

There is something quite remarkable in the influence of the iodide of potassium in cases of this class. The drug seems to act almost as a food to the patient. It is not only that he finds under its employment that the special nervous symptoms for which it is prescribed are beneficially influenced, but he describes a condition of *bien être* as accompanying its use which makes him unwilling to give it up. I know of nothing in all therapeutics more extraordinary than the rapid effects of the iodide in improving the condition of these patients, except it may be perhaps the influence of lemon juice in scurvy.

The book may be heartily recommended as containing the latest results of scientific inquiry, and imparting a great deal of practical information in a small compass. It is written in a clear, simple, and unpretending style, and cannot fail to be very useful to the practitioner who has not the time or the opportunity to make himself acquainted with the various essays on the subject which are to be found in different journals, English and foreign.

PART III.—PSYCHOLOGICAL RETROSPECT.

1. *Public Asylum Reports for 1873.*

In noticing these reports we shall, as in former years, extract from each such matters as seem to be of more than local interest, whether in a medical, administrative, or more general point of view. We have received the reports of most of the English County Asylums, together with some others. A fashion which prevails among some Scotch asylums of terminating the official year on 1st February and other unusual dates, and which we should be glad to see amended, renders the reports of these asylums late in the dates of their appearance.

There are still great differences amongst these reports, not only in the amount of information given as to the state of the several asylums, and the results of the year's operations, and even in the subjects on which information is given; but there is also much variety in the form in which the information is given, so as often to render any comparison in particular directions quite illusory.

Amongst those reports already received, which may be taken as fairly representing the whole, there are hardly two that are comparable throughout, though the Middlesex and the Lancashire reports form two small groups which are almost so.

Nevertheless, on each particular item a large majority are in agreement. Thus, nearly all give the Report of the Commissioners in Lunacy.

A majority give the tables of the Medico-Psychological Association, yet eight only give five or six of them, four omit the tenth table, and five others alter their numbering; upwards of twenty giving them as intended by the Association. In the financial portion the form in which the accounts are presented are still more various, though, as a rule, all essential information is given; in a few, however, the accounts given are very meagre.

According to the Commissioners' reports the condition and management of these asylums is more or less satisfactory, and their recommendations, as a rule, refer to matters of small detail. The only exceptions of any moment that we notice are in the case of the Colney Hatch Asylum, in reference to which the Visiting Commissioners say:—

While according every praise to the zeal and industry of the superintendence, exercised under difficulties of an exceptional character, our visit on this occasion confirms us in a conviction we have long entertained that an asylum of this magnitude, and occupied by the description of patients now here, is quite beyond satisfactory management.

The following extracts from the *Cambridge Asylum 16th Annual Report*, the greater part of a somewhat voluminous pamphlet is taken up by details of the various negotiations which have taken place between the committee, the county of Cambridge, the borough of Cambridge, and the Isle of Ely, the Commissioners in Lunacy, the Secretary of State, together with architect, engineers, and chemists, called in for advice, will give some idea of the dead lock to which things had come, and the resulting condition of the asylum. The Visiting Commissioners say:—

The patients, however, are not properly cared for in many important points; the day rooms, intended and sufficient only for 90 men, are crowded by 180, and 154 women are daily collected where but 108 should be. The baths and closets are also quite inadequate in number for the patients, as many as 60 using one very small bath room with a single bath, and one closet with a single seat in several wards; and dressing, after ablutions, in the adjoining corridors. As far back as March, 1872, the Committee practically admitted, by submission of plans for the enlargement of the asylum, the absolute necessity of such enlargement, and yet nothing has been done by them in that direction, nor, so far as we can learn, is anything now contemplated. The serious defects just referred to affect health and decency, and have been previously brought by members of our Board to the notice of the visitors; but again we think it right to do so.

The Committee say:—

Your Committee regret they cannot report much progress in carrying out the several important works which during the past three years have engaged their serious attention, viz., the provision of more cubic space in the day rooms of the asylum, and the removal and renewal of the asylum boilers.

Your Committee have endeavoured, by the foregoing detailed account, to show that they have done all they could to carry out the several works required by the Commissioners in Lunacy, and regret to state that they have failed to make more progress therein, in consequence of the necessity of their having to obtain the unanimous consent of the three bodies, of County, Isle, and Borough, besides the sanction of the Commissioners in Lunacy in London, under the provisions of the Lunacy Act, 1853.

The Secretary of State now requests that immediate steps may be taken to carry out the necessary works.

We read the following remarks of the Commissioners with satisfaction, though with some pain that there should be necessity for them:—

Although Dr. Bacon obtains a substitute from Cambridge, when he is himself away upon a holiday, he must at times necessarily be absent for some hours, and then the asylum is left without any medical assistance; hitherto fortunately there has been no serious casualty to patients on these occasions, but we cannot too strongly repeat our opinion that an asylum of this magnitude ought never even for the shortest period to be so left. Even if an Assistant Medical Officer be not considered by the visitors to be necessary in order to relieve Dr. Bacon of part of his present labours, he is required for emergency or accident in Dr. Bacon's temporary absence.

The working of the asylum during the year seems to have been much more satisfactory than might have been expected, and has, no doubt, been so at the cost of much additional exertion and anxiety on the part of Dr. Bacon.

CORNWALL.—*54th Annual Report.*—The portion we had marked for quotation from this report refers to the greatly diminished use of seclusion. We will revert to this in connection with references to the same subject in other reports.

DEVON.—*28th Annual Report.*—A further extension for female patients, a sanatorium, and a chapel are about to be built. The Committee report:—

The 28 acres of land which were purchased in October last will prove a most valuable addition to the asylum property they have now in hand, and the whole farm, together, about 101 acres, is worked under the management of the bailiff, entirely by the patients, thus affording them healthy recreation, and, at the same time, utilizing their labour for the benefit of the County.

On referring to the farm account we see no wages charged but those of bailiff, gardener, and farm boy. Ward attendants probably also work on the farm with the patients, otherwise a larger proportion than usual must be at work alone on parole. We do not find anything in this report to show whether this be so, or what may be the connection this has with the cottage accommodation which, if we remember rightly, is a feature of this asylum. We gather from the various reports that in most asylums a much freer use is made than formerly of the power of first sending out on trial patients whom it is proposed to discharge. To give an allowance also whilst on trial seems to be the rule at Devon.

