

refused admittance on statutory grounds to the State asylum. At the present time there are eighteen of these structures, which, according to the Report of Public Charities for 1904, house sane adults, children, insane patients, imbeciles and epileptics. Each is governed by a committee, the immediate management being entrusted to a keeper and a matron, and there is a visiting medical officer attached. These establishments have been erected in pursuance of a plan outlined by Dr. Reid, formerly superintendent of the provincial asylum, though a Nova Scotia friend of mine, well acquainted with the system, contends that it was invented by the devil. The scheme was necessitated by the pressing need of additional room for the insane, and the financial inability of the province to undertake the erection of another public hospital. It is only fair to Dr. Reid, however, to state that this was but one of four alternative suggestions made by him, and that it was the one he considered the least desirable, although the cheapest way to provide the required accommodation.

That county care is cheaper I will not gainsay, but does it best meet the demands of humanity, which, after all, is the true standard to be adopted by any right-thinking community? That it does not seems to be the general trend of the most advanced scientific opinion, and the following resolution, adopted at the sixth meeting of this Association, held at Philadelphia in 1851, still holds good.

“Resolved; that it is the duty of the community to provide and suitably care for all classes of the insane, and that in order to secure their greatest good and highest welfare, it is indisputable that institutions for their exclusive care and treatment, having a resident medical superintendent, should be provided, and that it is improper, except from extreme necessity, as a temporary arrangement, to confine insane persons in county poorhouses or other institutions, with those afflicted with or treated for other diseases or confined for misdemeanors.”

Not a few of the chronic insane are as difficult to manage as the acute, and such being the case, it is hard to imagine any system of county care where abuses will not creep in as a result of the desire to lessen the per capita cost and the absence of constant medical supervision. As practised in the State of Wisconsin, it seems to be as well conducted as it is possible for such a system to be, and yet Dr. Burr, our worthy Vice-President, who is a just and honest man as well as a careful observer, after a personal inspection of the system there, published, in the October, 1898, number of the *American Journal of Insanity*, a scathing denunciation of its inefficiency.