New case book series: males, vol 4

Publication/Creation

1890-1891

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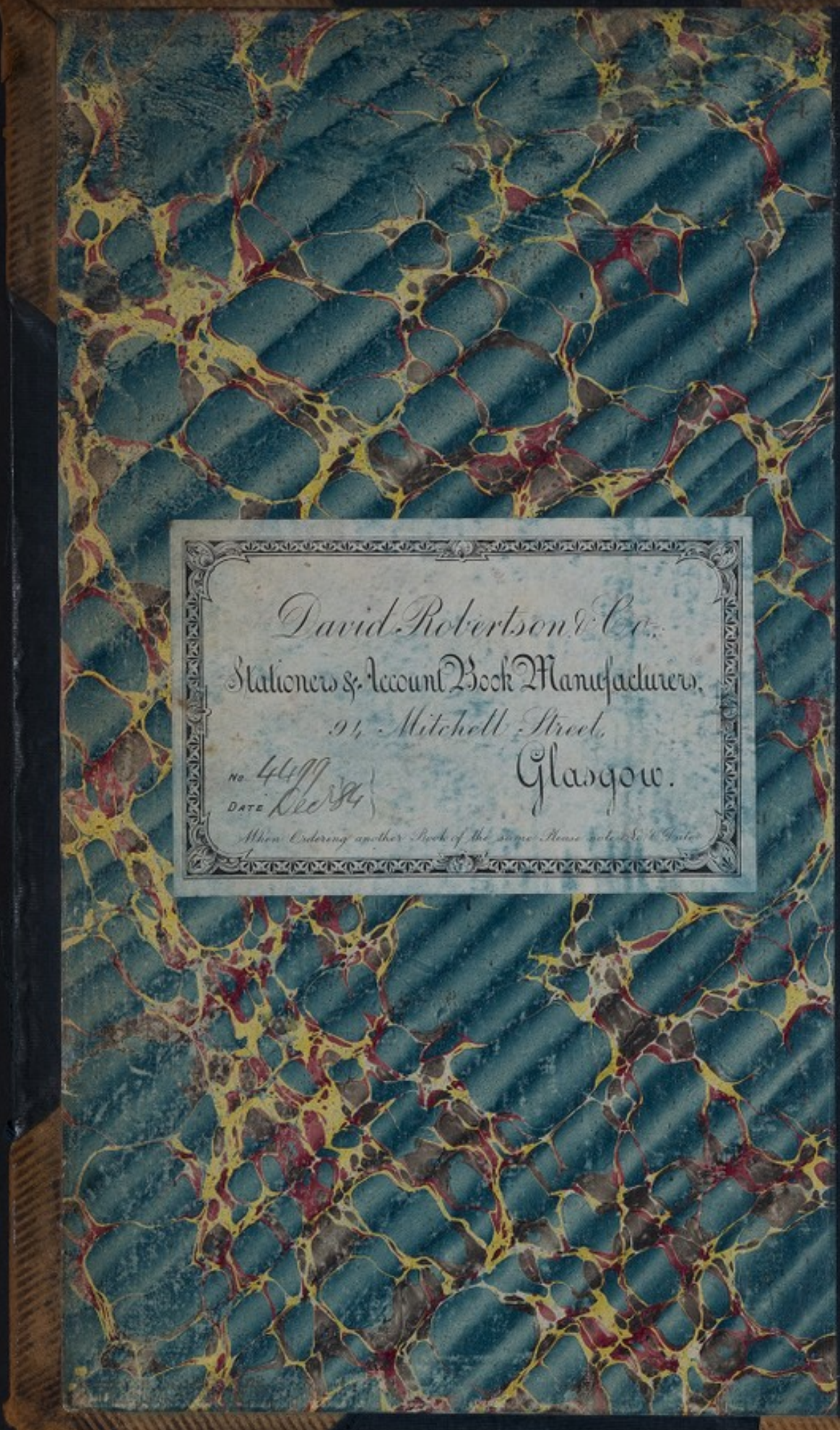
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Edward Johnstone, 26.

Admitted 25th April 1890

Pauper chargeable to New Monkland.

He is 26 years of age single and a miner, residing at 98 Beach St, airdrie. He has been insane for an uncertain period and the cause is unknown. This is said to be his first attack. It is not known whether he is epileptic, suicidal or dangerous to others. No N.P. Statement certificates state that he talks incoherently and often to himself, laughs unmotivatedly without cause and has delusions e.g. magpies he is dying. His father states that he does not sleep at night and that he indulges in filthy and disgusting habits

On admission he is quiet saying that he is resigned to his death which, with the illness he has, must come soon. He is very unhealthy looking being anaemic & his face sketchy and earthy looking.

26th Slept some hours last night and was quiet. An examination of his chest to day is negative. Urine non-albuminous.

28th Talking very freely to-day. Puts his hand on his chest & says it is very sore. Says also his head is sore and is talking very incoherently. Slept well last night & is feeding fairly well. To-day he is put on Cod Liver Oil and a bitter tonic —.

May 6th a lazy hypochondriac complaining about pains here & there but mostly in the gastric region. His complaints however are not accompanied by the amount of depression typical of melancholia and he can smile at his own woes. He eats and sleeps well and is sent out to work in the grounds. His expression is vacant and his eye large & prominent.

Edward Johnstone
cont^d

Physical examinations fail to make out anything in his chest and one is forced to the conclusion that there is no physical basis to his troubles. —.

May 13th Improving distinctly mentally & physically. Still with the delusions regarding his physical health. Puts his hand on his chest & moving it vaguely about says the pain is there &c. Has a capital appetite & sleeps well. Still drowsy of aspect & lazy of habit. —.

9th June. Brightening up though very slowly. Working now in the Gardens, and with a decidedly improved physical condition. In aspect he is very heavy featured with a low and receding brow and heavy eyelids. He speaks less now about his imaginary ailments but that may be because to do so he gets no encouragement. Sluggish in his walk & conversation and when roused even in an unpleasant manner slow to show resentment. Sleeping well at night and with a splendid appetite. There is nothing else new to note in his condition mental or physical.

