

greatest hope of restoration lies in our inculcation, so far as we have the dynamic force, and he the capacity for response, of the necessity for personal effort. And when there is little or no hope that we may evoke such helpful response, in devoted care of the straggler from our ranks, there is a task not lightly to be evaded which, if accomplished, will bring with it a rich burthen of racial reward, but, if neglected, will entail an inevitable Nemesis."

#### *Traumatic Neurasthenia.*

Dr. CAMPBELL THOMSON, dean of the Middlesex Hospital, read a paper on this subject, pointing out that neurasthenia had no boundary line, its symptoms merging into psychasthenia, melancholia, obsessions, hypochondriasis, and other conditions.—Sir GEORGE SAVAGE, Dr. E. S. PASMORE, Dr. ROBERT JONES, Dr. W. F. MENZIES, and Dr. J. CARSWELL took part in an interesting discussion which followed.

#### *The Annual Dinner.*

The dinner was held at the Café Monico, London, on July 16th, Dr. Chambers presiding. The large company included the Lord Mayor of Cardiff, the President of the Royal College of Physicians of London, Sir John Jardine, M.P., Sir George Newman, Sir John Collie, Sir David Semple, Mr. Oules, Mr. K. MacLeod, K.C., the Hon. John Mansfield, Mr. E. G. Easton (chairman of the London County Council Asylums Committee), Dr. C. Hubert Bond and Mr. A. H. Trevor (Commissioners in Lunacy), Dr. Hyslop, Dr. D. G. Thompson (President-elect), Dr. Newington, Dr. Campbell Thomson, and the honorary secretary, Dr. M. A. Collins. The toast of "The Medico-Psychological Association" was proposed by the Lord Mayor of Cardiff, who commended the good work done by the association, especially in the training and certification of mental nurses. Referring to the importance of investigation into the causes and treatment of insanity and the research work being carried out at Cardiff the Lord Mayor paid a warm tribute to Dr. Edwin Goodall. The chairman, in a brief and graceful reply, spoke of the zeal and knowledge shown by the citizens of Cardiff and expressed the hope that 1913 would be a memorable year through the passing into law of the Mental Deficiency Bill. The health of "Our Medical Brethren" was proposed by Sir James Crichton-Browne, who reminded his hearers that he was one of the oldest members of their body and had served as its president 34 years ago. He traced the history of the association from the days when it was a little coterie meeting in the vicinity of asylums and known as "the wandering lunatics." It had always adhered to scientific methods and kept abreast of scientific developments in other fields. He thought that the association was entitled to be heard upon the subject of forcible feeding in order to correct prevalent erroneous notions. He was sure that all his fellow members would agree that this procedure had saved tens of thousands of lives, and that to call it a dangerous and painful operation was grossly wrong and misleading. The toast was responded to by Sir Thomas Barlow, President of the Royal College of Physicians of London, who dwelt on the value of sympathy and comradeship between old and young members of the medical profession. While specialism was inevitable, and, indeed, one of the conditions of progress, there was all the more need for bringing the different arms of the profession into community. The health of the guests was proposed by Dr. Soutar, the retiring president, who referred to Mr. Oules's excellent portrait of Dr. Newington, for 20 years their treasurer, which he had that afternoon presented to Dr. Newington on behalf of the association. The toast was coupled with the names of Sir George Newman, chief medical officer of the Board of Education, and Dr. G. B. Longstaff, who each replied. Finally, the health of the President was proposed by Sir George Savage and received with enthusiasm. During the evening the "Westminster Singers" gave a number of pleasing glees and part songs.

#### *Other Communications.*

On Thursday the first paper was by Dr. C. A. MERCIER. It was discussed by Sir GEORGE SAVAGE, Dr. J. CARSWELL, Dr. ROBERT JONES, Dr. STANLEY GILL, and the author replied.

Dr. H. SALTER GETTINGS read a paper on Dysentery, Past and Present, with especial Relationship to the Origin of Asylum Dysentery.

Dr. BARTON WHITE made a contribution on Bacteriological Examination of the Urine in Some Cases of General Paralysis. Dr. SOUTAR, Dr. COLLINS, Dr. S. C. HOWARD, and Dr. W. DAWSON discussed the subject, and praised the contribution.

Dr. BEDFORD PIERCE presented an interim report of the subcommittee on the condition and status of assistant medical officers in asylums, and in doing so made out a strong case for improved conditions. He showed that the number of patients assigned to each medical man was quite out of keeping with efficient attention to each patient, and stated that while the number per officer in America was 145, going up to 197 in private asylums, in England it was one medical officer to 302.

Dr. R. G. ROWS, Dr. SOUTAR, Dr. T. W. McDOWALL, Dr. D. BOWER, Dr. H. C. THOMSON, Dr. G. CLARKE, and Dr. COLLINS debated the matter, and the report was unanimously approved and the committee reappointed.

