

profound than he himself allowed. That he was selfish, vain, morbidly sensitive, destitute of high moral principles, and wanting in the loftier attributes of humanity, cannot be denied; on the other hand, he possessed virtues of no common order, that flourished like antidotes beside the bane. His simplicity of character, devotion to nature, belief in God, and detestation of frivolity and scepticism were in striking contrast to the degrading passions by which he was tempted and beset, and under which he constantly fell. At one time an austere Puritan, at another a grovelling sensualist, he combined the dignity of the Stoic with the philosophy of an Epicurean, and while giving rein to his grossest feelings he imparted a tone of self-denial to the conditions under which he gratified them. Rousseau was thus a paradox, and his life an enigma with a dark and fearful ending.

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*Departmental Asylums in the North-West of France.* By J. WILKIE BURMAN, M.D., Resident Physician and Superintendent of the Wilts County Asylum.

(Continued from page 552, Vol. xix.)

*L'Asile de St. Méen, Rennes.*

This asylum is for the male and female lunatics of the Department of *Ille et Vilaine*, who, arranged according to their sex and class, on the day of my visit, were, in numbers, as follows:—

				Male.		Female.		Total.
1st Class	..	<i>pensionnaires</i>	...	17	..	13	...	30
2nd "	..	ditto	...	8	..	11	...	19
3rd "	..	ditto	...	16	..	41	...	57
4th "	..	paupers	..	186	..	236	...	422
		Total	..	227	..	301	..	528

The Asylum is situated about two *kilomètres* from the centre of the city, on the right side of the road to Paris, just beyond the "*Faubourg de Paris*." It is a plain, old-fashioned building, close to the road, from which it is separated by a high wall. It has symmetrical arrangements for the accommodation of the two sexes, and consists of a central administrative block, with quadrangular blocks of two stories on each side of it, running backwards. Down the centre, between the two divisions, runs a common road

from the entrance quadrangle. As a rule, the day rooms and *réfectoires* are on the ground floor, and the dormitories on the top floor; the quadrangular enclosed spaces being used as inner airing courts. The medical staff consists of a Médecin-en-Chef and Directeur—Dr. Laffitte (who has a non-detached residence in the asylum, and 6,000 francs per annum), and two senior medical students, who act as clinical assistants, and are attached one to each division, and get, besides board and lodging, an *honorarium* of 600 francs per annum each. These “*internes*” are bound to engage for a period of three years; but, during that time, they may proceed to their degrees without renouncing their functions. On the occasion of my visit I found the medical superintendent away for his holidays, and the asylum nominally in charge of a physician residing in Rennes, and who paid a visit to the asylum once a day about mid-day. I went round with the *internes*, however, at their early morning visit, and have to acknowledge their kindness and readiness to afford me all the information I wanted.

The first place visited, as in the other asylums, was the infirmary—the male infirmary in this case, for we commenced on the male side and proceeded round the whole building together. The infirmary ward, which was exceedingly neat and airy, contained a few cases of ordinary sickness, and was looked after by several Sisters of Mercy, about 19 of whom, altogether, are scattered through the wards, acting as charge attendants on the female side and attending to the sick generally. I need not describe the arrangements for the *pensionnaires*, which were excellent, and all that could be desired on both sides. I saw, and entered with the *internes*, a very nice detached pavilion residence in the grounds, with its own private garden, for one patient paying a high rate, and who had special attendance, &c. In the quieter wards we found, on entering, the patients ranged round the room, standing up at attention, cap in hand. They had just finished breakfast, and awaited medical inspection previous to going out to take exercise in the airing courts and grounds. Amongst the *pensionnaires* I saw several clergymen and military men in their own peculiar costumes. The patients were classified as in the other asylums, and, as in them, I found here, that the day-rooms and *réfectoires* of the paupers were bare and dismal looking, though perhaps they were seen to great disadvantage after visiting the quarters of the *pensionnaires*. The male *agités* were, as a rule, untidy

and dressed in all sorts of clothing. Some wore *sabots*, and some boots, and most of them had stockings on. Throughout the building altogether, I saw about five or six cases of restraint with the *camisole de force*. I saw rows of strong rooms, as before described, but they were less commodious and more dismal than at Quimper. Baths and *douches* were freely ordered by the senior *interne* as we went round the male side; and we afterwards saw in the bath-room several of these men getting their *douches*, and other men in warm baths undergoing the hydro-therapeutic treatment, some of them being excited and noisy, and boxed in with only the head appearing.

