H.—7.

hospitals until released by death; and that of another 150, with a chance of recovery more or less remote, we must expect a large proportion to be left to augment the stationary population.

For the most part the deaths were due to causes calling for no particular comment; they are set forth in Table XII. In the two cases of suicide recorded, the surrounding circumstances were carefully investigated at the time, when I found no reason to differ from the verdict of the Coroner absolving those in charge from blame. A death from scarlatina records a period of anxiety at Mount View. Four patients were attacked at intervals, suggesting in each case an outside and separate source of infection. All necessary precautions were taken, and the patients were promptly removed to the Wellington Hospital. Thus the spread of infection was averted, which, in the absence of an isolation block, might have proved calamitous.

Causes of Insanity.—One needs to record the causes very much as they are given in statements made on admission; but, for the most part, the cause assigned is merely one factor, often an unimportant one, of many contributing to an unhealthy working of the organism. Again, many of the assigned causes are more properly effects, as when the previously temperate indulge in excesses—emotional, alcoholic, or otherwise; or still again, as is commonly the case where heredity is concerned, the chief cause may be purposely suppressed.

Table XIII in the appendix is hereunder condensed :—

Causation groups—proportion p	er cei	ıt.,	Male.	Female.	Total.
Hereditary and congenital			 16.60	23.69	19.63
Previous attack			 6.68	$9 \cdot 23$	7.77
Epochal			 $12 \cdot 21$	18.46	14.89
Mental stress			 7.83	8.31	8.04
Alcoholism and drug habit			 16.36	7.08	$12 \cdot 39$
Brain-disorders			 6.68	5.54	6.19
Other diseases			 8.30	5.54	7.11
Remaining causes			 12.67	$14 \cdot 46$	13.44
$\operatorname{Unknown}$	••	• •	 12.67	7.69	10.54
			100.00	100.00	100.00

When one is confronted with such a list, the thought naturally arises of the many who have been subjected to similar stresses and have emerged with their reason undisturbed; nay, consider the many possibilities in Table XIII, and it becomes evident that none of us has been free from the operation of at least one such cause. Why is the one taken and the other left? It will be found that those whose lives are simple, who approach as nearly to nature as one may in the unnatural conditions of civilization, are at a time of stress the least liable to alienation of mind. The individual may be born with certain weaknesses predisposing him to certain diseases, of which insanity is a notable example. It is demonstrated past doubt that the offspring of persons who themselves have or are descendants of those who have suffered from insanity or other neuroses are likely to have this predisposition. These people have an unfortuate habit of making themselves believe that their case is an exception to the laws of heredity. Once freed from this delusion they would surely be more circumspect in marrying, and feel the awful responsibility of parenthood. Another matter which cannot be too often repeated, until to every mother the knowledge becomes self-evident, relates to the proper nourishing of her child. The nature of the nurishment supplied to the developing organism must influence the life-history of every one of its component cells. The milk of each class of mammal is different, and that difference is exactly adapted to the requirements of the young-the human mother and infant being no exception. It should hardly need to be stated that the further that nature is departed from in this matter, even if the fact be not immediately apparent, the more unfitted must the organism become to bear stress in the future, whether such stress come from within itself or primarily from the environment. the strong at birth be reduced to the condition of those who have had the misfortune to inherit a constitution less able than their fellows to resist and combat toxic influences.

Insanity is not a matter of brain tissue alone, "sith nor the exterior nor the inward man resembles what it was." Whether his start in life were good or bad, no one who wishes his mind to be superior to bodily ills can afford to forget that its state is dependent upon the bodily state—the master upon the servant—that between all parts of the body there is an inter-dependence which emphasizes the necessity for keeping each part disciplined and healthy. He has to guard against the subtle, slow, poisoning resulting from disordered metabolism leaving him an easy unresisting prey when attacked, to quote common examples, by worries, by disease, by the necessity for physiological adaptations at particular epochs, by overwork and the consequent toxemia of fatigue, or by the more crude and wilful poisoning of alcohol. Given good food in proper proportions, and the teeth to masticate it, pure air breathed at all times, and exercise to stimulate not to fatigue, just the simple things which every man knows about but the vital importance of which many often overlook on account of their very simplicity, and metabolism will assert its natural bent to work harmoniously, and the organism will be able to combat a large number of the causes which bring so many to our mental hospitals.

Under Special Care.—The patients classed as epileptics, general paralytics, suicidal, and dangerous, numbered, at the end of the year, 713, or 22 per cent. of the number resident (males, 19.74; females, 25.18 per cent.). Last year the aggregate percentage under these headings was 13.56 (m., 12.56; f., 15.03). Therefore, not only on account of increased numbers in the year reported on has the task of supervision been more difficult, but the greatly larger proportion under special care has added to the anxieties of supervision.