attempting to act without, or contrary to the advice of, the profession. Let the history of the Crimean war serve as an example. Perhaps the best abused man of that time was the late Sir Andrew Smith, the Director-General of the Army Medical Department; and yet, when the true story of the war came to be told, it was found that he had foreseen only too well the breakdown that must occur, and proposed measures which, had they been adopted, would have at least greatly mitigated the terrible evil. The French Government were not more wise than our own, for they disregarded the warnings of their medical staff in the autumn of 1855, when it was plain to the eye of science that a terrible invasion of typhus was imminent. The ruling powers were deaf, the blow fell, and many of the unfortunate doctors fulfilled their prophecy in their own persons. Look at the history of the last Arctic Expedition and the present Indian famine, and say whether dire disaster might not have been averted had medical counsel been listened to. On the other hand, we have the history of the campaigns in China in 1860, in Abyssinia in 1868, and in Ashanti in 1873, in which medical counsel was sought, and, still more, acted upon; and what do we find? A series of triumphs won at a cost that was positively insignificant; a sanitary success that was little short of perfect, even in the terribly trying climate of the Gold Coast. This last was appropriately called a doctors' war; and it will be golden wisdom in governments to try and make all other wars more and more doctors' wars, as well as to listen to their counsel in times of peace, whether they deal with soldier or civilian. To attempt to do without the doctor now is hopeless, although it is possible to conceive a time when such a consummation may arrive. Indeed, the progress of medical science has been constantly tending towards abolishing the necessity for the physician; so that, in a remote future, a physician will be honoured less for the uses men may have of him than because by his preventient science he renders it unnecessary to use him as a physician. And this is a healthy sign of progress. Every pursuit has its own mission to fulfil; and, if it do it well, its highest point of aspiration must in many instances be its own effacement. When the prophecy is fulfilled, the mission of the prophet is accomplished. All the world holds his secret, and he passes away out of notice; the time and place know him no more. Thus, as I have said in a former lecture, "State Medicine will have both reached its perfection and extinguished itself when both sanitarian, as differentiated from the community generally, and State, as a controlling and interfering influence, shall have ceased to be; the one, because every member of a perfected community will be a sanitarian in the best and truest sense of the word; and the other because, from the very condition of the community, State interference will have become perfectly unnecessary". (*Lectures on State Medicine*, 1875, p. 6.) But, gentlemen, this is an ideal time, and, for the present at least, an Utopia; between it and us lies a wide and stormy sea of doubt and difficulty, across which our profession will unquestionably furnish the most trustworthy pilots. The saying of Descartes is still true, that, "if the perfectibility of man be possible, it will be through the medium of the medical sciences".

BRIGHTON.—The mean temperature of 1876 in Brighton was 51.1 deg. Fahr., the rainfall 34.64 inches, and the relative humidity 80. There were 934 marriages, against 843 in 1875. The annual birth-rate was 34.8, and the death-rate 19.6, against 21.0 for England. There were 3,021 births to 1,977 deaths, of which as many as 207 were of non-residents. If these were deducted, they would reduce the death-rate to 17.6; but it is clear that all should not be taken off, as there are at all times visitors in Brighton. Of the total deaths, 34.8 per cent. occurred amongst children under five years of age, and 23.2 in infants under one year. There were 15.9 per cent. of deaths under one year out of the total births, that of London being 16.0; so that in this respect Brighton does not compare favourably with large suburban districts of London. The mortality from the seven principal zymotic diseases was unusually low; viz., 11.9 per cent. of the total deaths, and 2.3 per 1,000 population. The deaths from diseases of the respiratory organs, including phthisis, were 26.5 per cent. of the whole, which is lower than usual. The same occurred in most other localities last year, but we do not consider it at all satisfactory to have phthisis grouped with bronchitis and pneumonia. The proper drainage of houses proceeds very slowly in the borough, which certainly surprises us, when we consider how much Brighton depends on its visitors. Dr. Taaffe says that, including 775 connections which have been made during this year with the sewers, there are only 11,432 out of 17,980 houses which are thus connected, so that nearly one-third of the houses are still practically undrained. Dr. Taaffe also says that he must again press on the sanitary authority the necessity of providing a hospital for infectious diseases, of establishing a public *abattoir*, a mortuary with *post mortem* room, and a chemical laboratory.