13th June. This forenoon when patient was beating carpets he escaped on the pretence of going to pass water. He got safely over the wall but was seen by some strangers who followed him & informed 2 policemen. They apprehended him but when bringing him back he made a rush & again escaped. This took place at the Canal and in escaping he tripped falling into the Canal. He was fished out & brought back to the Asylum. It was found that his left collar bone was broken and there were some slight scratch wounds. He says he was anxious to get home and he had no suicidal inclinations. The fractured bone is put up in suitable apparatus & the head wounds dressed.

Jop. H3.

Frederick Fowle Burns
admitted April 25th 1890

Patient is 21 years of age, single, a clerk, & belongs to the Established Church. He is admitted at the instance of his father into the West House.

This is his first attack of insanity & it has lasted 2 months. The alleged cause is bodily weakness & probably overwork & anxiety about his business.

He is not epileptic but he is dangerously both suicidal & homicidal. There is no H.P.

The medical Certificates bear that he is very much excited & talks in a rambling & incoherent manner: that he is (in his own confession) subject to outbursts of violence & commits acts in obedience to commands from God.

On admission patient was very much excited. broke a pane of glass in the waiting-room while talking to the Doctor & his father. His reason for doing so was that the Doctor refused to answer him a question evidently not considering him sane enough to ask one.

He is a strong & well developed muscular boy. He is naturally a very energetic & hard working fellow never being idle but filling in his leisure with volunteering & athletics especially Cricket.

For the past two years he has worked

late at his office on an average four nights in the week. He used also to take home work with him. He had more responsibility than one of his age normally has & his work caused him a good deal of anxiety.

Previous to two months ago however his friends noticed nothing wrong with him: he was troubled however with headaches. At that time he had a severe attack of pneumonia in the course of which he lost his consciousness & was very violent at times & had was very restless & talkative. He had communings with God at that time & heard God's voice speaking to him. On recovering from his pneumonia his mind also improved but he had several attacks of violence & threatened his friends.

On admission he was quite frank in his conversation & seemed to realize where he was & why he had been brought here. He was very excited nevertheless & in a few hours after admission he attacked an attendant. Later on he described the struggle as though it had been a joke & he was quite proud at having required several men to overpower him.

His pupils were equal & reacted. His tongue was somewhat furred &

Fred. F. Burns
Cont.

trembled slightly. He took his meals without difficulty & seemed to enjoy them.

Ap. 26th Patient slept little last night & was very noisy restless. He broke a dresser in his room. He is somewhat pale and so excited. He states he heard God's voice in the form of an "echo" in his room whenever he awoke. His conversation is open & he talks freely about the other patients. He is to have a purge today.

27th Patient was again noisy last night but slept after 12 o'clock. He vomited twice today during the night. He is looking feeble today & is much quieter & talks in a less rambling fashion. He is taking his food very well.

28th Patient slept well last night & is very quiet & always depressed looking this morning.

29th Again noisy restless last night but sleeping at intervals.

May 1st For last two nights patient has slept well & today is much improved & taken up to F & G Gallery. He still hears the Commands from God but thinks it quite possible that his ears may be deceiving him. Today he states that he wishes to be a missionary. The place he is to go to is Abyssinia as he has been called there.

His attention had been arrested in the news-papers by news from the East coast of Africa in connection with Mr. Stanley's return. One of the other patients had been talking about King John of Abyssinia. The next game at draughts which he played was finished with one "black crown" left on the board. This he interpreted as referring to King John & his black subjects who were to be the first objects of his missionary zeal.

He is able to talk in a connected way about his business & other subjects but has curious ideas of his relationships with other people. His sympathies with them are brought about by means of an electrical current flowing from him to them & vice versa. He acknowledges that his ideas on this subject may be foolish.

May 5th Today went out with party to work in the garden.

9th Patient enjoying his garden work greatly.

15th Till today patients progress towards recovery seemed to be steady. This morning however there is a change in his appearance. He looks as though there was a cloud on his mind but when questioned says he is feeling very well both mentally & bodily. He admits that he did not sleep well having been kept awake by a noisy patient in a room below his.

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7

David Carmichael.
admitted Apl. 28th 1890.

Patient is 46 years of age, single, a tradesman. belongs to the Reformed Presbyterian Church. He is admitted at the instance of his brother to the Asylum.

This is his second attack of insanity the first having been 10 yrs. ago & having passed off in a few weeks.

The present attack has lasted six months during which he has been in the Dumfries Infirmary. He was discharged from there a few days ago under the belief that he was recovered.

The alleged cause is "youthful indiscretion".

He is not epileptic or dangerous to others but he has threatened altho' never attempted suicide.

There is no Known N. P..

The medical Certificates bear that he labours under delusions that he has to undergo punishment for the sins of his youth, & that his life is nearly at an end on that account: that people shun him in the street owing to his conduct being publicly known: & that patients at the Dumfries Infirmary shunned him owing to his having sensual sensations & asserted that he did harm to the Institution.

On admission patient was very quiet & depressed but on being questioned admitted the truth of the above statements.

He asserts however that he should not be here at all but in jail where he should resume the punishment which is his due.
He is in fairly good bodily health but seems to be a man of soft fibre, & one that yearns

[illegible] slept well last night but still insists [illegible] that he should be in jail.
[illegible] depressed & only speaks when spoken [illegible] He never by any chance speaks [illegible] speaks. His movements are very [illegible] rarely reacts of his own accord. [illegible] walking.
[illegible] still persists in his delusion that [illegible] be in jail. He says that he knows what he heard the patients saying [illegible] es in the Erichson. Only takes his [illegible] h a great deal of pressing.

May 4th [illegible] patient refused to take his dinner & accordingly preparations were made to feed him with the stomach tube. This however supplied & patient gave in & said "I think I shall take it myself." Did so & brought tube back. Tomorrow he is to go out & work in the garden.

May 9th Since going out to the garden patient has improved somewhat in appearance: his face has a better colour & his muscular tone is increasing. He is working steadily & well in the garden. Mentally he shows no improvement.

to p. 11

7

David Carmichael.
admitted Apl. 28th 1890.

Patient is 46 years of age, single, a tradesman. Roman Catholic. He belongs to the Reformed Presbyterian Church. He is admitted at the instance of his brother to the West House.

This is his second attack of insanity the first having been 10 yrs. ago & [illegible] off in a few weeks.

The present attack has lasted [illegible] -ing which he has been in the [illegible] Dromore. He was discharged [illegible] few days ago under the belief [illegible] recovered.

The alleged cause is "[illegible]" He is not epileptic or dangerous but he has threatened altho' [illegible] suicide.

