

### Occasional Notes.

#### *Progress of Psychiatry in England.*

AFTER reading the remarks of the *Lancet* for March 6th, 1920, under the heading, "The Reproach of Psychiatry in England," it is with some diffidence that one speaks of "progress of psychiatry in England." Yet progress there has been, sporadic and intermittent it is true, but nevertheless progress. "Backwardness" as regards psychiatry is rather relative than absolute, and is not applicable to the whole subject, but limited to scientific teaching and organised research. There are few or no indications in those countries which are reputed to be "forward" in this branch of medicine of more success in treatment, especially in the permanent cure of either early or established cases, while no country surpasses this as regards the care and accommodation of those mentally afflicted. The general view of English psychiatry—and one not without some foundation—is that much of the progress of psychiatry so well boomed as occurring abroad and not at home ends very largely in paper, verbosity, and high-sounding terminology, and the attitude taken up is in large measure that of the critic and sceptic.

It must be admitted, however, that, after all has been said, the remarks of the *Lancet*, as far as they go, do not incorrectly describe the situation, and we are bound to admit that a reproach exists. Happily there are at present signs and symptoms of a great awakening in this country to the needs of psychiatry, and let us hope that, though delayed, the progress foreshadowed will be solid and durable and attain the objects in view, *i.e.*, the definite entry of the treatment of mental diseases and the cure of insanity into the current practice of medicine. Too long have the insane been considered a class of people needing mainly separate care and special segregation, who only resume their full citizenship on recovery. No doubt such has been necessary in the past, and perhaps the only way, and the benefits that have come to them thereby are undeniable. Daylight now enters freely the institutions for the insane, humane treatment is uppermost and they are administratively admirable. Progress in this direction would appear now to have reached its limit in this country, and the high degree of efficiency attained is not a reproach, but the opposite, and we can afford to some extent to rest on our laurels in this respect.

The time has come to turn our efforts rather to the removal as far as practicable of the insane from their traditional sectional treatment, considering them merely as patients suffering temporarily or permanently from one of the ordinary current diseases and disorders. Along these lines must future progress be made. To further this the mental hospitals need to be linked up with the hospital system generally, and psychiatry more closely interwoven with ordinary medical and hospital practice.

The first step in this direction was the creation of the trained mental hospital nurse, and the second the establishment of psychiatric training for doctors and diplomas in psychological medicine. The war has retarded matters somewhat, but this has not been without its advantages, since methods of care and treatment have been rendered possible which undoubtedly will make their influence felt in the future.

At the last quarterly meeting of our Association, reported in this Journal, reference was made to the pioneer work of the special committee which came into being as the outcome of a communication by Colonel D. Thomson on post-graduate teaching and training in psychiatry in 1908. The result was the establishment of diplomas in psychiatry and psychological medicine by the Universities. It was decided that the time has come now for further progress in this direction, and a committee was instituted, having for its reference—"To consider the best method and facilities for training in psychiatry and for obtaining the diplomas which exist."

In a recent paper read before the Association, Dr. C. Hubert Bond advocated the establishment of mental clinics at the general hospitals, and closer relationships between the mental hospitals and the general hospitals as regards teaching, research and treatment. This paper by Dr. Bond was a well-timed stimulus to action, and the Association would be betraying its trust if it did not take energetic steps to further the proposals made. It has definitely done so by the appointment of this special committee, for both these matters are indissolubly bound together.

Too long has psychiatry been in a great measure isolated from general medicine and left to struggle alone. The cure of mental diseases is in actuality the most difficult problem which for ages past has faced the medical profession, and a problem which calls for the application of the acutest intellects in our ranks for its solution. Not that psychiatry has not now, as in the past, illustrious men entirely devoted to it, but its very complexity demands the greatest efforts possible of the profession. Until a person who has become afflicted in mind has a reasonable prospect of a speedy and permanent cure the public will be dissatisfied and a reproach will remain.

We work under many difficulties and disadvantages which must be capable of some solution. The great drawback has been the difficulty in obtaining a steady flow of the best men from the hospitals to the asylums and the practice of psychiatry in general. The heads of the profession have not always been with us, and have been often even against us. Administrative and clerical work, very ordinary medical work with little or no surgery, and general professional stagnation have been the gravamen urged, and this is the real sting of the reproach. How far it is true or otherwise the members of the Association know, but it

should be remembered that medical administration, under the enlightened control of the many lay committees, has in any case raised the mental institutions to their present high level of efficiency.

