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[Despatch Abstract.]

Medical History Sheet for Lunatic Asylums.
Communicating to the Surgeon Genl, with
remarks, the instructions of the Govt of his
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amended forms in the annual reports on
lunatic asylums; and approving the pro-
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G.O., No. 174, 20th February 1897.

FEBRUARY.

Medical History Sheet for Lunatic Asylums.

Communicating to the Surgeon-General, with remarks, the instructions of the Government of India in regard to the substitution of certain amended forms in the annual reports on lunatic asylums; and approving the proposal that, when a civil or criminal lunatic is sent by a court for observation to a medical officer, the magistrate in his executive capacity should forward with the lunatic a statement of particulars in the form indicated.

GOVERNMENT OF MADRAS.

PUBLIC DEPARTMENT.

READ—the following papers :—

G.O., Mis. No. 1754, Judicial, dated 22nd August 1895.

Read—the following letter from J. P. HEWETT, Esq., C.I.E., Officiating Secretary to the Government of India, Home Department (Medical), to the Chief Secretary to the Government of Madras, dated Simla, the 31st July 1895, No. 12-Medl.—525.

With Home Department circular No. 4-Medical—186-193, dated the 29th March 1895, were forwarded a note by two members of the Hemp Drugs Commission and a memorandum by the late Surgeon-General with the Government of India, suggesting improvements in the management of lunatic asylums. I am now directed to convey, for the information and consideration of His Excellency the Governor in Council, the following observations, which have been suggested by the report of the Hemp Drugs Commission, regarding the unsuitability, for the purpose for which they are intended, of the present Forms VI and VII attached to the annual reports on lunatic asylums in each province.

2. In their investigation into the causes of insanity the Commission found that little or no reliance could be placed on the information contained in the asylum records on this subject, and they accordingly had to devise a special method of inquiry with the assistance of local magisterial officers in order to obtain the particulars required by them. The results of this investigation were not on the whole satisfactory, owing to the difficulties of obtaining accurate information concerning lunatics, and the Commission were led to record the opinion that, for the reasons indicated by them, a judgment as to the causes of insanity must be expressed with the greatest caution.

3. After a perusal of the report of the Commission the Governor-General in Council is satisfied that steps require to be taken to prepare the records maintained by Superintendents of lunatic asylums with more accuracy than has been the practice in the past. Although, owing to the fact that, at present, Superintendents of lunatic asylums in India are not, as in the United Kingdom, officers whose whole time can be devoted to the working of the asylums in their charge, it is impossible to expect absolute accuracy in the returns, His Excellency in Council considers that, by some of the modifications which are indicated below, and by the institution of careful inquiry before filling in the information required to be shown in them, greater precision might be attained without materially adding to the labour of Superintendents.

4. In the statement attached to Form B of the schedule to the Lunatic Asylums Act XXXVI of 1858, one of the points on which information is required is the "supposed cause" of insanity. The statement is headed by a direction that, if any of the particulars required by it are not known, the fact should be so stated. If then the person issuing an order in Form B is in doubt as to the cause of insanity and there are no facts before him upon which he can base his opinion, he can abstain from recording what appears to him to be the supposed cause, and there is no reason why, in cases of doubt, the facts on which the opinion is based should not be noted on the form. If an entry is made of the supposed cause it will still be liable to correction by the Superintendent of the asylum in his case-book or register, and the latter officer

can at any time, with a view to correcting the entry, ask the magistrate to make further inquiry. To this end, I am to suggest that it would be advisable that Superintendents of Asylums should be instructed that it is a part of their duty, when they have examined a lunatic who is sent to them by a magistrate with the statement required by law and find that the information as to the cause of insanity is insufficient, obscure or of doubtful accuracy, to address the magistrate on the points on which they require further information with a view to further inquiries being instituted by that officer. This inquiry might be made by the magistrate himself or by a subordinate magistrate, but should not be entrusted to the police or other subordinate officials.

5. The Government of India are advised that Statement VI attached to the annual reports of lunatic asylums is far too elaborate and confuses the causes with the types of insanity. The types should be shown in Statement VI and the causes in Statement VII. In order to ensure this, the following modifications might, it appears to the Governor-General in Council, be made in Statement VI:—column 7, with all its sub-divisions, and column 8 might be abolished; cases of toxic insanity being entered under the types in columns 2 to 6 in the statement and distributed as to causes in Statement VII. Column 10 might show the persons who were sent to the asylum as lunatics and who have recovered. It might also refer to supposed lunatics detained under section 6-A of the Lunatic Asylums Act. The heading of this column might be altered to "Declared to have recovered or not yet diagnosed" or to some other suitable heading.

6. Statement VII, as last prescribed under the orders contained in Home Department Resolution, No. 8-Medical—391-399, dated the 13th July 1893, consists of 20 columns. It is observed from some of the annual reports submitted by Local Governments and Administrations for the year 1894 that this statement has not been adopted in all provinces. In the Bengal report, for instance, the statement consists of 45 columns, 22 of which are devoted to physical causes and 23 to moral causes, while in Madras there are 26 columns relating to the former and 23 to the latter. The Government of India consider that the division as to causes in the statement, both as usually submitted and as prescribed in the resolution of the 13th July 1893, is unnecessarily minute, and, as at present advised, they are of opinion that the whole columns under the head "Moral causes" should be abolished and all such cases included under one general heading, namely, "Moral causes." It is important that the cause of insanity should be entered against a lunatic only when it has been ascertained without doubt in the manner indicated in paragraph 4.

7. The Governor-General in Council is advised that it is usual for Superintendents of lunatic asylums to keep up a "case-book" or register in which the history, symptoms, &c., of each case are recorded from time to time. It has been suggested that this book should be included in one of the prescribed records, and that it should contain in respect of each lunatic the information given in the statement with full particulars regarding the cause of insanity and the nature of the enquiries which may have been made towards elucidating the facts noted: the history of the case, condition and symptoms on admission, facts, &c., observed while in confinement with treatment, and, in case of death, the appearance, &c., observed on *post-mortem* examination.

8. I am to add that the Government of India will be glad to be favoured with the views and suggestions of His Excellency the Governor in Council on the proposals made in the preceding paragraphs of this circular.

Order—Mis. No. 1754, Judicial, dated 22nd August 1895.

Communicated to the Surgeon-General for early remarks.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Surgeon-General.

G.O., Mis. Nos. 2489, 2490, Judicial, dated 29th November 1895.

Read—the following letter from Surgeon-Major-General C. SIBTHORPE, F.R.C.P.I., Surgeon-General with the Government of Madras, to the Chief Secretary to Government, dated Madras, 4th October 1895, No. 431:—

With reference to G.O., No. 1754, Judicial, of the 22nd August 1895, communicating for early remarks letter, No. 12-Medl.—525, of the 31st July 1895, from the Officiating Secretary to the Government of India, Home Department (Medical), I have the honour to state that a great deal of attention has of late years been devoted to the improvements of the records maintained in the asylums in this Presidency.

2. With reference to paragraph 4 of the Government of India's letter under reference, Form B is the form used exclusively for *private* patients and is filled up by the friend or relative who signs the order for admission (at the top of the form), and it is therefore outside the province of a magistrate to give the information required in that statement. The Superintendent of the Madras Asylum points out that the only document which affords any clue to the supposed cause of insanity in cases other than those of private patients is the "Medical history sheet" prescribed in G.O., No. 786, Judicial, dated the 29th March 1894, which is prepared by the medical officer except only in cases of criminals judicially acquitted when the acquitting court is answerable for the form. It would, therefore, appear that the law has laid on the medical officer, as most competent to form an opinion, the duty of stating what can be assigned as the supposed cause of insanity. This being so, it seems that the proper person from whom to expect any information on the point at issue is the medical officer and not the magistrate, who, however, might afford valuable collateral information as to antecedents, habits, &c., that may have come to his knowledge. The Superintendent also points out "as regards the 'cause' of insanity it must be confessed that it is next to impossible to fix absolutely the real cause of the mental disorder in any case; at the best, we can only presume at a supposed cause or alleged cause, no more. And this for reasons sufficiently obvious. Take, as a typical example, a case of frequent occurrence in the Presidency town. A man picked up by the police sleeping on the beach in a semi-nude state in an advanced state of starvation and of whom absolutely nothing in the shape of previous history, name, residence, present habits, can be discovered; he is confined for a week or so in the local penitentiary under observation, and viewing his physical state the medical officer alleges 'privation and starvation' to be the cause. This same insane, as often occurs, admits (after admission into the asylum), during a lucid interval, that he was addicted to gunjah or some other narcotic and that he lost his head through over-indulgence. Now it would be equally feasible in my opinion to assign either as the supposed cause, for in the former we have a condition beyond doubt that, frequently, at its close leads to mental aberration, while in the latter only a statement by the insane for the veracity of which we cannot vouch. Instances similar to this might be multiplied and to arrive at an approximately definite conclusion is very difficult. The course pursued at the asylum — and one that I trust will commend itself—is, after carefully considering what has been cited as the alleged cause in his case and the man's subsequent behaviour together with any further information elicited from him, to assign what appears most reasonably to be the probable cause. Beyond this I think it is impossible to speak with certainty." I concur with these remarks of the Superintendent.

3. With reference to paragraph 5 of the letter, I consider Statement VI should be simplified and should deal only with the "types of insanity", adhering strictly to the terms used in the official Nomenclature of Diseases of 1885, pages 30 and 31. Column 10 is valuable as it is, viz., "Other forms of insanity to be specified in foot-notes."

Column 11, "No appreciable disease", should, I think, read "No appreciable mental disease," and should include supposed lunatics detained under section 6 (a) of the Lunatic Asylums Act who have not been declared lunatics. I think there should be a separate column for cases "not yet diagnosed".

4. With reference to the proposals in paragraph 5 of the letter, it appears to me that it would be better to do away with this form altogether and direct the medical

officers to deal with the "causes of insanity," under the sub-headings of physical and moral and giving their reasons in each case, in the professional part of their annual report. If it is retained, I think it would be a mistake doing away with the sub-headings of moral causes. The columns, however, might be conveniently reduced in number by including a number under one heading, for example, grief, misfortune, disappointment, loss of property, loss of friends, anger, fright, nervous shock, disgrace, might all be embodied under "Mental anxiety including the above causes."

5. In the Madras asylum, "case-books" or journals are maintained personally by the Superintendent, who gives all the particulars mentioned in paragraph 7 of the letter under report. These books are included in the list of records to be kept up. In the case of deaths amongst the insanes occurring in any of the asylums a special casualty report on a printed form is submitted for my information.

6. In this connection I would like to call attention to the different "headings" under which I made my annual report on these asylums (letter No. 353-A, dated the 9th April 1895—*vide* G.O., Nos. 1303, 1304, Judicial, of the 18th June 1895). If the administrative and professional reports from all the asylums in India were made on uniform lines it would generally facilitate their comparison.

Order—Mis. No. 2489, Judicial, dated 29th November 1895.

The Government of India will be addressed.

2. The Surgeon-General will be requested to quote the authority under which the heading of column 11 of Statement VI appended to the Lunatic Asylum report for 1894 has been altered from "not yet diagnosed" into "no appreciable disease".

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

Letter—Mis. No. 2490, Judicial, dated 29th November 1895, to the Secretary to the Government of India, Home Department.

G.O., Mis. Nos. 1484, 1485, Judicial, dated 14th September 1896.

Read—the following paper:—

Extract from the Proceedings of the Government of India in the Home Department (Medical),—under date Simla, the 11th July 1896, No. 16-Medical—576-86.

Read—

Home Department circular Nos. 525-33 (Medical), dated the 31st July 1895, as revised by the orders conveyed by Home Department endorsement, No. 10-Medical—794-11, dated the 8th October 1895.

RESOLUTION.

In the circular of the 31st July 1895 (as revised in part by Home Department endorsement, No. 10-Medical—704-11, dated the 8th October 1895) the Government of India, in connection with some criticisms which had been expressed by the Hemp Drugs Commission, commented on the unsuitability, for the purpose for which they are intended, of the present Forms VI and VII attached to the annual reports on

lunatic asylums in each Province and, with the object of attaining greater accuracy in the records maintained by Superintendents of lunatic asylums, put forward certain suggestions for the opinion of Local Governments and Administrations.

These suggestions were—

- (1) that, with reference to the heading "Supposed cause" of insanity in the statement attached to Form B in the schedule to the Lunatic Asylums Act, XXXVI of 1858, Superintendents of asylums should be informed that it is a part of their duty, on examining a lunatic sent to them by a magistrate with the statement required by law, when they find that the information is insufficient, obscure or of doubtful accuracy, to address the magistrate on the points on which they require information with a view to further inquiries being instituted either by that officer himself or by a subordinate magistrate. Such inquiries, it was suggested, should not be entrusted to the police or other subordinate officials.
- (2) that since existing Statement VI attached to the annual reports on lunatic asylums is too elaborate and confuses the causes with the types of insanity, the types should be shown in Statement VI and the causes in Statement VII. In order to secure this, it was proposed that—
 - (a) column 7, with its sub-divisions, and column 8 of Statement VI, should be abolished;
 - (b) cases of toxic insanity should be entered under the types in columns 2 to 6 of Statement VI, and distributed as to causes in Statement VII;
 - (c) column 11 (the reference was incorrectly made to column 10) of Statement VI, which is headed "Not yet diagnosed," should show the persons who, having been sent to the asylum as lunatics, have recovered, and should also refer to supposed lunatics detained under section 6-A of the Lunatic Asylums Act, 1858, as inserted by section 1 of Act XVIII of 1886; and that the heading of the column should be altered to "Declared to have recovered or not yet diagnosed" or to some other suitable heading;
- (3) that the divisions as to causes of insanity in Statement VII, both as usually submitted and as prescribed in Home Department Resolution, No. 8—Medical—391—399, dated the 13th July 1893, appeared to be unnecessarily minute, and that the whole of the columns under the head "Moral causes" should be abolished, and all such cases included under one general heading, namely, "Moral causes";
- (4) that the "case-book," or register, kept up by Superintendents of lunatic asylums to show the history and other particulars of each case, should be included in one of the prescribed records, and that it should contain in respect of each lunatic the information given in the statement with full particulars regarding the cause of insanity and the nature of the inquiries which might have been instituted with a view to elucidate the facts noted.

2. The replies of Local Governments and Administrations upon the first of the points specified above show that paragraph 4 of the circular of 31st July 1895 was not worded with sufficient clearness, and that there has in consequence been some misapprehension as to the wishes of the Government of India in the matter. The object which the Governor-General in Council had in view was that in every case in which a patient is received into a lunatic asylum a complete medical history of his case should be received with him. Though this end is attained in those cases in which the statute law requires a medical history sheet, there is in the majority of cases no statutory obligation to furnish the Superintendent of the asylum with the previous history of the patient.