AN ADDRESS

DELIVERED AT THE OPENING OF

THE SECTION OF PSYCHOLOGY,

*At the Annual Meeting of the British Medical Association,
in Manchester, August 1877.*

BY JOHN CHARLES BUCKNILL, M.D., F.R.S.,
Late Lord Chancellor's Visitor; President of the Section.

CONFESSION: THE PHYSICIAN AND THE PRIEST.

GENTLEMEN,—This occasion seems opportune for speaking on a subject of great and general importance to us as specialists, namely, whether the customary practice of our specialty does not frequently tend to impair our usefulness, by limiting our field of observation and by narrowing our view of men and of society. Certainly, we are not unfrequently accused of the prejudices born of narrowness and one-sidedness; and quite recently, it has been asserted by the highest and most revered authority among laymen, whose judgment upon us is as kindly as it is conscientious, that the power of certifying insanity ought not to be exclusively entrusted to those who have deeply studied the subject, because they would be most inclined to find half mankind of unsound mind. "I confess I should be very much alarmed," said Lord Shaftesbury to the Select Committee on the Lunacy Laws (Question 11,347), "if there were persons who kept themselves exclusively to that (giving certificates of lunacy) without knowing all the special circumstances which beset lunacy; all the social and ten thousand other circumstances; and all the eccentricities which are developed by men who are not mad, and who yet, under the discrimination of science, would be put down as being in the way of being mad."

There can be no doubt that all special employment leads to narrowness of mind, and that the learned professions suffer from this tendency most notably. This, indeed, was long ago pointed out by Archbishop Whateley in his work on *Rhetoric*; and there can be no doubt that there is a legist's narrowness, and a priest's narrowness, and a physician's narrowness. It will be very useful to ask ourselves whether, within the latter, there is not also a mental physician's narrowness, tending to explain natural varieties of character and natural courses of conduct, upon the assumption of morbid deviations from an unknown standard of sanity. For, like the old king, who, when he heard of crime or misfortune among men, always asked "Who is she?" are we not somewhat disposed, in all human follies and miseries, to ask "What is the insanity?" and are we not often tempted to parody Carlyle's cynical description of this realm, as a fair country, containing thirty millions of men, mostly lunatics? If this criticism be too wide and general, it is surely not wholly without foundation, and may well be taken by us as a warning voice against a danger incident to our very peculiar calling in life; for, if you think of it, the study and care of men with diseased minds is a very peculiar calling, distinguishing us from all the rest of the world, which carries on all the business of life on the assumption that men are reasonable beings. Society rubs along, believing in the rule of reason as it does in the law of gravitation; and although we may enjoy vastly more credit than the levitating spiritualists, we scarcely stand on a less distinct foothold from the common faith which actuates the daily conduct of our fellow-men; and the greatest caution is needful that, as the companions of the insane, we do not become too much associated with them in their modes of thought. The learned author of the *History of Civilisation* maintained that the characters of men are developed from their objective surroundings, so that the men of the mountain, of the plain, of the forest or the desert, differ from each other in consequence of the great features of nature by which their character is fashioned, and which they reflect in mental and bodily peculiarities. This, no doubt, is in great measure true; but it is even a more weighty truth that the individual man reflects his fellow-men, and that man is the creature of his social surroundings, and the due consideration of this most important factor of mind is the great addition which Mr. Herbert Spencer and his followers have added to modern philosophy. Mind as subject and nature as object does not explain, as used to be said, the whole field of thought and things to be thought of, of feelings and things to be felt. There is an addition to this: the minds of other men, the manifestations of which are objects, but which in themselves are not objects, but what Professor Clifford, with his keenest insight and appreciation, proposes to call *ejects*; and these minds of other men it is which really and effectually mould us to what we are. To be moulded by the best minds is the greatest happiness, to be fashioned by the worst is the greatest mis-

