

4. *English Retrospect.**Asylum Reports, 1885.*

In running through these publications we shall chiefly extract such portions as may be of practical value. However experienced a medical superintendent may be, he can generally pick up some hint by learning what has been going on elsewhere, though this desire may be carried too far, and degenerate into the merest curiosity and love of gossip. Perhaps the most valuable portion of the Reports are the criticisms by the Commissioners in Lunacy. Any defect pointed out, any suggestion made, should suggest to every medical superintendent the propriety of inquiry as to the condition of his own asylum in that particular. If a man does that honestly he will do much good work.

Argyll and Bute.—The deaths from phthisis, which had considerably risen while the house was overcrowded, fell in a marked manner when overcrowding disappeared by transference of patients to the new block, and the removal of others to care in private dwellings.

A very considerable reduction in the number of patients was effected during 1882 by weeding out those who had ceased to require asylum treatment; and though, from relapse into active insanity and other causes, several of the patients who were then discharged have been sent back to the asylum, 40 of them have been found permanently suitable for care in private dwellings.

The changes among the attendants appear excessive.

Barnwood House.—The Committee report that in the administration of the Hospital its charitable objects have, as heretofore, been prominently kept in view, and desire again to express their conviction that the most effective means of carrying out these objects is by affording to those persons who have been accustomed to the comforts and elegancies of life a similar existence, at a very small cost. It has been repeatedly stated, but cannot be too often reiterated, that the condition of the patient, and not the money payment, is the chief criterion by which the treatment is regulated. Under such conditions 63 patients have been maintained during the year at a greatly reduced rate, 6 altogether gratuitously, at a cost of upwards of £1,900.

There are now two assistant medical officers, the senior, we are glad to state, being married.

Dr. Needham's report is, as usual, marked by great common sense—the first qualification for success as an asylum officer. *Apropos* of the "open-door" system he says:—

"There has been no change during the past year in the general principles upon which this Institution is conducted. While personal freedom has been widely extended to the patients, I have still been unable to persuade myself of the practical value or expediency of the general application of an arrangement which has been called 'the open-door system,' and which I have, therefore, not attempted to

adopt generally. In every institution for the insane this, which has been claimed as a modern system, has been in partial operation for many years past, and in this Hospital it prevails to as wide an extent as I consider to be compatible with the safety of the patients and the proper discipline of the establishment. At the detached houses it operates without restriction, because of the different character of the cases which are received into them. There can now be no doubt, from our experience, of the value, in the treatment of patients of the better class, at least, of a limited number of detached houses, which can serve as outlets from the parent establishment, and afford temporary change to those who require or wish it, and a freer atmosphere for the convalescing. They, of course, add considerably to the difficulties of management, and they are probably not economical, but their obvious advantages would seem to more than counterbalance these drawbacks."

Dr. Needham also reports that, in order to secure for the gentlemen the benefit of more sane association, which has operated so successfully in the ladies' division, an educated companion to the gentlemen has been engaged, and his services have met with much appreciation. We shall watch such an experiment with much interest. What combination of adverse circumstances can compel or tempt an educated gentleman of good character to accept a position it is difficult to conceive, but we rejoice that such are to be found.

Bedford, &c.—It is gratifying to find that the Visitors are making efforts to secure and retain good attendants. Superannuation allowances are held out as inducements to good and continued service, and every opportunity is adopted of making the life of the attendants as little monotonous as possible. Billiard-tables have been added on the male side, and a comfortable sitting-room has been provided for the nurses. All this is in the right direction.

The Commissioners report favourably as to the occupation of the patients, and also as to the amount of exercise beyond the airing-courts enjoyed by the men, but they point out that of 527 females, 364 do not walk in or beyond the grounds.

Berks, &c.—The asylum farm has been enlarged by renting 24 additional acres. The original estate was only 54 acres in extent, but in 1879 other 84 acres were taken on hire. The amount of land now appears ample for all purposes.

Extensive sanitary improvements have been effected, but one case of typhoid and several of erysipelas occurred.

