THE RELATION OF IMMIGRATION TO THE PREVALENCE OF INSANITY.

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The growth of immigration within a very few years has been so great that at last it has become the principal source of population and its character has changed so fundamentally that it has assumed an entirely new relation to American social problems. Up to 1900, the average annual immigration had not exceeded one-half of one per cent of the population of the United States and the races which had made the first settlements in the country were still contributing more than seventy-five per cent of the whole number of arrivals. By 1901, the "new immigration" had fairly started, the English, Irish, Germans, and Scandinavians had been quite supplanted by Hebrews, Slavs and Italians and the impetus had been received which, four years later, was to carry immigration past the "million-a-year" mark. More than one-fifth of all the immigrants who have come to this country have arrived since 1900 and, with the changed sources of immigration, a remarkable transformation in the composition of our foreign-born population is in progress.

To some, this transformation brings only the gloomiest forebodings. Professor Goldwin Smith, in a recent paper, expressed the opinion that the present great tide of immigration would be found unassimilable and that it constituted the most prominent peril to the Republic. The spread of Socialism, the extension of industrial disturbances into social and political spheres, an increasing disregard for law and many other evils are believed by those who share Professor Smith's views to be directly attributable to the "new immigration." There are others who see nothing unassimilable in the present immigration but who firmly believe that the strikingly dissimilar elements of our population are capable of being welded together into a homogeneous whole in which American ideals will continue to prevail. These are matters, of

course, which only incidentally concern the physician, but social conditions and mental disease are so closely related that it is well worth while to investigate the present immigration from the standpoint of those who have to do with the care of the insane and are particularly interested in the prevention of insanity.

Before 1900, the foreign-born insane in the hospitals fairly represented the foreign-born population and the "Special Report on the Insane and Feeble-minded," recently issued by the Census Bureau provides very valuable material for studying the part played by the "old immigration" in the prevalence of insanity in the United States, but the "new immigration" has been of such recent origin that it is difficult to estimate the value of data relating to its influence. In many States, the effects of the "new immigration" have not yet been felt at all, but in the State of New York, which receives more than one-third of the yearly quota of the "new immigration," and which has in its institutions more than twenty-eight per cent of all the foreign-born insane of the United States, some interesting material is available for study. In that State, the ratio of the insane to the population has risen from one in 675 in 1875 to one in 294 in 1905. In 1906, forty-six per cent of the whole number of patients admitted to the New York State Hospitals were of foreign-birth, while the foreign-born population was but twenty-six per cent of the whole population of the State. There is such an obvious relation between this rising ratio of the insane to the population and the increasing proportion of foreign-born patients in admissions that it is a matter of practical interest to collect some information regarding the insane immigrants arriving at the present time and the most recent foreign-born admissions to public institution.

To do this is the purpose of this paper, and two groups of one hundred cases have been taken in order to make some comparisons as to age, sex, nativity, and race. One group consists of one hundred consecutive cases of insanity detected at Ellis Island by the medical officers of the Public Health and Marine-Hospital Service and the other of one hundred consecutive cases of insanity in aliens deported from public institutions. All cases in both groups were in the fiscal year ended June 30, 1906.

Sex.—Of the 100 insane immigrants detected at Ellis Island, 61 were men and 39 were women. The ratio of men to women in the total number of arrivals in the fiscal year was 69 to 31. Among the insane aliens deported from public institutions during the year the ratio was 56 to 44. In all the admissions to the New York State Hospitals for the fiscal year ended September 30, 1905, the ratio of men to women was 48 to 52. There seems, therefore, to be a higher proportion of women in the foreign-born insane. In Germany, England, and Italy the number of insane women exceeds that of insane men in about the same proportion that the number of females in the population exceeds the number of males.

Age.—The following table shows the ages of the insane immigrants detected at Ellis Island and of the aliens deported from public institutions for the insane.

TABLE I.

Showing the age of 100 immigrants certified for insanity at Ellis Island and of 100 aliens deported from public institutions.