Medical administration has been necessary in the past, and always will be. The trouble is that administrative duties and responsibilities increase as juniors become seniors and seniors become medical superintendents, with the result that as medical experience increases in value to the patients, the opportunities for concentration on purely medical work decreases, until, in the case of the medical superintendents, it is often almost entirely crowded out by administrative duties. Progress in the treatment of mental diseases necessarily suffers, and will do so so long as matters remain as at present.

Some reconstruction and rearrangement of the medical and administrative work in the mental hospitals would appear to be imperative if the full benefits of the psychiatry and research work of the future are to accrue to the patients. It is neither possible, nor is it the place, in a short "occasional" to deal adequately with the matter; but there appear to be three fundamental principles which, we venture to suggest, should guide the Association when the time comes to formulate its views:

(1) The responsibility for the management of the mental institutions is a matter for local authorities and committees and their medical and other advisers.

(2) The care, custody and cure of mental patients is a national and not a local responsibility, and should be in the hands of a medical service subject to Parliamentary and not local control.

(3) The duties and responsibilities of local authorities and the medical profession should be allocated in accordance with (1) and (2) in order to secure the carrying out of (2).

In conclusion we desire to offer our congratulations to the London County Council and Sir Frederick Mott on the completion of the scheme for the giving of lectures and practical instruction in psychiatry, rendered possible by the enlightened views and generosity of the late Dr. Henry Maudsley, who, it is regretted, did not live to see either the Maudsley Hospital completed or be present at the opening of the first session of London's great school of psychiatry. Sir Frederick Mott's words, written in the *Archives of Neurology* for 1907 and quoted by the *Lancet* (see p. 558), are bearing good fruit, and generations of students to come will have good reason to be grateful to him for the prominent part he has taken in the genesis of the Maudsley Hospital.

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*Studies in Mental Inefficiency.*

We have received the first number of this new publication, which is issued by the Central Association for the Care of the Mentally Defective.

This Association has already done work of considerable social value, and this publication should not only serve to give greater publicity to its aims, but it should become an educational medium of great usefulness to the increasing number of the public who are concerned directly or indirectly with the problem of mental deficiency. The journal should supply an obvious need. Hardly sufficient interest is shown by the public in the sociological problems included under the wide term "mental inefficiency"—the criminal, the mentally deficient and the insane—and this publication may do much to stimulate interest in these directions. It is starting in a modest way and we wish it every success, and we may perhaps express the hope that it may so receive the support of the medical profession by contributions of interest and value, and that of the public by subscribing to it, that it may eventually attain the importance and dimensions as have journals with similar aims in other countries. The opening number has the advantage of a sympathetic foreword by Dr. Shuttleworth, who has done so much for the mental defective, and it includes interesting papers by Dr. Tredgold and Miss Fildes.

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## Part II.—Reviews.

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*The Autonomic Functions and the Personality.* By Dr. EDWARD J. KEMPF. Nervous and Mental Disease Monograph Series, No. 28. New York and Washington, 1918. Royal 8vo. Pp. 156. Three Illustrations. Price \$2.

Most of the readers of this journal will recollect how scanty was the attention paid in their student days to the study of the sympathetic nervous system. It was deemed to be of little account except in so far as it influenced the action of the heart and the processes of digestion. Compare with this neglect the amount of instruction given in the anatomy and physiology of the cerebro-spinal system. And this state of the case in the medical schools was but a reflection of the literature of the day.

Times have changed, and there now appear in bewildering succession books and articles on what some call the vegetative, others (including the present author) the autonomic system. The book under consideration deals, then, with the autonomic or sympathetic system, and it is written to show the enormous effect this system has upon the behaviour and personality of man. It is divided into four parts. Part I is mainly anatomical; Part II, physiological; Part III deals with the psychology of the matter, and Part IV is a brief recapitulation.

Whatever may be the exact views held as to the relationship between mind and matter most of us cling to the general idea that the seat of the mind is the brain. The theories of our predecessors that the