

was the cause of this. He believed that Creasey had gone out of his way to annoy him. He was unable to specify how Creasey had done this, except that he was "clandestine and insidious." He knew he was doing it, but how he did it he could not tell because he was so "clandestine and insidious." He said that he had suffered in spirit, and his life was made miserable and unbearable, by the clandestine conduct of Creasey, and though Creasey was a weakly man, he felt he could only get at him by shooting him. They were of opinion that after his wife's death Barker suffered from mental depression, and that at the time he shot Creasey, he was under these same delusions of persecution, that his conduct and actions were so ruled and dominated by these delusions as to render him irresponsible; that though he knew the nature and quality of the act, and probably knew that it was contrary to law, he believed himself justified.

Dr. Bastian gave evidence that he had not found Barker insane, but that he had "unfounded suspicions," which were not easily to be distinguished from delusions. He believed him to be a man morbidly sensitive brooding over a supposed wrong, and this sort of thing had gone on for a couple of years, Creasey always being in his sight. He had attempted no violence, and the thing that led to the action was the issue of the summonses.*

Dr. Bastian did not consider him any more insane at the time of the shooting than any man might be said to be who was in a paroxysm of passion. "I am perfectly clear that he is not mad now, but whether he was mad at the time of the act I am not so positive, but my strong conviction is that in all probability he was not mad."

Mr. Mitchinson, the prison surgeon, stated that he had not seen any symptoms of insanity in the prisoner whilst in the prison. He agreed that a man suffering from ideas of persecution, if they were persistent, was insane.

The JUDGE, in summing up, put two questions to the jury. 1st—Did the prisoner know the nature and quality of the act? 2nd—Did he know that the act was wrong, not in the sense of being contrary to the laws of the country, but contrary to the man's internal idea of right and wrong?

The charge to the jury was marked by great fairness. The impression it conveyed was that the Judge leaned to the opinion that the prisoner was insane at the time he committed the murder.

The Jury returned a verdict of "Guilty," and not insane.

Two experts (Drs. Nicolson and Braine) were afterwards sent by the Home Office to examine Barker, the consequence of their report being that the sentence was commuted to penal servitude for life.

We understand that Barker is to be at Broadmoor for three months under observation, and that if his mental condition at the end of that time is sound he will be treated as an ordinary criminal.

Obituaries.

M. CHARCOT.

This Prince of neurologists, and an Honorary Member of this Association died August 16th, 1893, a loss to medical psychology and neurology which can scarcely be exaggerated. Original in his observations, earnest in the pursuit of the knowledge of nervous diseases, rapid but sound in his diagnosis, a master in clinical medicine and pathology, he has left a void which no contemporary is likely to fill.

Jean Martin Charcot was born in Paris, November 29th, 1825, and was therefore in his 68th year when he died. He was of somewhat humble origin,

* Barker, however, had previously attempted to assault Creasey, had written threatening letters in July or August, had complained of the noises, saying they were done to annoy him, had abused Mrs. Wilkinson, and, therefore, they were obliged to take out the summonses.

but his native genius was not to be repressed by the narrow circumstances in which he was born. More dangerous to his success in a laborious profession was the fortune he enjoyed through his marriage, but this failed to slacken his energies. He graduated in 1853. In 1862 he was appointed physician to the Salpêtrière, which he made famous by his own fame.

He became a member of the Academy of Medicine in 1873, and a member of the French Institute in 1883.

For medico-psychologists his most important works are his "Maladies des Vieillards et les Maladies Chroniques" and his "Maladies du Système Nerveux," translated for the New Sydenham Society by W. S. Tuke and Geo. Siger-son respectively. Also his "Lectures on the Localizations of Cerebral and Spinal Diseases," edited by W. B. Hadden. The "Archives de Neurologie," commenced in 1880, must always possess great value for the psychologist, and it was in that Journal that his first articles on hypnotism appeared. He was assisted by one of his pupils. The "Nouvelle Iconographie de la Salpêtrière" is of unique interest. He met his death while enjoying his holiday with two medical friends. They put up at an inn at Settons, near Chateau Chinon. Before retiring to rest he scribbled a note to his son, ending with "I hope to finish to-morrow, as we must rise before six. I must now try to sleep." His sleep was the sleep of death. He was found dead in bed next morning, the supposed cause being angina pectoris. We shall not look upon his like again.