The report of the Commissioners is not published.

Bethlem.—Dr. Savage's report touches upon such a variety of subjects that it is impossible to notice them all; but all through there are abundant evidences of honest, earnest work.

He feels yearly the immense importance of having, as medical officers to asylums, men who have had broad medical culture, and whose medical experience has not been limited to asylums, where,

with the best intentions, general medical culture is neglected. To the latter part of the sentence we would object, if Dr. Savage means that in all asylums general medical culture is neglected. Life is too short for a man to cultivate the whole field of medicine, and asylums, by the character of the patients contained in them, necessarily limit the field of observation, but that some men make determined and successful efforts to deserve the character of "accomplished physicians" we affirm from personal knowledge.

Dr. Savage believes that next year he will be able, with the help of the recently-appointed assistant medical officer, Dr. Percy Smith, to lay before the Governors a more ample report of the work done during the year, in the hope that it may be of sufficient value to justify its separate appearance as a Medical Report.

It is stated that a new departure has been made during the year in performing surgical operations on some insane patients. A difficulty in these cases arises from the fact of the insanity of the patient, which prevents him giving consent himself, and where the operation is of a very serious nature, it is difficult to satisfy one's self, as to who should give the authority. Dr. Savage obtained the consent of the nearest relations, including the one who signed the "Order" for reception, and after communicating with and getting the sanction of the Commissioners, he decided to act on the surgical opinion "that life was at stake, that without the operation the patient must die."

Evident efforts are made to allow as much liberty to the patients as is compatible with safety. The necessary results are increased responsibility of the medical officers and abuse of privileges by those intended to be benefited. Men and women do not become saints because they are convalescent from insanity and are placed on parole.

Birmingham.—Winson Green.—When the Commissioners visited this asylum, they saw in the hall at dinner 311 men and 221 women, who were seated, not as is general in asylums, on different sides of the hall, but only on different sides of the table. This arrangement seemed to be attended with very happy results, and the patients behaved with the greatest propriety. If we remember correctly, an even more intimate mixture of the sexes occurs at meals in one or more Scotch asylums, with excellent results.

In a total of 68 deaths, no fewer than 11 are attributed to "meningitis." This is remarkable, as all the patients returned as dying from this disease were above 20 years of age, most of them above 50.

Birmingham.—Rubery Hill.—This asylum seems to be reserved for the care of chronic cases only, and a few private patients. Of 41 deaths no fewer than 21 were due to epilepsy.

Bristol.—The Committee of Visitors reported that £65,676 would be required to carry out the necessary enlargement of the asylum. Although the plans have been prepared and sanctioned, it would appear that the Town Council is in no hurry to vote the money.

The Commissioners note that only 22 males are confined to the airing courts, but as many as 147 women. They state that they attach much importance to this subject, believing a change from monotonous sauntering in airing courts to a brisk walk in the grounds to be very valuable as treatment.

The following paragraph from Dr. Thompson's Report is of practical value. An adequate supply of hot water is not available in every asylum:—

“The Cornish boilers referred to in the last report were duly completed early in the year. Our experience of them is all that could be desired; and I might say that a ready means of keeping the asylum ‘always in hot water’ has been devised and carried out. The difficult point seems to be solved thus: the reserve of hot water should be as great as possible, so that, no matter how great the demand may be at any given time, the reserve water should be chilled as little as possible. So great, in fact, is our reserve that little or no impression is made on the temperature of the bulk of water remaining in the boilers. The stoker banks his fire at 4 p.m., leaving the thermometer, fixed to each boiler, registering 180° Fahr.; the bathing is often very heavy in the evening, and when he comes at six the following morning he finds the thermometer still at 180° Fahr. The height of the chimney is such that little or no draught is seen in the boiler flue, the draught being such as merely carries away the smoke. The fire, therefore, is a very slow one. The material used as fuel is of some consequence also. In the winter months the cinders which come from the ward fires are all that is required. At first the engineer had the cinders sifted; but a little experience showed him that that was an unnecessary waste of labour; and at any time the boilers may be seen with the fire-box doors open and a slow-burning fire upon the bars. I mention this improvement in detail, because what would at first sight appear to be an extravagant scheme is found in working to be a genuinely economical one.”

