

merely by the dominance and exaggeration of the appetites and impulses which, in the civilised man, are controlled by his higher and more complex associations. This view of the criminal appears to aim at reconciling Lombroso's theory of atavism with the opposed theory of degenerescence; but it may be observed that so far as it fulfils that aim, it does so by emptying the atavistic hypothesis of whatever special meaning it had.

Proceeding, the author classes the criminal, like the insane in thought, broadly, according to the degree of their psychic and somatic degenerescence, into predisposed, higher and lower degenerates; and indicates very briefly how in each case the original tendency of the individual, the predominant impulse, shows through the disorder of conduct as of intellect. He then discusses the manner in which this original bent is influenced, favourably or the reverse, in various groups of individuals, by the factors of age, sex, temperament, social class, and race.

On the last two factors he lays special stress. He points out that, though they are primarily of the social order, they imply conditions which influence not merely psychic but anatomical characters. Thus the division of labour and of wealth must lead to differences in physical development, in strength and beauty, as well as in manners of thought in the various classes of the same race; and the differences in tradition and in the level of culture which separate races must similarly count for something in moulding their organic types. These variations are to be borne in mind in studying crime and insanity; the same criminal impulse, like the same physical stigma or the same delirious conception, has very different meanings in different races and in different classes of the same race.

This view of crime as the natural expression of an individuality formed by the long-sustained interaction of many complex forces, biological, cosmo-telluric, social, necessarily makes the author sceptical as to the value of the usual methods designed to reform the individual criminal. But, on the other hand, inasmuch as all these forces are modifiable directly—and indirectly, one through the other,—it gives unlimited scope to the optimist who is content to place his Utopia several generations in the future.

W. C. SULLIVAN.

Correspondence.

CHRISTIE AND OTHERS *v.* SIMPSON AND OTHERS.

To the Editors of THE JOURNAL OF MENTAL SCIENCE.

DEAR SIRS.—In the January number of *The Journal of Mental Science*, among "Notes and News," and under the heading "Recent Medico-Legal Cases," I have read a notice of the above case. In this notice a summary of the case is given so far as it went, a definite opinion

is expressed, and a judgment is pronounced upon it. May I point out that the case was settled before any evidence for the defence was led, and that there was no judicial decision given, the settlement being by consent? Under these circumstances, as it has absolutely no legal value, the case will not be reported in the legal records, and it will form no precedent.

Nor has it any medical or scientific value. To record one side of such a case in a scientific journal and then to express a definite opinion and pronounce a definite judgment is a most deplorable and regrettable incident, utterly unworthy of the scientific spirit that should regulate the opinions and judgments of our profession.

I would add that in the last eight months of his life, during which time I attended him professionally, Mr. Christie did not exhibit a single sign or symptom of mental alienation with regard either to business or family relations, and none of his family suggested to me that he either had been, or was, of unsound mind. It is perfectly certain that he never suffered from pernicious anæmia. The notice of this case, above referred to, is a painful and absurd caricature of the actual facts.

I am, yours faithfully,

THOMAS R. RONALDSON, M.B., F.R.C.P.E.

8, Charlotte Square, Edinburgh.

March 10th, 1904.

[Our report of the case was accurate and fair. The "definite opinion" and "definite judgment" which Dr. Ronaldson regards as "deplorable and regrettable" were as follows:

"In the event, the jury were not called upon to deliver a verdict, the case being settled on terms, amongst which the restoration to the daughters of the testator of all the furniture, pictures, silver, curios, etc., was included. It may therefore be concluded that the unsoundness of the testator's mind was practically admitted, although the last will was allowed to stand."

The contention of the plaintiffs or pursuers was that, in bequeathing or donating these valuables to the orphanage, the testator was not of disposing mind, and that, therefore, they ought to be surrendered by the orphanage to the pursuers. The settlement provided that they should be so surrendered; and, in so providing, it "practically admitted" the soundness of the contention of the pursuers and the unsoundness of the testator's mind. What admission could be more practical?

In saying that "it is perfectly certain that he (the testator) never suffered from pernicious anæmia," Dr. Ronaldson sets at naught the evidence of thoroughly competent members of his own profession, who attended the deceased at the time he suffered from the illness in question, and whose evidence on oath was not shaken by cross-examination.

Dr. Ronaldson calls our report "a painful and absurd caricature of the actual facts." If he will particularise a single statement, opinion, or expression which is not justified to the letter by the shorthand notes of the trial, we will apologise and correct it. If he cannot do so, he must allow us to apply his own expression to his own letter.—C. M.]

To the Editors of THE JOURNAL OF MENTAL SCIENCE.

DEAR SIRS,—“The shorthand notes of the trial” which Dr. Mercier made use of in his report consist only of evidence led for the pursuers. The presentation of the case was therefore most incomplete, and “a painful and absurd caricature of the actual facts.”