Age	Certified at Ellis Island	Deported from institutions
Under 15 years	..	2
15 to 20 years	7	25
20 to 25 years	18	28
25 to 30 years	21	17
30 to 35 years	10	14
35 to 40 years	12	6
40 to 50 years	16	7
50 to 60 years	13	1
Over 60 years	3	..
	<hr/>	<hr/>
	100	100
Average age	35.8 yrs.	23.2 yrs.

The strikingly large proportion of young people among insane immigrants is a matter of considerable practical importance. Under modern systems of care, the chronic insane tend to accumulate in institutions and, as their expectation of life is not much less than that of sane people of the same age, young patients with incurable forms of mental disease become ultimately the source of much greater cost to the public than older patients. In 1905,

the average age of patients admitted to the New York State Hospitals was 40.3 years, at which age the normal expectation of life is 26 years. The average age of the 100 insane aliens deported from public institutions was 23.2 years, at which age the normal expectation of life is 38 years. It is safe to predict that, from the diminishing average age of patients admitted to the New York State Hospitals, the ratio of the insane to the population will continue to rise. The absence of senile cases in insane immigrants is accounted for in part by the small number of arrivals more than 45 years old (only 4.3 per cent, while 11 per cent of the whole population of the country is older than this), and by the fact that relatives in this country are less likely to send for those who have deteriorated mentally than for those whose infirmities are only physical.

Nativity and Race.—The following table shows the nativity of the two groups of 100 cases and, for comparison, the percentage of immigrants from each country in the arrivals of the fiscal year. Those countries which furnished a proportion of insane immigrants in excess of their share of arrivals are marked by asterisks.

TABLE II.

Showing the nativity of 100 immigrants certified for insanity at Ellis Island and of 100 insane aliens deported from public institutions, and, for comparison, the percentage of immigrants from each country in the total number of arrivals during the fiscal year.

Country	Percentage of total arrivals	Percentage of insane immigrants detected at Ellis Island	Percentage of insane aliens deported from institutions
Austria-Hungary	25.4	12.0	21.0
Belgium	.5	..	1.0
*France, including Corsica.....	.9	4.0	2.0
*German Empire	3.5	12.0	5.0
Greece	2.0	1.0	1.0
Italy, including Sicily and Sardinia	28.8	12.0	10.0
Norway	1.5	..	3.0
*Roumania	.4	1.0	1.0
*Russia and Finland	19.6	17.0	29.0
Sweden	1.6	1.0	1.0
*Switzerland	.4	..	2.0
*Turkey in Europe	.8	..	5.0

Country	Percentage of total arrivals	Percentage of insane immigrants detected at Ellis Island	Percentage of insane aliens de- ported from institutions
United Kingdom:			
*England	3.7	13.0	5.0
*Ireland	2.6	19.0	11.0
Scotland	1.3	4.0	1.0
West Indies	1.0	1.0	1.0
All others and unascertained.....	6.0	3.0	1.0
Total	100.0	100.0	100.0

The following table shows the nativity of the foreign-born patients in the New York State Hospitals on September 30, 1905, and, for comparison, the percentage of natives of each country in the total foreign-born population of the State and the ratio of the insane of each nationality to the whole number of natives of that country in the State. Those countries having a larger percentage of insane than of the total foreign-born population are marked by asterisks. The nativity of the foreign-born patients remaining under treatment in the New York State Hospitals, September 30, 1905, was the subject of a special report by the superintendent of each institution and I am indebted to Dr. William L. Russell, Medical Inspector of the State Commission in Lunacy, for copies of these reports. They form the most accurate enumeration of the foreign-born insane in New York State which has yet been made. The last enumeration of the foreign-born inhabitants of New York State, by the countries of their birth, was the Federal Census of 1900 and, therefore, the ratios shown are only approximately correct for the natives of Russia, Italy, and Austria-Hungary as the large immigration from these countries during the last few years has resulted in a disproportionate increase for them in the whole foreign-born population. Until the next Federal Census, it will be impossible to make more accurate comparisons upon this basis.