We congratulate Dr. Thompson on his recovery, and are pleased to find that his Visitors have shown him so much consideration during his illness.

Broadmoor.—It is with regret that we read of the serious assault committed by a dangerous lunatic on Dr. Nicolson, but it is satisfactory to learn that a complete rest from work has been followed by recovery and ability to resume official duties.

Dr. Orange is naturally gratified by the very flattering opinion expressed by the Commission of the French Senate relative to the condition and management of Broadmoor. (See “Notes of the Quarter.”)

Cambridge.—Although the demands for asylum accommodation continue to increase, the Visitors appear to be in no hurry to provide it. Various structural alterations and additions have been made, but the Commissioners begin their report with a long string of require-

ments. They point out also that there is only one service on Sundays, which is held at 9 a.m. This is a distinctly bad arrangement, and we agree that a second service would help to break the monotony of a long, dull day, which Sunday must needs be in an asylum when the religious observance is over early in the forenoon.

Carmarthen.—When the Commissioners visited this asylum they must have been very much out of temper; a more peevish, fault-finding report we never read. The Visitors were compelled to go through the complaints one by one, and they successfully disposed of most of them. Asylum medical officers are quite aware that if one is determined to find fault, the best asylum in England will afford ample opportunities for the employment of this delightful faculty, We cannot help feeling and expressing sympathy for Dr. Hearder. Such chastisement as he has received cannot be for the present joyous, but grievous, although if his asylum is in time benefited thereby he will be the first to rejoice.

Cheshire. Macclesfield.—The Commissioners bear witness to several improvements effected by Dr. Sheldon during his term of office. They also report that “the medical officers arrange their visits to the wards thus—the chief and his assistant each visit one division from 10 till 11.30 a.m. every morning, they then meet for conference at the surgery, after that conference the chief visits special cases in the division not already visited by him, and at five the assistant visits both divisions; this visit takes him about one hour and a half. We are disposed to think that the visits should be prolonged, in order that more opportunity for complaint be given to individuals.” Although Dr. Sheldon notes that the above is not all the time spent by the medical officers with the patients, we agree with the Commissioners that it might be increased with advantage, though but for the record below, we should have thought the reason they give highly ridiculous. Time spent in the wards by the medical officers does great good in a variety of ways; to the officers themselves, not the least, by encouraging minute medical care in the treatment of the cases.

The following paragraph from the Chaplain’s report is of a most unusual character; fortunately it does not often occur that the clergyman has to charge the nurses with ill-treating the patients. He says: “This year has been remarkable for the numerous changes in the staff of attendants on the female side, changes by no means to be regretted; for since September, while the work has been done quite as efficiently as before, there has been a marked diminution in the number of complaints on the part of the patients. This fact speaks for itself.”

Crichton Royal Institution.—“The first and most essential element towards a successful issue is, in nearly every case, removal from home, and placing the patient under the skilled and special treatment which is best found in a good asylum.” When Dr. Rutherford wrote

that sentence, Sir James Coxe must have turned in his grave and the present Scotch Board of Lunacy fallen back in their chairs. We cordially agree with him nevertheless.

Important structural alterations are in progress. Amongst other things it is intended to make a complete hospital for the treatment of patients of the lower and lower middle classes, viz., those paying from £25 to £52 per annum. The country residence at Kirkmichael is largely taken advantage of, and with the best results.

We would again point out that the entries made by the Commissioners at their visits are not given.

Cumberland and Westmorland.—The Commissioners, in expressing their entire satisfaction with the general condition of the asylum, state that the recent additions are most valuable improvements, and make the asylum as convenient and workable as any with which they are acquainted.

Additional land has been purchased, and the estate is now nearly 150 acres in extent. The whole of the sewage is used in irrigation with excellent results.