There is no Known A. P. [illegible]

The medical Certificates [illegible] labours under delusions that he has to undergo punishment for the sins of his youth, & that his life is nearly at an end on that account: that people shun him in the street owing to his conduct being publicly known: & that patients at the Richhorn District shunned him owing to his having criminal tendencies & asserted that he did harm to the Institution.

On admission patient was very quiet & reserved but on being questioned admitted the truth of the above statements.

Patient's friends [illegible] informed of his admission.

Apl 29.

He asserts however that he should not be here at all but in jail where he should resume the punishment which is his due.
He is in fairly good bodily health but seems to be a man of soft fibre & somewhat nervous.

29th Patient slept well last night but still insists this morning that he should be in jail. He is very depressed & only speaks when forced to do so. He never by any chance speaks to other patients. His movements are very slow & he rarely walks of his own accord. about the gallery.

30th Patient still persists in his delusion that he should be in jail. He says that he knows this from what he heard the patients saying while he was in the Cricketon. Only takes his food with a great deal of pressing.

May 4th Today patient refused to take his dinner & accordingly preparations were made to feed him with the stomach tube. This however supplied & patient gave in & said "I think I shall take it properly" & did so through mouth perfect. Tomorrow he is to go out & work in the garden.

May 9th Since going out to the garden patient has improved somewhat in appearance: his face has a better colour & his muscular tone is increasing. He is working steadily & well in the garden. Mentally he shows no improvement.

to p. 11

3 Patient's opinion of himself erroneously written

Edward Harding.
admitted May 5th 1890.

Patient is 36 years of age, married, an hotel-keeper & a Protestant. He is admitted at the instance of his brother-in-law into the West House. Address is 18 Leven St. Peckham. This is his first attack of insanity & it has lasted several weeks. The alleged cause is intemperance. He is not epileptic or suicidal but he may be dangerous to others. There is no H.P.

Patient is said to have had D.T. some months ago. A week or two ago he had a fortnight's hard drinking during which time he was really sober.

For Phys. Cond. see next page ×

He is in a very weakly condition being very emaciated and anaemic. He is far advanced in Phthisis there being cavities in both his lungs at the apices & numerous muco-crepitant râles + choking all over the chest: there is also a great deal of crepitation heard at the bases of both lungs: Cough is not very severe & spit is not profuse & mucopurulent & frothy in character. There is a good deal of fever (see Temp Ch.) Patient's tongue is furred & dry moistly tremulous & slightly covered with a white fur. Pupils are equal & not dilated or contracted markedly.

Appetite is weak & very capricious. Mentally he is very excited & talks in a

loud tone + somewhat lecturing manner. His language is vehement + rambling the greater part of his conversation consisting of oaths + obscene names which he launches at people with no discrimination or reason. He screams + curses till he is quite exhausted + has to stop for lack of strength.

* * * *

× The medical Certificates bear that he has delusions: fancies he is a son of Baron Rothschild + very wealthy: that his brother-in-law owes him six millions of pounds: that all his food is poisoned + causes his stomach to burn: that people are watching him all night. He has also been very violent throwing his Chamber utensil through the windows + his watch into the fire: broke glasses + dishes + struck his wife several times alleging that she + her mother were prostitutes.

* * * *

May 6th Patient slept none last night + was very noisy cursing + swearing at any + every thing. He insisted that his food was poisoned + causing pain in the stomach. His bowels are acting freely but there is no diarrhoea. This morning he is looking paler + also fagged out. He refused to take nourishment during the night. Today he is still excited + using as coarse language as ever. He has a great animus against his brother-in-law for getting him [interlined] confined here.

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David Carmichael

Cont. from p. 8

May 9th His delusions regarding his unworthiness are as strong as ever. Yesterday he was found trying to paste a piece of paper on to his brow, bearing the inscription "Keep off Sin unclean."
He is sleeping quietly & well.

" 15th He is still in an utterly false position & should be in jail. He is working very well in the garden & assists a good deal in the Gallery.

June 6th Patient is improving somewhat in physical health but mentally he is no better. His delusions as to his unworthiness are very fixed & he constantly thinks & talks about them. In the house & outside he stands apart from the other patients as that they may not suffer contamination. Lately he wrote a letter to Mr. J. which has been placed along with the others at previous entry.

" 26th Patient's mental condition now shows some signs of improvement. He can now talk with much greater ease & he is to talk & his attention is much more easily kept up. He is not so self-centred & can now converse on other subjects than his own wickedness & the "falseness of his position." He has been exercising his powers as a "raconteur" greatly for his own & his fellow patients benefit.

Physically, he is still showing improvement & his cheeks have now assumed a healthy red colour instead of their former yellow pasty look. He is a most diligent worker both in the garden & in the house. While employed he seems to be happy & to entertain a good opinion of himself. When idle he is still apt to keep apart from the other patients but this insociability is not now so marked as formerly.

July 8th Patient is not now so well as at last note. His delusions are still fixed and are again brought into prominence by patient. The tendency to keep himself separate from the other patients is again a marked feature in his case. His whole time when not working seems to be occupied in brooding over his false position. His bodily health continues to be very good.

" 28th Patient was today taken home by his brothers for a short trial.

30th Patient returned today. His friends found him quite intelligent but with his delusions firmly fixed.

Aug. 20th Still no improvement in patients condition. His constant cry is "How can I escape from my false position?" & this seems to be his one thought all day long.

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Edward Harding
Cont. from p. 10.

May 6th. He starts out for some attention & threatens to go away to another place unless he gets it.

May 7th. Again a sleepless night save for a few short intervals. Very restless & talks. tire: took beef tea & milk however. At times he imagines animals are creeping over his arms & he brushes furiously at them with his hands. When convinced that there was nothing on his arms he swore that had gone down to his feet & into his hair. He complains also of pain over his bottock which was removed however by a enema. Still evening today.
He is today put on Scotts treatment & is to have cold during the night.

May 9th. For the past two nights patient has hardly slept. He has had m 40 of Hyoscine each evening but it seems to have no effect on him.

" 10th. Today patient saw his favourite sister. He was able to recognize her but could not carry on any conversation. He was quite incoherent & at times abusive. His incoherence is more like that of delirium of bodily illness than of an insane person. He has to a great extent stopped abuse & now mutters to himself in a low tone. He is getting weaker & this morning

his bed was wet. He is now getting a little sleep by using Sulphonal gr. X to. He takes very little food & requires a good deal of coaxing. He is having soup & stimulants during the night.

