

be answered shall be six, and the minimum time allowed for answering three hours.

As time did not allow of the other proposed changes in the regulations being considered, it was agreed to adjourn the discussion to the next meeting of the Division.

BRITISH MEDICAL ASSOCIATION.

The Annual Meeting of the British Medical Association, held in Montreal, proved an unqualified success as regards the scientific work and the hospitality shown to the guests. The Psychological Section was fairly well attended. Amongst those present from various parts of Canada were Drs. Bucke, Clark, C. K. Clarke, Burgess, Hobbs, Russell, Vallè, Wilkins, Anglin, Villeneuve; the United States were represented by Drs. Cowles, Dewey, Brush, Stearns, Crothers, Rohè, Spitzka, Van Giesen; and Drs. Alexander, J. A. Campbell, J. G. B. Blandford, Hazlitt, Blair, and Urquhart represented British psychologists.

MENTAL EVOLUTION.

The sectional meetings were opened by the PRESIDENT, Dr. R. M. Bucke, of the London Asylum, Ontario, who gave an address upon "Mental Evolution in Man." He claimed that there are two processes in the evolution of mind—the perfection of faculties already in existence, and the springing into existence of faculties which had previously no existence. Dr. Bucke traced mental growth from mere excitability, through discrimination to sensation with the capacity of pleasure and of pain; later still memory, recognition of offspring; and successively thereafter reason, recognition of individuals and communication of ideas. He placed the mental plane of the higher animals as equal to a human being at two years of age. Thereafter, for about a year, that mental expansion occurred which separates man from the higher mammals. This represents to Dr. Bucke the age of the *Atalus homo*, a period of perhaps 100,000 years, during which our ancestors walked erect; but not having self-consciousness, had no true language. At the age of three, individual self-consciousness is born, and from the point of view of psychology the child becomes a human being. Thereafter Dr. Bucke considers that the colour sense, the sense of fragrance, the human moral nature, and the musical sense appear; and to these and self-consciousness he specially addressed himself. He looks upon the last-named as the basic and master human faculty, which appeared in the race several hundred thousand years ago. He takes it as proved that the colour sense was acquired not more than 30,000 years ago. Similarly, he places the era of individual colour sense at five or six, and the moral nature at fifteen, while the musical sense is delayed until adolescence, and cannot be more than 5,000 years old in the race. Dr. Bucke finds in the idea of evolution the mystery of the past, the explanation of the present, and the sure prescience of the future. His corollaries are, first, that all insane and idiots are cases of atavism; and, second, that the human mind is still in process of construction. Dr. Bucke sees new faculties springing up, and in these he includes telepathy, clairvoyance, and spiritualism. Finally, he has observed several men and women who have possessed a new faculty, a higher form of consciousness than self-consciousness, which will be the common property of a higher race of men in the course of a few more milleniums. This new race will occupy the same relation to us as we do to *Atalus homo*, and thereby justify the long agony of birth throughout the countless ages of our past.

It will be observed that Dr. Bucke's argument bristles with difficulties, and that he leaves off at the point where critical interest becomes keenest. We know Dr. Bucke as the friend and biographer of Walt Whitman, and,

more lately, as he who claims to have dethroned Shakespeare. We shall await his forthcoming book on Cosmic Consciousness, in which he is to continue the thesis now presented, before we make any detailed examination of his opinions. In the meantime we ask him to revise his observations in regard to child-life. His *obiter dicta* cannot be accepted as to the times and seasons of the evolution of the individual mental faculties, much less his guesses at racial æons. Greatly daring, he tells our mothers, who have sung lullaby to their infants and held their children spellbound by the songs of innocence, that the musical sense does not appear till the age of twenty. If Dr. Bucke would not have us believe that his atavistic theory of insanity, which seems to mean that disease of the brain is something apart from all other physical diseases, is evolution gone mad, he must hurry up with his proofs.

PELVIC DISEASE IN WOMEN AND INSANITY.

