

tinuously altered, unstable, and ready to discharge on slight provocation. Moreover it was the opinion of Dr. Kirkes, and it is that of Dr. Jackson,\* that Choreic movements are induced by Embolic plugging of cerebral arteries with fibrinous deposits derived from the valves of the heart as in Rheumatic disease.

It would not be a profitable occupation of time to attempt to review the principal opinions upon Epilepsy—with these my hearers are familiar, from their own observations as well as from the writings of acknowledged authorities.

I may, however, add that the chief arguments in support of the view which assumes an anæmic condition of the Brain are ably brought together in a lecture by Dr. George Johnson.† My attention has been drawn to this paper only since the previous remarks were written.

From what has been said I would venture to submit the following conclusions:—

1. That by reason of their possessing a special influence on nerve tissues, and upon the vaso-motor nerves, whereby they prevent sudden arterial contraction, we have in the Bromides most valuable remedies for certain affections of the nervous system, as above mentioned.
2. That in order to obtain their full therapeutic powers the Bromides must be given in large doses, and their use prolonged.
3. That where these medicines are not efficacious to work a cure, their influence is sufficient to diminish the severity and prolong the intervals of epileptic seizures.

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*A Visit to the Friedrichsberg Asylum.* By F. OPPERT, M.D.

THIS institution for lunatics is situated near Hamburg, about a mile from the general hospital, and part of it was first opened in December, 1864. It is one of the most recent and complete asylums in Germany, and, the number of beds having been recently much increased, can accommodate about 370 patients. The land was cheap at the time of the construction, and therefore the grounds in which the buildings

\* London Hospital Reports, 1869, vol. 1. p. 459. Lancet, Nov. 24, 1868.

† Brit. Med. Journal, March 21, 1868.

stand are very large; they are partly used as a farm. The *principal building* has the form of a square, open at one side, with numerous projecting portions, especially in the centre, where the administration is located, and officers' dwellings, kitchen, wash-house, and baths are found. The blocks which form this incomplete square have corridors running at one side, by which, however, they are not connected in the usual manner, but the connection is broken at the corners. The passages are 12 feet wide, lofty, and ventilated by end windows; they are warmed by hot water pipes.

The male patients are on the right side of the courtyard, the female on the left, and they form three divisions respectively, a fourth being accommodated in another building. The first division is formed by bedridden patients, the second by quiet patients who want a great deal of attendance, the third by quiet ones who are able-bodied and work. A number of 30 to 40 patients form, as it were, a family, with sleeping, day-rooms, closets and lavatories for common use. The sleeping rooms on the first floor are large and contain wooden bedsteads, which sometimes stand a little too close. They have windows on one side only, the door being opposite. There are no means of warming, but warm air from the corridor may be admitted through the floor, which is of deal. There are ventilators near the ceilings and a few foul air channels leading into the smoke shaft. The *windows* are on a uniform plan, of wood and iron. The horizontal bars are of wood and the vertical ones of iron; they pass through holes drilled through the wood. The day-rooms (6) are generally placed in projecting portions of the building and have windows on more than one side. The walls are painted a lively colour, and a door leads into the grounds. The closets generally are not water-closets but privies, ventilated by windows and by extracting the vitiated air downwards through the agency of the chimneys. The lavatories are of metal, on the lift-up principle. The baths are some of zinc, others of copper.

The *central* part has three floors, and contains a large hall, the chapel on the second; offices and workshops, as also some single rooms, are on the first. The wings have only two floors, and their corridor is used as a dining room, the tables being fixed to the walls, knives and forks are of the common pattern, and no accidents are said to happen. The doors of the corridors leading into the garden are always open in summer.

