INSANE PRISONERS.

While the 'Howard Association' complain of punishments awarded to weakminded prisoners on evidence which appeared to have been partly founded on fact, it may be useful to glance at the last report of the Prison Commissioners, where reference is made to cases of insanity. The whole number of these for the year ending March, 1900, was 116, being 21 fewer than in 1898, 34 fewer than in 1898, and 48 fewer than in 1897. Of the 116 cases certified, 78 were insane on receptions of the other resolution and march 12 within tion; of the others, 17 showed symptoms of insanity within one month, 13 within three months, 5 within six months, and only 3 after six months. The daily average number of all prisoners was 14,500.

MEDICAL FEES IN LUNACY.

The guardians of the poor at Yarmouth are of opinion that half a guinea is an adequate fee for each medical certificate granted for the detention of pauper lunatics in asylums. The local medical practitioners refuse to accept less than a guinea, when they enter on the serious responsibilities which the Lunacy Acts entail upon them. We should not have been surprised if they had decided to raise the amount to twice the modest sum which custom has sanctioned. The Legislature has taken elaborate care in this matter, considering the interests of the alleged lunatic, the interests of the community, but in no way determining the pecuniary interests of the ratepayers. No doctor proceeds to the examination of an insane person without a lively sense of the importance of coming to a right decision on the questions submitted to him. He must be prepared to answer for his findings before the law. He has to decide by a personal examination, which may cost him much time and trouble, if the person is of unsound mind, if he is a fit and proper person to be detained in an asylum, if he is in a fit state for removal to an asylum. These are not perfunctory questions to be answered haphazard. The wonder to us is that, after the experience of the medical profession in courts of law, the work is undertaken at all. Did we not record in October last how witchcraft was recognised by the laws of England, and how it bore upon the case of Dowling v. Dod?

CORRESPONDENCE.

ARTIFICIAL FEEDING.

(Reply to a paper by Dr. Rambaut in the JOURNAL for January, 1901, by A. H. NEWTH, M.D.)

Dr. Rambaut, of the Richmond Asylum, has recorded the deaths of two patients who had been fed by the artificial method I mentioned in the JOURNAL for October, 1899. He seems rather hastily to conclude that because he tried it on these two very unpromising cases, and because they both died from gangrene of the lung, therefore this ought to be a warning against using the method.

The patients had previously been fed with a tube.

Now it is the experience of the medical officers of the Haywards Heath Asylum, where the method I described is in constant use, that patients who had This experience extends for over thirty years.

In an article by Dr. Urquhart (JOURNAL for 1895, p. 276) he relates how, in the

early years of Professor Meyer's professional life, it was the custom in Germany to use an apparatus for forcible feeding almost constantly. But on account of the frequency of lobular pneumonia, due to the introduction of small quantities of

food into the larynx by this means, it was given up and the mortality decreased.

I had a sane patient under my care who died from lobular pneumonia. He had been in the habit of using a tube for some time to wash out the stomach for the relief of chronic catarrh of the stomach. There might very possibly have been a connection between the lung mischief and the use of the tube.

It is very possible that the method I describe is less free from the danger of introducing food into the lungs than that with a tube. The spasmodic action of

the larynx would naturally expel any foreign body, a violent fit of coughing giving warning that the food has "gone the wrong way." The presence of a tube would