PROGNOSIS IN INSANITY DEPENDENT ON ARTIFICIAL FEEDING.—Dr. H. Sutherland (*Journal of Mental Science*, July, 1883) claims that, first : Prognosis is good when there is only a disinclination for, not a distinct refusal of, food, Prognosis is bad when there is a persistent refusal of food. Second : Prognosis is good when disinclination and refusal of food depend upon some removable bodily cause. Prognosis is bad when the bodily cause is irremovable. Third : Prognosis is good when the refusal of food occurs during a first attack of mental alienation. Prognosis is bad if the refusal occurs during a second or subsequent attacks. Fourth : Prognosis is good if, after once being fed artificially, the patient takes his food naturally. Prognosis is bad if the patient requires to be fed more than once, recovery being less likely to occur in cases fed a great number of times. Fifth : Prognosis is good if health and weight remain about the same. Prognosis is bad, and there is a tendency to death, if patients lose flesh while being fed daily. If the patient gain flesh rapidly he is likely to drift into dementia. Sixth : Prognosis is good if the patients wish to recover, but is bad if persistent suicidal tendencies exist. Seventh : Prognosis is good if therapeutical treatment and feeding be resorted to early, but bad if both be delayed. These conclusions are too positive ; they ignore the influence of the psychosis on prognosis, which vitiates their value.

RECOVERY AFTER TWENTY-ONE YEARS OF MELANCHOLIA.—Dr. Howden (*Journal of Mental Science*, July, 1883, p. 298) reports the following case. In 1860 a man was admitted suffering from melancholia with many delusions. Two years after he was demented, and rarely spoke. In 1864 he was "demented and dumb. In 1868 was in the same condition mentally, but had begun to assist the attendants in house-work. In 1870, when ill, he spoke, but remained as usual when well. In 1875 spoke in a low whisper for several months. His speech and intelligence gradually returned, and in 1878 he worked at his trade in the asylum workshops." During the dumb stage of his existence he was not "demented" in the ordinary sense of the term, as during the latter part of it he did intelligently what he was told, and expressed his wants in signs and sometimes by writing. On his recovery, thirteen years were a blank. His aphonia arose from a belief that he had not power to give expression to his thoughts in articulate speech. In another case a young woman entered as a case of acute mania, remained in an excited state for nine years, sank into a condition allied to dementia, and so remained for eighteen months. She was finally discharged recovered after nine years of treatment. Sufficient details of these cases are not given to diagnose the psychosis. The phenomenon was known to the older American alienists "as mania or melancholia, passing through dementia to recovery"; a somewhat incorrect designation.