

GRAY. (J. P.)

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OF THE
LAWS OF THE STATE OF NEW YORK,
IN REGARD TO THE COMMITMENT OF INSANE TO ASYLUMS, THEIR
DETENTION AND DISCHARGE, AND COMPARISON OF THE SAME,
WITH THE STATUTORY PROVISIONS OF ENGLAND.

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By JOHN P. GRAY, M. D., LL. D.,
Medical Superintendent New York State Lunatic Asylum, Utica.

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[From the *American Journal of Insanity*, for January, 1879.]



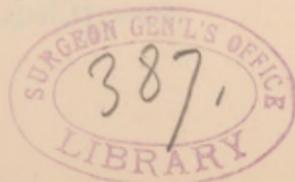
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IN REGARD TO THE COMMITMENT OF INSANE TO ASYLUMS, THEIR
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BY JOHN P. GRAY, M. D., LL. D.

Two broad considerations underlie this subject,—the welfare of the individual, and the safety of the public. The question of unnecessary interference with personal liberty, and the possibility of confounding sane and insane in the application of laws made to protect the latter, as well as society, are vital considerations. It is a fact and practically an axiom, that insanity implies or includes the necessity of special laws to meet the conditions which grow out of it, or in other words, to meet the symptoms and results of the disease itself. The laws upon the subject differ in various countries, as well as in the various States of our country. The objects everywhere are to determine what constitutes insanity, what degree or character of insanity produces loss of accountability for acts, or necessitates provision for the government of the person or property, and finally, confinement in hospitals, asylums, retreats, etc., for treatment and safety.

*Address as President of the Association of American Medical Editors, delivered at Buffalo, N. Y., June 3, 1878.



I do not propose here to enter into the subject generally, but only in relation to the methods of determining the question of lunacy, in any given case, for the commitment to, detention in, and discharge from institutions, authorized under legal statutes, for the treatment and care of the insane. This subject has received great attention by men eminent both in the medical and legal professions, and the fact that the laws so widely differ both in their construction, established methods of procedure, and the officers authorized to administer in their execution, tend to show the inherent difficulties that underlie it, both as a matter of law and social polity. Such laws necessarily call into requisition, in their provisions and execution, both medical and legal science; to determine the existence of disease, its degree, and the propriety of restraint by commitments, the detention and the restoration to liberty. The determination of these questions must rest largely upon the individual judgment of medical men. Cases of insanity differ largely in the mental manifestations, social and general surroundings and conditions, and the natural character of the individual, hence the difficulty of any general rule applicable to all cases.

In looking over the statutes of the several States, those of New York coincide more nearly with those of England than do those of any other State. The initial question is:—How is insanity to be determined? This issue was raised under the common law writ, *de lunatico inquirendo*, in any individual case suspected, and this went directly to the question of personal liberty. The laws of England require that any person brought within their provisions must be certified on medical authority to be “either a lunatic, or an insane person, or an idiot, or a person of unsound mind.” The statutes of New York, now in force, [Chap. 446 Laws of 1874. “An Act to revise the

Laws of the State, relating to the care and custody of the insane; the management of the asylums for their treatment and safe keeping; and the duties of the State Commissioner in Lunacy." provide that "the terms lunacy, lunatic, and insane, as used in this act, shall include every species of insanity, and extend to every deranged person, and to all (cases of) unsound mind other than idiots." For idiots, the law has made certain special provisions. While it is difficult in a statute to enter into a scientific definition of insanity or do more than use a succession of terms which are rather synonymous than definitions of each other, it is found practicable to lay down some rule by which the insanity may be established, justifying and requiring confinement. What in law constitutes an insanity sufficient to confine, is involved in the provisions authorizing the medical certificates, as an initiatory proceeding, necessary in all cases. The certificates declare in terms that the person "is insane, and a proper person for care and treatment under the provisions of Chapter 446, Laws of 1874," and recites the reasons therefor. This establishes the lunacy and the necessity of confinement. The commitment becomes legal by the approval of the certificates by a judge, and thus the commitment and detention are made legal.

