

the insane from physicians, may be hindered. For alienists the book contains nothing new.

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ASYLUM REPORTS, 1898-9.

*English County and Borough Asylums.*

*Berkshire.*—Dr. Murdoch writes :

As bearing on the question of heredity, the following may be cited. Two female patients, each having a family of four, were admitted suffering from a degree of excitement accompanying childbirth, but in whom the primary mental state was congenital defect. Is it to be wondered at that such an increasing tax is put upon the ratepayers for the providing of asylum accommodation when the marriage of such persons is so prevalent ?

*Birmingham (Winson Green).*—Dr. Whitcombe is of opinion, from facts such as those below, that legislation (beyond the new Inebriate Act) must soon become an urgent question.

In my report last year I stated that the proportion of drink cases during that year (1897) was the greatest that had come under my observation in one year during twenty-eight years of asylum experience, and although in that year the number reached the extraordinary proportion of 24.4 per cent. on the male, and 24.8 per cent. on the female admissions, this year I have to record an increased proportion from this cause in males of 14.5 per cent. upon the previous year, the number admitted being ninety-three, or 38.9 per cent. of the total male admissions.

*Derby Borough.*—The subjoined extract from Dr. Macphail's report gives point to a fear, which was expressed by some on the institution of training and certification of attendants, that the certificate might be found to be a valuable possession, enabling the holders to more easily obtain private nursing, to the loss of the asylum which trained them. That there is such a tendency is shown by other reports from time to time. But notwithstanding the inconvenience caused, these resignations supply the most valid argument in favour of pensions. Why, it may be asked, should valuable services be lost to the trainers when they could be retained by a proper superannuation scheme ?

There have been a great many changes among the nursing staff. Last year the changes affected the older members, and not, as is usually the case, the new-comers. No fewer than nine holders of the Medico-Psychological Nursing Certificate resigned, three nurses to be married, one attendant to take up other work, and four attendants and one nurse to engage in private nursing.

*Dorsetshire.*—Dr. Macdonald notes that the relative proportion of cases of mania to those of melancholia are 7 to 1 in males and 6 to 1 in the females admitted in 1898. The Commissioners' quinquennial tables give the proportions for all England and Wales as 48 to 23 for males and 48 to 32 for females. He finds, too, that this very high proportion of mania is not accompanied by the higher recovery rate usually attached to it, as in many cases it was accompanied by confusion and other evidences of supervening dementia. Dr. Macdonald also notes a lower admission rate.

*Glamorgan.*—This asylum draws its population from an area where strikes are not infrequent, and are severely felt. Their influence on the causation of insanity has been fully noted from time to time, not only by Dr. Pringle, but also by Dr. Yellowlees, his predecessor. The following extract is of interest :

In accordance with my experience of former strikes of colliers and ironworkers, I expected a great decrease in the male admissions of the year, but, strange to say, whilst this has not been the case—the numbers being quite up to the average of recent years—a curious and interesting change in the *causation* of the cases was observable, namely, whilst in 1897 there were 102 males admitted whose insanity was ascribed to alcoholic intemperance, the number last year was only 56, whereas cases due to *inherited* insanity increased from 61 to 71, owing probably to unusual anxiety, worry, and poverty developing the disease in those who had the least resistive power. There was also an increase amongst the males of cases due to domestic trouble and adverse circumstances, but, strange to say, no such changes as the above were found amongst the females.

*Isle of Wight.*—Dr. Harold Shaw has reason to complain heavily of the provision of those elements in everyday life which test the proper planning and building of a new asylum. The water is short and bad, the drainage has been scamped, and the electric light is unsatisfactory. All these matters are more or less preventable, and add seriously to the worry of a superintendent's life, as well as to the burden on the rate-payers. And yet it is almost impossible to bring any one to account.

*Salop.*—We note that this county is going to follow the example of Prestwich, and avail itself of Section 26 of the Lunacy Act for twenty-five male patients to be placed in the Forden Union Workhouse.