May 16th Since last note patient has got much weaker & has been wet every night. He has not as yet lost control over his sphincters. His appetite is failing more & more & Mentally he is much quieter & has now given up his Coarse & abusive language. His conversation is becoming more coherent. He displays great belief in his own powers of recovery & is sanguine of being better & getting out tomorrow.

May 24th Patient is making no progress towards bodily recovery. He continues very weak & has to take only the lightest of food as diarrhoea is threatening. Mentally he is somewhat better. He continues to keep quiet & talks in a rational & coherent manner. He displays however great hope as to his ultimate recovery ~~which~~ unfortunately merely the "spes phthisica". He is to a certain extent under the influence of Sulphonal & is consequently getting a few hours sleep every night.

June 2nd Patient is much weaker since last note. Diarrhoea which was then threatening has set in. Today however it has been more moderate. Patients condition is as bad as ever. He has now no strength to cough up the sputum which is very profuse.

to p. 23

Fred. F. Burns.

Cont. from p. 6.

May 15th — Since then this however he still retains knowledge. He is greatly enjoying his work in the garden as also cricket which has now been started.

" 24th — Since last note patient for a time looked as if about to make steady improvement this however is not taking place. He still labours ideas as to the mutual influence of the patients on one another causing one another discomfort & this without any conversation or action taking place. Thus he says one particular patient can by merely passing him in the gallery throw a shade of darkness over him. He will allow himself to be argued out of these beliefs but only after some time.
He is somewhat depressed, his face having a pre-occupied & gloomy expression. When questioned as to the cause of this he says there is nothing wrong with him. He is sleeping fairly well but down in No. 1 Gallery.
He is working regularly in the garden & takes a great deal of interest in the different games.

June 6th — Patient's condition continues still to be very unstable. At times he is pretty well & again seems very depressed & only talks with the greatest reluctance. Such a fit of depression he has had for the past two days. The cause of this has in all probability been the visit of his brother whom he then saw for the first time since his admission

here. He has been gloomy & somewhat repellent in manner & has taken no interest in the other patients but sat apart from them. When asked as to his condition he as usual answered "all right" but after pressing admitted his having severe headache for which however no satisfactory reason could be got. He seems to realise very sparingly that he is in an Asylum & that his mind has been disturbed. He also seems to be conscious of his unstable condition & how this tends to lengthen his stay in the Asylum necessary.
Apart from his headache he is in good health.

" 9th Today patient is confined to bed with a subacute attack of Rheumatism. Both ankles & Knees are somewhat swollen & painful to touch. His skin is very moist & the sweat has the characteristic sour smell. He is being treated with Sod. Salicylat.
This attack has been brewing for some days & his mental condition has been affected thereby. He has been sullen & repellent in manner & two nights ago refused to take off his clothes which were therefore removed by the attendants patient struggling against them.
Today he is still somewhat repellent in manner but will answer questions as to his condition. He is dull & depressed.

to p. 87.

Arthur Richardson, 674

Admitted 18th May 1890

Female patient admitted today to the East House. She is 54 years of age, married and an iron-plater residing at 18 Peterhead Road, Springburn. She has been insane for 8 weeks. This is her first attack and the supposed cause is injury to the head. She is not epileptic or suicidal but may be dangerous to others. No V.P.

Medical certificates bear that she is incoherent and imagines her wife has been unfaithful, that her family have squandered her money. She has threatened violence several times.

The following information is obtained from her son. Her father he says, has never been a temperate man but was not exactly a drunkard. He was much from home working at contracts &c and has had few illnesses. Twelve years ago he got his right knee broken, 11 years ago the ankle of the same side was dislocated and 9 mos ago he got both bones of the right leg broken below the knee. He has been, for some months past, troubled with chronic Bronchitis but has never had Rheumatism or indeed any other serious illness.

The mental derangement under which he labours is said to be the result of an accident received 8 weeks ago. He was ascending a ladder when his leg failed him & he fell back to the ground a distance of 9 feet. his head striking the edge of a concrete wall about 18" high. He asked for a drink of water but soon became insensible and was taken to the Edinburgh Royal Infirmary where fracture of the base of the skull was diagnosed. He was discharged from that Institn after 21 days residence. During his stay he was rambling in his conversation and incoherent but was not in any way violent. After coming home he

Arthur Richardson
cont'd

was very irritable, would not do as the Doctor wished and com-
-plained much of pain in his back & ribs

His son also states that 2 days before the accident mentioned he nearly fell off a scaffold on which he was working. He said a great pain came into his leg & a mist before his eyes and he was useless as if he had not been sitting he would have fallen. His son says that the same fall which injured his head injured also his back.

following facts are supplied by the House Surgeon Edin R. Inf. Had bleeding from the right ear on admission & fracture of base was suspected. He was deaf in his right ear when in the House and times dazed, refusing to answer questions and not seeming to understand what was said to him.

His temperature chart while in the Inf. is appended.

On admission to the Asylum he is seen to be a strongly built man of average size and of dark com-
-plexion. Mentally he is stupid giving disconnected answers to questions and not seeming to know what he is saying or doing.

A physical examin. shows that he has a double inguinal hernia, a thickened & stiffened right knee joint. No evidence of cardiac valvular disease and no organic disease noted elsewhere.

20th Albany. Has been sleeping well at nights and is quiet and easily managed. Complains of pain in the right infra axillary region especially on moving about but nothing can be made out on examination. A pessary to give his side support is put on. Mentally he is better more coherent and capable of speaking intelligently. Some of his previous obtuseness may be due to his deaf-
-ness, both ears being affected.

Jop. 21.

TEMPERATURE

Alexander Borland.

Admitted 29th May 1890

Private patient admitted to day to the East House. He is 58 yrs of age, married, and an insurance-agent residing at Tennick Asylum. He has been insane for 4 mos but has been mentally affected for 4 years. This is his first attack. The cause is put down as mental strain acting on a brain hereditarily unstable. Not epileptic or suicidal but dangerous to others.

H.O. His father for the last 8 yrs of his life was mentally weak, dying from softening of the brain but was over 70 at the time of his death. He drank very heavily. No other evidence of inherited neurosis

Medical certificates bear that he labours under great mental excitement and at times is violent, constantly talking incoherently and does not know what is said to him.