Passing to the female side, I found the patients, as a rule, much tidier, and the wards of the poor more cheerful—a result due, no doubt, to the energy and activity of the excellent and intelligent sisters in charge. The floors were everywhere waxed and the walls whitewashed. In the wards of "*les agités*," however, many of the patients were untidy, and several had on neither boots nor stockings, whilst others sat listlessly on the ground against the wall, the ordinary attendants, who wore no uniform, seeming to take little notice of these peculiarities. We passed through a very nice and busy needle-room, where all the women were neatly and uniformly dressed; and, further on, we entered a *salle de travail* of a different sort, in which from twenty to thirty women were busy spinning flax, the spinning-wheels being ranged round the sides of the room, which was commodious and airy. It was a very pretty and, to me, a novel sight: the attendants supervised the patients and their operations from the centre of the room. The dormitories, on both sides, were, as before, all that could be desired; each bed had a special clean covering for the day—an arrangement of doubtful benefit and liable to abuse. On the female side, both in the dormitories and day-rooms, there were a good many improvised shrines to the Virgin Mother. There was a small poor chapel in the central block that would accommodate about 200 patients. The rate of *pension* and maintenance is as follows for the different classes:—

1st Class (exceptional)	Pensionnaires	.....	3000fr.	per annum.
1st Class (ordinary)	"	"	1200fr.	"
2nd Class	"	"	1000fr.	"
3rd Class	"	"	600fr.	"
4th Class	Paupers	"	420fr.	"

The diet of the poor varies somewhat according to the

nature of the day from a religious point of view—as to whether it be a *jour gras* (meat-day), or *jour maigre* (fast-day). Besides getting a liberal allowance of white bread for soup, common bread, and beer or cider daily, the rest of the daily diet of the poor consists of—for breakfast, weak broth or milk; for dinner (on meat-days), strong *bouillon* and boiled meat; and, for supper, soup with dry or fresh vegetables. On fast-days no meat is allowed. Little extras in the way of fruit, &c., can be procured by a small payment, and all working patients get an extra allowance of cider daily. The number of officers and servants in charge of the men is 23, and of the women, 18; and their rate of pay and retiring allowances are much the same as at Quimper. I saw all the usual workshops, and patients busily engaged in them. At the time of my visit there were altogether in the house only 8 general paralytics—viz., 5 women and 3 men; and 32 cases of epilepsy, of which 17 were of the male, and 15 of the female sex. I was told that they had only 5 men in whom the insanity was attributable to excessive drinking. The recoveries and death rate in the asylum are much the same as the average in England. About 1,600fr. are spent in drugs annually. Attached to the asylum is a farm of about 40 or 50 acres, on which about 30 or 40 patients work daily. Since my return Dr. Laffitte has kindly sent me the printed general rules and regulations of the asylum. They are published officially under the direction of the Minister of the Interior, and dated 1859. They are very full and complete, consisting of no less than 25 separate *sections* containing altogether 190 *articles*. As one rather funny specimen of their completeness, I may quote as follows:—*Art. 142, Sect. 20*, appertaining to—*Coucher, Habillemeut et Mesures de Propreté*:—“*Il y a pour chaque lit d'infirmierie une table de nuit, et pour chaque lit de dortoir un vase de nuit en faïence.*” In the same section I find that, instead of using soft India-rubber *pots de chambre* for violent patients requiring single rooms, “*les vases de nuit des cellules sont en métal, sans anse.*” Both on account of their fulness and their general applicability to all the French Asylums, these rules are very interesting, and I may return to them on another occasion.