CERTIFICATES OF INSANITY.

ENGLAND.

Medical Certificates—Number and Time for Making.—Two medical certificates must be made out, in the case of private patients, within seven clear days from the date of the examination by the physicians; in the case of pauper insane only one is demanded, and the patient must be admitted within seven days of the examination. No medical certificates are required for chancery patients.

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Medical Certificates—Number and Time for Making.—The certificates of two physicians are required in all cases, and must be made out within ten days of the examination by the physicians, and the patient must be admitted within ten days of such examination, or a new certificate is required.

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Qualifications.—Physicians making certificates must be in actual practice and duly registered. No medical attendant in an asylum can make a certificate, and no physicians having proprietary interest in, or who receive any percentage of profits from an asylum. The medical certifiers must not be in partnership professionally, nor can the certificates be signed by the father, brother, son, partner or assistant of the person having charge of the patient, and no physician who signs the order or request for admission to an asylum can sign the medical certificate.

Exceptions.—When there is but one medical man in a village, and the case is urgent, the patient may be admitted on this certificate, but must be examined after admission, and within three days, by two other physicians.

Character of Certificate.—The facts upon which the opinion of a medical man is based must be stated in the certificate, and as observed upon the day of examination; and every statement designated as a delusion, verified; and hear-say statements must be designated as such and the names of the persons giving them, must be mentioned.

Approval of Certificates.—Exact copies of all medical certificates (with any interlineations and erasures) must be sent to the Commissioners in Lunacy within twenty-four hours after the admission of the patient, for approval, and if imperfect, they must be returned for correction, and if not corrected within fourteen days, the patient must be discharged.

NEW YORK.

Qualifications.—Physicians making certificates must have been in actual practice at least three years, of reputable character, graduates of some incorporated medical college, a permanent resident of the State, and all such qualifications must be certified to by a judge of a court of record. No physician can make a certificate committing a patient to an institution of which he is either the superintendent, proprietor, officer, or regular professional attendant.

Exceptions.—None.

Character of Certificates.—They can only be made after a personal examination of the party alleged to be insane, and must be according to forms prescribed by the State Commissioners in Lunacy. The facts upon which the opinion of the medical man is based must be stated in the certificate and all duly certified under oath.

Approval of Certificates.—All certificates must be approved by a judge or a justice of a court of record of the county or district in which the alleged lunatic resides, and no person can be held in confinement for more than five days without such approval.

Proofs.—Before approving or disapproving of certificates of lunacy, the judge or justice may institute inquiry, take testimony as to any alleged lunacy, and in his discretion call a jury in each case to determine the question of lunacy.

COMMENTS.—It will be observed that upon the matter of certificates the British and New York statutes agree in main essential points. In New York, the law gives three days more for making out certificates and getting a patient to the asylum; makes three years practice essential in an examiner in lunacy; while the English law specifies no time. The English law extends the list of those who are excluded by interest or relationship from making out certificates. The English law prescribes more specifically how the facts observed and acquired from others, and upon which opinion is based, shall be set forth in the certificate. The English law simply requires the approval of the certificate by a Commissioner in Lunacy, and fourteen days are allowed for correcting defects, while in New York, the Commissioner in Lunacy only prescribes the form of certificate, while its approval must be by a judge or justice of a court of record in the judicial district where the alleged lunatic resided, and must be done within five days: furthermore, New York provides the still greater safeguard that before approving the certificate, a jury may be impaneled on the option of the court.

There is this further guarantee in the New York statute:—If any insane person, or any friend in his behalf, is dissatisfied with any decision or order of any county or special county judge, surrogate, judge of Superior Court, or Court of Common Pleas, or police magistrate, he may take an appeal, within three days, to the Supreme Court, who shall stay proceeding and forthwith call a jury to decide upon the facts of lunacy. The court shall, in making investigation, call at least two respectable physicians, and if the jury find the person sane, the justice shall discharge him or otherwise confirm the order sending to the asylum.

