

to provide early hospital treatment for the poor suffering from this disease. I would like, however, to quote what he says about the value of these wards for clinical instruction: "Clinical instruction in an asylum was all very well, but it was not worth argument, to show the infinitely greater advantage that would accrue to all students, were such wards open to them." This institution in Glasgow is the only one of its kind in Great Britain. In Germany much more has been accomplished. To each of the twenty universities a psychiatric clinic has been attached, either in buildings, independent, in the neighborhood of a general hospital, or in wards specially devoted to the purpose. That of Heidelberg was established in 1878. All alleged to be mentally unsound passed through these hospitals; if the nature of the case demanded certification it was passed on to the asylum; the rest consisting of early or mild cases of insanity, neurasthenia, the subjects of delirium due to fever, etc.—in fact, all such cases demanding observation and treatment—were retained without certification and treated to a termination without being reported to the State Office. These clinics were on exactly the same footing as the other clinics, medical and surgical, existing in all German universities. Similar provision has been made in the United States, especially at Bellevue Hospital in New York, and in Philadelphia; while France, Austria, Italy and Switzerland have likewise demonstrated the efficacy of this procedure.

To establish such a ward in connection with a general hospital would have the important advantage that, as the financial outlay need not be large, it could the sooner be put into active operation, a very material consideration. With one or more of such wards in operation the first object aimed at, viz., the alleviation of suffering in the poor by proper hospital treatment for their disease, would be attained. In addition to this, there would result at least the following:

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.