

Remarks on the Townley case. By DR. SYMONDS.

"In a recent case (Townley's) the prisoner was held responsible because he knew the consequences of his act, and he was actuated by evil passion, and he premeditated the crime. But a question might be raised whether he knew that he was doing wrong, seeing that he held the notion that an engagement made the lady his property, and that he might dispose of her as he liked. Though I should have joined in the verdict of 'guilty' on the whole evidence, I confess that there is a difficulty in distinguishing what one might call a strange, eccentric individual belief or crotchet from what another would call an insane belief in this case. But, seeing that the object of punishment is prevention, it would be dangerous to admit that a young lady's life might be left to the mercy of a lover's crotchets.

"In Townley's case, his particular notion did affect his view of the quality of his act in a pre-eminent degree, but it was combined with violent personal feeling. And the delusion, if so to be called rather than an eccentric notion, was not enough to prove a diseased state of mind. [Since the above was written it has been made highly probable by the investigation of this case by the Special Commission, that the alleged notion was an after-thought set up in vindication of the crime. See a very able medico-legal commentary on Townley's case, entitled 'Insanity and Crime,' by the editors of the 'Journal of Mental Science.'"]—*Remarks on Clinical Responsibility in relation to Insanity.*

Dr. Forbes Winslow's evidence in the Townley case.

"In fairness to Dr. Winslow and his views, a point should not be passed over, which alone bears any resemblance to what is properly termed a delusion on the part of the prisoner. He said, on the occasion of the second visit, that ever since some period previous to the day of the murder, six conspirators had been plotting against him with a view to destroy him, and that if he were set at liberty, he would have to leave the country to escape their plots. 'He became much excited, and assumed a wild, maniacal aspect,' of the genuineness of which Dr. Winslow was perfectly satisfied. Now, either the acuteness of the physician was misled and the whole statement was a sham on the part of the prisoner, who might have after all had a shrewd suspicion in his mind of the nature and object of the stranger's visit, or the statement was made, as Dr. Winslow thought, in good faith. In the latter case it would be interesting to know whether the physician thoroughly tested the nature and strength of this so-called delusion—whether he endeavoured to ascertain from the prisoner who these conspirators were, what formed their grounds of enmity to him, and why he supposed that enmity to have begun so soon and to be likely to continue so long. It is far from impossible that Townley may have referred to friends of Miss Goodwin, whom he may have had good reason to suspect of always opposing and thwarting his wishes. But in any case, when it is a delusion that has unhinged the mind of a man, and which forms the mainspring of his insanity, there can be no difficulty in arriving at a satisfactory conclusion as to its existence and strength. For any one may set up a delusion at a moment's notice—fancy himself the Emperor of China or the Wandering Jew—but it is easy for the veriest tyro in diagnosis to discover in a few minutes whether it be real or assumed. When the spring of it is once touched, the whole diseased mind works on this and nothing else; whereas if it be a sham, the ablest actor is unable to counterfeit the action of a real monomaniac. But it does not seem to have suggested itself to Dr. Winslow or to Townley's counsel

