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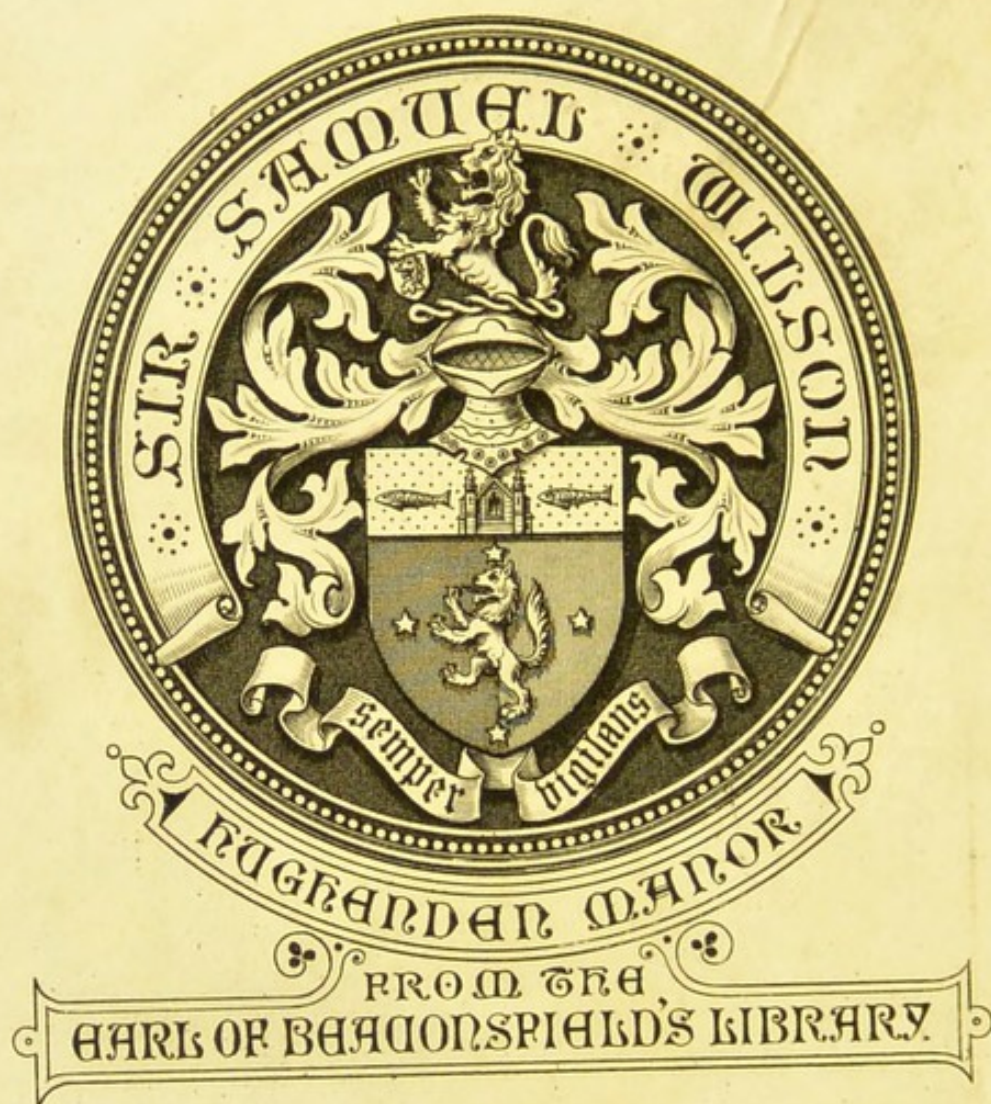
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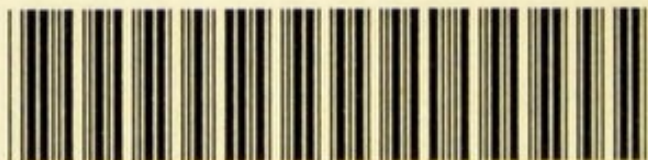


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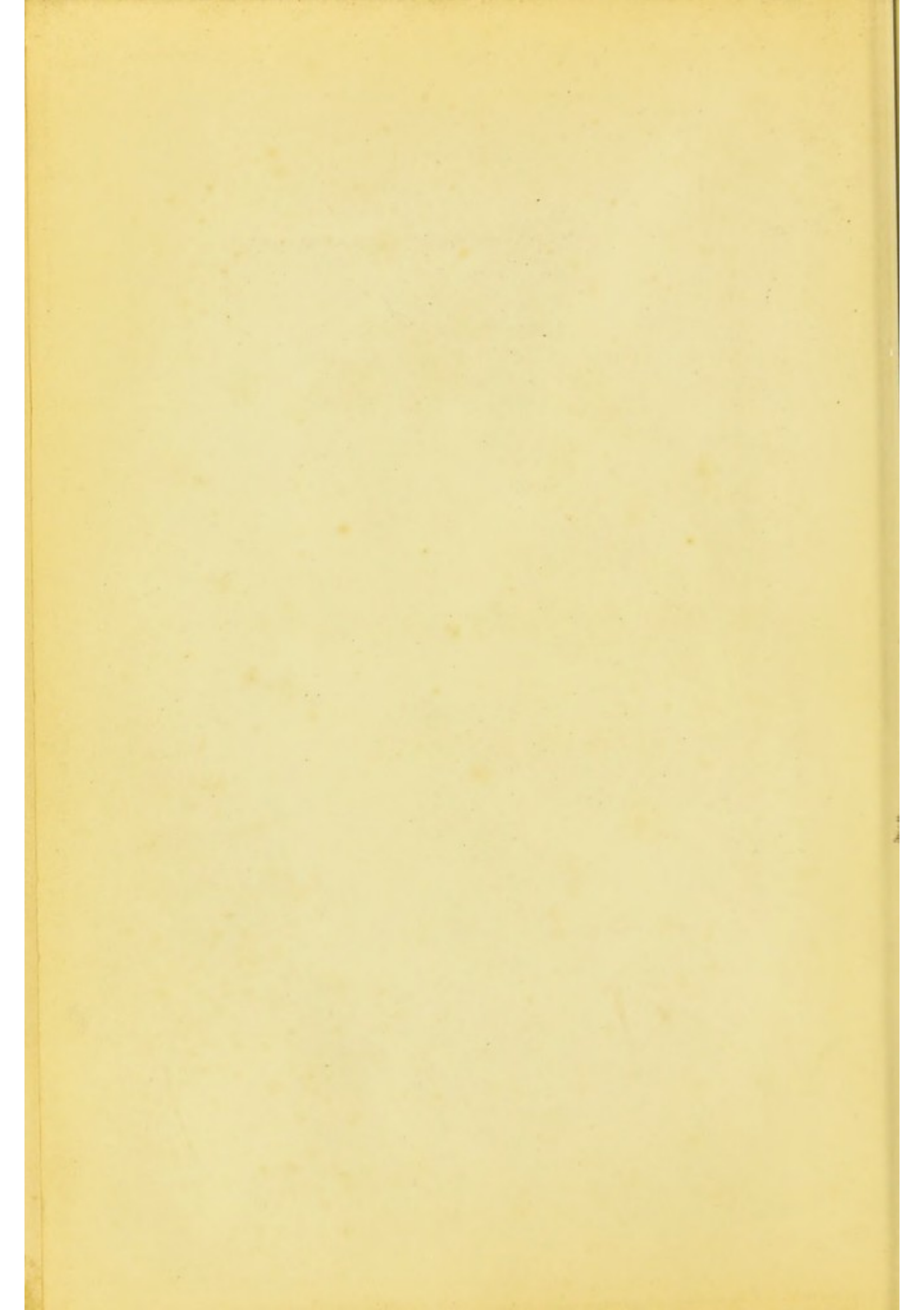


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THE
FACTORS OF THE UNSOUND MIND
AND THE
PLEA OF INSANITY.



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THE FACTORS
OF THE
UNSOUND MIND

WITH SPECIAL REFERENCE TO THE
PLEA OF INSANITY IN CRIMINAL CASES
AND THE
AMENDMENT OF THE LAW.

BY
WILLIAM A. GUY,
M.B. CANTAB., F.R.C.P., F.R.S.

*Consulting Physician to King's College Hospital; late President of the
Statistical Society; Honorary Member of the Medico-Psychological
Association; and formerly Professor of Forensic Medicine
and Hygiène in King's College, London.*

*Author of "Principles of Forensic Medicine" and of "Public Health;"
also Editor of "Hooper's Physician's Vade Mecum," and of
Walker's "Original;" etc., etc.*

"Though this be madness, yet there's method in it."

LONDON:
THOS. DE LA RUE & CO.

1881

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"But if there be any doubt of sanity, surely the evidence of men of acknowledged science and reputation should at least be listened to, especially in capital offences, lest the execution of the maniac be a miserable spectacle both against law and of extreme inhumanity and cruelty, and be no example to others."—COKE in "Blackstone," as cited by Johnstone.

"It cannot be necessary to enter upon any serious refutation of that senseless and inhuman cackle and gabble of sophistry, that madmen who commit great crimes should not be merely shut out of society, but, like all other rabid animals, should be hunted out of life."—"On Madness."—JOHNSTONE'S Medical Essays.

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PREFACE.

THIS volume is the development, with considerable additions and certain needful changes of form, of the Lumleian Lectures given at the Royal College of Physicians in 1868, under the presidency of Sir James Alderson.

It bears the same title, pursues the same method, and has the same object in view as had the lectures themselves, of which by far the larger part has been retained, with only such trifling verbal alterations as the change of form rendered necessary. The additions have been cast in the same mould ; and the matter, old and new, arranged in sections, of which there are ten in the first part, and seven in the second.

In publishing this work at this time I have been mainly influenced by the recent issue of the "CRIMINAL CODE (INDICTABLE OFFENCES) BILL," followed by the valuable comments contained in

the Letter of the late Lord Chief Justice Cockburn. These comments mark what may be fairly called a new era in the judicial treatment of Insanity.

Having had, as many readers of these pages will know, some special advantages in studying those forms of Insanity which are most frequently associated with Crime, I trust that I shall not be deemed presumptuous if I express my views on that and on some cognate subjects with some confidence.

It will be seen that I have brought the facts and figures contained in the "Judicial Statistics" to bear on the question of the effect produced on sane and insane criminals by the Punishment of Death; and, in so doing, believe that I have cleared away a misconception which has exercised an undue influence on those members of the judicial bench, and those among the general public, who are most anxious to protect innocent and unoffending persons from deeds of violence and blood.

On the theory of punishment, and particularly on the grave question of the retention or disuse of corporal punishment, I have also spoken with freedom, and with a confidence which experience has seemed to me to justify. That which I have

seen to be essential to the maintenance of order in prison, and to the arrest of certain strange epidemics, such as self-mutilation and attempts at suicide, I cannot condemn, as some politicians do, when applied to the soldier and the sailor. It is because this punishment of pain, surrounded with proper restrictions, and patiently held in reserve, is eminently humane, just to the well-conducted, and very often the only instrument of reformation to the habitual offender against the needful rules of discipline, that I take this opportunity of advocating it; and I do so not the less earnestly because I believe that the outcry against it has originated in most unworthy motives, and derived almost all its force from the applause of crowds that must always consist in no small proportion of that numerous class of dangerous persons who have reason to fear that some day or other this punishment of pain may come to be inflicted upon themselves.

These remarks on corporal punishment, which, as I have said, my prison experiences seem to justify, form but a short episode in the text of this work, in which, as I venture to hope, my professional brethren will find some novelty of treatment, some welcome contributions to our

stock of facts, and, here and there, a theory or suggestion which my colleagues of the medico-psychological association may see fit to receive with favour.

I may add that the cases which I contribute from my own experience do not fall short of a score ; and that those which I quote on authority other than my own are given in so condensed a form as to render this work a larger storehouse of facts than, at first sight, it might be supposed to be.

I have appended a sufficient Index, and a list of the principal works which I have had occasion to study or consult.

WILLIAM A. GUY.

12, GORDON STREET,
January, 1881.

TITLES OF WORKS REFERRED TO IN THE TEXT.

- "Inquiries concerning the Intellectual Powers and the Investigation of Truth." By JOHN ABERCROMBIE, M.D. Ninth Edition. 1838.
- "An Essay on Apparitions." By JOHN ALDERSON, M.D. (New Edition.) 1823.
- "Observations on the Nature, Kinds, Causes, and Prevention of Insanity." By THOMAS ARNOLD, M.D., Fellow of the Royal College of Physicians, &c. Two Volumes. Second Edition. 1806.
- "Medical Tracts, read at the College of Physicians between the years 1767 and 1785." By Sir GEORGE BAKER, Bart., M.D., F.R.S., F.A.S. Collected and republished by his Son. 1818.
- "On Hallucinations: a History and Explanation of Apparitions, Visions, Dreams, Ecstasy, Magnetism, and Somnambulism." By A. BRIERRE DE BOISMONT, M.D. Translated from the French by ROBERT T. HULME, F.L.S., &c. 1859.
- "System of Physiology." In Three Volumes. By BOSTOCK.
- "Letters on Natural Magic, addressed to Sir Walter Scott, Bart." By Sir DAVID BREWSTER. K.H., &c. 1824.
- "Psychological Inquiries: in a Series of Essays." In Two Parts. By Sir BENJAMIN C. BRODIE, Bart., D.C.L., F.R.S. 1862.
- "Unsoundness of Mind in Relation to Criminal Acts." An Essay to which the first Sugden Prize was awarded, &c. By CHARLES BUCKNILL, M.D. London, &c. Second Edition. 1857.
- "A Manual of Psychological Medicine: containing the History, Nosology, Description, Statistics, Diagnosis, Pathology, and Treatment of Insanity, &c." By JOHN CHARLES BUCKNILL, M.D., &c., and DANIEL H. TUKE, M.D., &c. 1858.

- "Commentaries on the Causes, Forms, Symptoms, and Treatment, Moral and Medical, of Insanity." By GEORGE MAN BURROWS, M.D., &c. 1828.
- "Principles of Mental Physiology, with their Applications, &c." By WILLIAM B. CARPENTER, M.D., LL.D., F.R.S., &c. Third Edition. 1875.
- "Life of John Clare, the Northamptonshire Peasant-Poet." By FREDERICK MARTIN.
- "An Inquiry Concerning the Indications of Insanity, with Suggestions for the Better Protection and Care of the Insane." By JOHN CONOLLY, M.D. 1830.
- "Criminal Code (Indictable Offences) Bill (as amended in Committee)." Bill 170—year 1879.
- "Copy of Letter from the Lord Chief Justice of England, dated the 12th day of June, 1879, containing Comments and Suggestions in Relation to the Criminal Code (Indictable Offences) Bill." 232—year 1879.
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- "The Cyclopædia of Practical Medicine." Articles on Chorea, Epilepsy, Hysteria, Insanity, Somnambulism, and Unsoundness of Mind. By A. Crawford, J. Cheyne, Conolly, and Prichard.
- "Zoonomia; or, the Laws of Organic Life." By ERASMUS DARWIN, F.R.S., &c. Two Vols., 4to. 1794.
- "Mental Pathology and Therapeutics." By W. GRIESINGER, M.D. Translated from the German. Second Edition. By C. LOCKHART ROBERTSON, M.D., &c., and JAMES RUTHERFORD, M.D. The New Sydenham Society. 1867.
- "On Insanity and Crime; and on the Plea of Insanity in Criminal Cases." By WILLIAM A. GUY, M.B., F.R.S., &c. "Journal of the Statistical Society," Vol. XXXII. 1869.
- "On the Executions for Murder that have taken place in England and Wales during the last Seventy Years." By WILLIAM A. GUY, M.B., F.R.S., &c. (Read at a Meeting of the Nineteenth Annual Congress of the National Association for the Promotion of Social Science, 1875.) "Journal of the Statistical Society," Vol. XXXVIII.
- "Essays and Orations, read and delivered at the Royal College of Physicians, &c." By Sir HENRY HALFORD, Bart., M.D., G.C.H., President of the College. Second Edition. 1833.

- "A Treatise on the Diseases of the Nervous System." By WILLIAM A. HAMMOND, M.D., &c. Sixth Edition. 1876.
- "Sketches of the Philosophy of Apparitions; or, an Attempt to Trace such Illusions to their Physical Causes." By SAMUEL HIBBERT, M.D., F.R.S.E. Second Edition. 1825.
- "Chapters on Mental Physiology." By Sir HENRY HOLLAND, Bart., M.D., &c., &c. Second Edition. 1858.
- "Memoirs of George III." By ROBERT HUISE, Esq. London, 1821.
- "On Madness," being No. 2 of "Medical Essays." By JOHN JOHNSTONE, M.D., F.R.S., Fellow of the Royal College of Physicians of London, &c., &c. 1795-1805.
- "An Account of the Disease lately prevalent at the General Penitentiary." By P. MERE LATHAM, M.D. 1825.
- "The Physiology and Pathology of the Mind." By HENRY MAUDSLEY, M.D. London, &c. 1867.
- "The Medical Works of Richard Mead, M.D., Physician to his late Majesty King George II., &c., &c." 4to. 1762.
- "Physiognomy of Mental Diseases." By Sir ALEXANDER MORISON.
- "Practical Observations on the Means of Detecting Dhatoora and Aconite, when it has been Administered with the Intention of inducing Stupefaction, Intoxication, or Death." By Surgeon W. J. PALMER. (Reprinted from the "Indian Medical Gazette.") 1868.
- "On the Different Forms of Insanity in Relation to Jurisprudence." By JAMES COWLES PRICHARD, M.D., F.R.S., &c. 1842.
- "A Treatise on Insanity and other Disorders affecting the Mind." By JAMES COWLES PRICHARD, M.D., F.R.S., &c. 1835.
- "A Treatise on the Medical Jurisprudence of Insanity." By J. RAY, M.D. 1839.
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- "Sketches in Bedlam; or, Characteristic Traits of Insanity, as Displayed in the Cases of One Hundred and Forty Patients of both Sexes confined in New Bethlem," &c. By A CONSTANT OBSERVER. 1823.
- "An Analysis of Medical Evidence," &c., &c. By JOHN GORDON SMITH, M.D. 1825.

- "The History of England, from the Revolution to the Death of George II. (designed as a Continuation of Mr. Hume's 'History')." In Five Volumes. By T. SMOLLETT, M.D. 1818. Vol. v., Book iii., Chap. 13, p. 232.
- "Commentaries upon Boerhaave's Aphorisms concerning the Knowledge and Cure of Diseases." By Baron von SWIETEN. Translated from the Latin. In eighteen volumes. 1776.
- "Medicina Nautica." By TROTTER.
- "The Plea of Insanity in Criminal Cases." By FORBES WINSLOW, Esq., M.R.C.S. 1843.
- "A Narrative of the Treatment experienced by a Gentleman, during a state of Mental Derangement; designed to Explain the Causes and the Nature of Insanity, and to Expose the Injudicious Conduct pursued towards many unfortunate sufferers under that calamity." 1838. (The opening sentences of the second chapter of this work so completely identify the writer, that I have not deemed it necessary to suppress the name.)

INTRODUCTION.

THE title "Factors of the Unsound Mind" will, I hope, convey to the minds of others the impression which is strong upon my own; that the Plea of Insanity in Criminal Cases—a subject as interesting in a scientific, as important in a practical, point of view—is best examined under the strong light thrown upon it from this source.

This being the idea which prompted the preparation of this work, I shall endeavour to realise it by taking these factors, one by one, submitting them in turn to careful examination, and condensing the results to which such examination leads, in short and simple statements. I shall then pass, in each case, from the statement of facts to the inferences they seem to warrant—to inferences having a direct bearing on the plea of insanity.

If, as I think will happen, the inferences drawn in reference to the first factor are found to be in harmony with those drawn from the second, and those from the second with those from the

third, and so on with the whole series, we may attain at last *possibly* to new truths, but *certainly* to a firmer conviction of the soundness of certain principles already established, and to greater confidence in the application of them to practice.

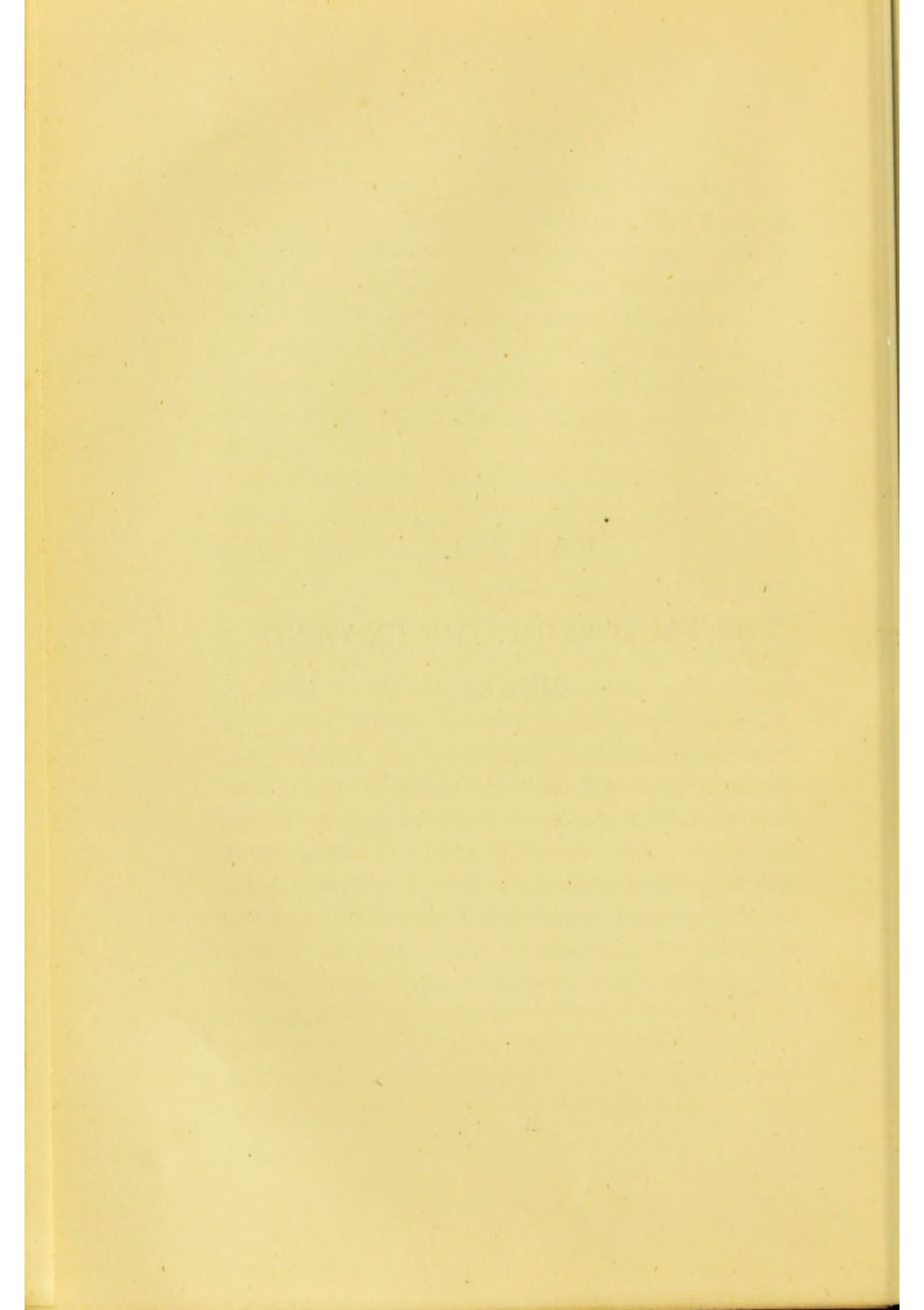
I shall treat the several factors under distinct divisions or sections, forming collectively Part I. of this work ; Part II. being devoted to the plea of Insanity.

In Part I., the first factor, element, or constituent, of the unsound mind to which I shall invite attention is Illusion. Delusion will follow ; then Dreams ; then Somnambulism ; then Delirium, Incoherent Speech, and Convulsive Movements ; then the Emotions, Passions, and Movements of the Will. A section will also be devoted to mixed cases from causes of common occurrence ; and a final chapter to a case of Religious Mania in which these leading factors of the unsound mind will be shown in simultaneous operation in the same person.

The contents of Part II., and the subjects of the remaining sections, will be found sufficiently indicated in the concluding paragraph of the first section of the second part, to which the reader is referred.

PART I.

THE FACTORS OF THE UNSOUND
MIND.



PART I.

SECTION I.—ILLUSIONS.

By an Illusion, I need scarcely say that I mean *an involuntary sensation without corresponding external object*. By this definition I exclude those *voluntary* creations of memory or fancy, not rare, I believe, in childhood, which, though full of interest as illustrations of sensations generated from within, have no direct bearing on my subject. Let me say, too, that as I have no use for the word *Hallucination*, and some objections to it, which I need not particularise, I shall not employ it. I shall use the one term *Illusion*, adding to it—that I may not be misunderstood—the three words “*of the senses*”—*Illusions of the senses*; and where others employ the word “hallucination,” I shall use what I deem a better term, “illusive transformation,” on which, I think, I shall have something interesting and important to say. Need I add that I have no intention of misapplying the word *Illusion* to any object really seen, though at the time misunderstood,—such as the “Giant of the Brocken,” or any other kind or form of mirage? and that I shall not stop to take note of such trivial impressions on

the organs of sense as double, quadruple, inverted, or interrupted vision, sparks and flashes of light, halos of colour ; musical notes ; sour and bitter savours ; and slight and transient disorders of the sense of touch—trivial sensations in harmony with the special functions of the organs in which they occur ; but, again, not having any direct bearing on my subject. The illusions of which I am to treat are life-like moving figures, spoken words and speeches, odours, savours, and tactile sensations of a well-defined order. I shall add to the interest of this part of my subject if I premise that Esquirol estimates, as subject to illusions, four in five of the whole body of the insane.

From what I have said you will infer that I use the words "*Unsound Mind*" in a somewhat restricted sense, excluding those Idiots and Imbeciles in whom the mind is too undeveloped, or too inactive, to become subject to illusions of the senses, or analogous affections of the organ of thought ; and who have too little force of character to perpetrate acts which raise the question of culpability in our courts of law.

The Illusions to which I shall first ask your attention are such as occur in persons of perfectly sound intellect—sensations originating in the brain within, not coming from the world without—sensations which the will has no power to produce, or to prevent.

As an excellent illustration of this class of cases I take the account given by Sir David Brewster, in his *Natural Magic*, of a lady whom he designates as Mrs. A——. Sir David was personally acquainted with

the lady, and had the facts of her case from her husband, a gentleman of learning and science. He describes her as a person of high character and intelligence, with a wonderful verbal memory, and so sensitive that a description of pain in another person would conjure up a like pain, in the same part, in herself. Her waking imagination was "morbidly sensitive," and she would talk in her sleep with great fluency. Her first illusions occurred when she was weakened by a troublesome cough; the remainder were attributed to a "disordered state of the digestive organs." Sir David describes no less than twelve illusions occurring in the interval between December 26, 1830, and December 3, 1831. The first, fifth, and sixth, were illusions of the hearing, the remainder of the sight. She heard the voice of her absent husband, and held conversations with him; and she saw him once. Once she saw a spectral cat, once the duplicate of the dog she held in her lap. Once she saw a shrouded figure reflected in the glass, once a deceased friend appeared to her; twice the brothers, once the sister, and once the mother of her husband. One brother, seen in a shroud, was at the time alive and well; the other relatives were dead. The lady had always the most perfect consciousness that the sounds and sights which haunted her were mere illusions. She noticed that her spectres moved about without the sounds which should have attended their movements; and that the voice and conversation of her husband were not accompanied by his visible

presence. I have omitted to mention the strange and fantastic carriage-full of skeletons that drove up to her door, and I ought perhaps to have noted the prevailing sombre character of her visions.

I have selected this from the large number of similar cases which comprises that of Nicolai, the Berlin bookseller, Mr. Abernethy's woman in red, and Sir Walter Scott's Green figurants, who first drove an unfortunate gentleman from his home, and then banished him from his country, partly because the case is not only well authenticated and well described, but because it gives me an opportunity of thus early correcting an error into which Sir David Brewster, following Dr. Hibbert, fell, when he penned the short formula—"the mind's eye' is actually 'the body's eye,' and the retina the common tablet on which both classes of impressions are painted." This error, condemned by cases reported by Esquirol, Abercrombie, and others, and distinctly recognised as such by the late Sir Benjamin Brodie, I can illustrate by a case that came under my own observation.

It was one of progressive *locomotor ataxy* of many years' standing, first attacking the spinal cord, then the base of the brain: first impairing, then destroying, the sense of sight; then, with stealthy step, travelling forward towards the anterior lobes, marking its course by illusions of the sense of smell, failure of memory, and impairment of a naturally fine intellect. The illusions of the sense of smell, it may be observed, were preceded by the first of many epileptic fits. Now this gentleman, after he had quite lost his sense of sight,

when the retina could no longer serve as a tablet for real or unreal pictures, often, as he walked the streets, had illusions of carts and carriages crossing his path. But he, too, missed the sounds that should have accompanied them.

What is true of the eye is true also of the ear: for Dr. Hammond, an American writer, gives the case of an old lady, absolutely deaf, not able to hear thunder or the discharge of cannon, yet constantly troubled by imaginary voices.

Illusions, then, are not always dependent on the existence of an organ of sense. Nevertheless, when the organ of sense is intact, the illusions which the brain creates may not be quite independent of it. For phantasms may follow the eyes' movements, and may be doubled by squinting or by pressure on the eye, and they sometimes disappear when the eye is closed, thus favouring the view that, when the organ of vision is intact, the brain's creations are reflected upon it.

To return for a moment to Sir David Brewster's narrative. The lady, it will have been observed, was a dyspeptic invalid; but also a person who had, so to speak, the faculty of transferring other people's pains to her own body, and whose nervous system was exactly such as might be expected to be susceptible of illusions. Let me, then, at once guard against the impression that so excitable and mobile a set of nerves is a necessary qualification for the reception of these unreal sensations, by mentioning the case of an elderly gentlewoman, of excellent bodily formation and unbroken health, fidgetty

and anxious, not wholly without reason, but certainly not remarkable for talent or for nervous susceptibility, but who, on the occasion of the fatal illness, first of her only surviving daughter and then of her only son, informed me, prior to the issue of either case, that she distinctly saw a funeral procession, with all its dismal paraphernalia, move across her room. This case reminds me of one reported by Prichard. An invalid clergyman, as he stood at the corner of a street, saw a funeral procession, with all its details of black nodding plumes, approaching. His own name was on the coffin; and the procession passed into the house in which he was residing. This illusion ushered in an illness which proved fatal in a few days. My patient survived her visions many years.

It would be easy for me to heap up from the stores of our English Literature alone—from the works of Alderson, Ferriar, Hibbert (published in the early years of this century), Paterson, and Abercrombie, of Sir David Brewster and Sir Walter Scott,—case upon case of illusions of sight and hearing (those of smell, touch, and taste being less common) in which the mind was intact, and so continued during years of phantom persecution. It would be equally easy to bring forward melancholy instances of another class; in which the mind at last gave way before the constant and persevering assaults of these intangible enemies, and life itself was worn away by suffering, or abruptly ended by suicide. But I shall content myself with a summary account of two cases, of which the first occurred in the person of

Mr. H——, a professional gentleman of high literary attainments, who gave a written account of his case to Dr. Paterson; and the second in that of Dr. Bostock, the well-known physiologist.

Mr. H—— is described by Dr. Paterson as a man of a sanguineo-nervous temperament, possessed of a powerful imagination, and a retina very retentive of impressions; so that he could readily transfer the image of a bright window to a dark wall, of a row of lamps to a cloud, of the pillars of a building to the sky, of a flag-staff to the disc of the moon.

For months previous to the occurrence of the series of illusions which I am about to describe, he saw people on the road coming towards him, and often wondered where they had so suddenly gone; but, so real were they, that he did not suspect them to be illusions till his experience convinced him that it must have been so.

The first illusion of which Mr. H—— was quite conscious occurred while he was lying on a sofa, in his usual state of health, reading an historical work which could not have suggested the phantom he was presently to see. This consisted of a skull resting on a chair in the bright light streaming through a window. He was on the point of ringing the bell to ask who had placed it there; but preferred removing it with his own hands. He accordingly rose, walked to the chair, and was in the act of placing his hands upon the skull, when it disappeared. He was so startled that he nearly fell down, and he continued slightly giddy the rest of the afternoon. This illusion occurred again after the

lapse of a fortnight, while conversing with a friend in a lecture-room.

A second illusion occurred while Mr. H—— was sitting in the garden one evening towards dusk. He rose suddenly, felt a slight giddiness, and, when that went off, saw the figure of a man in a large blue cloak, standing near him, under a tree. In a minute or two, it gradually became faint in outline and colour, and vanished. About half an hour afterwards he saw the same figure again in the same spot; but it receded and disappeared when he walked towards it. I may mention in passing, that, on pressing one eye-ball, the figure became less distinct, and that, on squinting, it was doubled.

A third illusion, often repeated, was that of a dog moving, always in one direction, in the shadow of a street-lamp.

But the fourth and last illusion which I shall notice is by far the most interesting, and is given in detail. It occurred at a time when, as we are told, Mr. H—— was daily in the habit of seeing spectral illusions. He was reading late at night, and, as he finished his book, saw, lying on a side-table, a letter inviting him to the funeral of the mother of a lad who had been his companion in boyhood, who had been sent to sea by a worthless father, and came back to die of consumption. Mr. H—— had been painfully interested in his fate, and was present at the dissection of his body. His death had taken place three years before. With his mind full of the sufferings of mother and son, he went to his bedroom, undressed,

and put out the candle; but had no sooner done so, than he felt his left arm suddenly grasped a little below the shoulder, and forcibly pressed to his side. He struggled and called out, "Let go my arm," when he distinctly heard the words, "Don't be afraid," uttered in a low tone. He asked leave to light the candle, and felt his arm released. Though suffering from "an uneasy giddiness and faintness" which almost overpowered him, he succeeded in lighting the candle, and then, turning towards the door, he saw the figure of his deceased companion standing before him. It was indistinct and hazy, but perfectly defined. Mr. H—— advanced towards it, candle in hand, when it receded, with its face towards him, passed through the doorway, descended the stairs, and, on reaching the lobby, stood still. He passed close to it, and opened the street door; but at that moment became so giddy that he sank into a chair and let fall the candle. He was insensible for a time, and, on recovering, felt a violent pain over the brows, with considerable sickness and indistinctness of vision. He passed a feverish and restless night, and continued in an uneasy state during the following day. Of this illusion, as indeed of the many others to which he was subject, Mr. H—— said that "he never for a moment could have considered it a real object." I must not forget to add that this gentleman had a smart attack of scarlatina, succeeded, at no great interval, by a very severe attack of typhus fever; and that Dr. Paterson, who attended him, never, before or since, witnessed any case in which phantoms so numerous, so varied, and so

vivid, had haunted the patient. It is a singular fact that Mr. H—— was deterred from publishing an account of his many illusions by the circumstance that, when he reflected on the subject, he always found the illusions increased to such an extent that they became occasionally “truly alarming.” It was, therefore, with difficulty, and after a long interval, that Dr. Paterson prevailed on him to furnish the written statement from which this account is taken.

In this case we have three illusions, affecting successively the senses of touch, hearing, and sight, occurring in one accustomed to illusions, recognising them as illusions, and yet, at the time, acting as if they were realities. The case is instructive, too, as affording an excellent illustration of that class of illusions in which strong emotions call up the image of a known person; and of that class, too, in which a derangement of the cerebral circulation (inducing a fit, and followed by a feverish condition) goes far to explain the phenomenon.

This case, in fact, shows us illusions in course of formation—to which curious subject also I am able to make a contribution from my own experience.

