

consulting with Dr. Kidd, he decided to send the patient to the County Asylum, he having been the recipient of parish relief for some time. Two policemen came to the house, but Mr. Baldwin advised them not to apprehend Lawrence. One of them accompanied him and the relieving officer to the asylum. When the inquest on the bodies of the children was held on February 20th, the Coroner expressed his disapproval of the action Mr. Baldwin had taken in advising the police not to arrest Lawrence, and for sending him to the Fulbourn Asylum. He asserted that no one had a right to take a man out of the custody of the law, and send him to a lunatic asylum.

It appears to us that the law in regard to criminal lunatics before their trial ought to be clearly understood. Mr. Baldwin unquestionably did the best thing for the patient, and if the existing law does not allow of such a course being pursued, it ought to be altered accordingly.

THE ROYAL EDINBURGH ASYLUM FOR THE INSANE.

The annual meeting of the Corporation of the Royal Edinburgh Asylum for the Insane was held on February 24th, 1890, Lord Provost Boyd presiding.

The Treasurer, Scott Moncreiff, Esq., submitted the report of the Managers, which stated that the daily average number of patients during 1889 was 824, an increase of seven on the previous year. The patients in the East House, Craig House, and Myreside Cottage numbered 127. Intermediate class, 132; pauper patients and private patients at lowest rate of board, 565. The cost of maintenance of pauper patients per head for 1889 was £31 8s. 8d., being an increase of 9s. 2½d. upon the cost per head for 1888. For the erection of the new asylum the managers have accepted tenders amounting in all to £65,494 6s. 5d. Negotiations with the City Parochial Board, in order to acquire the summit of Craiglockhart Hill, have been successful, and there is no danger of the new asylum being overlooked from that quarter.

The LORD PROVOST moved the adoption of the report, and observed that last year they were somewhat at issue with the Corporation of Edinburgh, in regard to the proposed additions to the grounds where the new house was being built. At that time they were only contemplating proceedings, whereas now they were fairly launched on the scheme. It was very gratifying that the only obstacle had been removed by the Corporation giving way in regard to the eastern portion of Craiglockhart Hill. In concluding, the Chairman referred to the eminently satisfactory character of the official report upon the Institution, and expressed the indebtedness of all who were interested in the asylum to their physician-superintendent, Dr. Clouston, and to the medical gentlemen who acted along with him.

The report was adopted.

Dr. CLOUSTON, in his report for 1889, stated that the admissions were 323, the total number of patients under treatment having been 1,149; the discharges were 248, the number who died being 77. From 1875 to 1879 the number of admissions of patients over 70 was only 47, while during the last five years it was 69, an increase of 47 per cent. of senility. It was this class of patients that reduced their recovery rate, for under the care and diet they got in the asylum their life was greatly prolonged. He had long maintained that certain forms of mental disease were scientifically a sort of premature death of a portion of the brain, while the rest of the organ and the body lived on and did their lower functions; the practice, therefore, of treating active insanity and dotage in the same institutions seemed to rest on a certain scientific basis, however inconvenient its practical results might be. After showing that sanity