The different circumstances under which lunatics may be received and confined in an asylum are the following:—

- (a) Under section 4 of Act XXXVI of 1858, the magistrate has power to send to an asylum lunatics found wandering at large, or believed to be dangerous by reason of their lunacy. No person can be sent to a lunatic asylum under the provisions of this section without a certificate from a medical officer in Form A of the schedule attached to the Act.
- (b) Under section 5 of the Act, the magistrate can also order a lunatic, who is not under proper care or control, or who is cruelly treated or neglected, to be received into an asylum. In this case also a certificate in Form A is required. The Act does not prescribe the form of the magistrate's order, but it is customary for a descriptive roll to be sent with the certificate in Form A.
- (c) Under section 463 of the Criminal Procedure Code, when an accused person is found to be of unsound mind and incapable of making his defence, and the case is one in which bail may not be taken, or if sufficient security is not given, the Local Government may, on the report of the magistrate or court, order the accused to be confined in a lunatic asylum, and the magistrate or court has to give effect to such order.
- (d) When the judgment of the magistrate or court states that an accused person committed the act alleged against him but acquits him upon the ground that at the time when he committed it he was, by reason of unsoundness of mind, incapable of knowing the nature of the act alleged as constituting the offence, or that it was wrong or contrary to law, the Local Government may (section 471, Criminal Procedure Code) order such person to be confined in a lunatic asylum.
- (e) Under section 31 (1) of the Prisoners Act, V of 1871, as amended by Act X of 1886, whenever it appears to a Local Government that any person detained or imprisoned under any order or sentence of a magistrate or court is of unsound mind, it may, by a warrant setting forth the grounds of belief that the person is of unsound mind, order his removal to a lunatic asylum within the territories subject to it.
- (f) In all other cases outside the Presidency towns (section 8 of Act XXXVI of 1858), an order of the Civil Court is required, which has to be accompanied by a certificate in Form A.
- (g) In the Presidency towns (section 7 of Act XXXVI of 1858), a lunatic may be received into an asylum with an order under Form B of the schedule appended to the Act, if he has been found to be a lunatic by inquisition or under an inquiry directed by order of one of the Courts of judicature established by Royal Charter, and, if not so found, with an order in Form B, supported by a certificate in Form A, signed by two physicians or surgeons, one of whom must be a Presidency Surgeon or a Surgeon in the employ of Government.

3. The cases, therefore, in which it is necessary, by executive order, to direct that a medical history sheet shall be forwarded with the lunatic to the asylum, are when he is sent there—

- (i) under section 4 or section 5 of Act XXXVI of 1858;
- (ii) under section 466 or section 471 of the Code of Criminal Procedure;
- (iii) under section 31 (1) of the Prisoners Act, V of 1871, as amended by Act X of 1886; or
- (iv) under section 8 of Act XXXVI of 1858 by order of a Civil Court.

The only cases in which the statute law requires any statement of particulars regarding a lunatic to be forwarded with him to the asylum are those in which patients are sent to a lunatic asylum under section 7 of the Act, and the result is that in the great majority of cases there is nothing to ensure that the Superintendent of a lunatic asylum shall receive any detailed information about a patient whom he is required to admit into an asylum. The Governor-General in Council is of opinion that a medical statement should in every instance accompany a patient. It appears,

however, to His Excellency in Council that this object may be secured without legislation, and he has accordingly had the form of medical history sheet which is appended to this resolution prepared and desires that it be adopted in all cases in which Local Governments and Administrations order (sections 466 and 471 of the Criminal Procedure Code or under section 31 (1) of Act V of 1871, as amended by Act X of 1886) that an accused or convicted person should be confined in a lunatic asylum. The Governor-General in Council will also be glad if, in order to secure uniformity, instructions may, with the concurrence of the High Courts, be issued to secure that the same form is used in all cases in which a magistrate (sections 4 and 5 of Act XXXVI of 1858) or the Judge of a Civil Court (section 8 of Act XXXVI of 1858) may order a lunatic to be received into an asylum. The Calcutta High Court will be separately moved to issue any instructions which may be considered necessary to secure the object in view in Bengal.

4. Heading 18 of the form attached to this resolution corresponds to the heading "Supposed cause" in the statement attached to Form B in the schedule to Act XXXVI of 1858. As pointed out in paragraph 4 of the circular dated 31st July last, if the person filling in either of the two forms, one or other of which will in future accompany a lunatic, is in doubt as to the cause of insanity and is unable to form an opinion, he can abstain from recording the "supposed" cause, or, if he holds an opinion as to the cause but is doubtful of its correctness, he may note the facts on which his opinion is based. Should the Superintendent find, after observation of the lunatic, that the opinion given is probably incorrect, it can always be corrected in the entries in the case-book. It was in order to meet the case of lunatics regarding whom the Superintendent has reason to believe that an incorrect entry has been made and desires to have his own opinion tested by such facts as further inquiry may elicit that the Governor-General in Council proposed that the Superintendent should be authorised to ask the magistrate to make further inquiry into the cause of insanity or upon any other point regarding which the information given in the statement previously furnished was obscure or obviously incorrect, and that the magistrate should thereupon be required to take such further evidence as might be available and to forward the record of his proceedings to the Superintendent of the asylum. The suggestion has met with general approval, but in regard to the rule proposed by the Government of India upon this point—namely, that this further inquiry should be made by the magistrate himself or by a subordinate magistrate and not entrusted to the police or other subordinate officials—the Government of Bengal has expressed a doubt whether it can properly be prescribed as an invariable rule, as the facts of the personal history of a lunatic, if discoverable at all, can best be found out by the police or other subordinates. The Government of India agree with this criticism. In their opinion it should always be open to a magistrate to employ the agency of the police or other subordinate officials in particular details connected with his inquiry, but in every case the magistrate should be personally responsible for the proper conduct of the inquiry.

5. As observed in paragraph 1 of this resolution, column 11 of Statement No. VI attached to the annual reports on lunatic asylums was erroneously quoted in paragraph 5 of the Home Department circular of 31st July 1895 as "column 10"; and this has led to some confusion in the replies of Local Governments and Administrations. In so far, however, as the opinions received regarding the proposed changes in Statement VI are relevant, there is a general agreement in the proposal to show types of insanity in this statement and causes in Statement VII; that columns 7 and 8 of Statement VI should be abolished; that cases of toxic insanity should be amalgamated in columns 2 to 6 of Statement VI (distributing them under causes in Statement VII); and that column 11 of Statement VI should show persons sent to an asylum as lunatics who have recovered, and should also refer to supposed lunatics detained for observation under section 6-A of the Lunatic Asylums Act, 1858, as inserted by section 1 of Act XVIII of 1886; and finally, that the heading of the column should be altered to "Declared to have recovered or not yet diagnosed." These amendments have accordingly been adopted, and the revised form of Statement VI, which is approved by the Government of India and should in future be followed, is appended to this resolution.

6. The modifications of Statement VII which were proposed in the revised paragraph 6 of the circular of 31st July 1895, and which were to the effect that all

the divisions under the head "Moral causes" should be abolished, the main heading alone remaining, have been concurred in by Local Governments and Administrations. Statement VII has been revised accordingly and a copy of it, as now approved, is attached to this resolution.

7. The forms of Statements VI and VII as now revised should be used for the compilation of the statistics submitted with future provincial reports on lunatic asylums, commencing with the report for 1896.

8. The utility of a "case-book" such as was suggested in paragraph 7 of the circular of 31st July 1895 has been generally admitted by Local Governments and Administrations and has been referred to incidentally in paragraph 4 of this resolution. This book should, therefore, be maintained by all Superintendents of lunatic asylums. The Governor-General in Council does not desire to pass any orders as to the form of this register. While leaving this matter to the discretion of Local Governments, the Government of India desire to observe that what it is specially desired to have traced is the progress of a case, as well as the results of any personal observations, which very possibly may not come under the headings of any set form that may be prescribed. For this reason, and because the method adopted by a Superintendent in the recording in his case-book would be an index to his success as a Superintendent, it appears to the Government of India that it may not be undesirable to allow Superintendents of lunatic asylums some latitude in the method in which their record should be maintained.

9. The error in the quotation of column 11 of Statement VI, which is referred to in paragraph 5 of this resolution, was caused by following the numbering of the columns adopted in one of the lunatic asylums reports for 1893. The Government

of India have recently drawn attention* to the necessity of adhering strictly to the forms prescribed by them, and, in noticing

this second instance in which the standard forms have been departed from, they desire to emphasise the inconvenience that may arise from such unsanctioned deviations. As regards the remarks in paragraph 10 of Home Department Resolution, No. 8-Medical—391-399, dated the 13th July 1893, that the revised forms then laid down are Provincial forms and that it is for Local Governments to prescribe any subsidiary changes in the statements submitted from individual asylums which may be required to give effect to the alterations prescribed in that resolution, it is to be understood that no departure should be permitted from the numbering and headings of the columns prescribed by the Government of India; and that subsidiary changes should not be introduced without a reference to the Governor-General in Council if they involve a renumbering or alteration in the heading of any standard column or form.

Order.—Ordered, that a copy of this resolution, with copy of the revised forms and of the form of medical history sheet, be forwarded to Local Governments and Administrations (except Coorg and Hyderabad) for information and guidance, that a copy be forwarded to the Military Department with the request that orders may issue requiring the medical statement which has to be furnished under the order in that department, No. 1069, dated 29th October 1875, to be furnished in the form prescribed by this resolution and that a copy of the resolution be forwarded to the Director-General, Indian Medical Service, for information.

(True Extract.)

(Signed) J. P. HEWETT,
Secretary to the Government of India.

To the Government of Madras.

ANNUAL STATEMENT No. VII.
Showing the alleged Causes of Insanity among the Lunatics in the Asylum at

during the year 189 .

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
Cases.	Physical causes.											Moral causes.	Total known.	Total unknown.	Grand Total.		
	Charas-smoking.	Ganja-smoking.	Use of Bhang.	Opium-smoking (Madak and Chandu).	Opium-eating.	Spirit-drinking.	All other intoxicants.	Fever.	Etc.	Etc.	Total physical.						
											Males.					Females.	Total.
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.		
Remaining ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Admitted	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Total treated	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Recovered	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Improved	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Died ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		

Order—Mis. No. 1484, Judicial, dated 14th September 1896.

The following letter will be despatched to the Government of India.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

Letter—No. 1485, Judicial, dated 14th September 1896, to the Secretary to the Government of India, Home Department.

From J. P. HEWETT, Esq., C.I.E., Secretary to the Government of India, Home Department (Medical), to the Chief Secretary to the Government of Madras, dated Calcutta, the 22nd December 1896, No. 1112.

I am directed to acknowledge the receipt of your letter No. 1485 (Judicial), dated the 14th September 1896, in which the Government of Madras represent that the entry of certain particulars required regarding criminal lunatics whose cases are reported for orders under sections 466, 471, 474 and 475 of the Code of Criminal Procedure is not provided for in the form of medical history sheet prescribed in paragraph 3 of Home Department Resolution, No. 16-Medical—576-86, dated the 10th July 1896.

In commenting upon this omission, the Governor in Council observes that these particulars are included in the form of medical statement at present in use in the Madras Presidency, a specimen of which is enclosed, and requests the sanction of the Government of India to the adoption of this form in the Madras Presidency (if not elsewhere) instead of the form prescribed in the resolution of the 10th July.

With the view of avoiding the confusion and mistakes which are to a great extent obviated if all the information which is required in the various circumstances referred to in your letter is sent up in the same form, the Government of Madras deprecate any proposals to embody the particulars alluded to above in a special form for use only in the case of the four sections of the Code of Criminal Procedure quoted.

2. In reply, I am to explain that the form of medical history sheet prescribed by the Government of India was drawn up in order to supply a deficiency noticed by the Hemp Drugs Commission in the information supplied to the Superintendents of asylums on the admission of lunatics, and was intended chiefly for use in the case of non-criminal lunatics, who form the majority of those admitted into the asylums. With a view, however, to uniformity it was made applicable to all lunatics, criminal or otherwise. The form was intentionally drawn up to avoid stating precise conclusions. For instance, the heading "Type of insanity," which is inserted as heading No. 20 in the form enclosed with your letter, was purposely omitted, since the object of the statement was to furnish all the ascertained materials for arriving at an opinion without giving the conclusion, since, at the time of the patient's admission to the asylum, it may be difficult, if not impossible, to arrive at a correct judgment upon this point.

3. I am to add that the Government of India have no objection to the Government of Madras prescribing supplementary forms to meet cases in which the question of the release of a lunatic is presented to the Governor in Council for consideration, but that, having regard to the reasons which have actuated them in requesting Local Governments to adopt an uniform medical history sheet, the Governor-General in Council hopes that the Government of Madras will refrain from altering the form prescribed.

Transferred to the Public Department.

(By order.)

6th January 1897.

(Signed) W. FRANCIS,
Acting Under Secretary.

G.O., No. 999, Judicial, dated 12th June 1896.

Read—the following papers :—

From A. G. CARDEW, Esq., M.A., Inspector-General of Prisons, to the Chief Secretary to Government, dated Ootacamund, 28th March 1896, No. 1710.

I have the honour to address the Government on the subject of the medical history sheets of lunatics, the existing orders regarding which are embodied in G.Os., Nos. 786 and 2224, Judicial, dated 29th March and 13th September 1894.

2. The present state of the subject is as follows :—A medical history sheet, including no less than 29 headings (annexure to G.O., No. 786, Judicial, dated 29th March 1894) is required in the case of every lunatic. If the lunatic is a convict in jail and his removal to an asylum is recommended under Act V of 1871, or if the lunatic is confined under section 466 of the Criminal Procedure Code, the medical history sheet must be prepared by the medical officer certifying the man to be insane and must accompany the application to Government. If the lunatic is confined under section 471 of the Criminal Procedure Code, the medical history sheet must be prepared by the court in communication with the medical officer and must accompany the report to Government. If the lunatic is dealt with under Act XXXVI of 1853 (except section 7), the medical history sheet must be prepared by the medical officer and must accompany the lunatic's papers when sent to the asylum.

3. It will be seen that in every case, except possibly that of lunatics dealt with under section 471, Criminal Procedure Code, the duty of drawing up the medical history sheet is imposed on the medical officer certifying to the fact of insanity.

4. But in laying down these rules, two points appear to have been overlooked, viz.—

- (1) For what purpose the medical history sheet is required.
- (2) How the medical officer is to obtain the necessary information to enable him to fill it up.

5. The origin of the present medical history sheet is to be found in the report of the Bengal Committee on the treatment of recovered criminal lunatics which is recorded in G.O., No. 726, Judicial, dated 24th April 1889. The medical history sheet which that committee proposed was much more limited than the one now in use, and it was intended for use solely in the case of *recovered criminal lunatics* already in asylums; in those cases the necessary information could be easily and leisurely collected.

6. But owing to the somewhat loose wording of the first line of Appendix I to G.O., No. 726, Judicial, dated 24th April 1889, this medical history sheet came to be required, not only whenever the papers of a *recovered criminal lunatic* are sent up to Government, but whenever the papers of *any criminal lunatic* are sent up to Government. This change, which came about gradually, was given definite form in paragraph 6 of G.O., No. 786, Judicial, dated 29th March 1894. But it is evident (1) that to require the medical history sheet to accompany the case of every lunatic sent up to Government is to go far beyond what the Bengal Committee of 1888 recommended; (2) that in the case of convict lunatics sent up under Act V of 1871 and of criminal lunatics sent up under sections 466 and 471 of the Criminal Procedure Code, the Government does not require the medical history sheet at all. The Superintendent of the lunatic asylum may require some of the information to put in his registers; but to the Government itself the medical history sheet is unnecessary, all that is wanted being a certificate of insanity and information falling under heads 28 and 29 of the medical history sheet.