Dr. Saunders says—

A large proportion of the patients discharged have been sent out on trial with an allowance of seven shillings a week for the first month they are absent from the asylum. The statute requires (79 sec., 16 and 17 Vict., cap. 97) that a medical certificate of the patient's state of mind should be sent at the expiration of this probationary period, and a formal request is in each case sent to the officers of the union to which the patient is chargeable, that a report may be forwarded to the visitors. Except in the case of one union, the request is

seldom attended to. It is scarcely necessary to point out the importance of a medical report as to the patient's mental condition—(1) Whether he has sufficiently recovered to obtain his final discharge, or (2) whether it is desirable to renew his leave on trial for another month? or (3) if necessary he should be sent back to the asylum, in which case no fresh orders or medical certificates are requisite.

The following items are from Dr. Saunders' report :—

The general health of the patients has been good, except in the autumn, when diarrhoea of a severe type prevailed in the wards. There was also a single case of typhoid fever. The diet had been of the usual good quality, and there was no reason to suspect any contamination of the drinking water, but after a careful examination of the water closet system and sewers, it was found that some of the drains were defective, and sewer gas vitiated the air both within and outside the buildings.

Your Superintendent respectfully urges upon the Committee the necessity of providing a more capacious reservoir for combined service and storage purposes on the highest part of the asylum grounds, which should contain a week's or ten days' supply.

The new bath rooms have been completed, and are in daily use. The supply of hot water is ample, and the water is now changed for every patient, instead of three patients bathing in the same water as was formerly necessary.

BUCKS.—*21st Annual Report.*—A somewhat unusual case of suicide is thus noticed by Mr. Humphry :—

He had been at work in the garden with a party of patients and two attendants about five minutes before he was found dead. Having been called to lunch, he slipped round the corner of the stable, and pushing off a heavy stone which covered a small underground tank used as a receptacle for drainage from the pigsties, he precipitated himself head first, and having drawn in one leg, he was so fixed that he had to be turned before he could be extricated, and died immediately on being got out. The subject was fully reported to you, and also inquired into by the Commissioners in Lunacy, and at the inquest a verdict was given, "That deceased destroyed himself whilst in an unsound state of mind."

LEICESTER BOROUGH.—*4th Annual Report.*

The Committee feel that their thanks are due to the ladies and gentlemen who have in various ways been the means of affording Musical and other Entertainments to the patients.

We find indications in some reports, especially those of the larger Asylums, that the facts, both for the clinical history and statistical record of the cases, are taken with but little inquiry from the "statement" of the Relieving Officer. In this Asylum Dr. Finch tells us :—

Great pains have been taken to obtain precise information as to the previous history of each newly-admitted patient, with a view to ascertain the cause of insanity. Of the 118 patients admitted during the past year, it was positively ascertained that 48 had an hereditary tendency to the disease, and in 16 cases the unmistakable exciting cause was intemperance. The cases in which the two causes were combined are placed in the hereditary class.

LEICESTER AND RUTLAND.—*25th Annual Report.*—There is in connection with this Asylum a charity, whose patients are now accommodated in a separate part of the building, and are regarded as private patients. This separation has been more fully carried out, but

we do not gather that any other difference in treatment is instituted between the two classes.

Mr. Buck places in even stronger terms than we have been used to see the disadvantage of a stiff clay as a site for an Asylum.

The Asylum has been remarkably free from epidemic disease, and the patients have enjoyed a good average standard of general health throughout the year. I have never known them so little affected by what are considered the special diseases of different seasons. A very moderate rainfall and an equable temperature may account for this, for on a stiff clay such as underlies the Asylum, dysenteric and diarrhoeal disorders can scarcely ever be said to be entirely absent in rainy seasons.

He thanks various visitors who have assisted in the associated amusements of the patients, and adds :—

But whether privately or publicly made, I cannot do otherwise than express my opinion that the patients in a large Asylum are, generally speaking, benefitted by the visits of all who come with proper credentials, and I wish such visits were more frequently made.

He expresses an intention of shortly advising the erection of a Turkish Bath.

WILTS.—23rd Annual Report.—The loss sustained by this Asylum, as well as by our specialty, and by science, in the death of Dr. Thurnam, is noted by the Committee.

Your committee have unfortunately to deplore the lamentably sudden death of Dr. Thurnam, who has filled the office of Medical Superintendent ever since the establishment of the Asylum, now more than twenty-two years ago ; and your Committee are unwilling to present this, their Annual Report, without recording their appreciation of the medical skill and administrative abilities which the deceased gentleman brought to bear upon his work in connection with the Asylum. Your Committee, with a view of securing a good selection of eligible candidates for the office, rendered vacant by Dr. Thurnam's death, gave due publicity by advertisement to the terms of the appointment. The publicity thus given led to applications being received from no less than twenty-seven gentlemen, as candidates for the office of Medical Superintendent.

Dr. Thurnam has been succeeded by Dr. J. Wilkie Burman, from whose report the following will be read with a melancholy pleasure :—

Dr. Thurnam, who needs no eulogium from me, but as to whose devotion to the welfare of the patients and well-being of the Asylum I may state that I am, day by day, receiving continued testimony from the officers, servants, and inmates of the Asylum, amongst whom the late Medical Superintendent seems to have been held in great and universal esteem.

STIRLING.—4th Annual Report.—We note here an endeavour is made to keep down the number of Asylum inmates, by a free discharge of unrecovered patients. Sir James Coxe notes that :—

The decrease in the number of patients arises principally from the persistent efforts of the Medical Superintendent, in requiring the removal of those who, although still insane, and thus in a sense qualified to be inmates of an asylum, yet do not stand in need of any special appliances for their proper care and treatment. Of the patients discharged, 29 had recovered, a proportion equivalent

to 50 per cent. on the admissions. Of the non-recovered cases, seven were removed to other establishments, 22 were placed in private dwellings, and one escaped. Thus more than two-fifths of the patients discharged were returned in a state of mental deficiency to the general population, and it is satisfactory that a demand for re-admission has been experienced in only a very small proportion of these cases. Indeed, demands for re-admission occur far more frequently in the cases of patients who have been discharged recovered, but who have suffered a relapse; and this fact shows how unfounded are the fears still very generally entertained against the discharge of unrecovered patients, lest they should prove dangerous to themselves or the public.