Typhoid Fever attacked in succession a family of seven (two adults, father and mother, and five children). They had lived for years in a large house in one of the old squares of London, undermined (as was proved when it was pulled down) by cesspools, and haunted with foul smells. The mother and one son died, the rest recovered. The father, who was attacked last, suffered least in body, but somewhat in mind. He was

removed during his convalescence to a lodging near town, which commanded a view of a broad sheet of water. Day after day (it was the height of summer and very sultry) my patient spoke of his great desire for a bathe; but, at one of my visits, he told me that, in the middle of the night, a figure had appeared at his bedside, drawn aside the curtains, and invited him to accompany him to the water. We conversed together on this curious conversion of his wish into an illusion, and he readily admitted the justice of my observations, when, quite suddenly, his countenance assumed the air of angry determination, and he alleged that, if the figure showed itself again, he would follow it, and nobody should prevent him. I put my hand on his shoulder, and shook him. The transient madness passed away, and we resumed our quiet conversation.

Dr. Bostock's case is to the following effect:—He was suffering from a fever, very weak, and very nervous, and had a severe pain in the right temple. After a sleepless night, he first saw figures which he immediately recognised as similar to those described by Nicolai; and upon which, as he was not delirious, and they were visible, with little intermission, for about three days and nights, he was able to make observations. He found that the figures always followed the motion of the eyes, and that those which were best defined and remained longest visible, were such as he had no recollection of ever having previously seen. For about twenty-four hours, he had constantly before him a "human figure, the features and dress of which were as distinct as that of any real

existence," and of which, after many years, he still retained the most lively impression, yet neither at the time nor since could he discover any person whom he had previously seen that resembled it. This stationary phantom was, after a time, succeeded by a curious phantasmagoria of medallion-like faces and figures; but he says of them also, that in no single instance did he see any object with which he had been previously acquainted, nor, so far as he was aware, was any object with which his mind was most occupied, at other times, presented to him. They appeared to be "new creations, or, at least, new combinations," of which he could not trace the original materials. Let me ask you, in passing, to remark the striking difference between the last of Mr. H.'s experiences and those of Dr. Bostock—the illusions in the one springing straight from a strong mental emotion conjuring up the phantom of its object—in the other, originating in no excited thought or feeling, and presenting to him no familiar face or person. I shall have something more to say on this subject by-and-by.

Up to this point the cases I have laid before you have been chosen without any reference to date of publication, or priority of claim to the discovery of the true character of spectral illusions. As this is a question of some interest in itself, I may state that it was Dr. John Alderson, of Hull, father of Sir James Alderson, a former President of the College of Physicians, who claimed (and I believe with justice) to have been the first to explain the true nature of ghosts and apparitions. This he did some time prior to the year 1810, thus anticipating by a few

years the well-known work of Dr. Ferriar. As the cases which Dr. Alderson gives in illustration of his views are very striking, and admit of condensation, I will give them in their order:—

1. An athletic keeper of a dram-shop had a struggle with a soldier, who wounded him in the temporal artery. He lost a great quantity of blood, but soon after took part in a walking-match, in which he covered forty-two miles in nine hours; then drank hard for a day, then abstained for a week; after which his illusions set in. He first saw, and tried to pick up, oysters from the floor. He next tried to catch the soldier who had wounded him, but he escaped, and was joined by several others. He was then haunted by spectres of friends—some dead, some living, these last hard to distinguish from real customers. When conversing with the doctor his illusions vanished; but as the doctor sat down to write a prescription, his patient got up to convince himself that it was not a real soldier entering the room. “Never was he able to get rid of these shadows by night when in bed, nor by day when in motion.” A milkman who frequented his bedroom, and a wagoner who came every night to the same corner of the room to lash him painfully with his whip, complete this list of the poor publican’s chief assailants. Leeches and active purgatives soon drove away his day-phantoms, and a repetition of the treatment effected a complete cure, with the exception of one solitary visitation. This case may perhaps be set down as one of delirium tremens, cured by simple methods, one of

which (bleeding) has now fallen into disuse. The fourth case, also, is not free from the suspicion of excess. But the second and third cases cannot be traced to this source.

2. A lady of eighty, deaf, gouty, and dyspeptic, expecting a visit of the gout, received, instead of it, uninvited phantom friends, to whom she addressed herself, apologizing for her deafness, and inviting them to a rubber. On ringing the bell the servant entered, and the whole party disappeared. This happened over and over again. The lady also continued for many days and nights to see "lost" friends. She was perfectly rational throughout; and her symptoms gave way before cataplasms to the feet, gentle purgatives, and a fit of the gout.

3. Mr. R——, a man of "strong parts" and good education, in his passage from America was seized with excruciating headache, somewhat relieved when matter formed under the scalp. He told Dr. Alderson that he had troublesome dreams, and seemed to dream whilst awake. Then he reported that "for an hour or two" he was convinced that he had seen his wife and family, whom he had left in America; and a few nights afterwards the impression was so strong, and the conversation he had with his son so particular and important, that he could not help relating the whole in the morning to his friends, requesting to know if his wife and son were not actually arrived from America, and at that time in the house. The friends thought him insane, and sent for Dr. Alderson, who reassured them. After this the

phantoms became so troublesome that every picture in his bedroom was associated with them, and conjured up the spirits of the departed and other unpleasant companions. He next saw these people only when he looked at a "bright brass lock." On changing his house, and having a second formation of matter under the scalp, he became convalescent and free from visions.

These three persons recovered, and continued well. But Dr. Alderson was convinced that, had their maladies disappeared after the first appearance of these phantoms, or had they been attacked only at night, they would have been convinced that they had seen ghosts in the ordinary acceptation of the term, and would have clung to the belief for the rest of their lives. This remark doubtless admits of very extensive application to the affairs of life, and traces to their true source many of the strange fancies which amuse, terrify, and perplex mankind.

4. This case is narrated in a letter addressed to Dr. Alderson by a country gentleman who, a few days after falling, not very sober, from his horse, had a most violent bilious attack attended by incessant vomiting, and followed by two unusually sleepless nights. Waking early next morning, he saw, and continued to see, horrid and ghastly spectres, and, about eleven o'clock, while walking in his grounds, he fancied he saw poachers on his estate coursing a hare. He followed them on foot several miles, but, as they were on horseback, they escaped. On returning to his house, this vision was repeated. He immediately mounted his horse, and again pursued them for

miles ; but, on taking a large fence, he suddenly lost sight of them. Convinced that he had been subject to illusions, and, though competent in family affairs, feeling very uncomfortable, and fearing that his intellects might be affected, he sent for Dr. Alderson.

This last case is a curious and striking illustration of the strong impress of reality attending these illusions ; while the seven cases taken together will serve to illustrate in the best possible way, most, if not all, of the phenomena of the strange condition with which we are dealing. Adding to these seven cases twenty-nine others of the same order, I have brought together a total of thirty-six cases to which to apply the method of analysis of the late Dr. Todd of Brighton, which I have often had occasion to commend as especially adapted to this kind of work.

All the cases occurred in persons who were so sound in mind that they were quite conscious of the unreality of the impressions made upon their organs of sense—those impressions being, nevertheless, so vivid, so life-like, as to affect them strongly at the time, and to govern their actions. It was always by an effort, as it were, that they came to know the truth.

These thirty-six cases I find distributed between the two sexes in the proportion of twenty-eight males and eight females. They were of all ages from four up to eighty. Two men and two women had reached this advanced period of life. In several instances the illusions had lasted for weeks, months, or even years. There were cases of *several* years, and one of twelve years.

Several, both men and women, were habitually, and at the time, in perfect, even robust, health ; and there were persons of every type of constitution and habit—the plethoric, and those of spare habit, the temperate, and the free livers. Others suffered from trivial and transient indisposition ; and others again were in the earliest stage of inflammatory or febrile attacks, or they were convalescent. Some there were who, though in good health, were worn by study, or bodily fatigue, or bed-side watching, or harassed by grief or anxiety. The fatigue and excitement of travelling seemed to form a favourable combination. The mental character displayed every possible variety, but the educated classes furnished by far the largest contingent ; partly, perhaps, because these classes comprise the greatest number of persons ready to observe, and willing and able to describe, the strange phenomena of which they are cognizant. Among the endowments specially mentioned in some of the most minutely described cases, an active imagination, a retentive memory, an acute perception, and a highly sensitive and sympathetic nervous organisation, are to be noted. But, on the other hand, there were others possessed of no special endowments, and who had attained an age when memory, imagination, and sensibility, commonly share impairment and decay.

Of the illusions themselves I may observe that some of them consisted of some strong impression of an earlier period of life recalled ; some of the constituents of dreams prolonged into the waking ; some of the special objects of grief, anxiety, or other strong emotion

—the absent, the endangered, the sick, the deceased—while the greater number of illusions had no relation whatever to any antecedent emotion or train of thought. Those, indeed, who may be characterised as *subject* to illusions, consisted of two marked divisions: into the first of which fall those who may be said to have been entertained or persecuted by the repeated visits of the spectres which first appeared to them; and into the second, those who were favoured with visions of greater variety. But of both classes it may be affirmed with truth that their illusions, whether repeated and, so to speak, stereotyped, or subject to variety, were equally independent of their will, and beyond their control.

I pass by, as unimportant for my present purpose, though far from uninteresting to the physiologist, certain differences in the nature of the Illusions themselves; as that some spectral figures, though perfect in outline and colouring, were so unsubstantial that familiar objects (such as pictures on the wall) could be seen through them, while others appeared so solid and real as to conceal them: also that some of these figures could be banished by summoning a servant or stranger, while others were indifferent to the presence of real company, and mixed their unsubstantial forms with the figures of relatives or friends. Cases in which the phantasms disappear on opening the eyes, others in which they vanish on closing them, and others again in which they appear on lying down and disappear on sitting up, are also of interest in a physiological point of view.

But there is a question relating to Illusions, to which

I ask your especial attention, because that which I believe to be its true and proper answer admits of obvious application to the question of criminal responsibility:—Are spectral and other Illusions, in any proper sense results of the workings of Imagination or Fancy?

Now, I believe that the great majority of educated and intelligent persons, both in and out of our profession, are in the habit of looking upon Illusions as products of the Imagination. They know that certain persons have once enjoyed, and certain others have long retained, the power of realising as actual perceptions the thoughts of their minds. They know, too, that in very many cases, the illusions of the senses have consisted of the figures and voices of the very persons about whom the mind was busily occupied at the time, in anxiety, or in grief; or that they have been reproductions, only slightly modified, of strong impressions made on the mind at some former (perhaps some very remote) period. In these cases, which, as I have said, are very numerous, it seems obvious to attribute the Illusions to that active, busy, creative faculty which we call Imagination or Fancy. And yet, even in these cases, it must be admitted to be at least possible that the emotion of anxiety, grief, or fear, may be as competent (without intermediate action of the Imagination), to throw a picture on the retina, or a voice on the auditory nerve, as to blanch the skin, fill the eye with tears, dry the tongue and parch the mouth, and set every muscle of the body trembling. Be this, however, as it may, we have yet to consider that other large group of Illusions in which there is no

definite emotion, nor even any prior mental impression, to account for the occurrence. Emotion and Memory, two handmaids of Imagination, are set aside; and we seek in vain for any spring or motor-power by which the machinery of the fancy can be set a-going. When we speak of any work or product of the Imagination, we always mean some definite aim of the mind accomplished by its agency. The poet, with words for his material, the musician using sounds for his; the painter working with colours, the sculptor with marble or stone, the architect with every kind of plastic material;—the producer and inventor in every art—first designs a work to be done, and then performs it by the aid of the Imagination, at every step the prompter, controller, and guide of the hand that realises the design. But if there were no design or project, on the one hand, and no hand to execute, on the other, what place would there be for the work of the fancy? And so it is with the Illusions of which I am now speaking. The mind of the person who is the subject of the Illusions is in no way turned in the direction of the thing which is about to be seen or heard. No wish, no fear, no expectation tending to self-realisation, is there to stimulate the imagination; but the illusion starts into existence, a surprise and a perplexity. Now, unless we wish to degrade the noble faculty of Imagination into a mere lumber-room into which to throw all strange and inexplicable phenomena of the mind, we must admit that it has no place whatever in these Illusions; and though we are quite unequal to the work of explaining them, we can say of them that they find their true

analogies in convulsions and epileptic seizures. Nicolai may be quoted in support of this view; for he says "these visions in my case were not the consequence of any known law of reason, of the imagination, or of the otherwise usual association of ideas." I note, too, in passing, what I shall speak of more at length hereafter, that Illusions are very often the immediate antecedents of the utterly unconscious epileptic seizure.

That the intervention of such a faculty as the Imagination between the emotion and the illusion, or between the action of the brain and the illusion, need not be assumed, may, I think, be reasonably inferred from the occurrence of illusions in animals, of which I will content myself with two instances, on the authority of my friend and former pupil, Mr. W. J. Palmer, of Calcutta. He gave to a puppy the liquid resulting from the chemical treatment of the contents of the stomachs of a man and his wife who had died poisoned by the young shoots of the dhatoora plant. The puppy vomited, performed a few antics, and fell on his side in a deep sleep; after ten minutes he got up, stared wildly about him, and appeared to see visions which he would scratch or snap at, but, finding that they eluded him, he walked to his accustomed corner of the room and there lay down.

A kitten treated to the contents of another stomach containing also the poison of dhatoora, when consciousness returned, is described as staring wildly, performing a series of grotesque actions, as being irritable and almost wild. In the same paper from which I take these facts,

Mr. Palmer, comparing the effects of dhatoora with those of aconite, says that the animal under the influence of dhatoora has a drunken appearance, greatly heightened by the curious antics which he attributes partly to spectral illusions and partly to awkward and misdirected efforts to attack the spectres.

If Mr. Palmer is not wrong in his interpretation of the movements of these animals, and if other observers have not been similarly mistaken, then it follows that we may have Illusions of the Senses in creatures which we do not credit with any faculty resembling the human imagination.

The subject of Illusions is too interesting and too important to be dismissed without saying something about the causes which produce them. To this, then, I shall return presently. But I feel that I ought not to proceed further without drawing from the facts already stated and discussed the inferences which, as factors of the unsound mind, they seem to justify.

Recognising, as I do, in these Illusions of the Senses (occurring in persons sound in body and mind) a strange independence of the will; and, in many cases, an independence still more strange of the very organ of sense, the integrity of which might be thought to be a necessary condition of their production; and not being able to trace them to the operation, or agency, of that mental faculty which, under the title of Imagination or Fancy, is usually supposed to preside over the production of all the more curious phenomena of the mind, I infer that they are veritable creations of the Brain, and that it is

quite reasonable to suppose that there may be like involuntary and unreal creations in the sphere of the emotions and passions.

This, however, is by no means the only inference bearing on the Plea of Insanity which the facts relating to Illusions appear to warrant. It will have been observed that, in more than one of the cases to which I have referred, we had a remarkable combination of a perfect consciousness of the unreality of the Illusions, with acts indicating something very like a temporary belief in them. Thus, on referring to Sir David Brewster's account of Mrs. A——, I find that, not only on the first occasion, but on subsequent ones, she acted for a time as if the Illusions were realities. So that, if she had been asked whether the things she saw and heard were real, she would certainly have answered that they were not ; and yet, on each fresh occurrence of an illusion, she would be found to act for the time as if she fully believed in it. So also with Dr. Paterson's friend, Mr. H——. He tries to grasp the phantom skull ; he follows the man in a blue cloak ; and he does the same with the spectre of his deceased young friend. So again, and, if possible in a more decided manner, with the fourth of Dr. Alderson's cases—his correspondent pursues the phantom poachers first on foot, then on horseback, and follows them for miles.

But the first of Abercrombie's series of cases is still more instructive in this point of view. A healthy gentleman, eighty years of age, had been, for nearly twelve years, liable to almost daily visitations from

spectral figures—figures with human faces and figures in great variety of costume—pleasant figures, so pleasant that he courts their presence as a source of amusement to him. He observes them narrowly, and notes the causes which determine their appearance. He finds that any addition to his usual moderate allowance of wine increases the number and vivacity of his visions; and that a few drops of laudanum taken for a cold fill his room with gold and silver ornaments and precious gems. This gentleman had an attack in his head, followed by confusion of thought, and loss of the use of the English language; after which time, Dr. Abercrombie states, "less was known of his spectral illusions; but it was ascertained that he was still liable to them." "On one occasion, in particular," the narrative goes on to say, "he saw the figure of his deceased wife, who seemed to beckon to him to follow her through a window; and he actually made his way through the window, and fell on the lawn, a height of between seven and eight feet. He got up instantly, and followed the apparition into the garden and conservatory, which had been a frequent resort of his lady. He then met his overseer, told him what had occurred, and asked him whether he had not seen his wife. Upon being reminded that she was dead, he seemed to awake as from a dream, and returned to the house, and he never again was heard to allude to the occurrence."

I have mentioned the illness, attended with loss of verbal memory, which intervened between the illusions first described and the appearance of his wife, because

the illness in question may be supposed to impair the force of the illustration. But, taking this fairly into account, we have here an instance of a gentleman long subject to illusions, and aware of their real nature, continuing to be liable to them after his attack, and yet, when an illusion, eminently calculated to touch the feelings, presents itself, acting for the time as if it were a reality.

You will readily anticipate the use that I intend to make of this case and of the others to which I have referred. A man who knows right from wrong, whatever the condition of his mind in other respects, and whatever the strength of the impulse which urges him to action, is held to be responsible for his act: Do not these cases help us to understand the surpassing reality of the brain's own creations, and the tyranny they exercise over men's actions, even in presence of the most perfect knowledge (experimental and theoretical) of their true nature and causation? And if illusions of the sense of sight, which, if not corrected by real objects, are at least mixed up with them, are thus vivid and life-like, what shall we say of those illusions of the sense of hearing which, so to speak, have the mind all to themselves, and take the shape of definite commands to commit suicide or murder?

If now we turn for a short time to the causes of Illusions, we may learn some fresh lessons admitting of practical application in the same direction.

Some of these causes I have already mentioned incidentally when giving a summary of the facts I have collected. I will now try to present the chief causes

with which my reading or experience has made me acquainted under the divisions to which they seem to belong.

1. Over-exertion or excitement of the mind itself in great thinkers and energetic workers forms a distinct and well-defined group, in which to place the *poets* and *novelists*, Tasso, Goethe, Donne, Pope, Byron, Ben Jonson, Samuel Johnson, Sir Walter Scott, and John Clare the Northamptonshire peasant; the *artists*, Benvenuto Cellini, William Blake, Heaphy; the *philosophers and metaphysicians*, Spinoza, Pascal, Malebranche, Huyghens, Ashmole, Jean Paul, Hartley Coleridge; the *physiologists*, Van Helmont, Van der Kolk, Müller, Bostock; the *physicians*, Andral, Leuret; the great *innovators, reformers, and patriots*, Luther, Loyola, Joan of Arc, Cromwell;—an imperfect list, comprising no less than twenty-nine celebrated names, to say nothing of a host of visionaries and fanatics too numerous to specify.

2. A second well-defined group will consist of illusions produced by watchings, fastings, imprisonments, tortures, shipwrecks, and other like causes of continuous and progressive exhaustion of the strength.

3. In a third group, we may place convalescents from severe and exhausting maladies.

4. In a fourth, the onset of inflammatory and febrile disorders, such as pleurisy and fever in its many forms.

5. Then, a fifth group will comprise disorders of the alimentary canal—dyspepsia, constipation, worms.

6. A sixth group would consist of diseases in which

the blood undergoes changes of composition, as in anæmia, uræmia, and gout.

7. In a seventh group, we should assemble the poisons of the narcotic and (to retain a familiar term) narcotico-acrid class, the fruitful parents of illusions—Opium, Alcohol, Indian Hemp, Belladonna, Hyoscyamus, and Stramonium, and the Dhatooras of the East; Digitalis, *Cœnanthe crocata*, and poisonous mushrooms; Nitrous Oxide Gas, Carbonic Acid Gas.

8. In an eighth group we should bring together all direct disturbances and arrests of the cerebral circulation, as in hanging, strangling, drowning; in apnæa, however induced, and in apoplexy. This group will comprise those curious and instructive cases in which illusions have appeared in the recumbent, and disappeared in the sitting, posture.

9. A ninth group will comprise diseased conditions of the organ of sense which is the seat of the illusion.

10. A tenth group would assemble various convulsive and paralytic disorders, such as chorea, hysteria, epilepsy, progressive locomotor ataxy, and hydrophobia (in one or two cases of which, spectral figures of dogs are stated to have been seen). Sleep, somnambulism, and other allied conditions ought perhaps to be considered as furnishing another group; and it is probable that among the severe nervous affections (including delirium) which have characterised some outbreaks of scurvy, (especially that instructive epidemic at Millbank described by Dr. Latham) illusions have shown themselves.

These ten groups would, of course, supply many

examples of illusions that might be transferred with propriety from one class to another: for instance, cases of illusions in the epileptic to the group which comprises disordered cerebral circulation; cases of illusions in the subjects of chorea to the class which comprises disorders of the alimentary canal.

It is also obvious that there will occur many cases of Illusion which ought to be referred to two or more classes; such as the case of Schröder Van der Kolk, cited by Dr. Maudsley, in which the bases of the first and fifth groups were united. This curious case is related as follows:—"After great mental exertion, and an unaccustomed constipation of a few days, he was attacked with a fever, for which his physician, deeming it nervous, would not sanction any purging. After a continuance of the fever for two days, hallucinations of vision occurred; he saw a multitude of people around him, although quite conscious that they were only phantasms. These continued for three days and increased, until he got a thorough evacuation of a quantity of hardened fæces from his bowels, when all the morbid phenomena vanished in a moment." This is but one of many cases that might be adduced in which moderate depletion, or the use of simple aperient medicines, has put these intrusive phantasms to flight.

Among the ten groups of causes there is one to which it is natural that I should refer with special interest. I mean the seventh group which comprises the several poisons—narcotic and narcotico-acrid—the poisons which are recognized as having the most direct

and marked effect on the brain. Among these, carbonic acid gas, or the direct products of the burning of charcoal, would not, I think, suggest itself as a cause of spectral illusions, though the fact that illusions do occur in those arrested states of the circulation which lead directly to the accumulation of carbonic acid in the blood would prepare us to accept the fact without surprise.

As a good example of a poison circulating in the Blood affecting every part of the Nervous System, exciting *convulsions*, by its action on the *Spinal Cord*, *illusions* by its effect on the *sensorium*, and *delirium* by its action on the *cerebral hemispheres*, I will give a case by Sir George Baker, on the authority of Heberden.

“A young man was in the morning shut up in a close room, with burning charcoal, till two small birds fell down dead in their cages, and till he was so ill as to be obliged to go into the air; which he had no sooner done, than he fell down senseless. When he came to himself, he complained of giddiness, sickness, a pain of his stomach and loins, and of a stupor; all which continued the whole day. The next day he thought himself better; but about seven in the evening, he was seized with a very violent pain of his stomach and loins: he vomited, threw himself down upon the ground, fell into convulsions, and could hardly fetch his breath. Soon after that he had a little recovered himself, he had a second fit of the same sort. About an hour afterwards he became delirious, and the assistants could not, without great difficulty, keep him in his bed during the whole night. In the morning

he came to himself, and had some quiet sleep; but the pain was not quite gone, and the patient continued to complain of giddiness, and of *strange sights before his eyes*, for some little time longer."

In the paper by Sir George Baker, from which this case is taken, there is so curious and instructive a history of similar effects on the nervous system, brought about in a number of young persons by breathing the impure air of an overcrowded bedroom, that I can scarcely resist the temptation of presenting it at once in a condensed form. But as the mental disorder is spoken of not as *delirium* only, but distinctly as *Insanity*, I reserve it for another place.

But it is not poisons only that occasion illusions, Large doses of medicines not usually deemed poisonous may produce the same effect. Sir Benjamin Brodie, in his "Psychological Inquiries," tells us of an acquaintance who swallowed by mistake nearly a wineglassful of tincture of quinine. This occasioned some very disagreeable head symptoms, which passed off in twenty-four hours; then deafness, lasting several days; then, for some considerable time, groups of heads and faces with old-fashioned wigs, which came and went in obedience to the will.

I have not yet exhausted the subject of Illusions. I have given examples of compound illusions of sight and hearing—of unreal persons holding unreal conversations—but I have not adduced any instance of spectral figures paying a succession of visits, and holding a series of conversations bound together, so to speak, by one

central idea, and furnishing the elements of a consistent narrative or story. Such a series of illusions occurred in the person of the well-known English painter, Mr. H——, and was communicated to the editor of "All the Year Round," the 5th October, 1851, in correction of a less accurate and complete version previously published in the same journal without his knowledge or sanction. On three occasions Mr. H—— sees and converses with a young lady whose person, actions, and conversation he describes. The first time she got into a railway-carriage in which he sat alone, and left the train after talking with him for three-quarters of an hour; the second, on the same day, as he sat at dinner with the master and mistress of the house for which he was bound; the third, in his own studio in town. There were circumstances connected with these visits which would have convinced most persons that they were subjects of illusion; but the testimony of the manservant, as well as of the master and mistress of the house at which the small dinner-party took place, was conclusive, even if the fact that there was no railway-train which could have brought the lady to the house in time for dinner had not supplied all the proof that could be required. These three appearances were strung together by the one object the lady said she had at heart—the procuring of a portrait of herself, upon which "much depended," and towards the painting of which she furnished Mr. H——, on her visit to his studio, with a likeness.

This likeness, as unreal as the lady who supplied it,

became the connecting link between this series of illusions and what it is not possible to regard in any other light than as a second series, in which the father and sister of the first apparition play their part, though in their case we are not supplied with the same means of discrimination. Mr. H—— is again on a railway journey, misses his train, and is compelled to put up at an inn, where, being much in want of occupation, he bethinks himself of an acquaintance whose name, being *Lynte*, he takes to be *Lute*. On inquiry of the waiter, he learns that a gentleman of that name lives in the town, to whom Mr. H—— addresses a letter. Mr. Lute soon makes his appearance, and proves to be a stranger; but he is glad to see Mr. H——, whom he forthwith conducts to his house that he may take a portrait of a deceased daughter. Arrived there, he introduces him to a younger sister of the deceased, and, pleading indisposition, retires for the night. The daughter tells him, in the course of conversation, that her father has become insane through grief at his loss, and that he has an earnest wish to possess a portrait of his deceased daughter. Mr. H—— does his best to satisfy this wish; but, having only the sister's description to guide him, fails, till at length he is told of a good likeness which had been mysteriously abstracted from her album. This portrait turns out to be the one which the mysterious visitor had given him. Mr. H—— has it in his pocket-book, and, using it as his guide, succeeds in painting a portrait from it which satisfies the father and restores him to his right mind.

Mr. H—— learns from Mr. Lute that he had seen his deceased daughter in the railway-carriage, at the dinner-party, and in his studio; that he recognises him as her companion on these occasions; and that these visions gave rise to his most violent ravings.

This strange story, as told by Mr. H——, has an air of reality imparted to it by his own perfect faith in the visions, though they had no other place or source but in his own brain, which first created the illusions and then knitted them together into one waking dream. The production of the spectral likeness to the sister of the spectre who gave it him serves, as I have said, to combine into one whole two series of illusions remarkable for the continuity of the narrative which connects them.

I may add that I know the sister of Mr. H——, who tells me that this story is in all points consistent with the account her brother was in the habit of giving to his family and friends.

Mr. H——, I may add, corrected for press the story as it appeared in "All the Year Round," and gave to the editor his real name and address. It is certainly authentic; and if we may assume the first railway journey and the small dinner-party that followed it to have really occurred, the remainder of the story may be taken as the most remarkable account of a connected series of illusions which we possess. It is such a story as a spiritualist (for such Mr. H—— was known to be) might build up out of his own illusions; and it will assist us in tracing to their true source many a strange

belief and many a religion and religious sect. If we may not assume the first railway journey and dinner-party to have really happened, but the whole narrative must be taken as a waking dream of which illusions form a part, we are still left in possession of a most remarkable illustration of the unrealities of which the human brain may be the source and scene.

Unless I am greatly mistaken, I find in Frederick Martin's "Life of John Clare" an instance of a continuous illusion scarcely less remarkable. Clare is on a visit to a country house, and, while wandering along the bank of an artificial lake, is joined by a young lady of extraordinary beauty, who is represented to him as the governess. She commends his poetry, repeats some of his verses, and makes him feel "her glances burning into his very soul." He encounters her again in the housekeeper's room, where he found "a pair of burning eyes fixed upon him;" and still again as he was walking slowly up the road leading from the house, "suddenly a white figure started up on his path." They converse, their eyes meeting "full of unspeakable passion;" but, being startled by a horseman coming up the road, the phantom (for such the whole story proves it to have been) "turned a last fond look upon the poet, and fled away into a neighbouring wood."

We read elsewhere in this interesting biography, of the poet's brain haunted by "fantastic visions from events of his past life;" of his seeing figures moving on the ceiling; of his seeing and conversing with his "Mary," the idealized object of his first attachment, many years

after her death; of his being consigned to a private asylum, from which he effects a most extraordinary escape to his distant home; and of being at length sent to the asylum at Northampton, where he remains twenty years, haunted by illusions, a poet to the last.

Some cases of Insanity certainly set in with a connected series of illusions, constituting a waking dream. Such was the patient whose case is given by Prichard, on the authority of Dr. Arnould of Camberwell. He was an active, healthy man, thirty-five years of age, who, after a short indisposition, attended with fever and headache, and a change in his habits of life, encounters one afternoon in May, in St. Paul's Church Yard, a grave-looking elderly gentleman dressed in dark brown clothes, who invites him to dine at a neighbouring tavern, and after dinner conducts him to the Ball of St. Paul's. As he is admiring the view, the old gentleman places a mystical mirror in the centre of the dome, and offers to show him any person at a distance. He selects his own father, who presents himself accordingly. By means of this mirror the old gentleman can see all that is going on in this world, and he also possesses a mystical bell which receives all manner of sounds in the dark of the night; and he bids his companion, as he takes leave of him, to remember that he is "the slave of the man of the mirror," who lives in the Ball of St. Paul's, and reads all his thoughts and inspects all his actions. He practices his spells by hieroglyphics on walls and houses, and so tyrannizes over those whom he has enchanted, the objects of his spite. These hieroglyphics mark the limits

of his power, and the rest of the world, in their ignorance, take them for the words "*Day and Martin and Warren's blacking.*" This strange series of illusions wrought into the texture of a waking dream, constitutes an attack of insanity which lasts two years, and then gradually disappears.

There is one class of Illusions, of very special interest as bearing on my subject, which I must on no account omit to mention. I shall venture to call them *Illusive Transformations*. They are rare in persons of sound mind, but very common in the insane—in maniacs of the order of Don Quixote. Things actually seen are subject to change of form, sounds actually heard to change of character, and so of the other senses. Procopius and Plutarch are cited as furnishing us with two examples, both due to the reproaches of conscience. King Theodoric, repenting of having put to death the virtuous senator Lymmachus, and grieving over his loss, sees the head of his victim in the head of a fish; and Bessus, rising from a feast with his guests around him, destroys a nest of swallows that dared reproach him with the death of his father. Coleridge seems to have had personal experience of these illusions; for he says: "When we are broad awake, if we are in anxious expectation, how often will not the most confused sounds of nature be heard by us as articulate sounds. For instance, the bubbling of a brook will appear for a moment the voice of a friend, for whom we are waiting, calling out our own names." Crichton, too, in his work on "Mental Derangement," quoting Bonnet, tells us of a

gentleman suffering from over-study, before whose eyes the paper in his room changed to a number of fine landscapes, and then landscapes, paper, and furniture, would all disappear, leaving bare walls. And Hibbert quotes from *Nicholson's Journal* a case of similar transformations of such objects as curtains and clothes; and we read of phantoms of the same order seen by Sir Walter Scott and others. There is also a case of an entire ship's crew mistaking a part of a maintop floating in the sea, and bobbing up and down in a peculiar manner, for their lame and hobbling messmate, the ship's cook, whom they had consigned to the deep a few days before. But this last case must be regarded rather as a real object rightly perceived, but misunderstood, than as an illusion properly so called.

Now these transformations, as I have just stated, are very common with the Insane; and especially so, as it would seem, in cases of Mania characterized by some predominant emotion or passion, as pride, vanity, or religious exaltation; and Don Quixote, possessed by the spirit of chivalry, is very consistently portrayed as eminently subject to them. Numerous illustrations are to be found in every treatise on Insanity. Thus, Pinel's disappointed lover sees in every female visitor to the Asylum the object of his attachment; John Clare not only sees his first love many years after her death, but transforms his wife, the mother of several children, into his "Mary," and continues to address her in tones appropriate to the transformation; a bereaved mother lovingly nurses a lump of wood dressed in rags as if it

were her dead child ; an industrious woman busily spins sunbeams into threads ; an irascible homicidal maniac accuses the ducks in a pond of calling him names ; a religious maniac interprets the falling footsteps of his keeper, whom he worships as the Deity, into a command to strike him.

A very curious and eminently instructive case of this class is recorded by Marc. An aged man, melancholy from reverse of fortune, who had not spoken a word for many years, had for his only occupation smelling and licking the walls of his room and the sill of his door. This he would do for hours together ; and though often asked for an explanation of so strange a procedure, would give no answer. But one day, Marc, pretending not to notice him, asked the attendant how all these dirty spots had come upon the wall. To his surprise, the old man broke through his long silence, and said, "Do you call those dirty spots and excavations ; do you not see that they are oranges from Japan ? What delicious fruit they are ; what a colour ; what a perfume ; what an excellent flavour they have !" and he continued to smell and lick them with increased eagerness. Thus the man whom Marc had pitied as the most unfortunate of mankind was really one of the happiest, provided with a perpetual treat to the senses of sight, smell, and taste. The long stubborn silence of the man, the impossibility of rightly interpreting his strange proceedings, and the explanation which the case probably affords of some of the most offensive and disgusting acts of the Insane, renders this case peculiarly instructive.

I will add one case from my own experience. I was watching an amiable and gentle lady whom I knew well, who had just fallen into an attack of mania. She was eager to make her escape from her bedroom which overlooked a London square; and more than once, as she looked out of window, she spoke with delight of a handsome Deodara and a stream of water crossed by a bridge. She had transferred the principal ornaments of her country residence to the dingy London square, and saw them among its trees and railings.

I shall give some further examples of these strange Illusive Transformations, as constituent parts of a case of religious mania which I shall employ as a summary illustration of the principles previously established and set forth.

There is still to be noticed a phenomenon connected with sensation, and of the nature of illusion, to which I can give no appropriate name; but must content myself with a single illustrative case on the authority of Dr. Conolly. An old French officer, after the first abdication of Napoleon, turning one morning towards the Place Vendôme, failed to see the column erected there to commemorate the glory of the French arms. Greatly astonished at its disappearance, he looked for it very attentively, but still in vain. He concluded that it had been destroyed by the enemies of the Government; and straightway posted himself on the Pont Louis Seize, to defend it against the quiet citizens whom he took for insurgents. May not this "prevention of true sensation," as Conolly calls it, be common in the insane, and

extend to the faculties of the mind as well as to the senses?

I shall now (in accordance with my programme), turn my attention to Delusions of the mind, and then proceed to treat of the phenomena of dreaming and delirium, and to certain other factors or constituents of the Unsound Mind.

Meanwhile I shall make a practical application to the important subject of *Criminal Responsibility* of the inferences I have thought myself justified in drawing from the facts contained in this section. By means of these Illusions of the Senses we are able to realise, in a degree which no other factor of the Unsound Mind allows of, the brain's involuntary creative power. Placed, like a tangled mass of cells and fibres, between the organs of sense on the one side, and the organs of motion on the other, in each of which we recognise three distinct parts with inverted functions (organ of sense, transmitting nerve, brain—brain, transmitting nerve, muscle), this centre of intelligence and volition originates, on the one hand, unconscious convulsive movements of the muscles, on the other, involuntary and unreal illusions of the senses. But while these convulsive movements imply muscles to execute them, these unreal sensations do not always demand an organ of sense on which to reflect them. Strange and marvellous then as are those many departures from healthy normal muscular action which display themselves in the several varieties of convulsive movement, how much more wonderful are these brain-created sensations—these illusions and

illusive transformations! The facts yet to be brought forward will, I think, serve to prove to demonstration that, in the domain of mind and thought, the brain can and does substitute the involuntary, the irrational, and the unreal, for the voluntary, the reasonable, and the true; and emotions and passions intractable, unaccountable, irresistible, for those which, guided by prudence, restrained by humanity, and controlled by conscience, are the safe motor powers of our existence.