TABLE III.

Showing, by countries of their birth, the percentage of foreign-born patients of each nationality in the total number of foreign-born patients in the New York State Hospitals, September 30, 1905, and the percentage of

people of each nationality in the whole foreign-born population of the State and also the ratio of the patients of each nationality to the number of people of that nationality in the State. Nationalities represented in either the State hospitals or the general population by less than one-half of one per cent of the whole number of foreign-born are omitted.

Country	Percentage of whole number of foreign-born patients in hospitals	Percentage of whole number of foreign-born in the State	Ratio of insane to population
Austria-Hungary	6.3	6.9	1 to 199
Canada	3.8	6.2	1 to 220
Denmark	.5	.5	1 to 170
*France	1.3	1.0	1 to 149
*German Empire	25.9	25.3	1 to 173
Italy	3.9	9.6	1 to 431
Norway	.6	.6	1 to 182
Roumania	.2	.5	1 to 340
Russian Empire and Poland.....	8.8	12.4	1 to 249
*Sweden	2.4	2.3	1 to 169
*Switzerland	.8	.7	1 to 161
United Kingdom:			
England and Wales.....	5.9	7.5	1 to 209
*Ireland	36.0	22.4	1 to 111
Scotland	1.3	1.8	1 to 249
*West Indies	.5	.2	1 to 81
All others and unascertained.....	1.8	2.1	
Total	100.0	100.0	

A better illustration of the effects of the "new immigration" is shown in the following table, which gives the nativity of the foreign-born patients admitted in the year ended September 30, 1905, to the Willard State Hospital and of those admitted to the Manhattan State Hospital. Each institution had about the same proportion of foreign-born admissions but the Willard State Hospital is in the interior of the State where the effects of the "new immigration" have not yet been felt and the Manhattan State Hospital is in New York City.

TABLE IV.

Showing the nativity of the foreign-born patients admitted in 1905 to the Willard State Hospital and to the Manhattan State Hospital. Countries having less than one per cent of admissions are disregarded in each column.

Country	Percentage of total foreign- born admissions, Willard State Hospital—1906	Percentage of total foreign- born admissions, Manhattan State Hospital—1906
Austria-Hungary	4.0	14.0
France, including Corsica	1.5	1.0
German Empire	26.0	18.0
Italy, including Sicily and Sardinia.....	3.0	6.5
Norway	1.5	..
Roumania	..	1.5
Russia and Finland	6.0	13.0
Sweden	2.5	1.5
United Kingdom:		
England	8.5	3.0
Ireland	43.0	24.5
Scotland	1.0	..
All other countries and fractions of per- centages disregarded	3.0	17.0
Total	100.0	100.0

The race of an immigrant is often of more importance than his nativity. For example, Hebrews born in England would be included with the English in statistics if the matter of birthplace alone were considered and misleading conclusions be reached. Unfortunately, statistics for race are not available for the admissions to the New York State Hospitals and so the table which follows refers only to insane immigrants detected at Ellis Island. The percentage which each race constituted of the total number of arrivals is given for comparison and those races which contributed a larger proportion of insane immigrants than of arrivals are marked by asterisks.

TABLE V.

Showing the race of 100 immigrants certified for insanity at Ellis Island, and, for comparison, the percentage of immigrants of each race in the total number of arrivals during the fiscal year.

Race or people	Percentage of arrivals	Certified at Ellis Island
African (black)	.2	1
Bohemian and Moravian	1.2	1
Croatian and Slovenian	3.3	1
Dalmatian, Bosnian and Herzegovinian....	.5	1
*English	3.3	12
Finnish	.8	1
*French	1.3	4

Race or people	Percentage of arrivals	Certified at Ellis Island
*German	8.1	12
Greek	2.3	1
*Hebrew	14.2	17
*Irish	2.2	19
Italian (north)	5.0	3
Italian (south)	25.1	9
Magyar	4.8	2
Polish	7.6	6
Roumanian	.7	1
Ruthenian (Russniak)	.7	..
Scandinavian	3.9	1
*Scotch	1.3	4
Slovak	3.9	1
Turkish	.2	..
Welsh	.2	2
Unascertained and all others.....	9.2	1
	100.0	100

