

But I have a particular aversion to this matter being called a theory of mine, for where is the need of a theory at all on the question? Why need it remain any longer conjectural? Several examinations have been made of patients whose ribs were found to be fractured after death. Why do we not have the matter exalted to a fact one way or other? At one of the meetings of the Pathological Society lately, some ribs were shown, from a patient who died of general paresis, as brittle. I saw them, but did not discover them to be so; but what is required is the rib of a patient which has been *fractured* during life. I said in my paper that I certainly detected no fragilitas in the cases I saw. I know that some of these fractured ribs were examined by others, I believe by Mr. Lane and Mr. Paget. They did not observe any fragility; yet it is undoubtedly the fact that fragility of the bones does occur, and with probable increased frequency in the Insane; but what is wanted is a distinct ocular demonstration of the fact; and when this kind of fracture is found by any of our Association, I hope they will bring the specimen before the Quarterly Meeting for us to see.

I am,  
Yours truly,  
W. H. O. SANKET.

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#### ATTENDANTS IN ASYLUMS.

SIR,—

In regard to the inhumanity which has lately been charged against attendants in our public asylums, and has roused so much popular indignation, allow me to state that it has often struck me with surprise that some well-digested system of training for attendants has not before this been devised and recommended from head-quarters. Great stress, and very properly, has been laid upon the need of a special education for those who meditate becoming assistant medical officers and superintendents in our asylums; but why not also give due prominence to the necessity of some sort of systematic training for those who have the immediate charge of the insane? I do not see much probability of the various Asylum Committees offering better wages for attendants in order to attract a higher class of persons than those who now offer their services; and even if they did, I fail to perceive that the special training which I advocate would not be attended with most beneficial results. Great pains—and at the expense of the public—are taken to make good soldiers and sailors, and even policemen, out of the raw material which offers itself for this purpose; and also good National schoolmasters out of those youths who select this calling; why not recognize the necessity of carrying out the same principle in regard to asylum attendants? At present, I am not aware that any means are used for qualifying these people for their responsible post, except having to serve a certain time under their seniors in office till they learn their ways. Is there not room for improvement here? As to the plan suggested of getting medical pupils to spend much time in the male, and sister nurses in the female wards, I fail to see how that is practicable, except in those asylums which are in the metropolis and its vicinity, or near our largest towns. For the purpose of elevating the character of attendants in the majority of our asylums, we must evidently have recourse to some other instrumentality, hoping that an improved system of National education will prove at the same time a powerful ally.

What I suggest is this:—Let the Medico-Psychological Association authorise some qualified persons to write a *simple* catechism, embodying what is required of an efficient attendant. Let the novices in all asylums be required to learn this catechism, and let the officer or officers appointed to test their knowledge, endeavour also to imbue their mind with the scientific principles and humane sentiments which such a manual ought to inculcate. Till the novices have passed through this ordeal, and a certain amount of elementary education should be

already possessed as a requisite for doing so, and also have given satisfaction in other respects, they should be made to understand that they are simply probationers, who are not to have the same privileges as those who have been placed on the staff of the establishment.

Your obedient servant,  
AN ASYLUM CHAPLAIN.

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*Appointments.*

MITCHELL, ARTHUR, M.D. Aberd., appointed Commissioner in Lunacy for Scotland, in succession to W. A. F. Browne, Esq., resigned.

SIBBALD, JOHN, M.D. Edin., appointed Deputy Commissioner in Lunacy for Scotland, in succession to Arthur Mitchell, M.D.

CHRISTIE, THOMAS B., M.D. St. And., M.R.C.P., appointed Medical Superintendent of the Royal Indian Asylum, Ealing.

HINGSTON, J. TREGELLIS, M.R.C.S., appointed Medical Superintendent of the North Riding Asylum, in succession to Thomas B. Christie, M.D.

NICOL, PATRICK, M.A., M.B., M.C. Aberd., late Clinical Clerk, West Riding Asylum, appointed Assistant Medical Officer to the Sussex County Asylum, Haywards Heath,

SHAW, THOMAS, C.M.B. Lond., M.R.C.P., appointed Medical Superintendent of the Metropolitan Asylum, Leavesden.

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The Fothergillian Gold Medal, for 1870, was awarded to Dr. CLOUSTON, the Medical Superintendent of the Cumberland and Westmorland Asylum, by the London Medical Society, for an Original Essay, entitled "Observations and Experiments on the Use of Opium, Bromide of Potassium, and Cannabis Indica, especially in regard to the use of the two latter, given together in Insanity."

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*Obituary.*

JOHN MEYER, M.D.

On May 9th, John Meyer, M.D. Heidelberg, F.R.C.P. Lond., Superintendent of Broadmoor Criminal Lunatic Asylum. Dr. Meyer was born in the year 1814, at Norwood, near London. He studied medicine at Heidelberg, where he graduated M.D. in 1836, and after a short residence in England, he left this country for Australia. In 1844 he was appointed Colonial Surgeon, and shortly after this he was placed in charge of the Hospital and Convict Lunatic Asylum at New Norfolk, in Tasmania. Returning to England on leave of absence during the Crimean war he was employed by the Government on matters connected with the hospital arrangements necessitated by that war, and eventually he was placed in charge of the Civil Hospital established in Smyrna, where he remained until the conclusion of hostilities. In 1858 he was appointed Chief Resident Physician of the Surrey County Lunatic Asylum, and on the establishment of the Criminal Asylum at Broadmoor, he was in 1862 appointed its superintendent. In the spring of 1866 he received from a patient a severe injury over the left temple, and from the effects of this injury he never completely rallied. A rapid journey on May 3rd to the West of England, undertaken at a moment's notice, in consequence of the sudden illness of a near relative,