

in the meantime the patient is returned in the causation table under adolescence, or worry, or some other stress to which all persons are more or less liable, but which does not unduly affect the majority.

In Table XIII, the scientific value of which is scarcely that of the paper on which it is printed, a fraction over 24 per cent. are grouped as "congenital and hereditary." Contrast this with the following percentages, illustrating the Morison lectures reported in the April *Journal of Mental Science*. The lecturer, Dr. Urquhart, says: "I lay greater stress on the accuracy of the last period. Taking the table as a whole, however, the percentage of those with a hereditary history of insanity may be stated as 45, while the inclusion of the whole neuropathetic heredity increases the number to 72. It is a narrow view of the heredity of insanity which does not include the graver neuroses. . . . These manifestations in one generation so frequently issue in pronounced insanity in the succeeding generation that the nature of the incidence is obvious."

PERCENTAGE OF HEREDITY OF INSANITY, ETC. (GRAVER NEUROSES).

				Males.	Females.	Total.
Period I, ending 1884	...	...	...	59·59	59	59·29
Period II, " 1894	...	...	...	72·66	63·84	68·40
Period III, " 1904	...	...	...	80·11	83·75	81·81
Totals	...	...	...	72·79	70·76	71·81

Here there is an increasing incidence with each nearer period, and the explanation is not to be found in the type of patient, but in greater diligence in seeking for a cause. Though the total for all periods is 71·81 per cent., Dr. Urquhart, it will be noted, vouches for the accuracy of the returns for the third period (of ten years), when the percentage was 81·81. Figures like these bring home the indisputable danger of ill-assorted marriages, and the special danger that this community runs from persons who make New Zealand the home of their adoption.

When we exult over the fact that only 988 of the native-born are insane, and that this means a proportion of only 1 insane person in 613·6, let us remember that we should have had only one or two hundred insane persons (which is giving a liberal allowance), and the proportion would have been from 1 in 3,000 to 1 in 6,000, if we had been sufficiently utopian to have eliminated the factor of heredity in the past. Needless to add that such would have been impossible.

I do not suggest drastic measures, because the matter must be left largely to the public conscience. One is not sanguine enough to believe that in the selection of a life-partner as much care will be exercised as in the selection of stock, which, of course, can be done dispassionately; but surely it is the duty of interested persons to ascertain facts of personal and family history such as have to be disclosed before a life-insurance company will accept a risk of even a hundred pounds. If it profit a trading company to pay a medical fee to keep itself safe for so small a risk, surely it would pay to do something to avoid the great risk of persons marrying in ignorance, when enlightenment may encourage the union of healthy men and women. If public opinion were to see in this a matter for the action of the State, so much the better for the State.

The value of an individual naturally leads to the next point to be considered—namely, the health of the mother and child.

Apart from inducing bodily disorders not directly associated with insanity, apart from mental enfeeblement due to arrested brain-development, apart from the fact that children comparatively seldom labour under mental disease, it may reasonably be presumed that the proper nourishment of the infant both before and after birth must tell when moral and physical stress is encountered later in life and when toxæmic states have to be combated—especially if there be also a neuropathetic inheritance to contend with. From this standpoint alone, the work that Dr. King has initiated in the South for the protection of the health of women and children is of great importance. He is demonstrating to the mother that she is assisting the Almighty in a miracle, the ultimate success of which depends on the manner in which she regulates her life, and that, once the child is born, she must not, for its lasting good and for her own good, deprive it of its birthright, the nourishment that was ordained for its use. The rapid development of the brain in the three months before birth and the three years after, when relatively it is out of all proportion to the body-weight, surely mark these out as critical periods with regard to ultimate mental stability.

As to the growing child and school, one is pleased to note the modern tendency to pay some heed to the lessons of physiology; and to trust that a happy augury may be divined in the Education and the various medical Departments being under the same Minister.

It is true that the law of averages which rules vital statistics cannot be altered appreciably by the laws of Parliament, but when an analysis of our statistics demonstrates that we have two averages—a high average of insanity among our immigrants, and a low average among our own people—it is right to point this out lest the averages be mingled in ignorance. We all know that the presumably responsible will continue to commit excesses, and that nature will continue to be revenged, that to warn persons gravitating towards pauperism, crime, and insanity against putting "an enemy in their mouths to steal away their brains" is to cry in the wilderness; but some effort is necessary to prevent their sins being visited to the third and fourth generations.

The value of Table A, which has been considered, is only relative. It deals with the population of our mental hospitals on the 31st December. Each year this number increases, because there is added the increment of the excess of admissions over discharges and deaths, which numbered 94 last year, and this is frequently misinterpreted as an actual increase of insanity—an