7. It will thus be seen that the submission of the medical history sheet to Government (except in the case of recovered criminal lunatics) is unnecessary. But it will also be observed, if the question is considered, that medical officers, on whom is imposed the duty of drawing up the medical history sheet, have no means whatever of imposed the duty of drawing up the information necessary. Many lunatics cannot be accurately supplying one-half of the information necessary. Many lunatics cannot even give their names, much less their birth-place, caste, age, religion, previous occupation, whether they had previous attacks, whether they used intoxicants and so on. As the duty of preparing the medical history sheet rests solely with the medical officer, the courts naturally do not concern themselves with the matter, and lunatics

are sent to a jail accompanied only by a warrant and without further information. The medical officer then makes a reference to the court for information, and the court, after prolonged delay, forwards certain totally-untested statements which have been procured by the police. Thus the only practicable result of the whole procedure is great delay, and as the detention of civil lunatics under section 6-A, Act XXXVI of 1858, is limited to 14 days, cases of illegal detention are of constant occurrence, while the disposal of cases of criminal lunatics are likewise delayed by references between the court, the medical officer and the police.

8. It thus appears that, in the desire to produce a clear and uniform rule, the object with which the medical history sheet is needed has been lost sight of. In the case of recovered criminal lunatics, whose cases are submitted to Government under the rules drawn up by the Bengal Committee, a medical history sheet is required by Government itself. In all other cases, it is not required by Government at all, but merely by the Superintendent of the lunatic asylum. This being so, there is no advantage in delaying the submission of cases under sections 466 and 471 of the Criminal Procedure Code by the previous preparation of the medical history sheet. Again, much of the information required in the medical history sheet can never be supplied by the medical officer, but must be obtained from the courts. It would be much more satisfactory if the courts were directly charged with the duty of collecting this information. Finally, as much of the information is only needed for statistical purposes in the asylum, it might be collected at leisure after the admission of the lunatic, so that prolonged, and often illegal, detention of the lunatics in jails and sub-jails might be prevented.

9. The matter is complicated by the existence of several different classes of lunatics, and I am not in possession of the revised rules of the lunatic asylum or of information as to what details are necessary for statistical purposes in that institution. I have therefore not attempted to submit any proposals, but have merely pointed out the practical defects of the present state of affairs. It, however, the Government is of opinion that these defects do exist, I would suggest that the preparation of a brief set of definite rules might be ordered to be undertaken by the Surgeon-General and myself, so that all doubtful points might be thoroughly thrashed out.

10. I would add that in December last I addressed District Magistrates asking them to direct courts which send lunatics to jails for observation to send with them, or shortly afterwards, the necessary information to enable medical officers to fill up the medical history sheet. No practical effect has, however, followed, and one District Magistrate (of Cuddapah) even declined to issue any such directions, stating that to do so would weaken the responsibility of medical officers. He, however, omitted to state how he proposed that the medical officer who has to fill up the medical history sheet was to obtain the necessary information.

From Surgeon-Major-General C. SIBTHORPE, F.R.C.P.I., Surgeon-General, with the Government of Madras, to the Chief Secretary to Government, dated Ootacamund, 4th May 1896, No. 60-Tour.

With reference to the letter from the Inspector-General of Prisons referred to me for remarks with your endorsement, No. 790, Judicial, dated the 10th April 1896, I have the honour to state that before submitting my reply I considered it desirable to ascertain the views of the Superintendent, Lunatic Asylum, Madras, who from his knowledge of the daily working of G.O., No. 786, Judicial, dated the 29th March 1894, ought to be better able to know his needs and requirements and to discuss the question at issue from a practical point of view.

2. In his report, which is both elaborate and complete, he has endeavoured, with much success, to meet the objections raised by the Inspector-General of Prisons, and I enclose a true copy of it for the information of Government.

3. The two main points of contention by the Inspector-General of Prisons are, as stated by the Superintendent—(a) the necessity, and (b) the authorship, of the medical history sheet. As regards (a), the Superintendent clearly states that it is the only document from which we can gather all the data necessary for the preparation

of statistics and that, both on this account and as a medium of information to Government for dealing with recommendations regarding the release of criminal lunatics, the document is absolutely indispensable. He therefore strongly deprecates its abolition or any further modification of it. In this view I fully concur, and as the document seems from the Superintendent's report to form the ground-work of statistics from the asylum as laid down by the Government of India, his opinion regarding its retention is entitled to every consideration.

4. With reference to the authorship, I agree with the Superintendent that most of the information required in the medical history sheet can only be filled with any authority by a duly-qualified medical man. This fact must have been fully considered by Government when the order was made, and I therefore do not consider that any change is called for in this respect.

5. In paragraph 8 of his letter, the Inspector-General remarks that "as much of the information is only needed for statistical purposes in the asylum, it might be collected at leisure after the admission of the lunatic." This procedure, as remarked by the Superintendent, will entail unnecessary correspondence. In my opinion, his duties are already very heavy and to saddle him with further unnecessary work will impair the efficiency of the asylum administration. I consider that the Superintendent's suggestion, regarding stringent orders being issued to all judicial officers not to send an insane to the asylum till all the papers in the case are complete and in proper form, is deserving of consideration and will, if acted upon, considerably lessen his difficulties.

6. As regards paragraph 9 of the Inspector-General's letter, the revised Lunatic Asylum Code (draft) is now before Government, in which any further rules which Government may consider necessary may be added. It does not, however, appear to me expedient at this stage that the Inspector-General and myself should in committee draw up any set of rules on the subject.

7. The correspondence is herewith returned as requested.

ENCLOSURE.

From Surgeon-Captain C. H. LEET PALK, M.B., Superintendent, Government Lunatic Asylum, to the Surgeon-General with the Government of Madras, dated 20th April 1896, No. 285.

In compliance with your No. 2131, dated the 16th April 1896, forwarding a letter from the Inspector-General of Prisons for remarks, I beg to make the following observations:—

2 The two main points of contention by the Inspector-General of Prisons regarding the medical history sheet of insanes are—

(a) Its necessity. | (b) Its authorship.

3. First, as to the necessity of such a document. Its inception is to be noted in Appendix I to G.O., No. 726, Judicial, dated 24th April 1889, where it was originally designed to afford Government all available information necessary to deal with recovered criminal lunatics proposed for release or transfer, in keeping with the rules of the Bengal Committee. In a later G.O., No. 786, Judicial, dated 29th March 1894, the Government, with the view of introducing a uniform document capable of furnishing information, not only as regards recovered criminal lunatics, but also of civil lunatics for admission, under sections 4 to 6 of Act XXXVI of 1858, considerably amplified the form of medical history sheet, and incorporating in it all the information up to then, supplied by Form C. In its present form, it will therefore be seen that the medical history sheet is the only document from whence can be gathered all the data necessary for the preparation of statistics, the only other paper in connection with an insane's admission being the certificate of insanity (Form A) which deals exclusively with the patient's mental state.

Both, therefore, as a medium of information to Government for dealing with a criminal's release or otherwise and as the ground-work of statistical returns from this asylum as laid down by the Government of India, this document is absolutely indispensable and I strongly deprecate its abolition or any further modification of it.

4. Secondly, as to the authorship of the medical history sheet. From its very name, it would appear on the surface that none but a duly-qualified medical man would be the authority for filling in most of the information required. To seek to shift the onus of preparing this document from the medical officer to the judicial officer, on the score that the former has not sufficient time or means for making the necessary observations, does not, to my mind, appear well grounded. The period of detention (14 days) is quite ample for any medical officer (who probably

sees the insane almost daily during that period) to be able to give definite information in relation to an insane's mental condition. As a matter of fact, ten days is, I believe, the average duration under which an insane is detained in the local Penitentiary before he is certified as insane by the medical officer. The difficulty experienced by the medical officer in getting certain particulars about the insane, referred to in paragraph 7 of the Inspector-General of Prisons' letter, applies with equal force to the judicial officer, who perhaps has less opportunities of interviewing him and is consequently no better—if not less—fitted to be the author of the medical history sheet. I admit that in some cases, it is absolutely impossible to get any information worth the name, no matter from what source, and nothing therefore would be gained by simply changing the authorship. It has been the constant experience of this asylum to have to return papers or call for those wanting, very frequently, from criminal insanes sent here by jails, where presumably ample time was enjoyed to enable the fullest information being afforded and yet it has not been achieved. I am therefore strongly of opinion that the medical officer should, as heretofore, be the author of the medical history sheet as the officer best qualified to afford the purely professional information required on most points.

5. In conclusion, I just wish to allude to the concluding lines of paragraph 8 of the letter under remark, and state that such a procedure would only entail unnecessary correspondence and heavily handicap the already heavy work of this institution. Indeed, I may go further, and request that Government may be pleased to issue the most stringent injunctions to all judicial officers concerned not to send an insane here till all his, or her, papers are complete and in proper form.

Order—No. 999, Judicial, dated 12th June 1896.

The Government does not consider that any change in the existing procedure with regard to medical history sheets has been shown to be necessary.

2. The fact that the rules in force in Bengal differ from those in this Presidency does not in itself appear to afford ground for alteration in the latter. All but three of the items in the present form of medical history sheet furnish information which is necessary either (1) for the statistical returns prescribed by the Government of India, (2) for the guidance of Government when deciding whether the insane should be admitted into an asylum, (3) for the information of the Superintendent of the asylum in his treatment of the patient, or (4) for the assistance of Government in deciding eventually whether an insane is or is not eligible, under the rules, for release.

3. The information comprised in the first three of these four classes must be available at the time that the case of the insane is submitted for the orders of Government, and he or she is admitted into an asylum. That included in the last of them can undoubtedly be collected with more accuracy and less trouble at the time when an insane's case first comes up than at a subsequent and often distant date.

4. It is thus, in the opinion of Government, undesirable to postpone the preparation of the medical history sheet until after an insane's admission into an asylum. The Inspector-General's fears that the present system must lead to illegal detention seem to be groundless, for section 6-A of Act XXXVI of 1858 appears to apply only to detention for the purposes of medical observation.

5. The Inspector-General further proposes that the information required for medical history sheets should in future be collected by the Courts instead of by medical officers as at present on the ground that under the existing system the latter have to apply to the former for assistance in compiling it. It appears to Government, however, that under the scheme suggested by Mr. Cardew, the former would require to apply to the latter for information on all the medical points in the history sheet and that no advantage would thus result.

6. The existing procedure in these matters should accordingly be maintained.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Inspector-General of Prisons.
" Surgeon-General.

G.O., R. No. 1259, Judicial, dated 23rd July 1896.

Read—the following letter from A. G. CARDEW, Esq., M.A., Inspector-General of Prisons, to the Chief Secretary to Government, dated Ootacamund, 25th June 1896, No. 4097:—

In my letter, No. 1710, dated 28th March 1896, I suggested that the duty of collecting so much of the information required for the medical history sheet of lunatics as is of a non-medical nature should be imposed on the Courts which send the lunatics for observation, and that the transfer of lunatics from jails and sub-jails to the lunatic asylums, should not be delayed until the medical history sheet was completed. These recommendations were made in the interests of the lunatics, whose prolonged detention in jails and sub-jails is obviously undesirable, though of course it saves the authorities of the lunatic asylum trouble to receive all papers complete with the lunatic. In G.O., No. 999,*

* Not communicated to the High Court.

Judicial, dated 12th June 1896, it has been decided that the medical history sheet must continue to be submitted at the time that the lunatic is sent to the asylum or the lunatic's case submitted to Government under the Criminal Procedure Code, and that the medical officer who grants the certificate of lunacy must continue to be responsible for all the entries in the sheet. It is still possible, however, to reduce the period of detention which lunatics have to undergo in jails and sub-jails before being forwarded to the asylum by imposing on the Courts the duty of supplying medical officers *promptly* with the information required for filling up so much of the medical history sheet as is of a non-medical nature, and it is in order to obtain the assistance of Government in this direction that this further reference is made.

2. The heading of the form of medical history sheet prescribed in G.O., No. 786, Judicial, dated 29th March 1894, and modified by G.O., No. 2224, Judicial, dated 13th September 1894, directs that 26 out of the 28 headings in the sheet shall be filled up by the medical officer, while the information required to fill in headings 28 and 29 should generally be procured from the District Magistrate. But of the 26 headings which have to be filled up by the medical officer, it is evident that several must generally be procured from some other source than the lunatic himself. If the patient is insane, he often cannot give his own name—much less details as to date of birth, whether married, number of children, religion, previous occupation, record of previous attacks, previous habits, &c. This information has to be got from the committing Court, and what is desired now is to obtain the orders of Government distinctly imposing on the committing Court the duty of supplying the medical officer promptly with this information.

3. In consequence of complaints received from medical officers regarding delay on the part of Courts in furnishing information regarding lunatics sent for observation, I issued on 9th November last a circular letter, No. 5824, of which copy is enclosed, requesting District Magistrates to direct Subordinate Courts to furnish medical officers with the necessary information either when sending the lunatic for observation or within seven days afterwards. Objection has, however, been taken to the issue of these instructions to the magistracy on the ground that this course would weaken the responsibility of medical officers and would furnish them with untested statements supplied by the police. The letter embodying these objections is submitted for the consideration of Government. It appears to me that the medical officer does not require the information to enable him to certify whether the person is a lunatic or not, his certificate being founded on altogether different grounds, but merely to enable him to supply certain statistical information necessary for departmental purposes at the lunatic asylums. The medical officer has no means of getting the necessary information except through the court which sends the lunatic for observation, and it is, therefore, I submit, desirable that the obligation resting on the court to furnish this information as promptly as possible should be clearly laid down and should be based on the authority of an order of Government. I therefore request that the Government may be pleased to direct that, when a civil or criminal lunatic is sent for observation to a medical officer, the court shall send with the lunatic a statement of information such as is annexed to my circular letter, No. 5824, dated 9th November 1895 (above

referred to), or, if it is impossible to supply the requisite information at the same time that the lunatic is forwarded, that the court shall furnish the statement to the medical officer with the least practicable delay afterwards.

ENCLOSURE.

From A. G. CARDEW, Esq., M.A., I.C.S., Inspector-General of Prisons, to all District Magistrates, dated Ootacamund, 9th November 1895, No. 5824.

Various complaints have been made by medical officers of jails regarding the inadequacy of the information furnished to them by magistrates when lunatics, criminal or civil, are sent for observation. Under section 6-A, Act XXXVI of 1858, civil lunatics can only be legally detained under observation for a maximum period of 14 days, but owing to the defective information received with such lunatics, references have often to be made to the magistrate, thus producing delay.

2. In order to reduce such delays as far as possible, I have the honour to request that orders may be issued to all magistrates directing them, when sending either a civil or criminal lunatic to a medical officer for observation, to send with the lunatic a statement in the form annexed to this letter, or, if it is impossible to supply the requisite information at the same time that the lunatic is forwarded, to furnish the same not less than seven days afterwards.

ANNEXURE.

