4. *Atrophy of the Visceral Muscles.*—After detailed reports illustrated by cuts of the viscera affected, the conclusion is reached that to-day there can be held paramount one single fact: a myelopathic muscular atrophy need not be confined to the striated muscles of voluntary life, but may affect also all the visceral musculature, the smooth muscles of organic life; in this case the stomach, intestine, bladder, gall bladder, ductus choledichus and heart were all atrophied, not altogether, but merely in the muscular layer.

It is not known whether the lesion reported is or is not exceptional. In the case the atrophy dated sixteen years back, and perhaps a longer one is necessary to produce amyotrophy of the viscera capable of troubling noticeably their functions and of drawing attention to them at autopsy. To this view the authors are inclined after noticing extreme atrophy of the heart which not until the last months produced only a little arrhythmia. The asthmatic respiratory crises, repeated during the last months of the disease, suggest the question whether visceral amyotrophy (heart, muscles of Reissessen) does not play an important rôle in the pathogeny of at least certain "bulbar crises" which so often end the lives of amyotrophics. Other functional troubles also due to visceral amyotrophy will doubtless appear in the future, and already P. Marie has noted in certain amyotrophics persistent constipation, which perhaps would not be independent of intestinal amyotrophy.

JELLIFFE.

The Journal of Mental Science.

(1902. April, Vol. 47, No. 201.)

1. The Treatment of Incipient Mental Disorder and Its Teaching in the Wards of General Hospitals. SIR JOHN SIBBALD.
2. Hallucinations and Allied Mental Phenomena. SIR LAUDER BRUNTON.
3. Hospital Ideas in the Care of the Insane; a Statement of Certain Methods in Use at the Stirling District Asylum, Larbert. GEORGE M. ROBERTSON.
4. Some Further Remarks upon Night Nursing and Supervision in Asylums. FRANK ASHLEY ELKINS.
5. The Bearing of Recent Research in the Posterior Root Ganglia upon the New Theories Concerning the Etiology of Tabes Dorsalis. R. G. ROWS.
6. A Flaw in the English Lunacy Law. ERNEST W. WHITE.
7. Mental Conditions Resulting in Homicide. G. T. REVINGTON.
8. Clinical Notes and Cases. Abnormal Brain of Excessive Weight, J. SUTCLIFFE; With Pathological Report, S. DELÉPINE; Tumor of Frontal Lobes of Cerebrum, T. P. COWEN.

1. *Incipient Mental Disorder and Clinical Teaching.*—The great desideratum of more thorough clinical teaching of psychiatry prompts this able paper of Dr. Sibbald. It is a question peculiarly appropriate for American psychiatry as well. The author points out that Griesinger was the leader in the attempt to provide more adequate clinical instruction in mental disorders. As far back as 1866 he induced the authorities to permit such teaching, which has continued to the present day much amplified. This teaching is now a part of almost every medical curriculum, but is for the most part carried on in asylums, at great distance at times from the medical schools, and with consequent bother and annoyance to both teacher and student. A more vital question, however, is that of the importance of hospital treatment for the early stages of mental disorder in the interest of the patient and quite inde-

pendent of question of clinical instruction. Such wards were first introduced in the Glasgow poorhouse hospital by Dr. Carswell some twelve years past and have done signal service.

Dr. Sibbald gives some suggestions as to the manner in which such wards might be constructed. He speaks of the reasons why patients with incipient mental disease have not received proper hospital treatment and why thus many presumably curable insanities have become hopelessly chronic. The reasons are due to statutory restrictions and to social considerations this latter being one of the banes of present knowledge, or rather lack of it, of diseases of mind on the part of the laity. Thus legal and social reasons are responsible for this neglect.

The author proposes the setting apart of certain wards in the general infirmary for the treatment of these incipient cases, and lays emphasis on the value of the general treatment as advocated by Weir Mitchell in the treatment of these affections. He also refers to the more universal employment of women nurses in male wards, such as is seen in Copenhagen, for instance.

In respect to the clinical teaching the important fact is emphasized that such teaching given in the asylum is of little service to the practitioner since asylum cases are not the kind he is going to see; it is the incipient cases he must learn to recognize if he is to be of service, and these he never sees in such an institution; therefore the greater need for the wider use of treatment of the incipient insane in general hospitals.

[The paper is of importance and worthy of being read in full, especially in view of the New York movement for the establishment of Psychopathic Hospitals as planned by Dr. Peterson, President of the Lunacy Commission. J.]

