

Mr. Hine's name and memory, as part of the Association, are preserved to us in the person of his son, who is with the R.A.M.C. on bacterial work. Mr. T. G. M. Hine has been a member for ten years.

Asylums built by Mr. Hine: London County—Claybury, Bexley, Horton, Long Grove; Gateshead, Hampshire (second asylum), Hertfordshire, Kesteven, Merthyr, Sunderland, Surrey (Netherne), Sussex Cent. (Hellingly), Swansea, Worcestershire (Barnsley):

Several other asylums were added to or altered by Mr. Hine, *e.g.*, Dorset, Cotford, Moulsoford, St. Albans, Wilts, Leicester.

BALLINASLOE ASYLUM.

THE Inspectors' report on certain occurrences which took place in the above asylum, as published in the April number of the Journal, has led to a rather anomalous condition of things, as will be seen from the following extract from the pages of the daily Press:

BALLINASLOE ASYLUM INQUIRY.

Dr. T. J. Considine and Dr. Wm. Dawson, Lunacy Inspectors, attended at Ballinasloe Asylum to hold an inquiry as the result of a report which they had made as to the treatment of some patients in the institution.

Dr. Comyn, solicitor, said he had advised his clients, the Matron and the staff, to decline to give evidence. The Court of Inquiry should be an independent tribunal.

Dr. Considine said the inquiry was called for by the Asylum Committee, and they had power to hold it. Those who declined to be examined did so at their peril.

Dr. Kirwan, R.M.S., was first called, and said on the advice of his solicitor he declined to give evidence.

The Matron and the other members of the staff did likewise.

Dr. Ada English, Acting R.M.S., said she was told when taking up the position that it was not her duty to visit the female side. She agreed with the Inspectors' report. She did not remember giving permission to put the patients to sleep on straw.

Dr. Murnane said he saw the patients lying on straw, but he gave no permission for its use. He never knew that the patients were naked.

This concluded the inquiry.

CORRESPONDENCE.

ROYAL MEDICAL BENEVOLENT FUND.

To the Editor of THE JOURNAL OF MENTAL SCIENCE.

DEAR SIR,—The Royal Medical Benevolent Fund, the great Benevolent Society of the medical profession, is sorely in want of money now.

Though in ordinary times the medical profession supports its own poor, in these war times this is no longer possible. At the May meeting the Committee had a balance of only £17 in hand, and at the June meeting was faced with a deficit of £16. The demands were heavy and had to be met, and this could only be done by withdrawing £500 from the bank.

As the direct outcome of the war, not only are the ordinary cases of poverty greatly increased in number, but an entirely new class of case has arisen urgently requiring relief, in which without actual poverty there is great temporary distress, distress, however, which it is hoped will relieve itself soon after the war is over and the doctors serving return to their civil duties.

At the outbreak of war the medical profession responded freely to the Nation's call. The Territorial Medical Officers were at once called out, and other medical men volunteered. Both alike had to leave their practice at very short notice, and often without being able to make adequate provision for its continuance and maintenance during their absence. Their pay went but little way to supply the loss which their absence entailed, for the working expenses of the practice could

not be materially reduced. The result was that many families found themselves in very straitened circumstances. Rent, rates, and insurance brook no delay; but, worst of all, school bills could not be paid, and if help had not been quickly forthcoming, the children would have suffered for the patriotism of their father.

The following are typical of the cases with which our Fund has had to deal:

A young doctor, who had only been in practice a few years, volunteered for service, and was killed in action a few days later. He left a widow, æt. 35, with two young boys, æt. 3½ and 1 year, entirely without means. The Fund voted £25 for her immediate necessities, and put her into communication with the Officers' Families Association, which gave further help.

A practitioner, æt. 38, earning £700 to £800, volunteered for service, leaving his practice in the hands of a neighbour, who was not a success. There were two young children, and another baby was born shortly after the husband left. The wife contracted pneumonia and nearly died. A resident patient had to leave the house. Rent and other expenses led to a debt of about £80. This the doctor could not meet, and he hurried back from the trenches to save his home from being sold up. The Fund voted £25, the Guild gave £15, the Officers' Families Association £25, and the Professional Classes War Relief Council further help, with the result that he returned to the Front with his immediate anxieties relieved.

A captain in the Territorials was called out and had to leave his practice in the hands of a *locum*, who proved a failure. There were seven children, æt. 2 to 14. Financial difficulties arose, and payment of the school fees became impossible. Between the Fund and Guild and Officers' Families Association, the necessary fees were raised, and clothing, which was greatly required, provided.

These cases show well the way in which the Fund works, not only by giving relief itself in money and kind, but also by obtaining through co-operation with other benevolent Societies more substantial assistance than it could afford alone.

But there is another class in which the distress is perhaps even greater, and adequate relief more difficult. It is that of men who left home and a good practice in vigorous health and who have come back, crippled by wounds or with health impaired, to a practice severely damaged by their absence, and without the strength or energy to regain the practice and position which they sacrificed.

Our Fund has set apart a special sum to meet emergency claims of this kind, yet the demands are so great that it will soon be exhausted. We cannot now rely on the profession alone to supplement it largely, for the medical profession, like all other professions, is hit very hard by the war, and has no longer its old resources to draw upon.

What is required is an Emergency Fund large enough to deal adequately with these emergency cases arising directly out of the war, and for this we are driven to appeal to the public as well as to our own profession.

We trust that our appeal will meet with a liberal response both from the public and from the medical profession, for unless fresh funds are quickly forthcoming it will be impossible to continue the relief which is so urgently required.

We are,

Faithfully yours,

JOHN TWEEDY, *President.*

SAMUEL WEST, *Hon. Treasurer.*

G. NEWTON PITT, *Hon. Secretary.*

11, Chandos Street,
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July 3rd, 1916.

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Papers read at Association Meetings should, therefore, not be published in other journals without such sanction having been granted.