station as he thought he had done a murder in London, and would go quietly.

It is, of course, true that after the commission of a criminal act an epileptic may manifest a fugue. It is a fact that a murderer who cut his devoted wife's throat with a razor in a condition of epileptic automatism, as soon as he found himself standing over the corpse and realised what he had done, fled the house and walked about for some hours before he made up his mind to give himself up to the police. But it is probably within the experience of most prison medical officers to have had cases of murderers in whom there has been no question of insanity or epilepsy, and in which the murderer after the crime has hurriedly left the vicinity for some neighbourhood with which he may or may not have been previously familiar. Having arrived there it is not unusual for him to give himself up to the police with a confession of the crime, the flight affording an opportunity for reflection upon the best course of action to adopt. The events in Walker's "flight" were similar, and I am unable to accept Dr. Hamblin's Smith view that the prisoner showed evidence "very characteristic" of epilepsy thereby.

Incidentally, I do not think any diagnostic importance should be attributed to the fact that the accused voluntarily gave himself up to the police. On looking through my notes of the last 56 cases of men charged with murder with which I have been associated, I find 9 gave themselves up to the police and confessed their guilt, excluding 4 cases who informed civilians of their crime. None of the 13 were insane or epileptic. I give no figures concerning women, as the majority of murders committed by them are not comparable to those committed by men.

Dr. Hamblin Smith tells us we must remember that in such cases (epileptic equivalent and post-epileptic states) absolute amnesia, although undoubtedly usual, is not invariably found. He may rest assured that both medical witnesses referred to this in their evidence, and that the jury were informed that the matter was controvertible.

In conclusion I may add that I was in sympathy with the verdict of the jury, "Guilty, but insane," but on different grounds from those which appeal to Dr. Hamblin Smith.

I am, Sirs,

Yours faithfully,

W. NORWOOD EAST,  
*Senior Medical Officer.*

H.M. Prison,  
Brixton, S.W. 2;  
November 16, 1922.