fortune which a human being can endure. To be warped by the dishonesty or to be soiled by the impurity of other minds, is bad enough; but, if it be possible that the sound mind can be made to vibrate the discords of unreason by association with the unsound, that, indeed, would be a misery worse than any which the imagination of Dante dared to invent. And who shall say that it is not possible, and even probable? Nay, who shall say that it is not a dreadful fact, dimly revealed in the traditions of our specialty? How long Gulliver among the Yahoos could have retained his human attributes, is as uncertain as the resistance which a sound mind, without suspense or relief, could offer to insane surroundings; but that such resistance would gradually come to an end, there can, I think, be little doubt. It is not, however, from any complete fall, but of those touches of imperfection from the contagium of surroundings, the danger of which is imminent and perhaps unavoidable, against which I most desire to exhort you to employ the antiseptics of frequent recreation of mind and body, combined with the tonics of sane companionship and sound-minded occupation and study. I wish to insist upon the great need of the mental physician to breathe much of the pure air of rational life, for the sake both of himself and of his patients; and of the greater need the more he is of a true mental physician, understanding incoherence and delusion, and sympathising with morbid feeling. If the oculist were to abide long in his dark room, he would soon be worth little as an oculist; and if there be one man more than another who ought to be a man of the world, it is the physician who has the care of the insane; for if he allow himself to become ignorant of the outside world, he will be able to make no comparisons of the sane with the insane; and, therefore, liable to consider opinions and conduct morbid which are only strange, a danger of which I could give you amusing examples. An instance of it was, I think, given by Lord Shaftesbury, in certain physicians who considered a lady insane because she carried a small dagger in her dress; carrying such daggers at that time being a common freak of fashionable dressmaking, unknown to these innocent doctors. Other instances I have myself met with in men, who have been certified and treated as lunatics on account of certain habits which are unnatural and portentous to Englishmen, but which these miserable men had acquired in climes and countries where such habits are common, causing no abomination and little remark. Consequently, the denationalised Englishmen who had contracted them were simply vicious and not insane. Even among different classes of our own community, it is difficult for any man who has only observed the habits, opinions, and sentiments of the poor, the rude, and the uneducated, to appreciate and sympathise with those of the wealthy, the refined, and the cultured. The man who could blow hot and cold was not more strange to the Satyr, than the infinite diversity of human nature is to the man of limited education and narrow experience. Therefore, the man of wide culture and broad training must be best able to understand all kinds and conditions of insane people, and to compare them with all kinds and conditions of the sane; to appreciate vehement feeling and strange conduct which does not transgress the bounds of health; and to influence devious and morbid character of all kinds and wayward spirits of every variety; while the work of the narrow specialist must needs become ever more injurious to himself and ever less helpful to his patients.

But, if the psychologist can derive so much instruction and guidance for his own work from knowledge of the outside world, so also he can reflect light upon some of the most important, and yet the most obscure, problems of human life. If the physiology of mind be the key to its pathology, so also does this pathology illustrate mental physiology, and, if sociology strengthen the hand of the psychologist, the latter repays the debt by the aid which his special training and knowledge enables him to give in the investigation of great social questions.

It was said by Descartes that, "if it be possible to perfect mankind, the means of doing so will be found in the medical sciences". But, whether or not perfection be ever attained for a subject so vast and variable as mankind, human progress may at least be hoped for through the means indicated by this great philosopher; and, of all the medical sciences by which human progress towards perfection may be promoted, it would seem certain that the science which studies the greatest function of the human organism is the one from which aid and guidance in the march forward may most surely be expected. Men are too selfish and passionate to listen to our teachings, otherwise not only from the cradle to the grave, but in regard to that obscure and awful time weighted with fate which precedes infant life, we could give counsel which, if followed, would prevent fools and madmen from being born into the world. The concepts of conception treated with such pleasant ridicule in *Tristram Shandy*, are weighty factors in the history of the race, and the right principles of sound-minded here-