#### *L'Asile de Pontorson.*

This asylum is situated at Pontorson, close to the river “Cowesnon,” which divides Brittany from Normandy; and, though on the Brittany side of the river, it is built for the

accommodation of the male and female insane of the Department of *La Manche* in Normandy. At the time of my visit it contained about 350 patients altogether, 200 of these being men, and 150 women, divided, as usual, into four classes, there being about 80 *pensionnaires* altogether. Thanks to his kindness, I was permitted to make the medical visit, at 7.30 p.m., along with Dr. Billet—the “*Médecin-Directeur et Préposé responsable*” of the asylum—who is the sole medical officer of the institution, and lives in a detached house near the asylum, receiving 3000fr. *per annum*, with board and lodging, in return for his services.

The building is of Caen stone, and consists of two symmetrical blocks branching off from a central administration-block, and it looks old-fashioned as it stands in its grounds close to the main road, from which it is separated by an open space and tall iron railings. As in the other asylums, I found the arrangements for the *pensionnaires* excellent, and those for the poor not so good as with us. Breakfast had everywhere just been cleared away, and as we entered each ward we found most of the patients ranged round the day-room, as before described, for medical inspection. As in the other asylums, the day-rooms and *réfectoires* were on the ground floor, and the dormitories generally on the top floor—the building everywhere being of two stories high. Each ward seemed to have its own airing court. The floors were generally waxed, and the walls whitewashed and bare. The dress of the male patients was more or less of a uniform nature, consisting of a straw hat, blue blouse and trousers, and *sabots* or shoes, with or without stockings. There was the usual infirmary, and arrangement of the patients in wards according to their nature. Amongst the worst male patients I noticed four or five cases of restraint; but, with the exception of one who was tied to a chair, and the chair fixed to a window-sill, they were all free to walk about in the airing courts, the arms simply being confined in the close sleeves of a canvas strait-waistcoat. During the course of my visit I saw several English male and female patients from Jersey and Guernsey, all of whom were *pensionnaires*. In a central situation were situated the bath-rooms and the inevitable *cellules*. The baths were in use by patients undergoing the warm bath treatment, several of them being noisy and boxed in to the baths. We passed through the female bath-room, after knocking at the door, and found it in similar occupation, and held a conversation with the heads of two female

patients as they appeared through the holes in the wooden lids covering the baths. They did not seem to relish much the hydro-therapeutic treatment.

The *cellules* were entered from a yard, and presented a very prison-like aspect, on account of their massive and heavily-barred doors. On going out into the yard, on the male side, I, at first, took the *cellules* to be stables, for I saw a lot of straw outside one of the doors, which was open, and, within, a man using a mop and bucket; but on going into the *cellule*, I found that the floor was wooden and waxed, the room itself commodious, and the bedstead of wood, though fixed to the floor. Only one of these *cellules* was occupied at the time of my visit, and that was on the female side, the patient being dressed, and conversing with us through a grating in the door. There are about half-a-dozen of these *cellules* on each side of the house. Amongst the excited women I saw a good many untidy patients, and 5 or 6 cases of restraint. Several of the women lay listlessly on the ground in the airing court without either shoes or stockings on. In the oldest parts of the building large bars of iron, about one inch in diameter, crossed and recrossed the windows, giving them a very prison-like appearance. In one of the wings of the central block is a small chapel, which would accommodate about 150 patients or more. There are about 34 attendants altogether (not including 4 out-door men) in charge of the patients, 17 on each side, besides 12 Sisters judiciously distributed throughout the building in the male infirmary and on the female side of the house. This is a large proportion, and can only be explained by the presence of *pensionnaires*, who require and get much more attendance than the paupers generally. The male attendants get board and lodging and from 100fr. to 150fr. *per annum*, and the females from 75fr. to 100fr. *per annum*. These wages seemed so ridiculously low as compared with ours, that I got Dr. Billet to repeat the amounts to me more than once. There was very little general paralysis in the house at the time of my visit—only four or five cases altogether; but there was a large number of cases of the “*délire de persécution*,” as Dr. Billet termed it, principally due to alcoholic excess. Opposite to the asylum, on the other side of the road, is a fine kitchen garden of about eight acres in extent, in which both male and female patients were working. Including this garden and the adjacent farm, the asylum

possesses altogether about 200 acres of land, on which about 80 male and female patients work daily.