2. *Hallucinations and Allied Mental Phenomena*.—Dr. Brunton here presents a very interesting paper dealing with a large number of different ideas. Many of these are popular among those interested in psychical phenomena and while little new is added much that is old is conveniently collected under a comprehensive heading. He shows that which is now very widely held by practically all students of psychological phenomena, that many of the heretofore considered abstruse and incomprehensible manifestations of nerve activities are dependent largely upon the greater amplitude of perfection in the special senses of some individuals. The workers in psychic research showed these things to be true some years ago. Dr. Brunton still would believe in divining rods, because, apparently, the explanation of their activity does not come within his ken. This subject has been most ably and exhaustively handled by others. The theory of hallucinations set forth on retinal or other changes affecting a sense organ are interesting but not unique. The article, while not bearing abstraction because of its diffuseness, makes extremely interesting reading.

3. *Stirling District Asylum Methods of Hospital Management*.—This paper must be read in its entirety to be appreciated. The ideals here set forth tempt one to the expression of the feeling that should they become mentally affected the Stirling Asylum would be a most desirable place for treatment. The gradual awakening of the spirit of doing something for the insane is exemplified in the rationale of hospital treatment here outlined. One of the most important features in the article is the thorough advocacy of female nursing for both men and women. This subject is here very ably dwelt upon.

4. *Night Nursing in Asylums*.—Dr. Elkins considers questions of nursing administration holding in the main that: (1) the night arrangements in asylums should closely approximate those existing in general hospitals; and (2) all acute noisy, dirty and destructive patients

be placed at night in dormitories under constant supervision, and be removed only when it is evident they have ceased to require special care. As to the number of patients that can be looked after at night by one nurse, it is suggested that in a ward for acute, feeble and sick patients, the limit should be placed at twenty-five, while in a dormitory for quiet patients, requiring raising on account of their habits or attention during a fit, the number might be about forty or fifty. This paper also pleads for more female nursing for males.

5. *Tabes and the Posterior Root Ganglia*.—Dr. Rows, pathologist to the County Asylum, Whittingham, summarized the theories concerning the pathology of tabes particularly in relation to changes in the posterior root ganglia. He summarizes the theories showing that the hypothesis had lost favor within recent years. Scriuti's modification of the original idea is discussed at length. This Italian observer has said that the degeneration of tabes consists in changes in fibers which have started with some defect and which degenerate under the influence of some stimulus; and the lesions which are found on examination will depend on the situation of the fibers which have been injured by this congenital or acquired lesion, which fibers will, in later life, degenerate if they be attacked by some poison such as syphilis, alcohol, pellagra, etc. This hypothesis is rivaled by that of many modern workers, who maintain that vascular changes are all important in the etiology of tabes and other degenerative conditions. The author does not give any new light on these hypotheses, he simply states them.

6. *Flaw in the Lunacy Law*.—A case of suicide due to the ignorance of the legal authorities as to what constitutes insanity.

7. *Mental Conditions Resulting in Homicide*.—Dr. G. T. Revington gives a summary of the histories of some forty-nine male patients who have been admitted to the Dundrum Asylum charged with murder or with manslaughter. Wives, he says, are the commonest victims, then children, then parents and children. Mothers-in-law seem to be immune. Homicide is stated to be a potentiality in all cases of delusion and hallucination, and that whether a homicide occurs or not is not so much a matter of peculiar mental condition as a matter of environment, a matter of length of time that elapses before safety is sought within the walls of the asylum. Eight of his patients had acute frenzy, twelve were under the influence of alcohol, ten had acute hallucinations and in ten there was mental blankness. He sums up saying that he believes that his homicidal cases did not suffer from any form of mental disease. Most of them he did not consider criminals in any sense of the word, crime being an accident in a mental disorder, not an essential or typical outcome. None of his cases led him to believe in a homicidal mania, a ravenous lust for blood, a brutalized craving to take life simply for the sake of taking life. Ordinary motives such as jealousy, misery, acute fear acting on morbidly active emotional conditions are responsible, he believes, for the lengthy list of murders.

8. *Clinical Notes and Cases*.—(a) Report of case of brain weighing 69 ounces, with microscopical examination showing it to be hypertrophy of brain by reason of diffuse increase in neuroglia and with gliomatous masses—a myxomatous glioma. (b) Tumor of frontal lobe with sleep persisting eight months. The sleep appeared to be natural, the appearance of patient like one overcome by fatigue. He was easy to awaken, would answer rationally for a short time, and then with waning interest would fall asleep, even while eating. Optic neuritis was the only other objective symptom. Sarcoma of frontal lobes was found post-mortem.

JELLIFFE.