Dr. Mercier’s report being “accurate and fair” is, therefore, of necessity also “a painful and absurd caricature of the actual facts.” His first error lies in reporting such an incomplete and scientifically useless case, and in expressing a definite opinion and pronouncing a definite judgment on it. The result is a report entirely misleading to the readers of the JOURNAL. In his comment on my letter of the 10th inst. he avoids any allusion to this contention, which is plainly stated.

His second error consists in two false assumptions: (1) that because the case was settled by consent before the trial (which was before a jury) was fought to a finish, “the unsoundness of the testator’s mind was practically admitted;” and (2) that because evidence on oath is not shaken by cross-examination that evidence is accurate.

As this JOURNAL is written for men of knowledge and experience, I need say nothing further on these points.

The gravamen of my complaint is that Dr. Mercier has listened to only one side of a story, that he has made inexcusable assumptions, and that, having with such materials and on such a basis expressed “a definite opinion” and pronounced “a definite judgment,” we have as a result—shall I say, a mistake.

As an illustration of the one-sidedness of the material Dr. Mercier has employed, Sir Thomas R. Fraser permits me to say that, having been called by Mr. Christie’s late (deceased) town medical attendant to see him as a case of pernicious anæmia, he examined the blood on two occasions, and that these examinations incontestably proved the absence of pernicious anæmia and the presence of ordinary anæmia; further, that Professor McKendrick, who examined the blood previously, repudiates the result of his examination as proving the existence of pernicious anæmia.

I am, yours faithfully,

THOMAS R. RONALDSON.

8, Charlotte Square, Edinburgh;
March 23rd, 1904.

[Dr. Ronaldson admits that my account of the proceedings at the trial was accurate and fair. As I did not pretend to give an account of anything but the proceedings at the trial, I am content with the admission. My impression, on reading the first letter, was that he intended to charge me with inaccuracy and unfairness.

So far from avoiding any allusion to Dr. Ronaldson’s contention, I met it as far as I understood it. It now appears that I did not understand it aright; and that what he characterised as a painful and absurd caricature of the facts was not, as I thought, my report of the trial, but the statements made at the trial. My first error, he says, is in reporting such an incomplete and scientifically useless case; by which I take it that he means that I had no business to report a case of which

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only one side had been presented. But he omits a vital consideration. I took account, not only of the pursuer's statement, but of the settlement which was agreed to by the defenders, and which embodied their estimate of their own case. This settlement clearly indicated, in my opinion, that the defenders admitted the unsoundness of mind of the testator. Dr. Ronaldson contends that it did not. This is the first part of my second error. Whether it is an error or not, I must leave the reader to judge. My last error is that I assumed that evidence, given on oath, and unshaken by cross-examination, is accurate. This does not appear a very serious charge, or to warrant Dr. Ronaldson's adjectives "deplorable and regrettable," even if it were true. But it is not true. My *obiter dictum*, that the unsoundness of mind from which the testator suffered was the consequence of his attack of pernicious anæmia, does not warrant the charge. All that it warrants is that evidence, given on oath, and unshaken by cross-examination, must be accepted. This may be an error, but it seems scarcely serious enough to justify Dr. Ronaldson's language.

Dr. Ronaldson's complaint that I have listened to only one side of a story has already been dealt with. The other side of the story was embodied in the settlement, to which the defenders would not have consented if they had thought that the presentation of their case would have induced the jury to give them better terms. It admitted, in the most practical manner possible, that they could not traverse that part of the pursuer's case which demanded the restoration of the valuables, and was equivalent to a formal declaration to that effect.—C. M.]

Notes and News.

MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

THE GENERAL MEETING was held at Warneford Asylum, near Oxford, on Friday, February 12th, 1904. Dr. Ernest W. White, the President, occupied the chair.

The following members were present:—Drs. W. Lloyd Andriezen, Joseph S. Bolton, David Bower, George Braine-Hartnell, Robert H. Cole, Sydney John Cole, Thomas S. Good, Edwin Goodall, Theo. B. Hyslop, J. Carlyle Johnstone, Robert Jones, Arthur B. Kingsford, Reginald L. Langdon-Down, Henry C. MacBryan, Peter W. Macdonald, John Marnan, Alfred Miller, Cuthbert S. Morrison, James Neil, H. Hayes Newington, James F. G. Pietersen, Daniel F. Rambaut, Henry Rayner, R. Heurtley Sankey, George E. Shuttleworth, R. Percy Smith, J. Beveridge Spence, Rothsay C. Stewart, James Stewart, T. Seymour Tuke, T. Outterson Wood.

Apologies for non-attendance were read from Drs. Boycott, Turnbull, Wiglesworth, and Yellowlees.

☛ *Visitors*:—Rev. Hayward Cummings, Dr. Collier, Dr. Thomson, Mr. A. F. Bradshaw (Oxford), Dr. W. Tyrrell Brooks, Mr. Shuttleworth, and also the Chairman and Vice-Chairman of the Warneford Asylum Committee.

At a Meeting of the Council, held on the same day, the following were present:—Dr. Ernest W. White (President), George Braine-Hartnell, Theo. B. Hyslop,