

months ago. The single escape which occurred during the year was not in consequence of increased liberty. Of the 81 patients to-day in the asylum, nine gentlemen and eight ladies go about unattended beyond the grounds; while 12 and 16 respectively are on parole within the walls. Nine gentlemen and eight ladies have liberty to go to church in Perth with and without attendants; while one gentleman has a seat in one of the churches in town, and is a communicant there."

Several of the gentlemen are now actively and usefully employed in outdoor work. This is a method of treatment which might be adopted in many asylums where gentlemen are received. In this respect paupers are better off than their social betters.

1883.—It will be sufficient to notice that Dr. Urquhart again reports most favourably of the open-door system.

A house has been leased at the sea-side, and small parties are sent thither for change of air and surroundings.

(*To be continued.*)

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## 2. *American Retrospect.*

By Dr. HACK TUKE, F.R.C.P.

*Report of the Pennsylvania Hospital for the Insane, 1883, with Memorial of Dr. KIRKBRIDE.\* Philadelphia. 1884.*

Although our Obituary of last Quarter contained a short sketch of Dr. Kirkbride's life, we avail ourselves of the above Memorial, which has been subsequently issued, to present a more extended notice of one who was regarded by his fellow alienists, and most justly, with the greatest esteem.

Dr. Kirkbride held strongly the importance of the medical superintendent having the supreme command in an asylum. His relations to the managers were, however, of the most friendly character, and he valued the help they accorded him, and the responsibility they shared with him. Writing in 1859, he says:

"I cannot well refrain from repeating what has been said on another occasion, that with all these changes of men (on the Board) there has been no change of principle, no abatement of interest in the good cause, and that I have steadily received a degree of support and confidence for which I shall always feel the deepest gratitude, and without which much that has been accomplished would probably never have been undertaken. Such support and confidence may often make a pleasure of what would otherwise be heavy toil, and help to secure what no pecuniary consideration could purchase."

\* The great freedom taken in condensing this Memorial must not be attributed to dissent from the passages omitted, but simply to lack of room.

It is observed in the "Memorial" that "To Dr. Kirkbride from the first were given the power and the privilege of awakening in the minds of the managers the spirit which prompted the Egyptian King to say to the young Hebrew, 'Forasmuch as God hath showed thee all this, there is none so discreet and wise as thou art; thou shalt be over my house, and according to thy word shall all my people be ruled.' But lest it should be thought, especially by the young, that such capacity and such favour are easily attained, it must be added that Dr. Kirkbride's attitude to the successive Boards was always that of one entrusted by others with a great service, and responsible to them for the strictest stewardship. Untiring diligence, unceasing labour, and the greatest conscientiousness were the cheerful price he paid. 'No man ever had more pleasure in his work than I; it was always a pleasure when I was well,' was the remark he made during his last illness in looking back upon his life. Rest was grudged, and sparingly, if ever, taken; labour was lavished, and this not with a vigorous, physical frame, but with a constitution far from strong. When of late years his family urged the propriety and necessity of longer vacations, the answer invariably was, 'I am responsible to others; the Managers expect me to be at my post.' In an admirable sketch of his character published in a medical journal, his overpowering sense of duty is spoken of as his greatest excellence. In 1853, after passing through a period of ill-health, but not of cessation from active duty, he felt that his term 'of service in the cause had been nearly as much protracted as can be required of one individual,' but he worked on with the same energy thirty years longer. Some men labour with diligence and spirit, but speak as if in working they were always in the shadow, and looking ever with longing to sunny fields of rest before life is ended. Those who knew Dr. Kirkbride most intimately never heard him speak of craving rest; to him the sunshine lay always in and about the Hospital."

*A sketch of the regular duties of each day*, in the Hospital, is a subdivision following "Organization" in the Report for 1841; these have been carried on with few changes ever since. The two pages containing the list are easily read, but it may be safely said they cover an amount of self-denying labour, and of voluntary isolation on the part of the physician, from much of the gratification which many hard-workers in other positions feel they must allow themselves, of which those ignorant of hospitals have scarcely an idea. This is true of all faithful service in a hospital for the insane.

The importance of *employment* was early recognized by Dr. Kirkbride, as will be seen from the following citations from early Reports:—1841: "The importance of furnishing the insane with suitable means of employment and amusement, is now so well understood, that we shall merely indicate those to which our patients have resorted during the past year.

"At the head of the list we place outdoor labour, on account of

its importance in many of the curable cases, and its value in even those that are the most chronic and incurable."

"The Workshop, of which we have had the use only during the last two months of the year, is a valuable acquisition to our means of employment.

"Many of our cases, generally among the convalescent, have already been pleasantly and profitably employed in this building, and the interest they have felt in their work, the entire change in their thoughts, and the active use of their muscles, have rarely failed to contribute to the rapidity and certainty of their cure. We have not as yet attempted any kind of work by which to ascertain the amount of income that might be derived from the workshop; it would unquestionably be small, but, like other kinds of labour performed by the insane, its value cannot be reckoned in dollars and cents, but as a means of restoration or comfort to the inmates of the Hospital. Our great object thus far has been to induce our patients to labour; for the kind of work we have cared but little, and whatever object appeared most likely to excite a new train of thought has received our approbation."

"The female patients employ themselves when indoors, in a variety of fancy work—in sewing, knitting, making or arranging clothes, reading, games, etc."

"In fine weather, at all seasons, a large proportion of the patients take daily exercise in the open-air, by long walks, either singly or in companies—commonly within, but frequently outside of the enclosure.

"A carriage and horses are kept expressly for the use of patients, and are particularly enjoyed by the females."

In 1842 he writes: "Outdoor employments and amusements are generally to be preferred; but a full variety should also be collected within the building, for those who from any cause go out but little, for stormy weather, and for the long evenings of winter, which are often passed pleasantly and profitably.

"Writing, drawing, painting, the study of the mathematics, and other branches of learning, have tended to beguile many tedious hours. Several gentlemen have been usefully engaged in imparting instruction to others in the same ward, and two have been improved by giving regular lessons, for a short time, in one of the modern languages.

"A great variety of games also tends to fill up the time spent in the parlours and halls, and several musical instruments offer recreation to those who are thus inclined."

In 1843: "The value of mechanical as well as other kinds of employment in the treatment of insanity is now so universally conceded that no arguments are required in its favour. Two cases, after a failure of all the ordinary means, appeared to be perfectly restored by this kind of employment, under peculiarly discouraging circumstances."

“The labour-problem in regard to the insane is probably best settled by the conclusion that it is hardly possible to exaggerate the importance of occupation of some kind for every class, but also that harm, quite as easily as good, may follow employment in unwise forms, and that a practical knowledge of the whole subject in regard to kind, amount, and the physical and mental conditions of those on whom its effects are to be tried, is indispensable to secure the best results from its use.”

We especially direct attention to the above discriminating remarks.

*Evening Amusements.*—The need of amusements for the evening is early referred to. In 1844 a very fine magic lantern was in use. In 1845 lectures were established. “The regular course is being delivered by my assistant, Dr. John Curwen, who, in addition to the faithful performance of his ordinary duties, has spent much time and labour in his efforts to make this experiment useful and successful.”

