bit of psychopathology, that is of the science or theory of mental disease in the making. The distinction then between science and art, as I am here endeavoring to make it, is absolutely a cross distinction with respect to the ward and the laboratory. There is scientific ward work; there is practical ward work; there is scientific laboratory work; there is practical laboratory work. To be sure, the laboratory men see much of their work as rather recently applied scientific stuff, and may sometimes claim to be men of science when they are as a matter of fact purely men of practice. On the other hand, we may find the shrewdest and most theoretical clinician proclaiming how practical he is because his work is on a clinical basis. Of course, in the work-a-day world, practical men often get on by claiming more or less subtly to be theoretical, and theorists often—shall I say camouflage—their science by claiming to be practical: but the fact that in our daily lives we have to deal with persons who cannot distinguish (like the Germans indeed, according to Marshal Foch) between science and practice, and the fact that we sometimes have to claim to be scientific when we are actually practical, and *vice versa,* should not blind us to the real distinction. Perhaps enough has been said to show that every psychopathic hospital or psychiatric clinic of the group we have in mind should be equipped and active in both the science (psychopathology) and the art (psychiatry) of mental disease.

Now it may be asked: How has the plan for psychopathic hospitals worked out? It is all very well to say that every city of 100,000 inhabitants, or possibly every city of 50,000 inhabitants, should have such a hospital, developed at least upon its practical side with a scientific man or two on its staff. It is all very well to point to individual successes scored in the field, but how stands it with the total programme? We must acknowledge that it is yet too early to say. It is clear that the psychopathic hospital is never going to replace the majority of the other types of mental hospitals enumerated at the outset of this paper, for the psychopathic hospital has not actually diminished the intake of committable cases to the state institutions. Have they actually reduced the tax rate, or are they in course of doing so? Perhaps one should say roundly, no; no such reduction has been produced or is in sight. If, however, the amount of money saved to the families of persons rescued by the psychiatrists and social workers of psychopathic hospitals should be taken account of, then I am pretty certain that we could establish a good deal of community saving. The insurance is an invisible one, however. I assume that the state or province which deserves the name civilized is one which, regardless of its budget,