

of all persons admitted into penal institutions, and of all inmates thereof who apply for parole. During a period of eleven months, 4,324 cases were examined. The results of these examinations are not given. The object was to individualize delinquents, with a view to the adoption of suitable measures for their rehabilitation, where that process was possible. Some system of classification was found to be necessary. The system which has been devised is outlined in this article. The classification is adequate, but is, perhaps, unduly elaborated. There are eight main groups, which include a large number of sub-headings. Like all other classifications, the grouping is open to criticism. For example, the "sexual pervert" type is placed in the "mentally degenerate" class of the "mentally defective" group. But cases of this kind will often be found within the "psycho-neurotic" class or the "mental conflicts" type. Any system of classification is better than none, but we fear that many offenders would have, ultimately, to be placed in the "atypical" or "unclassifiable" group, which ends the list. An intelligence quotient below 70 is assigned as the standard for mental deficiency. Dr. Richmond declares strongly against what he terms the "mechanical theory of human organism."

M. HAMBLIN SMITH.

Why Alienists disagree in Legal Trials. (Medico-Legal Journ., New York, July, 1926.) Tepley, Leo V.

The disagreement of medical witnesses is an old topic for comment and for sarcasm, although it is probable that they exhibit no greater divergence than do other kinds of expert witness. The phenomenon is more common in America than in this country. This is due, as the article points out, to the pernicious practice of regarding the medical witness as being, necessarily, a partisan, and to the use of the "hypothetical question." From this latter nuisance we are, in this country, comparatively free. So far as criminal trials are concerned, we also have the advantage of possessing, in the medical officers of our larger prisons, a body of experts, whose evidence is always recognized as being strictly impartial. The author despairs of any solution, save that of trying every criminal as to his guilt, leaving the investigation of his mentality to an "impartial board of alienists."

M. HAMBLIN SMITH.

8. Mental Hospital Reports.

ENGLAND.

London County.—In the annual report of the Council for the year 1925, it is shown that the actual accommodation for mental patients at present is a total of 19,290 beds (excluding Claybury Hall), but when certain works now in hand are completed the total number of beds available will be 19,792 (males 8,303, females 11,489), and to this figure must be added the 429 beds at Ewell Colony, which have now been handed back to the Council by the Ministry of

Pensions. The actual number of patients resident on January 1, 1926, was 18,876 (excluding Claybury Hall), and in addition to these over 500 patients were boarded out under contract in various County and Borough mental hospitals. The total admissions (direct and indirect) to all the mental hospitals for the year were 3,622, varying from 688 at West Park to 318 at Horton, and the total number under treatment was 22,127. The recovery-rate for the different mental hospitals varied from 33% at Claybury to 10% at West Park, though the relationship of the different hospitals is quite different when all the discharges are counted in, including those discharged under section 79 (Lunacy Act, 1890). As might be expected in such an area as that controlled by the London County Council, the number of patients chargeable to the County is considerable (491 in 1925), and includes patients from all parts of the world.

It is an increasing practice for the various hospital sub-committees to make use of section 55 (Lunacy Act, 1890) to give "prolonged trial" to a certain number of mental cases of suitable type, allowing them such money allowance (within prescribed limits) as may be necessary to provide for their maintenance, and in this work the service of the Mental After-Care Association is made full use of. This Association has been able to place 88 cases in situations, send 171 for convalescent care to its homes, and help 396 other cases in various ways.

Of the Maudsley Hospital, which publishes its report as a separate document, the Council reports :

"The Maudsley Hospital has now commenced its fourth year of work. We are of opinion that during its existence it has fully proved the utility and value of such an establishment for the treatment of cases of early mental breakdown or incipient mental trouble."

Contained in this report is a list of the contributions to medical literature, published by members of the medical staff of the mental hospitals of the County of London, all of them showing distinctive scientific work of sterling quality.

Lady Chichester Hospital (Brighton).—This hospital, whose valuable pioneer work is so well known, celebrates its coming of age this year (1926), for it is twenty-one years since Dr. Helen Boyle and the late Dr. Mabel Jones took the first steps in its foundation for the treatment of cases of early nervous breakdown. At this stage they were fortunate in enlisting the sympathy and support of a considerable number of influential and large-minded people, and the Countess of Chichester became the patron of the movement. A sum of £200 was collected, "and with that small sum and an immense faith" a house was taken with beds for 10 patients. From this small commencement has sprung the great work achieved by this now widely known institution, based, as such work ever is, on the insistent ideals of a few deeply thinking and far-seeing people. In the past twenty-one years patients have come to this small hospital from all parts of the British Isles, from Belgium, Russia, Nigeria and New York, and from many of the London

hospitals. In the past six years as many as 806 patients have been received, and the applicants have numbered 1,480, while the recovery-rate is something in the neighbourhood of 50%—a record of work well done, of which any institution may be justly proud, and on which Dr. Helen Boyle and her collaborators and supporters are to be congratulated. Many clinics have sprung up since the date of the foundation of the Lady Chichester Hospital for the early treatment of mental disease, and it is to be hoped that still more will arise; of this, public opinion is the governing factor.

“Thus, the original idea of the founders of the Lady Chichester Hospital that the same prompt and free treatment should be provided, as a matter of course, for nervous and mental illnesses as for physical illnesses has taken firm root. The idea is accepted, but the provision made for these cases is still terribly inadequate, hundreds of lives are still being wasted, asylums kept filled, and an immense amount of unnecessary misery caused by the impossibility of treating all nervous and mental illnesses in their early stages, when there is hope of their complete recovery.”

SCOTLAND.

Aberdeen Royal.—At the commencement of the year 1926 there were 815 (males 376, females 439) certified patients on the register of the hospital, and 794 (males 357, females 437) on December 31. These figures do not include voluntary boarders, of whom 32 were admitted during the year, or over 36% of the total number of private patients admitted.

The admissions for the year were the lowest since 1865, and 56 of the total admissions (131) were of the private class. The admission-rate for certified cases to the hospital seems to show a moderately steady fall for some years, which Dr. Dods Brown attributes to the operation of the Mental Deficiency Act, and increasing number of voluntary patients. Of the forms of mental disease in those admitted, about 33% were cases of dementia pæcox and some 17% cases of infection-exhaustion psychosis; venereal disease and alcoholic excess were the causes assigned in 4 cases each; pellagra was associated with the mental symptoms in 2 cases.

As regards treatment, Dr. Dods Brown has had encouraging results from heliotherapy and organized occupation on craft lines.

The report is concluded with a short *résumé* of the recommendations of the Royal Commission on Lunacy.

Edinburgh Royal Hospital (Morningside).—In the report for the year 1926 it is shown that there were on the register of the hospital at the end of the year 867 patients—an increase of 29 during the year. The number of admissions for the year was 249, discharges 162 and deaths 58. Prof. Robertson, probably intentionally, shows no “recovery-rate,” but as the basis upon which this is usually calculated is so variable, the data so uncertain, and the result so hopeless, the omission is probably rather an advantage.

The managers of the hospital have opened still another nursing home, the sixth, in the vicinity of Edinburgh, this chiefly for convalescent patients. These Homes are appreciated greatly both