It would be very desirable to compare more accurately the prevalence of insanity in the races of the "old immigration" with its prevalence in the races of the present immigration, but it is doubtful if a much better comparison can be made than by arranging a table to show the average annual immigration from each of the three political divisions which furnished the larger part of the immigration of twenty years ago and to show the ratio of the natives of each of these three countries in our public institutions for the insane to the whole number of natives of that country in the United States and then to compare this with a similar statement for the three countries which lead in the immigration of the present time. This is done in the following table, which is based upon the number of insane enumerated for the special report of the Census Bureau which has been referred to and the foreign-born population of 1900.

TABLE VI.

Showing, for the three political divisions which led in the "old immigration," the ratio of the insane of each nationality to the whole number of natives of that country in the United States and showing the same ratios for the three countries which furnish the greater part of the "new immigration."

THE "OLD IMMIGRATION," 1880-1885.

Country or political division	Average annual immigration	Ratio of insane to population in U. S.
German Empire	174,109	One in 211
United Kingdom	145,798	One in 159
Scandinavia	69,665	One in 195

THE "NEW IMMIGRATION," 1900-1905.

Country or political division	Average annual immigration	Ratio of insane to population in U. S.
Italy	176,650	One in 439
Austria-Hungary	176,514	One in 292
Russia and Finland	122,920	One in 380

It would seem from this table that even the substitution of Hebrews, with their remarkable susceptibility to mental and nervous disease, has not been sufficient to outweigh the effects of the long-continued accumulation of insane of Irish and of German birth, and that the surprisingly small number of Italians in the insane population will effect an actual reduction in the ratio of insanity among the foreign-born. That this conclusion is not warranted is evident when it is remembered that more than forty-seven per cent of all the Italians, Hebrews, and Slavs who have come to the United States have arrived since 1901. When the young Hebrews and Slavs of the immigration of to-day have been here long enough to develop the psychoses of later life with the frequency with which it has been shown that they develop those of adolescence, it is likely that, even disregarding the enormous increase in its volume, the "new immigration" will prove more adverse in its effect upon the prevalence of insanity than the "old immigration" has been.

It is disquieting to learn that, whatever doubt there may be about the exact prevalence of insanity in the races of the "new immigration," there is none about that of idiocy and other mental defect. The following table shows the race of 100 consecutive cases of idiocy, imbecility and other mental defect detected in immigrants at Ellis Island during the last fiscal year and, for comparison, the percentage of each race in the whole number of arrivals.

TABLE VII.

Showing the race of 100 immigrants certified at Ellis Island for idiocy, imbecility, and other mental defects, and, for comparison, the percentage

of immigrants of each race in the total number of arrivals of the fiscal year.

Race or people	Percentage of arrivals	Percentage of immigrants certified
African (black)	.2	..
Bohemian and Moravian	1.2	3.0
Croatian and Slovenian	3.3	5.0
Dalmatian, Bosnian and Herzegovinian ...	.5	2.0
English	3.3	2.0
Finnish	.8	..
French	1.3	1.0
German	8.1	8.0
Greek	2.3	1.0
Hebrew	14.2	29.0
Irish	2.2	1.0
Italian (north)	5.0	..
Italian (south)	25.1	34.0
Magyar	4.8	1.0
Polish	7.6	4.0
Roumanian	.7	..
Ruthenian (Russniak)	.7	..
Scandinavian	3.9	3.0
Scotch	1.3	1.0
Slovak	3.9	2.0
Turkish	.2	..
Welsh	.2	..
All others and unascertained.....	9.2	3.0
Total	100.0	100.0

It is seen that the percentages for the insane, given in Table V are almost reversed. It is doubtful if the disadvantage of admitting such mentally defective immigrants would not be as great as that of admitting an equal number of the insane, for a large proportion of the latter would undoubtedly become committed to institutions within two years and be deported, while most of the mental defectives would spend their lives outside of charitable institutions and be at liberty to transmit their defect to their children.