Dr. Campbell is confirmed in his opinion, formerly expressed, that in his district extreme prosperity and high wages among the lower orders are a more powerful factor in causing insanity than the opposite extreme. His experience also leads him to the conclusion that private patients "do not at all have the same chance of recovery as their poorer fellow-sufferers. A mistaken kindness on the part of their relatives allows them to exhaust all the questionable benefits of home treatment, often without recourse to special knowledge of the disease, and only when home treatment is found worse than unavailing is the patient sent to an asylum. In many cases the possibility of recovery does not seem even to have had its due weight in the consideration of the case, and suicidal or dangerous propensities are often really the cause of the patient's consignment to what should be an hospital for treatment. It is a sad fact that mistaken kindness, or the fear that having been in an asylum, if known, might blight a possible future career, should entirely outweigh other considerations and eventually condemn many to a joyless, passive existence, depriving them of the power of participation in all that makes life worth living for."

The following suggestion by Dr. Campbell, though not new, is well worth more attention than it has received :—"A certain proportion of recurrent cases from alcoholic excess come under treatment in this asylum, quickly recover, are discharged, and frequently relapse. Such cases are really a hardship to all industrious ratepayers. They would stand a much better chance of exemption from this self-brought-on insanity if after recovery in the asylum they were by law detained for an increasing period after each attack in some industrial institution, whose profits assisted to reduce the rates. Some project of this sort is well worth the consideration of legislators; it would do more to diminish preventable insanity than appears at first glance."

Suppose there were such a law, would it be possible to obtain a

true history of an alcoholic case? Not likely. What woman in her senses would state the cause of her husband's insanity to be drunkenness, if she knew that on recovery he would be sent for three or six months to a penitentiary? Excellent advice, nevertheless.

Denbigh.—The Commissioners appear to have great difficulty in getting the Visitors to carry out their suggestions. The asylum is overcrowded, but the Visitors cannot think of building a new wing for female patients, because a County Government Bill may be passed at no distant date. A detached hospital for infectious cases is much required, but it cannot be built, because it may be necessary to provide increased accommodation connected with the main building. Some day rooms, however, have been enlarged, and the work appears to have been well done.

Mr. Cox appears to have some difficulty in procuring suitable employment for his male patients. He concludes that the inadequate number of his indoor male attendants is the main cause of his inability to give regular employment to a certain class of patients incapable of engaging in agricultural work. If that be his only difficulty he is to be congratulated, as it surely admits of a very easy remedy.

Devon.—The mortality was the lowest since the opening of the asylum; only 4.32 per cent. on the average number resident.

We would venture to point out that the Commissioners' report is not given.

Dorset.—Two cottages have been built for married attendants. The staff of nurses has been increased by two, but it must still be considered weak numerically.

In their report the Commissioners say:—"We ought not to omit to say that outside some of the single rooms was a chain placed, which we saw in use yesterday, and though this is not considered seclusion it keeps the patient effectually within the room, and seems to us to come under the denomination of enforced isolation, *i.e.*, seclusion." We think there can be no doubt about it.

Fife and Kinross.—As was to be expected the addition of a plumber, painter, and upholsterer to the artizan-attendants has proved satisfactory.

Dr. Turnbull reports that a second night attendant is now regularly on duty at night in the female division in charge of a dormitory in which the suicidal cases are placed. A male attendant for corresponding duties is only employed when occasion requires.

Unfortunately one of the deaths was by suicide. It is thus reported by the Commissioners:—"The patient was known to be suicidal, and was under careful observation, but she nevertheless succeeded in destroying herself. No blame is attached to any one in charge of her." Had a similar accident occurred on the other side of the Border, the official references would have been in a very different tone, and the nurse would have considered herself fortunate in escaping a trial for manslaughter at the Assizes.

Strange that such difference should be
Twixt Tweedledum and Tweedledee.

It is satisfactory to find that this asylum continues to obtain the highest official commendation.

Glasgow (District).—A special feature about this asylum is the remarkable movement in the population. There is accommodation for 180 patients. During the year there were 127 admissions and 124 discharges and deaths. In the course of four years 713 cases have been admitted; so that the beds have been filled four times and emptied thrice. As Dr. Clark remarks, this is a rare if not unique experience. Every effort is made to board out chronic cases, and with evident success.