Each division has a courtyard attached to it, surrounded by

high walls, where the patients take exercise or work. The building containing the fourth division of refractory patients stands at the back. It contains dormitories, day-rooms, and their appendages, as also three cells on each side; one for every 40 patients. They are much more roomy than those of other asylums, have no small windows for observation, and a pretty large window opposite the door near the ceiling. The floor is of asphalt; the walls on various plans. One cell has cemented walls, oil-painted, another wooden ones of oak planks, but they are reported as difficult to be kept clean in the joints. The cells are warmed by hot air. The part where the cells are is one floor high, the central one two floors.

All parts of the building are lighted by gas.

Another separate part of the hospital, not on the plan, is the institution for paying patients: "*Pension's Anstalt*." It was considered better to bear with the prejudices of patients belonging to a better class and their relations, who would feel offended by seeing them in the same rooms with the poorer ones. The building has two wings, with a small connecting central portion, and is arranged in accordance with the greater pretensions of the inmates.

A *porter's lodge* and *dwelling house* of the senior medical officer are near the entrance, the door of which is almost always open, thereby facilitating the escape of patients more than it ought to do. The junior officer is accommodated in the central part.

The kitchen contains steamers, hot plates, and other improvements; the wash-house various machines; there is a dead-house in the grounds.

*Treatment.* The restraint system is not in use; at the time of the visit only one patient was in a strait waistcoat; the cells are not much used. There are billiards to amuse the patients, also a library. Farming, tailoring, sewing, washing, and recently, basket making, occupy the time of some of the patients. The hydro-therapeutic remedy is frequently resorted to. A great many patients suffering from delirium tremens (147 in 1866) are admitted, to whom opium is very sparingly administered, but nourishing diet, wine, and rest.

A *medical report*, published 1867, states that it was generally possible to trace bodily ailment as a cause of the malady. Of 279 patients who were discharged or died in 1866, 6 suffered from hereditary brain disease, 38 from chronic inflam-

mation of the brain and its membranes, 6 from apoplexy, 4 from embolia and softening, 2 from hydatids, 21 from senile atrophy of the brain, 41 from dyscrasia potatorum, 161 from general debility, which included cases of anæmia through hæmorrhage, fever, excesses, etc.

