

attention to a few considerations in reference to the second class of institutions—those which within the last decade or two have assumed the name of hospital. If one reads the annual reports of these institutions it will be noted that frequent reference is made to the fact that a neurologist, neuropathologist, or a pathologist has been added to the staff. In some instances investigations in physiological psychology have been attempted. It is not my purpose to belittle the services of those who have successfully advocated the necessity of these changes. Little permanent good, however, either in increased efficiency of the staff or in the discovery of new facts, relating to the causes of mental disease, can be expected until the organization of these institutions is so changed that the standards, by which the professional capabilities of the medical officers are gauged, are as high as those now required by the managers of our best general hospitals. To aid in the accomplishment of this end an advisory medical board, the members of which have had practical training as attending physicians to a general hospital, should be appointed. This advisory board would act in conjunction with the physician-in-chief and the trustees of the hospital, their services becoming all important by demonstrating clearly to the lay members the absolute necessity of distinguishing clearly in matters of organization between the institutions intended for the chronic, and those for the acute and consequently more hopeful cases of alienation.

The effective organization of a hospital for the insane, in which the medical care of the patients is as good as that afforded by our best general hospitals, depends upon the recognition, by the managers, of the importance of the following fundamental principles. (1) The reorganization of the institution must rest on a basis that shall make it possible for the medical officers to devote their time solely to the performance of their professional duties. (2) The best results in the treatment of patients suffering from acute mental disorders can be obtained in a hospital so organized, even without many of the accessions that are a necessary and integral part of the asylum. The huge grounds, farm, out-buildings, amusement pavilions, etc., all useful adjuncts in the treatment of chronic cases are either unnecessary, or of secondary importance, in connection with the work of the hospital. When patients have reached the stage, in which the therapeutic measures, made possible by the existence of such accessories are indicated, they are either well along in convalescence or have reached the chronic stage in their disease and are then better off in an asylum. I think a fair and impartial observer, who is thoroughly familiar with the organization and conduct of affairs in our best general hospitals, must admit that, while these institutions are admirably adapted to the treatment of patients, the same cannot be