Two papers were read emphasising the frequency of pelvic disease and the necessity for treatment of such cases. Dr. ROHÉ opened with a statement of the law in regard to surgical operations upon insane persons, and specially found fault with the very moderate objections raised in this Journal when his work and opinions were lately reviewed by us. There is no necessity to recapitulate our statements. The substance may be stated in few and reasonable words. A surgeon is liable to be called upon to justify his action in a court of law. He is happy who can offer a complete justification, and thrice happy he from whom justification is never demanded. The sum of Dr. Rohé's experience is that 60 per cent. of the women he examined had some abnormal condition of the pelvic organs, distinctly pathological and easily recognised. He claims, and rightly that the primary question is relief of local disease, that the insane woman has the same right to treatment as the sane; and adds that if such treatment is likely to benefit the mental condition it is our duty to carry it out. A summary of thirty-four recited cases shows eleven complete recoveries (mental and physical), nine improved, eleven unimproved in mental condition, and three deaths.

Dr. A. T. HOBBS, of the London Asylum, is still more emphatic. A systematic examination of all female patients, aided in nearly every case by anaesthesia, seems to be his rule, with the startling result that ninety-three out of one hundred insane women had pelvic disease. Eighty-nine were operated upon. Dr. Wicksworth is quoted (*Regis*, 2nd ed., p. 350) as having reported that he found only 38 per cent. of normal sexual organs in female autopsies; but we refer our readers to his careful and discriminating paper in the Journal for January, 1885. Dr. Hobbs gave an account of the cases and the operative measures employed in eighty patients, and summarises the results: 37.5 per cent. mental recoveries, 22.5 per cent. improved, 35 per cent. unchanged, 5 per cent. of deaths.

AFTER EFFECTS OF SURGICAL PROCEDURE.

Dr. RUSSELL, of the Hamilton Asylum, Ontario, followed with a paper on the after effects of surgical procedure on the generative organs of females for the relief of insanity. He protested against wholesale mutilation and exaggerated claims made for operative interference, and went on to show that the ratios of insanity between men and women are nearly equal, that the analogous gland in man is not the subject of persistent attack, as it might have been if naturally retained in the abdominal cavity. Dr. Russell gave three cases which had terminated unfavourably after surgical operation on the genital organs; and a collection of opinions by alienist physicians unfavourable to such operative interference. One may be quoted, viz., the reply of Dr. Putnam, the woman physician of Poughkeepsie State Hospital. She says that out of 3,646 female admissions only forty-two cases were due to pelvic disease, and that no improvement resulted from four operations.

REFLEXES IN PSYCHIATRY.

Dr. DANIEL CLARK, of the Toronto Asylum, read an important paper on

this subject. In relation to diseases of the female pelvic organs, minor abnormalities are magnified into important factors in producing insanity, and it would be well for the present generation if there were less professional officiousness exercised in the direction indicated. While 40 per cent. of the admissions to the Toronto Asylum are certified as having become insane owing to these diseases, he only found 3½ per cent. really affected. Moreover, the knife created an artificial menopause in young or middle life, and a number of cases of insanity in his experience had resulted. Dr. Clark quoted Dr. Bremer, of St. Louis, with approval, viz., that gynecological treatment, unless imperatively demanded, is a crime.

In the discussion of this subject, as might have been expected, the members of the section showed but little sympathy with the practice of Drs. Rohé and Hobbs. Dr. ALEXANDER adduced strong evidence against the statements in favour of the high percentage of disease when he said that out of the thousands of post-mortem examinations at which he had assisted at Hanwell but very few showed evidence of pelvic disease. While we are bound to interrogate the facts of the physical condition of our patients, male and female, we have no such duty imposed upon us as Dr. Hobbs indicates. His administration of anæsthetics and genital examination of every case admitted are extreme measures which will surely find no support in this country. And we shall require additional testimony before we accept his statement that ninety three insane women out of one hundred show pelvic abnormalities sufficient to justify his routine treatment. It appears to us to be a record of misguided enthusiasm, and our rule should be to permit of surgical interference with the genital organs of insane women only when the same indications are present which demand operation in the sane.

HEREDITY AND INSANITY.