Thus it will be observed that while the legal processes are simple and unobstructive, they nevertheless amply

guard the rights of the individual, and in New York more especially place the whole, at every step, under judicial protection, though the intent of the law is evidently to rest the determination of the actual question of insanity upon medical authority.

Since the law of 1874 went into operation, over sixteen hundred patients have been admitted into the Asylum at Utica, and I have reason to know that the approval of judges is not a mere ministerial act. The defects in certificates have been mainly failures by the medical examiners to give sufficient detail of the facts upon which they have based their opinions.* During the four years of the operation of the law, about two and one-half per cent of the certificates have included as insane, cases of intemperance with violence and peculiarities, of hysteria, and of meningitis. During the four years previous, about three per cent of the admissions were of this same class.

As evidence of the good faith of medical men, and the integrity of public officers, and friends seeking admission for patients at private charge, I can state that in an experience of twenty-eight years and the reception of ten thousand patients, there have been but three attempts to get persons into the asylum under improper motives, two public and one private. The other cases, admitted and discharged not insane, were of the classes already mentioned and criminals who had either successfully feigned insanity, or been acquitted by juries on the ground of insanity.

* As this paper goes to press, a certificate is received at the Utica Asylum, with the following endorsement:—"Not Approved. This certificate is entirely insufficient in form. The facts indicating the insanity, must be stated and should (in the true spirit of the law) be stated in such detail as to show upon the face and mere statement, that the patient is insane. A perusal of the certificate will show that the examining physician has already stated his opinion,—he should also state his reasons for such opinion. They should be so particularly stated as to convince another reading them, that his opinion is well founded and correct."

Why should the law authorize the courts to approve practitioners generally as medical examiners, instead of constituting a small board of expert examiners?

First,—The qualifications are expressly set forth in the law, and all medical men who possess them should be equally entitled to be made medical examiners.

Second,—This permits the family physician, who is necessarily conversant with the facts of the case, to act as an examiner and to name to the family a second examiner. It thus preserves the rule in regard to consultants, and gives the liberty to any family to say what physicians shall be brought within its confidence.

Third,—If the public officer, or court designated only a few examiners, those might be appointed in whom neither the family, nor the family physician, had confidence, and a speculative class would be likely to seek and secure the appointments, and the office of examiner might soon become one of mere political reward, which the best men in the profession would avoid.

Fourth,—In the sparsely settled districts, unless general practitioners were selected, great expense would ensue from the examiners having to go long distances, or the alleged lunatic being transported to their offices.

Fifth,—An alleged insane person should always be examined at home under ordinary surroundings, with as little unnecessary official show, excitement, parade or exposure as possible, and the privacy of families and family affairs should be as carefully kept as in any other disease. All this will be better secured where the family physician and *confrere* are employed.

COMMITMENT OF THE INSANE.

ENGLAND.

Commitment.—An order, a statement and the medical certificate already mentioned are required.

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Commitment.—An order, a statement recorded in the case-books of the institution, and two medical cer-

ENGLAND.

Pauper lunatics are sent to asylums upon the order of the parish relieving-officer, acting with a clergyman or justice, accompanied by the certificate of a physician, surgeon or apothecary, and a statement which is to be filled out with exactness in the form of answers to questions, embracing the history of the patient.

Private patients are admitted on an order signed by a relative, friend or some person authorizing them to be placed under restraint, and the person signing the order must have seen the patient within one month of its date, and this person becomes responsible for the payment of the expenses of the patient while in the asylum. This order is in the form of a written request, and must be accompanied by a statement similar to that required in the case of paupers, and two medical certificates.

Chancery patients are committed on "an order signed by the committee appointed by the Lord Chancellor, and having an office copy of such appointment annexed."

Criminal lunatics are committed under order of the courts.

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certificates are required for public patients, and a bond in place of the order for private patients.