SECTION II.—DELUSIONS.

THE space which I have devoted to Illusions and Illusive Transformations will not, I trust, be deemed out of proportion to their importance; for the subject assuredly vindicates its right to respectful consideration and full discussion by the prominent part which Illusions play as factors, elements, constituents, of the Unsound Mind. Nor, unless I am greatly mistaken, does any element or constituent of Insanity afford so many important inferences applicable to the question of Criminal Responsibility.

Delusions may be said to be to the mind what Illusions are to the senses; and they enter so largely as factors into certain forms of unsoundness as to have originated and justified the term *Delusional Insanity*.

When I say that Delusions are to the mind what Illusions are to the senses, I must be understood to mean that a delusive thought is to the full as unreal as an illusive sensation; and that the word *delusion* should be as strictly limited to ideas as *illusion* to sensations. This being admitted, we must proceed to inquire whether any—and, if any, what—further limitation is necessary in order to guard against every possible misuse of terms.

In speaking of *Illusions*, I shut out every voluntary

act of the mind by which unreal sensations might be transferred to the organs of sense ; and I disallowed, as an obvious abuse of terms, all real sensations (such as gigantic cloud pictures) subject for a time to the misinterpretations of ignorant or uninformed minds. So also with *Delusions* ;—I would exclude, as things to which the term is inapplicable, every voluntary creation of the Imagination, however monstrous and grotesque, and every false inference from real data which can be traced to ignorance, want of education, or even defective mental organisation : and as I defined an Illusion as being *an involuntary sensation without corresponding external object*, so would I define a Delusion as *an involuntary thought, idea, or belief, without data or premisses*. Let us test these parallel definitions by parallel cases. One man thinks that he sees the figure of the Saviour surrounded by a halo of glory. Another man affirms, and, in some sense, believes, that he is the Christ. The thought is at least as real as the vision ; the vision as the thought : but data, or premisses, are as wanting to the one as a real object is to the other. As in the case of such an *illusion of the sense*, it is not, as I contended, necessary to suppose the Imagination to be in any way concerned in its production, so, in the case of the parallel *delusion of the mind*, I now contend that it is equally unnecessary to ascribe *it* to the Fancy as its cause. On the other hand, I deem it equally unnecessary to implicate Reason in the transaction. If there could be any data or premisses upon which to build up the assumption, or assertion, on the part of any human

being that he is the Christ, then it is conceivable that the Reason might be called in to complete the unstable edifice. And this is true, without exception, of every case of mistaken, or double personality. Take the extreme case of a *woman* affirming, and, in some sense believing, that she is the Christ: what ground have we for attributing the thought to the Imagination, as conceiving it, or to the Reason, as inferring it? In my judgment, none whatever.

But the parallelism of illusive sensations and delusive thoughts may be traced still further. In treating of illusions, I showed that they were not all of the same order—that there was one well-defined group in which the illusion presented itself to a person harassed by grief or anxiety, and consisted of the “counterfeit presentment” of the very object of the emotion; and another equally distinct group in which no connection could be traced between the state of mind and feeling on the one hand and the illusion on the other. Now, precisely the same distinction may be traced in the delusions of the mind. There are some which may be recognised at once as the simple and direct expressions of some predominant emotion or passion, others of which the parentage cannot be traced out. Take as an illustration of the first class the simple case of the Jesuit Sgambari. He claims to be a cardinal, and insists on being addressed as *eminence*. His *ambition* has conferred the title upon him. Take, again, as a probable instance of the second class, Sir George Mackenzie’s “discreet person, who could converse most pertinently in every-

thing, till they spoke of the Moon; but, upon hearing that named, fell instantly a-staring, and into great extravagancies, believing himself to be Secretary to the Moon." Of more complex examples I shall have something to say presently, when I attempt an analysis of the several kinds of delusion. Meanwhile, I must make a further use of these two cases, as, in my judgment, affording good illustrations of the utter absence of data or premisses, as an element in the definition of a delusion. Of the discreet and otherwise reasonable gentleman who thought himself Secretary to the Moon, suffice it to say that it is simply incredible that his delusion was drawn by any chain of reasoning from any datum or premiss whatever. And, as to the acute and astute Sgambari, it is well worthy of remark that, after listening patiently to the remonstrances of the friend who wished to convince him of his error, he does not justify himself by bringing forward any sort of data or premisses and reasoning upon them, but, using his still intact reasoning faculty in a way with which we are all of us but too familiar both within and without the walls of lunatic asylums, he places his friend very quietly on the horns of a dilemma, and leaves him there:—"Either you consider me insane or rational; on the latter supposition, you do me injustice by your remonstrances; on the former, I hardly know which is most mad, I for believing myself a cardinal, or you for thinking to cure a madman by such reasonings."

Exception may perhaps be taken to the definition of a Delusion which I have just put forward, on the ground that if there be some delusions for which no

possible data or premisses can be even imagined, there are others which, having originated in real bodily disease, or prolonged bodily discomfort, that disease, or that discomfort, has of itself furnished data for the unsound mental faculties to work upon. One woman, with hydatids in the womb, thinks herself pregnant by the devil; and two others, with intestinal adhesions after peritonitis, imagine, the one that her abdomen is a barrack in which a whole regiment of soldiers fight and struggle; the other that it is a place of meeting for Apostles and Evangelists, Patriarchs and the Pope. Or, to turn to the other sex, one dyspeptic says that he has a Caffre in his stomach, another that he has men on horseback there, a third (most wonderful to relate) ignores his sex, and alleges that he is pregnant, and a fourth, Peter Jurieu, an eminent theologian and Apocalyptic Commentator) attributes his frequent attacks of colic to the fighting of seven knights shut up in his bowels.

There is another class of Delusions bearing a close analogy to these, inasmuch as they originate in a loss of sensation, more or less extensive, and more or less complete. Such was the delusion of the woman, mentioned by Esquirol, who, suffering from complete insensibility of the skin, believed that the devil had carried away her body; and of the soldier who, having the same anæsthesia, following upon severe wounds received at Austerlitz, thought that he had been dead ever since the battle, and always spoke of himself as *it*. When the insensibility is limited to one side of

the body, the patient imagines another person, or perhaps a corpse, lying beside him. Changes of sensibility not easy to describe, are probably related in the same way to delusions of weight, lightness, and largeness; to the notion of being too heavy to stand upright, too large to pass through a door; that the whole body, or parts of it, as the head or limbs, are made of wood, glass, straw, wax, butter; or that they are petrified; that the body is without a head, or the trunk without limbs.

This insensibility has been found to exist in persons who have displayed strong homicidal propensities, as was the case with the man who thought himself transformed into a wolf, and attacked and killed those whom he encountered; and with the boy, who having previously conducted himself perfectly well, all at once exhibited the worst desires, and most reprehensible conduct. This state was intermittent, and in the intervals the patient was quite orderly and obedient. When the anæsthesia returned, the bad passions, even a desire to commit murder, returned with it. These cases are quoted by Griesinger, the first from Wier, the second from Renaudin.

Now would it be correct to say of these cases, and of hundreds of others scarcely less preposterous, that the painful or uneasy sensations of the one group, or the insensibility, blunted, or perverted sensations of the other, have supplied the data or premisses from which Reason, diseased and distorted, deduced the delusions as inferences? Is it not much more probable that the painful or uneasy sensation, like the hair or thread

that promotes the deposit of crystals, has simply determined the point to which a delusion shall attach itself, the delusion being, as in the cases already adduced in illustration, neither the work of fancy nor of reason, but the involuntary product of a brain disordered or disorganized. The fact that, in very many of these cases, both the Imagination and the Reason, when not directly concerned with the delusive thought, display their normal power, and act in accordance with the rules of moderation and of logic, may, I think, be adduced in support of this view. And, if there are any cases hard to explain upon this theory, they may perhaps be found to admit of ready explanation when we come to consider some of the phenomena of dreaming.

If I am asked how I reconcile the statement that delusions are direct results or products of some mysterious action of the brain, and in no sense the offspring of imagination or reason, with the fact that the victim of a delusion can write reasonable poetry, and argue logically and acutely on all matters beyond the sphere of his delusion, and even defend and explain the delusion itself by arguments not wanting in plausibility or force, I answer, just in the same way, and no other, that the seer of unreal sights and hearer of unreal sounds sees and hears, outside the circle of his illusions, what other men see and hear. The mind in the one case, the senses in the other, are the subject of a partial possession which paralyzes the will within a defined and narrow limit.

I am well aware that what may be said of one victim of delusion cannot be said of another. Quiet Queen

Betty, with her broad, good-humoured face, as she appears among Sir Alexander Morison's graphic illustrations, is an amiable and industrious maid of all work ; but the lady about whom I was consulted, who imparts to her favourite sister, and to no one else, the secret that she is Queen of England, resents the intrusion of a stranger, and draws herself up to her full height, every inch a queen. That handsome man with a dark beard, who is hard at work making shoes, greets every visitor to the asylum with the assertion that he cannot take his hat off. But as soon as the act is done, the Holy Ghost (for such the poor man believes himself to be) turns briskly to his work again, satisfied with that recognition of his high office. Locke, therefore, presented us with only one side of the case when he spoke of "a distracted man fancying himself a king," and, "with a right inference," requiring "suitable attendance, respect, and obedience ;" and of persons who think themselves made of glass using "the caution necessary to preserve such brittle bodies." Locke overlooked the fact that there is a consistent and an inconsistent madness.

And now I will make the attempt to classify delusions in accordance with their essential characters and (if I may use the term) proximate causes. Their causes (predisposing and exciting) are as numerous as are those of the Delusional Insanity to which they have given a name. All experienced and thoughtful men will, I think, recognise these groups or classes of Delusion.

1. Illusions converted into *delusions* by a belief in their reality.

2. Delusions due to sudden shock.

3. Delusions traceable to visceral disease, or painful and wearisome bodily sensations.

4. Delusions which express, in an exaggerated and distorted form, the workings of some excited emotion or passion.

5. Delusions which express, in a form equally distorted and exaggerated, the painful sense of disappointment and injury.

6. Delusions which, like one large class of Illusions, like convulsions and epileptic fits, like the bodily effects and outward signs of emotion, are the direct result of disordered cerebral circulation, or diseased brain-tissue.

I shall offer a few remarks on each of these groups or classes.

Of the first class—*Illusions converted into Delusions by a belief in their reality*—we have at least three good illustrations in men whose malady consisted wholly, or chiefly, in the belief that they were assisting (to use a French expression) at theatrical entertainments. Horace has immortalised the gentleman of Argos so exemplary in all his domestic and social relations—

“Qui se credebat miros audire tragædos,
In vacuo lætus sessor plausorque theatro;”

disenchanted by Hellebore, but accusing his friends, who had spared neither trouble nor expense in his cure, of having robbed him by force of his “*mentis gratissimus error*.” A former President of the College of Physicians

(Sir Henry Halford), in one of his classical essays, gives us a counterpart of this case which occurred in a person of "exalted rank," whom he saw in his fancied theatre, and heard "call upon Mr. Garrick to exert himself in the performance of 'Hamlet.'" In this case, as in the estimable subject of Horace's sketch, this mixed illusion of eye and ear, looked upon as real, constituted the whole of his then unsoundness. The third instance of this kind rests upon ancient but good authority—that of Aristotle.

Of *Delusions due to sudden shock* many interesting examples are on record—such as the case of the Norwegian peasant who, seeing his bride and the bridal party upset in a boat and drowned, sat ever after on a stool at the door of his hut in the attitude of rowing, and warning the passers-by that the water was deep; and the case of the gardener who, when in his twenty-second year, was frightened at a masked ball, by a person dressed like a bear, became insane, and for fifty-two years did not speak a word, but, with growls and to-and-fro movements, imitated the creature whose counterfeit had given him the fright. As a third illustration, take the more acute case of the young woman who, seeing her home on fire, became furious, believed herself on fire, kept incessantly crying fire, fire! for the space of four weeks, when she died; or that prisoner at Millbank, who exhausted himself and wearied all the attendants by repeating, without interval or pause, in a loud, harsh, monotonous tone, the Lord's prayer.

In this class of cases the delusions are remarkable, not only for their direct relation to the shock by which they

were produced, but for the imitative movements to which they give rise.

Of the third class of Delusions, *or those traceable to visceral disease, or painful and wearisome bodily sensations*, I have already given more than one illustration; as also of analogous Delusions, due to local anæsthesias, more or less extensive, and more or less complete.

With the Delusions *which express, in an exaggerated and distorted form, the workings of some excited emotion or passion*, no one who has any experience among the insane can fail to be familiar, and there are none more remarkable for extravagance and inconsistency. A patient of my own, who claimed to be the Deity, and the Saviour, King of England, and Heir Apparent, to have made the human body, and to know everything, was but a common specimen of a very common class, remarkable, among other things, for identifying themselves with the persons and acts that have at any time strongly attracted their attention, or fired their imagination. Pride, vanity, ambition, seem to exhaust themselves in creating imaginary personages, fanciful literary performances, masterpieces of art, prodigies of strength, without the slightest regard to consistency or probability. In what sense they *believe* these extraordinary assertions it is hard to say. But they certainly appear very much in earnest in making them.

The tendency which these patients have to identify themselves with persons or acts that have strongly attracted their attention, is shared with the subjects of the next class of Delusions, *which express, in a form*

equally distorted and exaggerated, the painful sense of disappointment and injury. Griesinger mentions the case of a man who became insane because he was forced to be a butcher, when he wished to be a priest ; but we are not told of the form which his insanity assumed. The case of M'Naughten is much more complete. We know that the refusal of his father to take him into partnership originated in his mind a sense of hardship and injury ; and this feeling, ever present to his mind, led him to identify himself with every body of men whom the press accused of tyranny and oppression. The Roman Catholics, the Police, and the Tories, being successively denounced as guilty of such acts, were converted in their turn into personal enemies. Unhappily, the Tories made the most lasting impression on his mind ; and the murder of Mr. Drummond, by mistake for Sir Robert Peel, the then head of the Tory party, the promoter of Catholic emancipation, and the originator of an efficient police, was the bloody climax of his brooding discontent.

Into the sixth and last group of Delusions, or those which I have ventured to attribute to disordered cerebral circulation or diseased brain-tissue, I would throw all those cases in which it is not possible to trace the antecedent working of excited emotions or passions, mental shocks or disappointments, local pains and discomforts, or local anæsthesias. In this class I should place, with some confidence, the gentleman who thought himself Secretary to the Moon, the woman, known to Trallian, who continually held up her middle finger, with a supposition that she supported the whole world by it, and

was in fear lest, if she bent her finger, the universe should fall into confusion; also the case of the man who feared to void his urine, lest, by so doing, he should drown the town. A man who thinks himself a lantern, or the Crystal Palace, a dog, or a wolf, ought, I think, to find a place in this group. At any rate, I cannot doubt that there is a large class of delusions for which it is not possible to assign any other cause than a direct action of the brain itself—delusions as independent of data or premisses, of imagination or reason, as a certain class of Illusions have been shown to be.

I have now arrived at the first resting-place in the progressive or cumulative survey which I proposed to make of the factors or constituents of the Unsound Mind. I began by showing that there was at least one considerable group of Illusions which could not possibly be traced to any action of the Imagination or Fancy; and I now believe myself justified in affirming that there is, in like manner, a very large group of Delusions, in the origination of which neither Imagination nor Reason, however fantastic the one, or perverted the other, bears any part. I believe that there are Illusions of the Senses and Delusions of the Mind which are to the full as involuntary, and as certainly due to the direct action of the brain itself as the outward manifestations of emotion, the grotesque movements of Chorea, or the aimless convulsions of Epilepsy. The application of these inferences to the question of Criminal Responsibility will become obvious as we proceed with our inquiry.

SECTION III.—DREAMS.

I NOW invite your attention to that instructive combination of Illusions and Delusions which has, by universal consent, been looked upon as the *analogue* of Insanity—*Dreaming*. In the condition of sleep, nature presents us with one of those happy opportunities for study which we so often desire but so rarely obtain, and which, by so large an outlay of thoughtful and ingenious contrivance, we prepare for ourselves in the investigation of Truth by the method of experiment. If no such state as that of sleep existed naturally, we should earnestly desire to bring it about, that we might know how the mind would work when no longer disturbed by the intrusive images of sense, by the thoughts which such images provoke, or by the voluntary acts to which they give rise. In sleep, this work of elimination is done to our hands; and there remain, as the only disturbers of the mind, the sensations of the body itself, and as altogether exceptional occurrences, though most instructive ones, such sounds, sights, and sensations generally, as have force enough to break through the barriers which sleep has raised.

The subject of Dreaming, considered as an *analogue* of Insanity, was treated, with his usual care and dis-

crimination, by Abercrombie, and is also carefully considered by Griesinger. I propose to treat it briefly under two heads or divisions—namely, dreams not traceable to any bodily sensation, and dreams that spring out of bodily sensations.

1. Of the first class of dreams, or those which cannot be traced to any bodily sensation, it is probable that we should be able to discover several varieties by a close observation of what happens to ourselves or others. There would be dreams of the past suggested by a renewal of its conditions (as when a hospital patient of Dr. Duncan, talking in her sleep, makes distinct allusions to the cases of patients who had been inmates of the ward two years before); there would be other cases in which anxiety arising out of a transaction long past, and thorough preoccupation of the waking mind, gives rise to a dream, in which the particulars of the transaction, scarcely noticed at the time, and quite forgotten, are reproduced with strange minuteness and fidelity (as in the case of the banker's clerk who, after the lapse of nine months from the payment to a particular person of the sum of six pounds, dreams of the transaction which he strove in vain to recollect, and has brought before him the impatient, noisy, stammering customer whom he had been requested to serve out of his turn, and to whom he found on examination that he had paid the money), and there would be still other cases differing somewhat from this last, in which memory baffled during the day shows herself, in a sort of masquerade-dress, in the dream of the night (as happened to a young lady, a

zealous botanist, who found a plant which she knew, but could not recall its name ; but at night dreamed of being at a party, and being introduced to a Mrs. Hypnum—the plant being a Hypnum).

If our knowledge of the class of dreams which we are now considering were more complete, we should, I think, recognise some other groups ; but the largest and most instructive would probably consist of dreams which have for their immediate antecedents some strong emotion, such as anxiety or grief, or some powerful impression, or some train of thought present to the waking mind as a consequence of intense application or prolonged study. Of dreams of this class it is well worth remarking that they are very far indeed from being mere continuations or reproductions of trains of waking thought : indeed they are so different, and even opposite, in character that they might, without any great stretch of imagination, be thought to be to the mind what complementary colours are to the eye. Thus Griesinger, after stating that “agreeable, ravishing, heavenly dreams are very rare in health,” but “most frequent in states of deep bodily or mental exhaustion,” goes on to say that “to the individual who is distressed by bodily and mental troubles, the dream realizes what reality has refused—happiness and fortune. The starving Trenck, during his imprisonment, often dreamed of rich repasts ; the beggar dreams that he is wealthy, the person who has lost by death some dear friend, fondly dreams of the most intimate and lasting reunion.” I may add, as my own recollection of tales of imprisonment and ship-

wreck, that the captive is refreshed by dreams of happy freedom, and the sailor, exhausted by watchings and privations, by welcome visions of home, and enchanting views of fairyland. And this strange unreality of dreams is observable also in the most distressing of all cases. It is not uncommon for men and women, at the close of vicious and reprobate lives, to have ravishing dreams of the Paradise which we dare not hope that they have not forfeited.

Medical men, in their attendance on the sick, have many opportunities of observing how dreams are made—of what materials they consist. I have already, in my first section, given a striking illustration of the way in which Illusions are fabricated. Let me add, in this place, also from my own experience, a case showing how some dreams originate. I was attending a patient in a very obstinate attack of colic, in which, for some days, neither medicines nor mechanical appliances were of any avail. But I was nevertheless able to hold out to my patient good hopes of recovery. It was the height of our Railway Mania, and my patient had fallen asleep, under the influence of opium, when he dreamt that I was an engineer to a railway in which he was interested, and that I had assured him that there were no engineering difficulties which might not be readily overcome. This dream of one sleeping patient finds something of a parallel in another, a waking speculative madman, who, when railroads, the Oregon dispute, and the China war were dividing public attention, wanted to establish a company to run a railroad from Oregon to China.

The second class of Dreams, or that in which the dream springs out of some bodily sensation, has some points of special interest: and it will be found to consist of two sub-classes. In the one, the sensation, whether internal or external, is continuous and often trivial; in the other it is sudden and sharp, and in the nature of a shock.

To the first group belong such sensations as attend a constrained posture, pressure on the neck, chest, or arms; drafts of air; burning feet; itching skin; oppressed stomach, loaded bowels, full bladder: to the second group sudden loud noises, such as those produced by the fall of articles of furniture.

The sensations belonging to the first group are sometimes woven into the texture of the dream, as when the desire to evacuate the rectum or bladder conjures up the thought of unsuitable times or places; or when excitement of the genital organs is followed by its appropriate accompaniments. But, in the greater number of cases, the sensation does not take so defined a part in the dream which it originates. The loaded stomach is converted into a hideous personality, from whose heavy pressure there is no escape: a blister applied to the head originates a dream of being scalped by savages: a bottle of hot water to the feet the ascent of the crater of Mount Etna: exposure to cold through the falling-off of the bed-clothes, a dreary winter spent at Hudson's Bay: or, if the dreamer happens to be a member of our own profession, he may find, when he wakes, that colic pains have been the real source

of his strange fancy that his abdomen was opened, and a preparation made of his sympathetic nerve.

The sensations belonging to the second group—sudden loud noises—have served to reveal to us the wonderful quickness of the mind's operations. They have taught us, what would have been otherwise simply incredible, that between a shock which rouses a sleeper and the waking,—into that short interval of time,—the incidents of a dream which extends over hours, days, or even months, may be compressed. Abercrombie's work is rich in illustrations of this curious fact. He gives us the case of a gentleman who dreamt that he had enlisted as a soldier, joined his regiment, deserted, been apprehended, carried back, tried, condemned to be shot, and, at last, led out for execution. After all the usual preparations, a gun was fired; he awoke with the report, and found that a noise in an adjoining room had both caused the dream and awaked him. The same author gives a still more curious instance of a dream originating in a like cause; and, strange to say, shared by a husband and wife. It occurred at Edinburgh, at a time when there was an alarm of a French invasion. The landing of the enemy was to be announced by the firing of a gun, which was to be the signal for a series of prescribed precautionary measures. The gentleman, who was a zealous volunteer, dreamt that he heard the gun fired, and witnessed and took part in the proceedings which were to follow. His wife, who had a similar dream, attended with much noise, and the landing of the enemy, and concluding with the death of a particular

friend of her husband's, who had served with him as a volunteer during the late war, awoke in a fright, and roused her husband from sleep. The next morning it was found that the dreams had been occasioned by the fall of a pair of tongs.

In one instance which has come to my knowledge, a blow on the head may be said to have given rise to a dream bearing some resemblance to those which I have just described. One of my oldest friends, in charge of an asylum, was struck on the head by a stone enclosed in the fold of a handkerchief. The assailant was a madman who rushed upon him from the distance of a few yards as he knelt at prayers in the chapel. My friend was struck down insensible; and, on coming to himself, felt the blood trickling down his forehead, and remembered dreaming that his assailant advanced towards him from a very long distance, during a very considerable period of time.

A few years since, a very remarkable trial took place at Cambridge, and the case was much talked about when I happened to be in that neighbourhood. James Williams, a small farmer and hay-factor, had sold hay at Cambridge and received money. As he returned home (it is believed quite sober) a man is taken up into his cart—this appears from the evidence of several witnesses—but the cart and horse, with the owner fearfully wounded about the head, and the skull fractured, are found standing at the door of his house. He recovers from his injuries very slowly, and when well enough to be asked to identify his assailant, he

is unable to do so, but alleges that ever since he came to his senses, he has had before his eyes day and night, light and dark, a certain cap and waistcoat, which he can minutely describe. They are on the person of the man taken into the cart, and he identifies them without a moment's hesitation. He has no recollection of having had any one in the cart with him. The last part of his journey is a blank.

Much might still be said on this subject of dreams. I might show how, on the one hand, the thoughts of the waking state are carried on into sleep, and how, on the other, the dreams of the sleeper are not all at once dispersed at the moment of waking. I might also have said something of dreams that have been produced by whispering into the ear of a sleeping man; something too of talking in sleep, and of other voluntary acts falling short of what is commonly understood by Somnambulism. But I have said as much on the subject of Dreams as my purpose requires, or my space will allow. I have brought under your notice, in natural succession to what I have had occasion to say of Illusions and Delusions taken by themselves, and as they occur in the waking man, sane or insane, the two phenomena in combination, united under circumstances equally strange and instructive; with the outer world shut out on the one side, every voluntary act suspended on the other, and the faculties of the mind at work in strange independence of the interruptions, checks, and control of an active, busy, waking existence.

In this condition of sleep, as I have already stated,

all the best authorities have recognized an analogue of Insanity. Thus—to quote the two authors I have already named, Abercrombie and Griesinger — Abercrombie, speaking of a state in which the visions or impressions of the mind itself are believed to have a real and present existence in the external world, and in which reason fails to correct this belief by the actual relations of external things,” says, “there are two conditions in which this occurs in a striking manner,—Insanity and Dreaming. Considered as mental phenomena, they have a remarkable affinity to each other.” And Griesinger says that “the analogy of insanity to dreaming, especially to dreams occurring in the half-waking state, must be admitted;” and, speaking of Somnambulists as persons in whom “certain faculties are very active,” he says, “dreams set in actions may, if of short duration, be considered as somnambulism; if of longer continuance, as mental disorder.”

But we must look at this point a little more closely. In what particulars does this analogy of dreams and madness show itself?

In the first place, we have the testimony of those who have recovered from madness, that their whole malady was to them as a dream, pleasant or painful; and that, in like manner, when they were mad, their former healthy mental life wore also the aspect of a dream. Thus Griesinger, condensing a longer history from Jacobi, presents us with the retrospect of a profoundly melancholic patient who, looking upon his life “as one great crime,” says: “*This idea did not originate gradually, but entered,*

if I remember rightly, my mind all at once like a dream. Thus I explain my entire state;" and he finishes his retrospect with the words, "*I cannot better describe my state, towards the termination of the disease, than that of one who has awakened from a profound dream, and cannot immediately convince himself that it has been a dream.*"

Then again, we have such summaries of the memories of madmen as that quoted by Van Swieten from Helmont. It appears that "he examined those maniacal persons who retained the memory of what happened from the beginning of their raving;" and that they "confessed" that they were "first deprived of all the connection of discourse, and then continued profoundly bent upon one punctual notion, with grief, anguish, and importunity: but they employed their thoughts no otherwise than as if they had continually observed the conceived notion presented to them in a looking-glass. Nor did they know that they thus thought of the said object, or thus beheld their conceived notion; although their attention was so immoveably fixed upon it, that at last, if standing was the posture in which they began and went on with the influence of their delirium, they have stood in that posture for several days, without being tired or so much as knowing they were standing." This passage has a curious dreamy character about it, and seems to present, "as in a glass darkly," the puzzled intent condition of many a healthy dream.

Again, we learn something more of the analogy of dreaming and insanity by watching the first passing on into the second, the second subsiding into the first.

Thus, Griesinger tell us that in some cases "the subject of the future delirium is clearly exhibited in" dreams; while a case mentioned by Dr. Gregory proves that insanity may, so to speak, pass into dreaming. The maniac, for a week after his recovery, was harassed during sleep by the rapid and tumultuous thoughts, and violent passions, which had agitated him during his insanity.

If, following this subject into more detail, we first call to mind our own dreams, and then compare them with what we know of the mental aberrations of the insane, we shall see reason to admit the full force of the analogy. First of all, as a feature common to most dreams, and to madness throughout almost its whole course, there is that strange belief in the reality of what is presented to the senses or mind—that credulity which the two states seem to share with the ignorance of the child or of the savage, or with the forgotten past of a strong present emotion. It seems as if the ideas stored up by the memory, to serve as correctives to the thoughts and feelings of the passing moment, were locked up and shut out from use. Then, recognising afresh the distinction already drawn between dreams not traceable to any bodily sensation and dreams springing out of such sensations, we call to mind, as belonging to the one class, gorgeous architectural structures of rare distinctness of outline, and curious minuteness of detail; landscapes of surpassing loveliness; rapt audiences enchanted with our eloquence; doughty antagonists convinced by our reasoning; stalwart foes struck down by our strong

right arm. We are in that sort of dream which entertained Horace's "Gentleman of Argos," or Sir Henry Halford's patient of "exalted rank." Another group of dreams bears the stamp of grotesque impossibility. We cross wide rivers and broad lakes at a single bound, leap over lofty buildings, perform every sort of journey in the air without wings or mechanical appliances, or drive teams of spirited horses with reins a mile long. We are but enacting in sleep such deeds as waking madmen boast of performing. If now we turn to the second great class of dreams, or those that owe their origin to bodily sensations, we find some real pain, or uneasiness, either recognised and mixed up with attempts at relief in strange ways and places; or not recognised, and yet originating a dream of which discomfort and perplexity are the leading characters. And here we have the sleeping counterparts of the strange delusions of the hypochondriac, and of the equally strange interpretations of actual sensations invented by the Maniac. Of these last I shall give appropriate examples in due time. To the dreams which start into existence at the bidding of a sudden noise, and occupy the inappreciable interval between it and the waking from sleep, I am unable to find a parallel in the histories of the insane; but possibly some happy accident may supply us with a case in point.

The disorders of the mind which occur in the course of febrile attacks; of inflammatory diseases, especially of the viscera; and after accidents and injuries, and which are designated by the common term delirium;

and those other disorders of a more active kind which attend inflammation of the brain, and are known as frenzy, if closely studied and acutely analysed, would doubtless supply us with data applicable to the unsound mind more properly so called

SECTION IV.—SOMNAMBULISM.

IF it be true that Dreaming and Insanity are conditions nearly allied ; if, so to say, dreaming is a brief insanity in repose, and insanity a prolonged dream blended with more or less of waking activity, what shall we say of that strange state known as Somnambulism ? Sleep-walking in its most highly developed form is an "acted dream," which carries into effect some design previously formed in the waking state, or follows out some train of thought which had engrossed the attention ; or it transacts business and performs all the routine duties of some office or post with the utmost regularity and exactness.

A young French peasant has set his heart on gathering grapes in a vineyard at a distance from his house : he rises in the night and accomplishes his purpose. An apothecary leaves his bed, goes down to the shop, and weighs out medicine to supposed customers, with whom he converses. A man-servant, asleep on a bench in the kitchen, first talks, then walks about, then goes to the dining-room, arranges the table for dinner, and places himself behind a chair, plate in hand, waiting on his master. When he thinks that his master has dined, he clears the table, puts the food in a basket, and locks it in a cupboard. Then he warms a bed, locks up the

house, and retires to rest. A man known to Prichard is in the habit of attending a weekly market: he rises from bed, saddles his horse, and proceeds on his journey as far as a turnpike, and, finding the gate shut, he awakes. The frequenter of a public promenade, which extends for a mile on the brow of a hill, rises from his bed at night, and walks along the road in his shirt. On his way he stops frequently to greet and converse with persons whom he is in the habit of meeting there.

Such cases as these might be multiplied to any extent; nor are those at all uncommon in which the actors are scholars and persons of education, puzzling while awake over problems which find their solution during a fit of sleep-walking. We have the following cases on good authority.

A distinguished Scottish lawyer had been consulted about a case of great difficulty and importance, which he studied closely and anxiously for several days. One night his wife saw him rise from bed, seat himself at a writing desk, write a long paper, put it in his desk, and return to bed. Next morning he told her that he had dreamt of delivering a luminous opinion on a case which had greatly perplexed him; and that he would give anything to recover the train of thought which had passed before him. She directed him to his desk, where he found the opinion clearly and fully written out. This case is related by Abercrombie on the authority of the lawyer's family. The next case is given by Carpenter as also resting on good authority.

A banking-house once gave to a Dutch professor of

mathematics a question to solve, which required a long and difficult calculation. He first tried it himself several times, but never without mistake; so he handed it over to ten of his pupils. One of these attacked the problem with great vigour, but more than once without success. Late in the night which preceded the day fixed for the giving in of the answers, he went to bed baffled and tired. But, in the morning, most strange to relate, he finds a paper on his desk, in his own handwriting, on which the problem is solved without a single blunder. He had calculated the problem in his sleep and in the dark. It was singularly clear and condensed, and the professor himself declared that he had never thought of a solution so simple and concise. I am indebted to the same authority, Dr. Carpenter, for a third case of the same kind.

A student of divinity was required to compose a discourse on a given text of Scripture. He felt unequal to the task, fell into a state of nervous agitation, and on the evening of the day appointed for the delivery of the discourse composed something with which he was "utterly disgusted," went to bed, and fell asleep. He then dreamed of a novel mode of treating his subject, awoke, and leaped out of bed to commit his thoughts to paper. But, on opening his desk, he finds them already written out, in his own writing, the ink hardly dry. In this case, then, there must have been two identical dreams rapidly following each other; the one acted and forgotten, the other remembered; and this second dream, occupying the time required for a literary work

of some length, flashes through the mind while the ink with which the last sentences were written is drying.

These, again, are cases which might be largely multiplied, and reinforced by others strictly analogous. So that (to repeat Dr. Carpenter's summary), "A mathematician will work out a difficult problem; an orator will make a most effective speech; a preacher will address an imaginary congregation with such earnestness and pathos as deeply to move his real auditors; a musician will draw forth most enchanting harmonies from his accustomed instrument; a poet will improvise a torrent of verses: a mimic will keep the spectators in a roar of laughter at the drollness of his imitations."

The cases just cited are, as I have said, instances of Somnambulism in its highly developed form; outlines of cases elsewhere given in greater detail. Its less-developed phases consist in changes of posture, feeble attempts at escape or resistance under the oppression of nightmare; muttering, talking, and conversing in sleep; re-wording the transactions of the previous day; re-suming one night the spoken dream of the previous one; strange imitations, too (as of conversations and musical performances, rendered with marvellous accuracy and exquisite taste, by a servant-girl, dull and awkward when awake); and such odd jumbling of ideas as was shown by a scholarly friend of mine, who would get out of bed and shake the curtains violently, and when asked what he was doing, reply that he was driving nouns, verbs, and other parts of speech out of their hiding-places.

Cases might also be cited in which the condition of sleep-walking occurs exceptionally as an interruption (often sudden and without warning) to waking activity:—a man at work, working on unconsciously, and coming to himself surprised at the progress made; another, seized as he is walking, walking on, and equally surprised to find himself so far on his journey. These cases remind me of a playfellow whom I often saw seized and fixed for a minute or so at a time, in the attitude, say, of whipping a top, and who would come to himself with an air of surprise, and resume his play. Then there are cases of this cataleptic, or ecstatic, state, in which, as in delirium and in sleep, knowledge quite unconsciously acquired—of languages, of music, of poetry, of science—has been displayed by persons without either natural talent or education; also, such curious phenomena as the temporary suspension of all previously acquired knowledge; and the memory of an event which happened during one fit, restored by the next fit, but passing away during the interval. This state of double consciousness present in this ecstatic condition may be present also in delirium, drunkenness, and insanity. The three illustrative cases, one quoted from Prichard, another from Combe, and a third given on very good authority by himself, are brought together by Abercrombie at the close of his chapter on Somnambulism. I shorten them as much as I can.

The case related by Prichard is that of a lady who would be suddenly seized by *Delirium*, often in the midst of an interesting conversation, and even of an

unfinished sentence; would resume the conversation and complete the sentence on her recovery; and, on the recurrence of the fit, would, in like manner, resume the ideas of the former one.

Dr. Combe's case is that of a porter who, when drunk, left a parcel at a wrong house, and forgot the act when sober; but the next time he got drunk, recollected where he had left it, and recovered it.