*Stafford (Burntwood).*—In order to further provide for the disposal of the asylum sewage, a Garfield coal-filter is being provided. It will be interesting to know how it works.

Dr. Spence notes with satisfaction the loyalty and cheerfulness with which the attendants (the male especially) have accepted the difficulties and discomforts brought about by the heavy building operations carried on throughout the year. These necessitated connecting up the old parts with the new at no less than twenty-five different points, but happily without any accident.

*Sunderland (Borough).*—The new teaching contained in the extract below was defended by Drs. Elkins and Middlemass at the Annual Meeting this year, as will be found in another part of the JOURNAL. It may be that our former practice is all wrong, but extensive trials in many places will be required to establish the fact.

The asylum was also visited by a number of other persons, the chief object of their interest being the night supervision and distribution of the patients. These were instituted by Dr. Elkins, and have been found to be very successful. Their main features consist in placing only quiet and well-behaved patients in single rooms. Noisy, chattering, and destructive ones sleep in supervised dormitories, and, as a result of this plan, it is found that they are much less noisy, sleep better, and that destruction of clothing and bedding is practically unknown. Wet and dirty habits are also much better corrected, and, altogether, the system is very much to be commended.

*Sussex (East).*—The county is going to leave the county borough of Brighton in possession of its old asylum at Haywards Heath, and is building for itself a large new asylum near Hailsham. This will not be

ready for some years to come, and in the meantime temporary iron buildings have been erected at Haywards Heath.

*Sussex (West).*—We have before us the first annual report of the new asylum at Chichester. It is a very full one, and Dr. Kidd has earned the thanks of all future planners and promoters of new asylums by giving a detailed account of its construction, methods of supplying light, air, heat, water, etc. The full plans supplied with the report will be of great service to those who cannot obtain them in other ways.

It is disconcerting to note that though the present accommodation is for 450 (prepared for 600), yet at the commencement of 1899 there were 412 patients belonging to the county. We hear rumours of further building beyond the first limit of 600.

We note that Dr. Kidd has instituted the statistical tables of the Association in all their strictness.

#### *Scottish District Asylums.*

*Fife and Kinross.*—In spite of the large addition to the accommodation by the hospital opened only a year or two ago, want of room is proclaiming itself, and Dr. Turnbull is calling for more beds. The admissions have risen in alarming proportion in the last few years.

*Glasgow District.*—Last year we noted the inception of the Brabazon scheme. It seems to work well.

To give some variety of employment, and to test the possibility of employing the unemployed above referred to, the Brabazon Society of ladies offered their services in the beginning of 1898, and have since been holding weekly meetings of instruction to an average of nearly fifty patients, with much success. It is not the more intelligent only that derive benefit and have pleasure in the work, but in the dullest some dormant or latent intellectual power may be awakened.

*Inverness.*—No less than 32 per cent. of the admissions were re-admissions, and these account for the great total increase of the year. Of these ten came for the fourth, three for the fifth, one for the sixth, one for the seventh, and two for the eighth time. Of the 179 admissions 15 per cent. had physical signs of tuberculosis.

Since his appointment Dr. Keay has done much in improving the asylum, and we congratulate him on the acknowledgments made by Sir John Sibbald.

It is very satisfactory to find that the male hospital promises to be not only a considerable addition to the capacity of the institution, but that it also constitutes a very important improvement. It is admirably suited to its purpose, and will enable the patients to be much more efficiently treated than has hitherto been possible. When all the improvements and additions that are either in progress, or soon to be undertaken, are completed, the asylum will be altogether changed in character from what it used to be, and it may be confidently expected that it will compare favourably with other district asylums. The alterations that have already been carried out have given a much greater appearance of comfort to the wards.

Holders of the Association certificate are allowed £2 extra wages.

*Midlothian and Peebles District.*—We regret to find that the Association's statistical tables are not in use at this asylum.

*Scottish Royal Asylums.*

*Aberdeen.*—Steps are being taken to cast off the pauper patients of Aberdeen City, it being found difficult to provide for all classes together.