dity, of healthy fecundity and foetality (if I may coin a word), can only be acquired by means of the progressing study of neuro-physiology and neuro-pathology. The aid which the psychologist may hope in future times to lend the state in the great civic duty of building the brains of the young citizens has hitherto been scarcely considered except in the instructive and delightful book of my friend Dr. Edward Clark of Boston. The psychologist has indeed been imperatively called upon to labour in those repairing docks, the schools for idiots, for deaf-mutes, and the blind; but in laying down the lines of new vessels he has never yet been consulted. Yet there is small doubt that we could give most valuable advice as to the better methods of ordinary education for healthy children, so as to avoid the evils of physical and moral insatiation, of excessive or ill-directed brain-work, of ill-directed or neglected moral guidance, of onanism and athleticism, of tundings and suicides. Alas! for the scandal that the suicide of a child of twelve years should be accounted for by his being a bad boy; and that by his master in a school bearing the holy name of Him who said, "Suffer little children to come unto Me." The psychological aspect of crime has not been so much neglected as that of education, and, apart from the important rôle played by specialists in courts of justice, the psychological study of the criminal mind has been earnestly pursued by Dr. Nicholson and other inquirers in a manner which promises at least to enlighten the law-making classes as to the genesis and real characteristics of the law-breaking classes. But, whether our society will ever have the courage to repress the generation of criminals is more than doubtful. Rather it would seem that society loses courage as it gains knowledge, and perhaps at some future time the curious spectacle may have to be regarded of a nation composed entirely of philanthropists and criminals, unless indeed it be a law of the race that, from time to time, the world must be reorganised by an energetic barbarism. Meanwhile, the legislator, policeman, and judge, as well as the schoolmaster and the psychologist, are all working at the same task of the building or repairing of brains, and, if all these fellow-labourers could but recognise the fact that their common aim is the right direction of cerebral nutrition, the world would be spared much inanity both of counsel and action.

There is indeed another important calling between whose professional work and this work a great gulf is fixed; namely, the immeasurable difference between the supernatural and the natural. And yet the priests of some creeds make the singular mistake of illustrating their duties by comparing them to ours; nay, they go beyond comparison in declaring positively that sin is spiritual disease, and that they are physicians of the soul. It behoves us to look to this; for it cannot be said that the priest and the physician are very much alike, especially the priest. Comparisons are commensurate, and by as much as the priest is like the physician by so much is the physician like the priest. If sin is disease, disease is sin; and if the priest is a physician, the physician is a priest. I desire punctiliously to guard myself, in the following remarks, from the expression of any theological opinion whatever, and especially from any opinion which may give offence to our most respected fellow-members who belong to the communion of the Roman Catholic church. I believe that they will be among the first to agree with me that the functions of the physician and those of the priest are essentially unlike, and that it is most desirable to avoid any misleading analogies between them. The Roman Catholic honestly expresses his belief that the functions of the priest are divine, and that confession is a sacrament ordained by God. That is a definite position which we can understand, and which in this place it would be improper to dispute. But within the Protestant Church of this country a very different position has been assumed, against which I think the medical profession will do well to protest. I well remember that, at the meeting of this Association which was held at Torquay, the chancellor of the diocese presented himself as the ambassador of his bishop, with the proposal that priests should be admitted within the ranks of the medical profession, in order that they might practise medicine in conjunction with their clerical duties; and I now observe that a certain school or sect of divines within the State Church of this country are diligently employed in the dissemination of the doctrine that the priest is a physician; that sin is disease, and that the confession of sin to the priest is as natural and necessary as the communication of the causes, history, and symptoms of disease made by a patient to his medical attendant. If we allow this doctrine to pass unquestioned, there may perhaps be little danger that priests will really seek to practise as physicians; but there is a likelihood that the public estimate of the functions of the physician will be unsettled and confused, and that the avowal of the history and causes of disease will not escape from that suspicion and repugnance which, in this country, is so widely attached to the confession of sins to the priest. I have found the doctrine to which I refer expressed in many works of

English divines. Often, no doubt, it is used oratorically as a mere metaphor, as by Bishop Hooker, who said that "priests are spiritual and ghostly physicians in the private particular case of diseased minds"; but of late, in that sect of the English Church which mimics the Church of Rome, the doctrine seems to be definitely taught that sin is disease and the priest a physician; and, under cover of this doctrine, so-called patients or penitents are exhorted to the confession of their symptoms or sins, in order that they may be cured and absolved. To establish this assertion, I shall only quote from one book, which, however, is the accepted manual of confession among our mimic priesthood.

