BRITISH INFLUENCES IN PSYCHIATRY AND MENTAL HYGIENE.

The fourteenth Maudsley Lecture, under the auspices of the Royal Medico-Psychological Association, was delivered on May 17th by Dr. Adolf Meyer, psychiatrist-in-chief of the Phipps Psychiatric Clinic, Johns Hopkins Hospital, Baltimore, U.S.A., and is published in the British Medical Journal, from which we reprint the following portions:

Dr. Meyer set out to discuss four aspects of his subject (British Influences in Psychiatry and Mental Hygiene), namely, (1) the genesis, meaning, and importance of a psycho-biological rather than a psycho-physical conception of man, and what this conception owed to British thought, especially to Hughlings Jackson and Thomas Huxley; (2) the meaning of the resulting truly functional formulation of pathology; (3) the resulting interest in the individual and the development of mental hygiene; and (4) some essential perspectives of present-day psychiatry.

The discussion of various considerations of his subject brought Dr. Meyer to the question of the interest of the individual and mental hygiene. He said that for his own part he had always felt an urge to understand and guide, not merely to describe and dissect the patient. He proceeded to describe certain American work which had a social as well as a psychiatric character. A proposal of Miss Louise Schuyler in 1905 to introduce the European after-care principles into New York State made it possible to utilise this experience together with something forming part of the real pathology and therapy of psychiatry, and it paved the way to a new venture—the appointment of the first official psychiatric social worker in 1906. When in 1908 Mr. Beers turned his attention to reform of mental hospitals, the lecturer urged him to do it on the basis of mental hygiene, and this received support from Mrs. Ethel Dummer, who was strongly influenced by the writings of Boole and Maudsley. By the term 'mental hygiene' was meant something more than mere child psychiatry and a diluted kind of general psychiatry; it implied an intimate study and public education in favour of those factors which made for mental health in a positive and creative, and not merely in a passive or remedial, way. It was the ambition of the hygienist to think and speak in terms of natural opportunities and resources, with a balance in favour of the hale and whole conception of life. There were two methods of procedure which might readily be used side by side. On the one hand, there should be a systematic and well-balanced attention to the human— the psycho-biological—health tissues, depending on a sound evaluation and testing out of intuitions and emotions and of individual and social contributing factors. On the other hand, there should be a most thorough and critically constructive control of the strictly professional work, pushing, wherever feasible, the possibilities of intensive investigation, not merely as child study, but as part of the adult problem. He protested against mere leaflets of instruction, and thought that while it might be well not to cultivate high-pressure production, it was urgent to insist on substantial work within the range of controllable data. The most difficult task in psychiatry Dr. Meyer described as that of balancing the concreteness and profusion of its data, and what was needed to keep order among the mass of such data. Unless our sciences could concentrate and focus, as well as differentiate their data, their general average effect would be chaos or sham. He thought that at the present time it was well to concentrate after a period of great expansion. What had been gained during the last generation was encouraging, but it needed to be straightened and sorted out. He hoped that the study of the pathology of the living and the dead would become more contributive to human welfare, and that without turning the world into a pathological laboratory. The question was now being asked of psychiatry and mental hygiene what it was doing to fill in the gaps of knowledge, and to assemble the experiments of nature and of man in a way that allowed the placing of samples before those competent to create public opinion.

"Finally, Professor Meyer said that all interested in this subject would always want to come and learn in the country which produced the Magna Charta, Bacon's experimental philosophy, Shakespeare's drama, and generations of scientists who were always thoughtful of the man in the street. Those workers in the United States who had been favoured with visitors and co-workers from Britain valued very highly what these people had taken to the States in training and outlook. The United States was sometimes looked upon as an experimental ground which was still a land of great possibilities, although its limitations were beginning to be appreciated. But his own countrymen looked to Britain as a country with fascinating economic and cultural and social problems and with a people having a blend of present-day practical sense, respect for the past, and mindfulness of the immediate future. Those who knew how to come and learn would always have cause to cherish Anglo-American contacts and co-operation."

PATCHED-UP PATIENTS.

Sir Pendrill Varrier-Jones (founder and medical director of the Papworth Village Settlement), presiding over the section discussing tuberculosis at the recent Congress of the Royal Institute of Public Health, criticised the system by which "patched-up patients returning from the sanatorium" were "sent home to die" in the midst of "under-nourished and poorly-housed families," whose resistance to disease was low, and urged the value of "the family-unit solution which the almost self-supporting village settlement provides."

Urging the need of more research, he said it was that complex of biochemical factors which revealed itself as toxemia which really determined the course of the disease. The only factors which really mattered were the action and interaction of the tissue fluids and internal secretions, since it was they that determined the degree of resistance to the tuberculous toxemia. We knew already that automatic healing could occur, and if we could discover why it did occur, who knew what we might make an end of tuberculosis?

Speaking in the new Hydrology and Climatology Section, Mr. F. J. W. Whipple, Superintendent of Kew Observatory, combated "the old superstition" that it was not healthy for invalids to have flowers in their bedrooms.