

prising the leading amateurs and professionals of the town and neighbourhood, took place in the large dining hall of the institution."

The Death-rate in the Female Department at Hanwell.

"Ninety-four patients died during the past year. In the year preceding, the number was 76, and in 1860, 54. The number has not only been greater, but the ratio higher, for in

1859	the rate of mortality was	. .	7·3	per cent.
1860	" "	. .	7·5	"
1861	" "	. .	8·5	"
1862	" "	. .	10·19	"

"The committee, observing this increase, called for a report from the medical officers on the subject at an early period of the past year. The increase of the rate of mortality being at all times a matter of moment, I examined into all the matters likely to be in operation in bringing about such a result. The conclusions arrived at by such an examination were as follows:

"In examining the statistical records of the asylum for a series of years, it became apparent that there was no cause in operation which could have a tendency to augment the rate of mortality, with regard to what might be classified as casual or accidental circumstances; that is to say, the patients were not received in a worse condition, at a different epoch of the disease, nor were the patients older or more weakly, nor the disease of severer character than usual. The operating cause, in fine, was not of an extraordinary character; the result was clearly due to ordinary causes acting in the ordinary manner. It appeared that the nature of the malady is to terminate either by cure or death at a certain epoch; that, in fact, the activity of the morbid processes wear themselves out, more or less, in a period of three years. It was found that in about one half of the patients who had died in the asylum from its first establishment, death had occurred in the first three years of residence, and one half subsequent to that period. (See table XX, in Appendix to the Hanwell Report.)

"It further became manifest that the relative proportion of patients who had been resident three years, and who had been resident more than three years, had lately undergone a great change. Formerly, or in the six years from 1853 to 1859, out of 100 patients, 20 had been resident less than three years, and 80 more than three years. But lately, that is, since the enlargement of the asylum, and the consequent large influx of patients, in every 100

patients 50 had been resident under three years, and 50 more than three years. At least, such was found to be the ratio in March last. The proportion must have still further progressed in the same direction. Now, since the mortality differs for different periods of residence, it became a question whether the increase of the mortality was not due to a larger number of patients resident for a shorter period. The ratio, however, was not only altered, but the actual numbers were increased, owing to the increased accommodation; in fact, it is obvious that such increase over the former number of patients must all go to the category of those resident for the shorter period. From the years 1853 to 1859 there was, on the average, 117 patients resident less than three years, and 453 more than three years. In 1861 the number resident more than three years was found to be 454; if we assume that number to remain the same, then since the average number resident during 1862 was 922, there must have been 478 patients resident less than three years, that is to say, about four times as many.

“But assuming, for the greater simplicity of calculation, that the numbers resident in the two epochs were equal, by Table XX, already referred to, we find that out of 1017 female patients who had died since the opening of the asylum, that 555 died before the expiration of three years of residence, and 462 after a longer residence. Supposing, therefore, the gross mortality of the previous years be represented by 9, then the mortality of the first period would be as 5, and the latter as 4; and since the number of patients resident for the latter period has remained stationary, viz., 454, the mortality would be the same, or 4; but since the numbers resident for the shorter period have increased fourfold (4×5), the mortality for this period will be as 20, or the gross mortality for both epochs should be now as 24 (20×4), in contrast to 9 in former years. Now, the average number of deaths on the female side, during the years from 1853 to 1859, amounted to 34 per annum; this number should, in the present year, be increased, according to the above circumstance, in the ratio of 9 to 24; and as 9 is to 24, so is 34 to 90.66; the actual number of deaths being 94.

“I have dwelt upon this matter, not only because the number of deaths in the female department has undergone an apparently inordinate increase, but also because it illustrates well the different circumstances in which the whole of the department is now placed in regard to its internal operations. Not only has the increase in numbers occurred, but the character of the disease, the epoch of the malady in which the patients now resident are suffering under, has very materially changed. Instead of the asylum being, as it was to a great extent for many years, the receptacle for chronic and incurable patients, whose malady presented little change from month to month, or even from year to year, the asylum now contains a very large

proportion of patients in the acute stage. No less than 97 (Table III) were received during the past year, within the first six months of the attack; and 80 cases of an equal early period were received during the former year; and, in fine, there are upwards of 400 females in the active stage of the disease now under treatment.”—

Dr. Sankey. ‘Report of the Medical Superintendent of the Female Department of the Middlesex Lunatic Asylum at Hanwell, January Quarter Sessions, 1863.’

The proposed Lunatic Wards in Union Houses.

“The Act passed in the last session of Parliament gives a greater latitude to the provisions of the Act of 1845. It has yet to be proved to what extent that expansion of principle can be made available for the relief of the Littlemore Asylum; a very limited power is given to the visitors of making arrangements with the guardians of any Poor Law Union for the reception and care of chronic lunatics. The concurrent powers given to the Commissioners in Lunacy is rather more than coextensive. The possible arrangement would need to be carried out under a variety of authority; and it does not appear to me that the power conferred can be more satisfactorily exercised than the power which the visitors previously had, and from time to time used. The visitors had the power to discharge a harmless patient to the care of his friends, or absolutely to discharge if they saw fit. The exercise of the power now given is subject to the guardians satisfying the Poor Law Board and the Commissioners in Lunacy that the union house can fitly receive lunatics. The visitors have never shown a disposition to retain patients in the asylum who could be satisfactorily taken care of by their friends, or under other responsible persons in their own neighbourhoods, provided that the charge which they have undertaken as visitors is duly regarded. Before transferring any patients to a workhouse, the questions to be determined will be as to the fitness of the house for the reception and care of lunatic patients whose condition has been confirmed by the length of time they may have been insane; of the selection of such patients to be made by the superintendent; of the ability of the medical officer of the union to certify, after fourteen days’ detention, that the patient is a proper person to be kept in the workhouse, and that the house affords proper accommodation; and as to the satisfaction of the Visiting Commissioners. Now the superintendent of an asylum has no knowledge or responsibility as regards the fitness of a workhouse to receive lunatics until it is approved by the constituted authorities for the care of chronic lunatics. He can have no knowledge as to