The author of *The Priest in Absolution* speaks of the subject of his manual as "this subject of spiritual pathology". He says: "The qualification of a priest binds him to the acquisition of sound morality as a judge, and of great skill as a physician." (Part I, p. 4.) He speaks of "the duty which devolves upon a priest, in his character of a physician, to probe the spiritual wounds of his patients" (p. 5). "The priest must have the knowledge of a physician, in order to direct the moral knowledge of which it is the strength" (p. 10). "For the priest should as a judge punish offences, but as a physician heal the sick so far as he can prevent a relapse" (p. 41). "He [the priest] is nevertheless, as a physician, obliged to warn them and rebuke them according to their needs" (p. 49). In the second part, he says: "A surgeon may do many things else indecent for the sake of curing disease; a confessor may study cases of conscience" (p. 20). In his directions "How to deal with shamed-faced penitents", he says: "The priest should kindly remind them that they do not shrink from revealing their bodily diseases to friends and physicians; and that, as the soul is of more consequence than the body, they should not shrink from disclosing the diseases of the soul to its physicians" (p. 189). He says that it is sometimes the priest's duty to delay absolution, "advising him [the penitent or patient] to come back on a fixed day within eight or ten days, adding that any relapse within that period should cause no discouragement, but rather urge him all the more to resort to the physician" (p. 195). "If absolution be delayed, etc. It is good for the patient who is very ill to see his doctor frequently" (p. 235). "A priest is said to have cured one patient by telling him to come to him for confession as soon as he had fallen into sin, and not to wait for a second fall. By absolving him and giving him the same penance, he was cured in a few months" (p. 236). "We must distinguish between what is a proper disposition to receive absolution and what is its fruit; else we may act like doctors who content themselves with purges without ordering the supports needful to sustain the effects thereof, and so kill their patient" (p. 237). "Like medicines after which the patient seems to be better, though the fever recur afterwards, so with confession, which, though it blots out all sins of which a person accuses himself with sincere grief, does not remove all subsequent evils" (p. 240). "Different people require different treatment. The phlegmatic, the melancholy, the choleric, and the sanguine, must not be dealt with in the same manner" (p. 268). This work, *The Priest in Absolution*, has been severely criticised both in Parliament and the press on account of its obscenities; and it has been defended from the pulpit of this very city by the Rev. Knox Little, from whose sermon I quote a passage from the *Pall Mall Gazette* which directly affects us. "There are", says this priest, "many books of medical science just as bad; but they are not flung into society from the House of Peers, nor are their authors called corrupters of society". I am not aware whether the books of medical science referred to by this reverend gentleman are the poisonous pamphlets of the manly-vigour quacks; but, with regard to books of real medical science, his comparison invites the obvious retort that the badness or goodness of anything is relative; and that the shrewd saying of Lord Palmerston, that dirt is matter in the wrong place, which applies with undiminished force to thoughts and words, so that language which may be wise and good and pure in a medical treatise may be dirt in its worst sense elsewhere. Let us pass, however, this comparison with our books, to follow that drawn with ourselves. Is the priest a physician? Is sin disease? Is sacramental confession the avowal of symptoms, penance treatment, and absolution cure? In the interests of society and our profession, I must emphatically deny not only the identity of these things, but that there is any real analogy between them. I assert that the physician is a naturalist, the priest a supernaturalist; that no sophistry can bridge the abyss between them. The physician works by natural means upon natural conditions to produce natural effects within and upon the bodily organisation. In the pursuit of his calling, he only differs from other men by the possession of superior knowledge and skill acquired by labour. He is the successor of Hippocrates and Harvey, but only in the same sense that Whitworth and the village blacksmith are successors of Tubal Cain.