Pauper patients are admitted on an order of the Superintendent of the Poor, of the County in which the patient resides, accompanied by the two medical certificates already mentioned. State paupers are committed with certificates on an order of the Secretary of the Board of State Charities.

Indigent persons, who are in such limited circumstances that they can not "support themselves and their families under the visitation of insanity," are committed under the order of the County Judge after proof of indigence, and that the insanity is not over a year's duration, accompanied by two medical certificates.

Violent and dangerous insane, whom their friends neglect to confine, are also sent by the county judges, with two certificates. Criminal insane are committed by order of the courts.

Private patients are admitted on a bond, executed by responsible parties, for their maintenance, and accompanied by two medical certificates.

A statement and history of all public and private patients, in all institutions, must be recorded in the case-books within three days after admission.

In county and municipal institutions for pauper insane, the commitments are under special Acts, which include commitment by local commissioners of charities and corrections, police justices, and other municipal authorities, but in all cases the two medical certificates, judicially approved, are required.

COMMENTS.—It will be observed that in England, judicial authority is not invoked in commitment of any of the insane, and that private patients may be confined on an order, signed by any one, whether that person be a friend, relative, or even an entire stranger, and that a month may elapse between the time of this person seeing the alleged insane person, and granting the order for his admission, and that for pauper insane but one certificate is required. It is evident, that the guarantees, both for private and pauper patients, are greater under the New York statutes, than under the English.

SUPERVISION AND VISITATION.

ENGLAND.

Supervision.—The officers charged with this duty are Masters in Lunacy, Commissioners in Lunacy, Visitors and Borough officers. There are two Masters (with salary) in lunacy who act as judges in all proceedings under the writ *de lunatico inquirendo*, who are barristers of ten years, or sergeants-at-arms, and are appointed by the Lord Chancellor.

There are six Commissioners in Lunacy, (with salary); three medical men and three barristers, who act as visiting commissioners; there are also six commissioners, non-visiting, and these latter are unpaid. Commissioners must have been in medical or legal practice five years. The board grant licenses to corporations or private individuals to open asylums, visit and regulate asylums, report to the Lord Chancellor their condition, conduct and management, and all matters connected with the certified lunatics in England and Wales. They visit all licensed houses within the limits of certain territory, (four of these visits are made conjointly by a medical and legal

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Supervision.—The officers charged with this duty in New York, are the State Commissioner in Lunacy, the State Board of Charities, Boards of Managers, Municipal Boards, and Commissioners appointed from time to time in special cases under courts.

Special commissioners are appointed by the Supreme Court, as the exigency arises in cases of writ *de lunatico inquirendo*.

The Governor of the State has the power also to appoint at any time a special committee of visitation and examination.

The State Commissioner in Lunacy (with salary), is appointed by the Senate, on nomination by the Governor, and is charged with the visitation of all asylums, public and private, and is authorized to inquire into their management and conduct, and report annually to the Legislature, and to make investigations into any alleged negligence or improper treatment of the insane, and in the name of the people of the State to issue an order for the remedy of any negligence, improper treatment or provision, and to report

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commissioner, and two by a legal commissioner,) and see all the inmates and examine as to the number admitted, discharged, died, etc. Their jurisdiction is London and Westminster, and county of Middlesex, and borough of Southwark and certain places of counties Surrey, Kent, Essex and "every other place within the distance of seven miles from any other part of London, Westminster or Southwark."

All other houses or asylums are visited by Commissioners nominated annually in each borough, consisting of three or more justices, who act gratuitously, and one or more medical men who receive remuneration. Three, one a medical man, visit four times a year, and two other visits must be made by one or more of these commissioners, with two visits of supervision by a barrister and medical man.

Two or more of the commissioners are empowered to visit all work-houses and jails where lunatics are confined.

Lord Chancellor's Visitors.—These are three, consisting of one legal and two medical visitors; they are required to visit all chancery patients in asylums as well as those in private dwellings, all being under their jurisdiction.