to show that this notion of a conspiracy against him had warped and perverted the prisoner's whole mind and being. As it stands therefore in evidence, we are at a loss to recognise in these assertions on his part a pervading delusion such as might have rendered him mad. Generally, Dr. Winslow may be thought to have proved too much; in this case certainly he proved too little. But with the exception of this point—on which the defence, for reasons undoubtedly best known to Mr. Leach himself and those whom he instructed, does not appear to have greatly insisted—the conclusions of Dr. Forbes Winslow, when compared with the observations on which he bases them, have not unjustly given rise to the most unmingled astonishment. If this man Townley was mad in the sense that he was not responsible for his act, what crime of the kind will in future be incapable of defence? It would be only too easy to reduce the argument *ad absurdum*, and to show that many a petty larceny might be defended on the same grounds as those advanced on this murderer's behalf. Is there not many a poor rogue who walks past a baker's shop with a firm conviction that he has as good a right to the loaves within as the bloated purchasers who happen to be in fortuitous possession of the requisite penny? Is it *madness* if he carries out his theory into practice, and purloins the loaf which he thinks to be his right? Or take a more cognate subject—that of adultery. How many heroes of French novels declare, page after page, that they have a right, a divine right, to their Louise, or Laure, or Annette, married generally to some one else? Are they mad when, in novels or real life, they assert these rights? In favour of all such theorists, when they take to practice, society refuses to allow such a plea to prevail, and punishes wrongdoers 'with a perverted moral sense,' without classing their cases, like Dr. Forbes Winslow, under the conveniently comprehensive head of 'general derangement.' The conclusion we would draw from Dr. Forbes Winslow's evidence is not that which some papers have ventured to extract from it, viz., that he wilfully gave an *ex parte* opinion because he was paid to do so. Such a conclusion would be an inexpressibly gross insult, not only to the physician in question, but to the whole of his profession. Evidence given in this way would be worse perjury than that of the thieves' acquaintances who are always ready to prove an *alibi*. Accusations of this kind are most improperly, most unjustly, brought against a gentleman who has given no cause for them, and against a profession which may have been with reason ridiculed for overvaluing, but has never been openly charged with prostituting, its *arcana*. On the other hand, it is not to be denied that Dr. Forbes Winslow must be the very first thought of any moderately acute solicitor, whose object it is to prove a man mad for the purpose of saving his life, or in a different kind of case, for handing over his property to his affectionate relatives. With the fullest conviction of our sanity, we should dread—or hopefully look forward to, as the case might be—an hour's interview with this great flaw-finder; for either in our moral or in our mental constitution he would discover some screw loose, and by gently moving it backwards and forwards, would naturally find it looser and looser. And if excitement should hurry us into incorrectness of reasoning, what would be our chance of passing unscathed out of the ordeal? *Ira furor brevis est*, says the Latin grammar; moral obstinacy and perversity is madness, all but adds Dr. Winslow. *Cogito, ergo sum*, aver certain philosophers; *Sum, ergo insanio*, is the corollary which a large portion of the human race will have to add for itself, if a dogged adherence to false and wicked laws of human life and society is to be taken as a test of insanity. It is scarcely our business to speculate as to the origin of these comprehensive theories in the mind of the distinguished physician in question; but it may not be irreverent to go as far as to assume, that when a man is constantly examining cases of real or supposed insanity, a period

arrives when his own judgment is in a certain manner affected by the continual practice which he has to undergo. Herodotus informs us, that among the Egyptians it was customary for medical practitioners to devote themselves exclusively to the treatment of one particular part of the human body and its woes. Is it not probable that, in the course of his experience, the stomach doctor would begin to look upon all men as affected in his chosen region, and the aurist to come to the conclusion that all men were, in one way or the other, partly or 'generally' deaf? In the same way Dr. Winslow is fast arriving at a very literal application of the phrase, 'A mad world, my masters.' Constant ministering to diseased minds appears to be super-inducing with him a belief that most minds, if there be but an opportunity of probing them, will turn out unsound. He is by no means the first physician devoted to this branch of medical inquiry in whom a tendency of this nature has manifested itself; but it must be confessed that it has rarely been carried to a greater and more bewildering height.

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"The evidence of Drs. Winslow and Gisborne was that on which it was sought to procure Townley's acquittal. The attempt failed; but enough had been said to make the presiding judge doubt whether farther inquiry as to the prisoner's actual state of mind might not be desirable, and to fill the active friends of the prisoner and his able adviser with good hopes, if they set in action the forgotten machinery of a private magisterial and medical inquiry. Thus the murderer's life was saved, at the expense of a public scandal and bitter discontent among large classes of the population. One of the lessons to be learnt from the whole is, the necessity of carefully watching the growth of scientific theories, which apparently rest on no sufficient basis. If Dr. Forbes Winslow's theories are correct, it may be that they should be acted upon in despite of the dangerous consequences which must thence accrue to society at large. If they are unfounded (and few but poor Dr Gisborne have as yet been found to show a determined disposition to 'err with' the 'Plato' of lunacy), it becomes the duty of all who can meet him on even ground and with equal arms, to prove them such to the final satisfaction of the public, and to the unanswerable refutation of the champion of moral monomaniacs."—*The Glasgow Medical Journal*, April, 1864.

Homicide in Asylums.

DURING the current quarter two cases have been reported of homicide in asylums. The first case is that of Daniel Hobbs, who, on the 5th of May, killed another patient, John Swinney Phillips at Colney Hatch, by striking him on the head with a piece of gas-pipe which he had pulled down in the water-closet. According to Dr. Sheppard's evidence they were both suffering from the mania of general paralysis. This case was fully investigated before Dr. Lankester and a coroner's jury, and attracted much notice from the press.

The second case occurred at Hanwell, and was brought to trial at the Central Criminal Court on the 8th June. J. P. Knight who had been a patient at Hanwell since the 22nd Oct., and was admitted (according to Dr. Beyeley's evidence) in a state of chronic mania with delusions, was indicted for the manslaughter of another lunatic in Hanwell. They slept in a five-bedded dormitory, and in the middle of the night, Knight removed the deceased from one bed to another, and then jumped upon, and suffocated him. The jury immediately returned a verdict that he was in-