The following from Dr. Skae's report bears on the same subject :—

Although the number of annual admissions in this Asylum is larger in proportion to its accommodation than that of any other Asylum whose annual reports I see, this is the first occasion since its opening in which there has been an increase of the number resident at the end of the year. This increase in the number of inmates has been owing to two things: the greater number of admissions, and the smaller number of removals. For an Asylum originally meant to accommodate 200 patients, 121 admissions in a year is really a very large proportion indeed, and unless there were something peculiarly favourable in the nature of the cases, it could hardly be expected that, at least a temporary increase, could be avoided.

The Visiting Commissioner also notes improvements in the dietary, which mainly consist in *ad libitum* supplies of bread and porridge, in a large addition of the vegetables in the broth, and in increased quantities of milk. We have here stated more plainly than in any other report the one point in a dietary without which it cannot be satisfactory, viz., that some article—bread, potatoes, porridge, no matter what, so long as it is a good staple article—should be issued *ad libitum*. Whatever the quantity nominally in the diet table, it should in one such article exceed the consumption. No patient can then be half fed; he may not have as much meat, say, or butter as he would like, but he has a sufficiency of, say, bread. Such an arrangement does not meet the case of the sick, but for a majority of asylum patients it is the essential point in a dietary. We believe in most asylums the dietary does fulfil this requirement. Where it does not, we may be sure phthisis and diseases of deficient alimentation will be more frequent. Dr. Skae's experience of the effect of the change of dietary fully bears out this opinion.

Both the mortality and the general health of the establishment make this year contrast favourably with the preceding one. Last year there were eight deaths entirely due to consumption, and two partly so. This year there have been only two deaths due to consumption. It would not be correct to ascribe this highly satisfactory result to any one cause. Very likely it is owing to a considerable extent to the alterations which were made in accordance with the suggestions made by the Visiting Commissioners last year, more especially to the greatly increased use of excellent milk and vegetables supplied by the farm and garden, and to the greater amount of open air exercise taken by the women. But I think it must also be largely due to the better physical condition of the patients on admission as compared with the preceding year.

The District Lunacy Board state—

For some time past the Commissioners in their reports have strongly recommended that a greenhouse should be erected to afford a supply of flowers for the

decoration of the asylum, and latterly they had become so urgent upon the subject that the Board found it impossible longer to withstand their solicitations, and a small greenhouse has been accordingly erected at a cost of £85 2s. 5d.

NORWICH.—Dr. Hills expresses a hope that ere long it will be left to the discretion of the Superintendent to make a *post-mortem* examination in every case in which he deems it desirable. We will only add a hope that that desire may extend to every case, and that other and less professional duties may not, as we fear is often the case at present, render the making of a *post-mortem* examination an additional burden too heavy to be borne.

Our female wards were for several months so crowded that in July it was found necessary to send fifteen of the chronic cases to Northampton Asylum whilst our new ward was being built for their reception; the building operations were commenced in July, and have progressed almost uninterruptedly, owing to the very favourable state of the weather. Whilst on this subject, I may remark that our female exceed our male patients by 100—an excess only equalled by the Devon Asylum—and far above that normal preponderance of the female element common to asylums.

The proportion of males to females appears to be as two to three; at Devon it is as three to five.

In the matter of therapeutics, I may mention our trial of the *veratrum viride* (an antiphlogistic much employed in America) in cases of acute and chronic mania; the results proved it to be of great efficacy, especially in the latter disease, in lowering the pulse and temperature, without producing any untoward or unpleasant symptoms. Faradization was employed in some cases of dementia with favourable results.*

COLNEY HATCH.—*23rd Annual Report.*—The Committee report an uneventful year. The following is perhaps worth notice:—

In consequence of the improvements introduced in the laundry machinery, the Committee have been enabled to dispense with the services of ten paid laundry women. In addition to this, the Committee have every reason to believe that the linen will be more effectually washed, while the expenditure in the laundry department, from the adoption of new machinery and the decrease of staff, must in future years be largely reduced.

The matron, Miss Builder, resigns after twenty years' service on a pension of £200 per annum.

Australian meat seems now to be a regular item of diet in at least a majority of asylums. The following from the Commissioner's report is the only instance we have noted of any serious complaint being made against it:—

The complaints as to the diet were indeed numerous in both divisions, especially in reference to the Australian meat, which is now extensively used, and to the fish dinner, which for some short time has been given once in the week. Although the fish is simply boiled, and without any kind of sauce, it does not appear in itself to be disliked by the patients; but the complaints bore upon the insufficiency of its cleaning, and to the inadequate quantity.

The Chaplain's report is, though rather lengthy, a pleasing docu-

* A Clinical Note on this subject by Dr. Hills will appear in our next Number.

ment; it is throughout a record of work done, and is free from empty platitudes.

The medical tables are confined to the ten of the Association, which are accurately given; we also find the financial tables in a sufficiently full and comparable form. It is, perhaps, characteristic that these take precedence of the medical reports and tables.

HANWELL.—*29th Annual Report.*—This report is in many respects identical with the last. The following remarks from the report of the Committee are undoubtedly true:—

Parochial Authorities are often blamed for not sending patients to asylums in an earlier stage of the attack, but the cause rests mainly with the families of the patients, and much allowance should be made for this natural reluctance. Admission to a lunatic asylum is frequently the break up of a household, and the pauperising of a family; and in many cases the early stages of mental disorder are not detected as such, and no curative measures are sought for until its effects are too evident to be mistaken, but too confirmed to be remedied.

This only shows, however, that there is all the greater necessity for a proper vigilance on the part of the parochial authorities. Whilst the first duty of an asylum is unquestionably the treatment of curable cases with a view to recovery, it is notorious that all sorts of impediments are allowed to delay the admission of these, whilst large numbers of incurables are crowded in to overflowing.