It may be of interest to consider, a little in detail, those peoples in which the prevalence of insanity has been found to be excessive.

The prevalence of insanity among the Irish in the United States has no parallel in the world. The ratio of the insane

to the whole population in Ireland (1903) was one in 203, while in the United States one in 121 is in an institution for the insane. Irish immigration for some years has been but a small factor, and this numerical decrease will soon give the Irish second place in the number of foreign-born admissions to institutions for the insane in this country.

England, too, has furnished a larger proportion of insane immigrants and insane residents of this country than it has of the total immigration or of the whole foreign-born population. The ratio of English patients in the New York State Hospitals to the number of natives of England in the State is about one in 209, while in England the ratio of the insane to the whole population (1905) was one in 288. The latter ratio is said to have been influenced by foreign immigration and the new "Aliens' Act" of England provides for the expulsion of aliens who, "within three months from the time at which proceedings . . . are commenced, have been in receipt of any such parochial relief as disqualifies one for the Parliamentary franchise."

In 1882, 250,000 German immigrants entered the United States while last year but 37,000 came. The number of insane of German birth is already decreasing and the practical cessation of German immigration makes it certain that the future prevalence of insanity among the foreign-born will not be greatly influenced by the part played by Germany in immigration.

The enormous increase in Hebrew immigration and the high prevalence of insanity among Hebrews make this race of especial interest in an analysis of the relation of the "new immigration" to the prevalence of insanity. Wherever the Jews have settled, their striking susceptibility to insanity has been made the subject of comment by medical writers. Lombroso states that in Italy insanity is three times more common in Hebrews than in the rest of the population. Dr. Maurice Fishberg, in an article entitled "The Pathology of the Jews," in the *New York Medical Journal*, March 30, 1901, quotes Dr. Sikowsky and Dr. Maximoff as saying (Proceedings of the XIIth International Medical Congress), that they had tabulated the prevalence of insanity in the Russians, Poles, Monhammedans, and Jews in the troops at Kieff in 1895-1896 and had found that the Jews furnished more cases of insanity than all the others combined, although they were in a

considerable minority. In the same article, Dr. Fishberg presents many other interesting references to the excessive incidence of mental and nervous diseases among Hebrews. In Germany, insanity is said to be twice as prevalent among Jews as among any other element of the population. In Warsaw, according to Dr. Raymond, Hebrews furnish all the psychiatric and neurological material for the clinics. In this country, the remarkable prevalence of insanity among the Jews had been noticed before the present influx of Hebrew immigrants had begun. Dr. Frank G. Hyde (AMERICAN JOURNAL OF INSANITY, Vol. LXIII, p. 471) stated that from December 13, 1871, to November 30, 1900, 10.05 per cent of all the patients admitted to the Manhattan State Hospital, West, had been Hebrews.

The ports of departure which furnished the greater percentages of insane immigrants during the last fiscal year were, in order: Queenstown, 15; Liverpool, 14; Bremen, 12; Glasgow and Londonderry, 11; Hamburg, 10; Italian ports, 9; Rotterdam, 8; Southampton, 8, and all others, 13. This is of interest in view of the probability that in the future medical officers of the Public Health and Marine-Hospital Service will be stationed abroad to examine intending immigrants at the ports of departure and there recommend the rejection of the unfit. Three officers—one at Liverpool, one at Queenstown and one at Glasgow—would have had an opportunity of intercepting 40 per cent of the insane immigrants who were detected at Ellis Island last year.

Types of Mental Disease.—The types of mental disease found in immigrants can be considered only very broadly within the limits of this paper. At Ellis Island, 47 per cent of the immigrants certified by the medical officers of the Public Health and Marine-Hospital Service for insanity were actually on their way to their native lands within two days after the diagnosis of insanity had been established and nearly all were returned to their ships to await sailing within twenty-four hours after they had been certified. It has been impossible, therefore, to determine with any degree of accuracy the psychoses existing in much more than one-half of all cases and, in some of these, further observation would doubtless have led to a revision of the diagnosis. The classification of the cases diagnosed is shown in the following table:

TABLE VIII.

