

case. All acute cases occurring for the first time are presumed to be curable. The medical officer of an asylum should endeavour to remove every obstacle in the way of effecting so desirable a result; but the greatest obstacle to the recovery of curable cases in a mixed multitude of lunatics is the presence of the incurable, noisy, and refractory cases, which crowd the wards, and sadly interfere with the arrangements for the better treatment of curable cases. The idiotic, imbecile, and demented, are unavoidably mixed up with those who retain sufficient intelligence to feel the degradation and irksomeness of their position, and who, by a few nights' quiet sleep, might be rescued from the horrors of confirmed madness. It must be always borne in mind that one noisy and turbulent patient has the power to disturb all the occupants of an associated ward. It may, therefore, be confidently affirmed that the want of accommodation calculated to permit of the classification of lunatics, according to the requirements of individual cases, constitutes the chief difficulty in the treatment of curable cases in asylums, which are merely constructed for the reception of cases in general, without due regard to the requirements of particular classes.

*Incurable Cases.*—These unfortunately constitute the majority of inmates in most asylums. They admit of a sub-division into two classes—the quiet and harmless, and the noisy and destructive. Amongst the first may be found some who have become, as it were, domesticated, and who, without any compulsion whatever, perform their allotted duties with hearty good will. These patients enjoy as much liberty within the precincts of the institution as it is possible to concede; and in very few instances indeed are they ever known to transgress. Some of these chronic cases are really valuable servants in an asylum; but when subject to paroxysms of recurrent mania cannot be safely discharged, and in most instances they are life inmates. Provision should be made for these chronic cases. Those who have learned a trade should be provided with proper workshops, tools, &c. Others can be employed in agricultural work. In erecting a central establishment it will be indispensable to make proper provision for the healthy occupation of this class.

*Noisy and Refractory Incurables.*—Some of these cases are perfect pests in an asylum, they cannot rest themselves, and will not allow others to rest. So far as the accommodation furnished in single rooms or “cells” (as they have improperly been termed) permits, it is the usual practice to confine these patients during the night, even by day, except urgently required. It is unfortunate that a sufficient number of these single rooms has not been provided in most pauper asylums. They should be placed, as far as possible, from the associated dormitories, which are occupied by the quiet and harmless class. The patients belonging to this class, although not strictly belonging to the criminal class of lunatics, constitute a class in themselves, for which it is most desirable that distinct and ample accommodation should be provided in the erection of a central establishment.

*Criminal Lunatics.*—We have, fortunately, very little experience of this class of lunatics in this asylum; and, although a few cases of homicidal and suicidal mania have been placed under our charge, we have only one instance of homicidal mania, which resulted in the death of its victim. There was also one case of suicidal mania which terminated fatally, the patient having suddenly effected his purpose by breaking a window, and inflicting a severe wound on his throat with a piece of broken glass. It has hitherto been the usual practice of Judges in the criminal courts to sentence criminal lunatics to imprisonment for life. Hence, owing to the number of these cases, the home Government found it necessary to erect central establishments for their exclusive reception. Having had frequent opportunities of visiting the Central Criminal Asylum in Ireland previous to my coming to this Colony, I am enabled to state that it was conducted on the most enlightened principles, which should invariably constitute our guidance in the treatment of the insane. The great majority of both male and female patients in this asylum were convicted of capital crimes. They were, nevertheless, treated in every respect similar to harmless patients in the best district or county asylums: the result being that many of the most ferocious and perverse amongst them became quiet and amenable, and engaged in their respective labours with as much alacrity as if pecuniarily remunerated for them. Even the most hopeless cases should, if possible, be employed in some useful occupation, and provision may be made to that effect in a central establishment and its immediate surroundings. Owing to the peculiar circumstances in which criminal lunatics are placed, it will be advisable to have their exercising grounds surrounded by walls. It was found quite possible, however, to remove the gaol-like aspect of the garden and grounds in the Central Asylum for Ireland, by planting trees and evergreen shrubs on a border inside the walls, by which means their view was effectually excluded. In the limited exercising grounds of many asylums, the unfortunate patients are too frequently under the impression that they are incarcerated for some criminal offence, an impression which I have too frequently failed to remove whilst surrounded by brick or stone walls. It is now universally admitted that lunatics should be very differently treated from criminal prisoners, or the ordinary occupants of a gaol. They are the irresponsible victims of mental disease, to which the most amiable, intellectual, and religious members of a community are, without any offence or fault of theirs, liable to be subjected.

*Pauper and Non-pauper Patients.*—A good deal of attention has of late been directed to the real or imaginary “ill-treatment” of lunatics confined in private asylums. There has evidently been an increasing disposition on the part of the relatives and friends of the insane in favour of public or Government asylums; the reasons for such feelings are too obvious to require enumeration. In the reports of certain English asylums which I have lately had the opportunity of perusing, I find that the practice of receiving non-pauper patients into general asylums is gradually gaining ground. So far back as the year 1859, the Earl of Shaftesbury, then Chairman of the Select Committee of the English House of Commons, testified as follows: “It is the result of very long experience in these matters that a large proportion of the difficulties in legislation, and almost all the complications that we have to contend with, arise from the principle upon which these licensed houses are founded. The licensed houses are founded on the principle of profit to the proprietor, and the consequence is that any speculator who undertakes them, having a view to profit, is always eager to obtain patients and unwilling to discharge them, and he has the largest motive to strip them in every possible way during the time they are under his care.”