Dr. Kirkbride was never satisfied with his provision for the evenings, until every evening during the nine months' course of each year was filled. In 1863, at the Department for Females, light gymnastics were introduced, six out of seven evenings being from that time appropriated to some special form of amusement or occupation. The officers' weekly tea-party, introduced in 1866, and since then continued throughout the year, filled up the only unoccupied evening of the amusement season. This he considered as in some respects the most useful of all the entertainments. Forty persons, three-fourths of whom are patients able to take part, are invited successively from all the wards to meet at table in the officers' dining-room on these occasions. Dr. Kirkbride himself always presided at this meal unless prevented by some very unusual cause, seated where he could see almost every one present. It was often evident that, while apparently engrossed in making those about him happy, his thoughts were also busied with the interests of many, reached only by his eye and not his voice.

It is a frequent remark in the Reports that only by enthusiasm on the part of the officers can the amusements so necessary in a hospital for the insane be properly carried on; this enthusiasm he never failed to show in the highest degree. He made it a rule through his long course as superintendent to attend all the evening entertainments, thus insuring in wonderful measure the interest of both patients and attendants, and the presence of the former. The mere fact of the remarkable ardour with which he threw himself into this part of his duty inspired the same in many an inert mind. An eminent English physician, who had himself been a hospital-superintendent, making him a visit of ten days, asked with surprise and incredulity, as evening after evening his host excused himself for a considerable time, “Is it possible Dr. Kirkbride goes every evening to the amusements?” Absence from the Hospital in the evening, indeed, until late years, was unheard of; and even then only indulged in after an unusually laborious day, and was so sure a sign of fatigue, that his family scarcely

knew whether to be more glad or more sorry to see him enjoy, what no man ever appreciated more, an unbroken evening in his own much-loved home.

The spirit always shown in regard to all the evening amusements is summed up thus :—

“ No lowering of their character or diminution of their number can ever be permitted while a proper appreciation of the high mission of a hospital for the insane is felt by those entrusted with its management.”

*Sunday.*—In his Report of 1841, Dr. Kirkbride wrote that it was a source of gratification to find that Sunday in the Institution was almost invariably the day of greatest comfort and quiet among the patients.

“ The objects of religious observance in hospitals for the insane are various, not alone because their propriety is unquestionable, but also because many patients derive real comfort from participating in them. Some have satisfaction from thus mingling with the officers and other patients, and occasionally an important moral effect in self-restraint is produced, which may be the first step to future convalescence. This effort at self-restraint has often appeared to me to be strongly brought into exercise by the simple manner in which our assemblies have been conducted.”

In referring again to the subject in 1857, he remarks: “ No visitors are admitted on this day, and all unnecessary labour is avoided. It has long been a subject of remark that the quiet and repose about the whole establishment which are then almost always to be observed are very striking. This seems to be attributable to a deep-seated respect for the day, the effect often, no doubt, of early education, and which is not entirely lost even when disease has taken from the mind some of its highest attributes. On Sunday no leave of absence is granted but to attend Divine worship, and throughout the grounds, in the shady groves and pleasant summer-houses, as well as in the wards, our inmates seem to appreciate the quiet and repose that rightfully belong to the day.”

Dr. Kirkbride was not always successful in preventing encroachments upon his time by persons willing to curtail, on the day of rest, even his partial relief from engrossing duties, yet the peculiar restfulness and peace of Sunday in his own house have been remarked by those who were his guests. Dr. Kirkbride had only too much opportunity to see and realize how many good men, through a neglect of natural laws, and through overwork, lower their capacity for benefiting their fellow-creatures. Every day of life was passed by him in blessing others. On Sunday opportunity was granted to attune the heart to the highest, sweetest tones, only that the harmony might sound through each moment of the week, to be renewed again by the next day of worship and of spiritual rest.

On that day he made it a rule never to leave the place in the

afternoon, that being the time given to his assistants; and part of it, through all these years, was almost invariably spent in walking about the grounds with his family. The memory of these walks to all his children is one of their most precious associations with the day of days. For a number of years after the removal of Dr. Isaac Ray, the eminent author of the "Medical Jurisprudence of Insanity," from Providence to Philadelphia, he received a visit every other Sunday afternoon from this most valued friend, and together they took both grave and sweet counsel upon many subjects, but above all upon that which engrossed the mind and heart of each.

Until his illness in 1879 Dr. Kirkbride conducted the simple Hospital service, reading aloud several chapters from the Bible. Singing of hymns by patients and attendants followed the moments of silent worship at the close of the Bible reading. His voice was not loud, but remarkably distinct; his clear and soothing tones were heard perfectly by those seated farthest from him. The "Doctor's reading" was a tonic to many an aching heart.

*"Avoidance of Deception in Treating the Insane.*—Deception is so often resorted to by those who have charge of insane friends, and injury unintentionally done by it, that some remarks on the subject in this place cannot be considered inappropriate. Those who have had much intercourse with this class will generally agree that candour is proper under all circumstances, and particularly where it is most apt to be neglected, in bringing patients to a public hospital." (1842.)

About a year ago there was much discussion in the religious newspapers as to whether deviation from the truth under any circumstances can be considered right. One of Dr. Kirkbride's family was asked by a clergyman his views and his habit on this point in dealing with his patients. The question was repeated to him, and he earnestly exclaimed: "I hope you gave a most decided answer, and made it thoroughly understood I never think it right to speak anything but the truth." Only those who know much of the frequent developments of insanity can understand the mental strain which unflinchingly firm, tender, and sympathising candour with the insane through a period of more than forty-two years involved. He had also that rare combination of perfect sincerity and delicate tact which, valuable in any position, is invaluable among the insane. In his last report he speaks of these traits as important for workers in his field of labour. "No amount of compensation, however, no period of relaxation from duty, will secure the highest form of usefulness, without a real enthusiasm in regard to the work in hand—a generous sympathy with all who suffer, and the possession of a manner which takes away all doubt of its being genuine. Such persons must be possessors of that quality only to be described as tact, and so valuable in all positions of life; and they must show, too, in all their actions that they fully understand that the provision of all these structures and their many and costly arrangements are for the

special comfort and benefit of the patients, and not, beyond what is necessary to show a hearty recognition of faithful services, for those who are employed to have charge of them. If it were possible to teach this matter of tact to persons about to enter upon the care of the insane, it would be an invaluable preliminary study. It is so common to be absent, however, where so many other valuable traits are found, that, insensibly, we learn to regard it as essential in one serving as a care-taker upon those labouring under mental unsoundness, and that it must come naturally if it comes at all. It cannot be too often repeated that to be specially valuable about a hospital for the insane, no matter what the position of an individual may be, the interest in the institution, its patients, and the conscientious performance of duty, must ever be far beyond any thought of personal aggrandizement."