We are indebted to the "British Medical Journal," August 26th, for the following leader on Charcot in relation to Hypnotism:—

"It would have been strange had so far-reaching yet profound a student of the nervous system in health and disease as Professor Charcot failed to include in his range of investigation the phenomena of hypnotism but for the fact that so many neurologists who preceded him had passed them by. It was, we well remember, suggested to him by an English physician some fifteen years ago, when he showed his cases of hystero-epilepsy at the Salpêtrière, that he would obtain great help in his neurological researches from the study of hypnotism, as described in the works of Mr. Braid. He responded to the suggestion. It was only a few months afterwards that he showed his experiments in hypnotism to the same physician, and bore testimony to the value of the researches of *le véritable initiateur dans ce genre d'études*. Passing over these fifteen years we have it from himself, within a short period of his lamented death, that he had found in hypnotism 'a rich field' for his studies in neurology.

"Let us clearly understand the exact position which he took. We can speak of this with confidence. He held that the condition induced by artificial means is a neurosis, and a neurosis allied to hysteria. It is true he qualified this pronouncement by admitting exceptions, but this statement is essentially correct, and herein his teaching differed notoriously from that of the Nancy school, so ably represented by Bernheim. One explanation of this divergence of opinion on so cardinal a point is that the combatants were concerned with cases differing widely for the most part in their character and in the range of mental phenomena. Visits to Paris and Nancy at once proved that this was so. It may well be that both were right, and that a clear definition of the sense in which they employed the same word would have averted the misunderstanding which arose.

"The fact is that the extreme and exclusive theories of either school are equally untenable. Charcot, on the one hand, triumphantly pointed to the hypnotic subject suddenly rendered cataleptic by the mere sound of a gong, without one word of suggestion. Bernheim, on the other hand, could readily demonstrate the enormous and unsuspected effect of suggestion in simulating the very phenomena which the great Salpêtrière physician induced without it. It is, however, a great mistake to suppose that the latter ignored its potency. He did nothing of the kind, although he may not have made sufficient allowance for its effect in misleading the observer, especially in his earlier researches. The formula of his rival 'no suggestion, no hypnosis,' was confuted, in the opinion of Charcot, by a single instance of spontaneous somnambulism. It is

an advantage to have been able to look coolly on the rival theorists, and to hear what could be said on either side with great ability and force by two distinguished and honest men. Both have had the courage to investigate a singularly difficult class of phenomena—to some extent different, but closely allied—and both have had the merit of throwing much light upon them, although from opposite points of view. One of the strongest proofs of the occurrence of physical signs wholly independent of suggestion which Charcot was able to adduce was the highly interesting phenomenon of neuro-muscular hyper-excitability, one of the most certain characteristics, he used to say, of hypnosis. Delicate pressure on a point in a limb or on the face, which in the normal state produces no effect on the muscle, was found by him to be followed by its proper physiological action, when the subject was in a certain stage of hypnotism. He used this incontestable fact in a twofold manner, first to refute the explanation offered by the upholders of 'suggestion' as a universal solvent, and secondly, to confute opponents who had recourse to 'imposture' as the correct explanation, for he was accustomed to say that both objectors must believe an ignorant woman to possess as minute a knowledge of the action of each muscle as Duchenne himself.

Among the many examples of muscular contraction produced in susceptible persons in the hypnotic state, Charcot was fond of showing the delicate response to pressure on the ulnar nerve at the elbow, the subject's hand assuming the position termed *griffe cubitale*. But in truth this was but one of numberless clinical illustrations which the master gave. It is sad to think we can never witness them again. He has, however, left able successors imbued with his teaching and familiar with the nature and signs of hypnosis. More than this, he has left behind the solid and lasting results of his investigations in not only confirming, but extending, the conclusions at which Braid arrived; in reducing to something like order the multiform phenomena of artificial sleep, and in bringing within the range of medical science and the laws of physiology, abnormal states of the nervous system, regarded by the vulgar as miraculous, and formerly by many medical men as fraudulent.

