

cottage at Seacliff for females. Cases that are obviously unfit are received in the first place at or are immediately transferred to the main hospital; but others will spend the whole of their time under treatment in the reception houses. This is a good beginning on proper lines.

It is hoped that provision will be made for the admission of voluntary patients in order that the incipient stages of mental disorder may be treated by persons specially qualified. The hospital treatment of incipient insanity, which has been so much spoken of and written about in older countries, takes for granted the presence of one or more experienced alienists on the staff. In the colony, the necessary knowledge, experience, and practice is almost confined to the medical officers of mental hospitals, and hence it becomes obligatory to work the reception homes in conjunction with mental hospitals.

It must be remembered that reception houses are associated with the main hospital only in the matter of the Medical Officer and staff, and that the arrangement will further allow of the easy interchange of patients, as will from time to time be necessary.

Suitable imbeciles and idiots will be transferred from the mental hospitals to the institution for defectives near Nelson, which should be ready for occupation in September. This will be a blessing both to the feeble-minded and the general body of the insane.

Shelters for the treatment of phthisical patients have been sanctioned for Avondale, and will, it is hoped, be gradually erected at the other hospitals. The shelter will serve a double purpose, for in the event of the introduction of infectious fevers they will be converted into isolation pavilions. It is doubtless a matter of supererogation to advocate open-air shelters at this date; but, as being very instructive, I quote the following from a note on sanatoria for the insane by Dr. Urquhart: " . . . . between 1880 and 1897 there were only ten cases of phthisis . . . . On the 15th April, 1897, however, a very bad case of phthisis was admitted from another asylum. This patient was very dirty in his habits, and it was practically impossible to induce him to adopt the sanitary precautions which are held necessary. Thereafter six male patients developed phthisis . . . . "

The time has come to deal with the question of the criminal insane. Twelve cases were admitted last year, and there are at present 85 such cases in the mental hospitals, distributed as follows:—

					Male.	Female.	Total.
Auckland	..	..	..	..	7	1	8
Christchurch	..	..	..	..	9	..	9
Seacliff	..	..	..	..	25	6	31
Hokitika	..	..	..	..	11	1	12
Nelson	..	..	..	..	2	..	2
Porirua	..	..	..	..	7	1	8
Wellington	..	..	..	..	13	2	15
					—	—	—
					74	11	85

Though many of these are not of a degenerate type, no arguments are necessary to prove that, as a class, it is undesirable that they should be associated with ordinary patients. I would urge the construction of a special block for such patients at one of the mental hospitals, or, better, the adaptation of a portion of one of the prisons for the purpose. Of course provision would have to be made for the transfer of the occasional suitable case to a mental hospital.

It is in the first degree necessary, both for the public sentiment and the patients' well-being, that crime and insanity should not be associated. To this end I would urge that the Magistrate's examination of a patient should not be conducted within the precincts of a Court. It may in justice be urged that a Magistrate cannot visit the abode of every patient, but it could be possible to use some centrally placed room for the purpose, preferably at the general hospital of the district.

The misapprehensions of a patient in regard to the customary procedure are difficult to eradicate—the idea of being tried suggests the idea of unjust punishment, retards recovery, and often leaves a feeling of bitter resentment in after-life. Recognising this, the English Commissioners in Lunacy publish a sort of black list of places in which, contrary to their expressed wish, the examination of insane persons is held in a building used for the administration of justice.

With the beginning of this year, new regulations as to the pay and hours of the nursing staff came into force. The following is a *précis*:—

#### Salary.

Nurses	..	..	..	£40 per annum with all allowances, and £5 yearly rises to £55.
Charge nurses	..	..	..	£60 per annum with all allowances, and £5 yearly rises to £70.
Matrons	..	..	..	Present maximum, £120 with allowances.
Attendants	..	..	..	£70 per annum with all allowances, and £5 yearly rises to £95.
Charge attendants	..	..	..	£100 per annum with all allowances, and £5 yearly rises to £120.
Head attendants	..	..	..	Present maximum, £145.
Married attendants	..	..	..	House allowance not exceeding £20.

I would here indicate my strong approval of Dr. King's scheme for the housing of married attendants at Seacliff. It bears the mark of sturdy self-respecting individualism, has been taken up enthusiastically by the married attendants there, and should be studied by the men in the other hospitals.