His wife gives the following information regarding his illness

about four years ago his memory began to fail and at that time he was much worried about some one for whom he has become security. He also began to omit words in writing & could not give correct change in accounts. His memory got worse gradually and he lost the power of writing and the lines ran together when he read. about a year ago his speech became thick and stunning and his wife noticed how tremulous his tongue was. In January last he awoke one morning with a great start and then his intellect was first noticed to be obviously disturbed, as he became very excited, shouting & threatening his wife with violence. This was all the more marked as his wife states that when well he was a singularly sweet tempered man. at no time has he had any grand delusions Since that time he has got worse becoming more restless and unable to give continuous attention to anything. Of late he has become unable to attend to his natural

Alexander Boreand

cont^d

wants and has been wet and dirty

On admission he is very restless and excited refusing to sit still and wandering thro the ward clutching at whatever he sees. When put to bed he buries his head beneath the clothes, turning over on his knees and elbows and butting his head on the pillows. Inclines to bite and strike out when spoken to but speaking little. Muttering away to himself but what he says cannot be made out. Tongue on request is protruded for an instant but he is incapable of keeping it out and withdraws and protrudes it with great rapidity. Pupils equal, moderately dilated and responsive. A physical examination reveals no lesion but in bodily condition he is thin and has had a hard life.

28th. Slept about four hours last night and was restless the remainder of the night. He did not get out of bed but muttered away and tossed about, not making much noise but resting little. To-day he is in much the same condition restless and excited, clutching everything he comes in contact with, refusing his food and his conversation quite unintelligible. He is put into flannel clothing to-night.

29th. Slept 3 hours last night and was rather quieter the remainder of the night. To-day he has taken some breakfast and his bowels have moved. He is not much quieter yet and is ordered 35 grs Sulphonal to-night.

3rd June Calming down somewhat. Less restless and not so constantly working with his hands. Still quite incoherent in his conversation but taking his food better and listening when spoken to. On paying the morning visit he is usually found standing in the middle of the room, muttering to himself with an very anxious look on his

To p. 25

Arthur Richardson

cont'd from p. 18

June 8th The mental and physical conditions of this patient are improved and the improvement has been gradual but progressive. He is still far from well in his mind, but he shows in his conversation and conduct more rationality than has yet been evident in his case. He now complains little of the pain in his side and acknowledges that he is better but he says things are not going well at home and is anxious to get out to work. There is a facility about him pointing more to a weakening of brain activity than to any irritative changes and he is easily led in conversation from one subject to another. He is free from ascertainable delusions, is easily managed & gives little trouble. His bodily health is certainly improved.

30th Practically unchanged. anxious, to get away but showing in his conduct & conversation a distinct brain defect. Physical health improving

July 11th Unchanged.

August 12th Probably as well as he ever will be. He is weak-minded and silly but in a conversation with him beyond a certain facility and rambling in his conversation it is difficult to say that there is anything wrong with his mental condition. He is always asking to get home and avers that he is now as strong as ever he was & certainly he has gained a great deal since he came here. He still complains of pains in his side but nothing can be made out on examination.

August 16th Taken home to-day by his Wife

Discharged Relieved

Thomas Hoy.

cont: from Vol. III p 346.

1893

June 30th — He is in much the same condition and works in the garden. As a rule is quiet.

Dec. 30th — He is a melancholic dement. quiet and civil but of solitary habits and disliking any company save his own. B H & C. good.

1894

December 31st — Throughout this year there has been no change in his conditions. His habits are as solitary and unsocial as ever and his health remains good.

1895.

July. 17. — Transferred to Hartwood.

Relieved.

Edward Harding.

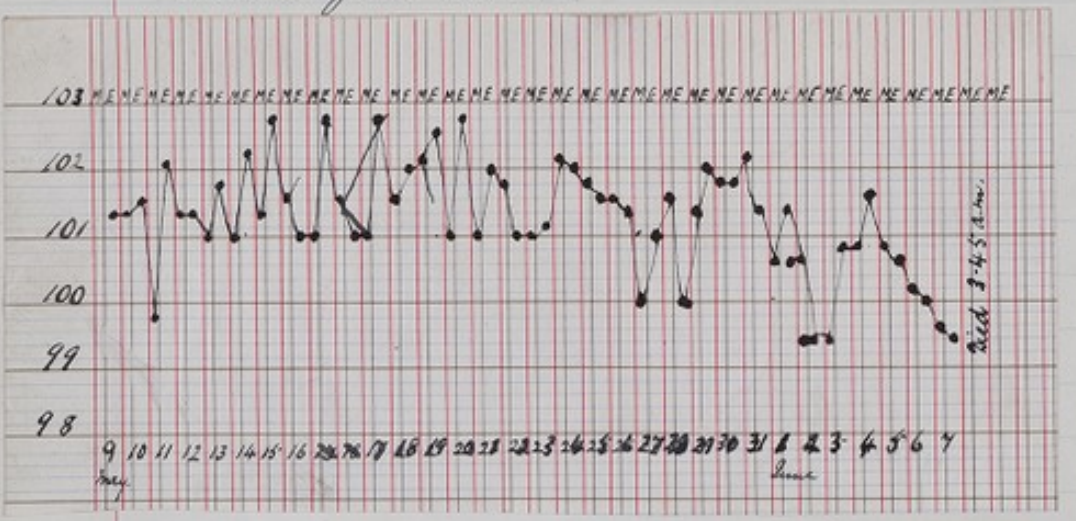
Cont. from p. 14.

June 2nd — He is very restless at night & occasionally a low muttering delirium sets in along with illusions as to different objects in his room.

June 7th — This evening pat. is much weaker having seen both his wife & brother-in-law in the course of the day. He is troubled more than ever by his dyspnoea & is inclined to be sick. His pulse is very small & watery. He has been able to take very little nourishment all day.

June 8th — Patient died somewhat suddenly this morning after passing a very restless night. The difficulty of breathing got much worse during the night & patient died while sitting up in bed trying to get breath.

Discharged. Died.



John McKennie Hamilton

cont: from Vol. III p 5-32

1892

Dec. 16th His manner is variable but when he talks he does it pretty well. He knows how long he has been here and demands the reason why he was sent here and why he is kept here. He has delusions about his wife going with other men so much so that his wife is afraid to come and see him. B H & C. good.