Dr. H. P. STEARNS, of the Hartford Retreat, read a paper entitled "Heredity a Factor in the Etiology of Insanity." He treated the subject in view of the recent works of Weissmann, and produced a closely reasoned and learned argument, which does not lend itself to condensation. We must refer our readers to the pages of *The British Medical Journal* for the full text, which will amply repay a careful study.

ACUTE MELANCHOLIA.

Dr. BRUSH, of the Sheppard Asylum, Baltimore, gave an analysis of one hundred cases of acute melancholia, which is a mine of information on this subject, and shows how carefully the patients have been considered and treated under his care.

PHYSICAL AND MENTAL DISEASE.

Dr. HASLETT, of Hallford House Asylum, read a paper upon the influence of physical upon mental disease, containing a summary of authorities. He concludes that debilitating and wasting diseases never produce any mental improvement, but often the reverse; that sudden injuries, without loss of blood, are frequently of benefit; that sudden painful diseases are most likely to result in improvement; that the stuporose and secondary stages of mental disease are most readily influenced for good, but the convulsive neuroses are incapable of amelioration in this way. Dr. Haslett states that unwonted afferent impulses produce the influence owing to abnormal peripheral irritation.

INEBRIETY.

Dr. CROTHERS, of Hartford, discoursed upon inebriety, supporting the thesis that inebriety is insanity, and curable in the same way. Perhaps his most interesting point was the exposition of cases where there was a latent explosive tendency.

INSANITY AND THE STATE.

Dr. RUSSELL, of the Hamilton Asylum, read a paper on the relation of insanity to the State. The vast field which he surveyed does not permit of our giving more than an indication of the remedies suggested. Dr. Russell wisely says that neither legislation nor radical surgery will prove a

panacea. He looks to the operation of natural laws to elevate the human race, and to education as a mental discipline to prepare citizens for their duties. We do not agree with him in his projects for the nationalisation of land and the limitation of charitable aid. When Dr. Russell suggests that the money spent in works of philanthropy should be diverted to increasing the earning power of the poor, he should follow up his suggestion with practical indications of how it is to be carried out. Meanwhile, we shall not withhold a helping hand to those in need, pending the millennium.

DEGENERATION OF NERVE-CELLS.

Professor VAN GIESEN concluded the work of the last day with a most valuable and interesting address on parenchymatous degeneration of the paraneural system in locomotor ataxia. It was unfortunate that the most important communication of the meeting should have been relegated to the fag end of the scientific business. Professor Van Giesen's position as Director of the Asylums' Laboratory in New York should have commanded a better hearing. His work relative to the degeneration of nerve-cells in acute intoxication and suŕstroke will shortly be placed before our readers in detail. Meantime, we note that at Montreal he traced the analogy between stroma and parenchyma in organs of the body. He showed how the cells may be regarded as working units, their expression of function varying with their health. He showed how, under suitable hardening reagents, an intercellular structure could be demonstrated; and how this structure was interfered with by poisons, especially alcohol. The rate of this cytoclisis, as he called it, depended on (1) the intensity and (2) duration of poison. This was the probable cause of temporary improvement in locomotor ataxia. Finally, he showed that similar changes took place in mental disorders.

THE SUB-CONSCIOUS MIND.

Dr. CLARK BELL, of New York, prepared a paper on the sub-conscious mind, sub-liminal consciousness, and we have been favoured with proof-sheets of his work. After giving dictionary definitions of consciousness, Dr. Clark Bell goes on to enquire: Is there a consciousness beneath the threshold of our ordinary knowledge of our own thoughts and actions outside of and independent of the former? Have we an inner consciousness that acts independent of the outer, and usual, perception? Is it a storehouse of the memory, of acts, thoughts, and volition peculiar to itself, and not directly related to what has been hitherto believed to be the normal consciousness of man? Is it really beneath the threshold of our thoughts regarding ourselves and our action? In answer to a circular letter addressed to leading psychologists a large number of replies were received, from which it would appear that diversity of opinion exists in reference to the definition and existence of sub-liminal consciousness. For instance, Professor Sudduth concludes that it is a state of the natural or subjective mind, and as much to be clearly differentiated from objective and super-conscious mind. Professor James objects that the term is vague and has narrowing implications. Adopting the metaphor of the field of consciousness with its focus strongly attended to, and its margin dimly recognised, he would rather speak of marginal consciousness. Professor Eskridge considers that sub-liminal consciousness is a pompous definition (*sic*) for subjective consciousness. Professor Catell does not think it better than the older term sub-consciousness. We are disposed to agree with Professor James, for it seems to us that the use of *sub* or *supra* in this relation is misleading, and unsupported by the facts of physiological psychology.