Dr. Abercrombie's case is that of a young woman, nineteen years of age, who became insane, but was gentle and industrious. Before her attack, she had been only learning to read and to form a few letters; but while insane she taught herself (she could not learn from others) to read and write perfectly. She had intervals of sanity lasting three weeks, or more; and during these she could neither read nor write; but with the return of her insanity, she recovered her two accomplishments, and could again read and write quite well.

Can we be surprised that, commenting on the case of a patient of this class, the American Professor quoted by Prichard, should say "that she appeared as a person might be supposed to do *who had two souls*, each occasionally dormant and occasionally active, and utterly ignorant of what the other was doing"? or that Dr. Wigan should make use of such cases as these as facts on which to found his ingenious theory of the "Duality of the mind"? Call the phenomenon by what name we will—"coherent reverie," "double consciousness," or "delirium," the fact remains that there are persons who pass from their ordinary waking state into one altogether

different; and that the two states are separated from each other by a line as sharp and narrow as an unfinished sentence or a word. This alternate interruption and restoration of thought may occupy years, as in the case of the lady who, in the midst of a fine piece of needlework, became suddenly delirious, and so continued for about seven years, and on recovering equally suddenly enquired about her work, of which she had not said a word during the seven years; or that of the New England farmer, who also was seized with delirium which lasted several years, and on his sudden recovery, went straightway to the hollow tree where he had placed his tools just before his seizure.

The state of double consciousness illustrated by these cases allies itself with certain cases of Somnambulism, in which also memory, one of the best defined of the mental faculties, suffers total eclipse during the fit, to issue in unimpaired brightness on its recurrence. Is memory the only faculty which can thus fall into abeyance? May not other faculties, too, which restrain men from wrong-doing, conscience among the number, be rendered inactive by like physical causes? The case which I cited in the section on Illusions—I mean that of the soldier who missed the column from the Place Vendôme—will, I think, go far to justify this question.

But I have yet something to say about the fit of somnambulism, which, if I mistake not, will enhance the value of that state as a factor of the unsound mind. In the first place, it is worth noting that the sleep-walker must blend into one connected whole the illusions

generated within the brain with the real objects which he has occasion to use. The man-servant who places himself, plate in hand, behind his master's chair, must fill the chair with his master's form, at the same time that he is utterly insensible to every real object and person that form no part of his programme. But, on the other hand, a somnambulist will draw within his magic circle any person who can aid him in his plans. He will converse with him, ask him for something that he wants, display contentment if his wishes are carried out, and anger if something which he does not want is substituted for what he does.

Somnambulism, again, is subject to the same law of variety and degree which governs all things human. One somnambulist will remember the dream he has been acting on coming out of the fit, or on its recurrence, another will not; one somnambulist will dress himself to the minutest detail, another will go forth to a promenade with nothing on but his shirt; one somnambulist bridles and saddles a horse and rides it, another supplies form, life, and movement to a window-sill on which he sits astride; one somnambulist carries a candle where he needs a light, another finds a bottle answer as well; one somnambulist recognises no person who is not comprised within the circle of his ideas, another can be humoured to follow the lead of a waking companion. This last-named exception to the rule is well illustrated by the extreme case which Abercombie gives us on the authority of Dr. James Gregory. An officer much subject to dreaming could be thrown into a state of somnambulism

by whispering in the ear, and the more readily if he were familiar with the voice. In this way he could be led through all the details of a quarrel ending in a duel; and when the proper time arrived, a pistol being placed in his hand he discharged it, and was awakened by the report. This is but one of several similar acted dreams which his companions conjured up for their amusement.

If I were writing a complete treatise on somnambulism, I should have much to say on the condition of the organ of vision, and of the other organs of sense in different cases. I should have to speak of the eyes as wide open, with dilated pupils, in one case, closed in a second, half-closed in a third; of some who hear, but do not feel or see, or the reverse; of the marked development of that which has been termed the "muscular sense;" of things clearly seen when very faintly illuminated; or when cards or sheets of paper are interposed between the eye and the object to which it is directed; and of that strange faculty of sensuous abstraction by which not only one object is separated from another, but a part of a figure from the remainder, as when a sleep-walker recognises a locket, but not the person who wears it. It would also have been necessary to notice the strong muscular efforts called into play when needed, and the strange absence of the emotions of fear and caution which would restrain the sleep-walker were he awake.

In devoting so much space to this subject, I have been influenced partly by the striking illustration it affords of the possible intensity of the mind's own operations when not hampered by the waking will and not disturbed by

the sights and sounds and passing occurrences of the outer world, and partly by the intimate relations which subsist between sleep-walking and insanity.

The intensity displayed in the acts of the somnambulist is brought about by the combined operation of two factors, the one negative the other positive. The negative factor consists in the exclusion of all the distractions of the waking state; the positive factor, in the singular distinctness of the impressions made on the senses and of the ideas presented to the mind, both of them in keeping with the precision and force of the muscular movements. When we have given to the first factor all possible weight, even to the extent of supposing a greater power of abstraction than the waking man can exert, we can scarcely avoid the conclusion that both the senses and the mental faculties are endowed with abnormal acuteness. That this may be the case is rendered probable by what has been stated over and over again by persons who have passed through attacks of madness and have been able to recall their impressions, that their illusions of sight and hearing were far more vivid than the impressions made upon their senses by real objects. If it were not so, the illusive transformations which contribute so striking a feature of many cases of mental derangement could find no place.

As to the relation which somnambulism bears to insanity, that is recognised by our best authorities. Thus Prichard quotes Richertz with approval, to the effect that somnambulism, when it has continued long and recurred often, "is apt to pass into epilepsy, apoplexy,

hypochondriacism, melancholy, and madness," to which last he thinks it has a near relation; and Prichard adds the expression of his own conviction that "Richertz was certainly correct in his opinion as to the pathological relations of somnambulism both to comatose and to maniacal diseases." The ecstatic form of somnambulism Prichard especially mentions as having shown itself in connection with catalepsy, hysteria, and epilepsy, and he singles out epilepsy (itself a common associate of madness) as a very frequent forerunner and immediate antecedent. In a case which he quotes from Darwin, the fit of somnambulism intervened between the epileptic *aura* and stupor; and in another instance the two conditions of epilepsy and somnambulism were vicarious the one of the other. It may be well to add that the hereditary nature of somnambulism is recognised and illustrated by the case of a father and his sons, known to Dr. Willis, all of whom walked in their sleep, and the sons, being attacked at the same time, ran against and awakened each other.

But the relation between somnambulism and insanity admits of illustration by a small group of cases which have a direct bearing on the question of Criminal Responsibility.

I have shown by cases already cited that in some madmen, as in some somnambulists, there is a remarkable increase of talent: I have yet to show that there may be in others a complete change of character—a moral somnambulism the counterpart of moral insanity. A Carthusian monk, remarkable for simplicity, candour,

and probity, walks almost every night in his sleep, a thief and a plunderer of the dead. A pious clergyman, in his fits of somnambulism, steals and secretes whatever he can lay his hands upon, and even plunders his own church. A suicidal somnambulist has fits every night. He is watched, as if suffering from an acute disease; but always tries to escape. One night he succeeds, and is found hanging by the feet from a high tree. These cases are taken from "Ray's Medical Jurisprudence of Insanity." An interesting and instructive case of homicidal somnambulism is quoted by Georget from an anonymous work, "*Des Maladies Mentales*." Late one evening a monk enters the room of the prior of the convent, his eyes open and fixed, a frown on his features, and a knife in his hand. He walks straight up to the bed, as if to ascertain if the prior is there, and then gives the bed three stabs. This done, he returns with his features relaxed, and wearing an air of satisfaction. Next day, being questioned, he confessed that, having dreamed that the prior had murdered his mother, and that her spirit had appeared to him, and cried for vengeance, he was transported with fury, and ran directly to stab her assassin. Shortly after he awoke, covered with perspiration, rejoiced to find that it was only a dream.

These cases form an exception to the general rule that what is done in the fit is but the accomplishment of a purpose on which the mind was intent when awake.

Hitherto I have spoken only of that form of somnambulism which is known as "natural," in contradis-

tion to another form to which the title "artificial" has had to be given. This form comprises all those conditions more or less resembling natural somnambulism which are brought about by such manipulations as those of the mesmerist and electro-biologist. These and their effects have been closely studied and described by Dr. Carpenter, who has qualified himself to speak of them with confidence as phenomena not the less real for having been used as sources of amusement to some and of gain to others.

The condition known as *artificial somnambulism*, induced reverie, electro-biology, hypnotism, and mesmerism, is one for which no previous experience even of natural somnambulism itself would have prepared us, if we except perhaps the few cases in which the sleep-walker submits to be guided by some familiar voice, or such a case as that of the sleeping officer who could be made to act in accordance with the suggestions of an acquaintance whispering in his ear. If we knew more than we do of the means by which ancient priests and priestesses were prepared for their utterances, we might find that in mesmerism and electro-biology, as in many other arts, we moderns have been anticipated, and that we differ from the ancients mainly by the wholesome scepticism which has prompted such inquiries as those of Braid and Carpenter. From their researches and experiments it would appear that there are two ways in which this peculiar form of somnambulism may be brought about—passes and manipulations of the mesmerist, and the fixed gaze prescribed by the electro-

biologist. Each prepares his "subject" by placing him in a position of repose. One presents to the eye a monotony of movement, the other a monotony of action, both tending to sleep, or some state allied to it. The mesmeriser adopts a method like that of the biologist when he takes the two hands of the "subject" in his, and looks intently into his eyes; the biologist, in his turn, has recourse to passes after the hypnotic effect has been established, but mainly with the object of directing attention to the parts of the body which he is bringing under his guidance and control.

In the case of electro-biology it has been proved that both the position and composition of the object employed to obtain the fixed gaze are quite immaterial. The object may be placed on or near the forehead, or in the palm of the hand, and may consist of discs of copper and zinc, coins, crystals, drops of ink (as practised by the magicians of Cairo), or even the hand itself. The "biological state" may be induced in about one-twentieth of the individuals experimented upon, and in periods varying from half-a-minute or less to twenty minutes or more. "A continued steady gaze at a fixed object" is all that is needed to induce this peculiar condition sooner or later. The persons who are quickly brought under this influence constitute a small minority of the whole, and are perhaps not more numerous than natural sleep-walkers, than men subject to attacks of hysteria, or women to catalepsy. It is probable that the number of the "susceptible" would be found larger among nations accustomed to easy belief and ready

submission to the will of others than among the more sceptical and independent natives of countries where liberty prevails.

The results of "mesmeric passes" and the "fixed gaze" are so similar, that they need not be distinguished here. Profound sleep, from which the subject is roused with the greatest difficulty, is a more common effect of the passes than of the fixed gaze; but their usual consequence is a dormant and passive condition of mind—a state of profound reverie and intense abstraction—in which it continues till it is roused to activity by some suggestion from without, commonly conveyed by the voice, gesture, and movements of the person who has given the directions, but sometimes by the bystanders. The suggestions thus made, especially when they are uttered in an authoritative tone, or take the shape of confident assertion or imperative command, are obeyed as by an automaton "thinking, feeling, speaking, acting, just as the speaker wills that he should think, feel, speak, or act." So that it was no idle boast of the first electro-biologists that "they could subjugate the most determined will, paralyse the strongest muscles, pervert the evidence of the senses, destroy the memory of even the most familiar things or of the most recent occurrences, induce obedience to any command, or make the individual believe himself transformed into any one else," and this while wide awake. But sleep also may be produced in the biologised person by order or prediction—sleep which a whisper of the operator can terminate in a moment, after the loudest noises and

the roughest methods of procedure brought to bear by others have proved quite ineffectual.

Among these strange acts of obedience there is not one which Dr. Carpenter has not witnessed in persons whom he describes as entirely beyond suspicion, as having never previously witnessed such experiments, and as being quite incredulous respecting them. From statements based on such evidence I cannot withhold my assent, even if I could bring no experience of my own to bear on the subject. But I have a very distinct recollection of two cases that came under my notice about forty years ago, of which one belongs to this place, the other to a later section, which will, I think, go far to justify my assent to Dr. Carpenter's conclusions. Of the first case I will state only such particulars as I can perfectly recall.

A foreigner, on the eve of his departure from England, defied a young English lady to submit to his mesmeric passes. She, on her side, ridiculed his pretensions, and put them to the proof. She resisted for a long time, and at length fell asleep, and so continued till her friends became alarmed, and sent for me to rouse her. I found her lying on her back in a profound sleep, her breathing scarcely perceptible, the only other movement being a slight rapid vibration of the eyelids. Failing to rouse her by the usual means, I resorted to the flecking of the feet with a wet towel, which proved successful. She had a violent hysterical fit, and then passed into a restless excited state, with pale face and weird expression, talking wildly of the foreigner, and (at the time she

believed him to be crossing the Channel) putting on all the appearances of sea-sickness. I saw her in this state, and was shown the blood which she had vomited. As she continued for many hours in the same restless and excited state, I thought it probable that by making the usual passes before the face I should be more likely to calm her than by any medicines which I could prescribe. In this I was successful. She presently grew calmer, fell into natural sleep, and gradually recovered. I ought to mention that while in this abnormal condition she laid claim to clairvoyance, but failed when put to the test. When my patient had sufficiently recovered I left her, and many days elapsed before I saw her again. She then paid me a visit, and was shown into my study, where she took a seat at the corner of the room as far from me as possible, alleging that she could not bear to come near me—the very expression used by the gentleman whose case I am to relate farther on. The object of the visit was to tell me that she had felt sure that I was near her the previous evening, mentioning the place and time. She said that she was traversing a crowded thoroughfare in an omnibus when the feeling came over her. At or about the same time it happened that I was crossing the thoroughfare in question to see a patient to whom I had been summoned. It was a dark, misty evening, and it was not likely that she could have seen me.

I have spoken of a *weird* expression of countenance. Let me take this opportunity of stating that it is exactly such an expression as I saw worn by a young lady for

some years of her girlhood. There was a strong taint of insanity on the father's side. She was restless and perverse, very difficult to manage, rude and impertinent to those who had a strong claim on her respect and affection, full of demonstrations of attachment to others who had not. This strange state passed away. She grew up to womanhood a perfect contrast to her younger self, amiable and estimable, and ready at all times to allege that she had no recollection whatever of her weird condition, and that she found it hard to believe what she had been told about it. She had obviously passed through an attack of juvenile insanity which bore some sort of resemblance to the strange state sometimes induced by mesmerism.

I cannot better recall to the reader the object with which I have entered into these details than by quoting the words of Sir Henry Holland:—"A dream put into action (as in reality it is under certain conditions of somnambulism) might become madness in one or other of its most frequent forms; and, conversely, insanity may often with fitness be called a waking and active dream." So also Dr. Carpenter:—"It is only necessary to glance at some of the most familiar features of insanity to be assured that the strangest perversions of sense-perceptions exhibited by the biologised 'subject' have their counterparts in those morbid states in which the controlling power of the will is altogether suspended, and the mind is possessed, not transiently, but enduringly, by some 'dominant idea.'"

There is one possible misapprehension in respect of

the views of Dr. Carpenter that I ought on no account to leave unremoved. He shows himself to be anything but a man of easy belief in the wonderful and mysterious, by drawing a broad and clear line of distinction between that which he has seen with due precaution against confounding sight with inference, and that which he has not seen; "for," he says, "it is the experience of the writer, as it is of many of his sceptical friends, that none of the marvellous phenomena which are related to them as of indubitable occurrence can be brought to recur in their presence." He is here speaking of some mesmerists and of all spiritualists.

I am tempted in this place to take note of the words with which Dr. Carpenter opens his chapter on mesmerism and spiritualism:—"What to believe!" but I resist, or at least allow myself to be borne only so far as to notice his leading classes of the incredulous and credulous—namely, those who arm themselves against all assaults by the formula, "all humbug," "imagination," "hysteria," and the "partial" and "thorough-going believers" in occult powers. I content myself with remarking that both imagination and hysteria are realities not to be rendered unreal by the manner in which they are called into play. As to the highly contrasted states of easy and difficult belief, it may be safely affirmed that for one reluctant sceptic there are thousands of believers to whom the very act of believing is a pleasure.

SECTION V.—DELIRIUM.

THE word *Delirium* was formerly in frequent use as the equivalent of insanity, and is even now occasionally employed in that sense. But its more common and appropriate use is to designate a state of mind which springs up during fevers, inflammations (especially of the internal organs), severe wounds and injuries, the action of poisons, and especially of such poisons as opium and alcohol. Delirium tremens—the Nemesis of the drunkard—is one of its most instructive forms. It is of delirium, as thus defined and limited, that I am now to treat.

In Delirium, as every physician must have had many opportunities of observing, the patient is subject both to *illusions* and *delusions*—to illusions of the senses which chiefly affect the sense of sight; to delusions of the mind which generally have reference to his ordinary avocations, or to events which occupied the mind in the time preceding the illness. If we were asked to describe in few words the condition of the mind, we should characterise it as busy, eager, and intent. If asked to describe the successive stages, the different forms and degrees, of febrile delirium, we should point out first a disturbed sleep, indicated by a loud labouring respiration—the

patient, on waking up, describing himself as having worked very hard, but not exactly remembering how; then a delirium of which the outward sign is a picking at the bed-clothes, without *subsultus tendinum*—this picking movement, as the patient will sometimes be able to tell us, having for its object the removal of some trivial object which frets and worries him; then we shall be told of illusions of a kind so common in delirium tremens,—there are holes and fissures in the wall, out of which such hideous and disagreeable objects as spiders, wasps, mice and rats, are crawling; and, lastly, we see our patient picking at the bed-clothes, and at the same time talking incessantly of matters of business and of the persons with whom he transacts them, or of some event of unusual importance which had occurred just before the attack of illness.

I will give you in a few words some illustrations of the characteristics which I have just mentioned.

Galen, in his own person, shall supply us with the rationale of the picking at the bedclothes. Having, in his youth, fallen ill of an ardent fever from overheating himself, he imagined black straws, and fleeces of wool of the same colour, to stick out from the bed-clothes; which, when he endeavoured to pull off, and found nothing in his fingers, he attempted it again with more diligence. But, when thus employed, he heard two of his friends who stood by say, "He now pulls off the flocks and gathers straws," and, his mind being intact, he immediately advised his friends to use their best endeavours to prevent him from falling into a frenzy.

Of the busy and intent character of delirium the older authorities took very special notice. Thus Boerhaave saw a noble virgin, who endeavoured night and day to pass a thread through the eye of a needle till she fainted; and another patient who continually collected knots together without intermission: and his commentator, Van Swieten, says that he had seen many such cases, wherein the patients have, till death, continued laborious and employed with the strictest attention of mind in the works of healthy people.

Elsewhere, the same acute observer, after saying "that the patient's thoughts are most incessantly employed upon the arts or workmanship to which he has been most accustomed; or if anything happened to him that has made a violent impression on the mind a little before the invasion of the disease, the remembrance of that thing is perpetually renewed;" gives, as an illustration of the last part of his statement, "the disorder which afflicted the whole city of the Abderites." He tells us, on the authority of Lucian, that Archelaus, a celebrated tragedian, having acted the fable of Andromeda before the Abderites in very hot weather in the midst of summer, many came out of the theatre with a fever upon them; and that afterwards even the whole city was invaded with a continual fever, which became violent even on the first day. But about the seventh day the fever went off, in some by a plentiful hæmorrhage from the nose, and in others by a copious sweat. But these patients had a ridiculous kind of disturbance in their minds; for every one was acting the tragedy,

repeating the verses, and especially singing in a mournful tone Andromeda of Euripides.

I am able to add a single instructive case of the same class from my own experience. A lady, whose husband habitually threw upon her the business and anxieties of a house full of schoolboys, with the superadded misery of indebtedness, after nursing five children in typhoid fever, took the disease herself. Now, it happened that just before the fever broke out, the situation of head master to an endowed school in the country fell vacant. For this she had persuaded her husband to make application; and her own exertions, which were unremitting, had opened out a good prospect of success; and, with it, relief from overwhelming debt and embarrassment. As my patient lay, at the height of the fever, with picking movements of the hands, *subsultus tendinum*, and chattering delirium, it was easy for one well acquainted, as I was, with the history of the period preceding her fatal attack, to trace the verbal history of the success which her imagination had foreshadowed—her joy at the news of her success, her loving congratulations of her husband, the reception at her new home, the formal flattering welcome of the authorities of the school—in a word, a perfect dramatic representation of what would probably have taken place in the event of the success for which she had worked so hard, and desired so earnestly. This poor lady, sole spectator of her own comedy of *happy expectations*—her own “*mentis gratissimus error*”—is but the counterpart of the gentlemen of Argos and Abydos, and of the

person of "exalted rank" who sat in their own empty theatres applauding the tragedies of Euripides and Shakspeare.

It would be easy to select from the writings of one author alone—I allude to Van Swieten's Commentaries on Boerhaave—examples of febrile delirium running parallel, each in its own particulars, to the cases of Insanity to be seen in all our asylums. There is the patient lying silent, and in a manner astonished, with a countenance expressive of fear and admiration; the patient who sees frightful appearances, which he so much detests that he endeavours to efface them with all the force of his will, but is not able; the patient who has ideas that excite violent passions of the mind, causing him to jump out of bed, and injure those who are present, exerting almost incredible force, even for a long time together, in order to avoid what he believes injurious, or to get possession of that which he desires; the patient of mild disposition giving a fierce answer, the well-behaved person guilty of indecent actions, the timorous person using bold and threatening language; the gardener who, in the third day of a true frenzy, tacitly delirious, and catching at the bed-clothes, in one moment jumps out of bed, and tries to leap out of the window:—such are a few examples in point. Again, as instructive parallels to cases of dreaming passing on into madness, take Van Swieten's instances in which, the fever not being very violent, the patients have begun to be slightly delirious; and soon after, the fever entirely ceasing, they have continued raving in the

highest degree for several days, and even weeks, so that they have been obliged to be restrained from injuring themselves or others.

There are some remarkable mental phenomena showing themselves during or after febrile attacks, and apoplectic seizures, and as consequences of injury to the brain from blows or falls. They consist in various affections of the memory—in loss of recollection partial or complete, of occurrences, languages, words—of the events of longer or shorter periods of time—of old or new acquisitions—or contrariwise, in a strange improvement of the memory, the revival of a forgotten language, the vivid renewal of some verbal or other impression which was received at the time of its occurrence without observation or consciousness—without any distinct effort of attention. I allude especially to the case of the ignorant servant-girl mentioned by Coleridge, who, during febrile delirium, repeated with perfect accuracy passages from theological works in Latin, Greek, and Rabbinical Hebrew, which her master was in the habit of reading aloud from his favourite authors as he walked backwards and forwards along a passage leading to the kitchen.

To that department of this most interesting subject which relates to the obliteration of the recollections of a certain period,—the erasure from the mind of recent acquisitions,—I am able, from my own experience, to make one curious contribution. Of the five victims of typhoid fever to whom I have alluded as sons of the gentleman whose desire to bathe was

converted into an illusion, and of the lady who witnessed the realisation of her own wishes in the delirium of her fever, one (a lad then about ten or eleven years of age) did not suffer from delirium during the whole of the attack ; but after a few days ceased to speak the language of his boyhood, and reverted to that of his infancy, beginning every sentence with the monosyllable *me* instead of *I*, and speaking in all respects as a child of two or three years of age might have done. And when he became convalescent, was dressed, and allowed to walk about the house, he went from room to room with an eager curiosity, and an expression of wonder and astonishment which made an indelible impression on my mind.

This case will serve to extend to childhood the knowledge we already possessed of the power which disease, in common with severe injuries and shocks to the brain, exerts in adult persons of paralyzing the memory of things past, and so destroying for a time a chief function of the brain.

I have spoken incidentally of *Delirium Tremens* as a form of delirium in which illusions abound, assuming the forms of hideous and loathsome objects, with the accompaniment of angry and threatening voices. As a rule, these sights and sounds terrify and excite the patient. He makes violent attempts to escape, and will assault those about him, or makes attempts on his own life. But this excited state is not the only form the malady assumes. There is a milder variety of it, in which the patient, pale and listless, goes about as in a waking

dream, answering questions and conversing rationally, and speaking of things calculated to excite the feelings and passions, with perfect freedom from excitement, as if they had reference rather to some one else than to himself. I well remember an out-patient of King's College Hospital who, on entering my room set diligently to work picking the back of a chair, and, when asked what he was doing, giving for answer that he was searching for snakes and serpents, and when the porter made his appearance asking him in a low quiet voice whether he did not say that he would kill him.

This quiet state, this tranquil delirium, shows itself more frequently than is supposed in patients who are destined not to recover ; and when it takes the shape of confession is but too apt to lead the clergyman or priest astray. One such confession (made, as I do not doubt) in this deceptive state, was the groundwork of a touching appeal, more remarkable for eloquence than for truth. It is no small objection to the practice of priestly confession, that while it pollutes the priestly mind with true histories of revolting sins, it too often presents him with the wanderings of delirium or the fixed delusions of insanity.

Having now treated of Illusions and Delusions, of Dreams, Somnambulism, and Delirium, and certain curious affections of the memory, I now pass on to other factors of the unsound mind :—Incoherent Speech and Convulsive Movements.

SECTION VI.

INCOHERENT SPEECH.

WORDS, spoken and written, are the best outward signs of the state of the mind and brain. Through them we have come into possession of all the knowledge which has engaged our attention up to this time; and by considering that form of utterance known as Incoherence we shall add yet something to our stores of information.

We have all of us some experience of Incoherent Speech in states falling short of Insanity—in that short madness known as Anger or Rage; in highly excited emotions of adoration (in Love directed towards an object human or divine); in ancient oracles and in modern unknown tongues; in hysteria; in imperfectly developed epilepsy; in febrile delirium; in intoxication; and in many forms of poisoning.

A gentleman about whom I was consulted has pupils of unequal size, and is subject to that imperfect epilepsy known as the "*petit mal*." He grows pale, feels giddy, finds support against a chair or table, and talks incoherently for a minute or so. He then comes to himself and recollects that he talked nonsense. In his earlier attacks he was subject to priapism; but this disagreeable complication has passed away. Another

gentleman tells me that, whenever certain past transactions which gave rise at the time of their occurrence to intense emotions of anger flash back upon his mind, he finds himself giving relief to his feelings in words which express indignation, but are in no sense of his own choice or selection. With him this state of things is always of short duration ; but we see it of longer continuance in some cases of hysteria, in which modest and well-nurtured women will pour out words expressive of an emotion due to physical causes—words which can only have found an unconscious entrance into the mind, after the manner of the ignorant and untutored servant-girl who had imbibed the learned utterances of her master.

An interesting fact belonging to this division of my subject is the substitution of one word for another, and the persistent use of it. Of this I can give a striking instance from my own experience. The blind gentleman to whom I have already alluded as the subject of progressive locomotor ataxy had greatly exerted himself on behalf of a candidate for a city appointment in the gift of a committee. The exertion brought on an epileptic fit, which, when it passed off, left behind it a state of eager delirium that found expression in the sentence "You haven't hanged the committee, committee, committee." After trying for some time to solve the riddle, it occurred to me that my friend, who was in the habit of winding up and suspending his repeater, and making much use of it to ascertain the time, had transferred the word committee to his watch. The watch was put in its

accustomed place, and the poor patient made aware of the fact, intimated that that was what he had been anxious about. I heard no more of the committee.

Of the important part which verbal utterances play in Insanity I need not remind you. We all know that mania, in one of its manifestations, is a *raging incoherence*; in another a ceaseless repetition of some form of words, as of the Lord's Prayer; in another, a curious propensity to, and strange power of, rhyming; in another, a strange medley of old words with new meanings, and new words of the patient's own invention. Then there are cases in which an attack of mania is ushered in by an unwonted flow of witty speeches; and other cases in which the patient seems governed by verbal formulæ, often taken from the Bible; and others again in which, as in one of Conolly's cases, every outbreak of incoherent speech is brought to a close by a stereotyped expression, such as "Glory, glory; glorious, glorious;" words which the speaker is angry with his hearers for not understanding.

Now all that I had occasion to say when speaking of Illusions and Delusions may, I believe, be said with truth of spoken words. There are cases in which speech reflects an excited emotion by incoherent words appropriate to the emotion, but still involuntary; other cases in which the words are not fashioned by any antecedent emotion, but are as involuntary as the convulsions of epilepsy: cases, too, in which words are rightly read but wrongly interpreted, just as real sensations are changed and transformed.

So much for spoken words. But to complete the subject something ought to be said of the incoherent expressions which the insane commit to writing. These might be styled *written incongruities*; and as they differ from incoherent speech only in being written down with the greater attention which this mode of communication supposes, they find a fitting place in this section. Conolly, in his "Indications of Insanity," strings together three apt illustrations of these insane incongruities. One lunatic claims to be the emperor of Russia, the pope, the general of England, and Julius Cæsar; a second who never had ten pounds in his life, will boast that he gave his son a fortune of nine hundred millions of pounds, "besides some loose silver he had in his pocket, and four penny-worth of halfpence;" a third asserts that he is in Turkey, in France, in Newgate, and in the "Rule of Three," and that he perfectly recollects what happened fifty years ago, though he is only forty-five years of age.

The same writer gives us two highly characteristic letters, one written by a man who calls himself the "Great Mighty Grand Admiral," the other by one who claims to be the "Son of Jupiter."

The writer of the first letter who is described as a tall, portly, good-looking gentleman, dressed in black, with a countenance manly and expressive, and a manner grave and natural, and who, but for the way in which he had decorated himself, might have been taken for the chaplain or physician of the asylum, covers the walls of his room with his titles, and commits to the care of his visitors a letter in keeping with his lofty pretensions.

These were the titles he assumed :—Supreme from the Almighty, Mighty Prince, Mighty General-in-Chief, Great Mighty Grand Admiral. Mixed up with these were the names of heathen deities and modern worthies, a picture of the Trinity (insinuating that he is one of the three) and a portrait of himself. He holds a commission from God Almighty, and is a Great Prophet. In his letter, which must be answered in three days on pain of Hell, the writer gives his orders, and mixes up in the most incongruous manner, a bible and various religious books ; grammars, magazines, newspapers, and almanacs ; music and musical instruments ; plans, maps, directories, and histories of royal and titled personages, concluding with Buonaparte and the Beast ; with wines, fruit, lozenges, tobacco, snuff, oysters, money, “everything fitting to Almighty God.”

The second letter is addressed to his medical attendant by a patient at Charenton. He is astonished that he is detained there on a suspicion of madness, because he declares himself the son of Jupiter. If his physician will accompany him to Olympus, he will be convinced. He cannot be a man of “ordinary birth” or he would not possess those scientific attainments which adorn his mind and heart with all the flowers of the sublimest eloquence. He could not have related with such vehement, impetuous, war-like audacity, the high transactions of Greece and Rome ; he could not have restored the Iliad to its colouring as it sprang from the genius of Kanki, who lived many millions of ages before the deluge of Ogyges. “A second hour” (he had not spoken of a first) “sufficed

him to make an epopee, embracing the universal history of Greece, of Rome, and of this great and generous France :—the same space of time to execute a painting of immense and prodigious dimensions. By these statements, expressed in lofty language, he thinks that he sufficiently vindicates his claim to have Jupiter as his father and the divine Juno for his tender mother. If his physician will intercede for him that he may be restored to his family and his divine parents, he will cherish a divine gratitude, eternal as the life of the gods,

SECTION VII.

CONVULSIVE MOVEMENTS.

CONVULSIONS are among the most interesting and instructive factors of the Unsound Mind. Whether they constitute a single well-defined disease, as in catalepsy and epilepsy; or are the result of some familiar local irritation, as in teething; whether they assume the rare form of rigid spasm, as in catalepsy and ecstasis, or take the more common shape of alternate contraction and relaxation; or are blended with other symptoms, as in hysteria and chorea, they are always instructive. They teach us something by the suddenness of their attack, something by the seeming inadequacy of their cause, and the simple remedies to which they often owe their cure; but still more by their frequent association with insanity. That convulsions are often present in Unsoundness of mind, and, when present, play a very important part in it, may be inferred from the fact that Griesinger, when discussing the "*separate elementary disturbances* which are always found grouped together in the various forms of Insanity," recognises an "Insanity of movement" as one of the *triad* of which intellectual and emotional insanity are the remaining members. If under the phrase "insanity of movement" we comprise

not only such wholly involuntary convulsions as those of which epileptic seizures afford the best example, but also those movements of which the patient is more or less conscious, we shall recognise in them, as in illusions and delusions, two leading classes, the one traceable to some definite antecedent, such as a whispered word of command (an illusion of the hearing), or a continuous persistent delusion; the other to some strongly excited emotion or passion, such as anger, expressing itself outwardly in aimless violence. I shall bye-and-bye bring forward some instructive examples of all these phases of the Insanity of Motion.

I propose to make a few observations on the several conditions which I have mentioned.

Catalepsy is so rare a disease that Cullen never saw a genuine case of it; and I have never seen one since I was a boy. But that cases of catalepsy and its allied conditions—ecstasy and trance—may occur there is no room to doubt; and men engaged in the care and treatment of the insane, as was the late Dr. Burrows, have had more than one case brought under their notice. In simple catalepsy fits usually come on suddenly and without warning, last from one or two minutes to several hours or days, leave behind them no recollection of their occurrence, and recur sometimes daily, sometimes at longer and less regular intervals. While they last, the body either continues motionless in the attitude of seizure, or in any position in which it may subsequently be placed. A case of catalepsy without bodily or mental complication is reported in the first volume of the

“Medical Observations.” The patient was a woman of fifty, who, for some years, was attacked daily with rigid contraction of the whole body and the profoundest sleep. The fits continued from sunrise to sunset, and she led in all respects a natural life in the intervals. This strange condition has been mixed up with the analogous disorders hysteria and epilepsy; and well-authenticated cases are on record of attacks of mania characterised by violent declamation and loud singing, followed by true catalepsy, and of ecstasy alternating with mania. Gooch, an accurate observer and elegant writer, reports a case of puerperal melancholia, followed by catalepsy, passing into melancholia. The catalepsy appeared at intervals of two or three days, and lasted several hours. Dr. Burrows had also under his care a case of catalepsy complicated with melancholia; a second in the person of a young Peruvian of Spanish origin, attacked in succession with slight symptoms of mania, with melancholia, with fatuity and entire unconsciousness, blended with frequent attacks of catalepsy; and a third which I am restrained from quoting by other considerations than its length. Of catalepsy in the insane I well recollect one instance which I encountered in passing through a private asylum. The poor patient would remain for long periods of time fixed like a statue, with the head thrust forward, and the eyes staring into space.

Epilepsy.—All that I have just said of convulsions in general is true in a marked degree of this form of them. It may be said to head the list of those affections of the nervous system which combine suddenness of attack—

as apoplexy does—with insensibility to all outward impressions and intensity of muscular movement, to which I may add association with almost every phase of functional and organic disease of brain, and most forms of mental disorder. It is also characterised in an eminent degree by the serious nature and incurability of some of its causes, and the trivial and curable character of others. I speak of such physical causes as cranial malformations, sharp-pointed growths chiefly at the base of the skull (much insisted on by the brothers Wenzel and Dr. Burrows), osseous growths elsewhere, and various forms of soft tumour of the brain or its membranes: of such trivial or curable causes as intestinal worms, disorders of the digestive apparatus, and opposite conditions of the circulation through the brain. Then there are causes directly affecting the nervous system, of which fright takes the first place, and excessive indulgence in drink and in practices known to impair bodily strength and nervous energy in growing lads and young adults. Among the causes which predispose to the disease may be mentioned the male sex (the other sex being more prone to hysteria), hereditary taint, and, as Dr. Cheyne strongly insists, the strumous or scrofulous, diathesis, with strumous diseases of the skin as common accompaniments. I am able to assent to this view, partly on the strength of an instance in which the eldest son of an otherwise healthy epileptic father, married to a singularly well-formed and healthy wife, died of an aggravated scrofulous affection, attacking first an elbow-joint then the cervical vertebræ, while more than one of

the brothers and sisters suffered from the same cause in body or mind.

All educated physicians know what an ancient history epilepsy has, what an important part it has played in the annals of superstition, and what different classes of persons have succeeded by religious ceremonies, by force of character, or by confident promises, in effecting a cure, or, as they preferred to call it, driving out the dæmons whose presence in the poor afflicted body had given rise to the disease.