*Edinburgh.*—Dr. Clouston prophesies that the increase in asylum population will continue for many years to come, though not from positive increase of insanity. For this he looks to increasing realisation of the benefit and convenience of hospitals for the insane, and also, *inter alia*, to increased intolerance in families of the inconveniences of insanity. But these have been going on for years, and one would fancy that the margin between declared and undeclared insanity attributable to such agencies had almost been absorbed by now.

In stating the fact that the death rate at Morningside, which had been 8·8 per cent. on average residence from 1880 to 1889, rose in 1890 to 13·3, and has been 11·9 on the average for the last nine years, Dr. Clouston shows that for the three years 1890–92 the general death rate for Scotland from diseases of the nervous system showed a distinct increase, which was reflected at Morningside by increased general paralysis, brain softening, etc. But Dr. Clouston cannot explain the increase persisting in his death rate since that time, influenza having also become much less fatal. Tuberculosis accounts for some of the increase, but not all. A reorganisation of the drains, etc., has been undertaken at an estimated cost of £2300.

Dr. Clouston in his report acknowledges the support he received as President of the British Medical Psychological Section from the members of the Association and others.

*Glasgow.*—Dr. Yellowlees supplies a good and probable reason for old people, especially women, finding their way into asylums.

Suitable homes for the aged who are not paupers, and yet are in narrow circumstances, would almost seem to be a want in our social system. The eagerness with which women are now entering business life and undertaking work incompatible with the care of aged relatives has perhaps helped to create this want. If so, it is an unwelcome result of their desire for independence.

Note is made of the shortcomings of the new Inebriates Act, in that it applies only to convicted criminals and not to ordinary drunkards. Dr. Yellowlees considers the chief value of the Act is that it may be the herald of wiser and fuller legislation.

*Perth.*—Dr. Urquhart refers to the dangers that are accompanying the fashionable drugs which are now so accessible to the public.

The abuse of such substances as antipyrin, which seems to have taken its place in the domestic medicine chest, to the detriment of the race, is almost as formidable as the indiscriminate and continuous unauthorised dosing with sulphonal and cocaine. Valuable as these remedies are when appropriately prescribed, each entails its own special dangers. As soon as an anodyne or a soporific comes into general use, the results are recorded in the statistics of our medical institutions. We have lately reported a death consequent on a relatively small dose of sulphonal, and apparently due to its disorganising effect on the system. This drug was placed before the public as an absolutely safe hypnotic not many years ago, and it is now used with a freedom which is perfectly appalling; yet it has not been ascertained in what cases sulphonal is eminently dangerous, or where an idiosyn-

crazy exists forbidding its administration. We have also had under treatment a patient who fell a victim to that insidious drug cocaine. Consequent on the relief experienced, he was enabled for a time to carry on an extensive business; but, while thus deadening the pain of persistent neuralgia, he was only treating a prominent symptom, without combating the underlying causes of his malady.

#### *Irish District Asylums.*

*Belfast.*—Like the other Irish reports, this contains valedictory addresses to the past Board, and advice to the newly created Committee. The Inspector in his report in most cases acknowledges the laudable way in which the defunct bodies have done their best for the asylums in face of many serious difficulties.

Dr. Graham seems to be able to get a large amount of work out of his staff and patients, a long list of heavy alterations and reconstruction being given. Nearly five sixths of the patients are got to work. The Committee and Inspectors speak warmly of his energy. The proportion of attendants now (after some increase) is 53 for 725 in the main asylum. Of the 289 admissions 6 were general paralytics, all men. In only 14 is intemperance assigned as a cause, while 5 per cent. are put down to religious excitement; the proportion in England being about 1·5 per cent.

*Cork.*—Dr. Oscar Woods thinks that there is some ground for asserting that insanity is on the increase in the district, the number of *first* admissions having sprung from 228 to 262 in the year. Hereditary influences account for 30 per cent., and intemperance for 16. Dr. Woods maintains that the asylum accommodation will be called for at the same alarming rate unless habitual drunkards are dealt with more firmly and imprudent marriages become less frequent.