The following, from Dr. Williams' report at Sussex, refers to this matter:—

Reviewing the admissions, and noting the fact that by far the greater majority were in a chronic condition as to their mental disease, it cannot but strike an impartial observer as a subject for much regret that when persons become acutely insane they are not at once sent to the asylum. In some of the Unions of this county the insane are often taken to the workhouses prior to being taken to the asylum. Thereby much valuable time is lost. All authorities on lunacy are agreed, and their belief is borne out by ample statistics, that if acute insanity is to be cured it must be placed under treatment at once. Every hour is of the utmost importance. The Medical Superintendent ventures urgently to press this question on the attention of Boards of Guardians as being worthy of their earnest consideration, both from a humanitarian and a financially economical point of view.

It should not, however, be forgotten, as we fear it sometimes is, that a certain proportion of recent cases are incurable even in an asylum; that out of the asylum a certain proportion of recent cases recover; and that the incurability of long standing cases is due not only to their having, by improper treatment, been rendered incurable, but by the curable cases having been weeded out of them in consequence of their having recovered. And we think an analysis of the chronic cases in any County Asylum would show a larger number that were deemed curable on admission than of those of whom it could reasonably have been said that had they been sent earlier they would have recovered, and that there had been no other difficulty as to their being sent in time than an unwillingness of the proper authorities to send them.

We are, however, so impressed with the evil inflicted in a considerable number of cases by delay, by retaining them under the influence that produced the insanity, by bad treatment and ill-usage, that we seldom feel inclined to be critical, however strongly we find the matter put.

In view of the unfavourable character of the patients, it cannot be expected that the cures should be otherwise than very limited, amounting to 6·84 per cent. on the male side, and 6·50 per cent. on the female side.

If any proof were wanting of the unsoundness of basing on the admissions any calculation of the percentage of recoveries, it would be found in the fact that they have just before told us that the percentage of curable cases in the asylum is only 5 among the males, and 6 among the females, less than the actual recoveries for the year, showing, as every one knows, that the recoveries come from the current admissions—from the fluctuating, not the permanent population. At the same time we must grant that probably no absolute conclusion can be drawn as to the therapeutic effectiveness and sanitary state of an asylum from any mere statement of the percentage of recoveries, however calculated, whether on admissions or otherwise. The different percentages given by different asylums often point rather to the different character of the admissions than to a difference in the result of treatment. The differences resulting from more successful treatment are no doubt an important element, and, therefore appreciable in the great difference of the rate of recovery; though in all cases this is partly due to a greater or less proportion of curable cases among the admissions.

A beginning is being made to use the vast mass of material here existing for clinical instruction. We should like to see a substantial addition to the medical staff, both here and at Colney Hatch, with a view to clinical research and instruction. The present staff can barely suffice for ordinary routine duties. These asylums ought, with all the advantages incident to their proximity to the metropolis, to lead the van in all matters connected, not simply with the treatment of insanity, but with the physiology and pathology of the nervous system. We desire not to be misunderstood, we mean no reproach to the present medical staff—our surprise rather is that they do not break down under their present responsibilities; we have no wish to impose any more on them. But we do think that the staff ought to be increased to undertake the further duties we have indicated.

The deputy matron has resigned on a superannuation allowance of two-thirds of her salary, after 21 years' service. From the following remarks we think the Committee appear to view the question of superannuation in a manner at once just and business-like:—

The Court have been called upon during the past year to grant several pensions to persons retiring from the asylum service, and the Committee are aware that a heavy expenditure is now annually incurred in the payment of these grants, they think it right here to state that for some time to come the application for

retiring allowances can be but little diminished ; when, however, it is borne in mind that this Institution has been in existence for a period of upwards of 42 years, and that there are still many persons in the service who joined shortly after it was opened, the Committee are impressed with the belief that this reward for long and faithful service, and provision for age and infirmity, will continue to be deemed not only well deserved, but will operate as an inducement to attract deserving persons to the service.

The following extract is from the Report of the Commissioners in Lunacy :—

We were present at dinner time in several wards. The food appeared sufficient in quantity, but the beef was somewhat hard, and the plates were cold ; the occasional fish dinners appear to be appreciated. We recommend that in each ward should be scales for weighing the meat sent up to them ; this is the practice in other asylums, and enables the complaint of any patient on the subject of quantity of food to be readily inquired into.

It is not quite clear whether the Commissioners mean each individual ration to be weighed, though we are aware that this has been, and perhaps still is, done in some asylums. We hope this is not now a frequent practice ; if meat is to be served and eaten whilst still warm and palatable, it must be rapidly carved, and in rapid carving, portions must vary, more or less, in weight, but the smaller portion received one day will be made up by a larger received another. We believe the asylums are very few where the dietary is so very nicely reduced to the lowest point that this give-and-take from one day to another would be injurious.

We have selected various statements concerning seclusion from different reports in order to present them together, but the following statement by Dr. Rayner, comes more appropriately here :—

Various causes have combined to render it possible thus to limit the use of seclusion. One of these is the practice of carefully investigating the origin of every case of excitement, which can only arise from two causes—an access of disease, or from some fault in the surroundings ; the latter can usually be rectified by a little care, and the former by appropriate medical treatment. A second cause is the increased tranquillity of the patients from the extension of employment. A third cause, I believe, is the very limited use during the past year of drugs given simply to allay excitement. I am of opinion that nothing can be more injurious to the health of the brain than the continued use of drugs which act directly on it, and disturb its nutrition. The health of the one organ is best restored by improving the health of the whole body. A fourth cause, and, though last, by no means least, is the beneficial and tranquillizing effect exerted on the patients by the liberal efforts that have been made to render the surroundings of the insane in this asylum more home-like, and of more individual interest. To illustrate this, I would mention that the recreation ground in which the whole of the excited and violent male patients take exercise (formerly a bare gravelled court), during this year has been terraced, and paved with asphalt, the slopes being turfed and planted with shrubs ; in addition a large sunshade, three fives' courts, and a double skittle alley have been provided.