Showing the clinical classification of the immigrants certified for insanity at Ellis Island during the fiscal year ended June 30, 1906.

Type of mental disease	Percentage of all cases	Percentage of cases diagnosed
Alcoholic psychoses	3.0	5.0
Dementia præcox:		
Paranoid forms	3.0	5.0
Hebephrenic forms	1.0	2.0
Katatonic forms	3.0	5.0
Allied types and not classified.....	16.0	28.0
Depressive hallucinosis	1.0	2.0
Involitional psychoses	5.0	9.0
Dementia from gross brain disease.....	2.0	3.0
Paresis	10.0	17.0
Paranoic conditions	6.0	10.0
Manic-depressive insanity:		
Manic attacks	1.0	2.0
Depressed attacks	2.0	3.0
Dementia from cause unknown.....	4.0	7.0
Senile psychoses	1.0	2.0
Not classified	42.0	..
	100.0	100.0

In the case of insane aliens deported from public institutions the average time under treatment had been two months and a diagnosis was possible in nearly all of them. The following table shows the classification of these cases. Those marked with asterisks were deported from jails or from institutions in which cases are not classified in accordance with some of the newer conceptions in psychiatry.

TABLE IX.

Showing the clinical classification of the insane aliens deported from public institutions during the fiscal year ended June 30, 1906.

Type of mental disease	Percentage of all aliens deported	Percentage of those insane at time of arrival
Alcoholic psychoses	4.0	7.0
Dementia præcox:		
Paranoic forms	3.0	..
Hebephrenic forms	4.0	4.0
Katatonic forms	5.0	4.0
Allied types	1.0	..
Not classified	32.0	22.0

Type of mental disease	Percentage of all aliens deported	Percentage of those insane at time of arrival
Depressions not differentiated.....	5.1	4.0
Depressive hallucinosis	3.0	..
Involitional psychoses	2.0	4.0
Dementia from gross brain disease.....	1.0	..
Paresis	2.0	4.0
Paranoic conditions	4.0	8.0
Manic-depressive insanity:		
Manic attacks	2.0	8.0
Depressed attacks	1.0	..
Mixed forms	..	..
Allied forms	1.0	4.0
Not specified	5.0	1.0
Infective-exhaustive psychoses	2.0	..
Epileptic psychoses	2.0	..
Constitutional inferiority	3.0	4.0
Imbecility (with episodes)	2.0	8.0
Not classified	8.0	4.0
*"Acute melancholia"	1.0	..
*"Melancholia"	1.0	4.0
*"Depression with mental enfeeblement".	1.0	..
*"Delusional insanity with mental enfeeblement"	1.0	..
*"Acute mania"	2.0	..
*"Religious mania"	2.0	..
Total	100.0	100.0

Dementia Præcox.—This condition and the conditions allied to it constituted more than 40 per cent of the cases in which a diagnosis was made at Ellis Island and 45 per cent of the cases deported from institutions. In 810 cases admitted to the Manhattan State Hospital in 1905, dementia præcox or its allied types was present in 31 per cent. It is likely that dementia præcox is more prevalent in immigrants than in the natives of this country and more prevalent in immigrants than in the general population of the countries from which they come.

Many immigrants with dementia præcox may never gain admission to institutions for the insane and many more may get along in the alien colonies, which are found now in all large American cities for a considerable time without coming into noticeable conflict with their environment. Of the 39 cases of dementia præcox deported from institutions, in which these data could be obtained,

20 had been in the United States more than a year before being committed. The average length of time all such cases had been in this country before admission was 11 months and 20 days. A case illustrating the manner in which such immigrants who are insane on arrival may escape commitment until the period during which they can be deported has nearly elapsed is that of a young Austrian Pole who arrived in New York, February 1, 1905. He had always been religiously inclined as he had known from early life that he would die young and he had deserted his wife and come to America for reasons which were delusionary. A year and one-half after his arrival in the United States he attracted public attention and became committed to an institution because he knelt in the street and refused to eat in order to humble himself "as Christ had done."