For the benefit of the incoming Committee he re-asserts his claim to have the necessary new accommodation take the shape of a hospital for recent and curable cases. So many of the Irish Boards appear to have taken of late a liberal view of asylum management, that we may hope that Dr. Woods will get his way.

No general paralytic existed in the asylum at the end of the year.

*Down.*—Dr. Nolan, in saying good-bye to his old Committee on their disestablishment, hits the nail on the head.

Perhaps the secret of your success lay in the fact that you realised so well the common interests of the insane and of those upon whom a share of the burden of their maintenance was cast, having found as a result of your long experience that in asylum administration, as in other matters, efficiency is the true economy.

No doubt a good number of asylum managers everywhere think that philanthropy should be tempered by finance, and rightly so. But the two are up to a certain point not antagonistic. The Inspector also writes in his report:

They (the Committee) will hand over next year to their successors, the Asylum Committee of the County Council, an institution in excellent order, of which they may well feel proud. I hope that these successors will take as liberal and as practical an interest in the success of the asylum and the welfare of the patients as they have always shown.

There were no general paralytics at the end of the year.

*Ennis.*—The Inspector marks this asylum down for much enlargement at the hands of the new Committee, when it is taken over by them. He rightly protests against the numbers being kept down to suit the small asylum by transferring patients to workhouses where they are kept under unsuitable conditions.

On the other hand he states that very great attention is paid to the dietary and preparation of the food in the asylum. One general paralytic was admitted and died during the year, there being none at the end of the year.

*Limerick.*—No general paralytic was in the asylum at any time in the year.

In respect of the cost per patient for maintenance, which is low, the Government auditor reports :

I do not hesitate to attribute this satisfactory result to the constant and unremitting attention paid by the superintendent and those working under him to every detail connected with the financial affairs of the institution. From the records and vouchers that come under my notice it is evident that the greatest care is taken in the making of contracts; goods supplied under contract are scrutinised so as to ensure that they are equal to standard and not deficient in quantity; contractors' accounts, before being submitted for payment, are carefully checked to the minutest detail; and the superintendent is in immediate privity with every transaction bearing upon the financial administration of the asylum.

The Inspector reports that the food was good, and we find that the recovery rate is an average one.

## Part IV.—Notes and News.

### MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND.

#### GENERAL MEETING.

A GENERAL Meeting was held in the rooms of the Association, 11, Chandos Street, London, W., on Thursday, 9th November, under the presidency of Dr. J. Beveridge Spence.

Present: Drs. J. B. Spence (President), H. Hayes Newington (Treasurer), Fletcher Beach, R. Percy Smith, H. A. Benham (Registrar), G. H. Savage, Sir James Crichton-Browne, T. Clifford Allbutt, T. Seymour Tuke, C. K. Hitchcock, L. A. Weatherly, F. W. Mott, T. Outterson Wood, J. Peeke Richards, W. D. Moore, W. Julius Mickle, F. A. Elkins, James Chambers, J. G. Soutar, R. H. Cole, W. J. Seward, G. Stanley Elliott, W. Rawes, D. G. Thomson, J. W. Stirling Christie, C. Hubert Bond, Arthur N. Davis, T. Telford-Smith, W. H. B. Stoddart, Inglis Taylor, R. H. Steen, R. Langdon-Down, R. N. Paton, W. J. Donaldson, Walter Smith Kay, C. S. Morrison, A. E. Patterson, Alfred Miller, F. Sidney Gramshaw, L. R. Whitwell, W. Handfield Haslett, Peers MacLulich, Charles D. Law, H. T. Aveline, Alfred Turner, Eric France, A. H. Spicer, W. Douglas, S. R. Macphail, T. C. Johnstone, David Bower, Crochley Clapham, and Robert Jones (Hon. General Secretary).

Visitors: Sir William H. Broadbent, Bart., Drs. Henry Head, H. J. Butter, T. Hampson Simpson, A. Warren.

Apologies for non-attendance were received from Drs. A. R. Urquhart, E. W.

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