STATEMENT of Information regarding	Criminal Civil	Lunatic	sent for observation to
		Jail on the	189
the Medical Officer of the			
1. Lunatic's name.			
2. His previous occupation.			
3. His birth-place and last residence.			
4. Whether married, and number of children.			
5. If criminal, nature of offence with which charged.			
6. Whether there is any history of insanity in lunatic's family.			
7. Whether there is any record of previous attacks of insanity in the lunatic, and, if so, at what dates and of what duration.			
8. Duration of present attack, and whether continuous or not.			
9. Has the lunatic been addicted to the use of intoxicants?			
10. Is any probable cause of insanity known?			
11. Has lunatic shown aggressive or suicidal tendencies?			

From A. C. TATE, Esq., Acting District Magistrate of Cuddapah, to the Inspector-General of Prisons, dated 20th November 1895, No. 1117-Magl.

With reference to your letter, No. 5824, dated 9th November 1895, I have the honour to state that the course which you propose for adoption will, I fear, have the effect of easing medical officers in an undesirable manner of considerable responsibility which properly rests on them. Under existing rules, third-grade hospital assistants are frequently empowered to grant the certificates required under the Lunatics Act (Act XXXVI of 1858) for civil lunatics, and, considering the gravity of the subject, I should be sorry to see anything done to lighten their responsibilities.

2. The rules require that a magistrate of the first class should frequently interview such lunatics in company with the medical officer. The responsibility for this being joint, there seems no reason to apprehend that there will be any difficulty in the way of the medical officer getting without delay any information that he requires and which the magistrate can furnish.

3. As regards criminal lunatics, the case is different. In such cases, there is no rule requiring magistrates to interview the suspected lunatics in company with the medical officer, and these lunatics may be dealt with by magistrates of any class. But the law requires the magistrate to adjudicate upon the fact of the insanity of the criminal and such adjudication must proceed upon the regular sworn testimony of the medical officer and other witnesses. Under such circumstances, it seems inexpedient and unwise to require the magistrate to furnish the medical officer beforehand with information unsanctioned by the solemnity of an oath or solemn affirmation and the accuracy of which has not been tested by him in judicial manner. Any information he could get would be obtained through the police (in nearly every case), and I have known more than one case where a criminal, acting either under advice or of his own motion, pretended madness in order to escape the consequence of his crime and where I have reason to think he was assisted in this course by the police.

4. It is, of course, obvious that much of the information that your form provides would never come before the magistrate in a form in which he could take any judicial notice of it, and it is evidently improper that the magistrate who has to come to a judicial decision should be ordered to furnish a witness with unverified materials for pronouncing before himself an opinion as an expert, to enable him to adjudicate.

5. For the above reasons I regret that, the matter being one which I must dispose of according to my own discretion, I feel unable to issue the orders you suggest. Perhaps the points I have noted above have not been placed before you when considering this matter, as it is evident your letter was written after hearing only complaints by medical officers about delays. If you still adhere to your opinion after perusal of this letter and wish to press the point, I request that you will lay it before Government with my objections. Or, as another possible course for gaining the object you have in view that does not appear to have such great objections as the one proposed, it might be possible to obtain an order from the Inspector-General of Police that station-house officers should furnish medical officers direct with such information about suspected lunatics as they require, it being well understood that magistrates are in no way responsible for the accuracy of this information.

Order—R. No. 1259, Judicial, dated 23rd July 1896.

Referred to the Hon'ble the Judges of the High Court for favour of remarks.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Hon'ble the Chief Justice (with C.L.)

From D. W. G. COWIE, Esq., Registrar of the High Court of Judicature, to the Chief Secretary to Government, dated Madras, 12th September 1896, No. 507.

In reply to Reference No. 1259, Judicial, dated 23rd July 1896, referring to the Hon'ble the Judges for favour of remarks a letter from the Inspector-General of Prisons, dated 25th June 1896, No. 4097, requesting that the Government may be pleased to direct that when a civil or criminal lunatic is sent for observation by a medical officer, the Court shall send with him a statement of information such as is annexed to the Inspector-General's circular letter, No. 5824, dated 9th November 1895, I am directed to state that the High Court is of opinion that magistrates may be directed to furnish all the information of the nature required which is available, provided that this is done in their executive capacity and not as judicial officers. The Court, whether it be that of a magistrate or of session, will then be free to decide judicially when all the materials, including the medical officer's opinion, are before it.

2. The enclosures to the Government Order are herewith returned.

From R. NATHAN, Esq., Officiating Under Secretary to the Government of India, Home Department (Medical), to the Chief Secretary to the Government of Madras, dated Calcutta, the 28th January 1897, No. 2-Medical—48.

In Home Department Circular No. 25-Medical—856-865, dated the 30th September 1896, Local Governments and Administrations were requested to take steps with a view to the new (1896) edition of the "Nomenclature of Diseases" being brought into use in all civil medical institutions, with effect from the 1st January 1897. It has since been brought to the notice of the Government of India that the types of insanity shown in the headings of Lunatic Asylum Form No. VI, which was prescribed in Home Department Resolution, No. 16-Medical—576-580, dated the 10th July 1896, do not agree with the classification contained in the 1896 edition of the Nomenclature of Diseases. Form VI has, therefore, been revised according to the new classification, and I am to request that the revised form, a copy of which is forwarded with this letter, may be substituted for the form forwarded with this office Resolution of the 10th July 1896.

ORDER—No. 174, Public, dated 20th February 1897.

The instructions of the Government of India will be communicated to the Surgeon-General for guidance. That officer's special attention will be directed to paragraph 7 of Resolution, No. 16-Medical—576-86, dated 17th July 1896.

The revised form of Statement VI received with letter from the Government of India, No. 2-Medical—48, dated 28th January 1897, has been substituted for that received with that Government's Proceedings, No. 16-Medical—576-86, dated 11th July 1896.

2. With reference to paragraph 3 of letter from the Government of India, No. 1112, dated 22nd December 1896, the Government directs that the form of medical history sheet appended to these proceedings shall be used in all future cases with the reservation that the information under the *supplementary* headings should be afforded only in cases which relate to releases from asylums.

3. In regard to the proposal of the Inspector-General of Prisons in paragraph 3 of his letter of the 25th June last, that when a civil or criminal lunatic is sent for observation to a medical officer, the Court should forward with the lunatic a statement of particulars, the Government approves the course indicated by the High Court under which the magistracy should furnish the information in their executive, but not in their judicial capacity. The Judicial Department will be requested to take the necessary action to ensure that this is done in future. The form to be used is that appended to these proceedings with the omission of the supplementary headings.

(True Extract.)

Chief Secretary.

To the Judicial Department.

„ Surgeon-General.
„ Inspector-General of Prisons.

Ed. A. Raitt.

[Annexure.]

(If any of the particulars in this statement be not known, the fact to be so stated.)

1. Name of patient in full and caste or race.
2. Name of patient's father.
3. Sex and age of patient.
4. Marks whereby the patient may be identified.
5. Married or single or widowed.
6. Condition of life and previous occupation (if any.)
7. Religion.
8. Place of birth and recent place of abode.
9. Whether homeless or living with relatives or friends.
10. Previous history and habits.
11. State of bodily health.
12. Whether any member of patient's family has been or is affected with insanity.
13. Whether the attack is the first attack of insanity or not.
14. Age (if known) at onset of first attack.
15. Duration and nature of any previous attacks.
16. Duration of existing attack.
17. Symptoms exhibited.
18. Supposed cause of insanity.
19. Supposed exciting cause of present attack.
20. Whether subject to epilepsy.
21. Whether suicidal.
22. Whether dangerous to others.

Supplementary.

23. Whether civil or criminal lunatic and date of admission to asylum (in cases sent up for orders of Government under sections 474 and 475, Criminal Procedure Code).
24. If criminal, the offence with which charged.
25. Type of insanity.
26. Is lunatic capable of—
(a) Taking care of himself.
(b) Earning a livelihood.
27. Is release on security recommended?
28. If so, what amount should be demanded and what are the names, social position, character and relationship to lunatic of the sureties?

Judicial (1897) Department.

CURRENT No. —

Corro. 5602, 4080/96.

From

The Govt. of India (Home)
Medical

Order

Indorsement.

Transf. to the Public
Department.

No. 1112

Dated

22 } 12-96
26

Received

Registered

5-1-97

Enclosures

Spare copies 7 of the current.

(By order)

W. R. R.

Ag Under Secretary.

SR

6.1.97

Recd 7
- Recd 8
- Recd 2
f Jan'y 197.

SUBJECT.

Re the form of
Medical history sheet of
criminal lunatics.

BACK PAPERS.

G.O.	No.	Department.	Date.
	4080		28/4/17
	1047	15	14 9 96
	910	"	12 6 95
	411	16	
	2024	"	1 7 1894
	786	"	20 3 17

FURTHER PAPERS.

G.O.	No.	Department.	Date.

Pub.
29
1,000-2 9-16

Public (1897) Department.

CURRENT No.

Order

From The Government of India
Home Dept.

No. $\frac{211ed}{48}$

Dated 28th Jan 17

Received 2-2-17

Registered 2-2-17

Enclosures 1

Spare copies 7 sp.c. of each.

SUBJECT.

Forwarding Lunatic
Asylum form VI, revised, a
requesting that it may
hereafter
be used in place of the old one.

BACK PAPERS.

G.O.	No.	Department.	Date.
	1116	Pub	10-10-96
	1484-85	Ins	14-9-96

FURTHER PAPERS.

G.O.	No.	Department.	Date.

No. , PUBLIC, FEBRUARY 1897.

GOVERNMENT OF MADRAS.

PUBLIC DEPARTMENT.

READ—the following papers :—

G.O., Mis. No. 1754, Judicial, dated 22nd August 1895.

Read—the following letter from J. P. HEWETT, Esq., C.I.E., Officiating Secretary to the Government of India, Home Department (Medical), to the Chief Secretary to the Government of Madras, dated Simla, the 31st July 1895, No. 12-Medl.—525.

With Home Department circular No. 4-Medical—186-193, dated the 29th March 1895, were forwarded a note by two members of the Hemp Drugs Commission and a memorandum by the late Surgeon-General with the Government of India, suggesting improvements in the management of lunatic asylums. I am now directed to convey, for the information and consideration of His Excellency the Governor in Council, the following observations, which have been suggested by the report of the Hemp Drugs Commission, regarding the unsuitability, for the purpose for which they are intended, of the present Forms VI and VII attached to the annual reports on lunatic asylums in each province.

2. In their investigation into the causes of insanity the Commission found that little or no reliance could be placed on the information contained in the asylum records on this subject, and they accordingly had to devise a special method of inquiry with the assistance of local magisterial officers in order to obtain the particulars required by them. The results of this investigation were not on the whole satisfactory, owing to the difficulties of obtaining accurate information concerning lunatics, and the Commission were led to record the opinion that, for the reasons indicated by them, a judgment as to the causes of insanity must be expressed with the greatest caution.

3. After a perusal of the report of the Commission the Governor-General in Council is satisfied that steps require to be taken to prepare the records maintained by Superintendents of lunatic asylums with more accuracy than has been the practice in the past. Although, owing to the fact that, at present, Superintendents of lunatic asylums in India are not, as in the United Kingdom, officers whose whole time can be devoted to the working of the asylums in their charge, it is impossible to expect absolute accuracy in the returns, His Excellency in Council considers that, by some of the modifications which are indicated below, and by the institution of careful inquiry before filling in the information required to be shown in them, greater precision might be attained without materially adding to the labour of Superintendents.

4. In the statement attached to Form B of the schedule to the Lunatic Asylums Act XXXVI of 1858, one of the points on which information is required is the "supposed cause" of insanity. The statement is headed by a direction that, if any of the particulars required by it are not known, the fact should be so stated. If then the person issuing an order in Form B is in doubt as to the cause of insanity and there are no facts before him upon which he can base his opinion, he can abstain from recording what appears to him to be the supposed cause, and there is no reason why, in cases of doubt, the facts on which the opinion is based should not be noted on the form. If an entry is made of the supposed cause it will still be liable to correction by the Superintendent of the asylum in his case-book or register, and the latter officer

can at any time, with a view to correcting the entry, ask the magistrate to make further inquiry. To this end, I am to suggest that it would be advisable that Superintendents of Asylums should be instructed that it is a part of their duty, when they have examined a lunatic who is sent to them by a magistrate with the statement required by law and find that the information as to the cause of insanity is insufficient, obscure or of doubtful accuracy, to address the magistrate on the points on which they require further information with a view to further inquiries being instituted by that officer. This inquiry might be made by the magistrate himself or by a subordinate magistrate, but should not be entrusted to the police or other subordinate officials.

5. The Government of India are advised that Statement VI attached to the annual reports of lunatic asylums is far too elaborate and confuses the causes with the types of insanity. The types should be shown in Statement VI and the causes in Statement VII. In order to ensure this, the following modifications might, it appears to the Governor-General in Council, be made in Statement VI:—column 7, with all its sub-divisions, and column 8 might be abolished; cases of toxic insanity being entered under the types in columns 2 to 6 in the statement and distributed as to causes in Statement VII. Column 10 might show the persons who were sent to the asylum as lunatics and who have recovered. It might also refer to supposed lunatics detained under section 6-A of the Lunatic Asylums Act. The heading of this column might be altered to “Declared to have recovered or not yet diagnosed” or to some other suitable heading.

6. Statement VII, as last prescribed under the orders contained in Home Department Resolution, No. 8-Medical—391-399, dated the 13th July 1893, consists of 20 columns. It is observed from some of the annual reports submitted by Local Governments and Administrations for the year 1894 that this statement has not been adopted in all provinces. In the Bengal report, for instance, the statement consists of 45 columns, 22 of which are devoted to physical causes and 23 to moral causes, while in Madras there are 26 columns relating to the former and 23 to the latter. The Government of India consider that the division as to causes in the statement, both as usually submitted and as prescribed in the resolution of the 13th July 1893, is unnecessarily minute, and, as at present advised, they are of opinion that the whole columns under the head “Moral causes” should be abolished and all such cases included under one general heading, namely, “Moral causes.” It is important that the cause of insanity should be entered against a lunatic only when it has been ascertained without doubt in the manner indicated in paragraph 4.

7. The Governor-General in Council is advised that it is usual for Superintendents of lunatic asylums to keep up a “case-book” or register in which the history, symptoms, &c., of each case are recorded from time to time. It has been suggested that this book should be included in one of the prescribed records, and that it should contain in respect of each lunatic the information given in the statement with full particulars regarding the cause of insanity and the nature of the enquiries which may have been made towards elucidating the facts noted: the history of the case, condition and symptoms on admission, facts, &c., observed while in confinement with treatment, and, in case of death, the appearance, &c., observed on *post-mortem* examination.

8. I am to add that the Government of India will be glad to be favoured with the views and suggestions of His Excellency the Governor in Council on the proposals made in the preceding paragraphs of this circular.

Order—Mis. No. 1754, Judicial, dated 22nd August 1895.

Communicated to the Surgeon-General for early remarks.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Surgeon-General.

officers to deal with the "causes of insanity," under the sub-headings of physical and moral and giving their reasons in each case, in the professional part of their annual report. If it is retained, I think it would be a mistake doing away with the sub-headings of moral causes. The columns, however, might be conveniently reduced in number by including a number under one heading, for example, grief, misfortune, disappointment, loss of property, loss of friends, anger, fright, nervous shock, disgrace, might all be embodied under "Mental anxiety including the above causes."