*Restraint.*—In regard to restraint, the views of the five earliest Reports are strikingly in accord with Dr. Kirkbride's later opinions. An extract is given from each to show fully the position taken by him forty years ago: "Our invariable rule is to remove all restraint from the person of every patient upon his entering the Hospital, and it is with extreme reluctance that it is ever re-applied.

"Although the means heretofore detailed, and the aid of a vigilant and efficient corps of assistants, have enabled a large number of the patients to enjoy the privileges which I have mentioned almost from their first entrance, it is not to be concealed that we always have in our family some with that unfortunate temperament that blackens the fairest scenes, distorts the purest motives, and misconstrues the kindest actions; and that many require some more decided restraint until the violence of their attack has subsided.

"No hospital for the insane can ever be without restraint; the very character of the building, the laws for its government, and the supervision and discipline that is required, impose a wholesome restraint upon all who enter its walls. Fortunately the discipline and restraint which the necessity of the case demands can hardly prove injurious. The same cannot be said of the means formerly believed necessary, the evils of which were of so terrible and lasting a character that too much pains cannot be taken to diffuse more correct and enlightened views on every occasion.

"Seclusion to guarded chambers for a limited period is of vast importance in the treatment of insanity; but, to prevent abuse, its duration must be under the immediate direction of a superior officer of the house. To no other persons can it be safely entrusted.

"Every year brings us cases to prove the danger of seclusion being improperly continued. Seclusion for very short periods I have found sufficient restraint for nearly every case under care during the past year, and with an average population of one hundred and fourteen there have rarely been more than four or five confined to their chambers. On more than one occasion, for two or three weeks together,



not a single male was thus restrained. At the time of writing this Report, and during several previous weeks, there has been but one of each sex in this situation. If proper provision is made for seclusion, classification, and attendance, all the common kinds of restraining apparatus may be dispensed with in the treatment of insanity, but of the propriety of doing so under all circumstances I still entertain doubts.

“Had I felt anxious to make such a declaration, it would have been in my power to have stated that during the past year no restraining apparatus of any kind had been upon the person of a single patient of this Hospital; but believing as I do that its occasional employment may be conferring a favour on the patient, it has always been resorted to where there existed a proper indication for its use. The only indication for its use that is recognised in this Hospital is the positive benefit or safety of the patient—never the trouble of those to whose care he is entrusted—and the direct order of the physician or his assistant, the only authority under which it can be applied.”

In the second edition of his work on Hospitals, published in 1880, and already referred to, he writes: “Physicians may differ widely in regard to the particular forms of mechanical restraint that may be most desirable, but it is safe to say that they are few in number, simple in form, and little repulsive in appearance. In my own experience, strong wrist-bands, soft leather mittens, connected linen sleeves, and the apparatus for confining a patient in bed, are all that are required; the last-named, in certain conditions of a patient, being of the utmost value, and often unquestionably a means of saving life. My experience would indicate that on an average not more than one or two per cent. of all the patients require any mechanical means of restraint, that often a period of several months may pass without their being needed, and that any Superintendent may conduct an institution without applying them, in case he is anxious to avoid the criticism of pseudo-experts, and willing to let his patients lose the advantages that may result from their occasional use.

*Attendants.*—The views of Dr. Kirkbride in his earliest years as Superintendent, in regard to the qualifications desirable in attendants, have no uncertain sound. A part only of his remarks on this subject in the first five Reports are quoted, but with some repetition, to show how from year to year he emphasized the subject:—

“To these situations we endeavour to appoint none but those who are strictly temperate, moral, and of good intelligence. To perform *perfectly* the duties of attendant requires such a variety of qualifications—such peculiar mental and physical endowments as are not often combined in the same individual, that, in all our engagements, it is understood that no one is expected to remain in the station who is found deficient in the qualities we deem essential to its proper performance.



“ Few persons are to be found who possess all the qualifications, mental and physical, and the peculiar temperament necessary to make a perfect attendant. Without a trial, it is impossible even to say who will perform the duties of the station sufficiently well to make it to their own interest, or that of the institution, that they should remain in it.

“ A high moral character, a good education, strict temperance, kind and respectful manners, a cheerful and forbearing temper, with calmness under every irritation, industry, zeal, and watchfulness in the discharge of duty, and, above all, that sympathy with those under care which springs from the heart, are among the qualities which are desirable, and as many as possible of which we endeavour to combine in those who are placed in this station.

“ When all these are found in one individual, and he has been instructed in the proper mode of performing his duties, his services to any institution and to the sick are truly invaluable. Such an attendant is really a benefactor to his species.”

“ A more numerous body of attendants, with higher qualifications, is also necessary. They should be individuals who enter with zeal and cheerfulness upon the performance of every duty ; who manifest a true feeling of interest in the welfare and comfort of every patient, and in carrying out every measure that may be proposed by the proper authority. They must be able, under all provocations, to control their temper ; never to forget that they are dealing with fellow-beings who are insane, and never tire in their endeavours to acquire that tact which will enable them, by an invariably mild and kind, but firm and dignified deportment, to control those who come under their care. It need hardly be said that the services of those who do this cannot be too highly appreciated, and that they are deserving of the warmest commendation. Those who do not possess, or cannot acquire, these qualifications, or who perform their duties solely to keep their places, can never be desirable in a well-conducted hospital for the insane.”

“ A proper system of attendance upon the insane is so intimately connected with the abolition of restraint that it seems natural to speak of the two subjects in connection. In many instances the comfort and happiness of patients depend very materially upon those who fill this highly responsible, arduous, and useful station. When these duties are faithfully performed—where the prominent motive for action is the true Christian feeling which warms the heart towards the afflicted, and makes us treat them in all things as we would wish ourselves treated—every one who has ever required such services will join me in declaring that their value can hardly be estimated.

“ There are many means by which a judgment may be formed of the real qualifications of attendants, the most important of which are the constant and varied supervision which enters into our system of

organization, and the valuable communications often made by patients themselves.

In the same year the Supervisors are mentioned: "One for each sex, whose duty it is to pass their time among the patients in the different wards and pleasure-grounds, to endeavour to interest, employ, and amuse them in every way in their power, and to see that all rules for the attendants in their intercourse with the patients are rigorously observed. Before retiring at night, the supervisors furnish the physician with a written report of whatever has come under their observation during the day."

In 1844 Dr. Kirkbride suggests the employment of "a limited number of attendants of a higher order, who shall be released from all the ordinary ward duties. They should be men with true Christian feelings, courteous manners, intelligent and cultivated, and possessed of a peculiar tact, in order to do justice to such a station."

In 1846 he mentions: "In the female division of the house we have this year commenced the employment of a lady, who, released from the care and supervision of the wards, will be able to devote the whole of her time as a companion to the patients . . . when required, devoting hours of a day, or even whole days, to a single patient."

In 1848, in referring again to teachers and companions, Dr. Kirkbride writes: "If properly qualified, no persons can add more essentially to the comfort and happiness of the insane—can aid more materially in carrying out, in the proper spirit, many of the directions of the chief medical officer—prevent so effectually the occurrence of difficulties among the patients, or between them and their attendants, and secure so thoroughly to all interested the conviction that nothing wrong can be committed by any one, and no duty be neglected, without certain and speedy detection.