The improvement in the demeanour of the patients on re-occupying this court after the alterations was very marked, and attracted the comment of all who were familiar with it. This is still further corroborated by the great diminution in the destruction of clothing, furniture, &c., as reported to me by the store-keeper.

WANDSWORTH, SURREY.—*Report for 1873.*—The resignation of the Clerk and Steward has enabled the Committee to abolish the dual system of government which still exists in several asylums, the Steward having independent authority in several departments. The Medical Superintendent is now placed in full power in all departments, and already the Committee report that various advantages have accrued.

We have made during the past year, as we reported to the Court at the last Midsummer Quarter Sessions, a very important change in the staff of the asylum, by relieving Mr. Bridgland, at his own request, after 31 years' service, of the onerous duties of Steward and Clerk to the Asylum. We need hardly repeat that it was with the greatest reluctance that we brought ourselves to acknowledge the necessity of any steps being taken to sever our connection with so valuable and experienced an officer, but we felt that Mr. Bridgland had fairly earned his rest, and that it was desirable to take advantage of his retirement, to substitute for the dual administration of the asylum the control of one responsible head. Up to that time, whilst the Medical Superintendent had had under his charge the patients and the attendants, the Steward had been supreme over the farm, the garden, and all the servants in as well as out of the asylum; and whilst the latter had been also responsible to the visitors for the purchase of all stores, the dispensing of them, or the greater part of them, necessarily rested with the former—arrangements which obviously tended to confusion and extravagance. As far as the short experience we have yet had enables us to judge, the change is likely to be a great improvement. The main administration having been brought under the sole charge of Dr. Biggs, he is able to exercise far greater supervision than hitherto, and to effect very many economies to which the old system was entirely antagonistic.

A building foreman was engaged, and commenced duty in February, taking the place of the bricklayer, who was superannuated on £40 a year.

A female attendant, who had been 31 years in the service, also retired with a pension of £40.

BROOKWOOD, SURREY.—*7th Annual Report.*—Dr. Brushfield reports a case of suicide, which is instructive, as showing how, under favouring opportunity, a patient who is deemed perfectly harmless to himself or others may make a most determined attempt on his life. This is the only suicide that has yet occurred at Brookwood, although 104 out of 166 admissions last year were suicidal.

A male, aged 61, admitted in March last, as a quiet, harmless, and non-suicidal patient. For some weeks he was employed in my own garden, under one of the out-door attendants, and neither directly nor indirectly had he previously evinced the slightest propensity to do himself any harm. On the evening of September 19th, the attendant neglected to take him to the ward as usual, upon which he first attempted self-destruction by stabbing himself with some blunt instrument in the fore-arm and neck, and then went down to the canal and deliberately drowned himself. Verdict, "Suicide whilst in a state of unsound mind." The matter was thoroughly investigated by the Committee of Visitors, and a report was sent to the Commissioners in Lunacy. The attendant was discharged.

Additional buildings on a large scale are being constructed.

The plans for the erection of buildings to accommodate 400 additional patients having been sanctioned by the Court of Quarter Sessions, and subsequently by the Commissioners in Lunacy, it became necessary to alter the direction of the

main road through the asylum estate, as well as the road to the north lodge, measuring altogether about the third of a mile, before the contractor for the new works took possession of them.

The new recreation hall was brought into use before the close of the year, and, as far as can be yet ascertained, appears to be well adapted for its destined purpose. Its acoustic properties are remarkably good. The furniture and fittings, all of which are of home manufacture, are being proceeded with as rapidly as possible.

The effect of the different sort of accommodation provided at Caterham and Leavesden on the state of these last five Asylums is alluded to in these reports just sufficiently to make us wish we had a more full and instructive account of it. At Brookwood, a change in the character of the cases resident is noted sufficient to make a provision of a further number of single rooms necessary.

Concerning Colney Hatch the Visiting Commissioners say :—

The difficulties incident to the successful working of this now overgrown asylum have been much increased by the removal of all the patients of a quiet and well-conducted class to the Leavesden Asylum, and the admission of others from the various licensed houses and other places, the majority of whom are violent, noisy, or of dirty habits.

The Committee at Hanwell say :—

The necessity for this addition has arisen from circumstances over which they have no control, but results from the transfer to the Metropolitan Asylums at Leavesden and Caterham, of a large number of chronic patients of comparatively tranquil habits, and who have been replaced by others of a most unfavourable description from licensed houses and workhouses, including many epileptic and excited patients, a class requiring special care and classification. It is obvious that it is not only undesirable, but dangerous, to congregate many of such patients in dormitories, and when only a few are so accommodated the quiet patients are disturbed and alarmed by those outbreaks. On the female side of the asylum, containing above 1,100, there are only 181 separate sleeping rooms ; and on the male side, containing upwards of 700 patients, only 177.

In Dr. Bigg's report we read that :—

Last year the total number treated was 1,182, and the mean resident number was 954. The reduction this year was due to the necessity for thoroughly cleaning and painting some of the large dormitories, and also in consequence of the crowded and dangerous condition of the male division, alluded to in my last report. With your sanction, I have for some time been compelled to decline the admission of violent patients, known to require single rooms at night. The regular removal of quiet, harmless, demented people, as vacancies occur in Metropolitan District Asylums, must have this result until new buildings are erected suited to patients of a worse type.

Dr. Rayner would almost lead us to suppose that at Hanwell the condition of things was such that a gaol was for some patients a better place than the asylum, simply because a sufficiency of single rooms was to be had in the former place.

About 1 in 5 of the whole number admitted were suffering from general paralysis. One of the patients suffering from this malady had been in prison for some months, yet, notwithstanding this, was in good bodily condition on his admission here. I think that one reason that his bodily health remained so good was the fact that during the whole of his imprisonment he had the advan-

tags of sleeping in a single room, thereby obtaining the quietude at night which is of such vital importance in this and many other varieties of insanity. Unfortunately, owing to the increasing number of such cases in this asylum, and the small proportion of single rooms, it is becoming impossible to insure this condition of tranquillity at night.