5. In the Madras asylum, "case-books" or journals are maintained personally by the Superintendent, who gives all the particulars mentioned in paragraph 7 of the letter under report. These books are included in the list of records to be kept up. In the case of deaths amongst the insanes occurring in any of the asylums a special casualty report on a printed form is submitted for my information.

6. In this connection I would like to call attention to the different "headings" under which I made my annual report on these asylums (letter No. 353-A, dated the 9th April 1895—*vide* G.O., Nos. 1303, 1304, Judicial, of the 18th June 1895). If the administrative and professional reports from all the asylums in India were made on uniform lines it would generally facilitate their comparison.

Order—Mis. No. 2489, Judicial, dated 29th November 1895.

The Government of India will be addressed.

2. The Surgeon-General will be requested to quote the authority under which the heading of column 11 of Statement VI appended to the Lunatic Asylum report for 1894 has been altered from "Not yet diagnosed" into "No appreciable disease".

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

Letter—Mis. No. 2490, Judicial, dated 29th November 1895, to the Secretary to the Government of India, Home Department.

I am directed to acknowledge the receipt of Mr. Hewett's letter, dated 31st July 1895, No. 12-Medl.—525, in which the opinion of this Government is sought upon certain proposals for ensuring that the causes of insanity are correctly recorded in the registers kept in lunatic asylums and for amending the forms of Statements VI and VII appended to the annual reports on these asylums.

2. In reply, I am to say that His Excellency the Governor in Council fully recognizes the importance of maintaining a correct record of the causes of insanity of all patients admitted into these institutions, but entertains doubt whether, to attain this end, the course indicated in paragraph 4 of the letter under reply can, under the existing law, be adopted in all cases. Section 7 of the Lunatic Asylums Act XXXVI of 1858 requires the submission of a statement of such particulars as are contained in Form B in the schedule to the Act only in cases of applications for the reception of *private* patients into the *Presidency* asylums. In the case of other patients admitted into the *Presidency* asylums and of those received in the *mofussil* asylums such a statement does not appear to be required by law and cannot therefore be demanded by Superintendents. In this *Presidency*, however, steps have already been taken to ensure that, as far as is possible under the difficulties that must necessarily beset such an enquiry, the real causes of each case of insanity shall be accurately recorded. Rules 9 and 22 of the rules issued by the Local Government under the provisions of Act XXXVI of 1858 require the submission of a medical history sheet (containing among other particulars information as to the cause of insanity) in the form appended to this communication in every case except those referred to in section 7 of the Act, and this medical history sheet has, as will be seen from its heading, to be drawn up by the medical officer who prepares the medical certificate in Form A appearing in the schedule to the Act except in cases falling under section 471, Code of Criminal Procedure, in which instances it has to be prepared by the acquitting court in communication, if necessary, with the medical officer. The effect of these rules is that a statement of the lunatic's case or medical history sheet is furnished in this *Presidency*—

- (i) by the relative or friend of the lunatic in the case of a civil lunatic sent to the Presidency Asylum under section 7 of Act XXXVI of 1858 ;
- (ii) by the acquitting court, in communication, if necessary, with the medical officer, in cases of admissions of criminal lunatics under section 474, Code of Criminal Procedure ;
- (iii) by the medical officer who prepares the medical certificate in Form A in other cases, viz., in cases of admissions of (a) civil lunatics under sections 4, 5 and 6 of Act XXXVI of 1858 ; (b) criminal lunatics under section 466, Code of Criminal Procedure ; (c) convict lunatics under section 31 of Act V of 1871 ; and (d) military lunatics under Act XI of 1877.

A medical history sheet does not appear to be necessary in the case of a person found lunatic by inquisition under Act XXXV of 1858 or under an enquiry directed by an order of the High Court under Act XXXIV of 1858. In such cases, however, the courts are not likely to act except upon the certificate of a medical officer, and, if this certificate is given, the medical officer will be bound, under Rule 26 of the Lunatic Asylum rules, to furnish a medical history sheet as well.

3. From the preceding paragraph it will be seen that in this Presidency it is almost invariably the medical officer who prepares the medical history sheet. His Excellency the Governor in Council considers that this procedure ensures that the diagnosis in each instance will be as accurate as it is practicable to make it in such difficult cases and accordingly recommends that, so far as this Presidency is concerned, the existing practice may be left undisturbed. There appears, however, to be no objection to the adoption of the suggestion of the Government of India that persons issuing an order in Form B should be required to note on the form the facts which have given rise to doubts in their minds as to the cause of insanity in individual cases and as to the ascertainment of the cause of insanity in cases in which the information already furnished on the matter is found to be incomplete or erroneous.

4. The suggestion that the types of insanity should be shown in statement VI and the causes in Statement VII commends itself to this Government, as does also the proposal that columns 7 and 8 of the former statement should be abolished. The Surgeon-General with this Government recommends that the terms used in the official Nomenclature of Diseases, 1885, may be adhered to in describing the types, and I am to commend this suggestion to the favourable consideration of His Excellency the Governor-General in Council.

There appears to be some doubt whether the Government of India intended to omit the column headed "Other forms of insanity to be specified in foot-notes" appearing in Statement VI, and whether column 10, referred to in paragraph 5 of the Home Department letter under reply, is not a misprint for column 11 ("Not yet diagnosed"). Column 10 seems to afford information of some interest, and this Government is not therefore in favour of its abolition. There appears, however, to be no objection to the provision of a separate column for cases "declared to have recovered or not yet diagnosed" and to the inclusion therein of persons who have recovered after admission as well as those detained under section 6-A of the Lunatic Asylums Act, cases of the latter class (viz., those not diagnosed) being, if necessary, shown also in foot-notes.

5. The amendment proposed to Statement VII seems suitable and meets with the approval of His Excellency in Council.

6. This Government is also in accord with the suggestions contained in paragraph 7 of the letter under reply. Registers of the kind therein referred to and affording the information on the points mentioned by the Government of India are already included among the records prescribed for maintenance in asylums in this Presidency.

J. F. PRICE,
Chief Secretary.

G.O., Mis. Nos. 1484, 1485, Judicial, dated 14th September 1896.

Read—the following paper :—

Extract from the Proceedings of the Government of India in the Home Department (Medical),—under date Simla, the 11th July 1896, No. 16-Medical—576-86.

Read—

Home Department circular Nos. 525--33 (Medical), dated the 31st July 1895, as revised by the orders conveyed by Home Department endorsement, No. 10-Medical—794-11, dated the 8th October 1895.

RESOLUTION.

In the circular of the 31st July 1895 (as revised in part by Home Department endorsement, No. 10-Medical—704-11, dated the 8th October 1895) the Government of India, in connection with some criticisms which had been expressed by the Hemp Drugs Commission, commented on the unsuitability, for the purpose for which they are intended, of the present Forms VI and VII attached to the annual reports on lunatic asylums in each Province and, with the object of attaining greater accuracy in the records maintained by Superintendents of lunatic asylums, put forward certain suggestions for the opinion of Local Governments and Administrations.

These suggestions were—

- (1) that, with reference to the heading "Supposed cause" of insanity in the statement attached to Form B in the schedule to the Lunatic Asylums Act, XXXVI of 1858, Superintendents of asylums should be informed that it is a part of their duty, on examining a lunatic sent to them by a magistrate with the statement required by law, when they find that the information is insufficient, obscure or of doubtful accuracy, to address the magistrate on the points on which they require information with a view to further inquiries being instituted either by that officer himself or by a subordinate magistrate. Such inquiries, it was suggested, should not be entrusted to the police or other subordinate officials.
- (2) that since existing Statement VI attached to the annual reports on lunatic asylums is too elaborate and confuses the causes with the types of insanity, the types should be shown in Statement VI and the causes in Statement VII. In order to secure this, it was proposed that—
 - (a) column 7, with its sub-divisions, and column 8 of Statement VI, should be abolished ;
 - (b) cases of toxic insanity should be entered under the types in columns 2 to 6 of Statement VI, and distributed as to causes in Statement VII ;
 - (c) column 11 (the reference was incorrectly made to column 10) of Statement VI, which is headed "Not yet diagnosed," should show the persons who, having been sent to the asylum as lunatics, have recovered, and should also refer to supposed lunatics detained under section 6-A of the Lunatic Asylums Act, 1858, as inserted by section 1 of Act XVIII of 1886 ; and that the heading of the column should be altered to "Declared to have recovered or not yet diagnosed" or to some other suitable heading ;
- (3) that the divisions as to causes of insanity in Statement VII, both as usually submitted and as prescribed in Home Department Resolution, No. 8-Medical—391-399, dated the 13th July 1893, appeared to be unnecessarily minute, and that the whole of the columns under the head "Moral causes" should be abolished, and all such cases included under one general heading, namely, "Moral causes" ;
- (4) that the "case-book," or register, kept up by Superintendents of lunatic asylums to show the history and other particulars of each case, should be included in one of the prescribed records, and that it should contain in respect of each lunatic the information given in the statement with full particulars regarding the cause of insanity and the nature of the inquiries which might have been instituted with a view to elucidate the facts noted.

2. The replies of Local Governments and Administrations upon the first of the points specified above show that paragraph 4 of the circular of 31st July 1895 was not worded with sufficient clearness, and that there has in consequence been some misapprehension as to the wishes of the Government of India in the matter. The object which the Governor-General in Council had in view was that in every case in which a patient is received into a lunatic asylum a complete medical history of his case should be received with him. Though this end is attained in those cases in which the statute law requires a medical history sheet, there is in the majority of cases no statutory obligation to furnish the Superintendent of the asylum with the previous history of the patient.

The different circumstances under which lunatics may be received and confined in an asylum are the following :—

- (a) Under section 4 of Act XXXVI of 1858, the magistrate has power to send to an asylum lunatics found wandering at large, or believed to be dangerous by reason of their lunacy. No person can be sent to a lunatic asylum under the provisions of this section without a certificate from a medical officer in Form A of the schedule attached to the Act.
- (b) Under section 5 of the Act, the magistrate can also order a lunatic, who is not under proper care or control, or who is cruelly treated or neglected, to be received into an asylum. In this case also a certificate in Form A is required. The Act does not prescribe the form of the magistrate's order, but it is customary for a descriptive roll to be sent with the certificate in Form A.
- (c) Under section 466 of the Criminal Procedure Code, when an accused person is found to be of unsound mind and incapable of making his defence, and the case is one in which bail may not be taken, or if sufficient security is not given, the Local Government may, on the report of the magistrate or court, order the accused to be confined in a lunatic asylum, and the magistrate or court has to give effect to such order.
- (d) When the judgment of the magistrate or court states that an accused person committed the act alleged against him but acquits him upon the ground that at the time when he committed it he was, by reason of unsoundness of mind, incapable of knowing the nature of the act alleged as constituting the offence, or that it was wrong or contrary to law, the Local Government may (section 471, Criminal Procedure Code) order such person to be confined in a lunatic asylum.
- (e) Under section 31 (1) of the Prisoners Act, V of 1871, as amended by Act X of 1886, whenever it appears to a Local Government that any person detained or imprisoned under any order or sentence of a magistrate or court is of unsound mind, it may, by a warrant setting forth the grounds of belief that the person is of unsound mind, order his removal to a lunatic asylum within the territories subject to it.
- (f) In all other cases outside the Presidency towns (section 8 of Act XXXVI of 1858), an order of the Civil Court is required, which has to be accompanied by a certificate in Form A.
- (g) In the Presidency towns (section 7 of Act XXXVI of 1858), a lunatic may be received into an asylum with an order under Form B of the schedule appended to the Act, if he has been found to be a lunatic by inquisition or under an inquiry directed by order of one of the Courts of judicature established by Royal Charter, and, if not so found, with an order in Form B, supported by a certificate in Form A, signed by two physicians or surgeons, one of whom must be a Presidency Surgeon or a Surgeon in the employ of Government.

3. The cases, therefore, in which it is necessary, by executive order, to direct that a medical history sheet shall be forwarded with the lunatic to the asylum, are when he is sent there—

- (i) under section 4 or section 5 of Act XXXVI of 1858 ;
- (ii) under section 466 or section 471 of the Code of Criminal Procedure ;

(iii) under section 31 (1) of the Prisoners Act, V of 1871, as amended by Act X of 1886; or

(iv) under section 8 of Act XXXVI of 1858 by order of a Civil Court.

The only cases in which the statute law requires any statement of particulars regarding a lunatic to be forwarded with him to the asylum are those in which patients are sent to a lunatic asylum under section 7 of the Act, and the result is that in the great majority of cases there is nothing to ensure that the Superintendent of a lunatic asylum shall receive any detailed information about a patient whom he is required to admit into an asylum. The Governor-General in Council is of opinion that a medical statement should in every instance accompany a patient. It appears, however, to His Excellency in Council that this object may be secured without legislation, and he has accordingly had the form of medical history sheet which is appended to this resolution prepared and desires that it be adopted in all cases in which Local Governments and Administrations order (sections 466 and 471 of the Criminal Procedure Code or under section 31 (1) of Act V of 1871, as amended by Act X of 1886) that an accused or convicted person should be confined in a lunatic asylum. The Governor-General in Council will also be glad if, in order to secure uniformity, instructions may, with the concurrence of the High Courts, be issued to secure that the same form is used in all cases in which a magistrate (sections 4 and 5 of Act XXXVI of 1858) or the Judge of a Civil Court (section 8 of Act XXXVI of 1858) may order a lunatic to be received into an asylum. The Calcutta High Court will be separately moved to issue any instructions which may be considered necessary to secure the object in view in Bengal.

4. Heading 18 of the form attached to this resolution corresponds to the heading "Supposed cause" in the statement attached to Form B in the schedule to Act XXXVI of 1858. As pointed out in paragraph 4 of the circular dated 31st July last, if the person filling in either of the two forms, one or other of which will in future accompany a lunatic, is in doubt as to the cause of insanity and is unable to form an opinion, he can abstain from recording the "supposed" cause, or, if he holds an opinion as to the cause but is doubtful of its correctness, he may note the facts on which his opinion is based. Should the Superintendent find, after observation of the lunatic, that the opinion given is probably incorrect, it can always be corrected in the entries in the case-book. It was in order to meet the case of lunatics regarding whom the Superintendent has reason to believe that an incorrect entry has been made and desires to have his own opinion tested by such facts as further inquiry may elicit that the Governor-General in Council proposed that the Superintendent should be authorised to ask the magistrate to make further inquiry into the cause of insanity or upon any other point regarding which the information given in the statement previously furnished was obscure or obviously incorrect, and that the magistrate should thereupon be required to take such further evidence as might be available, and to forward the record of his proceedings to the Superintendent of the asylum. The suggestion has met with general approval, but in regard to the rule proposed by the Government of India upon this point—namely, that this further inquiry should be made by the magistrate himself or by a subordinate magistrate and not entrusted to the police or other subordinate officials—the Government of Bengal has expressed a doubt whether it can properly be prescribed as an invariable rule, as the facts of the personal history of a lunatic, if discoverable at all, can best be found out by the police or other subordinates. The Government of India agree with this criticism. In their opinion it should always be open to a magistrate to employ the agency of the police or other subordinate officials in particular details connected with his inquiry, but in every case the magistrate should be personally responsible for the proper conduct of the inquiry.

