PART C.--CRIMINAL LUNATIC—DETENTION.

The accompanying from (printed at the end of Chapter 17-C as an Appendix) has been prescribed by the State Government for all cases in which the papers of a criminal lunatic are sent to it for orders. Unless this form is completed, it is impossible to arrive at any safe decision regarding the period for which it will be necessary to detain him.

2. The same form should invariably be used when a criminal lunatic is sent direct to a Mental Hospital by a Magistrate or Court. As observed above, the form should Hospital. be filled up, as far as possible, after the medical examination in the first instance.

3. Attention is called to the following memorandum, embodying the views of certain experts as to the principles which should apply generally in dealing with the cases of criminal lunatics. This memorandum is only intended to indicate broadly the action which may ordinarily be taken. The case of every criminal lunatic should be considered separately and dealt with on its own merits, and if in any case the opinion of the officers responsible for advice regarding it is that the principles embodied in the memorandum do not apply, the action recommended should be that which the special circumstances of the case suggest to the experience of the officers concerned as the most appropriate.

I.—RECOVERED CRIMINAL LUNATICS.

(1) If the crime be against the person, the cause, the use of intoxicating drugs, and the type of insanity acute or chronic mania, a period of three years should be spent in an asylum free from all signs of insanity before any action is taken.

(2) If the crime be an offence against the person, the type of insanity acute or chronic mania, and the alleged cause not the use of intoxicating drugs, a period of at least four years of complete freedom from insanity should be spent in an asylum before action is taken.

Medical history sheet to be sent to Government.

Same should be sent to Mental

> Memo of principles to be observed in dealing with the cases of criminal iunatics.

Crime.—Offences against the person. Cause.—Intoxieating drugs. *Type.*—*Acute* or chronic mania. Crime.—Offence against the person.

Cause-Other than intoxicating drugs. *Type.*—*Acute* of chronic mania. Crime.—Not an offence against person, but where mental attitude is aggressive.

(3)

the lunatic is confined.

the person, but the lunatic has at any time

exhibited dangerous or violent tendencies, a period of at least four years should be spent in an asylum

If the crime be not an offence against

Type.-Acute of chronic mania.

Crime.—*Not* an offence *against* the person, or, if so. trivial in its nature; mental attitude not aggressive.

before any recommendation is made for his transfer to Jail or for his release.
(4) If the crime be not an offence against the person, and there is no history that the lunatic was at any time aggressive, he may generally be treated much as if he were a non-criminal lunatic. The State Government will generally be guided in such cases by the recommendations of the Visitors and of the Superintendent of the Asylum in which

Crime.—Murder.

Type.—Melancholia (5) If the crime be murder and the type of nsanity be melancholia, a period of at least six ears complete freedom from insanity should be assed in an asylum before action is taken.

(5) (a) If the crime be one against the person, and the lunatic has been originally confined in the asylum under the provisions of section 466, Code of Criminal Procedure, and has subsequently sufficiently recovered to stand his trial and has been acquitted under section 470 of the Code, it will be necessary that the lunatic shall be sent back to the asylum to undergo the same period of complete freedom from insanity in accordance with the above rules before a recommendation by the visitors can be made for the lunatic's release.

(6) If the crime be attempt to commit suicide, the type melancholia and if the lunatic has not exhibited any violent tendencies while under observation, some relaxations of the rules may be permitted according to circumstances, age period of detention, and c.

II.—UNRECOVERED CRIMINAL LUNATICS.

(7) If the crime be an offence against the person, the type chronic mania of the irritable aggressive kind, it will seldom be possible to release the lunatic during continuance of insanity except in advanced age and on exceptional security.

Crime.-Attempted suicide. Type-Melan-cholia

Crime.-offences against a person. Type.-Chronic mania of irritable aggressive kind.

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(8) If the crime be not an offence against or, if an offence against the person of trivial nature, and the lunatic has never exhibited aggressive symptoms, he may generally be treated much as if he were a noncriminal lunatic, and the State Government dealing with his case under section 474 of the Criminal Procedure Code, will be guided mainly by the recorded opinion of the Superintendent of the Asylum as to the propriety of releasing him, and by the recommendations of the Visitors ..

4. In the case of lunatics confined in jail, sections 473 and 474 of the Code of Criminal Procedure assign certain functions to the Inspector-General of Prisons, and section 471 provides that the State Government may empower the officer in charge of a jail to discharge these functions. In practice, however, all criminal lunatics should be sent to Mental Hospital and not to a jail.

APPENDIX

FORM No. 117.

Medical History Sheet of Lunatics.

N.B.—The ultimate responsibility for the preparation of this form rests with the committing officer who must see that the requisite information is supplied by he Police and the Medical Officer without undue delay.

QUESTIONS TO BE ANSWERED BY POLICE

ALONE.

- 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.*

*Here the name of village, police station and district and length of residence should be stated.

Crime-offe-nces not against a person, or if trivial nature. Type-Mental attitude not aggressive.

Criminal lunatics should not be sent to a jail but to a Mental Hospital.

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- 9. Whether homeless or living with relatives *
- 10. Previous history and habits.‡
- 11. Whether any member of patient's family has been or is affected with insanity:
- 12. Whether the attack is the first attack of insanity or not.
- 13. Age (if known) at onset of first attack.
- 14. Duration and nature of any previous attacks.
- 15. Supposed cause of insanity.§
- 16. Supposed exciting cause of present attack.

QUESTIONS TO BE

ANSWERED BY POLICE

AND

MEDICAL OFFICERS

- 1. Duration of existing attack.
- 2. Whether suicidal.
- 3. Whether

dangerous to others.

QUESTIONS TO BE

ANSWERED BY MEDICAL

OFFICER ALONE'

- 1. State of bodily health.*
- 2. Symptoms exhibited.
- 3. Whether subject to epilepsy or any other disease.

†This heading should show the names and addresses of the relatives or persons legally bound to maintain the lunatic (if any), and whether they are able and willing to take charge of him or to bear the cost of his maintenance in the asylum and, if not, why not.

‡In this, mode of life the parent led, history of any particular illness which may have helped to produce this condition of mind, his temprament or any habit of taking or smoking any drug or any ground for supposing that the insanity in hereditary, should be mentioned in the case of criminal lunatics, also the nature of the crime, the detailed circumstances under which it was committed, how he came to be arrested by the Police and the section under which the lunatic was charged and the result of trial, in addition to other particulars which may be available.

§State here whether he is addicted to any spirits or drugs, and if so, for how long he has been so addicted and what is the quantity habitually taken. Whether he is a member of any particular religious or political society.

"Under this heading should be stated whether the lunatic suffered from loss of property, loss of relatives, domestic trouble, or ill health immediately before the attack.

*In this the general health of the patient as well as any abnormality of feature or development should be entered. It is desirable that special mention be made as to whether the patient is or is not, suffering from any tubercular disease.