"We continue to find a single individual of this class, of each sex, of great value in our scheme of treatment, and the extension of the number, so as to bring their influence still more effectually on individual patients, I regard as one of the most important improvements to be made in the organization of hospitals for the insane. In carrying out any enlarged or liberal system of mental treatment their aid is indispensable."

In 1861: "Many patients, especially when first entering a hospital, should have particular care from such persons as have been referred to, perhaps for days together. These companions, released entirely from ordinary ward duties, by their tact and persevering attentions may do much to give to patients pleasant impressions of their new home, and pave the way for a ready acquiescence in what may be necessary in the progress of the case."

*Manual for Attendants.*—During 1841, in addition to all the labours of that year of organization, he prepared a book of printed

rules for the attendants, of which there have been subsequently two editions. This little manual, which has had value and influence beyond the immediate field for which it was designed, is of itself lasting proof of the views and the standard of this institution from its beginning in regard to attendants. In the first Report we read : " Printed rules are furnished to the attendants when entering upon the performance of their duties, and to which they are expected to conform in every particular. In these rules, and on frequent occasions, we endeavour to impress the attendants with a true view of the importance and responsibility of their stations—to give them some idea of the principles which should govern them in their intercourse with the patients, and the reasons for our different regulations. We insist on a mild and conciliatory manner under all circumstances, and roughness or violence we never tolerate. We are not satisfied with the simple performance of special duties, but wish to see an active interest felt in all the patients—a desire to add to their comfort, and to advance their cure—judicious efforts to interest or amuse them—a watchful care over their conduct and conversation, and a constant, sympathising intercourse, calculated to win their attachment and command their respect and confidence."

It is interesting to reflect that these are the views of attendance and supervision laid down in this institution forty-three years ago. The " unvarying kindness and sympathy " which were " insisted on," and the patience of which Dr. Kirkbride was himself the example through this long period, have ever been the rule ; absolute perfection, indeed, has not been found, but it has never yet been found in those who tend the insane out of hospitals, nor, indeed, among the dearest friends and relations of the insane themselves. There has ever been much unselfish labour each year, however, that enabled Dr. Kirkbride to feel as he did when he wrote at a later time : " I have also the satisfaction to be able to report the valuable services rendered in their respective departments by the supervisors, teachers, attendants, and others connected with the immediate care of the patients. Upon the care, vigilance, kindness, and sympathy of all these much of the comfort of the insane must ever depend. To give all these in their full efficiency requires an intelligent mind, a genuine good heart, a temper under full control, and truly Christian principles. Wilfully to withhold them ought to be considered ample proof of a weak mind and vicious principles, with a complete forgetfulness of that Christian motto which should be printed in letters of gold in every institution for the insane, ' All things whatsoever ye would that men should do to you, do ye even so to them.' "

This was, indeed, his own rule of conduct, and those employed about the patients, as they watched his submission of self in all points to this law of heavenly love, his tenderness, and gentleness, and patience, saw also the beneficent effects of his actions upon the

sufferers under their charge, and consciously and unconsciously, both in and out of his presence, many of them to a remarkable degree, followed his methods and imitated his example.

*Finances.*—This memorial would be incomplete were not Dr. Kirkbride's connection with the financial history of the institution alluded to. In this important part of its administration, and in the wise use of its moneys, the crucial tests of many men in other respects of great ability and noblest impulses, he was not found wanting. The same perseverance and hopefulness, the same calm foresight and prudence, which he exercised as a physician, he showed also here. His principles are stated in 1845: "In the expenditures of this hospital it has always been a rule that everything should be done with the strictest regard to economy—to that true economy which, in institutions of this kind, consists in never spending a dollar without a reasonable expectation of its being useful, and in avoiding waste of every kind; but at the same time making a liberal use of every means that is likely to promote the recovery of the patients, or, when that is not possible, to give them the highest degree of health, happiness, and enjoyment of which their situation is susceptible." Much of the past financial prosperity of the hospital is due to the large administrative ability of Dr. Kirkbride.

When the wards of the hospital were full, and the idea of the erection of a new building suggested itself to him, the enthusiasm in the project which he felt himself he succeeded in imparting to others. Many, including the whole Board of Managers, threw themselves most heartily into the work of raising by voluntary subscriptions the 355,000 dollars needed to build and furnish the Department for Males. All will allow that, as Dr. Kirkbride originated the plan of the separation of the sexes, so it was also his energy and devotion which eminently contributed to the raising of this large sum, and to the accomplishment of what he considered the great work of his life—the provision of a second hospital for this institution, with every modern improvement, and the advantages of a separate building and complete classification for each sex.

*Free Patients.*—In 1842 Dr. Kirkbride writes: "I cannot conclude this report without calling the attention of the Board to the great good effected by the free list and the amount of suffering annually relieved by it;" and in 1845, in reviewing the work of five years, under the head of *Benevolent Character of this Hospital*, he writes at greater length: "It is not only a matter of interest to those who are now contributors to the Pennsylvania Hospital and to the community, but it is due to the memory of the men of a past generation, who freely gave their time and money in fostering it and promoting its prosperity, that the doings of this branch of the corporation towards carrying out its charitable character should be occasionally adverted to."

The Hospital has continued through all these years on its long

course of blessing. "Purely unsectarian, it receives into its wards, as long as there is room, the mentally afflicted of every class, profession, or creed, without regard to residence, and, as far as it is able, dispenses its benefits to those from our own State not blessed with this world's goods as freely as to those who seem to have nothing to ask for but health."

"No one connected with the institution has any pecuniary interest in its income or in the receipts from the board of its patients."

Those who would estimate the value of hospitals for the insane, must remember that to Dr. Kirkbride the insane meant not only the rich or persons in comfortable circumstances, but also the indigent, who, with small homes and narrow means, can often make no adequate provision for ordinary illness. The poor he had, indeed, always with him. None loved him better, or appreciated him more thoroughly, or found in him a better friend, than his poorest and least intellectual patients; his time, and skill, and sympathy were given to them without reserve. His whole personality, however, his courtesy of manner, the sensitiveness of his nature, his ready tact and sense of humour, all his powers of mind, never seemed so fully called into play, or so admirable in exercise, as in those cases where acute intelligence, refinement and cultivation combined often to make the most difficult and the most exacting of the many difficult and exacting cases with which he had to deal. In treating the former he was like the skilled musician playing with depth of feeling a melody in itself so sweet and varied that nothing more skilful or more beautiful can be fancied until with greater art he renders the elaborate composition through which runs the same lovely air.

*Association of Hospital Superintendents.*—In 1845 Dr. Kirkbride mentions the formation of the Association of Medical Superintendents of American Institutions for the Insane, which held its first session in Philadelphia in the autumn of 1844, adding: "The best interests of the insane can hardly fail to be promoted by the cordiality and good feeling which exist among its members, the zeal with which its objects are advocated, and the friendly rivalry which animates each one to be foremost in advancing the permanent welfare of all who are afflicted with mental disease." He was one of the founders of this Association, and its President from 1862 to 1870. Of the thirteen superintendents present at the first meeting, but two are now living, and only one still remains in charge of an institution."