5. As observed in paragraph 1 of this resolution, column 11 of Statement No. VI attached to the annual reports on lunatic asylums was erroneously quoted in paragraph 5 of the Home Department circular of 31st July 1895 as "column 10"; and this has led to some confusion in the replies of Local Governments and Administrations. In so far, however, as the opinions received regarding the proposed changes in Statement VI are relevant, there is a general agreement in the proposal to show types of insanity in this statement and causes in Statement VII; that columns 7 and 8 of Statement VI

should be abolished; that cases of toxic insanity should be amalgamated in columns 2 to 6 of Statement VI (distributing them under causes in Statement VII); and that column 11 of Statement VI should show persons sent to an asylum as lunatics who have recovered, and should also refer to supposed lunatics detained for observation under section C-A of the Lunatic Asylums Act, 1858, as inserted by section 1 of Act XVIII of 1886; and finally, that the heading of the column should be altered to "Declared to have recovered or not yet diagnosed." These amendments have accordingly been adopted, and the revised form of Statement VI, which is approved by the Government of India and should in future be followed, is appended to this resolution.

6. The modifications of Statement VII which were proposed in the revised paragraph 6 of the circular of 31st July 1895, and which were to the effect that all the divisions under the head "Moral causes" should be abolished, the main heading alone remaining, have been concurred in by Local Governments and Administrations. Statement VII has been revised accordingly and a copy of it, as now approved, is attached to this resolution.

7. The forms of Statements VI and VII as now revised should be used for the compilation of the statistics submitted with future provincial reports on lunatic asylums, commencing with the report for 1896.

8. The utility of a "case-book" such as was suggested in paragraph 7 of the circular of 31st July 1895 has been generally admitted by Local Governments and Administrations and has been referred to incidentally in paragraph 4 of this resolution. This book should, therefore, be maintained by all Superintendents of lunatic asylums. The Governor-General in Council does not desire to pass any orders as to the form of this register. While leaving this matter to the discretion of Local Governments, the Government of India desire to observe that what it is specially desired to have traced is the progress of a case, as well as the results of any personal observations, which very possibly may not come under the headings of any set form that may be prescribed. For this reason, and because the method adopted by a Superintendent in the recording in his case-book would be an index to his success as a Superintendent, it appears to the Government of India that it may not be undesirable to allow Superintendents of lunatic asylums some latitude in the method in which their record should be maintained.

9. The error in the quotation of column 11 of Statement VI, which is referred to in paragraph 5 of this resolution, was caused by following the numbering of the columns adopted in one of the lunatic asylums reports for 1893. The Government

of India have recently drawn attention* to the necessity of adhering strictly to the forms prescribed by them, and, in noticing

this second instance in which the standard forms have been departed from, they desire to emphasise the inconvenience that may arise from such unsanctioned deviations. As regards the remarks in paragraph 10 of Home Department Resolution, No. 8-Medical—391-399, dated the 13th July 1893, that the revised forms then laid down are Provincial forms and that it is for Local Governments to prescribe any subsidiary changes in the statements submitted from individual asylums which may be required to give effect to the alterations prescribed in that resolution, it is to be understood that no departure should be permitted from the numbering and headings of the columns prescribed by the Government of India; and that subsidiary changes should not be introduced without a reference to the Governor-General in Council if they involve a renumbering or alteration in the heading of any standard column or form.

Order.—Ordered, that a copy of this resolution, with copy of the revised forms and of the form of medical history sheet, be forwarded to Local Governments and Administrations (except Coorg and Hyderabad) for information and guidance, that a copy be forwarded to the Military Department with the request that orders may issue requiring the medical statement which has to be furnished under the order in that department, No. 1069, dated 29th October 1875, to be furnished in the form prescribed by this resolution and that a copy of the resolution be forwarded to the Director-General, Indian Medical Service, for information.

(True Extract.)

(Signed) J. P. HEWETT,
Secretary to the Government of India.

To the Government of Madras.

ENCLOSURES.

(If any of the particulars in this statement be not known, the fact to be so stated.)

1. Name of patient in full and caste or race.
2. Name of patient's father.
3. Sex and age of patient.
4. Marks whereby the patient may be identified.
5. Married or single or widowed.
6. Condition of life and previous occupation (if any).
7. Religion.
8. Place of birth and recent place of abode.
9. Whether homeless or living with relatives or friends.
10. Previous history and habits.
11. State of bodily health.
12. Whether any member of patient's family has been or is affected with insanity.
13. Whether the attack is the first attack of insanity or not.
14. Age (if known) at onset of first attack.
15. Duration and nature of any previous attacks.
16. Duration of existing attack.
17. Symptoms exhibited.
18. Supposed cause of insanity.
19. Supposed exciting cause of present attack.
20. Whether subject to epilepsy.
21. Whether suicidal.
22. Whether dangerous to others.

STATEMENT No. VI.
Showing the Types of Insanity of the Lunatics in the Asylums in **during the year 189 .**

1	2	3			4			5			6		7		8		9		10	
Cases.	136 Idiocy.	137 Mania, acute or chronic.			138 Melancholia, acute or chronic.			139 Dementia, including acquired.			140 Mental stupor.		141 General paralysis of the insane.		142 Delusional insanity.		Declared to have recovered or not yet diagnosed.	Total.		
		Epileptic.		Other forms.	Epileptic.		Other forms.	Epileptic.		Other forms.	Males.		Females.	Total.	Males.				Females.	Total.
		Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			Males.	Females.
Remaining on 31st December	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Admitted	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Total treated	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Recovered	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Improved	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Died	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Remaining on 31st December	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	

ANNUAL STATEMENT No. VII
 Showing the alleged Causes of Insanity among the Lunatics in the Asylum at during the year 189 .

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	15	Grand Total.		
Cases.	Physical causes.															Total unknown.		
	Chassa-smoking.	Ganja-smoking.	Use of Bhang.	Opium-smoking (Madak and Chanda.)	Opium-eating.	Spirit-drinking.	All other intoxicants.		Fever.	Etc.	Total physical.	Moral causes.		Total known.			Total.	
							Males.	Females.				Total.	Males.	Females.	Total.			Males.
Remaining ..	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Admitted {	Criminal ..	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Total treated ..	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Recovered ..	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Improved ..	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Died ..	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.

Order—Mis. No. 1484, Judicial, dated 14th September 1896.

The following letter will be despatched to the Government of India.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

Letter—No. 1485, Judicial, dated 14th September 1896, to the Secretary to the Government of India, Home Department.

I am directed to acknowledge the receipt of Home Department Resolution, No. 16-Judicial—1576-86, dated 11th July 1896, in which the Government of India has issued certain instructions for ensuring that the causes of insanity are correctly recorded in the registers kept in lunatic asylums and for amending the forms of Statements VI and VII appended to the annual reports on these institutions.

2. With reference to paragraph 3 of the resolution, I am to say that the form of the medical history sheet therein prescribed appears to be designed for use only in cases in which lunatics are ordered to be confined in an asylum. But there are other cases (for instance, those in which recommendations have been made for the release of lunatics under sections 474 and 475, Code of Criminal Procedure) in which the submission of almost the same information as is required when the confinement of a lunatic is under consideration is very necessary. His Excellency the Governor in Council is of opinion that the particulars in the form now prescribed by the Government of India will fail to afford sufficient information to enable Local Governments to decide in such cases whether a lunatic can or cannot be released with safety.

3. Further, in accordance with the suggestion of the Government of India, conveyed in Mr. Hewett's letter, No. 15-1609, dated 15th October 1888, this Government has drawn up certain rules for dealing with the cases of criminal lunatics reported for orders under sections 466, 471, 474 and 475, Code of Criminal Procedure (a copy of which is enclosed), and it will be difficult, if not impossible, to follow these if the medical statement which should accompany the papers of every criminal lunatic does not provide for information on the following matter:—

- (a) the offence with which the lunatic was charged ;
- (b) the type of insanity with which he is (or was) affected ;
- (c) his capacity to earn a livelihood and to take care of himself, if released ;
- (d) the recommendations of the local authorities as to his release, whether on security or otherwise ; and
- (e) the date of admission to the asylum in cases reported for orders under sections 474 and 475, Code of Criminal Procedure.

These particulars occur in the form at present in use in this presidency, but do not in the form now laid down by the Government of India. It has, moreover, been the experience of this Government that confusion and mistakes are to a great extent obviated if all the information which is required in the various circumstances referred to above is invariably sent up in the same form and separate forms for different cases are dispensed with. This Government would accordingly strongly deprecate any proposal to embody the particulars above referred to in a special form for use only in cases under the four sections of the Criminal Procedure Code quoted, in which the release of a lunatic comes up for consideration.

4. In these circumstances, His Excellency the Governor in Council considers it most desirable that the form of the medical history sheet should be amplified in the manner set out in the specimen form attached to this letter, and I am accordingly to request that the Government of India may be moved to sanction the adoption of this form (in this presidency if not elsewhere) in lieu of that which accompanied the Home Department resolution under reference.

(Signed) J. F. PRICE,
Chief Secretary.

From J. P. HEWETT, Esq., C.I.E., Secretary to the Government of India, Home Department (Medical), to the Chief Secretary to the Government of Madras, dated Calcutta, the 22nd December 1896, No. 1112.

I am directed to acknowledge the receipt of your letter No. 1485 (Judicial), dated the 14th September 1896, in which the Government of Madras represent that the entry of certain particulars required regarding criminal lunatics whose cases are reported for orders under sections 466, 471, 474 and 475 of the Code of Criminal Procedure is not provided for in the form of medical history sheet prescribed in paragraph 3 of Home Department Resolution, No. 16-Medical—576-86, dated the 10th July 1896.

In commenting upon this omission, the Governor in Council observes that these particulars are included in the form of medical statement at present in use in the Madras Presidency, a specimen of which is enclosed, and requests the sanction of the Government of India to the adoption of this form in the Madras Presidency (if not elsewhere) instead of the form prescribed in the resolution of the 10th July.

With the view of avoiding the confusion and mistakes which are to a great extent obviated if all the information which is required in the various circumstances referred to in your letter is sent up in the same form, the Government of Madras deprecate any proposals to embody the particulars alluded to above in a special form for use only in the case of the four sections of the Code of Criminal Procedure quoted.

2. In reply, I am to explain that the form of medical history sheet prescribed by the Government of India was drawn up in order to supply a deficiency noticed by the Hemp Drugs Commission in the information supplied to the Superintendents of asylums on the admission of lunatics, and was intended chiefly for use in the case of non-criminal lunatics, who form the majority of those admitted into the asylums. With a view, however, to uniformity it was made applicable to all lunatics, criminal or otherwise. The form was intentionally drawn up to avoid stating precise conclusions. For instance, the heading "Type of insanity," which is inserted as heading No. 20 in the form enclosed with your letter, was purposely omitted, since the object of the statement was to furnish all the ascertained materials for arriving at an opinion without giving the conclusion, since, at the time of the patient's admission to the asylum, it may be difficult, if not impossible, to arrive at a correct judgment upon this point.

3. I am to add that the Government of India have no objection to the Government of Madras prescribing supplementary forms to meet cases in which the question of the release of a lunatic is presented to the Governor in Council for consideration, but that, having regard to the reasons which have actuated them in requesting Local Governments to adopt an uniform medical history sheet, the Governor-General in Council hopes that the Government of Madras will refrain from altering the form prescribed.

Transferred to the Public Department.

(By Order)

6th January 1897.

(Signed) W. FRANCIS,
Acting Under Secretary.

G.O., No. 999, Judicial, dated 12th June 1896.

Read—the following papers :—

From A. G. CARDEW, Esq., M.A., Inspector-General of Prisons, to the Chief Secretary to Government, dated Ootacamund, 28th March 1896, No. 1710.

I have the honour to address the Government on the subject of the medical history sheets of lunatics, the existing orders regarding which are embodied in G.Os., Nos. 786 and 2224, Judicial, dated 29th March and 13th September 1894.

2. The present state of the subject is as follows:—A medical history sheet, including no less than 29 headings (annexure to G.O., No. 786, Judicial, dated 29th March 1894) is required in the case of every lunatic. If the lunatic is a convict in jail and his removal to an asylum is recommended under Act V of 1871, or if the lunatic is confined under section 466 of the Criminal Procedure Code, the medical history sheet must be prepared by the medical officer certifying the man to be insane and must accompany the application to Government. If the lunatic is confined under section 471 of the Criminal Procedure Code, the medical history sheet must be prepared by the court in communication with the medical officer and must accompany the report to Government. If the lunatic is dealt with under Act XXXVI of 1858 (except section 7), the medical history sheet must be prepared by the medical officer and must accompany the lunatic's papers when sent to the asylum.

3. It will be seen that in every case, except possibly that of lunatics dealt with under section 471, Criminal Procedure Code, the duty of drawing up the medical history sheet is imposed on the medical officer certifying to the fact of insanity.

4. But in laying down these rules, two points appear to have been overlooked, viz.—

- (1) For what purpose the medical history sheet is required.
- (2) How the medical officer is to obtain the necessary information to enable him to fill it up.

5. The origin of the present medical history sheet is to be found in the report of the Bengal Committee on the treatment of recovered criminal lunatics which is recorded in G.O., No. 726, Judicial, dated 24th April 1889. The medical history sheet which that committee proposed was much more limited than the one now in use, and it was intended for use solely in the case of *recovered criminal lunatics* already in asylums; in those cases the necessary information could be easily and leisurely collected.

6. But owing to the somewhat loose wording of the first line of Appendix I to G.O., No. 726, Judicial, dated 24th April 1889, this medical history sheet came to be required, not only whenever the papers of a *recovered* criminal lunatic are sent up to Government, but whenever the papers of *any* criminal lunatic are sent up to Government. This change, which came about gradually, was given definite form in paragraph 6 of G.O., No. 786, Judicial, dated 29th March 1894. But it is evident (1) that to require the medical history sheet to accompany the case of every lunatic sent up to Government is to go far beyond what the Bengal Committee of 1888 recommended; (2) that in the case of convict lunatics sent up under Act V of 1871 and of criminal lunatics sent up under sections 466 and 471 of the Criminal Procedure Code, the Government does not require the medical history sheet at all. The Superintendent of the lunatic asylum may require some of the information to put in his registers; but to the Government itself the medical history sheet is unnecessary, all that is wanted being a certificate of insanity and information falling under heads 28 and 29 of the medical history sheet.

7. It will thus be seen that the submission of the medical history sheet to Government (except in the case of recovered criminal lunatics) is unnecessary. But it will also be observed, if the question is considered, that medical officers, on whom is imposed the duty of drawing up the medical history sheet, have no means whatever of accurately supplying one-half of the information necessary. Many lunatics cannot be got even to give their names, much less their birth-place, caste, age, religion, previous occupation, whether they had previous attacks, whether they used intoxicants and so on. As the duty of preparing the medical history sheet rests solely with the medical officer, the courts naturally do not concern themselves with the matter, and lunatics are sent to a jail accompanied only by a warrant and without further information. The medical officer then makes a reference to the court for information, and the court, after prolonged delay, forwards certain totally-untested statements which have been procured by the police. Thus the only practicable result of the whole procedure is great delay, and as the detention of civil lunatics under section 6-A, Act XXXVI of 1858, is limited to 14 days, cases of illegal detention are of constant occurrence, while the disposal of cases of criminal lunatics are likewise delayed by references between the court, the medical officer and the police.