ACTIVE TREATMENT OF GENERAL PARALYSIS.

Dr. GODDING, of the Washington Asylum, submitted a paper on the treatment of general paralysis, from which he had secured arrest of the active symptoms. The main feature of this system is the employment of the cold wet-pack with cold applications to the head. The simplicity and efficacy of this mode of treatment should encourage experiments on this side

of the Atlantic, and we refer our readers to *The British Medical Journal* for details.

THE NOSE AND SEXUAL APPARATUS.

Dr. J. N. MACKENZIE, of Baltimore, read a paper in the Laryngology Section on the physiological and pathological relations between the nose and the sexual apparatus of man. He first gave the reasons which led him to conclude that there is an intimate physiological relationship between these organs, specially insisting on the occasional phenomena connected with menstruation, pregnancy, etc. Dr. Mackenzie alluded to the facts of vicarious nasal menstruation, sympathetic irritation of the nasal erectile tissues during the sexual act, and the probability of congestion of the nasal passages owing to abuse of the sexual functions. In the discussion following cases of masturbation cured by the removal of adenoids were referred to. Unfortunately no psychiatrist seemed to have been present to confirm the relationship from his point of view. It is undoubted that abnormal conditions of the nose and hallucination of the sense of smell constantly occur in cases of insanity connected with excessive masturbation.

INTERNATIONAL MEDICAL CONGRESS AT MOSCOW.

SECTION VII.—NERVOUS AND MENTAL MALADIES.

Whether an International Congress brings out the best work of the best men may be questioned, but it is beyond question that in a city so full of interest as Moscow foreign visitors are apt to sacrifice sections to sight-seeing.

Section VII. was one of the busiest and best attended of all the fifteen sections into which the Congress was divided, and not a few communications were left unread. Many nationalities were found at its meetings, and Honorary Presidents of Section were courteously appointed from each, Dr. Yellowlees being chosen to represent Great Britain. As the section included both nervous and mental maladies the field was very wide and the subjects very varied and very mixed: Obsessions and Fixed Ideas, Juvenile Dementia, Pathology of the Nerve-cell, Hypnotism and its Legal Relations, Tabes Dorsalis, Polyneuritis, Inherited Neuroses and Degeneration, Transitory Alcoholic Mania, Treatment by Alternations of Temperature, etc. Dr. Shuttleworth, of London, Dr. Sutherland, of Edinburgh, and Dr. Robertson, of Glasgow were the only readers of papers from this country.

The cordiality with which their foreign *confrères* were welcomed and feted by the neurologists and alienists of Moscow can never be forgotten by them, and it was fitly crowned by a poetic and beautiful compliment at the close of the Congress, when representative foreigners from various lands were personally requested by President Korsakov to plant a tree in the grounds of the Psychiatric Clinique in order to form a group which should be known in after years as "The Grove of the Congress."

The Asylum of Moscow and this Clinique naturally attracted the interest of the strangers. The former—called *Hôpital de Préobragenskoïé*—has been enlarged and modernised in recent years. Although within the city limits, it is surrounded by ample grounds. Its wards are not up to our ideas of comfort, but non-restraint is practised as far as possible, and in part of the building "open doors" are the rule. The medical and scientific work receives great attention, and, indeed, could not fail to do so, for the Medical Superintendent, Dr. Constantincwsky, has four resident Assistant Medical Officers and four others non-resident to aid him in the care and treatment of 400 patients. The proportion of attendants is very large—at least 1 to 4—although many of the lunatics are chronic cases. The explanation given was that quantity had to make up for quality. Probably the defective