*Reports and Personal Recollections.*—In his fourth Report Dr. Kirkbride speaks of the practice of publishing reports of the operations of hospitals for the insane having then become nearly universal, and adds: "The results of enlightened treatment, and the conclusions of those who make insanity a study, are as likely to promote the advancement of the cause as anything that can be written." The Reports of every hospital for the insane in this country, and of many abroad, were sent to him. He read them all, generally making it a

rule to do so immediately on their receipt, so that the remembrance is distinct of seeing him seat himself after the coming of the afternoon mail in a chair near one of the western windows, report in hand.

His own long series remain not only a history of this institution and a memorial of his work, but as a whole these Reports form a most practical treatise on insanity, deserving the attention of the general reader as well as of the medical student. They give also, indirectly, a picture of public opinion in regard to insanity and its treatment during the period of their publication. In the different phases of the subject taken up from year to year it is seen where Dr. Kirkbride, as an experimental teacher, felt his knowledge likely to be of most avail. They are, with the book on Hospitals for the Insane, his principal literary works.

He was naturally fond not only of the manual task of writing, which he performed most rapidly, but also of giving utterance to his thoughts on paper. He wrote good English, and had, as part of his mental endowment the power of clear and correct, and often beautiful, expression. But this was a native gift unlike that for building or for mechanics, for management of general affairs or for personal influence, which his high idea of duty bade him partly to restrain rather than to develop to the utmost. "I cannot feel it right to shut myself up to write," he would say, and sometimes, "I wish I could think that duty allowed me to deny myself to those who ask to see me, but I have never felt I could do so, even when I have writing on hand;" and therefore it became second nature to write, not as an author, but as the physician and superintendent ready to answer every call.

It must, then, be remembered that these Reports were penned, not in the seclusion of the student's closet, nor as the fruit of that retirement which often produces fair but untried theories, false to philanthropy, because untrue to experience, but by one fresh from the hourly duties which pressed upon him, testifying of what he saw and speaking of what he knew. His exhortations to kindness and consideration, and practical wisdom, in the care and treatment of the insane, both acute and chronic, his descriptions of the high character needed in persons occupying any position in an institution specially provided for these sufferers, were written in moments snatched from his unceasing labours, and perhaps just after having his patience and his tenderness sorely tried in soothing the irritable, or comforting the sad, or calming the excited, or possibly—and this was still more trying—after being made grievously aware that much of the best aid he could secure in his great task was, at times, sadly below his ideal. Indeed it was a frequent remark that he never had any trouble in managing the insane, but that his only difficulties lay in the management of the sane. After his return to his own home from his duties at the hospital, the interruptions to his literary work and to his correspondence, which often involved much serious thought, and of which from first to last he took unaided

charge, answering with his own hand every letter of every kind requiring a reply, were almost endless.

Friends of patients came for inquiry, or to seek merely the comfort his words afforded; applicants for the position of attendant sought him; brother-physicians called to talk over some obscure case; husbands or wives, brothers or sisters, parents or children, brought their afflicted dear ones to ask his counsel in their need—such visits often requiring a long and separate interview with each party; mechanics came to seek their orders about the building or the improvements continually on hand; patients, nurses, employés, or officers from the hospital asked his quick decision upon some knotty point, the decision not always shutting off subsequent discussion.

It is a curious fact in this life of much correspondence and other work with the pen, that neither at the hospital nor in his own home had he a spot exclusively his own, where either in study or consultation could he be sure of not being, at least, looked in upon by those with whom he shared his right to each apartment.

His library at his own house was also the dining-room and the favourite room of the home. There stood his desk and chair; there he wrote, and planned, and thought; there his older children centred all the sweetness and most sacred memories of their early lives; there in later years his younger children and his grandchildren, never dreaming of causing annoyance, for annoyance was never shown or expressed, came to play unchecked, and to seek the unfailing sunshine of his presence. "You never disturb me, you never disturb me," was the answer to any apology for seemingly ill-timed interruption on the part of the older members of the family. His sympathy was so ready in every enjoyment, in every vexation, his judgment so ripe in every household decision, that even the burden of the little things of family life—from which some men of large responsibility shrink rightfully as an irritating addition to their weightier cares—was brought to him. How could one help carrying even trifling troubles to such patient ears; how could one resist craving the sympathy of those tender eyes; how could one wait for his rarely unoccupied moments to ask his wise and soothing counsel?

Yet notwithstanding his wonderful gift in the management of the housekeeping of the wards, so that report said: "Dr. Kirkbride never fails to see when a counterpane is laid crooked on a bed," and his eye was most quick to detect the least want of cleanliness at the hospital, in his own home, criticism, unfavourable criticism, was unknown. At table, complaints of food which chanced to be improperly prepared were more distasteful to him than the unsavoury dish. "Why speak of anything which does not suit you; it requires little discernment to perceive that an article is poorly cooked?"—and so his taste was learned, not through fault-finding, but by the food left untouched upon his plate. His hours for meals were never materially changed. "People know when they can find me at home," was the



imperative reason for keeping the early dinner hour chosen in 1841. For twenty-five years he breakfasted in summer and winter at half-past six, and coming down at that time his family almost always found him at his desk. As may be inferred from his early rising, he was in the habit of retiring early also. He writes: "Abundant experience justifies the opinion that regular and early hours for sleep will do more than all other causes combined to enable any one with no special constitutional advantages to undergo for long periods much physical and especially great mental labour, with all the depressing influences that every life is exposed to, without serious injury." Knowing the labour he was called to undergo each day, he made it a matter of principle almost invariably to stop all mental work, no matter how engrossing, at or a little after ten o'clock. His usual hour of return from the hospital was nine o'clock, frequently half-past, so that he took but a small part of the evening for his own.

When others complained of weariness, he has been heard to say: "I am always tired at night—I have scarcely ever known what it was not to be so;" but of the irritability of which many are conscious as the result of great fatigue, he acknowledged himself utterly ignorant. His strong will and his command of his powers of mind were shown in the manner of seeking repose. "I have long made it a habit," he said, in counselling those who complained of inability to sleep, "to stop thinking the moment my head touches the pillow; had I not done so, I should never have been able to perform the work, or to endure the trials or the fatigue I have undergone."

Some of these are homely details, but when the strong light of home, falling on a life of public service, discloses only beauty, it is right to draw the curtain and reveal its rare perfection. And so it was that the old house in which he lived, bright and cheerful as it is with its many windows, whoever might be within it seemed to grow dull and empty when he left it, and to be brighter and more full of joy when he returned; thus his home-coming several times a day from the hospital was ever, to young and old, a fresh and conscious happiness.