He pretends to no supernatural power acquired by mystic ceremonial, and he is content to do that which any other human being can do who has taken the trouble to learn his art. That art is the correction of deviations in the organism of men's bodies, which disturb the ease with which it works in health; that is to say, the removal of bodily disease, which in itself has no necessary connection with disobedience of God's laws, and is no more sin than health is virtue. To the physician's idea of disease, an organisation—that is to say, a complication of parts—is essential, and is diametrically opposed to the theologian's idea of sin as an affection of the immaterial soul, which has no parts. Hamlet sees this when he exclaims:

"I do not set my life at a pin's fee;
And for my soul, what can it do to that,
Being a thing immortal, as itself?"

For the removal of disease, the physician employs the forces of nature aided by abstention from its causes. Beyond such curative abstention, he asks for no repentance and he imposes no penance. Nor does he postpone his beneficent action as we have heard that the priest is instructed to do, telling his patient to come again in eight or ten days; nor when he has alleviated disease, or even removed it, does he perform any incantation or ceremonious declaration of health. There is absolutely nothing in medical practice corresponding to absolution, which is the very essence and acme of the priests' proceedings. With this profound difference between the function of the priest and that of the physician, it would, indeed, be surprising if we found that the questioning of a penitent, which is called confession, bore any real resemblance to the questioning of a patient as to the history and symptoms of disease. The first obvious difference is that the physician does not assume that all men are diseased, needing his recurring aid and imprimatur of recovery, while all men are said or known to be sinners whose peril can only be averted by periodical confession and absolution. The second is that in a vast number of instances the doctor's patient makes no confession whatever, the physician seeing, or hearing, or feeling the symptoms, and proceeding with his remedies; while without confession the penitent receives no priestly benefit and no taste of absolution. A third difference is, that the confessions of patients to their medical men are purely voluntary, and the omission of them in no way penal, whereas absolution from priestly confession is in itself an offence only to be condoned by special repentance and penance. The physician looks upon confession as a painful necessity, and avoids it to the utmost of his power; he recognises the danger which lurks in spoken thought reacting upon bodily function, his experience telling him that the surest method of avoiding many symptoms of disease is not to think of them, and that the best means of escape from the thought of them is to avoid speaking of them. Therefore, the physician will often endeavour to obtain the history of those diseases of the nervous system which most seem to justify confession from a near relative rather than from the patient himself, or if from the patient himself, and the history having once been obtained, he will discourage its repetition, and thus he will avoid incurring the mischief of that hypochondriasis of sentiment to which patients and penitents are alike liable.

"Whatever hypocrites austere talk
Of purity, and place, and innocence,
Defaming as impure what God declares
Pure, and commands to some, leaves free to all",

the physician believes sexual pleasure within rational and legal bounds to be wholesome and right, but that to think of it unseasonably, and far more to converse about it, leads to excess, debility, and disease; and, therefore, he is most chary in encouraging the confidences of his patients in this protean subject of priestly confession.

Finally, the physician restricts his attention to the present condition of his patient, and whatever inquiries he may make as to the past history of the case are directed solely to such facts as bear upon the present. The attention of the priestly confessor, on the other hand, is directed mainly to past time, when the soul of his penitent was in a sinful state, but which has already changed to a condition of repentance or he would not be at the confessional. I have little more to add, except that the aim and results of the priest's and physician's activity are as different, nay, as antagonistic, as possible. The guidance of the physician, and especially of the mental physician, is towards reticence and restfulness, and the expression of that self-examination which leads to hyperaesthesia of sentiment. The guidance of the confessor, if we still follow *The Priest in Absolution*, is towards what he calls "supernatural recollection"; and three kinds of union with the Lord, namely, 1st. Simple union; 2nd. The union of *espousals*, which is preceded by *substantial dryness*; and 3rd. The union of *consummation*, called *spiritual marriage*. In these unions there are three degrees, those of *Ecstasy*, *Ravishment*, and *Spiritual Flight*. "In the simple union, the soul's powers are suspended, but not the body's." "In