1893

June 30th Unchanged mentally. Bodily he is rather thin. He works regularly in the garden.

Dec. 28th Quiet, decent and civil he proves very useful as a worker in the garden. He never complains nor grumbles.

1894

December 29th His health is good and he works regularly in the garden but he has to be managed with tact. He will not do anything if he is commanded to do it but will work willingly if asked. He is of a very suspicious turn of mind.

1895

May 27. Transferred to Govan to Lanark District asylum at Hartwood ? Relieved

Alexander Borland

From p. 20.

face and working his hands in an aimless fashion
Tongue somewhat steadier, pupils moderately dilated.
Knee jerk rather sluggish but equally so in both knees. No
ankle clonus. Plantar reflex brisk. His walking so
far as can be judged is fairly good and there is no
ocular involvement.

9th June. Continues to subside and now fairly quiet though
still with the restless and rather frightened look. Capable
of replying to a question but the answer is very slow
and often very incoherent. He is now sleeping better
at night and only occasionally requires a hypnotic
He is still slow at taking his food requiring a good deal
of persuasion but is taking it better on the whole.

30th June. Now quiet and rather more reasonable, but with many
evidences of serious brain change. Great amount of
tremor in his speech and hesitancy in all his actions
Pupils equal and moderately dilated. Locomotion not
affected. For some days he has to have a catheter passed
but now he has control over his bladder and is also
sleeping well at night without hypnotics

11th July. Getting worse. a good deal of difficulty is experienced
in getting him to take his food, even tho he is fed
with a spoon. He is also getting very stupid and his
hearing is getting worse. Resistive not probably of his
own will but probably because he does not under-
-stand what he is wished to do. Sleeping indifferently
and not gaining in flesh. Speech very hesitating but
not characteristic of G. P. and pupils equal & mobile

13th August. Getting obviously thinner and going down-hill fast in
spite of all that can be done. a case of G. P.

Alexander Borland

cont'd

undoubtedly the without some of the most characteristic symptoms of the disease: His pupils while equal show difference of light & accomodation reaction and all the muscles of mouth & lower face are very tremulous. Speech muscles have now become so in-co-ordinated that his language cannot be understood. Sleepless often and resistive. Muscles as regards co-ordⁿ of limbs little affected, but paresis of same parts distinctly increasing. –

August 28. Developed a left haematoma auris about 5 days ago. on its first appearance it was promptly blistered and this has modified its course. Mentally he is getting much weaker and will soon become helpless. He has to be fed. requires constant attention to keep him clean & it is impossible now, to get him to speak an comprehensible sentence.

Sept. 17th. The Haematoma ruptured some days ago and is now beginning to shrivel up. Otherwise he is much the same. Speech now very indistinct and of late he has been very restless at night and great difficulty is experienced in getting him to take his food.

October 15. Getting weaker more stupid and deeper sunk in mindlessness. Requires great attention and care and the disease is evidently rapidly advancing.

October 31. Increasing paresis is what has to be noted. with an amount of restlessness & continued loss of flesh. Requires much care & attention.

Nov. 25th. To day taken home by his wife & discharged.

Relieved.

John Hart. 32.
admitted June 13th 1890.

Private patient admitted to-day to East House. He is 32 yrs of age, single, and was a clerk till 2 yrs ago. He resides at 40 Princes St. Pollockshields
He has been insane 10 days. This is his first attack. The cause is put down to want of occupation. He is not epileptic or suicidal but might be dangerous to others.
Distinct H.P. a sister being at present in this asylum.
Medical certificates bear that he is under the influence of delusions, says he is mesmerised and is followed by people and has many other delusions

It seems that he has always been nervous and in infancy he had fits. Lost his first situation through negligently and since then he has been employed doing various things, having been traveller, warehouseman &c.
Nothing wrong was noticed till about 10 days ago when he left the house at night and returned with old paper which he said was money. Thought he had won a purse offered by a firm of tradesmen. He afterwards became very excited and last night when delusions of persecutions arose. To-day in the streets he became very excited and was taken to West. Police office —

14th June. Slept a few hours last night and this forenoon is described to have had a hysterical fit. He became very excited and in a little broke down & wept. During the remainder of the day he was rather sullen, sitting with bent head & refusing to speak.

18th June. Is rather better. Has had no excited turns of late and gives no trouble in that way. Requires to be pretty sharply spoken to ere an answer is got from

John Hart
cont'd

him. Sleeping well at night and taking his food.

30th June. Is some better being rather more cheerful and more civil in his answers. Still inclines to sit and brood but now resents being shaken up and sharply spoken to. Sent out to day to work in the Grounds.

11th July. In a very indifferent state of health being troubled with a cough especially at night. A physical examination of his chest is negative giving no evidence of disease but showing a weakness of R. etc. all over and a tendency to "pigeon" chest. He is still rather sullen and not at all frank. Does not care much about being energised. Declines to speak about his delusions but wont deny them.

12th Aug. Out again working and gaining a little flesh but mentally still very uncertain. Slow in his actions and speech but without symptoms of organic disease. Inclines to brood a great deal and needs continual rousing

12th Sept. Just the same.

October 14. Has had an attack of excitement lasting over a week and requiring his confinement to Infirm Ward. He is now somewhat quieter and really seems mentally better

October 31 Considerably better and now laughs when told of the foolish things he did a fortnight ago. It would seem that he really is a little better mentally and certainly he has improved physically. Nothing else to note. Out working again in Grounds.

Nov. 18th Has again had a relapse. He is very rebellious & blustering in his manner & one day threatened to strike.

to p. 171

James Alexander Leitch

Cont. from Vol. III p. 564.

June 13th The writer saw him about 7 minutes after the fit commenced & the convulsions had then ceased. Patient's face was quite livid & his breathing distinctly Stertorous there being puffing of the cheeks but however more marked on one side than the other.

This state of face & respiration gradually passed off in about 10 minutes time & patient became partially conscious but was dazed & dreamy for half an hour after.

On being questioned he admits that he passed a small quantity of blood yesterday per rectum but asserts that his mine was quite clear.

14th Today patient is humbly again & full of excuses & explanations of his illness last night. "I was tired & fell asleep & the attendants mistook it for a fit" & on being informed that this was not right he maintained "That he had been overcome at the thought of his friend's great Kindness to him". His mine today is very muddy & contains a heavy deposit of amorphous urates 1030 acid: contains a trace of albumen also a considerable quantity of blood.

