

1. Better clinical instruction to the medical student. Here the student could be shown these cases in his daily round of work, and be able to study these diseases of the brain just as he studies, in a neighboring ward, diseases of the heart or of the lungs. He would learn to give the same attention to disease in this one organ, as he now gives to disease in all the other organs, and the importance of the study would be brought home to him in a way which is at present impossible. He would realize the importance of active treatment in these cases and his responsibility in allowing these cases to pass over the boundary line of insanity without advising adequate treatment. The study of these cases in their early stages would also enable him to recognize such conditions in private practice, and to take such steps as may save a mind from destruction, a result more desirable even than saving the body.

2. A better knowledge of these diseases would result in the whole profession recognizing the necessity, for example, of hospitalization of asylums, and instead of the scanty number of specialists who are now endeavoring to bring about this good work, there would be a solid phalanx formed by the profession to the requests of which the government would be obliged to accede without delay.

3. To the nursing staff of a general hospital, instruction in such wards would be a great boon, since, frequent as these cases are in private practice, but little opportunity to learn the art of nursing them is afforded in a general hospital. As Church, in his recent work on Nervous Diseases, says in regard to the nursing of neurasthenia, "Any amount of general hospital training does not make a good nurse for this class of patients," hence the importance of farther experience in nursing this form of disease.

4. By admitting patients into the wards of a general hospital on the lines suggested above, in Germany, any acute case of alleged insanity would at once be admitted without a certificate, on precisely the same conditions as though the patient were suffering from any other disease than that of the brain, and by this means the cruelty and injustice of taking these patients to a jail would be abolished. Under these conditions recourse to early treatment would be sought, since the prejudice against asylum treatment for a relative would be removed, and much better results would necessarily follow. The stigma, in the minds of the laity, of having been treated in an asylum would also be obviated. Further, the treatment of these patients in a general hospital, by the same methods as all other patients are treated (due allowance being made for the form of their disease), would gradually lead to a more rational view of insanity in the minds