charitable aid what a terrible incubus on our civilisation this undoubted fact of the survival of the unfittest is. Am I my brother's keeper; and, if so, to what extent? That is the enigma of the Sphinx for this generation.

I am glad to see that the medical profession, at the instance of Dr. Collins, are at length wakening up to some sense of their duty in this matter of our national provision for the proper treatment of mental disease. I wonder they were not roused from their apathy long ago.

If our Parliament would escape the charge of inhuman apathy in the treatment of the mentally diseased, they must at once insist on sufficient accommodation in our asylums, and as soon as possible thereafter they will make separate provision for the criminal insane and for idiots and imbeciles. The question of State provision for inebriates is a more complex one, inasmuch as there is reason to believe that at Ashburn Hall, near Dunedin, it would be possible to provide by private enterprise a suitable home for all who can pay a reasonable sum, while for those who cannot pay it might be wise for the Government to pay a minimum maintenance rate.

The question as to the necessity of providing a receiving ward in connection with our metropolitan hospitals is rendered very difficult by the fact that the hospitals are governed by local bodies, so that the chronic struggle between the local rates and our general taxation at once emerges, and in any case this reform, however desirable, must be postponed to more urgent requirements.

### Buildings most urgently required.

These are the auxiliary building at Seacliff, estimated to cost £1,600, of which a portion is now being constructed.

The whole of the Porirua Asylum ought to be completed at the earliest possible moment, and a residence built for the doctor, to cost £1,000. It is no longer possible to manage Porirua Asylum from Wellington. It must be made a separate institution, under the charge of Dr. Hassell, for whom a residence must be built. The rooms provided for an Assistant Medical Officer cannot be used as a residence for a married man, for, owing to bad building and bad material, they are uninhabitable—at any rate, by a lady who has some claims to a comfortable home.

At Auckland twenty single rooms, to cost £1,000, ought to be put in hand at once, for the want of them makes the female refractory ward very injurious to our most hopeful acute cases in the earlier stages of their malady.

### Financial Results of the Year.

The following gives the net cost per patient for the year 1897 as compared with the previous year:—

| —— | 1897. | 1896. | Increase. | Decrease. |
|---|---|---|---|---|
| | £ s. d. | £ s. d. | £ s. d. | £ s. d. |
| Auckland ... ... ... ... | 22 18 4½ | 22 5 8½ | 0 12 8 | ... |
| Christchurch ... ... ... ... | 19 4 11¾ | 16 16 8¾ | 2 8 3 | ... |
| Seacliff ... ... ... ... | 22 8 3¾ | 23 13 7¼ | ... | 1 5 3½ |
| Hokitika ... ... ... ... | 23 3 6¼ | 24 10 9½ | ... | 1 7 3¼ |
| Nelson ... ... ... ... | 23 5 4½ | 20 7 11½ | 2 17 5 | ... |
| Porirua ... ... ... ... | 24 17 6¼ | 23 7 8 | 1 9 10¼ | ... |
| Wellington ... ... ... ... | 21 1 1¾ | 20 4 11½ | 0 16 2¼ | ... |
| Totals ... ... ... | 22 0 0½ | 21 6 2 | 0 13 10½ | ... |

Including the first five items in Table XX., the net cost per patient is £23 0s. 9½d., as against £22 9s. 10½d. for the previous year, being an increase of 10s. 11d. per head.

At Auckland the increase was in rations; at Christchurch, in bedding and clothing and farm; at Nelson, new linoleum and bedside carpets, also shutters for the dormitories, account for the increase; at Wellington the increase is in necessaries; and at Porirua in salaries, bedding and clothing, and necessaries.

Nothing is easier or at the same time more futile than to vent those theories which we see so often explaining the alleged increase of insanity among the people of the colony, for it is exceedingly difficult to demonstrate the fact of actual increase out of proportion to population. Many considerations must be carefully weighed before admitting this absolute increase of insanity; as, for instance, the increasing intolerance of the public for leaving at large even harmless imbeciles and people suffering from delusions if they can be brought within the legal definition of insanity; the callousness so fostered by our laws of relatives eager to get rid of their senile parents and friends by throwing their maintenance on the taxpayers; the unremitting struggle of local bodies to pass them on to the asylum, trusting to the passive acquiescence of Magistrates and medical men. If only the demands of the legal definition of insanity can be met harmless incurables and even moribund persons are often committed. In short, we have to consider the effects of our largely extended notions of what constitutes insanity requiring confinement, the gradual improvement of our asylums, and our humaner methods of treatment in proportion as the means are provided, a consequent decrease of the death rate and increase of recoveries leading to a large accumulation of the registered insane.

A Commission has recently (1897) reported on this whole problem to the English Parliament, and their conclusion, which I think applies to us, is, "We are well aware that there has been a very large and serious progressive increase in the numbers of officially known persons of unsound mind, but, as we have tried to demonstrate, this has been chiefly due to accumulation."