Dr. Richards says :—

Some few years back we were pressed for this sort of accommodation, but since then, in consequence of the Caterham and Leavesden Asylums for Imbecile Patients having been opened, and the Hampstead Hospital having been converted into an asylum for a similar class of patients, we have had removed to these institutions 138 quiet, harmless, and chronic lunatics, who used to sleep in associated dormitories. These have been replaced for the most part by patients of a more troublesome, turbulent, and violent class, who for their own welfare and for the safety of the other patients, ought to sleep in single rooms, but for the want of the requisite accommodation this cannot be done.

The Committee at Wandsworth say :—

It is lamentable to find that in spite of the greater facilities afforded for attention to recent cases by the erection of the large asylums at Caterham and Leavesden, and in spite of the largely increased number of cures undoubtedly effected thereby, the number of lunatics in the county is not only greater than ever, but the increase (238) this last year has been greater than ever known before.

It is obvious, however, that from the number of patients sent to licensed houses and still retained in workhouses that the accommodation in Middlesex and Surrey has never yet exceeded, or even by a good deal reached the demand, so that any effect in diminution of the numbers of the insane from their being properly lodged cannot yet reasonably be expected.

The increase due to increase of population, and to the increased vitality given to the insane by the modern arrangements for their care, goes on unchecked.

It appears to be very doubtful whether these district asylums can be regarded as in any way successful financially.

Dr. Brushfield says :—

The effects of removal to the Metropolitan District Asylums of a large number of quiet and harmless cases I alluded to in a former report (5th), and the year's experience tends to corroborate the opinion then expressed; it is certain that there is a relatively greater number of "bad" cases now in the asylum, and that the expense of maintaining them is increased.

The cost of maintenance at Caterham is 8s. 9·35d. per week; at Colney Hatch it is 9s. 8d. We think that the difference (11d.) would hardly suffice to pay for the increased cost that is, or ought to be, incurred at the county asylum for a larger proportion of single rooms, a larger amount of medical and other attendance, extra diet, &c., due to the much greater concentration of "bad" cases.

CITY OF LONDON.—8th Annual Report.—We do not see in this report any reference to the district asylums. The condition of this asylum, gathered from the report, contrasts most favourably with the

Middlesex asylums. In one point only do we see reason for unfavourable comparison; that is in the cost, which we do not find given in the report, and which we may be wrong in calculating at over 14s. This is, however, due principally to the small size of the asylum, and partly also to the staff being sufficient in number, and well paid. The recovery rate is much the same as in the other Metropolitan asylums, whilst the death rate has always been markedly less, in no year having reached 9 per cent.

The high cost will probably be lowered when an addition to the accommodation is made.

We mention the differences between this asylum and the others as exemplifying, rather than as going any way to prove, the opinion that several small asylums would have been a much more desirable provision for the insane poor of London than the further large asylum that is being provided.

The health of the patients during the year has been very satisfactory but 17 out of a mean average of 285 having died, some of them at an advanced age. The asylum during the past year has not only been full, but has on many occasions had one or two patients in excess of the number for whom proper accommodation could be afforded, and admission has, in consequence, frequently been refused to patients, thereby necessitating their being received into private asylums, at an increased expense.

The discharged amount to but 19—9 males and 10 females—of whom only 3 males and 6 females were recovered, 3 males relieved; and 3 males and 4 females not improved were removed to other asylums, having been made chargeable to parishes beyond the City. It is a matter of regret that the percentage of recoveries, only 23·68, should be so low; but this result must be attributable to the paucity of recent admissions and the unsatisfactory nature of the cases admitted, in many of which insanity had existed for a lengthened period, while in others the age of the patients precluded all hopes of recovery being effected.

The deaths have amounted to 17—9 male, 8 female, against 6 male and 7 female in the previous year, when it was remarked that the percentage upon the numbers resident was lower than it had ever been. The number of deaths this year, though in excess of that of the previous one—the percentage being 5·96 against 4·57—is still lower than the average in this and other asylums, and it is a circumstance worthy of remark that no death has now occurred for nearly four months. The cause of death in every instance has been natural decay, and no inquest has been held.

OXFORD.—*Report for 1873.*—Dr. Sankey's lamentation over the grounds of the asylum being now properly laid out, may bring some comfort to those superintendents who find a wilderness about their asylums that they almost despair of ever getting into shape.

The removal of earth, in levelling and regulating the original grounds of the asylum, has ceased, and a great want is felt of work of that simple and healthy kind, at which many patients have been constantly employed with so much benefit to themselves, since the first opening of the asylum. The Committee, however, fully recognising the advantages of such employment, hope shortly to purchase 7½ acres of land on the south-east side of the asylum, which will require some slight alteration of level to enable all the sewage from the female side and foul laundry to be used upon it. This is the more necessary, as it is found from experience that there is such a thing as over-saturation or sickening of soil, no matter how light. And for potatoes (our chief crop), great care is taken to avoid this supersaturation.

CARMARTHEN.—*Ninth Annual Report.*—Dr. Hearder complains of patients being sent to the asylum under the charge of the police. We have no hesitation in adding all the weight we can to his condemnation of the practice. He says—

The custom of sending patients to an asylum under the escort of the police is open to much reprobation. Nine cases were so conveyed here during 1873. There always exists amongst the poorer class a great unwillingness to allow their afflicted friends to be taken to a lunatic asylum. The fact of having a relative thus under supervision is a reproach in the eyes of the unreasoning multitude, which must be intensified by the sufferer being so treated as a criminal; treatment which would suffice even to create such a belief, did it not already exist. No sound argument can be urged in favour of such a practice.

The Chaplain directs his attention to the “dreary state” of his chapel. We hope the committee will enable him to give a more cheerful account of it next year.

DENBIGH.—*25th Annual Report.*—The Committee make the same complaint that Dr. Hearder does at Carmarthen.

All patients should be accompanied by the Relieving Officer of the district, instead of, as now frequently occurs, a police officer, who in any case of informality is not in a position to afford assistance. This is rendered the more necessary, as it is of great importance that the previous history of the patient should be ascertained, and the relieving officers are those best calculated to give it.

We suppose the police escort is a Welsh habit.

