suddenly restored. A well-known instance of this kind was James Mitchell, who was born deaf and blind, but who suddenly gained his eyesight on being couched for cataract.

As idiots, properly so called, may also want one or more of the principal senses, it must obviously demand both acumen and skill to discriminate from them cases like those of Mitchell and Laura Bridgman, where the *mental* faculties are really perfect.

There is a good chapter on the sensory and mental deficiencies of idiots; and this is followed by another—the most important practically—on “The best methods of Educating Imbeciles and Idiots.” Our space forbids more than a simple reference to it; but it will repay a careful perusal.

It is well known that idiots and imbeciles are sometimes endowed with a special aptitude—for music perhaps, or some mechanical art. With reference to this Foderé remarks: “That probably arises from a more perfect organization of the organ on which such-and-such an art depends, and not on the general understanding.” Dr Ireland, commenting on this, says: “The occurrence of special talents in idiots does not on the whole prove any more for the specialization of the faculties in the different parts of the brain, than the occurrence of special talents in sane individuals.” No; but surely it renders the probability of such specialization very great; and *post-mortem* examinations in the case of persons in other respects imbecile might decide the question beyond dispute. There is a useful chapter on the Laws for Imbeciles and Idiots, which cannot fail to be both useful and interesting to many.

Notes on Asylums for the Insane in America. By JOHN CHARLES BUCKNILL, M.D. London, F.R.S., etc. London: 1876.

DR BUCKNILL'S notes have already appeared in the *Lancet* of last year. We have found them very pleasant reading. Being compelled by bad health to seek a change of air and scene, Dr Bucknill paid a visit to some parts of Canada and the Northern States of America. During this tour he visited a number of asylums. Though he finds much good in many of the American asylums, the general tenor of his remarks is unfavourable; and as criticisms of this kind are keenly resented by the citizens of the United States, it is likely that Dr Bucknill would not have published his strictures at all, had he not fondly hoped that the American superintendents would accept the remedies he proposes. These are the entire abolition of instrumental restraint, and a central board of lunacy. On these points, especially the first, there is an affectionate eagerness about Dr Bucknill's appeal to his American brethren which reminds us of Burns's “Address to the Deil”—“Oh wad ye tak a thocht and mend.” The energy of the Ameri-

cans, the great diffusion of education in the States, the absence of brutal offences even amongst the poorest, are all skilfully used to relieve the dark shading of the picture of their asylums. We have never been in America; and when such an experienced and able observer as Dr Bucknill tells us, that there is so much wrong with the treatment of the insane in the New World, we are disposed to advise the Americans to look to it, even although as it appear their critic has made some mistakes in details. At the same time, we believe the Americans are right in saying that there is a reaction in England against the system of non-restraint, *i.e.*, against the absolute prescription of all instrumental restraint as a thing bad in itself, and never justified by circumstances. That the American physicians may resort too often to mechanical restraint is quite another question.

Dr Bucknill offered to lay a wager that any American superintendent might go through all the public asylums in England for a month without finding a single patient under any form of mechanical restraint. If this be so, and Dr Bucknill has very good means of knowing the real state of the case, we are disposed to think that Dr Walker has given the right solution when, in recalling his experience in England, he said "that the superintendents lay the blame of non-restraint upon the Commissioners in Lunacy, and the Commissioners in Lunacy throw it back upon the superintendents. They say the superintendents are emulous one of another to report the smallest number of restraints during the year."

It is the result of our own intercourse with English superintendents that the most intelligent of them consider mechanical restraint advisable in a limited number of cases, and that the superintendent, and not the travelling Commissioners in Lunacy, are the best judges when such treatment should be adopted. It is likely enough that Dr Bucknill's official position may have stood in the way of knowing the real state of opinion in England.

It seems to us that as lunatics are individuals deprived of their liberty by the action of the state, that there should be officers appointed to visit the asylums, and see that the patients are neither neglected, ill-used, nor unjustly detained; but we are by no means sure that the Commissioners in Lunacy do not sometimes do harm in trying to substitute their own views of treatment for those of the medical superintendents, and in meddling with small matters of administrative detail. What is the use of talking of the great confidence which the English have in their asylums, when a Parliamentary Commission is sitting at present to inquire into the action of the lunacy laws? and if the Americans erect central lunacy boards for their several States, we advise them to avoid some of the faults which have appeared in those of the United Kingdom.