8. It thus appears that, in the desire to produce a clear and uniform rule, the object with which the medical history sheet is needed has been lost sight of. In the case of recovered criminal lunatics, whose cases are submitted to Government under the rules drawn up by the Bengal Committee, a medical history sheet is required by Government itself. In all other cases, it is not required by Government at all, but merely by the Superintendent of the lunatic asylum. This being so, there is no advantage in delaying the submission of cases under sections 466 and 471 of the Criminal Procedure Code by the previous preparation of the medical history sheet. Again, much of the information required in the medical history sheet can never be supplied by the medical officer, but must be obtained from the courts. It would be much more satisfactory if the courts were directly charged with the duty of collecting this information. Finally, as much of the information is only needed for statistical purposes in the asylum, it might be collected at leisure after the admission of the lunatic, so that prolonged, and often illegal, detention of the lunatics in jails and sub-jails might be prevented.

9. The matter is complicated by the existence of several different classes of lunatics, and I am not in possession of the revised rules of the lunatic asylum or of information as to what details are necessary for statistical purposes in that institution. I have therefore not attempted to submit any proposals, but have merely pointed out the practical defects of the present state of affairs. If, however, the Government is of opinion that these defects do exist, I would suggest that the preparation of a brief set of definite rules might be ordered to be undertaken by the Surgeon-General and myself, so that all doubtful points might be thoroughly thrashed out.

10. I would add that in December last I addressed District Magistrates asking them to direct courts which send lunatics to jails for observation to send with them, or shortly afterwards, the necessary information to enable medical officers to fill up the medical history sheet. No practical effect has, however, followed, and one District Magistrate (of Cuddapah) even declined to issue any such directions, stating that to do so would weaken the responsibility of medical officers. He, however, omitted to state how he proposed that the medical officer who has to fill up the medical history sheet was to obtain the necessary information.

From Surgeon-Major-General C. SIBTHORPE, F.R.C.P.I., Surgeon-General, with the Government of Madras, to the Chief Secretary to Government, dated Ootacamund, 4th May 1896, No. 60-Tour.

With reference to the letter from the Inspector-General of Prisons referred to me for remarks with your endorsement, No. 790, Judicial, dated the 10th April 1896, I have the honour to state that before submitting my reply I considered it desirable to ascertain the views of the Superintendent, Lunatic Asylum, Madras, who from his knowledge of the daily working of G.O., No. 786, Judicial, dated the 29th March 1894, ought to be better able to know his needs and requirements and to discuss the question at issue from a practical point of view.

2. In his report, which is both elaborate and complete, he has endeavoured with much success, to meet the objections raised by the Inspector-General of Prisons, and I enclose a true copy of it for the information of Government.

3. The two main points of contention by the Inspector-General of Prisons are, as stated by the Superintendent—(a) the necessity, and (b) the authorship, of the medical history sheet. As regards (a), the Superintendent clearly states that it is the only document from which we can gather all the data necessary for the preparation of statistics and that, both on this account and as a medium of information to Government for dealing with recommendations regarding the release of criminal lunatics, the document is absolutely indispensable. He therefore strongly deprecates its abolition or any further modification of it. In this view I fully concur, and as the document seems from the Superintendent's report to form the ground-work of statistics from the asylum as laid down by the Government of India, his opinion regarding its retention is entitled to every consideration.

4. With reference to the authorship, I agree with the Superintendent that most of the information required in the medical history sheet can only be filled with any authority by a duly-qualified medical man. This fact must have been fully considered by Government when the order was made, and I therefore do not consider that any change is called for in this respect.

5. In paragraph 8 of his letter, the Inspector-General remarks that "as much of the information is only needed for statistical purposes in the asylum, it might be collected at leisure after the admission of the lunatic." This procedure, as remarked by the Superintendent, will entail unnecessary correspondence. In my opinion, his duties are already very heavy and to saddle him with further unnecessary work will impair the efficiency of the asylum administration. I consider that the Superintendent's suggestion, regarding stringent orders being issued to all judicial officers not to send an insane to the asylum till all the papers in the case are complete and in proper form, is deserving of consideration and will, if acted upon, considerably lessen his difficulties.

6. As regards paragraph 9 of the Inspector-General's letter, the revised Lunatic Asylum Code (draft) is now before Government, in which any further rules which Government may consider necessary may be added. It does not, however, appear to me expedient at this stage that the Inspector-General and myself should in committee draw up any set of rules on the subject.

7. The correspondence is herewith returned as requested.

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ENCLOSURE.

From Surgeon-Captain C. H. LEET PALK, M.B., Superintendent, Government Lunatic Asylum, to the Surgeon-General with the Government of Madras, dated 20th April 1896, No. 285.

In compliance with your No. 2131, dated the 16th April 1896, forwarding a letter from the Inspector-General of Prisons for remarks, I beg to make the following observations :—

2. The two main points of contention by the Inspector-General of Prisons regarding the medical history sheet of insanes are—

(a) Its necessity. | (b) Its authorship.

3. First, as to the necessity of such a document. Its inception is to be noted in Appendix I to G.O., No. 726, Judicial, dated 24th April 1889, where it was originally designed to afford Government all available information necessary to deal with recovered criminal lunatics proposed for release or transfer, in keeping with the rules of the Bengal Committee. In a later G.O., No. 786, Judicial, dated 29th March 1894, the Government, with the view of introducing a uniform document capable of furnishing information, not only as regards recovered criminal lunatics, but also of civil lunatics for admission, under sections 4 to 6 of Act XXXVI of 1858, considerably amplified the form of medical history sheet, and incorporating in it all the information up to then, supplied by Form C. In its present form, it will therefore be seen that the medical history sheet is the only document from whence can be gathered all the data necessary for the preparation of statistics, the only other paper in connection with an insane's admission being the certificate of insanity (Form A) which deals exclusively with the patient's mental state.

Both, therefore, as a medium of information to Government for dealing with a criminal's release or otherwise and as the ground-work of statistical returns from this asylum as laid down by the Government of India, this document is absolutely indispensable and I strongly deprecate its abolition or any further modification of it.

4. Secondly, as to the authorship of the medical history sheet. From its very name, it would appear on the surface that none but a duly-qualified medical man would be the authority for filling in most of the information required. To seek to shift the onus of preparing this document from the medical officer to the judicial officer, on the score that the former has not sufficient time or means for making the necessary observations, does not, to my mind, appear well grounded. The period of detention (14 days) is quite ample for any medical officer (who probably sees the insane almost daily during that period) to be able to give definite information in relation to an insane's mental condition. As a matter of fact, ten days is, I believe, the average duration under which an insane is detained in the local Penitentiary before he is certified as insane by the medical officer. The difficulty experienced by the medical officer in getting certain particulars about the insane, referred to in paragraph 7 of the Inspector-General of Prisons' letter, applies with equal force to the judicial officer, who perhaps has less opportunities of interviewing him and is consequently no better—if not less—fitted to be the author of the medical history sheet. I admit that in some cases, it is absolutely impossible to get any information worth the name, no matter

from what source, and nothing therefore would be gained by simply changing the authorship. It has been the constant experience of this asylum to have to return papers or call for those wanting, very frequently, from criminal insanes sent here by jails, where presumably ample time was enjoyed to enable the fullest information being afforded and yet it has not been achieved. I am therefore strongly of opinion that the medical officer should, as heretofore, be the author of the medical history sheet as the officer best qualified to afford the purely professional information required on most points.

5. In conclusion, I just wish to allude to the concluding lines of paragraph 8 of the letter under remark, and state that such a procedure would only entail unnecessary correspondence and heavily handicap the already heavy work of this institution. Indeed, I may go further, and request that Government may be pleased to issue the most stringent injunctions to all judicial officers concerned not to send an insane here till all his, or her, papers are complete and in proper form.

Order—No. 999, Judicial, dated 12th June 1896.

The Government does not consider that any change in the existing procedure with regard to medical history sheets has been shown to be necessary.

2. The fact that the rules in force in Bengal differ from those in this Presidency does not in itself appear to afford ground for alteration in the latter. All but three of the items in the present form of medical history sheet furnish information which is necessary either (1) for the statistical returns prescribed by the Government of India, (2) for the guidance of Government when deciding whether the insane should be admitted into an asylum, (3) for the information of the Superintendent of the asylum in his treatment of the patient, or (4) for the assistance of Government in deciding eventually whether an insane is or is not eligible, under the rules, for release.

3. The information comprised in the first three of these four classes must be available at the time that the case of the insane is submitted for the orders of Government, and he or she is admitted into an asylum. That included in the last of them can undoubtedly be collected with more accuracy and less trouble at the time when an insane's case first comes up than at a subsequent and often distant date.

4. It is thus, in the opinion of Government, undesirable to postpone the preparation of the medical history sheet until after an insane's admission into an asylum. The Inspector-General's fears that the present system must lead to illegal detention seem to be groundless, for section 6-A of Act XXXVI of 1858 appears to apply only to detention for the purposes of medical observation.

5. The Inspector-General further proposes that the information required for medical history sheets should in future be collected by the Courts instead of by medical officers as at present on the ground that under the existing system the latter have to apply to the former for assistance in compiling it. It appears to Government, however, that under the scheme suggested by Mr. Cardew, the former would require to apply to the latter for information on all the medical points in the history sheet and that no advantage would thus result.

6. The existing procedure in these matters should accordingly be maintained.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Inspector-General of Prisons.
„ Surgeon-General.

G.O., R. No. 1259, Judicial, dated 23rd July 1896.

Read—the following letter from A. G. CARDEW, Esq., M.A., Inspector-General of Prisons, to the Chief Secretary to Government, dated Ootacamund, 25th June 1896, No. 4097:—

In my letter, No. 1710, dated 28th March 1896, I suggested that the duty of collecting so much of the information required for the medical history sheet of lunatics as is of a non-medical nature should be imposed on the Courts which send the lunatics for observation, and that the transfer of lunatics from jails and sub-jails to the lunatic asylums, should not be delayed until the medical history sheet was

completed. These recommendations were made in the interests of the lunatics, whose prolonged detention in jails and sub-jails is obviously undesirable, though of course it saves the authorities of the lunatic asylum trouble to receive all papers complete with the lunatic. In G.O., No. 999,*

* Not communicated to the High Court.

Judicial, dated 12th June 1896, it has been decided that the medical history sheet must continue to be submitted at the time that the lunatic is sent to the asylum or the lunatic's case submitted to Government under the Criminal Procedure Code, and that the medical officer who grants the certificate of lunacy must continue to be responsible for all the entries in the sheet. It is still possible, however, to reduce the period of detention which lunatics have to undergo in jails and sub-jails before being forwarded to the asylum by imposing on the Courts the duty of supplying medical officers *promptly* with the information required for filling up so much of the medical history sheet as is of a non-medical nature, and it is in order to obtain the assistance of Government in this direction that this further reference is made.

2. The heading of the form of medical history sheet prescribed in G.O., No. 786, Judicial, dated 29th March 1894, and modified by G.O., No. 2224, Judicial, dated 13th September 1894, directs that 26 out of the 28 headings in the sheet shall be filled up by the medical officer, while the information required to fill in headings 28 and 29 should generally be procured from the District Magistrate. But of the 26 headings which have to be filled up by the medical officer, it is evident that several must generally be procured from some other source than the lunatic himself. If the patient is insane, he often cannot give his own name—much less details as to date of birth, whether married, number of children, religion, previous occupation, record of previous attacks, previous habits, &c. This information has to be got from the committing Court, and what is desired now is to obtain the orders of Government distinctly imposing on the committing Court the duty of supplying the medical officer promptly with this information.

3. In consequence of complaints received from medical officers regarding delay on the part of Courts in furnishing information regarding lunatics sent for observation, I issued on 9th November last a circular letter, No. 5824, of which copy is enclosed, requesting District Magistrates to direct Subordinate Courts to furnish medical officers with the necessary information either when sending the lunatic for observation or within seven days afterwards. Objection has, however, been taken to the issue of these instructions to the magistracy on the ground that this course would weaken the responsibility of medical officers and would furnish them with untested statements supplied by the police. The letter embodying these objections is submitted for the consideration of Government. It appears to me that the medical officer does not require the information to enable him to certify whether the person is a lunatic or not, his certificate being founded on altogether different grounds, but merely to enable him to supply certain statistical information necessary for departmental purposes at the lunatic asylums. The medical officer has no means of getting the necessary information except through the court which sends the lunatic for observation, and it is, therefore, I submit, desirable that the obligation resting on the court to furnish this information as promptly as possible should be clearly laid down and should be based on the authority of an order of Government. I therefore request that the Government may be pleased to direct that, when a civil or criminal lunatic is sent for observation to a medical officer, the court shall send with the lunatic a statement of information such as is annexed to my circular letter, No. 5824, dated 9th November 1895 (above referred to), or, if it is impossible to supply the requisite information at the same time that the lunatic is forwarded, that the court shall furnish the statement to the medical officer with the least practicable delay afterwards.

ENCLOSURE.

From A. G. CARDEW, Esq., M.A., I.C.S., Inspector-General of Prisons, to all District Magistrates, dated Ootacamund, 9th November 1895, No. 5824.

Various complaints have been made by medical officers of jails regarding the inadequacy of the information furnished to them by magistrates when lunatics, criminal or civil, are sent for observation. Under section 6-A, Act XXXVI of 1858, civil lunatics can only be legally detained under observation for a maximum period of 14 days, but owing to the defective information received with such lunatics, references have often to be made to the magistrate, thus producing delay.

2. In order to reduce such delays as far as possible, I have the honour to request that orders may be issued to all magistrates directing them, when sending either a civil or criminal lunatic to a medical officer for observation, to send with the lunatic a statement in the form annexed to this letter, or, if it is impossible to supply the requisite information at the same time that the lunatic is forwarded, to furnish the same not less than seven days afterwards.

ANNEXURE.

STATEMENT of Information regarding ^{Criminal}_{Civil} Lunatic sent for observation to
the Medical Officer of the Jail on the 189

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1. Lunatic's name.
2. His previous occupation.
3. His birth-place and last residence.
4. Whether married, and number of children.
5. If criminal, nature of offence with which charged.
6. Whether there is any history of insanity in lunatic's family.
7. Whether there is any record of previous attacks of insanity in the lunatic, and, if so, at what dates and of what duration.
8. Duration of present attack, and whether continuous or not.
9. Has the lunatic been addicted to the use of intoxicants?
10. Is any probable cause of insanity known?
11. Has lunatic shown aggressive or suicidal tendencies?

From A. C. TATE, Esq., Acting District Magistrate of Cuddapah, to the Inspector-General of Prisons, dated 20th November 1895, No. 1117-Magl.

With reference to your letter, No. 5824, dated 9th November 1895, I have the honour to state that the course which you propose for adoption will, I fear, have the effect of easing medical officers in an undesirable manner of considerable responsibility which properly rests on them. Under existing rules, third-grade hospital assistants are frequently empowered to grant the certificates required under the Lunatics Act (Act XXXVI of 1858) for civil lunatics, and, considering the gravity of the subject, I should be sorry to see anything done to lighten their responsibilities.