There was one circumstance bearing on Charcot's doctrine of the neurotic nature of the hypnotic state to which must be given due weight, and that is that the patients upon whom he made his experiments were already in a highly nervous condition. Now this undoubtedly served to colour the symptoms he observed, and consequently the inference he drew as to the close alliance between hypnotism and hysteria. This is forcibly indicated by the fact that he has adopted for the title of his lucid article in the 'Dictionary of Psychological Medicine' the significant words 'Hypnotism in the Hysterical.' Hence it was that his observations were mainly conducted upon the female sex, the result being a study of a special organization. Making due allowance for this fact, which has been too much overlooked, he doubtless instituted an interesting parallelism between the two—the hypnotized and the hysterical—in his classic descriptions of the lethargic, cataleptic, and somnambulistic states, in the contractures and rigidity observed in both, as also in the sleep itself. The mistake was made—and, it must be owned, not unnaturally—by other experimenters of looking for these stages in every case of hypnotism, and, when not found, blaming Charcot's descriptions as imaginary or possibly manufactured. He may have generalized too much; but whether he did so or not, it behoves us constantly to bear in mind that he was surrounded by a peculiar group of maladies, and that, when in other hands and in other environments, hypnotized persons do not belong to this category, the three foregoing stages may be looked for in vain. In a word, hysteria was the soil on which he experimented, and when experiments are made upon another soil, the results may be very different from those recorded by Charcot, being no longer stamped by the same hysteric seal.

In conversing with Charcot in regard to the therapeutic value of hypnotism, it was noticeable that he evidently felt less interest in this phase of the subject

than in its purely clinical aspect, and it is certainly a singular circumstance that while the faith cure, homœopathy, and similar nonentities are notoriously successful among the hysterical, hypnotism seems to be comparatively useless in this class of patients.

"No man was more opposed to quackery, and to him is due the credit of helping to rescue artificial somnambulism from the illegitimate embrace of the charlatan. Fifteen years ago, only a strong man could have given the demonstrations which he gave without endangering his professional status, and a few shallow visitors carped even at him; but he passed through the ordeal with impunity, and rendered it easy for others to prosecute the same studies. He left an example to other investigators of avoiding the rocks on which some of his *confrères* without his scientific instinct have foolishly run their craft and suffered well-merited shipwreck. Never did the illustrious Professor at the Salpêtrière allow himself to be drawn aside from the path of inductive science. His scorn of the frauds and follies which sprang up in a credulous circle outside his own school was only equalled by that which he manifested for the incredulous ignoramuses in his own profession who sneered at phenomena which they could not understand, but in which he recognized, like our own Laycock, a rich source of neurological and psychological knowledge."—*"E. M. J.,"* August 26, 1893.

M. DELASIAUVE.

Dr. Delasiauve (Louis Jean François), who died on the 5th of June last, had well-nigh reached his 89th year. He was born on the 14th of October, 1804, at Garennes, in Normandy. Anxious to study the medical sciences, he came early to Paris, where it was his privilege to see the great alienist, Pinel, and to attend his funeral. He was a pupil of Esquirol and Ferrus, and a friend of J. P. Falret, F. Voisin, Trélat, Leuret, Calmeil, Foville, Parchappe, Moreau de Tours, Lélut, Baillarger. One of these well-known alienists is still alive; at this very moment Calmeil enjoys good health, and is now 95 years old; he resides close to Paris, at Fontenay sous Bois. Delasiauve took the degree of Doctor in 1830, a few days after the Revolution and the fall of Charles X. He returned to the country, and during about twelve years was a practising physician at Ivry la Bataille, a small town near which Henri IV. defeated Mayenne and the Ligueurs in 1590. He succeeded wonderfully. But in such a place there was not sufficient room for his great activity. He came back to the metropolis, and after a brilliant competition was received as a physician in the Paris hospitals. In 1844 he obtained a ward at Bicêtre. The study of idiocy and epilepsy had a great attraction for him; he was fond of those unfortunate children, whose life is a long distress, and endeavoured to educate the idiots. He opened a special school at Bicêtre, and some years afterwards at the Salpêtrière. As an alienist he is well known, and his private life was excellent. His friends and pupils will never forget his kindness.

Some of Delasiauve's principal books and notices were as follows:—

Du diagnostic différentiel du delirium tremens, ou stupeur ébriuse (*"Revue Médicale,"* 1850).

D'une forme grave de delirium tremens (*Idem.*, 1852).

Sur la stupidité ou mélancolie avec stupeur (*Idem.*, 15 Octobre, 1853).

Consultation médico-légale sur une aliénation mentale occasionnée par les vapeurs mercurielles (*"Expérience,"* Décembre, 1840).

Mémoire sur l'extase (*"Réveil de l'Eure,"* 1842).

Essai de classification des maladies mentales (*Idem.*, 1844).

Considérations théoriques sur la folie (lues à l'Académie de Médecine, en 1843.)