The Committee regret to report that Dr. Jones, Medical Superintendent, has been suffering from continued and severe indisposition. Drs. Turnour and Hughes, who were called in, recommended that he should have six months leave of absence, Dr. Hughes having undertaken to visit the Institution three days in every week, and also to attend at other times whenever required. The Committee, taking all circumstances into consideration, have acceded to the recommendation of the medical gentlemen. A full statement of the case was forwarded to the Commissioners in Lunacy.

CARLISLE.—*12th Annual Report.*

The management of the asylum by Dr. Campbell, who was appointed Medical Superintendent on the removal of Dr. Clouston to the Royal Asylum, Edinburgh, in June last, continues to afford every satisfaction to the Committee. They are glad also to be able to report favourably of the efficiency of the new Assistant Medical Superintendent, and the various other officers and servants connected with the asylum.

The Visiting Commissioners inform us that no difficulty is found here in making *post-mortem* examinations in all cases, as a rule.

In these, as indeed in all cases of deaths in this asylum, *post mortem* examinations were made. The friends of the deceased patient are always communicated with, and informed of the intention to make this examination, but in no instance has any objection been raised.

The means of personal washing are provided in most of the associated dormitories, but we have ascertained that these are not used, the patients going to the lavatories for this purpose. These are, however, by themselves insufficient, especially in some of the men's wards, and we trust that the washstands in the bed-

rooms will in future also be used, at least by the patients of the more orderly class, who in this, as in other asylums, will doubtless appreciate the comfort of such an arrangement.

It is the constant tendency of attendants and of those patients who assist them, and take a pride in the neatness of the rooms and dormitories, to endeavour to keep things in show condition, and for this purpose to prevent their being applied to their ordinary and proper uses. We should like to know in how many asylums a clean and neat piece of carpet beside each bed is kept so by being carefully folded up and put away at night, the very time when by theory it is wanted. We hope there are few wherein such things are sanctioned by the medical officers, but in the matter of the patients washing in lavatories rather than in the dormitories, where they have slept through the night, where the air is close, and where no time should be lost in opening windows and turning up the mattresses, there is a good deal to be said for the practice. If no pretence of their being used is made, there would seem to be no special objection to basin-stands, &c., being in the dormitories, just to give a furnished air.

The not unimportant subject, though one of detail, of under blankets is referred to in a majority of the reports of the Visiting Commissioners. We gather, that now under blankets are the rule, both on ordinary beds and on those provided with a mackintosh sheet, but that not very long ago, both, and especially the latter, were exceptional.

The beds and bedding were clean; the latter is of a good and substantial character, and the supply of it is plentiful. Under blankets are provided throughout, and in accordance with our recommendation, a small blanket will also in future be placed above the mackintosh sheet, where the habits of the patient necessitates such a protection for the bed.

WORCESTER.—*21st Annual Report*—The project entertained by some of the magistrates of a reduction in the dietary has very deservedly broken down. The Visiting Commissioners say—

In answer to our inquiry in regard to dietary, we find that it is as good as it was when the asylum was visited in March last, and that Canadian pork is now on trial once a week. According to our experience there can be no question that any reduction of dietary would be attended with very mischievous consequences. A large proportion of the persons admitted here arrive in a state of great physical prostration; their bodily health has to be built up, as it were, and then to ameliorate their mental condition a good diet must be maintained.

The bathing arrangements are defective and the water-closets very few in number. The Committee proposed additional accommodation to remedy these defects; the Court of Quarter Sessions, however, requested to know among other things why earth closets could not be adopted throughout. To this we are indebted for a long report from Dr. Sherlock, in which, besides matter in reference to their bathing arrangements, we have a very full and valuable account of the experience of earth-closets in Lunatic Asylums, as to which, information was collected from many sources. We think this *resumé* by Dr. Sherlock so valuable that we append it in full.

Twenty-seven asylums were using water-closets, but in several of them earth-closets had been tried and found not to answer, as at Northampton, Somerset, and Surrey, and the Superintendents reported unfavourably of them in comparison with water-closets.

In twenty-five asylums the Superintendents reported that earth-closets were in use. In two asylums Broadmoor and Shrewsbury—they were said to be in use in all situations; ten confined their use to out-of-door situations, seven to ground floor wards only, two to ground and first floor wards, and four used earth-commodes of various construction in special departments. Thirteen of the Superintendents where earth-closets are in use reported unfavourably of them, while the Superintendents of five asylums where they are in use stated that they answer well.

The Superintendents of nearly all the asylums where earth-closets have been in use state that they require more care and attention than water-closets, and the majority speak of them as emitting most offensive odours if the least neglect be permitted. In several asylums where they have been in use they have been replaced by water-closets. In the last report of the Isle of Man Asylum, dated July, 1873, the following paragraph occurs:—"Water-closets have been substituted for earth-closets throughout the asylum. The desirability and advantage of this change no words of mine can express."

The Superintendent of Broadmoor Asylum reports that the experiment with earth-closets has there "been a very complete one. The result has been to prove that they are a shocking nuisance indoors, and to be avoided wherever the water supply and sewerage are reasonably good." In the pamphlet published and circulated by Moule's Patent Earth Closet Company testimonials from these two last named asylums are given, speaking favourably of their suitability by the Clerk of the Works; but subsequent experience has proved them unsuitable, and the Superintendents of Berks, Caterham, Colney Hatch, Leavesden, and Rainhill report equally unfavourably of them, and in Kent they have been replaced by water-closets in all the wards, and their use confined to out-of-door situations. The weight of evidence appears to your Superintendent to prove clearly that they are less effectual than water-closets, that they require much greater attention and care, that they are frequently very offensive and pollute the atmosphere, and that their use should be confined to airing-courts. In constructing a new asylum some of the objections to their use can be partially removed by placing earth-closets in situations where they can be charged with dry earth, and the soil removed from outside of the building; but where the closets are placed, as in this asylum, in exposed situations, much inconvenience and nuisance would arise from the filling and emptying process.