In the Parliamentary report of the select committee, Dr. C. Lockhart Robertson presents the following tabulation, showing amount of visitations of private lunatics (not paupers) by chancery visitors and commissioners:

The Statement.

I. Chancery Visitors: Patients in asylums, one visit yearly; patients in private dwellings, four visits yearly.

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to the Supreme Court for relief if the order is disobeyed or negligently executed.

He also visits all chronic lunatics in the custody of the county asylums organized under a license from the Board of State Charities, and those confined in municipal and city asylums, on all of which he reports annually to the Legislature.

The State Board of Charities consists of eight members, one from each judicial district, appointed by the Senate upon nomination of the Governor, and, excepting the Secretary, serve without pay. They are empowered to visit and examine into the condition of all charities of the State and all institutions, public or private, where insane are under treatment or in custody, to inquire into their government and management in all respects and the condition and treatment of patients.

Boards of Managers are appointed by the Senate, on nomination of the Governor, and have entire control and direction of State asylums and appoint the chief officers, establish by-laws, rules and regulations. A Board is appointed for each institution, the members of which act without pay. A majority is required to visit the asylums once a quarter, and the whole Board once a year. They have the power to regulate the admission and discharge of patients, and control and direct the entire financial affairs, and are required to report annually to the Legislature, within fifteen days after the opening of the session. These boards consist of eight or more members in each.

The municipal boards are local boards created under laws authorizing the organization of municipal and county asylums, over which they have full power of visitation and control.

ENGLAND.

II. English Commissioners in Lunacy: Metropolitan licensed houses, six visits yearly; provincial licensed houses, two visits yearly; lunatic hospitals, one visit yearly; patients in private dwellings, one visit yearly; (not chancery lunatics.)

III. Scotch Commissioners in Lunacy: Patients in asylums, two visits yearly; patients in private dwellings, one visit yearly.

Licenses.—Persons or corporations desiring to take out licenses to open and carry on asylums, large or small, must make applications to the board at least fourteen days before a stated meeting of the Commissioners. This must state the number of patients, the sex and the arrangements for separation, must give the place of the house, number and size of rooms, and quantity of land attached, and whether for public or private patients.

NEW YORK.

Licenses.—The State Commissioner is authorized to license private asylums, and every application must be accompanied by plans of the premises, a description of the buildings, the extent and location of the grounds, the number of patients of each sex proposed to be accommodated, and after a personal examination of the premises, if he finds them suitable, he may grant the license.

The State Board of Charities have power to grant licenses to counties to erect and organize asylums for the chronic insane, and to fix the rules and regulations for their government, and to withdraw the licenses if they are not properly conducted.

COMMENTS.—It will be observed that under the English and New York statutes, there are visiting, controlling and local boards, with varied functions and duties similar in character, and so constituted as to embrace all the interests, requirements and rights of the public and individual, growing out of the establishment of institutions for the insane of every grade and character, and securing the personal liberty of those committed to them as far as the conditions arising in the disease will justify.

In a recent report of a special Parliamentary committee on lunacy laws, a printed quarto of six hundred pages, a large number of prominent men were examined; at the conclusion Rt. Hon., The Earl of Shaftesbury, who has been on the English Lunacy Commission nearly fifty years, and permanent chairman since 1845,

who was also member of the first committee of inquiry in 1828, and who had, by permission of the House of Lords, been attending this investigation, gave his views at great length. He stated: "I cannot recollect a single instance in which a patient has been brought into an asylum in whose case there was not sufficient grounds for saying that he was the proper subject for care and treatment. I can hardly recollect a single instance. I see by referring to the evidence which has been given before your honorable committee that such is the testimony of every man of experience who has been consulted on the matter." To the question, "At the same time there is a feeling which has been expressed not only generally but by witnesses before the committee, that a large number of persons are admitted into asylums in a state of sanity and kept there?" he replied, "I have no doubt those statements would be made, because I never knew the case of a patient, either under confinement or after confinement, who did not say that he had been most unjustly confined. I hardly know an instance." Question: "At any rate it is your lordship's opinion that the admission into an asylum is now sufficiently guarded?" Ans. "I think so." Ques. "Would you say the same with regard to their detention there; is it not the case that they are sometimes kept there longer than is necessary?" "I don't think they are so now." And he adds; "It is a very great responsibility, to send out a patient upon the world both with respect to the patient himself, and in respect of society, before you are satisfied that he is cured, or, at any rate, in such a state that he can be safely trusted."