But the peculiar feeling of restfulness and help in the mere knowledge of his being near was probably never so fully realized by any as by his female patients. The mere report in the morning that Dr. Kirkbride was absent for the day caused a strange sense of loss; his short yearly vacations, only twice during his long service prolonged to four weeks, and generally lasting but three or less than three, were weeks when personal troubles were hardest to bear, and delusions of the mind most consciously painful; while his return, even to those with whom insanity meant blackest despair, brought an emotion more nearly akin to glad relief than any other the sufferers knew. It may chance that some who read these words in the sunlight of reason and the happiness of home will recall the feelings just

described, and will remember how often they and their fellow-patients gave them expression. A lady, living in England, who spent but a day or two in his home some years ago, wrote lately : " I suppose no one ever came across Dr. Kirkbride, even for as short a time as I did, without feeling a presence of goodness and kind wisdom, it did one good to be near. One did not need to be sick in mind to acknowledge his healing, strengthening power." This is, indeed, true ; but to the insane this healing, strengthening power was priceless in its influence. One, not long since his patient, writes : " I have never known any one whose presence commanded such reverence and love."

Great as was the interest he took in directing the building and improvements of the place, and great as was his ability in these respects, it was within the wards that he found his chief delight, and there also that the strength and the graces of his nature showed themselves most clearly. In 1849 he wrote : " The buildings of the hospital being now completed, the undersigned looks forward with great satisfaction to the increased amount of time which he hopes to be able to give to the interior of the establishment, and to perfecting the means of restoring mental and physical health, and smoothing somewhat the rough places on the road of life of those who must look to this spot as their earthly home." To know him thoroughly, one needed to see him in the wards surrounded by those to whom his life was devoted. Perhaps, also, none knew him so well, or so thoroughly appreciated his power over the insane, as those restored to reason under his care ; for they had felt and realized in themselves the effects which others had only seen. None prized so truly the value of his words, and even of his looks, as those who in the sore distress of mental suffering and despair, or amid the vagaries of a disordered intellect, had felt the soothing, calming influence of a spirit which, whatever its inward struggles might have been, gave to others the impression in all outward show of speech, and look, and tone, that it had reached a centre of repose.

How conscientiously from the first Dr. Kirkbride exercised his personal ministry, more potent, perhaps, in itself than the many remedial agencies gathered within this institution, such sentences as the following, taken from the earliest Reports, give a clear idea : " At the visit of the physician and his assistant, which commences at half-past 8 o'clock in the winter, and at 8 o'clock during the summer, every patient is seen and spoken to—unless there is some special reason for an exception." " No favourable opportunity is neglected for personal intercourse with the patients, and for free and friendly conversation on any subject in which they are interested ; not excepting, in many instances, their own cases and their own peculiarities or those of their neighbours."

This seems the place to speak of Dr. Kirkbride's outward appearance, which was in keeping with his inner nature. Of medium height, rather below than above it ; slight in form in earlier life, in later

years he was somewhat stouter. His hands and feet were small, his step wonderfully quick and elastic. His face not handsome, but with marked features; his nose characteristic and unusual, but excellent; his mouth in expression of will-power most decided, but also most pure and gentle; his eyes, perhaps the most distinctive feature of a face in which on examination every feature was noticeable, so deeply set beneath an overhanging brow, that many thought them dark or even black, were in reality blue, and by no means of the darkest shade. They were very bright and clear, and in them tenderness was constant; in moments of emotion they grew brighter with love or pity; in merriment they often sparkled. His brow was unusually broad and full, and in youth was partly covered by thick black hair, which for many years had been much thinner and tinged with grey. Some persons, seeing him without acquaintance, failed to perceive anything specially marked or striking in this man of middle stature, but to others his face immediately disclosed the traits of an unusual character, elevated above ordinary humanity, and those who knew him best and loved him most, found his face as beautiful as the perpetual revealer of the beauty of his soul.

Dr. Kirkbride had in him a large capacity for friendship, and for inspiring it in others. Calm as he was in outward manner, and usually most reserved in the utterance of his inward feelings, the still waters of his heart ran through a deep, broad channel. Those who knew him most intimately were sometimes almost startled by the proof of the intensity of his affections. It has been said of him with truth, "few had so many friends." Men of the most differing traits spoke of him as "a most lovable man." The nurse who tended him through the last months of illness said: "I never knew a man so lovely."

His power of winning friendship was great, and so also was his faith in his friends. He was never known willingly to speak evil of any man, but to refer to the wrong-doing of a friend was real and acute pain, almost a torture, never voluntarily endured.

"A proper system of management in a hospital for the insane embraces a liberal provision for securing the physical health and the happiness of the incurable as well as for treating those who are likely to be restored. It is a relief, in many cases not easily estimated, for friends and relatives to know that those who are doomed to lasting insanity may at least have a home where, as far as possible, all their wants will be provided for and their safety insured, and where, if the enjoyments of reason cannot be restored to them, life will often be made cheerful and many of its pleasures be freely enjoyed. The incurable cases have, in this institution, always received a large share of attention."

In 1848 he writes: "In no branch of treatment for the insane is there greater room for progress, nor one in which important results are more likely hereafter to be attained, than in that which is directly

*mental* in its character. It is not in the early period of the disease that it is so essential, but after the acute stage has passed, where the malady appears disposed to assume a chronic form, or even where individuals seem to have reached that point at which they are too apt to be styled hopeless, and where neglect and ill-treatment are sure soon to make them so. It is, indeed, to the mentally lowest class of patients in our hospitals that attention should be most steadily directed; it is among these that will yet be found the widest sphere for benevolent labour, and from which results will occasionally flow that will reward anyone who engages in the work in the true spirit of perseverance and without faltering, because the field is less promising than some others.

“It must be in a low state of civilization when, in any institution for the insane, the young and amiable, those who are highly talented or accomplished—who are able to impart as much pleasure as they receive in their intercourse with others—who give little trouble, and whose delusions injure no one but themselves, are not treated with kindness and attention, and do not receive the sympathy and affectionate care of those whom accident or official duties bring in contact with them. But it is for those whose minds seem gone, and those who offer nothing attractive in their characters, but whose diseases have made humanity appear almost repulsive—careless in their habits—violent or perverse in their behaviour, with an apparent incapacity to appreciate many kinds of attention, that truly Christian feelings and an imperative sense of duty seem required to actuate anyone to the kind of devotion to their welfare that is both desirable and important.

“The lower and more troublesome the class of patients, the more likely are they to be neglected, ill-treated, or injudiciously managed by those who are not actuated by the highest and purest motives of action. It is for the care of this class that good judgment, kind feelings, and cautious discrimination are especially desirable, and too often least found. No one can tell how much harm may be done at a certain stage of mental disease—and who shall say where this stage begins or ends—by a single harsh word, by a rude manner, or a rough tone of voice, nor how much aid to a recovery may be given by a steady and unvarying course of conduct of an exactly opposite character.”

*Closing Years.*—In October, 1879, Dr. Kirkbride was attacked by an obscure and serious illness; after various changes of condition, some of which were to the last degree alarming, about the beginning of the year he was so exceedingly ill that, in common with most of his medical advisers, he himself despaired of recovery. To the surprise of all, he rallied and gradually regained his health. The energy of his character and his enthusiasm in work proved not in the least abated.