Epilepsy, like all other diseases, has many degrees from slight to severe; but no one who has once witnessed a bad fit of it, with its harsh, piercing scream (perhaps caused, as some cases have taught us, by sights and sounds of terror), the sudden fall, the violent struggles, the foaming mouth, the bitten tongue, the rolling eye, the distorted features; the poor sufferer waking surprised and weary, and passing into a profound sleep, or into a violent frenzy; and on recovery becoming sensible of involuntary acts which cover him with shame and humiliation—no one, I say, who has witnessed such a scene as this, and knows how many there are in whom it is frequently repeated, can wonder at the fanciful explanations of ignorant and superstitious nations. Mead, a singularly learned and eminently Christian-minded physician, traces beliefs of this order to the idolatrous Chaldeans, worshippers at first of the sun and moon, but afterwards the adorers of dæmons, whom they held to be the souls of heroes who had served their native country or the whole human race.

This "demoniack religion" Mead traces from the Chaldeans to the Phœnicians, then in turn to the Egyptians, and from them to the Greeks and Romans. It is not easy to understand how the Jews should have escaped the contagion of such doctrines; but our author prefers to assign to them an independent Jewish origin, which view he supports by citing Philo Judæus and Josephus. Whether this were so or not, it cannot be matter of surprise that the bad angels—"execrable and every way mischievous"—came to be credited with the most hideous and revolting of convulsive maladies, or that their victims—children suddenly cast into fire or water, or adults lashed into fury, or hiding themselves and their shame from the public gaze—should become objects of fear or pity as they took refuge in woods or caves. The Greek word *κακοδαιμονίαν*, quoted from Aristophanes, as expressing the highest degree of madness, and the term *morbus sacer*, or sacred disease, used by Aretæus and others, as expressive of the belief that some dæmon had entered into possession of the patients, prove that, in those ancient days as in these, their sufferings were in strict keeping with the malignity ascribed to their invisible authors.

It is not necessary, then, that I should resort to modern instances to prove the frequent association of epilepsy with insanity. Suffice it that I quote the first paragraph from what Dr. Burrows wrote respecting it:—"Epilepsy," he says, "is frequently complicated with, or ends in, mental derangement. It may be complicated with every form of aberration, alienation, or deficiency

of intellect. Thus we find it combined with mania, melancholia, demency, and idiotism. The epileptic attack may be preceded by a furious paroxysm, or merely by elevated ideas, by great depression of spirits, or by mental imbecility, forgetfulness, &c. ; or the reverse may obtain, and the sequel of the epileptic fit may exhibit these morbid conditions of the mental functions."

Hysteria.—Anything approaching a full account of this strange condition would be out of place here, and inconsistent with the limited aim of this work, if there were not other and sufficient reasons why I should not attempt it. We all know that it is much more common in females than in males ; so much so that some physicians who have seen scores of hysteric women, have not chanced to encounter one hysteric male, and even go so far as to deny the existence of the disease in the stronger sex. Its occurrence both in distinct fits, or paroxysms, or blended with other maladies, and perplexing even experienced physicians by the truthfulness of its imitations of diseases the best defined and the most severe, are also among its best-known characteristics. The decided preference which it has for the muscles engaged in respiration, and the organs through which the breath passes, or, as some put it, the muscles used in great exertions (whence sobs and sighs, laughter and hiccough, and various affections of the voice and breathing, and the often quick recovery with bursts of laughter, floods of tears, and cries as of persons roused from sleep) also its curious influence on the secretions, shown by profuse salivation and in other

ways—these, too, are features of the disease familiar to all experienced persons, as are the fixed pain over the brow, the flatulent distension of the abdomen, and other symptoms to which Latin names have been given.

How much and how strangely the mind is affected in the subjects of hysteria may be inferred from the writings of Sydenham, and of those having large experience of the insane. Thus Sydenham, after noting the opposite feelings which possess the mind by turns, says of the hysteric as a class that “they observe no mean in anything, and are constant only to inconstancy,” loving and hating the same persons equally without cause, changing their plans from one minute to another, “never at rest.” Conolly, too, speaking of the “extreme excitement of the brain” and the strange manifestations to which it leads, among which he mentions “probable suggestions concerning the course of events past or to come,” says that “to a sober and healthy mind, unacquainted with such excitement,” they appear “too extraordinary not to be supernatural.” The same author says that such cases as Sydenham refers to “approach near to insanity,” and that “the deeper shades of hysteria border upon or enter the confines of insanity.” So, also, Dr. Burrows. “Delirium,” he says, “is a common symptom of hysteria;” “habitual hysteria clearly approximates to insanity;” the “strong mental emotions” to which the hysteric female is liable will, on repetition, “superinduce mental derangement, or perhaps epilepsy;” and he adds that chronic salivation (a symptom noted by Sydenham) is common to hysteria,

mania, melancholia, and hypochondriasis. Passing from hysteria in the female to hysteria in the male, this author observes that when men "are subject to the hysteric passion, an accession of mania is more to be apprehended than when women are so affected." And again, "If this affection attack a male, double precaution should be taken lest it be converted into mental derangement." By way of confirming this statement, I may briefly refer to the case of a clever Italian artist sentenced to ten years' penal servitude for an infamous swindle, who, soon after his arrival at Millbank, had a well-marked hysteric fit, then symptoms and signs of pulmonary consumption, then an attack of mania, for which he was sent to an asylum on certificate, and there died, believing himself the Christ; concerning which strange delusion I may state incidentally that neither in that case nor in another with which I was well acquainted, was the delusion grafted, so to speak, on a moral or religious life. If the delusion originated in any distinct emotion or passion, it was conceit.

I shall presently return to hysteria, as it shows itself in men: but meanwhile I have still something not unimportant to say in reference to girls and women brought to associate in schools, nunneries, and such like institutions.

There are two senses in which hysteria may be described as an imitative disease. It mimics other diseases, and it copies itself. Sydenham characterises it as "resembling most of the distempers wherewith mankind are afflicted," and, I may add that authorities of good

repute have recorded instances of the disease spreading, by force of imitation, through such institutions as those to which I have just referred, and to the inmates of which the words of Dr. Conolly are singularly applicable, that "there seems to be nothing strange or odd which hysteria has not at times exhibited."

Conolly, after quoting Dr. Gregory, to the effect that when Mrs. Siddons first appeared in Edinburgh her mimic cries and screams so affected the audience that it became quite the fashion for young men to attend the theatre to remove the sufferers—which service was called "carrying off the dead"—quotes several other cases on good authority. There is one case (also on Dr. Gregory's authority) of a lady's maid imitating her mistress; one by Dr. Bright, of several females in the same ward of an hospital seized with hysteria, in imitation of one who had an attack as the result of passing a probang down the gullet; one also by Dr. Darwin, of the inmates of a nunnery afflicted one after another, and at length all together, with a desire to imitate the strange nocturnal music of cats: one, too, by Dr. Whytt, as affecting young unmarried women, and even some men, in the island of Zetland, with palpitation, falling to the ground with arms and legs rigid or convulsed, and difficult breathing; an affection attended with the great inconvenience, "that when any one was attacked with it, at church, in the market, or in a public place, straightway all who had ever been subject to it were attacked again; whilst others, in the great disturbance thus occasioned, became for the first time

similarly affected;" and, finally, an account by Dr. Haygarth, of a convulsive malady that prevailed in the island of Anglesey, which, in the course of two or three months, attacked no less than eighteen girls.

The liability to these mimetic attacks among young people of either sex is one of the reasons which should restrain us from bringing them in large numbers under the same roof. One such case, in which Boerhaave rendered good service, teaches us that as one mental impression has occasioned the disease, another, and stronger one, of the same class may effect a cure. A girl in the house of charity at Haerlem fell into a convulsive disorder, deemed epileptic, in consequence of fright. Four by-standers in succession, and, at length, all the boys and girls in the institution caught the disease, and, when one fell into a fit, all the rest followed. Boerhaave took his measures accordingly. Portable furnaces of burning coal and irons for heating were brought into the house: and the doctor, putting on a grave and dignified manner, declared in the hearing of all the boys and girls that other means being useless, it was needful that whoever had a fit should be burnt in the arm, and if required, to the very bone. This threat put an end to the epidemic.

With this fact before us, we shall not be surprised to hear that the wives of officers, delicate and hysterical in country quarters, have lost their complaints amidst the fatigues or dangers of a march; that Parisian ladies forgot their hysterical affections in the French Revolution, Irish ladies in the rebellion, Scotch ladies in the

civil war of 1745-46, and those of America amid the events of the war of independence.

I have already spoken of that comparatively rare event, hysteria in men, and of its special connection with insanity. Conolly devotes some space to this subject, and, mentioning six cases within his own experience, adds four from other sources, and winds up with a statement by Dr. Trotter, the author of the "*Medicina Nautica*," to whom, as I have elsewhere stated, we owe, if not the victory of the first of June, certainly some considerable part of Lord Howe's success. He says, "We found not a few of the cases sent to the hospital-ships subject to very frequent fits of hysteria; and where this singular affection occurred, with as much violence of convulsion as we have ever marked it in female habits, attended with globus, dysphagia, immoderate risibility, weeping, and delirium." My personal experience extends to three cases:—one in a successful competitor for a prize, on the news of his success; another, in the convict artist referred to at p. 111; and a third, as the solitary expression of feeling in one who had just lost his wife and child. Perhaps, however, I ought to set down as hysteria in the male a curious case which I witnessed about forty years ago, when mesmerism was being much talked about, and which ought, I think, to be recorded.

I was one of a party assembled one evening at the house of a friend. The conversation took the direction of mesmerism, and I was appealed to, as the person most likely to understand it, for an explanation of its

method and effects. I disclaimed all knowledge of the subject beyond the fact that the manipulations of the mesmeriser consisted of passes of the hand before the face; and the effect sleep, or a state allied to it. I illustrated the method by making a few passes, which were not directed towards any one present, nor had I any particular person in my thoughts. But the master of the house, a healthy, well-made gentleman, above the middle height, inclined to corpulence, of the temperament known as phlegmatic, and of an easy disposition, very ready to accept the services of others where most men prefer to help themselves,—this gentleman, not being near me, or in the direction of my movements, suddenly sank on a sofa by which he was standing, and became convulsed, his features becoming so distorted that it was hard to say whether their expression, or the horror of his wife, or the surprise of the rest of the party, was the most noteworthy. As the expression of his face, as well as the incoherent words he uttered, had reference to myself, I withdrew, and, noiselessly as I thought, made my way to an apartment above. But his eyes, gestures, and words followed me there; and I soon determined to leave the house. Next day I met him, and would have shaken hands with him. But he motioned me away (as did the young lady whose case I gave at p. 85), alleging that he could not bear it. I shall enhance the interest of this case if I add that the person thus strangely and unexpectedly affected was the same who tried to shake the parts of speech out of his bed-curtains, the same whose wish to bathe shaped itself

into an ocular illusion, the same who expressed his grief at a great loss by a single hysteric fit. It is impossible to imagine a more complete illustration than this case affords of the existence of that exceptional condition of mind and nervous system which gives force to the passes of the mesmeriser, and the fixed gaze of the biologist. In this strange case there was neither intention on the part of the operator nor imposition or possible imitation on the part of the "subject." Attribute the phenomena, if we will, to the workings of the Imagination, we do but assign a real cause; we do not, and we cannot, explain its mode of action. Some time after this event, I was informed that the eldest son of this gentleman was found to be among the most susceptible persons at a meeting convened by a celebrated biologist.

This case teaches us at least one practical lesson, to wit, that the effects attributed to an external cause may be really due to the inner peculiarities of the "subject" himself; that convulsions and other abnormal states of the nervous system may originate not in the strong will and confident actions of the mesmeriser or biologist, but in the hysteric weakness of the "subject."

Chorea.—This convulsive affection, better known to the general public as St. Vitus's Dance, has not the same relation to insanity as epilepsy, or even hysteria; but as chorea and mania occasionally coexist, and chorea of long continuance sometimes passes into dementia, it should be briefly noticed in this place.

Under the one name, chorea, two different diseases conceal themselves—the one a continuous disease, chiefly

of children ; the other an intermittent, mainly of adults ; the one a distorting and grimacing malady, the other either a dance in which several persons partake, or strange running, leaping, and rotatory movements affecting one person at a time. Chorea got the name St. Vitus's dance (as one Horstius tells us) from the cure effected in certain women of disordered mind, who were wont to visit the chapel of St. Vitus, near Ulm, where they exhausted themselves by dancing from morning till night. It is not to be wondered at that the disease, its remedy, and its cure, returned annually. The dancing mania of the middle ages, and the strange proceedings of certain sects in America and in England, show us what a tendency superstition has to avail itself of saltatory aids ; nor can we be surprised to learn that chorea, like epilepsy, has been traced to the agency of a superior order of beings, and named accordingly, Hieronosos, or "Morbus Sacer." Why hysteria should be denied the same supernatural origin is not easy to discover.

But chorea, as we know it in England, is, as has just been stated, a malady of boys and girls, usually between the ages of eight and fourteen, but sometimes occurring as early as five or six, and even as late as seventy or eighty, when it may perhaps be considered as a habit of grimacing rather than a disease. Girls are more subject to it than boys in the proportion of three or two to one. The disease may be said to consist in a loss of power (more or less complete) in some muscles, and want of co-ordination in others,

which two causes combined mar every attempt at voluntary movement, creating a mixed result which some have likened to the gesticulations of actors, others to the movements of idiots and imbeciles. Such ordinary motions as swallowing are performed with droll contortions and grimaces, and one foot is dragged in walking. If the patient is ordered to hold out her hand, she will do so for a moment, and then withdraw it quickly and awkwardly, with distortions of the features. As a rule the convulsions cease during sleep.

The most likely explanation of the malady, and one in perfect keeping with the proved efficacy of aperient medicines judiciously and, if need be, perseveringly administered, is that it is a reflex action originating in some part of the alimentary tract, and thrown on to certain muscles, in the shape of weakness, and destruction of the power of co-ordination.

I do not profess to exhaust this subject; but must add, as the result of a large experience, that I have never known chorea, whether simple, or blended with disorder of mind, or as an adjunct (for this it often is) of the disorder known as marasmus or infantile fever, resist the treatment by aperients. When other remedies (such as arsenic) have been prescribed, there is good reason to believe that it is chiefly by their aperient action that they effect a cure. The worst case of chorea I ever saw (it was complicated with insanity) passed away in less than a fortnight under this simple treatment. It will enhance the importance of this fact if I remind my medical readers that chorea

is not such a disease as pulmonary consumption, which seems to yield to every kind of treatment when the quantity of tubercular deposit at any one time in an active state proves inadequate to the destruction of life; so that consumption, with all its characteristic symptoms and signs strongly marked at every fresh attack, may not prove fatal in spite of fatiguing journeys by sea and land, and the deprivation of the quiet comforts and wholesome surroundings of a well-ordered English home.

I might, if time allowed, and I were not afraid of being charged with trying to amuse rather than instruct, illustrate by appropriate cases the convulsive disorders known as *epilepsia cursiva*, *tarantismus*, leaping ague, *malleatio*, periodical jactitation, &c.; and by mixed cases in young men and young women who have performed involuntary feats of agility surpassing the acts of practised acrobats—rarely one such act, more commonly a succession of them divided by intervals of rest. Among their feats of strength and agility have been recorded runnings forward and backward, leaping, dancing, tumbling, spinning like tops, turning like rollers (even in running streams), drawing head and heels together like a bow and relaxing the spasms several times a minute, forward and backward motions of the trunk, standing on the head, and falling down, and convulsive rotations of head and chest. Epidemic convulsive attacks, too, are on record as the result of pulpit eloquence of the exciting order. One such took place in Scotland in 1742, and one in America

in 1800. But similar reasons restrain me from entering further into this subject. The article on chorea in the "Cyclopædia of Practical Medicine," signed Andrew Crawford, will satisfy all reasonable curiosity as to these anomalous convulsive movements. One lesson, having a direct bearing on my subject, these strange narratives teach us, namely, that in order to develope in the human body feats of supernatural agility and strength, what is required is the total withdrawal of the moderating influence of the will, as happens in cases such as these and in mania.

To the same quarter the reader may look for a sufficient statement of the results of experiments on animals by Majendie, Rolando, and Flourens, to which we may now add those of Ferrier and others, showing not only that certain portions of the greater and lesser brain have their own control over the movements of certain muscles, but that the section of certain parts will occasion the same forward and backward and rotatory movements which were observed in the cases just referred to.

I will finish this section by alluding to the case of a lad of fourteen by Dr. J. Cheyne, in whom fits came on at irregular intervals, sometimes resembling catalepsy, sometimes tetanus, sometimes hysteria, sometimes chorea, and who, like the three gentlemen mentioned at p. 52, thought himself at the play, or the spectator elsewhere of some amusing scene.

SECTION VIII.

THE EMOTIONS, PASSIONS, AND MOVEMENTS OF THE WILL.

MAN shares with other animals the necessity of supplying himself with food, and with the fierce animals who live on flesh the instinct of destruction; which, if more highly developed in them is reinforced in him by the necessity of providing himself with fuel, clothing, and shelter, in part by the destruction of living beings. This necessity implies a certain satisfaction, and even pleasure, in the act of killing—feelings which show themselves in most children, and in many weak-minded adults, in men who are otherwise humane by various kinds of sport, and in communities and nations by destructive wars waged under every sort of pretence, and with a cruelty which has afforded but too good a justification of the proverb "*homo homini lupus*." This instinct of destruction, there is no longer any room to doubt, constitutes in itself a form of madness, of which I shall have to treat in the second part of this work.

There is a second instinct which, when indulged in excess, leads to results equally lamentable; but of which I may observe that, being a concealed factor in the

physical and mental histories of men, and a topic which it is not expedient to discuss, it creates a difficulty in the way of displaying the whole truth, whether as regards individuals or nations.

Again, there is an instinct of self-preservation, a passionate clinging to life, which, when it is disregarded by the suicide, naturally raises a question of which the solution belongs to the second part of this work.

Setting aside these instincts which men share with animals, we have to consider the other emotions and passions which, when passing beyond the control of the will, form factors of mental unsoundness.

Supplied with information by the senses, and armed with power by the voluntary muscles, our motives to attend to the one and to use the other must be supplied from without by persons and things presented to us; from within by thoughts which the memory conjures up. These persons, things, and thoughts, stir up the emotions and passions, and these in their turn may lead to action. In treating of these emotions and passions there is an important circumstance which ought not to be overlooked.

The external objects and internal thoughts which excite the emotions and passions are presented to persons variously prepared to receive them, by original physical constitution, and the more or less conscious education of the nursery, the family, the school, the college, the workshop, the place of business. At the moment that any object calculated to stir up feelings of pleasure or pain, or emotions of satisfaction or anger, at the instant

that any thought or recollection presents itself to the mind, the person who receives the impression from without or from within is what all his antecedents have made him, modified by his state of health and the recent occurrences which have affected his mood of mind. Hence, if we would do justice to our subject, we must note the disposition, character, or habitual frame of mind, no less than the emotions and passions brought into play by the objects or thoughts calculated to arouse them.

If, by the aid of a dictionary or vocabulary, the reader will compile a list of the words in common use for describing the leading dispositions or characters of mankind, striking off all synonymous expressions, he will find that it does not fall short of fifty or sixty distinct items. The list will be found to comprise the amiable, the affectionate, the cheerful, the cautious, the contented, the persevering, and their opposites; and such contrasts as the bold and timid, the demonstrative and the reserved, the firm and the indulgent, the sceptical and the credulous, the thrifty and the lavish, the moral and the vicious. Innumerable combinations of these elementary characters, harmonious or discordant, make up the individuals whom we encounter in all societies of men, and upon whom outward objects or inward thoughts stir up the various emotions of pleasure and pain, of hope and joy, of love and pity, of pride and vanity, of awe and veneration, of shame, fear, anger, and remorse.

The best defined and most easily recognised of these

dispositions or characters may, under circumstances favourable to their growth and development, assume such dimensions, and so completely occupy all the thoughts as to constitute in themselves forms of insanity. Hence, among the graphic illustrations of Sir Alexander Morison, we have portraits of men and women consumed by insane fear, insane despair, insane hatred, insane love, insane jealousy. In the same work we have illustrations of those propensities which, when they culminate in crime, force themselves on the attention of our courts of law—insane acts of drunkenness, theft, arson, rape, homicide, and suicide.

But not only may some well-marked disposition deepen into madness, and so constitute the whole of the diseased condition, but it may give a colouring to an insanity which is of a mixed character, as is the case with religious mania.

Again, it is not difficult to understand how some strong passion or propensity, such as the lust of killing, may in one case present itself in all its naked horror; in another, clothed in a garment of mad thoughts: as when a religious fanatic, seized with the desire to kill, chooses his own child for his victim, and unconsciously seeks his justification for the bloody act he is bent on committing in the assurance that one so young and innocent will secure the heaven which, if it grew up, it might forfeit; or that it will surely rise again the third day; or that the Deity requires at his hands such a sacrifice as that of Abraham.

In the number of "The Journal of Mental Science"

for July, 1880, there is the remarkable case of a Mr. F—, the leader of an American sect known as the Adventists, who stabs his own daughter, a child to whom he was greatly attached, influenced, it would appear, by the double delusion that he was to imitate Abraham, and that his child would rise again the third day; but probably impelled to the murderous act by an impulse to kill, surging up as an independent factor among the stormy thoughts and feelings of a religious maniac.

It will be observed that I have made no separate and distinct allusion to conscience and the conscientious disposition, though a knowledge of right and wrong figures so prominently in our courts of law as the test of criminal responsibility. My motive for the omission is that I do not see any sufficient reason for treating conscience otherwise than as one of the group of emotions which answer swiftly and certainly to the objects or thoughts fitted to call them into play; or, if differing from them in any particular, in this, that conscience is maintained in a highly sensitive state by the constant and sustained efforts of the teachers of religion. In the classes among whom vice and crime abound, and to whom the teacher of religion does not gain access, it is reasonable to expect as low a development of conscience as of the other emotions which tend to virtue.

Of religious emotions, too, as distinct from the tenets round which they cluster, I have only to observe that they are maintained in a state of excessive activity by the frequent recurrence of services and ceremonies

which bring men and women together in large numbers, and submit them to the influences—often meretricious—of the fine arts, which are in themselves most effective stimulants of emotion. Hence the firm hold which religion has on the minds of men, and its strong powers of attraction and repulsion, whereby the religious world is gathered into congregations and scattered into sects: hence, too, the frightful destruction of life which religious emotion brings about when the instinct of destruction disguises itself in some dogmatic creed, or in a political movement which it is the interest of some despotic power or its adversaries to promote.

Religious mania, therefore, may be expected to be of frequent occurrence; and it would be universally recognised as the prevailing form of unsoundness of mind if it were not for the unwillingness of mankind to affix the seal of insanity to any dogmas which many men hold in common.

Of the movements of the Will I have yet something to say, in addition to what I have had occasion to remark in treating of other subjects. The human will is universally recognised as an element in all thought and in all action. It arrests sensations and converts them into distinct perceptions; it makes choice of the subjects to which the mind shall and shall not attend; it elects to act or not to act on the emotions as they spring up; it varies greatly in power in different persons, and may be observed so to do in the earliest childhood. In some persons, again, as we have already seen, it is so weak an element of their character that it can be brought into

perfect subservience to the will of another by manipulations which, but for experience to the contrary, we should have pronounced utterly incompetent to produce the effect. Lastly, we have seen it superseded in sleep, diverted into one narrow channel in somnambulism, and set at naught in persons subject to illusions and delusions of the mind.

Of various affections of the Memory, as factors of the unsound mind, I have already treated incidentally with sufficient fulness for the object I have in view. But for this incidental handling of the subject, it would have had a section to itself.

The excited emotions or passions, then, play an important part in the development of the Unsound Mind, whether by way of sudden outburst, or of chronic continuous tyranny over all its faculties; and I must have wholly failed in effecting the object I have had in view if I have not proved the intimate connection subsisting between mental emotions on the one hand, and whole classes of illusions and delusions on the other, as well as the busy part they take in the origination of dreams.

By demonstrating this connection of mental emotions with illusions, delusions, and dreams, to which I may add delirium also, I have, I trust, prepared the way for the more ready acceptance of the doctrines of the modern school of psychology, founded by Pinel and upheld by Prichard—doctrines which fully recognise a *moral*, or, to speak more precisely, an *emotional insanity*; and, more than this, the emotions and passions of the mind, excited and perverted, as the forerunners of

intellectual insanity, and its inseparable companions through the whole of its after course. "*Mental pain,*" "*a fundamental element in Insanity,*" "*the mental affection, which, at the commencement, was only an insanity of the feelings and emotions, becomes also an insanity of the intellect ;*" "*the immense majority of mental diseases commence with a state of profound emotional perversion, of a depressing and sorrowful character ;*" "*the great majority of mental diseases are first manifested not by senseless discourse or extreme acts, but by marked changes of disposition ;*" such expressions as these we meet with in all our modern treatises on Insanity : and Griesinger, whose words they are, is in perfect accord with all our ablest writers, and certainly with my own experience. That insanity, in its fully developed stage, is but the climax of a chronic disorder of the affections and emotions, is a doctrine which modern writers have brought very prominently forward, but which Boerhaave and his commentator, Van Swieten, acknowledged full one hundred years ago. The author last named says of the Raving Madness, "it usually follows from a long-continued melancholy;" and again, "the mania is nothing more than the melancholy raised to a greater degree of ferocity or violence."

SECTION IX.

MIXED CASES FROM CAUSES OF COMMON OCCURRENCE.

AT p. 31 I gave a case from Sir George Baker in which, among other well-marked nervous symptoms, illusions were occasioned by the vapours of burning charcoal. I then alluded to another case by the same authority, in which a number of children had severe nervous symptoms brought about by breathing impure air, largely consisting of the same gas, carbonic acid, which is a chief result of the combustion of charcoal. This remarkable case runs as follows :—

In the autumn of 1782, seventy-three healthy pauper children (forty-six girls and twenty-seven boys), from seven to fourteen years of age, were transferred from Wimbledon to King Street, Golden Square. On the fourteenth day after their arrival, a girl thirteen years old was suddenly seized with excruciating pain in the stomach and back, soon followed by violent headache, *delirium*, and convulsions, from which symptoms she obtained temporary relief. After a few days, another and another girl were attacked exactly in the same manner; and, at the end of three weeks from the change of domicile, the disease had become so prevalent that Sir George was

called in, and found nine girls and a woman servant ill, five in "extreme pain," three "cruelly convulsed," and two "raving in a fit of *delirium*." Another woman servant "was tormented by a severe colic." Sir George was told that some of these patients had had several attacks, and had been relieved chiefly by purgatives; but that within the last two days the attacks had been more violent, the intervals of ease shorter, and the delirium almost incessant. Sickness at stomach was mentioned as a leading symptom, and constipation general; and it was stated that in three cases a spontaneous attack of vomiting and purging had given immediate and permanent relief. The patients sometimes lay quiet for one or two hours, and then started up screaming. They themselves stated that their paroxysms began with pain in the stomach, which soon abated, and was followed by pain at the back of the head, and this by "total perversion of the understanding." "None of them had any degree of fever."

The worst attacks occurred immediately after sleep. Four or five other girls had complained of pain in the stomach and bowels. This strange malady affected only females, was confined to those who had slept together in the same room, and of these to such as were above thirteen years of age. The house, "being almost entirely wainscoted," had been painted a month before the arrival of the children, and the smell of paint was still very perceptible in every part of it. Now the sleeping-room occupied by the sufferers was found to be eight feet high, twenty long, and sixteen wide. It held

ten beds, nine for eighteen girls two in a bed, and one for the servant ; but, being a favourite room, on account of its warmth, it was generally crowded at night by a much greater number than its just complement. Counting the woman as equivalent to two children, the cubic space per child would be 128 feet. But to make the matter worse, "the chimney had been stopped up with bricks ;" and it was "the constant custom of the servant, at night, to keep the door shut, and to close the window-shutters." The parish doctor when called, as often happened, to visit this room at midnight, found "the smell of paint very disagreeable." The three candles and oil-lamp burnt at night were observed to give a glimmering light, and to be "frequently almost extinguished." A woman servant, who had passed one night only in this room, in attendance on the sick children, was the following morning severely attacked by the same pain, *delirium*, and convulsions.

Now, it is a remarkable fact that of eighteen girls who slept in an adjoining room of the same size, painted at the same time, but differing in having an open chimney, and not being so closely shut up, nor so crowded during the night, not one had a symptom of the disease. The diet and treatment of the children was the same throughout the house, and was considered satisfactory.

The patients were ordered to be removed to a large apartment, and to be well supplied with fresh air. They passed a quiet night, but next morning were seized in the usual manner ; but the fits were less frequent, less

violent, without convulsions, and there was an abatement of the delirium in the intervals. Things went on well for four days; but on the morning of the fifth, Sir George found all the patients, "after having passed many hours in pain and convulsions, in a most outrageous state of insanity, which continued the whole day." From that time the disorder made no general attack; and though all the patients had several returns of pain in the stomach and bowels, they were less severe, were rarely followed by convulsions, and seemed to change their seat to the lower bowel, creating temesmus and dysuria. The only other matters worthy of remark are that "during the whole course of the disorder, whilst there was a remission of colic and convulsion," there were "pains in the breast, legs, and arms," and that no fresh seizures took place after the sleeping-room was evacuated. No death happened; but in two instances the recovery was very slow, though ultimately complete.

This case is, I admit, not quite satisfactory; for though it presents us with those conditions of equality (in size of apartments, and recent use of paint) for which Science is ever on the look out, and brings into bold relief the excess of crowding and exclusion of air, as concomitants and probable causes of the bodily and mental disorders, it must be admitted to be quite possible that the excessive impurity of the air co-operated with the emanations from the painted walls to produce a result which neither cause by itself could have brought about. But although the symptoms of intestinal derangement were such as might be assigned

to an exceptional and peculiar action of lead-poison, it is well worthy of remark that Sir George Baker, who was the first to demonstrate the true cause of the Devonshire colic, and of the same disease as produced by analogous lead-impregnations, does not hint at the poison of lead as even a possible cause of the illness which he describes.

But whether this collection of cases is to be regarded as an instance of intense pollution of the air from over-crowding and utter absence of ventilation; or of this, co-operating with the poison of lead, I esteem it as one of the most instructive contributions yet made not to Hygiène only, but to the science of Psychology also. As such, I introduce it here.

It will have been observed that *Illusions* are not distinctly mentioned in this case, though they were present, together with giddiness, stupor, delirium, and convulsions, in the case of poisoning by the vapours of burning charcoal; and this concurrence of Illusions with other affections of the nervous centres marked by unconsciousness or insensibility, is a not unimportant part of their history. As the poison of lead may possibly have borne its part in the case I have just related, it may be well to note that chronic poisoning by lead has given rise to muttering delirium with tremor, passing into stupor and palsy, and in one instance to stupor alternating with maniacal excitement.

Recollecting the interesting account given by Dr. Latham of the association of nervous symptoms with diarrhoea and dysentery in the epidemic at Millbank

which, during a long and severe winter, followed a large reduction of food and the entire omission of the potato, I referred to that account with some interest, as likely to add some instructive facts of the class we are now considering. And I have not been altogether disappointed; for though I do not find Illusions distinctly mentioned, I read of "various degrees of nervous affection, as tremors, cramps, or spasms, and various degrees of mental despondency" (a rare occurrence among prisoners in health); of two prisoners that had already died, "after symptoms immediately referable to the head," and of "some instances" "of very frightful convulsions." Then, as the disease developed itself under Dr. Latham's own observation, he tells us of "disorders of the brain and nervous system" "becoming more and more frequent, and of various kinds, head-ache, vertigo, cramps, and twitchings of the limbs, delirium, convulsions, and apoplexy."

Then we are told of one male prisoner who "suffering cramp and diarrhoea, died suddenly, apoplectic;" and of a female prisoner who first had head-ache, and then exhibited a strange perverseness, which was rapidly aggravated to mania, and soon after died.

In this part of my inquiry, then, I have happened, as it were, to come across cases of mania or maniacal excitement, occasioned by the fumes of burning charcoal, overcrowding (with perhaps the addition of the emanations from painted walls), and a diet in which not only the quantity of food was reduced to a low point, but from which the potato (sole anti-scorbutic of prison

populations) was wholly omitted. It is not an unimportant item in the train of reasoning which I am following out that I should trace the origin of severe disorders of the mind to such common causes as impure air and defective diet; and the inference to be drawn from this fact will lose none of its force if we contemplate these causes operating among groups of children and prisoners. We know that such epidemics as the dancing mania have followed in the wake of pestilence and famine, while the homicidal mania of the first French revolution, and the mixed epidemic of homicide and fire-raising which prevailed during the siege of Paris in 1870, were in part explained by the scarcity of the one period and the famine of the other.

SECTION X.

CASE OF MR. PERCEVAL.

THE statements which I have made in previous sections respecting the Factors or Elements of the Unsound Mind, ought to find confirmation and full illustration in cases of madness. Illusions, Illusive transformations and Delusions; Dreams and Delirium; Incoherent Speech and Convulsive Movements;—and excited and distorted passions, ought to display themselves side by side, mixed up one with another, in cases of the form of disease known as General Mania. An educated gentleman, who had passed through that strange state, and recovered from it sufficiently to be able to recall its leading thoughts, feelings, and incidents, has proved able and willing to impart to us this rare and precious knowledge.

The Honourable Mr. Perceval who, in 1838, published his "Narrative of the Treatment experienced by a Gentleman during a State of Mental Derangement; designed to Explain the Causes and the Nature of Insanity;" and who in 1840, having suffered a relapse, committed suicide by throwing himself out of window, supplies us with the illustration of which we are in search.

This curious and instructive history was evidently written by one who had passed from well-marked mania through several stages of improvement, to comparative sanity. The history opens with an account of one of the most severe afflictions which could befall a man—the death of his father by the hand of an assassin. He represents himself as having been brought up religiously, and as having strong religious feelings. He joins the party known as evangelical; becomes a zealous preacher; mistakes his zeal for a certain sign of election; and, trusting to be kept from sin by the Holy Spirit, becomes lukewarm and inconsistent, and falls into sin. But, still zealous and enthusiastic, he, when engaged in earnest prayer, sees visions—"pictures (as he says) of what soon came to pass in reality, but with certain variations." We next find him among the Rowites, listening to the unknown tongues, and soon exercising the gift himself, singing unintelligible nonsense in beautiful tones, which affected his mind greatly, or speaking under the supposed guidance of the Holy Spirit, which moved his arms and fingers, and guided him to passages of the Bible in connexion with his line of argument. Soon after this he is placed under the care of a physician, and at length is confined in an asylum.

At first we find him doubting both his delusions and his doctors, and as his delusions forbid him to trust to human means, while his reason asserts their efficacy, he settles the difficulty by taking half the physic ordered for him. Then he hears voices, and,

believing them to be the voices of spirits, he gives himself up to their guidance, however ridiculous the things they bid him do. Now they put him in one absurd posture, now in another; now they spin him round like a top, anon they make him leap over a stile; or they bid him suffocate himself with his pillow, or they set him to wrestle with his keeper—but always with the notion that by obeying these injunctions, some great good is to be obtained—no less a good than his own salvation, and that of his fellow-creatures. The confusion into which he is thrown by the conflicts that spring up between the strange promptings of his spirits, and his own reason, is dreadful, and he finishes one of these conflicts by inwardly cursing the *Holy Trinity*. At this time he questioned the reality of the voices and of the spirits, for he says, “I had a species of doubt, but no one who has not been deranged can understand how dreadfully true a lunatic’s insane imaginations appear to him, how slight his sane doubts.” As the strange workings of his brain are taken for the commands of spirits, so the sensations of his body are worked into the texture of imaginary scenes. All the faculties of his mind suffer. He has all sorts of illusions and illusive transformations. He is the sport of a thousand fancies which sense and reason strive in vain to correct. But if anything is hard to explain, his delusion steps in as interpreter, and of every absurd action his delusion is the cause. He resists and strikes his keepers because his spirits tell him that they wish it. He is taught that he can help a fellow-lunatic by

spinning round upon his heel ; he throws himself upon the ground, or over every stile he comes to, because to do such things in *decision* and *precision* is meritorious. His capacity of belief is something marvellous. He can be in many places at the same time ; in Portugal and in England ; in Heaven and on Earth. At one time he is the hero of a story heard long ago when abroad, and perpetrates unheard-of enormities. At another, he is being crucified in different parts of the earth at the same instant. A keeper will be one moment the Maker of all things, at another a mere mortal of whose cruelty he complains. His moral sense, too, is blunted, and every natural affection perverted ; so that his mother and family are objects of his hatred and aversion, even at the time that he is giving proof of their affectionate care for him.