When Governor Hoffman, of New York, in 1874, appointed General Francis C. Barlow, then Attorney General of the State, Dr. Thomas Hun, of Albany, and M. B.

Anderson, LL. D., President of Rochester University, a committee to examine into all institutions, public and private; they reported that no persons were improperly confined in the State, and no cases have since been reported either by the State Commissioner in Lunacy, or the State Board of Charities. Such facts go to show the efficiency of the law and the fidelity of the medical profession to the principles of science and humanity.

DISCHARGE OF THE INSANE.

ENGLAND.

Discharge of Patients.—Private patients are discharged from any licensed house or hospital by the direction, in writing, of the person who signed the order of admission. If such person be dead, absent or insane, then the husband or the wife, the father, the mother, then the nearest of kin, or finally the person who made the last payment of account, may successively have power to give such order, and if there be no relative, friend or qualified person thus required to act to make the order, then the commissioners may direct the discharge as they see fit.

In the case of pauper patients the guardians of any parish or union, or an officiating clergyman of any parish not under guardians, with one overseer or any two justices of the county or borough may, in writing, direct the discharge or removal, provided they are not certified in writing as dangerous or unfit to be at large, by the medical officer in charge, of any pauper insane patient. Any two or more of the commissioners may discharge any pauper patient from houses licensed by themselves, after two visits, with seven days intervening, if such patient is detained without sufficient

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Private patients are discharged by the Managers of asylums, or may be removed by the persons executing the bond upon which they are received. Those who have been committed upon a warrant of a judge as dangerous to be at large, may be discharged upon the order of a justice of the Supreme Court, or if recovered may be discharged by the Board of Managers upon the Superintendent's certificate of recovery. Indigent patients are discharged by the managers upon recovery, and if not recovered in two years are liable to be removed after notification to the county judge, and they may also be discharged to the county authorities or friends by the board of managers. They may also be removed by their friends, though uncured, at any time before the expiration of two years, on presentation of a certified copy of a bond with sureties, approved by the County Judge of the county from which the patients were sent, the bond being filed in the county clerk's office. This bond must guarantee "the peaceable behavior, safe custody and comfortable maintenance without further public charge" of the lunatic so removed.

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cause ; and for like reasons two commissioners, one a physician, may discharge any pauper patient from houses licensed by justices, but in all cases the medical attendant of the house or hospital shall be examined, if he desires to be, upon the subject before the discharge, and his statement shall be in writing and recorded.

No lunatic, certified to be dangerous, can be removed from any house or hospital, without first obtaining the consent of the Commissioners and Visitors.

Criminal insane are discharged by the courts, after due investigation.

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The managers, on the superintendent's certificate of complete recovery, may discharge the pauper patient, and whether admitted as dangerous or not, "upon the superintendent's certificate that he or she is harmless and will probably continue so, and is not likely to be improved by further treatment in the asylum." They may discharge any such patient to their friends upon the same guarantee as to safety, maintenance, &c., as mentioned in regard to indigent patients.

Criminal Insane.—A patient of the criminally insane class can only be discharged by an order of a justice of the Supreme Court, or a Circuit Judge, if upon due investigation it shall appear safe, legal and right to make such order.

Municipal and County Asylums.—In the counties of New York and Kings the County Commissioners of Charities having charge, discharge, but only on "the certificate in writing of the physician thereof, which certificate shall be filed and kept in said asylum, stating that such discharge is safe and proper."

