behaviour, as evidenced by a dramatic reduction in the number of intromissions before ejaculation to one or two, rather than the more usual 10 or 12 (Pfaus & Everitt, 1995). We did not have an opportunity to find out whether the ejaculations were dose-related or whether or not the patient would develop tolerance to this side-effect.

There are very few reports of psychotropic druginduced spontaneous emission and/or ejaculation. Brier et al (1984) reported a case of desipramineand imipramine-induced seminal emission following defaecation, without orgasmic sensations, in a patient with otherwise normal sexual function. Spontaneous ejaculation has also been reported with the antipsychotic zuclopenthixol (Williams & O'Brien, 1994). Keitner & Selub (1983) reported a case of spontaneous ejaculations with trifluoperazine and thiothixene. However, they occurred only in the presence of women and were associated with pleasurable orgasmic sensations, but partial or absent erections.

To our knowledge, this is the first report of spontaneous ejaculation induced by nefazodone. All antidepressant drugs have the potential to cause sexual side-effects, which can cause distress and reduce compliance with treatment.

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## **ONE HUNDRED YEARS AGO**

## Housing the Insane

The supplement to the 50th Report of the Commissioners in Lunacy contains the plans of six new asylums, providing accommodation for nearly five thousand five hundred insane persons—London County building at Bexley Heath for 2,000, Lancashire for 2,000 (chronics) at Winwick, Stafford for 600 at Chedderton, West Sussex for 600 near Chichester, and Middlesbrough for 250.

The multiplication of asylums is so rapid, their cost so great, and their import so threatening that the question naturally suggests itself, is there no other way? Is it unavoidable that the great bulk of those suffering from mental disability must be housed in big institutions? If not, how else can they be provided for, and in what relative numbers?

Answers to these questions from an authoritative source are urgently needed to assist those upon whom the responsibility falls of providing for the increase of the insane, and certainly no body of men has greater knowledge or experience of this subject than the members of this Association.

The views of the members of this Association, whether individually or collectively expressed, should certainly be available for those needing information or guidance, and the Association would be only fulfilling a duty to the community in discussing, and, if possible, formulating its success on this question.

The London County Council has appointed a committee to inquire and report on this subject, so that the simultaneous consideration we have suggested would not be inopportune.

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