It had for many years been his desire to re-write and to publish a

second edition of his book on Hospitals for the Insane—long since out of print—feeling it a duty before his days of labour should be over to make a complete record of his views on construction and organization, but the ever-pressing and continual demands upon his time rendered it impossible for him to carry out this earnest wish. During a brief holiday just before his illness he had at last fairly started, but only started, upon the task. The period of convalescence was hailed as auspicious for its fulfilment. The hours of returning strength, which most persons feel are justly devoted to light reading, or to the other limited amusements permitted an invalid still confined to his room, were spent in the difficult duty, far more difficult than that of writing a new book, of remodelling and adding to his book, published originally in 1853. In the early morning his voice was heard playfully summoning to work: “Come, remember we have a book on hand; no time is to be lost; if there were pen and ink ready I am sure I could dictate a good sentence.” Remonstrance was useless, and to guard against an interdict by his physician, a promise of entire secrecy was secured from his family, and it was well kept. His attending physician made his visits to his patient, the doctors from the hospital came bringing their daily reports, and friends called to congratulate the invalid on his improvement, quite unconscious that near him the manuscript on which he had just before been busily engaged had been hastily concealed.

Thus the spring months ran on, work once more the key-note of his days, and after spending four weeks from home, more than three of which were passed under the hospitable roof and the devoted care of his friends, Dr. Charles H. Nichols and his wife—at the Bloomingdale Asylum, New York City, of which Dr. Nichols is superintendent—he returned home to resume, as far as possible, the old routine of hospital duty. His devotion to and enthusiasm in his charge were unchanged; between hospital-cares and the oversight of the printing of his book, his time and strength were fully used, and at the New Year, 1881, he had the pleasure of sending a copy of the secretly-completed volume to his physician, causing the most entire surprise. The old burdens had again come upon him, and except that he was willing to take more rest than ever before, and that fatigue came more easily, there was no greatly marked change in outward life, and certainly none in the activity of his earnest spirit. The many friends who loved him blindly hoped that having passed safely through so severe a test, and having shown the greatest tenacity of life and wonderful constitutional vigour in a frame by no means robust, he was to be spared to them, and to his duties among the afflicted, far longer than the ordinary term of human existence.

His last years were full of pleasant memories; as a rule, never were his spirits brighter. The weekly gatherings during this time, when all his children and his grandchildren met around his table, will never be forgotten, nor the zest with which he returned, after the enforced

absence, to the evening entertainments of the hospital. As in his youth he had won in an unusual degree the confidence and love of his elders—as has been seen by the trust placed in him by older physicians and surgeons, and by the Boards of the Frankford Asylum and of the Pennsylvania Hospital—so in age, he was the friend and chosen companion of the young. His feelings remained unchanged; within him there was no growing old; age touched him lightly, and even then its power was all without.

It may be mentioned here—and it was too striking a fact in Dr. Kirkbride's life to be omitted—that notwithstanding the vast amount of labour he performed, he was still able, when he felt duty permitted it, to command, as it were, a certain amount of leisure. He had leisure for long, patient interviews with those who called upon him in consultation; leisure to soothe and sympathise; leisure at times to give his friends. "Without haste, but without rest," described the conduct of his life.

At the close of 1882 and the beginning of 1883 many matters of much importance and engrossing thought weighed upon him. His hours of duty at the hospital became evidently more exhausting, but he could not be deterred from his regular, and even more than regular, visits.

In February he wrote the last of the numerous papers contributed by him to medical journals—a review of "Chapters in the History of the Insane of the British Isles," which appeared in the April number of the "American Journal of the Medical Sciences."

His illness speedily developed into typhoid pneumonia; after a few days his condition became very alarming. The prostration was so entire that the services of a trained nurse were soon found necessary. This was somewhat of a shock at first, as his family, unaided, had been able to care for him through his previous illness, but with characteristic courtesy and self-forgetfulness, the assistant was received with the greeting, "I fear I shall not be able to give you much pleasure as a companion." When attacks of fever came on, and his mind for the time was dulled, his affections kept all their brightness; then, not several times during the day, but whenever the members of his family approached his bedside, words of the sweetest tenderness were spoken, so that when they left him for their rest at night, distracted as they were with anxious fears, the accents of love they had heard still made melody about them.

After this period Dr. Kirkbride was from time to time on the point of death, but rallied in a most unexpected manner, and even got out of doors again. His mind was clear throughout his illness, and his resignation was complete. "I have not a thought," he said, "but of entire thankfulness." On Saturday, the 15th December, 1883, although very weak, apparent gain was made. On Sunday morning, the 16th, his condition was less favourable; he became unconscious about three o'clock in the afternoon; about nine o'clock his pulse

grew rapidly weaker, until gently and peacefully, at a quarter before midnight, with only a momentary struggle, he expired.

During the days between Dr. Kirkbride's death and his funeral, great sorrow, but great peace also, was in his home. On Thursday, the 20th December, after the family had met at an early breakfast, the room before referred to—as at once dining-room and library—was prepared for the last time to receive him. His desk was closed, his chair was empty, the books collected through a long lifetime were around him, never more to be opened by his fingers. The grey light of the cloudy winter morning fell sharply on the brow which even in death was full of the expression of intellectual power. All his family gathered once more about him, who in that room had ever been the centre of each social festivity, the fountain of each family joy. For the first time they met with no response to filial love in those beloved features; though of them he had said, four years before, when he thought himself dying, “I love them as much as it is possible for a man to love his children.”

“There were great underlying forces in him which I knew and admired,” writes one who knew him well. “All that was beautiful in his character gathered around and sprung out of and adorned those strong features, as the vines and wild flowers spring out of and beautify the rock on which they grow. Gentleness and humility, and patience and love, were all charming parts of his native and Christian character. But his intense earnestness, his resolute will, his stubborn adherence to every principle that he adopted, the bravery of all his convictions, the loftiness of his conscientiousness were the qualities that lay like the rock beneath the beautiful surface that graced his character.”

*Conclusion.*—Memoranda for a Report, found since his death, illustrate some of his views:—

“*Contributions to Science.*—The highest achievement of medical science is the restoration of the sick to health. Whatever helps to do this is a contribution of the highest form. In this list are embraced all remedies of every kind, not medicine proper alone, but everything that can have any claim to be styled a remedy—all moral means, all surroundings of every kind, all the experience of the past, as given in books, all the knowledge obtained by personal observation.

“It is only when science fails in its efforts that the revelations of pathological investigations—the field of the scalpel and the microscope—become possible.

“While all the work where science fails in her first great object is to be encouraged, in the hope that something may come in the future, it is to be feared that much more is anticipated in many quarters from this source than is likely to be ever realized, and that too close a devotion to these investigations may lead to a neglect of many means of caring for the insane, which we know from a long observation never fail to be useful when properly and persistently employed.