No insane person can be discharged from any poor house or county asylum (excepting New York and Kings) except upon an order of a county judge or justice of the Supreme Court, "founded upon satisfactory evidence that it is safe, legal and right to make such discharge." Any other person or officer making such a discharge commits a misdemeanor and is punishable by a fine of not more than \$500 or less than \$100, in the discretion of the court.

COMMENTS.—In England and America, the provisions for the discharge of the insane are essentially the same. As in the initiatory proceedings for confinement, the

responsibility is mainly thrown upon the medical profession, so also is the responsibility of discharge. In the discharge of pauper patients there is no practical difference in the two countries. In respect to private patients, the statutes of New York are more simple and practically effective. In New York the managers of each asylum have the power to discharge without formality, and even without the assent of the relations or guardians, while in England the consent of the person who signed the request or order for admission must first be obtained, or his successor, which may cause delay, annoyance, or even work to the detriment of the patient. Indeed the parliamentary report spoken of, shows that the institutions have frequently to invoke the influence, and sometimes the official power of the commissioners to compel the removal of private patients. In New York the bond, or as termed by the English law, the order, on which private patients are admitted, provides for discharge "whenever he shall be required to be removed by the managers or superintendent," and in case of refusal, for the payment of "all expenses incurred by the managers or superintendents, in sending such patients to his friends." This compulsory provision has had to be enforced, at times, by the managers.

Of course, in both countries the writ of *habeas corpus* stands as an ever-present protection against any possible wrong. This, however, has not been appealed to but three times at the Utica Asylum since my connection with the institution, in 1850,* and in these three cases the patients were immediately remanded to the Asylum by the courts. The statute of New York provides against any probability of unnecessary or improper detention of private patients, under any circumstances, as it makes the delivery of the patient, by the officers, to the friends, a mere matter of request at any time, as the friends are

* Since that time there have been admitted 10,600 patients.

not even put to the slight inconvenience of making a formal order in writing, as in the English law, and the managers may discharge summarily.

Since writing the above, the State Commissioner in Lunacy, Dr. John Ordonaux, has brought out a very valuable work, entitled "Commentaries on the Lunacy Laws of New York, and on the Judicial aspects of Insanity at Common Law, and in Equity, including Procedure in England and the United States." He announces as the result of his observations and experience as a Lunacy Commissioner, of his studies in revision of the laws, and of his examination of institutions, that:—

"In the organization also, and management of our asylums, and the provisions made for the care of the pauper and indigent insane, this State has made great progress; and lastly, in establishing a system of supervision of its insane wards, it has completed its guardianship of all departments of its public charities.

"To unfold, therefore, the reason of the laws governing the civil and criminal status of the insane, has been the object to which I have addressed myself in these commentaries. They are designed to cover, not only the Revised Statutes of New York, but the whole field of those decisions in law and equity, which give rise to some of the most difficult questions in jurisprudence. And inasmuch as they would be incomplete as a manual, without some discussion of the practical methods of enforcing these laws, I have added a chapter on Procedure; prefacing the whole work with a digest of adjudicated principles in the Jurisprudence of insanity, together with a synoptical sketch of the development of our statute law, herein, in the form of a History of Lunacy Legislation in England and the United States."

THE

AMERICAN JOURNAL OF INSANITY.

THE AMERICAN JOURNAL OF INSANITY is published quarterly, at the State Lunatic Asylum, Utica, N. Y. The first number of each volume is issued in July.

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The JOURNAL is now in its thirty-fifth year. It was established by the late Dr. Brigham, the first Superintendent of the New York State Lunatic Asylum, and after his death edited by Dr. T. Romeyn Beck, author of "Beck's Medical Jurisprudence;" and since 1854, by Dr. John P. Gray, and the Medical Staff of the Asylum. It is the oldest journal devoted especially to Insanity, its Treatment, Jurisprudence, &c., and is particularly valuable to the medical and legal professions, and to all interested in the subject of Insanity and Psychological Science

