

increased number of insane in the county, detached cottages have been erected in the grounds of the Devon Asylum—a plan which appears likely to be pretty generally adopted. Thus, Dr. Lockhart Robertson, in his fourth report of the newly erected asylum for Sussex, speaks of the time having arrived for the building of cottages on the asylum estate, in which married attendants might reside, having a small number of patients under their charge. Non-restraint is throughout Great Britain an accepted principle in dealing with the insane, and an accomplished fact; the great problem that has arisen in its place is, whether it is necessary and right to continue to build large establishments of the usual model of asylums for the aggregation of the insane under a strict discipline and conditions of life widely different from those of their previous existence, or whether we may not bestow our lunatics in colonies of a certain sort, distributed in cottages grouped within a limited area, and connected with a small central institution, serving as an infirmary and as the head-quarters of the medical and general administration? What the sentiments of asylum superintendents may be on this question, their reports do not enable us to judge; but the proposition above quoted, to build cottages within the grounds of asylums for some of their inmates, points to opinion as somewhat setting in that direction, and to the giving way of the old notions of entirely secluding lunatics in specially constructed and adapted buildings, almost entirely cut off from intercourse with the sane members of society.”

The New Infirmary at the Worcester Asylum.

“The infirmary ward on the female side of the asylum, built for the accommodation of forty patients, which was commenced during the preceding year, has been completed and brought into occupation. It is found to be well adapted to the purposes for which it was designed, and has already contributed much relief to the other wards, by allowing the removal of such patients from them as were in a delicate and infirm state of health, and whose general condition and strength were so reduced as to render it inexpedient for them to follow the system of hours which are there practised, and to use the ordinary dietary of the asylum. Patients so feeble as to be unable to move about by themselves, and those requiring much medical care and treatment, have, with decided benefit, been sent to the new hospital ward: being a ground floor ward, it admits of the easy access of all the feeble and paralytic patients to the open air and the general airing courts, which are situated only a few yards from the day rooms and dormitories. The plateau on which the asylum is built did not admit of the extension of the main front, for the ground suddenly makes an abrupt fall a short distance from that extremity

of the frontage. It was therefore necessary to attach this ward at right angles to the old structure, one half of the new ward extending to the front and the other to the rear. A short corridor connects it with the west ward, and opens a communication with the rest of the asylum. A covered way of access for the general traffic has been made along one of the airing courts, where it serves as a verandah, while it prevents any confusion in the wards intervening between it and the central offices by affording a route for the patients and attendants independent of them. The ward runs north and south; the day rooms having a westerly aspect, command a beautiful and extended view of the Malvern range, and of the undulating intervening valley: they and the large dormitories are lighted on two sides. The ward is only one story, and does not interrupt the view or ventilation of the original portion of the asylum. The extremities of the ward terminate in blocks, which contain each a large day room and dormitory 30 ft. by 20 ft. The ceilings are all 12 ft. 6 in. in height. Either of the day rooms can dine the whole of the patients comfortably, while these two dormitories contain nine beds each. The two blocks are connected by a central corridor, lighted from the roof, with three cross passages leading to the old wards, the airing courts, and the covered way of approach. On each side of the corridor are situated the other dormitories, the single rooms, the attendants' rooms, and the various offices. Adjoining and opening into each of the large dormitories are the attendants' rooms, which are thus placed, one at either end of the gallery. There is a bath-room, with two baths, a scullery, a lavatory, two store rooms, a small room for mops, brooms, and cleaning materials, two water closets, one near each day room; two dormitories with three beds, 15 ft. by 11 ft.; two dormitories with four beds, 20 ft. by 12 ft.; and eight single rooms, 12 ft. by 7 ft.

2	Dormitories for 9 Patients.	18	Beds.	833	cubic ft. per head.
2	” ” 4 ”	8	”	750	”
2	” ” 3 ”	6	”	687	”
8	” ” 1 ”	8	”	1050	”

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“ All the dormitories and day rooms have open fireplaces; there is also a fireplace in the central corridor, in two of the single rooms, and each of the attendants' rooms. At the back of each grate there is a cast-iron air chamber communicating with the external atmosphere through a channel in the brick-work; the air from this is conducted by two flues at the side of the chimney piece into the day rooms, dormitories, and corridor. A sliding valve regulates the quantity of air which is admitted at both extremities of the flues. In each day room the whole of the patients would have 190 cubic feet

space at the same time, but this quantity may be doubled, as the patients pass daily a portion of their time in two rooms; besides, there are always several patients confined to their beds, which increases still further the cubic allowance for each. The windows in all the day and sleeping rooms are sufficiently low to admit of the patients having a view from them; they are on the sash principle, and open at the top and bottom for a limited distance; those of the single rooms have shutters, which can be secured at night, and also the dormitories, where they have a louver construction. The extraction is by means of flues, which commence near the ceilings of the different rooms and passages, and pass towards the extremities of the corridor, where are situated the chief chimney flues, distinct from, but adjoining which, these enter the upright shafts, which are carried to a considerable elevation. The ventilation and warming have been found successful during the past winter.

“Owing to the abrupt fall of the ground along a part of the line where the new ward has been placed, it was found cheaper to make a basement under it than to fill up the space with earth. These rooms are well adapted for storing coals, roots, or farm produce, and are of easy access by means of the carriage drive which passes close alongside the new ward. The entire cost of the building, including the architect’s commission, was £2430 6s. 4d., being at the rate of £60 15s. 2d. per head for each patient.”—*Dr. Sherlock’s Ninth Annual Report of the County and City of Worcester Lunatic Asylum, 1863.*

Homicidal Lunatics in County Asylums.

“I could adduce many instances of the great desire of persons labouring under insanity to avail themselves of the benefit of an asylum, now that the opprobrium which once attached itself to the so-called madman has ceased to exist, now that insanity is acknowledged to be a curable disease, and asylums are regarded as hospitals rather than places merely of confinement. Many of our patients suffering from recurrent insanity seemed pleased to return, and several who have been under treatment have been unwilling to leave after recovery. Were asylums again to me made prisons, the prestige now attached to them would soon be lost. Confidence from insane persons must be won by placing confidence in them. There are, however, in every community some restless spirits, some ill-disposed and ill-conditioned minds, which kindness does not conciliate, and when the little power of self-control which once existed in them has been lost by disease, acts of violence are occasionally committed without any assignable reason. For the safe custody of such county asylums are not suitable places of detention. There are now under treatment here several patients with strong homicidal