Such is a very brief and very imperfect summary of a case of general mania—a very chaos of thought and feeling, with one of the higher sentiments, to which education and habit had given undue prominence, taking the lead of all the rest, giving its own strange colouring to every thought ; its own direction to every action. I quote it with the most perfect confidence, inasmuch as every statement it contains is in exact harmony with information given me by one who had suffered in the same way, as well as with the inferences of those who, as lookers on, have slowly and painfully, through acts and utterances equally strange, come to an understanding of the true state of the cases they have been compelled to witness.

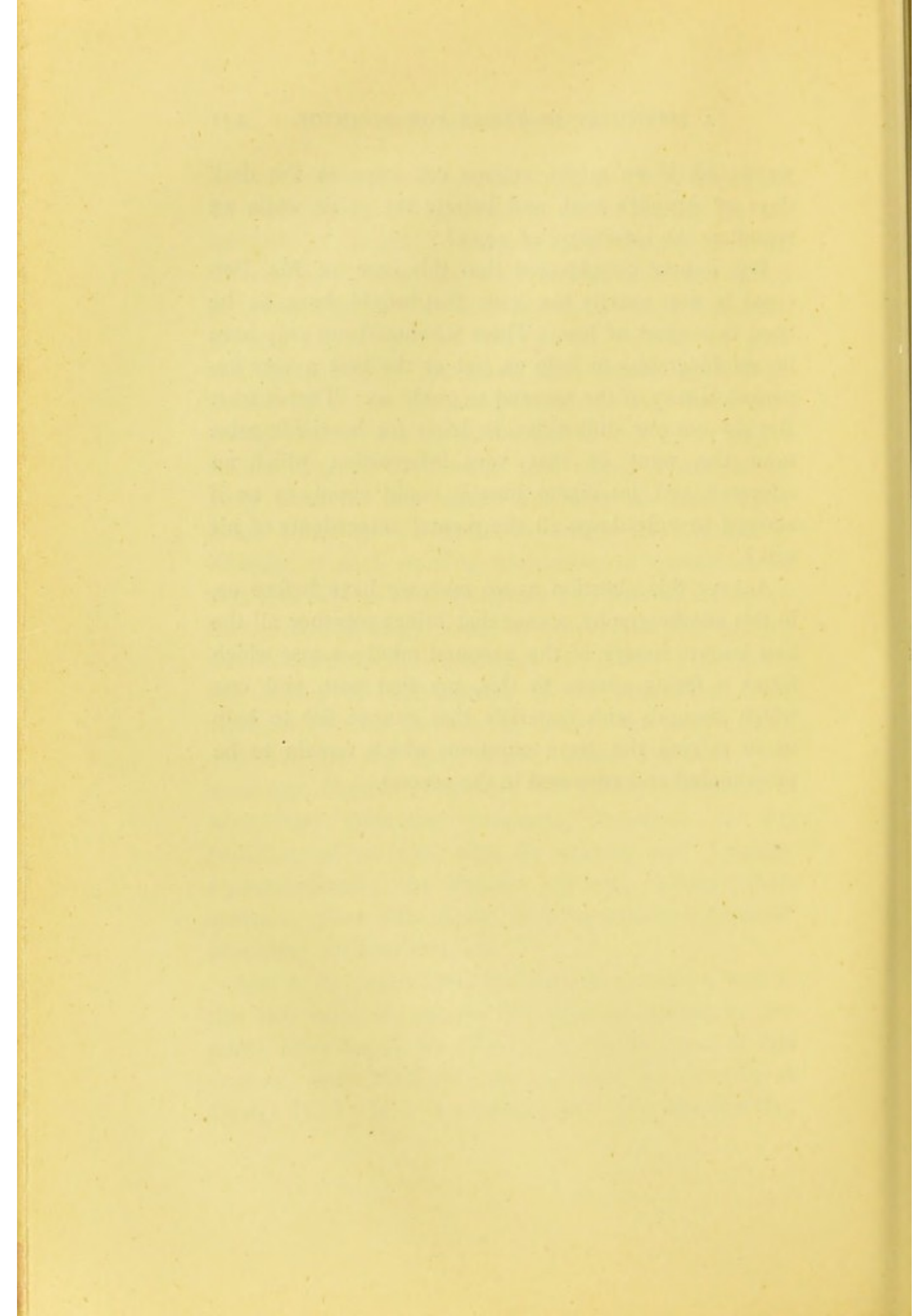
And now, taking this as the type of a very large class of cases, of special interest in their bearing on the question of Criminal Responsibility, I may, I trust, assume that I have not been indulging in idle details or trivial refinements. It is perhaps a strong expression to use; but to me this case seems actually to glow and sparkle under the strong light thrown upon it by the factors of the Unsound Mind, as they have been passed one by one in review before our eyes; and I believe that I can justify this strong statement by every detail of the case. For me, at least, there is no obscurity. I realize to myself the *Illusions of Hearing*, of such startling distinctness of spoken words, that with him, as with thousands and tens of thousands before him, in every period of the world's history, they are accepted as the utterances of spirits; I recognise the *Illusive Transformations* of the objects of every sense, in all their bewildering reality; the Dream (pure and simple); the busy, active, intent Delirium; the dominant formula of words; the bodily sensation, or involuntary muscular movement, furnished, in the twinkling of an eye, with its dreamy and fantastic accompaniment; the choreic, epileptic, rotary movements supplied with motive and explanation by the all-pervading religious emotion.

And is it, I would ask, in reference to such a case as this that we would reopen the question settled, as one might have hoped, for all time, in the first year of this century, when Hadfield was acquitted for shooting at George III.? Is it in reference to a case like this that

we would, if we might, retrace our steps to the dark days of Arnold's trial, and imitate the spirit, while we repudiate the ignorance, of 1723?

But it may be objected that this case of Mr. Perceval is not exactly the case that would have to be tried in a court of law. There we should not only have no autobiography to help us, but at the best a very imperfect history of the accused to guide us. That is true. But do not our difficulties in trials for homicide arise from the want of that very information which an educated and intelligent lunatic could supply to us if allowed to write down all the mental antecedents of his acts?

Answer this question as we may, we have before us, in this autobiography, a case that brings together all the best known factors of the unsound mind—a case which forms a fitting climax to this, my first part, and one which abounds with materials that cannot fail to help us in solving the grave questions which remain to be propounded and answered in the second.



PART II.



THE PLEA OF INSANITY.

PART II
THE FIELD OF BATTLE

PART II.

SECTION I.

THE UNSOUND MIND, ITS VARIETIES, AND THEIR CLASSIFICATION.

MANY attempts have been made both by physicians and psychologists to define, describe, and classify the Unsound Mind, and its varieties. They have tried to separate the sound and unsound by a distinct line of demarcation, and to so define or describe the several forms of unsoundness that, when they present themselves in practice, they may be easily recognised.

In trying to effect this object we encounter the obvious difficulty that the sound mind, which is our standard of comparison, is not one thing but many, not an object of sense, but a something to be inferred from acts and words, spoken and written, from an imperfect statement of the present, and an equally incomplete history of the past.

Nor does it lessen our difficulty to be told, though on no better authority than that of poets, satirists, and cynics, that we are engaged in a childish chase after that which has no existence; that there is only one perfectly sound mind in the universe; and that all

men are mad, and only to be distinguished from each other by the more or less. But serious-minded practical men, who prefer homely truths to the most brilliant epigrams, refuse to compare the finite with the infinite, a being whose mind displays itself through material organs with one purely spiritual. Nor will they consent to compare man as they find him with that philosophical abstraction, the owner of a perfect mind. With a perfect mind they feel that they have no business : it is with a sound mind that they have to deal, and they know that this is a thing of degrees, of which the limits are not so wide apart as they are sometimes thought to be.

Nor are the factors of the sound mind so numerous as to prove perplexing, if we will only eliminate, as having nothing to do with soundness or unsoundness, the special talents and acquirements by which one man is distinguished from and excels another. In other words, the mental characteristics by which we recognise and test the sound mind are few in number. If a man is neither the sport of illusions nor the slave of delusions ; if his emotions and passions are under due restraint, both in his domestic life and in his intercourse with the outer world ; if he manages his property and conducts his business with credit and success ; if, above all, he has undergone no marked deterioration of character, he will be esteemed a person of sound mind.

In this deterioration of character, this contrast to his former and better self, we possess a means of discrimination applicable to every form of unsound mind

except the states known as Idiocy and Imbecility, which have to be tried by tests of their own. This test of character may be fitly compared to those aggregates of symptoms and signs by which we recognise the presence of bodily disease.

If we now pass from the unsound mind to the varieties of unsoundness into which it may be distributed, and make the attempt to define or describe them, we find ourselves surrounded by the same difficulties in an exaggerated form, which beset all our attempts at defining or describing the multitudinous diseases to which the bodily frame is liable. Forgetting that both bodily and mental maladies are, like by far the greater number of the objects with which men have to deal, fitting subjects for *recognition*, but not for *definition* or *description*, the medical witness in a court of law is often pressed to give a definition of insanity by counsel utterly unconscious of the unreasonable nature of the demand; just as if a witness who swears to the identity of an acquaintance, were expected to justify himself by a condensed definition or more diffuse description of his person. It is just so with the most familiar natural objects. If a mineralogist is asked to say whether some lump of yellow matter is gold, he does not define or describe the precious metal, but applies a single decisive test; or, if he is presented with a sparkling crystal, and asked whether it is, or is not, a diamond, his answer is based on the same simple method of procedure.

The work of classification is happily not dependent on

exact definitions or accurate descriptions ; but, as a rule, on some single and well ascertained feature of mental unsoundness. Thus, Lord Coke, a man of large experience and great ability, two centuries and a-half ago, recognising, as his predecessors had done, the two states of Idiocy and Lunacy, applies to the first what I may call the test of time, and defines the "Ideot" as one who from his nativity by a perpetual infirmity is *non compos mentis*. Then, dealing as we infer with those whose mental unsoundness dates from some later period of life, he distinguishes the man who by sickness, grief, or other accident, wholly loseth his memory and understanding, from the Lunatic who hath sometimes his understanding and sometimes not, and is called *non compos mentis* so long as he hath not understanding, and from the drunkard, who, by his own vicious acts, for a time depriveth himself of his memory and understanding.

Less than half-a-century later, Sir Matthew Hale, by recognising the two states of general and partial unsoundness, may be said to have completed the classification which Lord Coke began. Hence we are indebted to the Bench for a classification in which we recognise the four distinct forms, Idiocy, Dementia, Mania, and Monomania ; Idiocy being separated from Dementia by the fact that the latter implies a loss of that memory and understanding which the former never possessed, and Monomania from Mania as the natural result of observation, no less than of the teaching of the poets and philosophers of Greece and Rome.

Physicians and psychologists in their attempts at classification have naturally entered more into detail. Dr. Thomas Arnold, for instance, who published the first edition of his "observations" in 1782, and brought both the learning of the ancients and his own experience to bear upon his work, recognises no less than four varieties of what he terms "Ideal Insanity," and thirteen of "Notional Insanity," with sixteen subdivisions of the "Pathetic" form of the notional disease. But it is worthy of notice that Arnold himself does not distinguish Idiocy from Dementia, which Lord Coke certainly did. I note in passing that "Hypochondriacal" Insanity is one of Arnold's notional group, and that "Nostalgic" Insanity finds a place among his sub-class of "Pathetic." "Impulsive Insanity," too, finds a name and a place among his notional group, though he gives no instance of that homicidal impulse which from time to time perplexes our courts of law.

Since Arnold's day a more practical spirit has pervaded all our attempts at classification. We have contented ourselves with a few principal and a few subordinate headings, leaving it to be understood that cases of mental unsoundness, whatever the group into which they fall, display an infinite variety of combination in the factors by which it is built up.

After carefully considering both the sound principles of classification and the more recent attempts to carry them into practice, I submit with some confidence the following arrangements: I begin by recognising three leading divisions, the *undeveloped*, the *degenerate*, and

the *disordered* mind. To the *undeveloped* I assign the *Idiot* and the *Imbecile*, with the mixed class called Cretins in Switzerland and Cagots in France. All these are *non compos mentis* from their nativity, and suffer from a perpetual infirmity. For these no better name can be found than Amentia. Among the *degenerate* I place all those who, not having been born defective in mind, have come to be so by reason of sickness, grief, shock, or accident, through injuries to the brain, intense application of the mind, a previous attack of mania, diseases of the nervous centres, and the slow decay of age. For this group the proper name is Dementia. The *disordered* mind embraces the large remnant of cases, to which we give the time-honoured appellation of Mania. It comprises the Lunacy of the lawyers, and holds in its wide embrace Raving Incoherency, Intellectual and Moral Insanity, from the most partial to the most general of their forms, and the perpetrators of all those deeds of fraud or violence, whether inspired by Illusion or by Delusion, or by both, which engage the attention of our courts of law. To this group, too, it is convenient to refer the several forms of Impulsive Insanity or Instinctive Mania.

I assume this classification to be accepted, and proceed to inquire which of the classes and sub-classes, by acts of fraud or violence, gives rise to the question of criminal responsibility in courts of law; and, though the plea of insanity may be raised in other cases than those of homicide, it is to that that I propose to restrict myself in the present inquiry.

Now, if we accept as a convenient definition of Idiocy those cases of congenital defect in which the sufferer cannot attain to the use of language (and these are cases in which bodily defects that incapacitate him from the commission of homicide often accompany the mental deficiency) our attention will have to be restricted to the larger remnant of the subjects of Amentia known as Imbeciles, or Weak-minded.

Again, as the subjects of Dementia are either incapable of homicidal acts, or little disposed to their commission, it will not be necessary to give special attention to them.

There will, therefore, remain to be considered the large class of persons affected with Mania or Monomania, and the smaller class of persons who become subject to Impulsive Insanity, or Instinctive Mania. Imbecility, Mania, and Impulsive Insanity, will, therefore, form fitting subjects of inquiry in a distinct section of this second part.

But between the present section and that which relates to these three leading forms of Unsoundness, I shall interpose a section treating of the inferences to be drawn from the facts and reasonings of my first part; and shall bring my work to a conclusion by four sections treating of the Punishment of the Madman, the Teaching of Figures, our existing Legislation and Usage, and the Amendment of the Law.

SECTION II.

INFERENCES FROM THE FACTS AND REASONINGS OF PART I.

I WILL now place the great question of criminal responsibility—the Plea of Insanity in Criminal cases—in the light kindled by the facts and inferences set forth in the first part of this work.

In other words, I shall treat the question of criminal responsibility as an abstract scientific question. I shall ignore for the present the fact that the plea of Insanity has already been raised and decided in many hundreds of cases, and inquire whether or not, with such facts as those brought forward in my first part to guide us, we should have inferred that men and women recognised as of unsound mind, but deemed harmless, and others not previously treated as insane, (at any rate not certified as such, perhaps not even suspected of being so) would from time to time startle and alarm society by mischievous, cruel, and bloody acts.

Perhaps I ought to explain my method of procedure more fully by stating that I do not now propose to criticise individual cases, but only to refer to a few cases incidentally. I shall not at present inquire whether one man acquitted on the ground of Insanity has been rightly acquitted ; whether a second, convicted and afterwards

found insane, and sent to an asylum, has been wisely dealt with; or whether a third declared guilty, after disallowing the Plea of Insanity, ought to have suffered the extreme penalty of the law. Our time will, I think, be better occupied by taking a larger and broader view of the subject.

And first, as to the abstract, or *à priori*, question. It was not without reason that I devoted so much space in my first part to Illusions of the senses. I did so, not merely because they are acknowledgedly very common in some forms of Unsound Mind, but also because they occur in many persons of sound and cultivated intellects, able both to observe and describe that which they see, hear, and experience. From the written statements of some of these most competent observers, and from the verbal descriptions of others faithfully recorded, we learn that illusions may occur in persons of either sex, at almost any age, with every variety of constitution, healthy and even robust, subject to slight indisposition, entering on, or recovering from, severe febrile or inflammatory attacks, exhausted by watching, anxiety, and privation, under the influence of poisons, and not rarely suffering from some disorder of the alimentary canal, which simple medicines are able to remove—in a word, acknowledging a vast variety of causes from the most trivial to the most important; causes which, whether they affect the brain and cerebral circulation directly or indirectly, must inevitably come into operation in many cases of insanity. Now these illusions, as they occur in persons of sound mind, are *always*

involuntary, *often* in no sense the work of the Imagination, and *generally* so real and life-like, that even those who have long been subject to them, and in theory fully understand them, nevertheless, at the time of their visitation, act as if they were real objects of sense.

Let us now for a moment try to divest ourselves of all knowledge and experience of insanity, and, with these facts before us, relating to the one function of sensation, apply them, according to the strictest rules of analogy, to the other functions of the brain—thought, emotion, and muscular movement—and what more likely than involuntary thoughts, or *delusions*, unrestrained emotions, words without ideas, convulsive movements, and acts known to be immoral, illegal, unreasonable, and yet perpetrated because conscience is as powerless to admonish and check, as the reason of the person subject to spectral illusions is to restrain his actions when his phantoms are actually present to his senses!

I must not omit in this place to note the curious case which I cited from Dr. Conolly, of what may be termed the blotting out of some one object from the group to which it belongs—the column of the Place Vendome from the square in which it stands. Such partial abstraction of objects finds its analogies in the regions of sense and memory, as well as in cases like that which Dr. John Reid, somewhat figuratively describes as a “new species of paralysis, a palsy of the heart, a congelation of the affections.” A lady, described as not deficient in

natural feeling, said that she could without emotion see every one of her family lying dead at her feet, and yet she retained her sense of right, and kept, as the only sense that seemed left to her, "an abstract sense of duty."

If from illusions, which may affect persons of sound or of unsound mind, we pass on to those affections of the mind which can only attack the insane; which are in themselves evidences of unsoundness—such as *Delusions*,—we recognise in them the same independence of the will, and a like severance from reality (data as much wanting to the one as a real external object to the other). In neither case do we recognise the work of the imagination; while, in the case of delusions, it is equally difficult to detect any action of the reasoning faculty, unless it be to justify and defend the mind's foregone conclusions—a proceeding to which, I need not say, the sane and the insane are nearly equally addicted.

Whatever expectations, then, the study of the phenomena of Illusions had led us to entertain, the study of Delusions has strengthened and confirmed.

From illusions without external object, and delusions without data; from mysterious modifications of cerebral circulation or brain-tissue, giving rise to involuntary sensations and involuntary thoughts, the transition is easy and natural to involuntary emotions and passions, causeless hatreds, unreasonable suspicions, groundless fears, wild movements of revenge and despair.

In *dreams*, the acknowledged analogues of madness, and our next subject of inquiry, we saw illusions and

delusions springing into existence under circumstances which preclude every deliberate voluntary action of every mental faculty. The brain, isolated from all influences and sources of excitement except such as the sleeping body itself supplies, creates its own world of sensations, thoughts, and emotions (theatre, actors, and audience all in one); and all that is necessary, in order that we may be prepared to expect at the hands of the madman such acts as give rise to questions of criminal responsibility, is one continuous dream, with the addition of some such command over the muscles as the Somnambulist is known to possess. The curious facts connected with dreams originating in a loud noise, which, while it wakes the sleeper, both excites and ends the dream, must serve to convince us of the quickness of the brain's workings, and must suggest to every thoughtful person the possibility (to say the least) of sudden destructive impulses carried into effect before any restraining faculty or feeling (reason, humanity, or conscience) can be summoned to the rescue.

In *delirium* (a condition often brought about by a degree of febrile excitement not exceeding that which must exist habitually in many madmen), we saw the mind busy and intent, occupied by one train of thought, but often startling the attendants by a sudden effort at escape, or equally sudden act of aggressive violence. Again, in that curious incident of the febrile state, as also in the effects sometimes produced by stunning blows on the head, we saw the memory of some past period, of some previously acquired accomplishment, as

completely obliterated as if it had never existed, or, on the contrary, the memory, with other mental faculties, endowed with unwonted activity, and old stores of words and things once unconsciously put aside in that wonderful receptacle of the mind's merchandise, brought forward and displayed as fresh as when they were first deposited. All these phenomena, in all their strangeness, are common to febrile delirium and to madness.

In *somnambulism* we seemed to be brought nearer to madness, by the addition of acts to thoughts. In the unexpected displays of memory and talent, and still more in acts of theft, suicide, and homicide, attempted or actually committed, we could not but recognise a resemblance to some forms of unsoundness.

From artificial somnambulism, and the strange states allied to it and sleep, we learn by what apparently inadequate means a certain class of persons can be brought into servile subjection to others; a fact which helps us to understand how the imbecile may be made the tool of persons of sounder mind and stronger will than his own.

In *incoherent speech*, and senseless formulæ of words, it was easy to see the analogue of Illusions and Delusions, no less than a very common factor of many forms of Mental Unsoundness:—the spoken words of madness being sometimes the incoherent offspring of excited emotion, but sometimes, also, of some mysterious action of the brain itself, in every sense involuntary—may I venture to call it *the Epilepsy of the Tongue*?

In *convulsive movements*, again, we recognised a pro-

minent factor of Insanity, and in many acts of violence a common effect of Illusions or Delusions :—whispered commands, and strange beliefs compelling to acts equally strange.

Lastly, in *excited emotions and passions*, we saw the antecedents and causes of illusions and delusions, dreams and delirium, as well as the forerunners of Intellectual Insanity, and its close attendant and inseparable companion in a very large and important class of cases.

It is not easy to exaggerate the importance of the facts related in the ninth section of my first part. The overcrowding of the pauper children, and the disastrous error in diet of the prison at Millbank, leading, the one directly, the other more remotely, to delirium and madness, and strange affections of the nervous system, teach us how the commonest of physical causes may give rise to the most serious consequences in the domain of mind, and help us to what is most probably a not infrequent explanation of the stunted and deformed bodies and the weak and perverse minds which issue from the dwellings of the poor, and even of the rich, when the simple rules of health are ignored and neglected. If to this lesson we add that other teaching of experience, that conditions of the alimentary canal, which a resort to the simplest medicines might prevent or remedy, often act as direct causes of mental disturbance, and sometimes of maniacal outbreaks, we are able to understand why there is so much Idiocy and Imbecility in the world, and how important a part the commonest of physical causes

may have played in bringing about the acts of which homicide is the climax.

On the final chapter of my first part, which displayed the leading factors of the Unsound Mind in combined action, in a case of General Mania growing out of religious enthusiasm, I have no further remark to make. The case speaks for itself.

To convert this retrospect into a brief summary, let me say that my object in the first part of this work has been to show that many mental phenomena ordinarily attributed to the workings of some special faculty of the mind, such as the Imagination or the Reason, are in reality involuntary actions of the Brain itself, differing from convulsions only in the organs by which they manifest themselves: not at all in their nature or essence. Or, taking Epilepsy as a well defined and carefully studied convulsive disorder, I would affirm that there are Epilepsies of the organs of sense (Illusions), Epilepsies of the organs of thought (Delusions), Epilepsies of the organs of speech (Incoherence), Epilepsies of the face, neck, trunk, and limbs—of the whole system of the voluntary muscles—violent, aimless, unconscious struggles.

I had written this last sentence, and was about to justify it by facts and arguments, as an inference of my own, when a misgiving as to its originality sent me back to the passages which I had marked some time since in Dr. Maudsley's able Treatise, and found among them some quotations from Darwin's "*Zoonomia*," which establish his claim to be the first to perceive and express

the truth which my words, I believe, embody. Dr. Darwin inferred from cases of his own observing that "one kind of delirium is a convulsion of the organs of sense, and that our ideas are the motions of these organs;" and speaking of one of his patients, he says: "I thought the convulsions of her ideas less dangerous than those of her muscles." He uses the same expression in speaking of another case. Strange to say, I find the passages from the "Zoonomia," which embody this theory of Darwin's, entered in a Common Place Book which I kept in the days of my pupilage, now nearly fifty years ago. I must, therefore, take credit to myself only for a certain breadth of statement, and for the completeness of the illustration which I now proceed to offer.

If the expressions "*convulsions or epilepsies of sense, thought, and speech*," really embody a truth, it ought to be possible to illustrate it by cases which show the convulsions of the epileptic seizure preceding or following, or alternating with, illusions, delusions, and incoherent utterances. It ought also to be possible to show (and again by appropriate cases), convulsions, illusions, delusions, and incoherencies, co-existing in cases due to a common cause, such as poison. And once more, we ought to be able to bring forward cases of the same cause producing in one person the convulsions of epilepsy, in another the involuntary sensations, thoughts, or verbal utterances, of which I have been speaking.

That *illusions* of the senses, in a large number of cases of Epilepsy, immediately precede the convulsions of the

muscles, is a notorious fact, which I shall illustrate by one or two conspicuous examples. First there is Dr. Gregory's case of the old woman in the red cloak, who seemed to strike the patient on the head with her crutch; Hoffmann's case of a young man who, thinking that a spectre had jumped upon his shoulders, first fell ill, and then became epileptic; and Brierre de Boismont's case of an epileptic who, the moment before losing consciousness, used to see the figure of a demon, and fell to the ground crying out, "Here is the Devil." Of illusions following the fit, the same author gives an instance in the person of a man who, after one of his epileptic fits to which he was liable, fell into a fury, saw himself surrounded by flames, and, being delighted with the colour of blood, killed three men in succession, one of them a relative to whom he was very much attached. Dr. Maudsley, too, tells us of an epileptic under his care, usually a mild and gentle being, who, after a series of fits, used to become a most violent, dangerous, and destructive maniac; the cause of his violence being that he thought he was fighting for his life with a lion. The same authority bears witness to the like occurrence of Illusive Transformations. After describing the furious Epileptic Maniac as striking and injuring whatsoever and whomsoever he meets, storming through the ward of an asylum with convulsed energy, like some destructive tempest, without notion or consciousness of what he is doing, attacking friend or foe indifferently, and yet having some method in his madness, he says that real objects present themselves to him in the strangest and most unreal

characters; lifeless objects threaten his life, "and the pitying face of a friend becomes the menacing face of a devil."

Of *delusions* following epilepsy, Cazauvich, as quoted by Maudsley, gives us a good illustration. A young man after having had a few fits, became extremely melancholic, being possessed with the idea that he was to be murdered in his father's house. And Dr. Maudsley himself gives us an instructive case of a young surgeon, who had served in the Crimea, who had first two epileptic fits at a considerable interval; then a short fit of flighty talk; then raving incoherence; then three epileptic fits in quick succession, followed by coma; then another acute attack of maniacal delirium; then recovery after a free purge, without any further fits. In this case, as Dr. Maudsley observes, "there was a true epileptic insanity taking the place of epileptic convulsions." Griesinger, again, in treating of the *important complications of Insanity*, speaks of long fits of the kind of incoherence which occurs in Dementia, following immediately after the attack of epilepsy; of paroxysms of mania, also immediately following the convulsive attacks, and characterised by a blind fury, with wild gesticulations, rarely seen in ordinary mania; and of an intermitting mania of the most serious description, alternating with epileptic attacks.

The co-existence with convulsions of illusions, delusions, and incoherent utterances, indeed with every factor of the unsound mind, and with mania itself, is sufficiently proved and illustrated by cases of poisoning

with Belladonna, Hyoscyamus, and Stramonium; and, exceptionally, with the active and destructive mineral poisons, arsenic, mercury, antimony, lead, and copper.

I have yet to prove that the same cause which produces in one person an epileptic seizure, may in another give rise to such mental disorders as those of which I have been speaking. The proof is afforded by two cases, the first quoted by Van Swieten, from the fourth volume of the "Medical Essays," the second from Brown-Séquard, by Maudsley. The first case is as follows:—A woman, thirty-eight years old, had been twelve years Epileptic. At first she had a paroxysm every month, then, after a time, as many as four or five strong fits every day. The fits were ushered in by pain in the lower part of the calf of the leg, which immediately flew to her head; and then she fell down violently convulsed and foaming at the mouth. A physician who was present at one of these fits examined the legs, but found no difference in them: "however, he boldly thrust in a scalpel to the depth of about two inches," and found in the bottom of the wound "a hard cartilaginous body, somewhat larger than a pea." He separated it from the muscles, and found that it rested upon a nerve. He then laid hold of it, and pulled it out. This was no sooner done than the patient came out of the fit, saying that she was very well. She quite lost her epilepsy, and "recovered her former vigour both of mind and body."

The case which I adduce as a pendant to this runs as follows:—A lad, fourteen years of age, as he is getting up in the morning, is heard making a great noise in his

bedroom. His father rushes up into the room, and finds his son in his shirt, violently agitated, talking incoherently, and breaking the furniture to pieces. His father puts him back into bed, when the boy becomes at once composed, but seems unconscious of what he had done. He said that, on getting out of bed, he *felt something odd*, but was quite well. A surgeon, who was called in, found him reading quietly, with clean tongue, and cheerful countenance. He was told to get up, but on putting his feet on the floor, and standing up, his countenance instantly changed, the jaw became violently convulsed, and he was about to rush forward, when he was seized, and pushed back on the bed. He again became calm, and said that he *felt odd*. The boy had been fishing the previous day, and had had to wade into the river, but did not think that he had hurt his feet in any way. "But," says Mr. De Morgan, who reported the case to Dr. Brown-Séquard, "on holding up the right great toe with my finger and thumb to examine the sole of the foot, the leg was drawn up, and the muscles of the jaw were suddenly convulsed, and, on letting go the toe, these effects instantly ceased." There was no redness, no swelling; but on the bulb of the toe a small elevation, as if a bit of gravel, less than the head of a pin, had been pressed beneath the cuticle. On compressing this against the nail cautiously, a slight convulsion ensued; there was no pricking when pressed, but he said *something made him feel very odd*. The slightly raised part was clipped away: no gravel was found, but the strange sensation was gone, and never returned."

In these two histories, and in the shorter statements of fact which immediately preceded them, harmonising, as they do, with the facts and inferences of the first part of this work, we have, I think, ample justification for the position which I desire to maintain that Illusions, Delusions, and Incoherent Utterances—in a word, all the elements of Maniacal outbreaks, and even Mania itself, as an aggregate of these, have the very closest and strictest analogy with the unconscious convulsions of the Epileptic paroxysm. The illusion, or illusive transformation, *immediately* precedes, or follows, the convulsive paroxysm; the delusion and the incoherent utterances do the same; the epileptic fit alternates in the same person with the outbreak of mania; the self-same poison circulating through the brain produces in rapid succession every factor of the Unsound Mind, and Insanity itself; and a like mechanical irritation in a remote part of the body now excites the epileptic paroxysm, and now stirs up the equally unconscious maniacal outbreak.

If anything is still wanting to the elucidation of the question of Criminal Responsibility considered in the abstract (for this, let me remind you, is the matter now in hand), it is supplied by the madman himself. It is not necessary I trust, to adduce any proofs of the position which, to my great surprise, I was once called upon to maintain in presence of several intelligent and well-informed members of the medical and legal professions, that many recovered maniacs have the most vivid and exact recollection of the acts, and thoughts, and motives, too, of the strange state through which they have passed;

and *that*, not only when they were in their quiet moods, but also when they were apparently lost in wild and incoherent ravings.

But though it is not needful to produce proof of this feature of the insane mind, it may be well to give an illustration of it. A lady of much talent and ready memory, soon after a marriage which she deemed happy and fortunate, suddenly startled her husband by mocking and turning him into ridicule. In the hope that this would prove a transient state of feeling which would pass away with change of place and scene, he took her to the continent, and, thinking to give her pleasure, conducted her to the lofty tower of a cathedral which commanded a wide view of the city and surrounding country. Suddenly, as they were enjoying the prospect, she darted through an opening, and her husband was just in time to draw her back by her clothes, when she flashed upon him a look of hatred, which he said he should recollect to his dying day. I knew her for some years as an inmate of her husband's house, in London, where she was unwisely retained. At length I had the painful but easy duty of signing her certificate of lunacy, and it is now many years since she became an inmate of a private asylum, where she now remains an aged woman. From this place she once made her escape, and displayed in doing so, and in shaping her course to the place of her birth, many miles distant, a self-possession and command of resources, which no sane woman could have surpassed. A person more hopelessly insane, and more

subject to violent maniacal outbreaks, I have never encountered; yet many years after one of these outbreaks, in a comparatively lucid interval, she expressed to her husband her profound regret that she had then destroyed some valuable manuscripts. After relating this occurrence, he added that it was but one of many, and that he at least could have no doubt of the perfect recollection which an insane person might have even of the most minute particulars of a violent paroxysm of mania.

For myself, I have to acknowledge my great obligations to the teachings of those who have passed through attacks of mania. When some five-and-twenty years ago, or more, it became my duty to study Insanity that I might teach it, I went to school, if I may so express myself, to one of these experienced masters; and may safely say that I learnt at least as much from this one source as from the best treatises of the best observers. The knowledge and experience that I took with me (for I had had some special opportunities) enabled me to profit by my teaching, and prepared me to appreciate, much better than I could otherwise have done, the strange phases of character which presented themselves during nearly seven years of daily attendance at Millbank Prison, where the greatest criminals were daily preparing for me the hardest problems; where the question of real or spurious insanity was constantly cropping up; where men and women sent from other prisons, or by direct warrant of the Secretary of State, were never wanting to exercise my faculties of dis-

crimination. In this way several of the prisoners who had been convicted of the worst crimes, and, after puzzling men far more experienced than I could claim to be, were sent to us for ultimate disposal, had first to be repeatedly interrogated and narrowly watched, and, if found to be of unsound mind, certified accordingly.

SECTION III.

HOMICIDAL ACTS, IN RELATION TO THE SUBJECTS OF IMBECILITY, MANIA, AND IMPULSIVE INSANITY.

THE question of Criminal Responsibility may be raised in reference to many different crimes and classes of crime; to murder and attempts to murder; to attempts to maim or injure; to assaults; to offences against property with violence and without it; to malicious offences against property, of which arson is the chief; to forgery, and other offences against the currency; and to one or two others. But, as I have already stated, I shall here treat only of Murder and attempts at Murder. Yet, even when so limited, the question before us is not a very simple one; for those whose homicidal acts give occasion to the plea of Insanity are very far from being all mad in the same way.

One considerable class consists of the Imbecile or weak-minded, and of these some have delusions and some have not; another and still larger class of Maniacs and Monomaniacs, whose minds exhibit no lack of intelligence though they are subject to strange and obstinate delusions; and a third class, whose minds, as

far as we can ascertain, are quite free from delusion, but are subject to homicidal impulses difficult if not impossible to resist. Each of these classes presents difficulties of its own. The homicidal acts of the Imbecile, though stamped with the same folly as his thoughts, are often prompted by the motives which actuate sane persons; the homicidal impulses of the third class perplex us by their very suddenness and absence of ascertainable motive—perhaps I ought to add, in order to distinguish them from some of the least easily explained murders of the brutal class—absence of *imaginable* motive. But the second class of homicides, committed by Maniacs and Monomaniacs, give rise, perhaps, to the greatest difficulty, inasmuch as they present, as I shall presently show, the greatest variety of mental condition.

Let us look into this matter more closely, and under the three distinct classes of the Imbecile, the Maniacal, and the Impulsive Maniac.