Ecstasy, the body is lost. One sees not, hears not, feels not." "In Ravishment, the soul is carried away suddenly and violently." "In Spiritual Flight, the soul seems carried out of the body and Ecstasy and Ravishment are included" (p. 319). I think that now, if not before, mental physicians will be disposed to take a lively interest in the seven hundred clergymen of our State Church who are the believers and followers of this *Priest in Absolution*.

I have only one word further to say, namely, that however the above remarks may apply to general physicians, they apply still more emphatically to us as mental physicians, seeing that the peculiarities of our speciality compel us, far more than our brethren, to inquire into the state of men's minds, and into the hidden circumstances and conditions which lead to them. The symptoms of the diseases with which we deal being far less obvious to the senses than the symptoms of other diseases, we are correspondingly compelled to occupy a position which carries with it a greater danger that we shall be compared with spiritual confessors, and which needs the greater caution that we should walk with prudence and circumspection in the well-trod paths of medical reticence, forbearance, and wisdom.

FORTY-FIFTH ANNUAL MEETING OF THE BRITISH MEDICAL ASSOCIATION.

Held in MANCHESTER, August 7th, 8th, 9th, and 10th, 1877.

THE forty-fifth annual meeting of the British Medical Association commenced on Tuesday, August 7th.

SERMON BY THE BISHOP OF MANCHESTER.

At 11 A.M. the members of the Association attended divine service at the Cathedral. The prayers were intoned by the Rev. A. C. Smith, M.A. (precentor), and the Rev. Canon Gibson read the lessons. The anthem was Mozart's "O God, when Thou appearest" (Motett, No. 1).

The sermon was preached by the Bishop of Manchester, who selected as his text the 1st Epistle of St. John, 3rd chap., 2nd verse: "It doth not yet appear what we shall be". He said this was, to use a modern phrase, the last word of revelation on a great subject that theologians had too often forgotten in their positive statements and assumptions. Our English version did not do full justice to the original Greek. It was not "it doth not yet appear" as the result of human speculation, but "it has not yet been manifested as an utterance of God to man what we shall be". Even Paul, when wading in those perilous depths, and talking of the change that awaits all, and attempting to describe the properties of the spiritual body, felt himself to be confronted with a mystery; and while satisfied that there would be a victory over the grave, and that mortality would be swallowed up of life, he wisely brought back his hearers' thoughts from dreamland to reality by bidding them simply to be "steadfast, immovable, always abounding in the work of the Lord, inasmuch as they knew that their labour was not in vain in the Lord". Nor could it be said that the great Teacher himself, when he most clearly proclaimed the doctrine of the resurrection, drew aside for more than the briefest moment the curtain in which the mystery was veiled. One of those who heard him said that the words conveyed no distinct idea to him; and an equally rational faith, while clinging to the hope full of immortality as the very anchor of the soul, which if let go life would drift helplessly amid the shoals and rocks that surrounded their course on every side, would still admit that "co-equality with the angels" and "seeing God as He is" did not belong to the class of definite ideas, but to those vaguer shapes and imaginings which defined little but suggested much, and of which even when most consciously under their influence, we could hardly say whence they came or what they were. To those who held the merely physical theory of being, who saw in matter the promise and potency of life in every form, who accounted for even the phenomena of what used to be called volition by the reflex action of a muscle or a nerve, the very existence of those imaginings, those hopes and fears, should seem to be a problem of no slight difficulty. It was possible, as Professor Tyndall had said, "that many people who hold the hypothesis of natural evolution would probably assent to the position that at the present moment all our philosophy, all our poetry, all our science, all our art, Plato, Shakspeare, Newton, are potentially in the fires of the sun". But it would seem to require a further reach of the imagination in the province of science to conceive that the fires of