Bonuses were voted at Christmas to the members of the staff, graduated in proportion to position and length of service. The effect of this stimulus to long and faithful service is reported to be too palpable to be gainsaid.

Dr. Clarke urges the claims of attendants with much force and truth. He says: "The need of a superior and permanent staff as an element in the treatment of acute cases of lunacy, is one of the most patent necessities in asylums, and anything like an ideal staff will not be obtained under the present conditions of asylum management. The truth of this has been gradually dawning in this country, America, and elsewhere of late years, and the future treatment of attendants is certain to undergo an improvement as remarkable as the changes which have occurred in the treatment of the insane themselves."

Gloucester.—The second asylum is now occupied and the overcrowding in the old building is not so severe. In the latter several important structural alterations have been effected.

The scale of wages of the nurses and servants has been somewhat improved.

The Commissioners consider that the accommodation in the new asylum is very good. Unfortunately the water supply is not sufficient or satisfactory. Two deaths from typhoid fever occurred, but the origin of the disease was not discovered.

Mr. Craddock has been impressed by the frequency of syphilis as a cause of mental disease during the past year.

Hants.—An unusually severe form of typhoid appeared during the year, affecting 14 persons and causing 8 deaths. We regret to find that Dr. Worthington's sister was one of those who died. The cause of the outbreak has not yet been discovered, but Mr. Rogers Field has the matter in hand. The water is said to be wholesome, potable, and of good quality.

Twelve cottages, in two blocks, have been built for married attendants.

According to the returns made to the Commissioners, 127 men and 73 women go beyond the airing courts; 122 men and 256 women go

beyond the grounds; 139 women are confined to the airing courts; 32 women cannot or will not go out; and 179 men are entered as being unable or unwilling. As several female patients are described as very turbulent, it is probable that their habits would be improved by extended exercise in or beyond the grounds.

Hereford.—The occurrence of several cases of erysipelas seems to point to overcrowding, if not to any other insanitary condition.

Dr. Chapman devotes a considerable portion of his report to the consideration of the cases received from workhouses. His experience strongly confirms what has long been felt, that these are the most troublesome, expensive, and unsatisfactory of the admissions.

Hull.—The amount of organic brain disease in this asylum is quite exceptional. Dr. Merson reports that of 81 cases admitted, 18 suffered from general paralysis, and fully 9 per cent. more were afflicted with softening or other forms of brain disease. Forty deaths occurred during the year; 12 of these were due to general paralysis and 15 more to softening, atrophy, and epilepsy.

This new asylum appears to be rapidly getting into full working order. We are glad to observe that an assistant medical officer has been appointed.

Ipswich.—The Commissioners remark that at the date of their visit few patients were engaged in any trade; one man was with the tailor, another with the shoemaker, but neither the carpenter, painter, bricklayer, nor upholsterer was assisted by any patient. They were told that these artizans objected to having patients to work with them. They considered the solution of the difficulty was exceedingly easy when it was remembered that the asylum was intended for curative treatment of patients (amongst whom work proves, in many instances, a powerful agent) and not to give employment to artizans.

To the above we would add that in an asylum where the occupation of the patients is considered of high importance, much can be done in teaching trades. The more intelligent imbeciles and demented can be readily taught the more simple operations connected with shoemaking, tailoring, and upholstering.

Killarney.—This asylum is overcrowded, and its enlargement is under consideration. The admissions were the most numerous since the opening, and included one case of general paralysis, the first for 10 years.

Many important improvements were effected during the year, not the least so being the introduction of an abundant supply of wholesome water.

Dr. Woods has again to regret that the increases of salaries recommended by his Visitors were refused by the higher authorities.

Lancashire. Lancaster.—During the year much has been done to improve the sanitary condition of this asylum. All the external drains have been relaid, and the internal fittings are in progress. Already the health of the patients has been improved, but typhoid fever has not

entirely disappeared. Two deaths from this disease occurred in the old building and two in the annex.