“ *The Work of the Future.*—The work of the future will be found to consist much more in perfecting in practice what is already theoretically understood than in the introduction of great novelties. The general principles that should be recognised in providing hospitals, in managing them when provided, and the essential features of the proper treatment of the patients, ought at this day to be tolerably familiar to all careful inquirers in reference to the best interests of the insane. Novelties are not to be rejected because they are novelties any more than the results of enlightened experience should be ignored because they are not appreciated by those whose estimate of their value is lessened simply because of their having been long used. While extended observations and protracted experience may naturally be expected to demand an intelligent trial of all proposals for radical changes before their final adoption, they will not refuse this test to any proposition for which reasonable grounds for trial can be given.

“ While many theoretical views are likely to continue to be advanced and contested, it is fortunate that there are so many practical points on which there need be no difference of opinion, and that the most enthusiastic can always find enough to do, about the propriety or expediency of which there can hardly be a question.

“ While referring to this work for the future, it may not be amiss to suggest a few matters that may safely be kept before the attention of governing bodies, and which are applicable to most—perhaps, it is safe to say, to a greater or less extent, to all our institutions.

“ First among these may be mentioned—Rendering all buildings occupied by the insane as nearly fire-proof as possible.

“ Improvements in the general attractiveness and home-like comfort of the wards.

“ An increase in the libraries and of general reading matter, directly accessible to the patients.

“ Greater facilities for carriage-riding, inside and outside of the grounds, so that all patients unable to walk sufficiently may have every advantage to be derived from this source. Among both sexes, but particularly among the women, the benefit derived from this form of passive exercise in the open air is very great, and the want of extensive enough facilities for its enjoyment is everywhere lamented.

“ New modes of occupation and amusement, and of carefully regulated labour.

“ Greater facilities for letting all the patients of every class have the benefits that result from musical performances. The music that can be given as often as desired by a few cultivated *employés* is an institution to be regarded as a remedy of no small value.

“ A higher order and a greater number of companions to the patients, and of attendants actuated by a genuine interest in the work, so that cultivated patients—all patients, indeed—can constantly have near them a reasonable amount of congenial society, capable of fairly realizing the condition of those under their charge, and of contributing to their comfort and happiness.

“The more thorough instruction and examination of attendants, and the rejection of those who, after a reasonable trial, prove to be incompetent or unqualified for the work they have undertaken.

“The manifestation on the part of those in authority everywhere of a proper appreciation of the value of the services of those who exhibit a special proficiency and fidelity in the performance of their duties, whatever they may be, and, as now and then happens, evince a self-sacrificing spirit which no money can purchase.

“Inducements should be offered, by adequate compensation and permanence of position, to secure the best talent in the medical profession for the superintendence of these institutions, without which it can hardly be expected that those likely to best fill these posts will give up the more tempting and profitable as well as less onerous results of other branches of professional labour.

“The employment of an adequate force of attendants, thus reducing the use of mechanical means of restraint to a minimum.

“A sufficient number of medical officials to permit the most thorough and careful study of every case, for keeping all records of treatment, and increased facilities for pathological investigations.

“The clinical study of insanity when permissible, so conducted as to be of no injury to the patients, and to give to the general practitioner a greatly extended familiarity with the disease.

“It is scarcely necessary to say that all great improvements in institutions for the insane beyond their present capabilities necessarily involve a considerable increase in the amount of their expenditures. But if by the liberal use of these means the great objects for which hospitals were established are promoted, it may fairly be claimed that this is only to be regarded as a part of a wise system of economy.”

As all Dr. Kirkbride's outward energies, for a period far exceeding the usual term of active work, were given to the insane, so were his thoughts also. As years went on, it seemed to those who knew him most intimately, that while his soul expanded, and his sympathies with all good aims deepened, his thoughts became more engrossed, if it were possible, with the great object of his life.

It has been said of Dr. Kirkbride that—“Labouring with a single aim for the relief and welfare of those to whose care he had devoted more than forty years of his life, he has left behind him, in what he has written and in what he has done, a monument which will stand so long as the care of the insane will require the aid of those institutions with which his name and his fame have been so imperishably connected.”

The Board passed the following resolutions after his death :—

*Resolved*—That by the death of Dr. Kirkbride this institution has lost a most faithful and efficient officer, whose untiring and well-directed labours for some forty years have not only met with the cordial approval and co-operation of this Board, but have wrought a

high and enduring reputation for him, and for our hospital for the insane, over which he so long and ably presided.

*Resolved*—That Dr. Kirkbride's works for the relief of the insane, both in the administration of his office in our institution, and by his contributions to medical literature upon the subject of insanity and its proper treatment, entitle him to rank very high among the benefactors of his race.

*Resolved*—That by the death of Dr. Kirkbride we lose a friend bound to us by uncommon ties of affection and esteem. No one could come within the range of his influence without being made to feel that his rare endowments of head and heart were such as to attract the love and confidence of all his fellow-men, and throughout his life he well deserved that love and confidence.

## PART IV.—NOTES AND NEWS.

### THE MEDICO-PSYCHOLOGICAL ASSOCIATION.

The usual Quarterly Meeting of the Medico-Psychological Association was held at Bethlem Hospital on Tuesday, 6th May, 1884, Dr. Orange, President, in the chair. There were also present—Drs. J. Adam, A. J. Alliot, R. Baker, D. Bower, Bonville B. Fox, H. G. Hill, Henry Lewis, H. C. McBryan, Chas. Mercier, W. J. Mickle, H. C. Major, A. Newington, H. H. Newington, J. H. Paul, W. H. Platt, T. T. Pyle, H. Rayner, G. H. Savage, H. Sutherland, James Stewart, D. G. Thomson, C. M. Tuke, D. Hack Tuke, T. Outterson Wood, &c.

The following gentlemen were elected Members of the Association, viz. :—J. Walter Scott, M.R.C.S., &c., Assistant Medical Officer County Asylum, Fareham, Hants; Robert L. Stewart, M.B., C.M. Glasgow, Assistant Medical Officer County Asylum, Glamorgan.

The PRESIDENT said that he much regretted to have to inform the Members of the Association that they were not to have Dr. Manley as their President for the ensuing year, and they would be the more sorry to hear this when they learned that the cause of his withdrawal was ill-health.

The GENERAL SECRETARY then read a letter from Dr. Manley, regretting his inability, through ill-health, to fulfil the office of President, to which he had been elected at the last Annual Meeting.

Dr. SAVAGE said he was sure that the news contained in Dr. Manley's letter would be received with concern, and the least they could do would be to unite in a vote of condolence, and to convey to Dr. Manley their regret that his health necessitated his not holding office during the ensuing year, and their hope that he might be able to fulfil the duties of President in some other year.

Dr. ADAM seconded the motion, which was carried unanimously.

The PRESIDENT said that the rules of the Association provided that in the event of any vacancies occurring in any of the offices of the Association, the Council should have the power of filling them up until the next Annual Meeting. In consequence, therefore, of that unexpected vacancy, it had become the duty of the Council to fill it up. It was not always an easy matter for a Council to do what the rules of an Association empowered them to do. It was all very well for the rules to say that the Council may or shall do such and such a thing, and it was sometimes difficult to carry out what rules said might or should be done; but he was sure the meeting would be gratified to learn that the Council