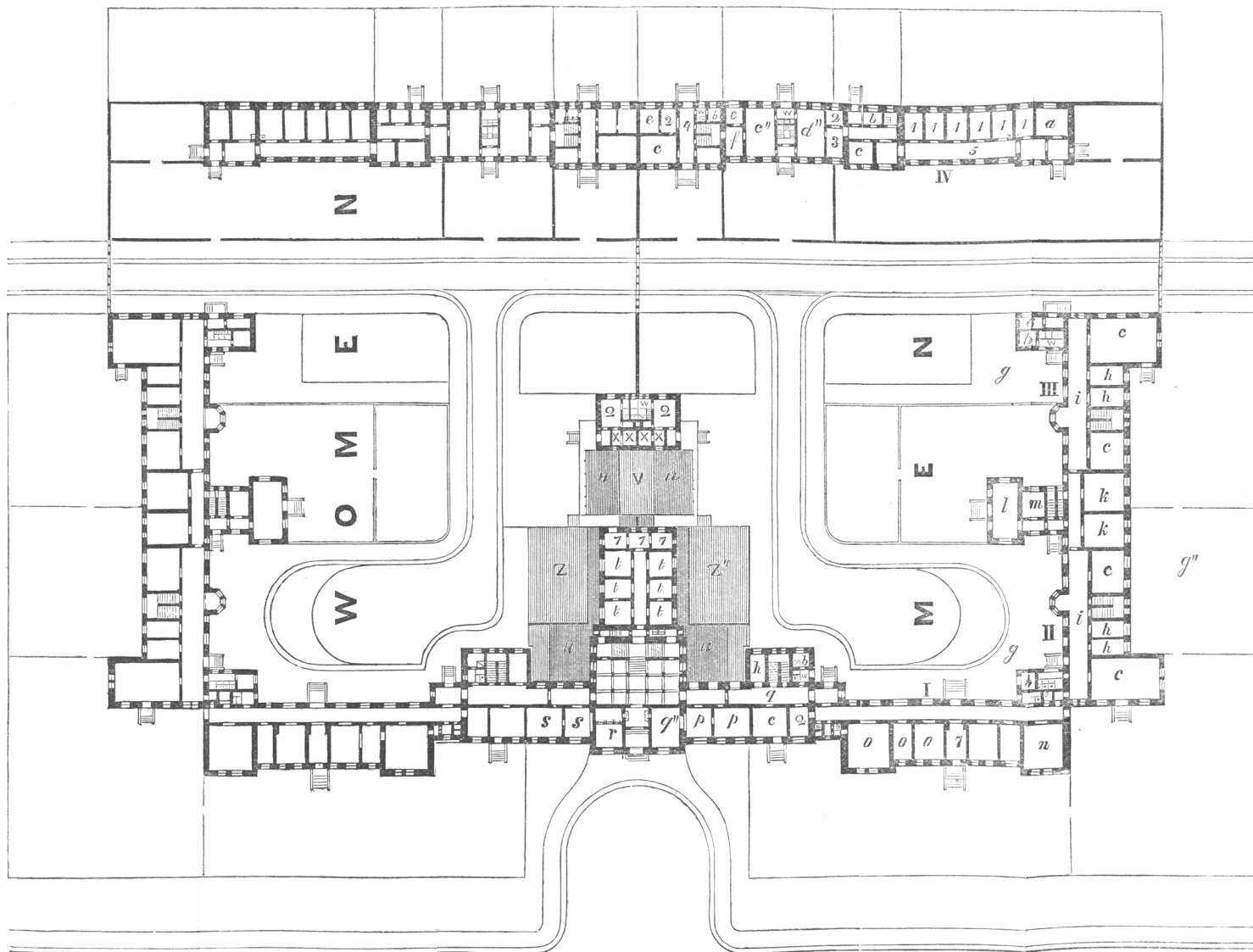
*Finances.* Part of the income is derived from patients' payments. More than one half pay nothing for their maintenance, but the rest either contribute themselves to the funds or others do so for them, and they form classes according to a fixed scale. The total income is about £9,000, £3,500 being patients' contributions, nearly £4,500 subsidies by the government, and the small rest is made up by the interest of capital. The disbursements, amounting to the same sum, include as the highest item, meat £1,200, wages £1,000, firing £900, medicines only £80.

A separate fund, *Juliusstiftung*, is raised by voluntary contributions, and serves as a convalescent fund, as also for providing means to amuse the patients. Furniture, pictures, &c., adorn the walls, and similar things are accepted as in English institutions.

## INDEX TO GROUND PLAN.

### THE FRIEDRICHSBERG ASYLUM.—GROUND FLOOR.

<i>a.</i> Stores	<i>u.</i> Low Court
<i>b.</i> Scullery	<i>v.</i> Boiler
<i>c.</i> Sitting Room	<i>w.</i> Closet
<i>d, d''.</i> Bed Room	<i>x.</i> Vapour Bath
<i>e.</i> Separation Room	<i>z.</i> Wash-house
<i>f.</i> Tea Kitchen	<i>z''.</i> Kitchen
<i>g, g''.</i> Courtyard	I. First Division
<i>h.</i> Single Room	II. Second „
<i>i.</i> Quiet working patients	III. Third „
<i>k.</i> Workshops	IV. Fourth „
Above <i>h, i, k</i> are bedrooms	
<i>l.</i> Day Room	1. Cells
<i>m.</i> Head Attendant	2. Bath
<i>n.</i> Melancholy patients, most in bed	3. Attendant
<i>o.</i> Bedridden	4. Refractory Patients
<i>p.</i> Medical Officer	5. Corridor
<i>q, q''.</i> Admission Rooms	6. Lavatories
<i>s.</i> Inspector	7. Lobby
<i>t.</i> Officials	



GROUND PLAN OF THE FRIEDRICHSBERG LUNATIC ASYLUM.