The Commissioners notice with approval that the employment and occupation of the patients receive due attention. It is especially satisfactory to find that all patients, except those actually incapable, have exercise beyond the airing courts daily, weather permitting.

In his report Dr. Cassidy mentions that five American patients are under his care. They ought to be taken charge of by the United States Government, and returned to their own country. "Two patients lately admitted here tell me they were in American asylums, when they were taken, one by the clerk of the asylum, the other by two strangers, and placed on board steamers bound for Liverpool. One of these men was found wandering in the streets of Liverpool by the police; the other, who had been violent and placed in restraint during the voyage from New York, was handed over still in restraint to the custody of the parish officers on the arrival of the vessel in port."

Before we begin to demand the American Government to take charge of such cases, we had better see that we are not even greater sinners in getting rid of our lunatics by sending them over the whole world. It is notorious that many persons recently recovered from attacks of insanity leave our country and go to the United States, Canada, Australia, and elsewhere. The Governments of these countries have made considerable efforts to prevent the arrival of such undesirable colonists, and very rightly too.

Lancashire. Prestwich.—The Visitors have entered into an arrangement for the enlargement of the parish churchyard, and thus provide for the increased number of burials from the asylum. This, where it can be done, is so much more desirable than a cemetery on the estate, in most cases a most woeful, dismal, neglected spot.

There are several paragraphs in Mr Ley's report to which we would willingly direct attention, but we must content ourselves by reproducing his remarks about attendants. Than he there is probably no one in England more competent to utter words of wisdom on this subject.

"The great problem in asylum management is how to obtain good attendants, and when obtained how to retain their services. In every asylum this difficulty, in greater or less degree, has been felt, and in an institution of this magnitude, where obviously a greater proportion of experienced attendants is required, the difficulty in procuring and maintaining a staff of trustworthy subordinates has become a source of never-ending trouble and anxiety. No one conversant with the working of an asylum can doubt that much of the success of management, economical and otherwise, is dependent upon the character and reliability of the attendants, who are necessarily entrusted with the immediate care of the patients. The comfort, the safety, even the lives of those under their charge depend upon the good conduct, fidelity, and watchfulness of these officials, who are, in point of fact,

the instruments by which all the details of moral treatment are brought into practice. The service is an arduous one, and those who take to it are generally persons devoid of all training; consequently of the many who apply only a few are found gifted with the necessary qualities of temper and judgment, without which no good attendant can be made. Under the most favourable circumstances it takes months to train an attendant, and so great is the competition among kindred institutions, and so many are the careers open to skilled attendants, that there is always the fear that when they have been taught their duties they will transfer their newly-acquired experience to some other institution, where equal or greater advantages may be obtained at less personal sacrifice. There are few positions in life where experience is of greater value and more productive of good results, and to lose the services of well-trained attendants is unfavourable to the best interests of the patients, a loss to the asylum, and discouraging to all concerned. I think there can be no doubt that, apart from the question of salaries, much of the restlessness that affects the asylum attendant at the present day is due to the fact that their position is considered an inferior one, because the accommodation provided and the arrangements made for their comfort and relaxation are not equal to what persons in the same calling are able to obtain in other branches of the public service. In all the principal general hospitals and infirmaries it has been found necessary, in order to attract applicants of the requisite character and intelligence, to deal liberally with their nursing staff. Separate accommodation has been provided, and the comfort and convenience of the daily lives of these officials have been considered in every reasonable way. The result has been that the service is an attractive one, and hospitals and infirmaries have become serious competitors with asylums in the female labour market. I think it reasonable to expect that equal consideration for the comfort and accommodation of the attendants would be equally successful in rendering asylum service popular with candidates of character and ability, to whom the retention of their situation would be an object of some consequence. The plan has been tried successfully in the large asylums of Middlesex, and I believe it would be for the benefit of this institution and its inmates, and would also prove the most economical policy in the long run if some beneficial changes were introduced here."

(To be Continued.)