## ASYLUM REPORTS.

*Bootham Park Registered Hospital for the Insane, York (Annual Report for the Year 1912).*—The average number resident in this asylum was 115. During the year 1912 there were admitted 44 patients. The mean ages of those received was 50.1 years; the youngest was a man aged 21 and the oldest was a man aged 91. Excluding transfers and voluntary boarders there were 22 direct admissions, and in 14 of these a distinct history of such circumstances as worry, overwork, or shock was obtained, lending support to the belief that such factors are partly causal in the production of mental illness, probably by lowering the tone of the body generally and rendering it an easy prey to toxins and auto-intoxications. In only 2 patients was the health regarded as fair, giving strong weight to the widely accepted belief that a person who becomes ill mentally is practically always at the same time in poor bodily condition, and strongly supporting the argument that cases of recent or acute insanity should be treated by rest in bed. During the year 29 persons were discharged, of whom 16 were recovered. The proportion of recoveries to receptions was 72.7 per cent., whilst the proportion of recoveries to the total number under treatment was 10.7 per cent. The mean age on recovery was 43 years in 15 of the 16 cases; the sixteenth, an old man 91 years of age, recovered after an attack of mania which had lasted about 4½ months. The average duration of the illness in 15 of the 16 cases was a little over 9 months, and one patient was discharged after having been in the institution for several years. Seven deaths occurred during the year, the mean age at death being 58.2 years. At the time of death the average duration of the mental illness was a little over 8 years. We regret to note the resignation of Dr. C. K. Hitchcock, who for nearly 30 years had held the post of medical superintendent.

*Cumberland and Westmorland Lunatic Asylum (Annual Report for the Year 1912).*—At this asylum the daily average number resident was 849. The admissions numbered 179, the number corresponding closely with the average of the ten years preceding 1911. The ages of those admitted ranged from 11 to 76 years. Thirty had been previously under care in this asylum. The principal causative factors ascertained in connexion with the direct admissions were hereditary predisposition in 46 cases, alcoholism in 20 cases, and mental stress in 20 cases. In 49 cases no causative factor was ascertained. Ninety-five patients were discharged, 72 as recovered, 11 as relieved, and 12 as not improved. The recovery rate calculated on the direct admissions was 42.6 per cent.—a highly satisfactory proportion. 54 per cent. of those who recovered were brought to the asylum within a fortnight of the onset of their attack of mental illness, and 76 per cent. were brought within three months. Only 3 recovered whose attack had lasted over a year before admission. Dr. W. F. Farquharson, medical superintendent, points out that many cases, if treated in their earlier stages, are eminently curable, but that, more than all other diseases, mental cases require from their onset skilled supervision and care amidst proper surroundings. From mistaken, though no doubt kindly, motives relatives are apt to delay the removal of a patient

to an asylum, and too often, when at last the patient is taken there, it is found that the curable stage of the disease has passed. The disinclination of a section of the community to send their relatives to an asylum is due to two causes, both of which are removable. The first, which appears to be gradually diminishing, is ignorance as to the nature of asylums; they are in reality hospitals for the treatment of disease, conducted on the most modern lines. The second cause is the state of the law, which prevents a patient being treated in a hospital for mental disease until a reception order, signed by a magistrate, has been obtained. It is desirable that there should be an alteration in the law so that incipient cases of curable insanity could be admitted for treatment to institutions, for at least a limited time, without the necessity of obtaining a magistrate's order, the present procedure being reserved for cases that are chronic or have tendencies to be dangerous to themselves or others. Deaths numbered 63, the rate being very low—7·4 per cent. on the daily average number resident. In all cases post-mortem examinations were held.

## Public Health.

### REPORTS OF MEDICAL OFFICERS OF HEALTH.

*Metropolitan Borough of Wandsworth.*—Dr. P. Caldwell Smith's annual report for 1912 may be commended to any student of public health administration who wishes to obtain a clear impression of the multifarious nature of the work of a well-organised public health department in London and the valuable results which are secured by it. We may note a few of the various matters which make up the record of the year. The tables of house-to-house inspection under the Housing Acts show that 2674 houses were visited, of which 1875, or 70·1 per cent., contained certain deficiencies which necessitated the service of a preliminary or "intimation" notice, the highest percentage being in Streatham ward and the lowest in Putney. When to these are added the "intimation" notices served in connexion with the requirements of other Acts the total becomes 6620. The deficiencies referred to in these notices included overcrowding of persons in dwellings, want of yard paving, water-closet and drainage needing repair, defective water-cisterns and ashpits, nuisances due to keeping of animals and various other causes, and only in a relatively small number of cases was it necessary to follow them by statutory notices and legal proceedings. As many as 956 yards in connexion with dwelling-houses, and 103 in connexion with stables, were paved, drained, or cleansed; 5248 rooms and 1043 staircases and passages were cleansed or repaired, while reconstruction of house drains was carried out in 257 cases. The large amount of work carried out to abate nuisances due to dampness is noteworthy; in all, 1559 premises came under notice during the year on account of dampness, and in 596 of these damp-courses have been inserted. Dr. Caldwell Smith states that he has visited all these premises, as well as many others where damp-courses had been inserted in previous years, and is satisfied that the dampness has been quite removed and the houses rendered much healthier. The baths at the disinfecting station have become less used than formerly owing to diminution in the number of verminous children for which they are required and the cleansing provision now made at some of the County Council's elementary schools. A new slaughter-house has been licensed in Wandsworth for slaughtering horses for human food, and during the year 90 horses have been slaughtered on the premises, the meat in all cases being exported. The report gives a list of the licensed slaughter-houses in the borough and specifies the particular restrictions which are attached to various licences. Some energetic action was taken in 1912 to enforce the provisions of the Rag Flock Act, 1911, and the official regulations made under this Act which requires that the proportion of soluble chlorine in rag flock shall in no case exceed 30 parts of chlorine in 100,000 parts of flock. Several instances of very dirty flock were encountered, including one in which the inspector found filthy flock, containing 326 parts of chlorine per 100,000, being used in the upholstering of new furniture. Only 7 of the 14 samples procured for analysis complied with the very moderate standard of cleanliness