It is especially desirable to detect such cases at Ellis Island and yet it is very difficult. Those medical officers who are detailed to this part of the inspection of immigrants gain a familiarity with the different racial types which is particularly useful in detecting these cases. What allowance to make for the emotional barrenness of the Ruthenian, the incredible ignorance of Macedonian peasants, or the abandonment to despair which is often seen in Italian women when they have met with some trifling reverse in their progress through Ellis Island, is almost as essential information for the successful mental examination of immigrants as knowledge of the special disease pictures or of the general symptomatology of mental disease.

In the entire absence of any history, the diagnosis between dementia præcox and congenital mental defect has often been found very difficult at Ellis Island and in a great many cases in which a positive diagnosis of dementia præcox could be made there was evidence also of a considerable degree of congenital defect.

Paresis.—As might be expected, this disease, with its prominent physical signs, is detected in many more cases at Ellis Island than its incidence among aliens in institutions for the insane would account for. Over seventeen per cent of the cases in which a diagnosis was made at Ellis Island and only two per cent of the cases deported from institutions were paretics. In only one of the latter cases was the disease thought to have existed before

the immigrant's arrival. A larger proportion of these cases than of any other type arrived in the saloon or second-cabin; a fact which corresponds interestingly with the social status of this disease.

Manic-depressive Insanity.—Five per cent of the cases in which a diagnosis was made at Ellis Island were of manic-depressive insanity and several of the cases not diagnosed were probably of this type. Depressions not well differentiated are included, in Table VIII, with those "not classified," for it was thought best not to place them under a separate head for fear of giving the impression that indeterminate depressions constituted a large part of the psychoses met with in immigrants while in reality the only reason that most of them could not be diagnosed was the very short period of observation. Two cases of manic-depressive insanity who had been previously detected and deported returned, recovered, during the year but they were recognized and not admitted. It is likely that many such cases come to this country during remissions and secure admission for, of the aliens deported from institutions, in whom a history of insanity in Europe could be obtained, 23 per cent were cases of manic-depressive insanity. The greater number of such cases must inevitably escape detection at Ellis Island.

In 37 per cent of the aliens deported from institutions, who were not insane at the time of arrival but who developed their mental disease from causes existing prior to arrival, the etiological factor given was "constitutional inferiority" or "congenital defect." Among the immigrants held for mental examination at Ellis Island, there are many in whom mental inferiority or instability is most apparent and it is with the greatest reluctance that the medical officers release them because they cannot be certified, in the wording of the law, as "insane." A case which is typical of many was a young Croatian who arrived recently. His father had died when he was young and he had been brought up by an uncle. When he became 19 years of age his mother convinced him that it was his duty to come to America and return with enough money to pay off a mortgage which had remained on her little farm since the death of his father. Although he did not become enthusiastic over this plan the boy agreed. Two days before leaving home, he almost decided not to come but he feared

the ridicule of his neighbors. On the ship he could think of nothing, he said, but the possibility of dying in this country and never seeing his mother or his home. When he was detained at Ellis Island he had decided to return. The possibility of succeeding in this country, the humiliation of facing his mother and his relatives and appeals to his pride only made him undecided about the matter. He had no abnormal fears or delusions and was not depressed, but he had reacted abnormally to the first experience which tested his judgment and his self-reliance. It seems unwise to admit such immigrants but under the present law there is no means by which they can be excluded.

The insane aliens deported from institutions have an especial interest for those engaged in the examination of immigrants at Ellis Island as they represent, in some measure, the cases which have escaped detection. In the group of 100 consecutive cases of such aliens which has been taken, 26 had been insane before coming to the United States, 54 developed their mental disease after their arrival and in 20 cases these data were unobtainable. Of the 26 thought to have been insane at the time of arrival, 23 per cent were, as has been stated, cases of manic-depressive insanity and 8 per cent were cases having paranoic conditions.