I. THE IMBECILE.—Imbeciles abound among vagrants, probably in all countries, certainly in England, where social customs and poor laws encourage them, and no proper legal provision is made for their care and custody. They lead a vagrant life for three distinct reasons: they are restless and unsettled; they do not readily find employment because of their mental deficiency; and they render themselves unwelcome at home. They are also a large element in the class of habitual criminals, as distinguished from those who are under punishment for what is believed to be a first

offence. In our convict prisons they form a separate class, amounting to some such fraction as one in fifty of their inmates, and they pass through our county and borough gaols in large numbers every year. They are greatly addicted to begging, wanton mischief, and petty theft; and much more than criminals who are healthy in mind and body, to arson, serious and disgraceful sexual offences, and homicide. They also take part in such acts as cattle stealing and burglary, at the instigation of criminals of more intelligence and stronger will, to whom they look up with a sort of respect which Shakespere's Caliban pays to Trinculo. As prisoners they prove troublesome, partly because other prisoners, taking advantage of this feature of their character, stir them up to acts of insubordination.

This unsettled, restless, wandering disposition, and ready subserviency to the will of others, are two elements in the character of the imbecile in which society is greatly interested. Others will reveal themselves in the cases which I am about to quote; for I do not propose in this place to give a formal and complete description of Imbecility in all its degrees and phases. All the cases I shall quote are cases of homicide, tried before the tribunals of this or other countries. I shall give a preference to English cases, and will begin with that of Arnold, tried in 1723 for shooting at Lord Onslow.

Arnold was proved to have been of weak understanding in his infancy; to have been a strange, sullen boy at school; to have led an idle, irregular, and

disorderly life, sometimes unequivocally mad, always strange and different from other people; living alone in a house destitute of the most ordinary conveniences; lying about in barns and under hay-ricks; cursing and swearing to himself for hours together; laughing and throwing things about the house; much disturbed in his sleep by fancied noises. For several years his family and neighbours had considered him to be mad, and treated him as such, if not always, occasionally; but he was thought so little mischievous, that he was suffered to be at large. It is true that he had his unfounded notions (his delusions), and among these the by no means harmless belief that Lord Onslow, his neighbour, was the cause of all the tumults, disturbances, and wicked devices that happened in the country; and he was in the habit of declaring that Lord Onslow sent his devils and imps into his room at night to disturb his rest; and that he constantly plagued and bewitched him, by getting into his belly or bosom, so that he could neither eat, drink, nor sleep for him. He talked much of being plagued by the *bollies* and *bolleroys*. It was under the influence of these delusions that he shot at and wounded Lord Onslow, and it was because of them that he declared in prison that it was better to die than to live so miserably, and that he showed no compunction for what he had done. Arnold was sentenced to be hanged; but by the intercession of Lord Onslow, his punishment was commuted into imprisonment for life.

This, it will be observed, is a case of Imbecility, complicated with a delusion of persecution, not rare in

mania, directed to the person whose life was attempted. I give it precedence, partly on account of the early date at which it happened, and partly of the legal doctrines to the expression of which it gave rise. I shall return to it in a later section.

John Barclay, executed at Glasgow, May 14th, 1833, for the murder of Samuel Neilson, was also actuated by a common motive, that of theft. It is one of the best marked cases of Imbecility on record. Barclay had shown some affection for his victim, but killed him that he might possess himself of three one-pound notes and a watch, which he took from him. After the murder, Barclay hovered about almost without disguise, and while going to spend part of the money with the first person he met, dropped first one and then another note at his feet. When questioned, he could see no difference between killing a man and killing an ox, except that he "would never hear him fiddle again;" and he looked on the watch as an animal, and when it stopped, thought it had died of cold from the glass being broken. In his parish he was known as "daft Jock Barclay;" and the clergyman, who knew him well, "always regarded him as imbecile, and had never been able to give him any religious instruction, and did not consider him a responsible being." Though Barclay's weakness of mind was recognised by the judge, and the jury recommended him to mercy, he was condemned and executed. Ray, to whom I am indebted for this case, tells us that much stress was laid on Barclay's *knowing* right from wrong; but he bids the reader to judge for himself how extensive

and accurate must have been the notions on this point, of one who thought a watch a living creature, and could see no difference between killing an ox and killing a man.

I here insert a case which I have elsewhere given as a typical and most instructive instance of the class we are now considering. It was tried at Taunton, March, 1868, before Chief Justice Bovill. A. H., *ætat* twenty-eight, was indicted for the wilful murder of a boy of thirteen. The prisoner H. was notoriously an imbecile from his childhood, deemed by his father (an officer in the army) a harmless lunatic, described by the person with whom he was put to live as quiet and well-disposed, of good and peaceable conduct, and by a *medical expert* as of weak intellect, and having "an imperfect development of mind and body," subject to headaches and attacks of melancholy, and, according to his own unconfirmed statements, to fits. He was a diligent reader of the Bible, and had expressed a wish to be a Scripture-reader. He was fond of gardening, but would sow seeds one day and dig them up the next to see whether they were growing. He was greatly addicted to wandering about from place to place. On the morning of the murder he walked twenty miles, armed with a big stick and a sharp knife. Early in the evening of this day he gave himself up to the police as "having killed a human being," and crying bitterly at the thought of what he had done. He had been tempted to kill two or three persons on the road, but had abstained; at length he killed "a poor little boy in a field," afterwards washing the blood from his hands. He conducted the parish

constable to the spot where his victim lay, the head beaten to a pulp, and nearly severed from the trunk by a wound in the throat extending from ear to ear. He could not bear to look at the body. He stated that he had been reading of murders in the newspapers till he thought he must commit one; that the thought had been in his mind for a week; that he was compelled to do it; that he did not wish to kill the boy, but could not resist it; that he knew he was doing wrong, but had no power to resist. The judge, in summing up, said that there was no assignable motive; that the victim was an absolute stranger; that the accused had been from boyhood of weak intellect, and that all the witnesses concurred in the opinion that he was not "in a sound state of mind." And yet the jury were to decide on the condition of his mind "at the time he committed the act;" whether, "at the time he committed the offence he was in such a state of mind as not to be responsible for the act;" "whether he knew he was doing wrong;" "whether he knew the difference between right and wrong." The jury, taking no notice of these strange and irrelevant questions, acquitted the prisoner on the *ground of insanity*.

To these three cases I have added nine others, which had been already selected for illustration by Ray and Prichard from French, German, American, and British sources; and have submitted the twelve cases to a rough analysis, from which I have compiled the following statement:—

The *childhood* of the Imbecile homicide is often

mischievous and cruel; he may be scrofulous and ricketty; perhaps he has received some injury to the head. His head may be small and misshapen, his bodily and mental development imperfect. At *school* he shows himself strange and sullen, very different from other boys, very hard to teach, and growing up strangely ignorant of common things, and of the very elements of religious knowledge. Other boys are conscious of his defects, and tease him accordingly. As he grows to manhood all his neighbours come to speak of him as silly, daft, or mad. But they are ready to regard him as harmless, and fit to be left at large.

The imbecile likes to live alone, but is very fond of wandering from place to place, silent, sad, moody, morose, yet much given to muttering to himself, and to occasional hysterical outbursts of laughing, crying, cursing and swearing, and aimless rage; he sleeps badly, and in the daytime is subject to long fits of brooding, moaning melancholy; perhaps has convulsions and epileptic fits. Many imbeciles are superstitious, some profoundly pious. The Bible is their favourite book, and they find in it justifications for their actions, intelligible only to themselves. One imbecile carries it hanging to his wrist, as a talisman.

Some imbeciles are tractable, conduct themselves well, and give satisfaction to their employers. Others are gluttonous, and are disgusting both by the quantity and quality of what they eat. One of my group of twelve had a strange pleasure in wounding himself and drinking his own blood. Illusions and nocturnal

apparitions are common among imbeciles. To begging they are greatly addicted, and, if refused, will be guilty of assault, or murder, or they will revenge themselves by arson, or other wanton mischief. Thus do they become a terror to the unprotected. They are much influenced by what they see in the newspapers, and read in books of adventure, and by what designing persons say to them. The sight of cutting instruments sometimes excites them to deeds of cruelty. The majority of imbeciles have no motive for their homicidal acts; some attribute them to the direct instigation of the Devil; some are prompted by avarice. One imbecile kills and robs at the instigation of his mother, of whom he stands strangely in awe.

The homicidal acts of the Imbecile are characterised by their needless violence, and often by their repetition. He seems to enjoy the act of mutilation as a wild beast would do. His acts of plunder are singularly stupid in their accompaniments. His efforts to escape, if he make any, are stamped by the same weakness. Most imbeciles take an early opportunity of confessing their act, and showing the body of their victim. In doing so, one will exhibit signs of grief, another a stolid indifference; and if he knows he has done wrong, he does not feel it.

In court the imbecile is generally composed and apathetic, or he may show alternate apathy, merriment, and grief.

In prison the weak-minded will often respond to the efforts of the religious teacher, and can be got to

express regret and ask the pardon of those he has wronged ; and one of my group of twelve, to show the reality and depth of his repentance, confessed to no less than eight previous murders, not one of which had he really committed.

Need I add that, on inquiry, insanity in one or other of its forms, figures (perhaps largely) in the family history of the imbecile shedder of blood.

Weak-minded persons are apt to be attracted by Royalty and its surroundings to assaults on crowned heads. Oxford, Francis, Bean, and Pate, who assaulted the Queen at various periods in the ten years 1840 to 1850, belonged to this class ; Margaret Nicholson and James Hadfield, who attempted the life of George III. in 1786 and 1800, did not, however, belong to it, but to that of Mania with delusions. The author of "Sketches in Bedlam" found them there in 1823. Bellingham, the murderer of Mr. Perceval, M'Naughten, who killed Mr. Drummond in mistake for Sir Robert Peel, and David Davis, who made a serious attempt on the life of Lord Palmerston in 1818, also belonged to this latter class.

Important as this subject is, I must bring it to a close, observing only how much it is, and must be, obscured by the absence of information respecting the past history of the subjects of inquiry, especially when they belong to the more respectable classes of society, and their imbecility is concealed by accomplishments, such as music, painting, or poetry. There are among the educated classes many Oliver Goldsmiths, whom those who know them best

designate, half in jest half in earnest, as "Inspired Idiots," and whom Conolly would deliberately enroll, as he did Goldsmith himself, in the ranks of the Imbecile.

2. THE MANIACAL.—These constitute a large section of those persons of unsound mind who are brought to trial for homicidal acts. Among them are found the imaginary victims of persecution; the men who fancy that they have been wronged, and those who, having received some injury at the hands of another, exaggerate it and distort it, and transform it into a delusion; also the men who think themselves possessed by spirits, or who hear voices urging them to deeds of blood; those, again, who kill their children to save them from starvation, or to confer upon them the inestimable boon of a paradise which they are too young and innocent to have forfeited. To this large class, too, will probably belong all those men and women who, having an instinctive or impulsive desire to kill, clothe the naked horror, and so disguise it from themselves, in fantastic garments of mad thoughts; and those also who, desiring death, and not having that sort of courage which nerves the hand of the suicide, kill an innocent child that they may themselves perish on the gallows.

I content myself with this reference to the leading delusions which have inspired the thirst for blood, and with citing the words of Dr. D. H. Tuke:—"The homicidal act, like the other actions of lunatics, is effected without accomplices; the patient's own friends or relatives are very frequently his victims; after the

commission of the act, he rarely escapes, or takes precautions to prevent discovery; and, by his own hand, he frequently terminates, at once, his life and his insane career."

3. IMPULSIVE INSANITY OR INSTINCTIVE MANIA.—The sentence just quoted is from the "Manual of Psychological Medicine" of Bucknill and Tuke, and is part of Dr. Tuke's "summary of the chief characteristics of homicidal mania," of which summary this sentence also forms a part: "leaving still," (after eliminating those cases of Mania more commonly so-called, in which the intellectual and moral faculties are more or less disturbed,) "a considerable number of cases in which there is a sudden, blind, motiveless, unreasoning impulse to kill." This summary is based on a list which immediately precedes it of forty-nine cases, of which no less than thirty-one are grouped together as having been without marked disorder of the intellect, and without premeditation and design; and of these thirteen had children for objects or victims. Perhaps, if I were to submit these cases to a strict scrutiny, I should find reason for classifying them somewhat differently; but in any case, there would remain a clear majority of cases of homicidal mania, feared, intended, or committed, which can be placed in no other group than that we are now considering. One well-known case, which Tuke quotes from Ray, is conclusive as to the *possibility* of this sudden impulse to kill; and it is no exaggeration to say that cases might be adduced by the hundred from the highest medical authorities (of whom many have had no

connection with lunatic asylums, and no theories to support) in which the impulse has been felt, resisted, regretted, guarded against, sometimes alas! without success. The case to which I allude is as follows:—

William Brown strangled a child whom he met by accident, and then requested to be taken into custody. On the trial, he said he had never seen the child before; had no malice against it, and could assign no motive for the dreadful act. He bore an exemplary character, and had never been suspected of being insane.”

If it were consistent with my plan, I could fortify all that I have said on this subject of Instinctive or Impulsive Homicide by a similar treatment of the monomaniacs of theft, lying, lust, arson, suicide, lycanthropy, &c. But as I have mentioned suicide, I will here insert a case which I have on the authority of my friend Dr. John Harley.

A nobleman was taken out of the river Thames, near Westminster Bridge, carried to St. Thomas's Hospital, and recovered. He said that, as he was walking over the bridge, a voice whispered in his ear, “Your wife is dead; throw yourself over.” He obeyed the command. But, had he not recovered, the real cause of the suicidal act would have for ever remained a mystery.

Of the existence of cases of homicidal mania to which the strong expressions of Dr. Tuke are strictly applicable, there can be no doubt. The facts and reasonings of the first part of this work lead us, by fair analogy, to this conclusion. With those facts and reasonings borne in mind, it would be strange indeed if cases of Instinctive

or Impulsive homicidal monomania did not occur from time to time; and it cannot but be a subject of congratulation that the late Lord Chief Justice Cockburn found himself unable to resist the weight of evidence in their favour.

But even those who are best cognizant of the fact that these homicidal impulses exist in degrees of intensity hard or impossible to resist, may not be prepared to recognise the frequency with which they occur. I have instituted a rough numerical inquiry into this matter, and, starting with Dr. Tuke's collection of facts, have supplemented them by cases from Ray, Prichard, Maudsley, and others, and from that remarkable anonymous work, "Sketches in Bedlam;" and I arrive at the somewhat unexpected result that, setting aside ten cases of chronic homicidal monomania, thirty-five out of the hundred that remain were cases of Instinctive impulse without ascertainable motive, or with motives of the most trivial kind, thirty-three of the impulse coupled with, or caused by, delusion, thirteen of the impulse showing itself in imbeciles, three in persons subject to epilepsy, five suggested or stimulated by witnessing or reading about trials and executions, four under the influence of misdirected religious emotion, and seven in girls and women due to recurring causes, or to parturition. All these are illustrative cases taken from the sources indicated, in some of which the mysterious impulse was confessed with horror and anguish, and resisted with pain and difficulty, in others met by voluntary submission to restraint.

SECTION IV.

THE PUNISHMENT OF THE MADMAN.

SOME of the homicides of whom I have spoken in the previous Section fill the public mind with emotions of pity, others with feelings of horror and indignation, mixed with a very natural sense of insecurity, and a desire (equally natural) to find some means of deterring and overawing these most dangerous members of society. In this dilemma the public eye is naturally turned in the direction of the gallows. It is believed, and rightly, to be a terror to the wicked; why should it not be equally a terror to the Insane? and, taking everything into account, the discomfort he causes, the mischief he does, and his own uneasy existence, what harm can there be in hanging a madman?

Smollett, the physician and historian, was, I believe, the first to give written expression to these views, in his account of the deliberate assassination by Earl Ferrers of his steward, Mr. Johnson, in the year 1760. The Earl was a "nobleman of violent spirit," "who had committed many outrages, and in the opinion of all who knew him, given manifest proofs of insanity." He had been judicially separated from his wife on account of his brutal conduct towards her; and, when the bill of

separation was before the House of Lords, one of the Peers, looking upon him as a Maniac, expressed the opinion that, if effectual precautions were not adopted, they would some day be called upon to try him for murder. He was under a delusion that Johnson, who had been appointed receiver of the estates, at the earl's own request, was an accomplice in a conspiracy of his family against him. All his neighbours and acquaintances regarded him as a madman; the taint of madness was in his family; and skilled medical evidence was adduced in support of the plea of insanity; which plea he had reluctantly allowed to be set up at the request of his friends. The plea was supported by witnesses who spoke to his "unfounded jealousy, of plots and conspiracies, unconnected ravings, fits of musing, incoherent ejaculations, sudden starts of fury, denunciations of unprovoked revenge, frantick gesticulations, and a strange caprice of temper." Yet we are told that "his understanding, which was naturally good, had been well cultivated; his arguments were rational, but his conduct was frantick," and that "the earl's madness did not appear in his conversation, but in his conduct." From the time of his being apprehended, he was very calm, composed, and unconcerned (though, after he had shot, and dangerously wounded, his victim, he drank to excess), and "justified what he had done as a meritorious action." He was escorted from the Tower to the place of execution at Tyburn, riding in his own landau, "gaily dressed in a light-coloured suit of clothes, embroidered with silver." He mounted the scaffold with firm step and

undaunted countenance; refused to join the chaplain in his devotions, but repeated after him the Lord's prayer, which, he said, he "had always admired," adding, with great energy, "O Lord, forgive me all my errors, pardon all my sins." But, mark the strange omission! he makes no mention of the cruel act for which he was about to suffer. Neither at that solemn moment, nor at any previous time, did he ask the forgiveness of his victim, or show the slightest compunction for what he had done, except immediately after the bloody deed, when he caused him to be carried up to his bed, and put him under medical care, and even seemed anxious for his recovery. But he soon relapsed into the old state of feeling, insisted on keeping him under his own roof, "that he might plague the villain;" and when his victim was already in *extremis*, "insulted him with the most opprobrious language, threatened to shoot him through the head, and could hardly be restrained from committing further acts of violence."

It is a curious coincidence that the chapter of Smollet's history which contains this revolting narrative, opens with the case of William Andrew Horne, a gentleman of some fortune in Derbyshire, of whom the historian says, that he seemed to be "a hardened miscreant, devoid of humanity, stained with the complicated crimes of tyranny, fraud, rapine, incest, and murder."

Smollett, after saying of Earl Ferrers that "without all doubt, this unhappy nobleman's disposition was so dangerously mischievous, that it became necessary for the good of society, either to confine him for life, as

an incorrigible lunatick, or give him up at once as a sacrifice to justice," goes on to say: "Perhaps it might be no absurd or unreasonable regulation in the legislature, to divest all lunaticks of the privilege of Insanity, and, in cases of enormity, subject them to the common penalties of the law; for though, in the eye of casuistry, consciousness must enter into the constitution of guilt, the consequences of murder committed by a maniacck may be as pernicious to society as those of the most criminal and deliberate assassination: and the punishment of death can be hardly deemed unjust or rigorous, when inflicted upon a mischievous being, divested of all the perceptions of reason and humanity." The people who lived at the time of the murder seemed to be very much of this opinion, for we are told that they cried aloud for vengeance, which, as I have stated, was gratified at Tyburn under circumstances calculated rather to attract than to repel persons of unsound mind.

The question of the proper legal treatment of the Insane homicide is, therefore, fairly before us, propounded by a member of the medical profession, who shows, by his comments on the case, that he was by no means ill-informed on the subject of insanity. Let us examine it with the respect due to the source from which it emanates.

Smollett is speaking of a nobleman whose insanity he does not dispute: let us, in like manner, assume a case of insanity established by the best evidence of which a Trial by Jury allows. Smollett is dealing with a nobleman of a disposition so dangerously mischievous that

the good of society necessitates one of two courses—confinement for life as an incorrigible lunatic, or what he calls “a sacrifice to justice:” let us, too, assume the like alternative. Smollett, impressed with the conviction that the consequences to society of a murder by a maniac are as pernicious as those of a murder committed by a man in full possession of his senses, would divest all lunatics of what both he and we must admit to be the *privilege of Insanity*, of which it cannot be robbed without showing just cause, namely, responsibility for the acts committed under its influence and instigation. And, lastly, Smollett thinks that the punishment of death (a strange phrase, indeed, when taken with the context!) cannot be deemed unjust or rigorous, when inflicted on a mischievous being divested of all the perceptions of reason and humanity. So that Smollett, clothed with the calm dignity of the historian, writing of an event which, though it wrung from the public of that day the loud cry of vengeance, ought not to have moved him from his attitude of grave impartiality, first admits the *privilege* of Insanity and then talks of the *punishment* of death. If such a sacrifice of reason and logic on the altar of patriotism were possible for Smollett writing of an event long past, what shall we not expect at the hands of contemporary writers of a certain class, forced on the spur of the moment to supply the indignant public with intellectual food spiced and seasoned to their taste?

I take it, then, that Smollett has raised the real issue; and, by anticipation, nicely expressed the feelings and opinions which largely prevail at the present moment.

True, there is a *privilege of insanity*; true, there is a *primâ facie* case of irresponsibility; but the safety of the State requires a sacrifice of logic and principle. The *suprema lex* of public security must be obeyed. The gallows must expiate alike the crime of the murderer and the misfortune of the Maniac!

This, as you will have inferred, is not, and, I may add, never has been, the view that I have taken of this very serious question. I do not think that a regard to the safety of society demands at our hands this unnatural and inhuman sacrifice; and I shall not believe that it does till I hear much more cogent and convincing arguments than any that I have yet encountered.

Far be it from me, however, to speak lightly of the safety of society, or the welfare of the State. To do that, I must ignore every principle I have ever professed, and reverse the policy and the practice of a lifetime. Nor, again, would I willingly expose the individual member of society to the risk of falling a victim to insane violence, if, by holding the gallows before the eyes of the madman, I could avert the danger. But, when I say this, I am on the very point of imitating the bad example of those whose folly I wish to reprove. I am speaking quite unconsciously of such madmen only as, being under treatment, as madmen, in or outside of an asylum, have come to the knowledge, more or less complete, that they are insane; not of those madmen against whose violence we wish to protect society, and who, believing themselves to be to the full as sane as their neighbours, come already under the influence of

every legal motive which can be brought to bear on society at large. We cannot to any purpose threaten madmen, as madmen, with the gallows, for the simple reason that there are no conscious madmen to threaten; and he must be a strange sort of person, whether sane or insane, who requires to be told that murder is punished with death.

But perhaps it will be said that we ought to take some steps to bring home to all men, that the unconscious madman may share the knowledge with his sane neighbours, the fact that the State will no longer entertain or tolerate the plea of Insanity; that that shall be the law, and that all men shall know it. Well, something very like this was really done when, not many years ago, the public, in a very commendable spirit of loyalty, moved the legislature to enact that any man who struck at or assaulted the Queen, should be flogged. This Act of Parliament was aimed very specially at that imbecile, half-witted class who are given to such acts as these. Now, this law, by previous newspaper discussions, and by every sort of publicity, must have become known to all men who know anything; but when poor Lieutenant Pate, in an unaccountable access of excitement, does the very deed which this Act was passed to punish—when the lash is put into the hands of the public, and the culprit is ready to receive the chastisement—the instrument of torture falls to the ground. The public, so brave in its theories, shrinks from the disgrace of carrying them into effect; and is only too much obliged to the judge for finding out that the poor

soldier is the son of a gentleman, and not quite in his right mind. Meanwhile, that great Charlatan, known in these days as *Public Opinion*, coolly ignores the failure of his panacea, and shows, by one more example, to what order of practitioners he belongs. But here I must be allowed to guard against any possible misapprehension as to my present meaning or habitual views. I am not speaking against either the gallows or the lash. I believe them both to be more merciful than any punishments which it is possible to substitute for them, and I have no sympathy with any one who would abolish the practice of the one or the other. I have had experience of punishments, and have learnt something from others; and I distinctly affirm that the only punishment which is truly deterrent to the worst characters, and deserves to be called reformatory, are the threat and the punishment of pain, as inflicted by the rod or the scourge. My advocacy I rest on the ground of humanity. I should be ashamed to place it on any other.

But what, let me ask, is the true position of the man, whoever he may be, who contemplates the taking away of human life. If he knows anything at all, he knows *this*—that, if he carries his intentions into effect, is taken, tried, and convicted, he will either be treated as a sane man, and be hanged, as he deserves, or the plea of Insanity will be set up on his behalf. If ignored, he will be hanged as if he had been deemed sane from the first; if allowed, he will be sent to a Lunatic Asylum for life. Nor is his position improved if the public, being dissatisfied with the verdict, can prevail on the

Home Office to re-open the question of Insanity ; for, in that case, the best thing that can happen to him is that he shall be found Insane, and be shut up with lunatics for life ; the worst, that, the evidence not being deemed quite conclusive, his death-sentence shall be commuted to perpetual imprisonment. So that if the man who contemplates homicide reflects at all (and if he does not, the law does not act as a deterrent to him), he must look forward, in case of detection and conviction, to death on the gallows, to perpetual imprisonment, or to a life (perhaps a long one) spent, with loss of liberty, in the Society of Lunatics. This is by no means an agreeable prospect ; and, if I am not greatly mistaken, the only one of the three alternatives that has ever proved attractive to the madman is that very punishment of death which society desires to hold *in terrorem* over him.

From these considerations I infer that the most tender solicitude for the safety of society, and of the individuals of whom it is composed, is quite consistent with the maintenance of our existing laws and usages in respect of the Insane—that there is no reason whatever for retracing our steps, and repenting of a reform now more than three-quarters of a century old.

But there are some perhaps who, convinced by such arguments as I have just advanced, that society is not in danger, are nevertheless disposed to sympathize with Smollett in the opinion that the PUNISHMENT *of death cannot be deemed unjust or rigorous, when inflicted on a mischievous being divested of all the perceptions of reason and humanity.* Let us, therefore, place the Plea of

Insanity in this new posture, and view it in this new light. And, at the very first glance, we recognise the extreme simplicity and convenience of the practice thus recommended. One simple deed, one single punishment for all alike ! Quick, sharp, stern, cheap retributive justice—but such justice as no painter or sculptor ever yet imagined ; the bandage very tight over the eyes, the scales nowhere ! If, instead of talking of *Justice*, Smollett had spoken of *Mercy*, he would have commanded my sympathy, though I must have withheld my assent ; for I know enough of madmen to believe that the very kindest thing we could do to most of them would be to kill them ; and this is equally true of many a victim of hopeless, incurable bodily suffering. But to talk of Justice and the *punishment* of the Insane in the same breath is to outrage both Logic and Humanity.

In my next section I shall submit the question of the proper treatment of the Insane Homicide to the searching ordeal of figures.

SECTION V.

THE LANGUAGE OF FIGURES.

As men recede from nature, and approach nearer and nearer, by successive developments, to that artificial state which we call civilisation, they abandon more and more such cheap rights as revenge in exchange for the more costly processes of law. But, in doing so, they do not forget that revenge itself has always blended with it a rude sentiment of equality and justice. "Eye for eye, tooth for tooth, hand for hand, foot for foot, burning for burning, wound for wound, stripe for stripe," "life for life," is the language of nature; as "Whoso sheddeth man's blood, by man shall his blood be shed," is the key-note of all primitive legislation. As life becomes more artificial, distinctions come to be made between murder and manslaughter, and the shedder of blood by misadventure is provided with means of escape. At length when sinfulness ceases to be looked upon as the sole source of crime, and madness comes to be recognised as an important element in our social life, and a madman becomes a shedder of blood, and is tried for murder, the question of responsibility and the plea

of insanity force an entrance among the other difficult questions which exercise and perplex our courts of law.

Retaining the punishment of death, as the nations are wont to do that display the truest tenderness for human life, it is their constant aim to restrict it to those homicides who cannot be shown to suffer from any form of mental unsoundness. To handle such laws with effect, judges and juries must be patient, intelligent, and enlightened, and the public must not only restrain that natural indignation against the shedder of blood, which not to feel would be a fatal sign of national decadence and decay, but they must resist to the uttermost that subtle form of cruelty which, losing sight of the manifold and wide-spreading miseries that murderers inflict on innocent persons, concentrates all its pity on the criminal himself, keeping up that incessant outcry against hanging and flogging which disgraces the times in which we live, just as the strange indifference to life and sensitive respect for property of our ancestors throw discredit upon them.

But, happily, that state of things has passed away, and we may now claim to have realised Lord Hale's happy medium, avoiding equally "inhumanity towards the defects of human nature, and "too great an indulgence to great crimes." From this *via media* two misapprehensions threaten to draw or drive us. The first is an exaggerated estimate of the number of persons on whom the sentence of death is carried into effect; the second a like exaggeration of the efficacy of the punishment of death as a deterrent of the crime of murder. The first

is obviously open to correction by figures: the application of the numerical method to the second is not so apparent at first sight. I will treat the two questions in their turn.

1. Those who condemn the death punishment on principle will attach little importance to figures, but those who would retain it, will not think the worse of it if it should demonstrate its own efficiency by the small number of persons to whom it ultimately applies. For it should be well understood that, thanks to the merciful spirit in which the law is administered, and to the successive acts of elimination to which the original figures are subject, trials for murder, averaging 67 per annum, dwindle down to executions averaging 11, and even falling as low as 4 in one year, as was the case in 1871. Nor is this an exceptionally low figure; for I find that no less than three times in the seventy years, from 1805 to 1874 inclusive, the number of executions in a year fell to 5. This happened in the years 1806, 1838, and 1854. The largest number recorded in a year is 25, and that number presents itself twice; once in 1813, again in 1817, but never since that date—the second year after the battle of Waterloo.

I may add, as a fact of great interest, that the figures of the table from which I am quoting confirm in a very striking manner the truth first established by John Howard, that crimes of violence decrease in times of war, and are subject to a marked increase in times of peace. This is what a little reflection would lead us to expect, for many of the men who stain our peaceful

annals by deeds of violence, naturally transfer their operations to foreign lands when war breaks out.

It is also very interesting to observe the large fluctuations that occur in these figures from year to year,—how the 5 executions of 1806 grow to 16 in the year following, and the 4 of 1871 rise to 15 in 1872, while the 8 executions of 1865 are intermediate between the 19 of 1864 and the 12 of 1866.

The interest which attaches to these figures is not diminished when they are reduced to ratios of twenty-five millions, which may be roughly taken as the existing population of England and Wales. These curious fluctuations do not disappear even when we gather the figures into groups of ten years. In the seventy years from 1805 to 1874 inclusive there are seven such periods, and these are the figures that represent the executions in those intervals of time; all calculated to the scale of 25 millions:—

312, 351, 222, 171, 127, 171,* 116.

I have marked with an asterisk the decade which interrupts the rule of progressive decrease from the maximum of 351 (being the decade which comprises the early years of peace) down to 116, which displays the smallest figure for the ten years ending 1874. It will be seen that this figure is barely one-third of the maximum, 351.

Taking one year with another of this last period of ten years, it appears that the average number of annual executions has reached the low figure of less than twelve,

being one per calendar month, or at the rate of much less than one in two million of the population.

If this were the lowest figure we might hope to attain (and it certainly is not), it ought to supply us with a strong motive to wait and watch till we have seen what further effect, if any, will be produced by that great reform which has substituted private for public executions, and struck an effective blow at a prolific source of crime ; and till we have time to profit by the experience of other nations. For it may well happen that to them as to ourselves, the death-punishment may come to commend itself as not less merciful than just. Nations that look leniently on murder and delight in "extenuating circumstances" are not, let us hope, beyond the reach of repentance and amendment.

2. The State, having, if I may so express myself, induced its subjects to abandon all natural and personal remedies for wrongs sustained, may be said to have come to an understanding with them to restrain the wrong-doer by laws which must needs prove very costly to the payers of rates and taxes, but which the State, if supplied by them with the needful funds, will do its utmost to bring to bear: using the police, magistracy, and judges of the land as its agents ; places of detention, courts of law, and prisons as its machinery. These instruments being provided and paid for, and ready to be put in force, the State may be said to address a threat to the wrong-doer and a promise to the law-abiding. To the one it says, my laws shall be enforced against you if you break them ; to the other,

these laws shall be your protection. What other theory of punishment can be needed if this be accepted? Why take lower ground? The wrong-doer is not punished as an example: but the State redeems its promise. If its laws, when carried into effect, deter from crime, this result must be very welcome to all right-thinking persons. But it is not high ground to take. The highest and best is that the State, aiming at the greatest good of the greatest number, feels itself under a moral obligation to fulfil its threats and promises.

But I know that the prevalent doctrine on the Bench and off it, is that the object of punishment is to deter others from the acts which have invited it; and that the plea of insanity in cases of homicide, is condemned, not because it is unjust, but because every time a madman is not executed an example is lost, and bloodshedding encouraged. Is this an unfounded belief, or is it not? This is the question to which I am now to address myself, and I believe that I do so in a spirit of scientific indifference. It is true that I do not now treat of this matter for the first time; but, as I have discussed it in the pages of a Journal which is often looked upon as a mere storehouse of figures,* my labours in this direction have, as I venture to think, received less attention than they deserve. I have dealt with my figures afresh, and I find no reason to alter the conclusions at which I arrived in 1869.

* "Journal of the Statistical Society," Vol. XXXII. (1869), p. 159, and Vol. XXXVIII. p. 463.

In that inquiry I started with the simple assumption that, if the executions in the year following some deed of blood which aroused public interest, and became a matter of notoriety, showed an increase, that increase might be fairly taken as evidence of encouragement; but if they showed a decrease, then of discouragement.

I will give one illustration of the method and its results, and I will take it from that early period when our Judicial Statistics supplied us only with the number of executions year by year. In this period of about thirty years, five notorious murders were committed, all punished with death. The names of the culprits were Bellingham, Thurtell, Corder, Burke, and Bishop and Williams. These are the figures for the years following these executions :—

Increase, 9, 1, 3. Total, 13. Decrease, 5, 5. Total, 10.
 The execution of these notorious shedders of blood (for I do not speak of Bellingham as a sane murderer) did not, therefore, act as a discouragement, but rather otherwise; and it is not a little remarkable that the large increase of 9 executions took place in 1813, the year following the assassination of Mr. Perceval, which must have largely occupied the public mind and greatly excited it. The executions, which numbered 16 in 1812 rose to 25 in 1813, and this is the highest figure which the tables record. Bellingham, on whose behalf the plea of insanity was set up and disallowed, was executed, but with the unlooked-for result of encouraging the very acts which the death-punishment is held to discourage.

I use this early group of cases partly as an illustration

of my method of procedure, and partly as foreshadowing the results to which a laborious analysis of figures has led me. These results are stated in the sentences which follow :—

1. "On testing the trials which have excited most public interest, and led to most discussion, by the figures which represent either insane homicides or sane murderers in the year or years immediately following, there are no signs of encouragement when the penalty of death is not inflicted, or of discouragement when it is."

2. "On the contrary, the figures would seem to justify the inference that neither to the sane nor to the insane class among our criminals does the prospect of long imprisonment, or detention for life in a lunatic asylum, offer any attraction or temptation ; while the punishment of death (perhaps only as formerly inflicted) seems as if it might exercise a certain attraction or fascination."

3. "The figures which record the fluctuation in acts of violence, passion, and malice, are found to reach their highest point . . . in years already pointed out as marked by incidents productive of public excitement and anxiety." The anxiety here spoken of is that caused by such pestilences as cholera, and such disastrous events as the Indian mutiny and the cotton famine ; the excitement is that which attends such brisk movements as attend great exhibitions, and parliamentary elections. For disturbances of the public mind, whether in the direction of anxiety or excitement, bear a certain resemblance to atmospheric movements. The storm musters its forces

in the higher regions of the air, to find its few and scattered victims on the earth.

I may add that, on analyzing the figures relating to the cases of M'Naughten, Townley, Buranelli, and Brixey, I came to the conclusion that "of the four cases, there is not one that does not exhibit, for the year following the trial, figures in direct opposition to the popular theory respecting the victim of insanity."

I will take two out of these four cases, and give the figures for the year of the trial and the year following. M'Naughten was acquitted in March, 1843, and Buranelli executed in April, 1855. In M'Naughten's case, the trials for murder, which were 85 in the year of the trial and acquittal, fell to 75 in the year following. In Buranelli's case the trials for murder, which were 57 in the year of the trial and execution, rose to 82 in the year following!

