

stories about him should also imagine that he was justified in taking his neighbor's life.

The other mistake made by lawyers was to leave out of the account altogether the moral faculties of our nature—the sentiments, feelings, and emotions. Disease of the moral faculties, he said, often resembled moral depravity. The question should not be, "Did he know the difference between right and wrong?" "Did he evince forethought and intention in his preparation for the crime?" but "Could he see the moral complexion of his act in its true colors?" "Had he the power to pursue the right and resist the wrong?" The existence of insanity, even in the smallest degree, being shown, it should be for the other side to show that the insanity did *not* influence the person to the commission of crime. This was now the rule in civil cases, where, if the insanity be shown, it was for the party seeking to establish the legality of the will or contract to show that the maker had recovered.

There was a tendency now to the belief that the plea of insanity was becoming too common, and that the punishment of the insane may prevent offences. To those familiar with insanity the falsity of this was beyond question. It impaired the freedom of the will. It blunted the sense of right and wrong and diminished the power of self-control, and in every instance of crime there was room for the belief that the act would not have been committed but for the presence of the disease. Very few of the insane would believe that they were insane, and, therefore, would not be prompted to crime by the knowledge of the immunity of the insane, nor would they be restrained by the knowledge that the insane were punished, as they insisted on considering themselves entirely outside of that class. As we stand now, our legislatures were powerless, and the rules laid down by our courts were irrelevant, impracticable and inconsistent; and this would remain so until the question of insanity should be merely a question of fact, to be established. Our judges, he said, were bound to make themselves acquainted with the nature of insanity by every means in their power, and to charge their juries from the result of their knowledge rather than by servile repetition of what was weight only because it has been said before. The Doctor closed by speaking highly of the value of expert testimony in cases of insanity.

Dr. John P. Gray, of the State Lunatic Asylum Utica, N.Y., said that present experience showed that there was a far greater danger of the guilty escaping punishment by feigning insanity than of the insane being improperly punished.

The great desideratum, he said, was to get the expert witnesses nearer the Court. In New York, when the accused plead insanity as his entire excuse, the court appointed a commission of experts to

discover whether the accused was insane when he committed the crime, and in no instance yet had the judgment of such a commission been overruled by the court. This, he considered, a far better plan than the examination of an expert witness before a jury. The commission he spoke of decided whether the accused was a fit person to be tried at all.

The judges were careful in the appointment of the commissioners, and they were required to submit a report, embodying not only their opinion, but all the testimony taken before them, so that the opinion may be examined by the court in the light of the evidence. This plan, he said, did away with the disgrace to the profession, now so often seen, of the directly contradictory testimony of experts, caused by the same case being presented to two different expert witnesses in entirely different lights.

Dr. W. S. Chipman, of the Cincinnati Sanitarium, said that from his observation one of the greatest evils connected with medical jurisprudence was that persons were often called as experts who were not experts. As for hypothetical cases, he had always refused to answer in court any questions found upon them, because what might be evidence of insanity in one person might not be in any degree so in another. He had always refused to answer questions that were not founded on actual facts, and he had always been sustained by the court.

Dr. A. E. McDonald, of the City Asylum for Insane, at Ward's Island, New York, thought the Association should put itself on record in opposition to bringing insane persons before juries at all, inasmuch as the New York plan of a commission of experts had proved itself to be so much superior.

Dr. R. L. Parsons, of the City Lunatic Asylum, at Blackwell's Island, New York, said that in the case of Scannell, in New York, the attorney for the defence made up a hypothetical case and presented it to the medical expert, who testified that it was undoubtedly a case of insanity. The District Attorney then presented a hypothetical case to another expert, who testified that the person described manifested no signs of insanity.

Dr. Ray thought that the practice in Maine was better than the New York plan, of a commission of experts before trial. In Maine, if the accused plead insanity as his only excuse, he was sent for a time to the insane hospital for purposes of observation.

Dr. Henry M. Harlan, of the Hospital for the Insane, Augusta, Maine, described the working of the law requiring accused persons in whose cases the plea of insanity has been offered, to be placed in the Asylum of Observation. He said the law worked very well, except when any of the persons sent in for observation were found not to be insane,