the sun could have implanted, even potentially, in the human soul the hope of immortality; still more so if, as some told us to-day, it was a hope destined never to be realised. For there it was, a hope deep-seated in the heart of man, and, like every other phenomenon, it was to be accounted for, and as it was not pretended by anyone to be within the range of mathematical demonstration or physical experiment, the most reasonable hypothesis must be accepted. Everyone must admit there had been either developed or implanted in the human mind the hope of immortality, and here the mere physicist was brought to a pause; he could not explain the phenomenon consistently with his purely physical principles. It seemed to him that he ought to try to explain it away; it was, to say the least, an unexpected and awkward result of a course of material atoms, whatever the arrangement of their poles or the tendency given to their powers. And if he could neither explain it nor explain it away, he was bound upon his own principles at least to listen to the hypothesis of one who had been studying in another, but not an antagonistic, school. If this hope of an indestructible life did exist, might it not have come from God? And was not the mystery of our being solved, though not with the precision of scientific language, by the Old Book, which told us that the "Lord God formed man, and breathed into his nostrils the breath of life, and man became a living soul"? Admitting the fact of a living personal God, there need be no insuperable nor even serious difficulty in admitting the fact of revelation, whether in the narrower sense in which sometimes the idea of revelation was confined to the inspired record of the Bible, or in that broader and Pauline sense in which even to the heathen God was said to have shown his own attributes and their destiny. There appeared to be a sort of necessity laid upon thinking minds to explain this strange and inexpressible yearning for a life after death, which all recognised as among the strongest and most ineffaceable instincts of the human soul. It might be worth while to notice two of the most recent attempts to do so which had come under his own observation. The one was Mr. F. Harrison's theory, which appeared in the July number of the *Nineteenth Century* magazine, the theory of a posthumous life of influence and renown, the life of a Shakspeare, or a Cromwell, or a Savonarola, as an equivalent for immortality. The other was a view put forward with much ability and as ably answered by a writer in last week's issue of the *Spectator*, who held as an hypothesis "that some men, possibly very many men, but a large proportion, live again, but that all men do not; that the potentiality of continued existence which we call soul is not an inherent quality or attribute of the human race, but an acquired or given quality to some portion of it only". Both these views, though departing from such different points, seemed to him to be modifications of that theory of the *corps d'élite* of the human race which under the name of Calvinism had wrought such havoc in theology, and in spite of its cruel hardness had exercised so remarkable a fascination, not merely on the fanatical and unlearned, but even on higher and cultivated minds. Both were struggles, he could not but think ineffective struggles, against the dark and dreary creed of annihilation, which, whatever comfort it might bring to some powerful but strangely-tempered minds, like that of Harriet Martineau, would to most men mean the end certainly of all their fears, but also of their brightest hopes and noblest motives. The gentlemen he was now addressing had ample opportunities of observing the tenacity with which the spirit clung to that eternal life which it believed it had in Christ Jesus. It was, indeed, surprising how little modern criticism or modern scientific inquiry had done to undermine those old foundations upon which all religion in its very idea, and Christianity, as religion in its highest form, must ultimately repose. It was only one here and there who told them that the idea of a personal God was an unverifiable hypothesis; and even such recognised in the circumstances around them a stream, a tendency that made for righteousness. It was only one here and there who defrauded humanity of its brightest hopes and most sustaining motives by denying to it immortality, and even such, as if conscious of their wrong, endeavoured to find a substitute for the idea which they had destroyed, which, indeed, proved illusory, but which they seemed to feel indispensable. In conclusion, his Lordship said: "No doubt there are some sad souls—

"Mad from life's history,
Glad of death's mystery,
Swift to be hurled,
Anywhere, anywhere,
Out of the world."

In the dim gloom that shrouds all beyond the grave there is yet a streak of light, like some sudden lightning flash, illuminating the darkness with hopes full of immortality. In the silence of the chamber of death there is still a voice heard, 'He that liveth and believeth on Me shall never die.' I trust, gentlemen, representatives of a noble profession, that His spirit who, in the strong but not strained language