If earth-closets were fixed on the first floor wards, considerable inconvenience would result from having daily to carry earth for their supply through the wards occupied by the patients, and this would be much more inconvenient and undesirable in female wards, where men would daily have to enter at an early hour. Where earth-closets are in use, it is absolutely essential in an asylum to provide some paid labour for the daily attention and supervision of providing them with dry earth, and removing the contents of the tanks. It is also necessary to have some provision by means of which dry earth may be procurable at all seasons for the supply of the closets, and this must entail considerable expense in erecting a building for stowage of earth during the summer, or of constantly having some artificial means of drying earth during the winter. The product of the use of water-closets is equally applicable to land in the form of sewage, and at present this is constantly carried out, and entails no charge for labour, and appears to be equally valuable as a fertilising agent.

Since the last visit of the Committee several members of your Board, accompanied by the County Surveyor and your Superintendent, visited the Shrewsbury Asylum, where earth-closets were known to be in use both in ground floor and first floor wards. Without exception the whole of these closets were more or less offensive, and some of them painfully so, although it had been attempted to overcome the nuisance by the copious use of chloride of lime, a strong odour of which could be readily perceived everywhere. In the first floor wards, where

shoots were employed to conduct the soil to tanks or vaults on the ground underneath, this was especially the case, and much inconvenience was stated to frequently arise from the earth and soil in its passage downwards adhering to the inside of the shoot. In several of the earth-closets examined the deposit of dried ashes upon the pan was accompanied with the rising of so much dust as must necessarily soil the dress of any person using the closet; probably, however, this would be less likely to occur were earth or clay in use. In reply to our inquiries it was reported that in the morning when the tanks or vaults were being emptied from the outside a most offensive odour was found to enter and penetrate into the building, owing to a back draught from the outside through the pipes. It was said to be perceptible for some considerable time afterwards. In a sanitary point of view your Superintendent is therefore forced to report upon earth-closets very unfavourably, not only in respect of those as seen at Shrewsbury, but in many other asylums of the country where they have been seen and inspected by him. The Commissioners in Lunacy, also, in reply to your inquiries, stated that they were less serviceable for asylum use than water-closets, and were found not to answer so well. So far as the examination extended, the members of your Board concluded that they were equally liable to get out of order as water-closets, and several were found without earth or ashes, some acting imperfectly, and a few not at all.

We have the *post-mortem* appearance in 11 cases recorded; *post-mortem* examinations were made in all but one case of death. We are sure these records would be more useful with a short heading to each, giving the nature of case and of the appearances found. They would thus be much more available to any one collecting the histories of particular forms of disease.

Dr. Sherlock points out the difficulty of securing a sufficiently confirmed convalescence, in consequence of the desire of patients' friends to remove them as soon as any approach to sanity appears. Patients of the rank of life from whom our admissions are derived, as also their relatives (not unfrequently backed by their Union authorities), believe that their retention in an asylum is, under such circumstances, likely to result in a renewal of their mental disease; they disregard all advice, assume that what had hitherto been observed in this respect was accidental, and would never again occur, and prefer to have their relatives at once under their care at this risk, rather than defer the period of their detention under the discipline of an asylum for a few more weeks or months, and in many of such cases the result happens which is recorded in this report.

In connection with this suicidal type of mental disease another rather unusual complication, at least in this district, remains to be mentioned. Many patients, both of the male and female sex, have been under our care, who for months persistently employed themselves in causing solutions of continuity of the soft textures; this propensity existed not only during the night, but was carried out during the day in the most open manner in spite of all remonstrances, entreaties, and arrangements. Restraint was not employed to circumvent this perversion, but relays of persons were told off to guard against the continuance of the practice, and with only partial success.

We do not remember to have previously heard of so curious an epidemic; any cases at all agreeing with Dr. Sherlock's rather vague description have only come under our notice at rare intervals.

Dr. Sherlock also calls attention to the benefits to the health of

the patients which are more or less clearly traceable to a diminution of overcrowding.

It will be gratifying to your Committee to hear that the general health of the patients in the Asylum, and also those employed in your service, has been very good, and far above the average of most former years. Probably, to some extent, this is owing to the greatly extended cubic space which the residents now occupy, consequent on additions recently made to your asylum. There has been no epidemic disease, and little seen of diarrhoea or dysentery; and what has occurred has been readily overcome by treatment, and appeared to be owing to changes of temperature of an exceptional character, or errors in dietary. There have been only a very few cases of febrile disorder, and a marked exemption from erysipelatous affections, carbuncles, boils, and gangrenous patches of the extremities. Phthisis, which a few years ago showed a tendency to develop itself in an unusual number of our residents, has been reduced to a very material extent, and most of the cases now coming under treatment have been received with evident signs of its existence, and in only a very few has it developed itself during their residence in your asylum.

(*To be continued.*)

2. *English Retrospect.*

By JAMES MACLAREN, L.R.C.S.E., Assistant Physician Royal Edinburgh Asylum for the Insane.

The following are extracts from Dr. Laycock's paper "On certain organic disorders and defects of memory," published in the "Edinburgh Medical Journal," for April, 1874:—

"There are two physiological processes included under the word memory, which are fundamentally distinct."

"The word memory is commonly used to denote both retention and reproduction; consequently, these two fundamental processes are confounded with each other when the word is so used. Then, again, it is as often used to denote the reproductive process alone, because want of this is the only sign of defect in the retentive process; hence, the phrase loss of memory generally means loss of recollection. Again, there may be reproduction as a lower mental process, but no memory in the sense of knowing that what is reproduced denotes what occurred in past time. Aristotle notes this kind of memory, and says that lower animals possess it. By reminiscence, he meant the higher faculty of knowing the past, and therefore implying the knowledge of time. This is more especially intellectual memory—the memory of events in orderly suggestion. It would be well, therefore, to restrict the use of the word reminiscence to this higher intellectual process of reproduction, as distinguished from that simpler form of memory possessed by lower animals, in which there is reproduction without the concurrence of abstract ideas as to time. Aristotle makes the interesting observation that the memory, as thus defined, is the more powerful when the intelligence is the dullest, but reminiscence more vigorous when the intellect is the brightest."

"What happens is a cerebral vital change, which is the double result of mind or vital energy, acting conjointly with certain molecular energies, under certain physical conditions of the organic basis. The whole series of processes are