

become a 'lunatic' for purposes of treatment, the patient also has to become a 'pauper' on the 'poor roll' of the parish, the procedure for certification and admission being under the control of the poor law authority, which is responsible for action, and also liable (in part) for the patient's maintenance. The majority of self-respecting men and women shrink from the shame of applying to the parish, as also from the odium of certification. Hence valuable time is lost in many cases; and such feelings are not conducive towards recovery when mental hospital treatment eventually becomes an urgent necessity, and further, they are apt to be attached to the hospital itself, and to the 'lunacy' system generally.

"In accordance with existing legislative enactments in Scotland, the maintenance of 'pauper lunatics' in the asylums, poorhouses and private dwellings is paid for mainly out of the rates imposed by the local authorities (District Boards of Control and Parish Councils), also out of the lunacy grant from the local taxation account, and by contributions from relatives and others. It is important to note that the lunacy grant is paid to the Parish Councils, and towards the cost of 'pauper lunatics' only, and that, according to the latest, or Tenth, Annual Report of the General Board of Control for Scotland, the lunacy grant for the year ended 15th May, 1923, amounted to £115,703, or about 2s. 9d. weekly for each certified patient. It is to be observed that there is no statutory provision for the application of the grant towards the cost of voluntary patients of the rate-aided class, and this has proved the great obstacle in the past to the admission of rate-aided patients as voluntaries to the public asylums. Parish Councils have been reluctant to lose the benefit of the grant (as they would do) in the case of voluntary rate-aided patients in asylums, and consequently they have not encouraged the voluntary system. This short-sighted policy would soon be discarded by a simple and obvious provision of the statute, one of the effects of which would be to reduce the disability of certification—in the apt words of the above Report—to its proper place of a social and legal necessity.' The disability of pauperization could not be removed unless the present lunacy obligations of the Parish Councils of the country were transferred by appropriate legislation to the District Boards of Control, thereby bringing the administration of mental diseases into line with that of infectious diseases, including tuberculosis.

"It seems only fair to expect, if the above disabilities were remedied and the early treatment of mental diseases was encouraged in the ways indicated, that rate-supported mental patients would in time come to the mental hospitals at least as willingly as do private patients at present, and perhaps eventually with no more reluctance than do the rate-aided inmates of fever hospitals and sanatoria.

"In any case, the legislation which the Board of the Crichton Royal Institution now so earnestly urges and recommends would not only remedy factors which at present seriously handicap the mental hospital treatment of the rate-aided or poorer classes, but also by facilitating their early treatment, as voluntary inmates of mental hospitals, would do much to enhance the utility of the statutes, and effectually promote the general health, happiness and efficiency of the community.

"W. J. H. MAXWELL,  
*Chairman of the Board of Direction.*

"C. C. EASTERBROOK,  
*Physician Superintendent of the Institution.*"

#### OBITUARY.

WILLIAM ARNOT PARKER, M.B., C.M.Glasg.,

Medical Superintendent, Glasgow District Mental Hospital, Gartloch, N.B.

We regret to announce the death of Dr. William Arnot Parker, who died at his residence, Beechwood, Gartloch, on Wednesday, December 24.

Though he had been failing in health for some years, his wide circle of friends and acquaintances were hopeful that he had recently regained his strength and had still before him years for useful work, but the end came suddenly and unexpectedly.

Dr. Parker graduated in 1889 at Glasgow University, and after an experience in general hospital work was for several years Assistant Medical Officer in the County Asylum at Lancaster and the Glasgow Royal Asylum, and Senior Assistant at Gartloch Asylum.

When Dr. Oswald was appointed Superintendent of the Glasgow Royal Asylum Dr. Parker was chosen as his successor at Gartloch in 1901.

One cannot speak too highly of the work Dr. Parker has done in helping forward and putting into practice the most modern and humane methods for the care and treatment of mental affections.

Dr. Parker was naturally of a quiet and reserved disposition, but he took a genuine interest in the work of the Medico-Psychological Association, and he was always ready to look favourably on any new development in medical thought and science which would forward his life-work. He was eminently progressive.

His contributions to medical literature were few, and probably the most interesting and instructive of these were his Annual Reports. These were full of suggestive and original thought. The large number of medical officers and clinical clerks who have passed through Dr. Parker's hands all testify to his helpful and valuable guidance.

Dr. Parker was a staunch friend and had a wide circle of acquaintances. The affection and esteem in which he was held was shown in the remarkable gathering at a memorial service held at the Asylum on the day of his funeral. The service was very impressive and participated in by many of his patients, whose demeanour and expressions were those of sincere sorrow.

The ceremony at the graveside in the Glasgow Necropolis was attended by a large and representative gathering of his professional colleagues, members of the District Board of Control and Town Council.

HAMILTON C. MARR.

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Lieut.-Col. RICHARD GUNDRY ROWS, C.B.E., D.Sc., M.D., Pathologist, County Mental Hospital, Prestwich.

All students of mental medicine will have heard with the deepest regret of the death of Dr. Richard Gundry Rows. He was well known to the Association for his many contributions, and for the work he did in connection with mental medicine before, during, and after the war. Dr. Rows was a Cornishman, and his father was the Chairman of the Education Committee of that county. He was educated at Queen's College, Taunton, and graduated M.B.Lond. 1891. He also took in the same year M.R.C.S. and L.R.C.P.London, and in 1892 became M.D. It was after a short period of general practice in Reading that he decided to concentrate his attention on the study of mental diseases. His first appointment was at the City Asylum, Birmingham; and afterwards he began work under the Lancashire Asylums' Board. His attitude from the beginning was broad. At the Prestwich Mental Hospital he commenced to lay the foundation of his life's work in neuro-pathology. From this Hospital he passed on to Whittingham Mental Hospital, and after a short tenure of office there, was appointed Assistant Medical Officer and Pathologist to the County Mental Hospital at Lancaster, where at that time Dr. Cassidy, the Medical Superintendent, was engaged in reorganizing the Pathological Department. It was there that Dr. Rows found his opportunity of basing all his original investigations on the sure foundation of neuro-pathology. There was no one who came in touch with him but could be struck by his accurate technique and his highly developed sense of criticism. All was controlled by his wide reading of his subject, so that his opinion on many intricate points was welcomed and commanded respect.

It was this preliminary training in neuro-pathology that fitted Rows for the rôle he took up during the Great War. He felt it his duty to volunteer, and his appointment to the hospital at Maghull, near Liverpool, was not only fortunate for the shell-shocked soldiers, but fortunate also for those who afterwards were engaged as medical officers under the Ministry of Pensions. It was at Maghull that a progressive movement, which might have lain under a shadow in different circumstances, was brought to light. Colonel Rows, as he then was, demonstrated conclusively with the aid of his staff that the early treatment of insanity, although advocated by many of his predecessors, required nothing more than education, foresight, and courage to convert theory into practice, and so save many a drifting mental case from becoming a derelict.

Combined with this, his administrative qualities were of a high order, and although everyone recognized how high he stood in the scientific world, one felt