was self-control, Dr. Clouston said three things seemed to him to make for mental breakdown in model civilization, viz., the number and variety of men's cravings, which represented their needs; the complication and strength and "inhibitory" powers required to regulate and control these cravings; and the frequent tendency of the cravings and desires to mistake their real objects. . . . It was of the nature of alcohol in every shape and form that it had a special affinity to the brain, that it created a desire for itself, and that desire led to ill, and was, therefore, the nature of desire. It created an artificial need and a craving to supply that need. The need and the craving which nature conjoined for the good of the organism were in this instance changed in their relationship, and were tending towards the morbid. There was a felt need, but it was for food and dress, and that was misinterpreted by the brain through the action of the alcohol, and became a craving for the repetition of the artificial stimulant. The dissociation of two things that ought to be inseparable (special necessity and special desire) was at the root of drinking and insanity. Alcohol emphatically weakened the power of control, as well as set up a diseased craving, and disordered function, the preliminary to death, first took place in such cases at the highest part—that was, in the mental portion of the brain. Merely to preach control to a dipsomaniac without adopting means to make his cravings cease, would not be scientific treatment of the disease any more than preaching control to a maniac who shouted, sang, and leaped. Except in 1876, they had never had so many cases sent to the asylum in which the assigned cause of the malady was alcoholic excess as this year; and the percentage of such cases was never so high, 25 per cent. of the whole. Taking the admissions to the West House alone—chiefly working people—and confining the inquiry to men between 25 and 60, the chief wage-earning period of life, he found that 42·7 per cent. were of those in which alcoholic excess was assigned as the predisposing or exciting cause. Discussing the cause of that increase of patients through drink from the wage-earners of middle-life, Dr. Clouston asked if it could be due to the increased prosperity of the working classes? He was himself inclined to the view that those persons who were naturally lacking in self-control, having been for many years previously earning little money, and now finding themselves flushed, might have, by a natural re-action, gone in for spending an undue proportion of their more easily earned money on drink, with the result of that increase of alcoholic insanity. They never had so many cases of general paralysis—a disease due to dissipation—as this year. During the five lean years of 1881-85, that terrible disease was much less frequent, being only 4½ per cent. of the admissions, instead of the 9 per cent. of this year; and it certainly was a little suspicious that the fat year of especially high wages was also that in which the next highest proportion of alcoholic causation of general paralysis occurred. A very considerable proportion of the suicides of each year were committed by those whose brains were in the early stage of alcoholism. . . . He was greatly concerned that whatever principle was adopted in future legislation in regard to the restraint of drinking, the 400 cases who year by year in Scotland were made actually insane by drink should in some way be considered and provided for as well as the ordinary habitual drunkard. For their own sakes, and that of the ratepayers, it was desirable that they be prevented from obtaining the poison which had already set their brain working. It ought to be made a penal offence to sell drink to any man who had ever suffered from an attack of alcoholic insanity. Dr. Clouston reported the lowest recovery rate for 17 years (30·3 per cent.). The general recovery rate, which was 50 per cent. in 1879, had shown a somewhat steady tendency to decrease during the past ten years. One of the characters who claimed to be the rightful heir to the Throne had been carried off during the year. His daughter, who had the delusion that she was a princess, was still in the asylum—an instance of direct heredity as to a special delusional state that is rare. In conclusion, the report stated that Dr. G. Robertson had succeeded Dr.

MacPherson as Senior Assistant Officer, and Dr. Elkins had been appointed Junior Assistant.

On the motion of the LORD PROVOST, Dr. Clouston was cordially thanked for his interesting report.

CHANGES IN THE IRISH LUNACY BOARD.

RESIGNATIONS OF DRs. NUGENT AND HATCHELL.

We believe that Dr. (now Sir) John Nugent was appointed Inspector of Lunatic Asylums in Ireland in 1847. The period covered is, therefore, forty-two years, possibly an unprecedented record of official work.

Dr. George W. Hatchell was appointed to the office early in 1857. In the fourth volume of this Journal will be found a notice of his appointment, and the feeling it elicited at that time.

THE NEW INSPECTORS OF LUNATIC ASYLUMS.

It has been known for some time that the vacancies caused by the resignation of Dr. Hatchell, which is understood to have occurred about a year ago, and of Dr. Nugent, which is a more recent event, were about to be filled up by the appointment of Drs. Plunkett O'Farrell and Maziere Courtenay. The long delay that has occurred in connection with these appointments is believed to be in part due to the fact that the Chief Secretary was awaiting the reports of the Departmental Commission, presided over by Sir Arthur Mitchell, which was deputed several months ago to examine into certain questions connected with the administration of the Irish lunacy department.

The new Inspectors are men of high professional character, of whom much is hoped. They are almost contemporaries. Both are distinguished alumni of the Dublin University. Dr. O'Farrell's college career was unusually brilliant. He obtained First Senior Moderatorship with his Arts Degree, and is a Gold Medallist in Natural and Experimental Science. Besides minor honours in the School of Physic, he received the Medical Travelling Prize when taking out his M.B. degree in 1869. Dr. Courtenay took the first place at his M.B. examination in 1871. As a student, he was perhaps the best-known and most popular man of his generation in Trinity College. Of the host of friends he then made many have already gone over to the majority, but not a few are left to congratulate him on his well-earned promotion. Some of the "old set" will also recollect with satisfaction that both the new Inspectors were educated at a famous old Dublin hospital (the Richmond), now unhappily threatened with extinction.

George Plunkett O'Farrell, M.D., gazetted Inspector of Lunatic Asylums, January, 1890, was up to the date of this appointment Medical Member of the Irish General Prisons Board, and Inspector of Reformatories and Industrial Schools. He formerly held the office of Local Government Board Inspector for the important district of Cork. Previously he had enjoyed a good provincial practice at Boyle, co. Roscommon, where he succeeded his father, the late Dr. O'Farrell.

Though Dr. Plunkett O'Farrell has unfortunately not had any special experience of insanity and asylum administration, his appointment is one that has met with very general approval, and, admitting the peculiar difficulties that hamper the Irish Government in filling vacancies in the public service, is probably the best that could be made. He has a considerable and a varied experience of official work, and he is undoubtedly an able and cultivated man.

Edward Maziere Courtenay, M.D., gazetted Inspector of Lunatic Asylums, March, 1890, is well known to many members of the Medico-Psychological