17th Patient has now changed his argument & admits that he really had a

fat has benefited greatly by it. His mental condition continues to be exalted as his conversation shows.
There is now some slight inequality of the pupils the left being the larger. It is doubtful whether this is a constant sign.
Patient is very restless & marches up & down the gallery continually.
The urine still continues to be bloody but a note as to his urine will be answered.

23rd Patients mental exaltation has increased since last note. He has been full of various projects for making money without speculation. In the event of a European war breaking out he is going to make a large fortune by simply saying a word to one of the Rothschilds. Last night he slept very little. He informed writer that he was "God Almighty" & that he had taken several of the attendants up to heaven in the course of the afternoon. Though very excited & talkative his language was coherent. After informing writer as to his divine being he admitted that he was Jas. R. Leitch & thereafter gave an outline sketch of his life from boyhood up to his entrance to Gartnavel & portions in here. various incidents which occurred during his stay

James A. Leitch.
Cont.

June 26th — Today patient is much more subdued in manner & conversation. He tries to excuse what he talked of when excited & says that it was all nonsense that he talked & that now he is quite well again. The inequality of the pupils noted a few days ago is still present.

27th — Today patient is calmer but very restless. He is evidently trying to restrain himself. He says he is going away with his wife for a holiday.
Last night he was found masturbating & he slept very little being talkative & excited.

July 19th — Since last note patient has been in a very exalted condition. He has repeatedly assumed the names of Christ. God & the Duke of Buccleuch. He has been making millions of money on the Exchange in Leith. He is generous to a degree & is going to found an Asylum in Paris for 50,000 patients of which Dr. G. is to be Superr. & the writer an Assistant with £2500 a year. He states that in consequence of his being ill God has given him power to communicate with his wife without requiring to see her. He has been intensely erotic & has been masturbating frequently.
He has been suffering to some illusions of taste & smell & was quite certain for a day

...of a consciousness. The plan adopted...
...ning his food but ...vent him talking ...
...to now well marked ...des book in his ...inist tremor when ... condition of his ...ariable emotion... ...ion of his fait... ...ves fibrillar tremor. ...ly food brought he ...a little wing so ... masturbation. His ...lth is essentially ...

From the annexed note of his urinary condition it will be noticed that the attack of haematuria which was passing off as the urinary note begins was coincident with a congestive attack.

The second attack commencing on June 22nd was accompanied by great mental excitation & restless excitement which however decreased greatly at the same time as the blood disappeared from the urine.

The continuous or almost continuous presence of oxalates is explained by Stumbub forming part of the diet at present.

6 p. 65.

James A. Leitch.
Cont.

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He has been suffering too from illusions of taste & smell & was quite certain for a day

Jas. Alex. Leitch. Urine.

Date	Appearance.	Read.	Sp. Gr.	Albumen	Blood.	Microscope etc.
June 15th	Muddy smoky: mucous dep.	1020	ac.	distinct trace	present with Guaiac test	numerous blood cells & oxalates. (Pap. tried to doctor the urine)
16	Pale, clear	1011	ac	—	—	—
17	Pale, clear mucous dep.	1015	ac.	—	—	few blood cells & epithelial debris.
18	Amber col. powder sig dep.	1020	ac.	—	—	oxalates & doubt. pus cells. no blood discs.
19	Pale straw col.	1023	ac.	—	—	oxalates, debris & doubt. blood cells.
20	Pale straw: mucous dep.	1020	ac.	—	—	debris granular casts: no crystals or cells.
22	Dark red: heavy dep. of blood		ac.	in abundance	in abundance	numerous corpuscles. numerous corpuscles & crystals.
23	Bright red: heavy blood dep.	1025	ac.	present	plentiful	numerous corpuscles.
24	Dark red: heavy dep.	1032	ac.	present	plentiful	numerous blood cells & oxalates.
25	Red & cloudy but dep. X'day		ac.	present	fair qty.	blood cells & oxalates.
26	Red smoky powder sig dep.	1012	ac.	present	(y'day.	blood cells & oxalates.
27	Clear, faint mucous dep.	1022	ac.	—	—	epithelial debris: no blood cells or crystals
28	Pale, faint mucous dep.	1012	ac.	—	faint trace	few blood cells & oxalates.
29	Clear, shiny col. powder sig. dep.	1030	ac.	—	—	—
30	Pale straw col. slight dep.	1014	ac.	—	—	few pus cells & epithelial debris
July 1st	Pale straw small mucous dep.	1020	ac	—	—	Oxalates & few pus cells.
2	Pale straw powder sig dep.	1020	ac.	—	—	oxalates & pus cells.
3	Pale straw no dep.	1012	ac.	—	—	epithelial & other debris
4	Dark straw	1020	ac.	—	—	Pus cells & epithelial debris.
5	Pale straw	1021	ac.	—	—	few pus cells.
6	Dark straw, powder sig dep.	1025	ac.	—	—	Oxalates & pus cells.
7	Pale straw slight mucous dep.	1020	ac.	—	—	—
8	Pale straw. slight mucous dep.	1023	ac.	—	—	epithelial debris.
9	Pale straw. mucous dep.	1020	ac.	—	—	Pus cells.
10	Pale straw	1030	ac.	—	—	oxalates & pus cells.
11	Pale straw	1023	ac.	—	—	oxalates & pus cells.
12	Pale straw col.	1023	ac.	—	—	epithelial debris but no cells or crystals
13	Pale straw faint dep.	1030	ac.	—	—	few oxalates.
14	Pale straw heavy powder sig dep.	1025	ac.	—	—	Numerous oxalates & pus cells
15	Pale straw	1023	ac.	—	—	Pus cells & debris but no oxalates.
16	Pale straw powder sig dep.	1026	ac.	—	—	oxalates pus & few blood cells.

James A. Leitch.
Cont.

June 26th Today patie
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or two that he was the object of a conspiracy to [illegible] possession of his money. The plan adopted by his face was preventing his food but this however did not prevent him talking it. The tremor in the voice is now well marked & the ordinary expressionless look in his face gives way to a distinct tremor when he begins to speak. The condition of his eyes is at present very variable & uncertain. There is as yet no affection of his gait. The tongue too only shows fibrillar tremor. His general health is fairly good though he looks pale & worn out a little owing no doubt to his excessive masturbation. His own opinion of his health is essentially optimistic.