In the year of M'Naughten's acquittal, 7 of those tried for murder were acquitted on the ground of insanity, or found insane soon after; but in the year following, the corresponding figure fell to 3; while the whole number tried for murder and murderous assaults yielded 23 insane criminals for the year of the trial and acquittal, and only 19 for the year following. But in the year of Buranelli's execution the numbers of insane murderers being 7, and 7 also in the year following, the total of insane persons tried for murder and murderous assaults rose from 21 in the year of the execution to 29 in the year following. The remnant of sane murders, and that of the mixed class, also fell in the year following

M'Naughten's acquittal, but rose considerably in that following Buranelli's execution.

As I have just stated, I have submitted the figures which I used in 1869, to a fresh scrutiny, which tends rather to strengthen than to weaken what I have said on a certain "attraction or fascination" which the death-punishment exercises on the weak-minded and insane.

Of its effect on the sane members of the criminal class I cannot speak with so much confidence. I believe that it acts as a deterrent; and that the small number of murders committed in this country, when compared with nations which do not adopt the same means of evincing their respect for human life, may be regarded as a presumption in favour of this view. But in questions of this order the teachings of figures cannot be safely taken by themselves. There is an unseen as well as a recorded element to be taken into account. In this case it is the unseen number who may have been deterred by the knowledge and fear of consequences. That knowledge and that fear have been shown to be at a low ebb in at least one large class of the mentally unsound. May it not be safely inferred that both are most effective where the mind is least weakened by the taint of insanity?

SECTION VI.

LEGISLATION AND LEGAL TESTS.

IF I have rightly interpreted the figures supplied to us by the "Judicial Statistics," the punishment of death does not act as a deterrent to the weak-minded and the insane; but, on the contrary, either attracts and fascinates them, or suggests to them thoughts of killing. What I have said about imbeciles in a previous section (p. 170) will go far in support of this inference from figures. It may be that the punishment will lose some of its attraction by being stripped of its unseemly accompaniments, and that the absence of notoriety implied in private executions may tell upon the figures. But henceforth, as in times past, it will doubtless continue to be true that the death-punishment, whatever its accompaniments and surroundings, will fail to deter persons of unsound mind. This being so, we can enter on the consideration of legislation and legal tests, as they affect this class, without having our judgments warped by too sensitive a regard to the interests of the public.

In this inquiry something may be learnt from a retrospect of the legal dealings with the insane in times past. Let us, therefore, begin with the trial of Arnold for

shooting at Lord Onslow in 1723, more than a century and a-half ago, of which a short account has been given at p. 171. Through this attempt of Arnold's we have come to know what was the legal test and measure of responsibility among our ancestors in the early part of the eighteenth century. According to Mr. Justice Tracy, to be exempt from punishment it was not sufficient to prove a "frantic humour" or "something unaccountable in a man's actions;" he must be a man "totally deprived of his understanding and memory," not knowing what he is doing, "no more than an infant, than a brute, or a wild beast." We had to wait seventy-seven years for the destruction of this strange *chimera*—this impossible creation of the legal imagination. The opportunity was afforded by the trial of Hadfield in 1800 for shooting at George III. in Drury Lane Theatre. The Knight who came to our rescue was Erskine. We have long seen the last of Mr. Justice Tracy's impossible madmen. We are wiser now; but, let me ask, do not many among us sympathize rather with the judge who condemned Arnold than with Lord Onslow who interceded on his behalf?

I have said that we had to wait many a long year for the correction of Mr. Justice Tracy's strange mistake, and that we owe that correction to Erskine. Let us see in what this correction consisted, and how far it extended. The Attorney-General—worthy echo of Mr. Justice Tracy, as Tracy had been of Lord Hale—had told the jury that, "to protect a person from criminal responsibility, there must be a total deprivation of memory and

understanding." To this Erskine replied that "no such madness ever existed in the world;" that these words applied not to madmen, but to the subjects of idiocy and fatuity, who "are never made accountable to the law;" but that in madness properly so called, in "lunatics and other insane persons," there was no such deprivation of memory and understanding, for that these persons, as experience had shown, "not only had the most perfect knowledge and recollection of all the relations they stood in towards others, and of the acts and circumstances of their lives, but have, in general, been remarkable for subtlety and acuteness. Defects in their reasonings have seldom been traceable—the disease consisting in the delusive sources of thought: all their deductions, within the scope of their malady, being founded on the *immoveable* assumptions of matters as *realities*, either without any foundation whatever, or so distorted and disfigured by fancy, as to be nearly the same thing as their creation." Erskine accordingly lays down *delusion* as the true characteristic of intellectual insanity, for of this he is speaking.

But Erskine could not maintain himself at this high level of good sense; for he must needs insist that the criminal act must be "the immediate unqualified offspring of the delusion," thus taking no account of the defective or disordered state of mind in which the delusion originated, and he fails to discern in Arnold the very condition about which he was so eloquently discoursing; for, in referring to his case, he says that "his counsel could not show that any morbid

delusion had overshadowed his understanding." And yet this man Arnold, as Ray reminds us, believed that Lord Onslow was the cause of all the turmoils and troubles in the country; and that he bewitched him by getting into his belly and bosom, and by sending his devils and imps into his room to prevent his rest. Surely these strange notions were as much delusions as were Hadfield's that he had constant intercourse with God, that the world was about to come to an end, and that he, by taking away the life of another, was to sacrifice himself for its salvation. Nor can Erskine any more than Sir Vicary Gibbs, when conducting the prosecution of Bellingham in 1812, recognise the inconsistency of making the very person whom the law pronounces incapable of managing his own affairs, responsible for criminal acts.

Nevertheless, we have to acknowledge our obligations to Erskine for slaying Mr. Justice Tracy's chimera, and for establishing *delusion* as the essence and appropriate test of that form of madness which attacks the "understanding and memory," which, in the age when metaphysics flourished, meant something very like the entire mind of man. That part of the mind which consists of the emotions and passions was little heeded; and though many madmen must have exhibited to all observers the angry passions which render them so dangerous, these passions were looked upon rather as adjuncts to intellectual madness than as its constant forerunners and true causes. Pinel it is who, early in the present century, made the important discovery that

there may be madness without lesion of the understanding—*manie sans delire*—and thus may be said to have presented to us in separate action the intellect and the emotions. The cases which Pinel observed were instances of causeless anger and violence; and such cases were speedily recognised in all the large asylums abroad and at home. But, attention once directed to them, it soon became apparent that other passions besides anger might thus be seen in active operation in men and women whose intellects were intact, and thus arose that theory of moral insanity with which the name of Prichard is so closely associated, and which finds abundant illustrations in the works of all our highest authorities on insanity. It is an inconvenient and perplexing reality which physicians accept but lawyers repudiate; and the same must be said of that instinctive or impulsive insanity which consists in moral mania suddenly developed.

But to return to delusion as the test of intellectual insanity. That test was repudiated twelve years later, when Bellingham was tried for killing Mr. Perceval; and repudiated both by the Attorney-General, Sir Vicary Gibbs, and by Lord Mansfield before whom the case was tried. Bellingham's deed of blood was the outcome of his delusions, and Lord Mansfield is evidently referring to them when he says, "If such a person were capable *in other respects* of distinguishing right from wrong, there was no excuse for any act of atrocity which he might commit under this description of derangement." Bellingham was condemned and executed, "and his body

was on the dissecting-room table within eight days of the commission of the offence." Dr. Bucknill is fully justified in characterising the whole affair as a "lamentable mistake."

I pass over intermediate cases, and ask your attention to the case of M'Naughten, tried and acquitted in 1843. It was the fifth of a series of similar cases, of which the first occurred in 1723. The leading counsel for the prosecution was the Solicitor-General, Sir William Follett; and for the defence, the late Lord Chief Justice of England, then Mr. Cockburn, Q.C. The judges were Lord Chief Justice Tindal, Mr. Justice Williams, and Mr. Justice Coleridge. The case has been justly said to form "a new era in the criminal jurisprudence of insanity," and the procedure from first to last did credit both to bar and bench. I may add that members of my profession had no cause to complain of any want of consideration and courtesy; and that, the Solicitor-General declining to call any counter medical evidence to that called for the defence, the case was stopped. Chief Justice Tindal, in his summing up, directed the jury to find the prisoner "not guilty on the ground of insanity" if, "at the time the act was committed," "he had not that competent use of his understanding, as that he knew that he was doing, by the very act itself, a wicked and a wrong thing. If he was not sensible at the time he committed that act, that it was a violation of the law of God or of man, undoubtedly he was not responsible for that act, or liable to any punishment whatever flowing from that act." The

jury found the prisoner not guilty on the ground of insanity.

This case of M'Naughten, deriving, as it did, a special importance from the social position of his victim and the rank and character of the great statesman for whom the fatal blow was intended, interested the public to an extreme degree, and took the House of Lords by surprise. The judges, therefore, were requested to hold a conference, and consider certain questions submitted to them by their Lordships. Their answers—from one only, which related to the admission of medical evidence in court, Mr. Justice Maule dissented—may be taken to have set forth the law as then existing. They were read to the House of Lords by Lord Chief Justice Tindal on the 19th of June, 1843.

To the third inquiry, which related to the terms in which the question as to the prisoner's state of mind at the time when the act was committed ought to be left to the jury, no answer was returned. The fifth question was directed to ascertain whether a medical man, conversant with insanity, who had not seen the prisoner before the trial, but who was present during the whole trial and the examination of all the witnesses, could be asked his opinion as to the state of the prisoner's mind at the time of committing the act, or whether he was conscious, at the time, that he was acting contrary to law? or whether he was labouring under any, and what, delusion at the time? The answer was to the effect that when the facts were "proved and admitted," then the question as one of science might be addressed to the

medical witness. Proved and admitted by whom? is the question that naturally rises to the lips on reading this. Strange that only one of the fifteen judges should have recognised the folly involved in such words as these!

Setting these two questions aside, three remain, of which two may be said to relate to delusion, and one to insanity in general, but specially to its delusional form—a form to which this trial of M'Naughten, as well as those of Arnold, Lord Ferrers, Hadfield, and Bellingham, had given unusual and undue prominence. As to delusion and its consequences, these are the answers of the judges:

"Notwithstanding the party committed a wrong act, while labouring under the idea that he was redressing a supposed grievance or injury, or under the impression of obtaining some public or private benefit, he was liable to punishment."

"If the delusion were only partial, the party accused was equally liable with a person of sane mind," and "if the crime were committed for any supposed injury, he would then be liable to the punishment awarded by the laws to his crime."

The remaining question (the second in order) referring still to persons "affected with insane delusion," elicits the following replies, which will be seen to bear on insanity in all its forms.

"Every man should be considered of sane mind until the contrary were clearly proved in evidence." *"Before a plea of insanity should be allowed, undoubted evidence ought to be adduced that the accused was of diseased mind, and that at the time he committed the act he was not conscious of right and wrong."* *"Every person was supposed to know what*

the law was, and, therefore, nothing could justify a wrong act except it was clearly proved that the party did not know right from wrong."

Had these been the last authoritative utterances of collective legal wisdom, I should have paused to criticise them; but I deem it better to assume that something may have been learnt in the interval between 1843 and 1879, the date of an important document entitled "Criminal Code (Indictable Offences) Bill (as amended in Committee)," taken in conjunction with the "Letter from the Lord Chief Justice of England, containing Comments and Suggestions in relation to the Criminal Code (Indictable Offences) Bill," printed by order of the House of Commons. Need I say that the eminent judge, whose letter this is, is no other than the Alexander Cockburn whose loss we have so recently had occasion to deplore, and who would not write with less authority that he had formerly eloquently pleaded in defence of M'Naughten. I here insert the words of Section 22, which is headed INSANITY.

"If it be proved that a person who has committed an offence was at the time he committed the offence insane so as not to be responsible for that offence, he shall not therefore be simply acquitted, but shall be found not guilty on the ground of insanity.

"To establish a defence on the ground of insanity, it must be proved that the offender was at the time when he committed the act labouring under natural imbecility or disease of or affecting the mind, to such an extent as to be incapable of appreciating the nature and quality of the act or that the act was wrong.

"A person labouring under specific delusions, but in

other respects sane, shall not be acquitted on the ground of insanity unless the delusions caused him to believe in the existence of some state of things which, if it existed, would justify or excuse his act. Provided that insanity before or after the time when he committed the act, and insane delusions, though only partial, may be evidence that the offender was at the time when he committed the act in such a condition of mind as to entitle him to be acquitted on the ground of insanity.

“Every one committing an offence shall be presumed to be sane until the contrary is proved.”

On this exposition of the law the late Lord Chief Justice comments at considerable length, and, for the most part, adversely. He finds fault with the authors of the code for including imbecility under insanity (but this, I think, their language does not imply); for not distinctly recognising the words “contrary to law,” used by the fifteen judges, in reference to the M’Naughten case, and which in his (the Chief Justice’s) judgment meant, and ought to mean, *legally* wrong; for not recognising “homicidal mania,” the existence of which he himself does not dispute; for so using the phrase “nature and quality of the act,” and the word “wrong,” that he (the Chief Justice) cannot divine their meaning; and for making a distinction between “specific” and “partial” delusions which he fails to appreciate.

In the passages thus imperfectly summarised, I recognise the working of a mind that had welcomed the teachings of science, which other eminent lawyers so studiously reject. It gives me pleasure to find that he did not sympathise with them in the disrespect, and even rudeness, with which they often treat the members

of a profession to whom the care and treatment of the insane has been entrusted, and who, therefore, possess unique opportunities for studying, and, as far as that is possible, understanding the unsound mind.

In the passages thus submitted to criticism, I find this welcome addition to the replies of the judges in the M'Naughten case, that the imbecile is recognised as well as the person diseased in mind. But the learned authors of the code must not omit the homicidal maniac, if they would produce a work worthy of the times in which we live. Their labours in this direction require and will repay revision. May I add that I hope to find that it is not by mere inadvertence, but deliberately, that the authors of the Bill neutralise the first sentence of the last paragraph but one, by the wiser proviso contained in the second? What we want is that insanity before the act, if not after it, or (what would be better still) insanity before and after, and insane delusions, though only partial, shall be evidence that the offender was at the time he committed the act in such a condition of mind as to entitle him to be acquitted on the ground of insanity.

I may add that as the act itself is the successful issue of a long cherished purpose, it is not unreasonable to expect that, in some cases, it will prove both the climax of the disease and its cure. So that the man who was quite mad before the killing may be quite sane after it. But this cannot happen with the imbecile.

SECTION VII.

AMENDMENT OF THE LAW.

GOTTFRIED ACHENWAL, professor of Law and Politics at Göttingen, who invented the term Statistics, and, under that title, made a comprehensive survey of the political and social condition of the chief European States, finishes his account of England by calling it "the paradise of lawyers." This he did in the year 1749, ever since which date we have done our best to justify him, and to distinguish ourselves as the happy land of legal subtleties and refinements. Our subject forms no exception to the rule; for while in France a man who kills another is deemed innocent if proved to be insane when he committed the act, we, in England, are not satisfied with the proof of insanity, but must needs seek to know whether the offender at the time when he committed the act, was not only of "diseased mind," but not "conscious of right or wrong." The amended Criminal Code Bill expands the matter somewhat. It tells us that :—

"To establish a defence on the ground of insanity, it must be proved that the offender was at the time when he committed the act labouring under natural imbecility or disease of or affecting the mind, to such an extent as

to be incapable of appreciating the nature and quality of the act or that the act was wrong."

I have tried to understand the concluding words of this sentence, but cannot; nor could the late Lord Chief Justice, who confessed that they were too much for him. The act has for its object the taking away of life. Is that its nature and quality, or is this but another way of putting the question—Was the act wrong? and if wrong, in what sense?—as an offence against the Decalogue, or the natural moral law, or the law of the land? The best legal authorities seem to agree that the law spoken of as being outraged by murder is the law of the land.

As a matter of course, the question of the offender's state of mind is addressed to the medical witnesses, who are assumed, and justly, to be the only persons qualified by their professional studies and experiences, to answer it; but I am quite at a loss to understand what the profession, as represented by their best authorities, have said or done to justify the imputation of knowing more than their neighbours of the state of mind of the offender at the time that he is inflicting the fatal injury. How a medical witness, not professing any special knowledge of insanity, but only such knowledge as most medical men acquire, may be expected to deal with this sort of question, we may learn from what passed on the trial of Sir Alexander Gordon Kinlock, Bart., tried at Edinburgh for the murder of his brother, June 29th, 1795. Mr. George Sumner, a surgeon in Haddington, is asked by *Lord Justice Clerk*:—"The

last time you saw the panel, previous to the event that took place, is it your opinion that he was then in such a situation as not to distinguish moral good from evil, and not to know that murder was a crime?"—"I cannot say; I do not know what he could distinguish." "Is it your opinion?"—"When I saw him on the Monday and on the Tuesday, I considered him mad." (The deed was done in the night of Tuesday). *Mr. Solicitor-General*: "Was he mad to such a degree, as not to be able to distinguish good from evil?"—"I cannot answer the question in any other way, than that I thought him perfectly mad." The witness was ordered to withdraw, and when recalled, had this pertinent question addressed to him by Mr. Hume: "If you were carried from this room to Bedlam, and there shown a lunatic in his cell; if this lunatic, on being asked, 'if murder is a crime?' should answer 'Yes,' would you, on the faith of that answer, think it safe to put yourself in his power, or to venture within his reach?"—"I would not."

It will have been remarked that in this case it was to *moral* good and evil that the first question referred, and to the recognition of murder as a *crime*, or an act forbidden by law. It is also noticeable that the witness was not asked whether the accused, at the time he committed the act, was in such and such a state of mind and consciousness, but whether he was in that state within some hours of the act, when the witness last saw him. But if the words I have more than once quoted—"at the time of committing the act"—mean the instant of the killing, or while the killing is going

on, as they seem to do, a medical witness ought not to incur blame if he confess his inability to answer such a question.

But when the judicial bench has attained to the same level of knowledge as the medical profession has already reached, they will see that while the phrase, "at the time of committing the act," admits of application to one class of cases it does not apply to another. To what cases it is applicable and to what inapplicable, will be inferred from what I am about to say of the several classes of cases on behalf of which the Plea of Insanity must sooner or later come to be set up. I recognise five such classes, or groups of cases :—

1. *Cases of acute instinctive or impulsive insanity.*—The late Lord Chief Justice Cockburn, as I have stated, could not resist the overwhelming weight of evidence on which the existence of this form of insanity rests. Its simplest form consists in a sudden and irresistible impulse to kill, seizing a person of previous good character and conduct, who tells us that, as he was walking along, he met some child whom he had never seen before, and was then and there seized with this horrible impulse, which he obeyed. He makes no secret of what he has done, but straightway gives himself into the hands of the police. No question of right or wrong, legal or illegal, has crossed his mind, no illusion of sight or hearing presented itself. His act is a mystery to himself, as it is to all the world besides.

In this class of cases, the question of the state of mind and conscience "at the time of committing

the act," is clearly applicable, though no advantage could accrue from putting it. All our information, in each case, comes from the accused himself. His previous history and character can be ascertained; the statement that his victim was a stranger to him, confirmed; and a medical witness, if properly questioned, will be prepared to state that the existence of a sudden and irresistible impulse to kill, is rendered in the highest degree probable by analogies with which all medical men are familiar, and which it is the aim and object of this work to point out.

2. *Cases of Chronic Instinctive or Impulsive Insanity.*—

I here apply the word *chronic* to those cases, confessedly so numerous, in which the impulse to kill, having for its object sometimes the innocent child, sometimes the man or woman, and often those to whom the patient is tenderly attached, is viewed with horror and loathing; resisted as sinful; avoided by flight; guarded against by sundry precautions; but not overcome. Perhaps it is a recurrent impulse; as was that of the sister of an eminent author, who had killed her mother, and, whenever she was conscious of the approach of the terrible temptation to kill, consigned herself to the charge of her brother, who led her to the asylum, there to remain till the fit was over.

In cases of this order, evidence of the previous resistance to the impulse will be forthcoming; and the natural inference will be drawn that at length the defence had broken down. To such cases as these the facts which I have brought forward in illustration of the

change wrought in the mind by causes—some of them trivial—to which the body is exposed, and especially certain recurrent states affecting women, may be adduced to account for an impulse hard to resist at one time proving irresistible at another.

3. *Cases of Epilepsy with Homicidal Impulse.*—In these no question of responsibility can arise. Whether the destructive impulse follow upon an epileptic fit, or take its place, proof will be forthcoming that the accused was subject to epilepsy, and that the person or persons whom he slew were the first that came to hand—perhaps those to whom he was most attached; and, further, that, in his blind fury, he made no distinction between living beings and lifeless things.

4. *Cases of Imbecility.*—Among imbecile homicides there are three recognisable sub-classes:—Those who are impelled by the same motives of greed, jealousy, revenge, &c., which actuate sane murderers; those who do their bloody deeds under the influence of delusion; and those who are tempted to imitate homicidal acts which they have witnessed or read of. In all such cases it ought to be possible to ascertain the fact of imbecility by tracing the previous history of the accused from childhood upwards, and to show that the shedding of blood was attended by characteristic acts of folly which the sane murderer never commits. His knowledge and appreciation of right and wrong, of the requirements of the law, and his power of resisting temptation, will have to be measured by his capacity. He is not so ignorant of common things as not to know that knives will cut and fire burn, nor so

stupid, and void of cunning, that he cannot devise a plan to carry his homicidal purposes into effect. Like the imbecile A. H., whose case is given at p. 174, he knows that it is wrong to kill; but he does not, he cannot, resist the temptation. I may add that neither judge nor jury, nor the public which passes judgment upon both, will consent to consign the imbecile to the same fate which justly awaits the sane murderer.

5. *Cases of Mania.*—No experienced physician doubts that moral mania is as real a condition as intellectual mania; and he knows that the first form precedes and leads up to the second, which reveals itself by one or more delusions, coupled probably with illusions of strange distinctness and reality. If the subject of moral mania commits an act of homicide previous to the development of intellectual mania and the display of delusions, the case is obviously one of unusual difficulty, and the plea of insanity would have to be supported by evidence of a marked change of character, as well as by an exuberance and eccentricity of immoral actions which those who are merely vicious do not display. If the moral insanity is partial, the case belongs to the second category, or that of *chronic instinctive or impulsive insanity*, of which there can be no better sign or test than that the subject of it loathes the act to which he is impelled, whereas the man who is, and always has been, simply vicious, glories in his shame, if not to all men, at least in the society of men of like passion with himself. When this partial form of moral insanity takes the shape of homicide, and evidence is not forthcoming that the

impulse has been an object of loathing and abhorrence, the case must be admitted to be one of unusual difficulty.

But it is with mania that has passed from the moral into the intellectual form, and become blended with delusion, that our courts of law are most frequently concerned. In these cases insanity is established when delusion is proved; and it would seem to follow, as a matter of course, that between this unsound mind and a mind free from the taint of insanity, so wide a gulf is fixed that to submit both to the same treatment is to outrage every natural feeling of pity and every sound dictate of reason and common sense.

Yet the law is not satisfied. The case must not be decided without a preliminary disquisition on right and wrong, and an attempt to fathom the obscure depths of a madman's mind at the time when he did the act of which he is accused. It is true that the jury, having listened as best they may to this display of legal subtlety and refinement, gives in its verdict of acquittal *on the ground of insanity*, as, indeed, they are often instructed to do, and so the case ends. But surely it is high time that we dispense with all refinements in a matter so simple. A man kills another, and the plea of insanity is set up and sustained. Delusion is proved. If you can show that the madman knew right from wrong, and that murder is unlawful, do you also prove that he could act upon his knowledge as the sane criminal does? Give what definition or description of madness you please, you cannot exclude from it the weakening or destruction of

the will. Dr. Bucknill is probably quite right when he says that "most maniacs know to some extent the difference between right and wrong;" but if the extent or amount of this knowledge be small, and the will proportionably weak, the instinct of destruction may prove too strong for both.

But those who advocate and practise legal refinements in criminal cases are fond of distinguishing one delusion, or class of delusions, from another, admitting that some may rightly confer irresponsibility, others not. I will try to classify these delusions, and then inquire how far it is reasonable to make distinctions between them.

There are four leading sources of delusion:—Religious excitement or despondency; jealousy; domestic anxiety exaggerated into fear of starvation; and discontent transformed into an insane belief in persecution. Now, I contend that the same broad principle applies to all of these—namely, that the homicidal act shall be judged by the same principles which apply to the delusion from which it sprang; for it is but reasonable and logical to infer that the act is as little subject to restraint as the delusion to correction—that the man who cannot control his thoughts is not master of his actions. But I will take these four forms of delusion and examine them one by one.

1. I have already pointed out that maniacs under the influence of religious excitement or despondency are exceptionally subject to illusions, illusive transformations, and delusions. They transform the persons with whom they are associated into supernatural beings, endowed

with authority or power not to be questioned or resisted ; and they convert common and familiar sounds into the articulate language of temptation or command. In this class of cases, then, we can never safely affirm that the homicidal act was not the natural consequence of a command which the maniac would deem it impious to resist, or of a delusion which places him, in his own sincere conviction, beyond and above the operation of human laws. The man who believes himself to be God, Christ, or the Holy Ghost, would, from the very nature of the case, deem himself irresponsible. In some of these cases the homicidal act is done in obedience to an illusion present at the time. This happened to the Swiss soldier, who killed a child, believing that he saw the Deity at hand, commanding him to perpetrate the deed. Strange, is it not, that a man should recognise in a phantom that Being whom no man hath seen at any time ! But all incredible things are possible to the insane.

2. Of homicidal acts instigated by unfounded jealousy it may be observed that the delusion in which they originate, is often blended with illusions and illusive transformations ; so that the offender acts upon what he believes that he has seen. But when the delusion is not thus reinforced, it should be borne in mind that it relates to a social relation, which bears a sacred character, that may well seem to an unsound mind to confer a right to the taking away of life. Indeed, I have some reason to believe that when men of unsound mind claim, as some of them will, a right to take away

life, they are giving expression to a delusion which I have not seen noticed in the best treatises on Insanity. My attention was first called to this claim by the case of the man George Clark, known as the Newcastle murderer, who, in the year 1861, stabbed a tax-gatherer, at the corner of a street in that town. The man was obviously an imbecile, who led a solitary, sulky life, with a dog as his sole companion. The collector of taxes had taxed the dog, and for this he was killed. The state of this man's mind having been called in question, he was sent to Millbank, that I might report to the Home Office upon his case. While he was under observation, he was placed in a ward with a few other men of the imbecile class. One of these kept him awake by snoring in his sleep, whereupon he got up and was seen to stand over the offender with a heavy vessel in his hand, with which to kill him. When questioned on the subject, he said that the man kept him awake, and that he had a right to kill him, at the same time quoting Scripture in an unintelligible manner as his authority. Victor Townley, too, it will he remembered, emphatically asserted the same right to take away the life of the young lady to whom he had been engaged—a right which, it is needless to say, no sane rejected lover ever asserts. Earl Ferrers also asserted this right.

3. Of the fathers and mothers who kill their children under the pressure of domestic anxiety culminating in an insane dread of starvation, it may be observed that they are generally remarkable for domestic virtue and devoted attachment to their victims, and that between

them and ordinary murderers there is no single point of resemblance.

4. The case of discontent, transformed into an insane belief in persecution, is often put in a form which seems to preclude a satisfactory answer. A maniac thinks he has been injured by another, and he kills him. If the injury were real, a sane murderer would be responsible, and so, it is contended, ought the madman to be. This curiously illogical argument ignores the simple fact that the two cases have nothing in common but the act itself. The imaginary offence has imaginary accompaniments, and to suppose that a mind which can imagine an impossible offence is sound in all other respects is to outrage common sense, and set at nought the experience of all who have knowledge of the insane. But what if a maniac takes the life of one who has really injured him; and it is alleged that he is responsible because he acted on the vulgar motive of revenge, by which so many sane criminals are actuated? The obvious answer is, that the real injury, brooded over after the manner of madmen, has been so magnified and distorted as to acquire all the force of a delusion that has no basis of reality.

Of delusions other than those comprised under one or other of the foregoing classes, it must suffice to remark that they rarely, if ever, lead to homicidal acts; but that if they do, they ought to be measured by the probable power of resistance of a mind which has already shown itself so weak, and otherwise peculiar, as to allow of the creation of a delusion. I cannot, for my part, see any

flaw in the reasoning that the man who cannot control his thoughts, so as to shut out all delusions from his mind, is nevertheless to be accounted master of his actions. I will take the two cases of the man who thought himself the Crystal Palace, and of another who believed that he was secretary to the moon. The first was very angry with the Government for threatening to remove him. If this feeling had gone the length of prompting him to assassinate some member of the Government, should we not have been justified in asserting that the act was at least as illogical as the fancy itself? or, if the gentleman who thought himself secretary to the moon, got angry with some neighbour for shutting out its light, and killed him accordingly, ought not the act to be measured by the thought?

Some of the arguments that have been advanced in defence of the extreme legal view of the liability of the insane to punishment are so extraordinary, and involve such mistaken analogies, that I can only account for them on the supposition that the intense desire to guard the public against danger has obscured the judgment of those who have put them forward. I should apologise for noticing them but for the respect due to the source whence they emanate.

The insane and the imbecile alike act in many respects as sane men do. They provide an instrument of death, have a method in their mad proceedings, choose their opportunity, practise concealment; and, as a rule, identify their victims: but to this rule M'Naughten was an exception. Men who so act must be respon-

sible. The answer is obvious. A certified lunatic, acknowledgedly mad, will do all this and more; and the madman who still follows his ordinary occupation, and even the imbecile who practises some humble craft, or picks up a living as best he may in our streets and thoroughfares, could not live at all if he did not show as much knowledge of the uses of common things and the way to accomplish simple purposes, as a successful homicide implies. If he resemble a sane murderer in the accomplishment of his purpose he differs from him in all else.

Most madmen who are in confinement can be influenced by rewards and punishments, promised or threatened, from day to day, by the physician and the attendants. Therefore, the madman who is not under restraint, and has no one at hand to manage him by threat or promise, can be restrained from acts of homicide by the knowledge which he shares with the sane, that the law of the land threatens murder with death. As I recognise no analogy between the two cases, I cannot admit the validity of the argument.

Dogs, horses, and domestic animals can be trained by rewards and punishments, and restrained from acts which offend their masters, by blows and stripes. Surely madmen can be restrained in the same way. But men who argue thus forget that the animal must be punished once at least before he can learn to obey his master's wishes, and not only so, but there are some animals who are never cured of their bad habits, though they are severely beaten at each repetition of them. Those who

argue thus, forget that the madman who is not in confinement, has no one to administer this discipline to him. The dog has a master, he has none.

One of our judges, speaking of that uncontrollable impulse which the late Lord Chief Justice Cockburn recognised as a fact, not only stated from the judicial bench that he did not believe in it at all, and that he never heard of such an impulse leading to action where the means of prevention were present. But what if, as happens in the majority of cases of alleged uncontrollable impulse, the means of prevention are not present! and does not the word *uncontrollable* practically mean not resistible except by the aid of others? which aid the most estimable of its victims habitually invoke.

The words which I have just quoted are from the lips of one of our judges who has distinguished himself by the tenacity with which he clings to the most antiquated doctrines on the subject of insanity; but who, having set forth these doctrines in the first part of his charge to the jury, is wont to admit, before he brings his discourse to an end, some such inconvenient facts as that the accused had neither ascertainable motive, nor ill-will towards his victims, and that he was insane. The jury is directed to acquit the accused, which it does with alacrity, and with probably a very natural wonder that the judge should have detained them so long with doctrines which he turns to no practical use.

But, happily, what Lord Campbell said in a debate in the house of Lords nearly forty years ago on the M'Naughten case remains true to the present time.

"He had looked," he said, "into all the cases that had occurred since Arnold's trial in 1723, and to the directions of the judges in the cases of Lord Ferrers, Bellingham, M'Naughten, Oxford, and Francis, and he must be allowed to say that there was a wide difference, both in meaning and in words, in their description of the law." This statement of Lord Campbell is as true now as it was then, and might be easily justified by cases of very recent occurrence.

If I have not wholly failed in attaining the object I have held steadily in view throughout this work, no reader of these pages can doubt at what Amendment of the Law I have been aiming. I would dispense with all attempts to ascertain the state of mind of the accused at the time of the act, with all questions bearing on his knowledge of right and wrong, legal and illegal, and his appreciation of the nature and quality of the act, whatever that may mean; and concentrate the attention of the court on the one plain question,—Is the accused of unsound mind, and was he so about the time when the act was committed, that is to say, about the time when he may be assumed to have been contemplating it? I would also no longer object to the Plea of Insanity being set up in the difficult cases of moral insanity and instinctive mania, the existence of which it is not possible to ignore.

I make no pretence to originality in offering these suggestions, nor in commending, in the strongest terms

I can use, the substitution of properly selected *experts*, or *skilled witnesses*, for witnesses put forward at the pleasure of the parties who organise the prosecution and defence. A small number of such witnesses might be selected by the College of Physicians, or by any scientific association duly representing persons engaged in the care and treatment of the insane. Notice having been given of an intention to set up a Plea of Insanity, one such witness should be summoned to be present during the whole trial, whose duty it should be first to assist the counsel for the defence in addressing such questions to the witnesses as would best elicit the true state of mind of the accused, and then to state upon oath his own opinion of the result of the whole inquiry. In cases of doubt (and they would not be numerous) the accused should be committed to the convict prison at Pentonville, or other central distributing prison, where the skilled witness, assisted by the resident surgeon and staff might keep the accused under observation till he was prepared to give in a written report, upon which report the Home Office should be empowered to act.

The words I am about to quote from Dr. Bucknill's "Sugden Prize Essay," of which the second edition (published in 1857) is now before me, will serve to show that I do not exaggerate the need of reform in this matter, and am not singular in the suggestions which I have ventured to offer.

"The whole proceedings in our criminal courts for ascertaining the existence or non-existence of insanity are awkward, unscientific, and uncertain. They are

such that it becomes in some degree a matter of accident whether a guilty person escapes under the false plea of insanity, or a lunatic is found guilty and hanged. They form a most painful and humiliating contrast to the scientific proceedings by which such questions are determined in France." After describing in some detail the procedure of the French courts, Dr. Bucknill compares it with that of our English courts, condemns our mode of choosing witnesses, alleging that they fall into two classes—"those who know something of the prisoner and nothing of insanity, and those who know something about insanity and nothing of the prisoner," and ends with commending the French system as "in every way worthy of imitation."

To these views I yield a willing, and by no means tardy, assent; for I have held them now for many years, and taken many opportunities of expressing them.

I now bring my work to a close, and, in doing so, would observe that if any of my readers have discerned in it marks of imperfection and incompleteness, they have only discovered that of which I have all along been painfully conscious. If I seem to have handled a great subject unworthily, I plead in mitigation of my offence its immense extent and admitted difficulty. If I have run counter to any man's preconceived opinions, let me assure him that it is not with arrogance or pleasure that I differ from him. To him I desire to attribute that which I claim for myself—a paramount love of truth, and a public spirit which will not suffer me to forget that, while I am a member of a noble

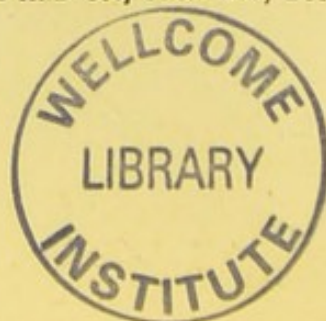
profession, I am also a citizen of a great State—a State which, if in some respects she claims *to teach the nations how to live*, in others shows herself not too proud to learn; a State that has no higher title to respect than that which she derives from her humanity; a State that would suffer indelible disgrace if, ceasing to regard the madman as an object of profound compassion, she should come to treat him as a thing only calculated to excite feelings of intolerance and disgust.

As to those whom the State is bound to protect in life and property, they will be best served by the retention of a punishment which, while it cannot but act as a deterrent to men of sound mind, will fail to prove attractive to the imbecile and insane in exact proportion as they can be made to understand that in seeking death at the hand of the executioner by the shedding of innocent blood, they will inevitably be disappointed.

Can it be necessary to add that, if we would lessen the number of crimes, whether of the more trivial or of the more serious order, we must take steps to gather into suitable asylums the large body of imbeciles who have been proved to be so lamentably addicted to both?

THE END.

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