2. The rules require that a magistrate of the first class should frequently interview such lunatics in company with the medical officer. The responsibility for this being joint, there seems no reason to apprehend that there will be any difficulty in the way of the medical officer getting without delay any information that he requires and which the magistrate can furnish.

3. As regards criminal lunatics, the case is different. In such cases, there is no rule requiring magistrates to interview the suspected lunatics in company with the medical officer, and these lunatics may be dealt with by magistrates of any class. But the law requires the magistrate to adjudicate upon the fact of the insanity of the criminal and such adjudication must proceed upon the regular sworn testimony of the medical officer and other witnesses. Under such circumstances, it seems inexpedient and unwise to require the magistrate to furnish the medical officer beforehand with information unsanctioned by the solemnity of an oath or solemn affirmation and the accuracy of which has not been tested by him in judicial manner. Any information he could get would be obtained through the police (in nearly every case), and I have known more than one case where a criminal, acting either under advice or of his own motion, pretended madness in order to escape the consequence of his crime and where I have reason to think he was assisted in this course by the police.

4. It is, of course, obvious that much of the information that your form provides would never come before the magistrate in a form in which he could take any judicial notice of it, and it is evidently improper that the magistrate who has to come to a judicial decision should be ordered to furnish a witness with unverified materials for pronouncing before himself an opinion as an expert, to enable him to adjudicate.

5. For the above reasons I regret that, the matter being one which I must dispose of according to my own discretion, I feel unable to issue the orders you suggest. Perhaps the points I have noted above have not been placed before you when considering this matter, as it is evident your letter was written after hearing only complaints by medical officers about delays. If you still adhere to your opinion after perusal of this letter and wish to press the point, I request that you will lay it before Government with my objections. Or, as another possible course for gaining the object you have in view that does not appear to have such great objections as the one proposed, it might be possible to obtain an order from the Inspector-General of Police that station-house officers should furnish medical officers direct with such information about suspected lunatics as they require, it being well understood that magistrates are in no way responsible for the accuracy of this information.

Order—R. No. 1259, Judicial, dated 23rd July 1896.

Referred to the Hon'ble the Judges of the High Court for favour of remarks.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Hon'ble the Chief Justice (with C.L.)

From D. W. G. COWIE, Esq., Registrar of the High Court of Judicature, to the Chief Secretary to Government, dated Madras, 12th September 1896, No. 507.

In reply to Reference No. 1259, Judicial, dated 23rd July 1896, referring to the Hon'ble the Judges for favour of remarks a letter from the Inspector-General of Prisons, dated 25th June 1896, No. 4097, requesting that the Government may be pleased to direct that when a civil or criminal lunatic is sent for observation by a medical officer, the Court shall send with him a statement of information such as is annexed to the Inspector-General's circular letter, No. 5824, dated 9th November 1895, I am directed to state that the High Court is of opinion that magistrates may be directed to furnish all the information of the nature required which is available, provided that this is done in their executive capacity and not as judicial officers. The Court, whether it be that of a magistrate or of session, will then be free to decide judicially when all the materials, including the medical officer's opinion, are before it.

2. The enclosures to the Government Order are herewith returned.

From R. NATHAN, Esq., Officiating Under Secretary to the Government of India, Home Department (Medical), to the Chief Secretary to the Government of Madras, dated Calcutta, the 28th January 1897, No. 2-Medical—48.

In Home Department Circular No. 25-Medical—856-865, dated the 30th September 1896, Local Governments and Administrations were requested to take steps with a view to the new (1896) edition of the "Nomenclature of Diseases" being brought into use in all civil medical institutions, with effect from the 1st January 1897. It has since been brought to the notice of the Government of India that the types of insanity shown in the headings of Lunatic Asylum Form No. VI, which was prescribed in Home Department Resolution, No. 16-Medical—576-580, dated the 10th July 1896, do not agree with the classification contained in the 1896 edition of the Nomenclature of Diseases. Form VI has, therefore, been revised according to the new classification, and I am to request that the revised form, a copy of which is forwarded with this letter, may be substituted for the form forwarded with this office Resolution of the 16th July 1896.

ORDER—No. 174 Public, dated 20 February 1897.

The instructions of the Government of India will be communicated to the Surgeon-General for guidance. That officer's special attention will be directed to paragraph 7 of Resolution, No. 16-Medical—576-86, dated 17th July 1896.

The revised form of Statement VI received with letter from the Government of India, No. 2-Medical—48, dated 28th January 1897, has been substituted for that received with that Government's Proceedings, No. 16-Medical—576-86, dated 11th July 1896.

2. With reference to paragraph 3 of letter from the Government of India, No. 1112, dated 22nd December 1896, ~~His Excellency the Governor in Council~~ *the Govt.* directs that the form of medical history sheet appended to these proceedings shall be used in all future cases with the reservation that the information under the *supplementary* headings should be afforded only in cases which relate to releases from asylums.

3. In regard to the proposal of the Inspector-General of Prisons in paragraph 3 of his letter of the 25th June last, that when a civil or criminal lunatic is sent for observation to a medical officer, the Court should ~~send~~ *forward* with the lunatic a statement of particulars, the Government approves the course indicated by the High Court under which the magistrats should furnish the information in their executive ~~but~~ *but* not in their judicial capacity. The Judicial Department will be requested to take the necessary action to ensure ~~this being~~ *this being* done in future. The form to be used is that appended to these proceedings with the omission of the supplementary headings.

~~(True Extract.)~~

~~J. F. PRICE,~~
~~Chief Secretary.~~

To the Judicial Department.

„ Surgeon-General.

„ Inspector-General of Prisons.

13 Sep. 97
from orders.

12
19/2/97
[Annexure.]

30 B.
17/2/97
AK
17/2/97

(If any of the particulars in this statement be not known, the fact to be so stated.)

1. Name of patient in full and caste or race.
2. Name of patient's father.
3. Sex and age of patient.
4. Marks whereby the patient may be identified.
5. Married or single or widowed.
6. Condition of life and previous occupation (if any.)
7. Religion.
8. Place of birth and recent place of abode.
9. Whether homeless or living with relatives or friends.
10. Previous history and habits.
11. State of bodily health.
12. Whether any member of patient's family has been or is affected with insanity.
13. Whether the attack is the first attack of insanity or not.
14. Age (if known) at onset of first attack.
15. Duration and nature of any previous attacks.
16. Duration of existing attack.
17. Symptoms exhibited.
18. Supposed cause of insanity.
19. Supposed exciting cause of present attack.
20. Whether subject to epilepsy.
21. Whether suicidal.
22. Whether dangerous to others.

Supplementary.

23. Whether civil or criminal lunatic and date of admission to asylum (in cases sent up for orders of Government under sections 474 and 475, Criminal Procedure Code).
24. If criminal, the offence with which charged.
25. Type of insanity.
26. Is lunatic capable of—
 - (a) Taking care of himself.
 - (b) Earning a livelihood.
27. Is release on security recommended?
28. If so, what amount should be demanded and what are the names, social position, character and relationship to lunatic of the sureties?

2. H. E. THE GOVERNOR.

1. THE HON'BLE MR. BLISS, C.I.E.

~~THE HON'BLE MR. GROSE, C.I.E.~~

SUBJECT.

Medical History Sheet
for Lunatic Asylums

FOR ORDERS.

Attention is solicited to the note for orders flagged m.f.O. ^{1484-85 Tull} _{14. 12. 96}. In the letter based thereon it was pointed out that the form of the Medical History Sheet prescribed by the Govt of India in its Res. N. 16/medl/576 of the 11th July last appeared to be designed for use only in cases in which lunatics are ordered to be confined in an asylum; that there are other cases (e.g. those in which recommendations have been made for the release of lunatics under S.S. 474 & 475 C.C.) in which the submission of almost the same information is highly necessary; and that this is considered that the particular

for

afforded in the foot of India form would fail to afford sufficient information to enable local courts to decide in such cases whether a lunatic can or cannot be released with safety.

It was further represented that the form prescribed by India did not provide for certain particulars required regarding criminal lunatics whose cases are reported for orders under §§ 466, 471, 474 & 475 C. C. P., whereas this information is given in the form approved in use in this Presidency; and that ^{it would} obviate confusion and mistakes if all the information required in the various circumstances referred to, were invariably sent up in the same form, and separate forms for different cases dispensed with.

This Court therefore deprecated any proposals to embody the particular alluded to in a special form for

^{*}
Pub. C. 110.

for use only in case of the four sections of the C.C.P. quoted above, and suggested an amplified form, ^{for use} in all cases, in this Presidency at least, instead of that prescribed by India.

In reply India states that its form was intended chiefly for use in the case of non-criminal lunatics who form the majority of those admitted into Asylums but for the sake of uniformity it was made applicable to all lunatics; and that the form was intentionally drawn up to avoid stating precise conclusions, e.g. the heading "type of insanity", no 20; in the amplified form suggested by this Court, was purposely omitted, the object being to furnish all the ascertained material for arriving at an opinion without giving ^{unless} the conclusion as it will be difficult to do this at the time of the patient's admission into the Asylum.

India therefore hopes that this Court will refrain from altering the form ^{present}

prescribed but has no
objection to the use of
Supplementary forms
to meet cases in which
the question of the release
of a lunatic is for
consideration

In the note for orders
imp. O. 999 Tudd d/12.6.96
certain suggestions made
by the S.G. of Prisons
"in the interests of the
lunatics" (that the
duty of collecting so much
of the information required
for the M.H.S. of lunatics
as is of a non-medical
nature should be
imposed on the courts
which send the lunatics
for observation, and
that the transfer of
lunatics from jails
to the Asylum
should not be delayed
until the M.H.S. was
completed) were fully
theshed out, and foot
considered that no
change in the existing
procedure in regard
to M.H.S. had been
shown to be necessary
vide the O. quoted

26 out of 29. The last
three do not apply.

which also please see

In his letter N^o 4097 of the
25th June last Mr. Carden
points out that though the
Medl officer who grants
the certificate of lunacy
must ~~still~~ ^{continue} to be responsible
for all the entries in the
M.H.S., it will still
be possible to reduce the
period of detention of the
lunatics in the jails or subjects
prior to ^{their} being forwarded
to the Asylum, by imposing
on the courts the duty of
supplying the Medl Officer
promptly with the infor-
-mation required for filling
up so much of the sheet
as is of a non-medical
nature.

The S.G. points out that
of the 26 headings (vide page 3
of fo. 786 Tudd stitched with fo.
2224 Tudd d/13. (R. 94) in
the sheet which the Medl
Officer is required to fill
up, the information necessary
for several
must generally be procured
from some other source than
the lunatic himself. Thus
if the patient is mad he
cannot often give his own
name, much less details
as to date of birth, number
of children if married, etc.
previous occupation &c.
Thus information

to be obtained from the
Committing Court and
the J.G. now requests
that foot will distinctly
impose this duty on the
Court, to be executed
promptly.

Mr. Cardew forwards
a copy of his ^{circular} letter N° 5824
d/9. XI. 95 (1) requesting
District Magistrates to direct
Subordinate ^{J. Magistrates} ~~Magistrates~~ to furnish
Medl officers with the
necessary information
either when sending
the lunatic for observation
or within seven days
afterwards; and also
copy of a letter from
the D.M. of Cuddapah
objecting to the issue
of these instructions
on the ground that such a
course would lessen
the responsibility of the
Medl officers and
furnish them with
untested statements
supplied to the Police.

Please see also para 4 of
their letter

Mr. Cardew considers
that the Medl Officer
does not require the
information to enable
him to certify whether the person
is a lunatic or not
that certificate being
given on quite different
grounds - but only

to enable him to supply
certain statistical infor-
mation required for depart-
mental purposes at the
Lunatic Asylum. He
states that the Medl Officer
has no means of getting
the necessary information
except through the committing
Court and submits, therefore,
that the obligation resting
on the Court to furnish
this information as promptly
as possible should be
clearly laid down and
should be based on the
authority of an order
of foot, directing that when a
civil or criminal lunatic
is sent for observation
to a Medl Officer, the
Court shall send with
the lunatic a statement
of information such as
is annexed to his circular
letter, or if that is impossible
with the least practicable
delay afterwards.

* page after

The High Court, to whom
the matter was referred,
is of opinion that the Magistrates
may be directed to do this,
but in their Executive
capacity, and not as Just
Officers, and that then
the Court (whether that of a
Magistrate or of Session) will
be free to decide judicially
when all the material
including the Medl
Officer's

of fixing ^{them} before it.

It will be seen from para 3 of its letter N° 16 Medl - 5-6-86 of the 11th Inst last n/o. 1484-85 Inst 2-14-9-96 that India has decided that the form prescribed by its State be used "in all cases in which Court orders (SS 466 & 471 Cr.P.C or under S 31 (1) of Act V of 1871, as amended by Act X of 1886) that an accused or convicted person should be confined in a lunatic asylum" or "in which a Magistrate (SS 405 of Act XXXVII of 1858) or the Judge of a Civil Court (SS of Act XXXVI of 1858) may order a lunatic to be received into an asylum".

Orders will now have to be issued to this effect as well as in regard to the points referred to in India's letter info. 1754 Inst of 22-8-95 the reply to which is in f.o. 2484 Inst of 24-11-95, and final orders in regard to which have been passed by India in its Resolution in f.o. 1484-5 Inst of 11-9-96.

Orders are requested as to whether both the form prescribed by India and the amplified form suggested by this Govt are to be used in this Presidency for all cases, or whether the amplified form alone embodying only the

locally required, should be used as a supplementary form "to meet cases in which the question of the release of a lunatic is presented to Govt. for consideration.

Orders are also requested as to whether the Magistrate may be instructed as suggested by the S.G. of Prisons to supply the information he refers to, and in their executive capacity as advised by the High Court.

is suggested that this may be done.

A.C.H.
18/1/97

BW

C.S.
15.1.97

J.S.B.
15.1.97

1. The changes which India has decided to make in Appendices VI & VII of the Annual Report on Lunatic Asylums are set forth in paras 5, 6 & 7 of its Resolution no 16. Medl. - 5-6-86. [Flag 2] The changes made have been embodied in this form which is attached to this Government. (Para 1 of Letter no 2490 D. 13.12.96 Flag 2). No notice has, however, been taken of the proposal to employ the terms used in 'The official nomenclature of diseases 1885' as recommended by the

There appears to be no objection to
the proposal being adopted in Am.
and from India.

The "Census Bureau" referred to
in para 8 of Indian Resolution
above mentioned are already mentioned
in this Board.

The order of P.L. will have
been to be communicated to the
S.G. for future guidance.

2. As regards the Med. Hist.

Section it is submitted that
in view of the facts expressed
in the last para. of the

How it's letter no 112 (C. no 110)
dated 22. 12. 90. The only
course now is to present

a Supplementary Med. Hist. Sheet
for use in cases where the relative
of a person from an asylum is questioned.

For use in cases where the relative
of a person from an asylum is questioned.

In this Supplementary form the
in the subject in the form in

File No. C. 1124-5, D. 11 (1905)
and appear.

2. I think no use arguing any further
with the G. of I; they have made
up their minds and the "hope"

is being a command. The only course
to follow is that to be submitted that to

suggested in the H.C. above

AD
21/1/87

Should print the Supplementary
headings below the others so that
they may be on the same sheet, for
use when required.

AD
22/1/97 2.50
25/1/97