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In concluding these very crude and rather disjointed notes, I may just, perhaps, draw attention to a few points common to all of the asylums visited. It would appear to me that they are behind the times, in many respects.—as to their use of restraint, their retention of those prison-like cellules, and their treatment of the poorer classes generally; whilst they excel in their bathing arrangements, dormitories, and *lingeries*, as well as in the state of their farms and gardens, and the numbers of patients employed thereon. The prominence given to the hydro-therapeutic treatment of insanity has, no doubt, a good deal to do with the admirable condition and completeness of their bathing arrangements.

As to the restraint and condition of the patients generally, I must say that in most cases the instrument of restraint was not formidable, and did not prevent free locomotion, the arms being merely restrained in the blind sleeves of a light canvas waistcoat; and both in this respect and as to the condition and appearance of the patients generally, these Provincial Asylums contrast favourably with the older Asylums of Paris, viz., Bicêtre and Salpêtrière, and approximate more to the state of things found to exist in the more modern Parisian Asylums, viz., *L'Asile de St. Anne* (in the South of Paris), and those outside the walls at Vaucluse and Ville Evrard, which, I believe, in their turn, can more than any other asylums on the Continent be fairly compared with our own County Asylums. Though some of the *réfectoires* were tolerably large, yet in none of these Breton Asylums did I meet with any of the large dining or amusement halls, which are now so common in English Asylums.

With regard to the salaries of the officers and servants in these asylums, one cannot help being struck by their smallness as compared with those in our asylums. I am at a loss how to account for it, unless it be due to custom, low cost of living, and smallness of wages generally in these departments. As in our own country, the asylums are governed by the *Médecin-Directeur* under a *Commission de Surveillance*, composed of the notables of the surrounding district. They are yearly visited by a member of the board of *Inspecteurs Généraux*, located at Paris, whose reports are made in writing to the Minister of the Interior, but not printed. The annual

reports of the Medical Superintendents are made to the *Préfets* and, likewise, not printed.

As to the separation of the sexes, which I noted in two of these Breton Asylums, and have observed at Rouen, and in the older Parisian Asylums, and which I believe to be very common in France and almost peculiar to it, I was curious enough to ask some of the Superintendents of these Breton Asylums if they could assign any *raison d'être* except custom for the common separation of the sexes as observed amongst the French insane. One of them said to me in regard to this point, "I think, in fact, with other alienists, that the collecting together of the two sexes in one asylum offers much inconvenience, and in spite of the most rigorous supervision it would expose us to certain unpleasantnesses; the cries of one sex might produce troublesome excitation '*excitation facheuse*' in the other." Another replied that (as is quite true) "the sexes are associated together in a good many asylums in France, and, as for me, I believe that such association of the sexes is to be preferred so long as the asylum is not thus rendered too large and crowded." Another informed me that it was only in France that this system was at all adopted, and there principally in the larger and more important Departments, where the association of the two sexes would render the population too bulky. This separation of the sexes and the opinions above quoted are, it appears to me, entirely at variance with our English notions as to the best and most economical way of treating the insane.

## CLINICAL NOTES AND CASES.

*A Chapter on Broken Bones.* BY T. L. ROGERS, M.D.

The subject of fractures, especially of fractured ribs, occurring in the inmates of asylums, is one on which many of the members of the Association may be of opinion that enough has already been written.

It must, however, be conceded that a narration of the experience of any medical officer of an asylum on this subject is better given to the world at the present time, even if it excites less interest, than at a time when public attention is excited by reckless denunciation of the treatment of lunatics in general, and when any statements are liable to be regarded in