which the chlorine limit represents. Milk adulteration continues to be common in this part of London, no less than 10·39 per cent. of milk samples being adulterated. It is unsatisfactory to note in this connexion that the samples procured by the borough inspectors on delivery to private houses showed an adulteration rate at least three times as heavy as that of the samples taken from public institutions, from retailers' premises, or at the railway stations. In one case a milk vendor, when the inspector asked for a sample of milk from a certain can containing about eight quarts of milk, deliberately upset the contents. Enough was, however, secured for analysis, and the so-called milk was ascertained to contain 57 per cent. of added water. A fraudulent practice which has given much trouble is that carried out by itinerant vendors of "butter," known as canvassers, who go from house to house soliciting orders and selling samples, their wares being, in fact, margarine or margarine with a very small admixture of butter. Dr. Caldwell Smith instituted in 1912 a useful series of observations on the presence of lead in ginger-beer sold on licensed premises as a result of the use of lead pipe between the barrel and the hand-pump on the counter. Of 13 formal samples of ginger-beer thus supplied 12 contained lead in amounts which varied from 0·5 to 9·8 grains per gallon. A prosecution under Section 3 of the Sale of Food and Drugs Act, 1875, failed on a technical ground; probably in like case proceedings under Section 6 of the same Act would have had better chance of success. The publicity given to the matter, however, should be the means of putting a stop to a practice which Dr. Caldwell Smith rightly asserts to be dangerous to the health of the public. We may conclude by a reference to the table showing the number of deaths from pulmonary tuberculosis year by year and the proportion of these which occur in public institutions. In 1912, out of 303 such deaths 86 (28·3 per cent.) occurred in Poor-law infirmaries and 43 (14·2 per cent.) in general or special hospitals. The percentage tends to increase in both classes of institution, and it is worth noting that now little more than half the cases of pulmonary tuberculosis in Wandsworth die at their homes.

*Metropolitan Borough of Stoke Newington.*—Dr. H. R. Kenwood, in his annual report for 1912, gives prominence to the work of official and voluntary health visitors in visiting infants shortly after birth. The borough health visitor lays stress on the futility of calling to give advice in the cases, which appear to be many, in which the mother is in a condition of considerable poverty. In such instances some practical assistance is absolutely necessary if mothers are to take advantage of the advice which the health visitor is sent to give and to which she is at present restricted. On the question of measles, Dr. Kenwood considers that, in view of the limited nature of the hospital accommodation at present available at the Metropolitan Asylums Board hospitals for cases of this disease, the additional advantage which compulsory notification would supply is not very great. Already a very large number of cases come to the knowledge of the local authority without compulsory notification through the education authority and in other ways. Handbills are distributed at the houses visited, and it is proposed to add to them a statement to the effect that a limited amount of hospital accommodation is available for the most necessitous cases, and to invite applications at the town hall. Similar considerations apply to whooping-cough. Dr. Kenwood, who is also public analyst of the borough, points out that the addition of boric acid to milk has not yet ceased, and cites the case of a young adult, aged 18, suffering from flatulent dyspepsia and associated conditions, whose ordinary supply of milk, sampled on three occasions at short intervals during July, was found to contain 5, 7, and 11 grains of boric acid per pint respectively. The milk-supply was changed with beneficial results. Such practices on the part of milk vendors can now be easily put a stop to by applying the powers conferred on local authorities by the Milk and Cream Regulations of the Local Government Board. Dr. Kenwood urges that the practice of colouring milk should definitely be made illegal. He finds that it is becoming more common year by year and serves to cloak the watering of milk and the abstraction of fat. A useful circular-letter on the prevention of infantile diarrhoea appended to the report states that it is desirable to boil well all milk given to infants and to use no raw milk during the summer months. It is added that "pasteurised and