

had failed. But that they should resort to them when necessary for a patient he had not the slightest hesitation in saying.

Dr. NORMAN LAVERS added his congratulations and thanks to Dr. Townsend for his very valuable paper. He remarked that in the use of paraldehyde he thought there was sometimes a tendency to gastric catarrh. He had noticed the symptom, and while it had been attributed to other causes he was forced to the conclusion that paraldehyde was the cause of it. The gastric catarrh certainly got better when the paraldehyde was stopped. In the acute excitement of general paralysis, he thought unless they gave a sufficiently large dose of paraldehyde at once a smaller and inefficient dose was likely to increase the excitement. With regard to hyoscine, he had had a run of rather trying experiences with that drug. Two or three cases showed alarming attacks of heart failure, and afterwards he always gave hyoscine in combination with digitalin. He found the combination was rather better; in fact, he had had no more of those alarming symptoms for some time. Sulphonal he had given up practically because, contrary to the experience which had been mentioned that afternoon, he thought it had a considerable effect on the gastric secretion and was rather apt to cause distaste for food—to increase the difficulty of getting a patient to take his or her food. However, he might have been unfortunate in that respect. One other point: he thought, perhaps, that opium was not altogether to be condemned; he thought there were cases, especially those of restless melancholia, in which it could be given with some amount of success.

Dr. TOWNSEND, in replying on the discussion, said he was very much obliged to those who had taken part in it for the kind manner in which they had received his paper. His remarks were simply intended to represent their own work at Barnwood House with regard to the actual use of drugs. Of course, as Dr. Soutar had said, they only fell back upon drugs when other things failed, and among those other things he was perfectly certain that the most powerful hypnotics of all were sunshine and fresh air. From the structural point of view, it was impossible for them to make arrangements for all patients to have that amount of open air that they could have in places where there were verandahs specially built for the purpose; but, nevertheless, they made every effort there to get patients out in the open air as much as possible. He felt very sure that, although it might be impossible or impolitic for them to treat all cases alike, where they could keep their patients in the open air they would get excellent results and the less need would they have to fly to hypnotics and sedatives in the form of drugs.

The proceedings then terminated with a vote of thanks to Dr. Soutar for his kind hospitality.

NORTHERN AND MIDLAND DIVISION.

The SPRING MEETING of the Northern and Midland Division of the Medico-Psychological Association was held by the kind invitation of Dr. Adair at the West Riding County Asylum, Storthes Hall, Kirkburton, near Huddersfield, on Thursday, April 30th, 1908, at 2.30 p.m.

The President of the Association (Dr. MacDonald) took the chair.

There were present the following members: Drs. Adair, Archdale, Cross, East, Evan, Exley, Geddes, Groves, Herbert, Kay, Colin McDowall, Mackenzie, Macphail, May, Middlemass, Pierce, Mould, Stewart, Vincent; also two visitors, Dr. Kelly and Dr. Austin Priestman.

The minutes of the last meeting were read and confirmed.

On a ballot being taken, Henry Roscoe, M.R.C.S., etc., Assistant Medical Officer, Cheddleton Asylum, was unanimously elected an ordinary member of the Association.

Dr. Bedford Pierce having expressed his wish to resign the position of Secretary to the Division, Dr. Macphail proposed, and Dr. Ewan seconded the proposal, that Dr. Adair should be appointed Secretary. This was carried unanimously.

In considering the appointment of representative members of the Council, the PRESIDENT pointed out that the rules of the Association in respect to voting papers did not appear to have been observed. He said the existing members not having served three years might be re-appointed, and on the motion of Dr.

MIDDLEMASS, seconded by Dr. STEWART, it was proposed that Drs. Macdowall, Ewan, and Orr be re-elected as Representative Members of Council. This was carried unanimously.

Resolved, that the next meeting be held, if possible, in the Birmingham District on October 22nd, 1908, and that the spring meeting be held on April 20th, 1909. The place of meeting to be arranged by the Secretary and the Divisional Committee.

A letter from Dr. Sankey, relative to the desirability of having more meetings in the Midlands was read and considered.

Upon further consideration it was resolved that it was not desirable to proceed further with Dr. Ewan's proposal to divide the Northern and Midland Division. Dr. EWAN himself, as well as the Divisional Sub-committee, agreed that the number of members in the Division was not sufficient to justify any change being made.

The PRESIDENT made a feeling and fitting reference to the loss the Division and the profession had sustained by the death of Dr. MacLeod, late of Beverley. He went on to say that underneath that fine and true Highland surface there was the most lovable and kindly nature, a fine character, a true friend, and the best of companions. He proposed that a letter be written expressing the sympathy of the members with Mrs. MacLeod and family, and the members present signified their assent to the vote of condolence by silently rising in their places.

CONTRIBUTIONS.

Dr. GUY R. EAST, of Northumberland County Asylum, Morpeth, read a paper on "A Case of Cretinism," illustrated by photographs (see page 570).

The PRESIDENT (Dr. MacDonald) remarked upon the rarity of cretins in asylums, and that after careful enquiry he had not found a single case in Dorset.

Dr. MACPHAIL joined in the discussion, and Dr. EAST replied.

Dr. COLIN McDOWALL, of the City Asylum, Newcastle, read a paper upon "The Occurrence of General Paralysis in Father, Mother, and Son" (see page 562).

In the discussion which followed,

The PRESIDENT (Dr. MacDonald, Dorset) suggested that there was not sufficient proof that syphilis was present, and he did not accept the proposition "no syphilis, no general paralysis." He could name cases of general paralysis in country districts in which he was satisfied there was no syphilitic taint. He said it was remarkable that the mother had such a long period of excitement.

Dr. MIDDLEMASS (Sunderland), remarked on the long history in the mother's case and the weight of the son's brain (65 oz.) was unusual. He quoted a case of a congenital imbecile developing general paralysis in Morningside Asylum.

Dr. GILBERT MOULD (Rotherham) continued the discussion, and Dr. COLIN McDOWALL replied.

Dr. HAROLD R. CROSS, Senior Assistant Medical Officer at Storthes Hall Asylum, Huddersfield, showed two interesting cases, one presenting marked conical cornea; the other atrophy of the right deltoid and weakness of the muscles of the arm, the cause of which could not be ascertained.

Dr. MICHAEL WILLIAM KELLY, Assistant Medical Officer at Storthes Hall Asylum, also showed two cases. L. K—, a boy, æt. 14, with petit mal. During the attacks, which last about twenty seconds, he uses had language. He wakes at night with a shout as if dreaming, but states he does not dream. Sometimes he has twenty of these attacks during the night; at other times he may go four or five weeks without a fit. L. R—, female, æt. 39. January, 1906.—Acute melancholia with active suicidal tendency. September and October, 1906.—Refused food and tube fed, and appeared to be becoming demented. Transferred to Storthes Hall, March 5th, 1908, began to take interest in her surroundings, and now appears on the road to recovery.

Dr. BEDFORD PIERCE's remarks upon a case of "Automatic Wandering" were deferred, and a hearty vote of thanks to Dr. Adair for his hospitality concluded the business of the meeting.