At first thought it would seem a hopeless task to attempt to pick insane and mentally defective immigrants from the unending lines of humanity which file through Ellis Island but a systematic plan of inspection has been devised which results in the detection of many. Officers of the Public Health and Marine-Hospital Service who have had especial training in institutions for the insane are assigned to this duty and the other medical officers unite with them in searching for immigrants who seem atypical or who present signs even remotely suggesting mental disease. The Immigration Inspectors, who have to question all immigrants as to their destination, education and many other matters, have been provided with memoranda as to peculiarities which might suggest the existence of insanity or mental defect and are requested to return immigrants presenting such abnormalities to the medical officers. Occasionally immigrants who have shown marked evidences of insanity during the voyage are reported by the ships' surgeons but, of course, immigrants very obviously insane or defective would be refused passage at the

ports of embarkation. Immigrants in whom, for any of these reasons, mental disease is suspected are detained, after a preliminary examination, for observation and further examination. Recently, rooms have been set aside for this purpose and a very noticeable increase in the number of cases detected has occurred. A large, separate pavilion in which many more such cases may be detained and observed has been authorized and a psychopathic pavilion in connection with the Immigrant Hospital is being constructed. In the latter pavilion certified cases of insanity will be kept until the return of the ships which brought them and acute cases requiring treatment will be cared for until they are in condition to be returned with entire safety. These additional facilities, the provision of trained attendants to aid in the observation of cases detained and of especially qualified interpreters to assist in examinations will undoubtedly lead to a large increase in the number of cases of insanity and mental defect detected.

Many plans, most of which must be rejected as impracticable, have been suggested for controlling the hereditary transmission of insanity and mental defect and thereby limiting the steady increase in the prevalence of insanity, but in a rigid and systematic mental examination of immigrants we have a measure for the prevention of insanity which can be applied to a million prospective residents of this country every year. This duty entrusted to the Public Health and Marine-Hospital Service presents an opportunity of performing a public service such as is afforded to few other officers of the government. By the detection of the greatest possible number of insane and defective immigrants at Ellis Island, not only will the country be saved the burden of maintaining a large number of alien insane, which has already been proved so costly, and the admission of many who will bequeath their defect to the next generation, but a considerable number of immigrants who would otherwise become committed to institutions within two years after landing can be turned back at the time of their arrival instead of being torn from their relatives after they have established homes in this country.

These unfortunate people come here unconscious of their mental disease and not infrequently influenced by delusions or led by their impaired judgment to take a step which even their friends

think inadvisable. Others are borne along, as are many of sound mind, by the great tide of immigration with little plan except to reach the wonderful "Amerika" where failures can be easily retrieved and broken fortunes mended. They are deported solely for our own benefit, for it is only in very rare instances that the welfare of an insane immigrant is promoted by returning him to his home. Therefore the simplest requirements of humanity make it obligatory upon those charged with the administration of the immigration laws to effect the deportation of insane aliens with every safeguard which their condition demands. Whatever treatment is necessary to tide them through an acute or dangerous phase of their disease should be provided without reference to the cost or duration and all insane and many defective immigrants should be returned with trained attendants to accompany them to their final destination, securing for them humane treatment during the journey and finally delivering them to their relatives or to the proper charitable authorities at their homes. The new immigration law which goes into effect July 1, 1907, makes especial provision for this and makes it possible to perform an unwelcome but necessary duty with kindness and humanity.

In spite of the most effective inspection which can be devised, there must every year be admitted many immigrants already insane and many thousands who are destined, under the unusual stress of the first ten years in the United States, to become insane. So remarkable is the prevalence of insanity among recent immigrants becoming, that it seems an urgent public duty to investigate the conditions which are proving so disastrous to them and to take some measures which will protect the more unstable from the development of mental disease with such abnormal frequency.