

assumed a fully developed character. Very probably, had they more frequent opportunities of observing the disease in its incubative stage, they might feel inclined to recognize in it a *quasi* moral (or immoral) monopoly. Some 16 years ago, I encountered a case of ticketed moral insanity, sent to the Toronto Asylum by three respectable and intelligent physicians. The subject was a girl of barely 15 years. She was presented by her mother, who gave me a terrorising history of the daughter's misdeeds, much of which I thought savoured more of moral delinquency than of mental infirmity. However, she was sent to me as a lunatic, and I determined to treat her accordingly, regardless of all I had been told of her naughtiness. We began, as we ended, with uniform kindness. At the end of 4½ months, I wrote to her mother that she was either completely cured, or she never had been insane. The mother was rejoiced to learn of the happy change, and she came promptly and took her daughter home; but on the second day after, she returned with her, and presented to me a large bag full of various articles of dress, on which Kate had been practising dissections. I looked over them considerately, and on closing my inspection, I said to the mother, "There is too much 'method in this madness' to convince me of its genuineness. We have had the girl here over four months, during which she has never spoken one word indicative of insanity, nor has she done one act pointing in that direction. I cannot re-admit her, for I believe she is not insane." Then I had a scene, which for long afterwards I did not understand, and, of course, could not justly appreciate. The distracted woman exclaimed, "Oh! what will become of her? She will go to the streets!" I then said "Well, I will do this; I will give you the necessary blank forms of certificates of lunacy, and if you can get three physicians to sign them, I will take your daughter in again." And, as Col. Prince once said, "it was done ac-

cordingly." So, back came my good girl, Kate, and I gave her the benefit of a thirteen months' further probation, during all which she was just as good, as gentle, obedient and obliging, as she had been throughout her former residence. I now talked to her in a very serious and paternal manner, showing her the impropriety and irrationality of her conduct at home, and pressing on her the consideration of her own best interests, which must be ruined by her continuance in a lunatic asylum. She listened to all I said with much deference, but finally to'd me she would like to leave the asylum, but not to go home to live with her mother. Now, her mother was neither harsh nor capricious, but, on the contrary, she had been both kind and forbearing; and her father and brothers had been equally so. I must say that this ultimate enunciation of my gentle patient let in a little light; for I well knew that the likings and dislikings of the insane are almost always unaccountable, and that both fall upon objects or persons apparently the most foreign to the rational incidence of either. I wrote to the mother, giving a faithful detail of all the facts, and advising the removal of her daughter from the asylum, but not her replacement in the family. She made suitable arrangements for the girl's residence at a distance in the country, and we had the pleasure of seeing her depart in excellent health, and in perfect mental composure. Three years afterwards she paid us a visit, and I learned from her companion that she had shown no more symptoms of insanity, either moral or intellectual.

Now, suppose I had regarded and treated this young person, not as the subject of mental disease, but as a clear-minded, moral delinquent; in other words, that I had, *quoad* her *exceptional* case, converted her asylum residence into prison correction; what would have been the probable result? It is my belief that I should then have transformed her into a real and a