From the annexed note of his urinary condition it will be noticed that the attack of haematuria which was passing off as the urinary note began was coincident with a congestive attack.

The second attack commencing on June 22nd was accompanied by great mental excitation & restless excitement which however decreased greatly at the same time as the blood disappeared from the urine.

The continuous or almost continuous presence of albumen is explained by Rhumbub forming part of the diet at present.

to p. 65

William Burgess
admitted June 25th 1890.

Patient is 47 years of age, married, a merchant & a protestant. He was brought here from Ridgepark, Lanark & admitted to the West House. He has only been in this Country a few weeks having returned from New York.
This is his first attack of insanity tho it is stated to have lasted for 12 days although it has been coming on for 18 months.
Naturally he is a man of a happy disposition & always has been healthy. The first symptom of his trouble was his being easily tired out & an extreme lassitude after his return from business. For a time he was able to rouse himself out of this. Latterly however he has become depressed & afflicted with delusions.
The alleged Cause is mental strain from overwork.
He is not epileptic or suicidal: nor is he dangerous to others but at times becomes unmanageable. There is no H.P.
The medical Certificates bear that he has "~~marked~~ delusions, insane abstraction from food & melancholy: complete unfitness to take Care of himself." "That he hears voices ordering him sometimes to go to heaven & sometimes to go to hell".
On admission patient is in a state of partial stupor being with great difficulty

fit to answer questions. He sits in a listless & preoccupied fashion & can only be got to walk by dint of pressure. This is his general condition but it is varied every now & then by the patient's starting up & struggling to get away to various places according to orders given him by voices which he hears. He refuses his food in obedience to similar orders & can only be got to take it by forcing it into his mouth with a spoon. His resistance is in great part passive & not accompanied by violent struggling.
He is a man of good physique & there is no evidence of visceral disease. His skin is of a peculiarly clear colour having a smooth shining & somewhat waxy appearance. His face has a dull & expressionless look the naso-labial folds not being well-marked. A good view of the tongue cannot be obtained owing to patient resisting but it is moist & somewhat furred.
The eyes have a heavy & sunken appearance but there is no inequality of the pupils.
His pulse is 120 soft & watery.
Urine contains a heavy urate deposit but is otherwise normal.

26th" Patient did not sleep at all last night but constantly tried to get out of bed in answer to voices calling him. He has taken a considerable quantity of liquid food today but only by pressure

to p. 39.

John Millar
admitted June 26th 1890.

Patient is 44 years of age, married, a trader
mariner by trade & is protestant.
He lives at 67 St James' Street. Kingston
& is admitted to the Asst House at the
instance of his brother.
This is his first attack of insanity &
it has lasted four days, but patient
has been peculiar for the past four
-night. The cause is unknown
There is no H. P.
The medical certificates bear that he
"left his employment saying he felt
depressed in spirits; that he has led such
an evil life there is no hope of salvation;
he hears people talking to him: he is
very restless & requires two men to
hold him in bed: that he has past
his foot in some strong place & has been
troubled for some time past with
evil spirits.
Patient is naturally a reserved man &
of somewhat phlegmatic temperament.
He was married only 4 months ago & has
been very foolish sexually since.
About a fortnight ago he left his vessel
the "Brinard Castle" saying he did not
feel well. He was depressed in spirits
at this time but the only reason he gave
was about the men laughing at his beard
turning gray. Before his marriage it would

seem that he dyed a part of his beard which was turning grey. It was thought that a change would do him good the was taken to Rotherby where however he got worse & arrived at the state described in the medical Certificates.

On admission patient is in a very low state of health having had no food or practically none for some days owing to his refusal of it. He is somewhat fevered & his tongue is coated with a thick yellow fur, dry & tending to crack. Pulse is 120 regular but weak. No organic visceral disease can be made out. There are some abrasions on his wrists & bruises on his legs.

Mentally he is in a state of stupor & responses to answer any questions & it is only with difficulty that he can be got to swallow any food.

His whole appearance is that of prostration.

27th Patient did not sleep at all last night & was very restless. This morning there is very little change in his Condition either mental or bodily. His urine had to be drawn off by a Catheter. He has had to be forcibly fed by spoon.

28th Patient is somewhat better today but still refuses to take food or to answer questions.

to p. 45.

Fred. F. Burns

Cont. from p. 16.

June 11th The pain & swelling have now in great part gone. Patient however is still in bed. Mentally he is much as at last note though not quite so repellant in manner. He was noisy & talkative last night getting very little sleep.

" 18th Patient has now got over his rheumatic attack is greatly improved mentally as well as physically. He is however still dull & depressed & talks in a somewhat listless & yet constrained manner.

" 24th Had a long conversation today with patient who is now much improved & talks in a frank & intelligent manner. He has now lost the air of constraint noticed above. He is now in a much happier frame of mind being no longer depressed or dull.

July 7th Patient still continues very well & was today discharged

Recovered.

James Proudfoot
cont. from Pt Vol III p 592.

1893
April 29th Now and then gets a little excited when he talks a good deal but is not dangerous. He is thin and in not very good general health.

June 30th When in the airing court he often indulges in queer antics. There is no change.

Dec. 28th Unchanged. B.H. & C. fair.

1894
December 29th He has been removed downstairs partly on account of his being handy for Dr. & and partly on account of the overcrowding in that gallery. The change has not disturbed him in the least - he is too demented to mind anything. His health continues fair.

1895
Dec. 20. There is no change to note. Very demented he sits or walks quietly taking little or no notice of what goes on around him. His general health is fair.

1896
Oct. 6. Quiet and retiring trying to hide or get away when approached. He is very demented. His bodily condition is poor but he enjoys fair health.

Dec. 31 Still has occasional outbursts of excited talk but is not dangerous.

1897.
Dec. 29. Very demented, but as a rule is quiet & inoffensive. He is very thin, & his B.H.C. is below par.

1898.
Oct. 19. There is nothing new to note here
1899. in this demented patients condition.
May 1. The same in all respects. p 342.

William Burgess
Cont. from p. 34.

June 26th He has been made to take exercise walking up & down the gallery as also outside in the grounds but has required two attendants to do so. This evening his bowels moved freely the motion consisting of some hard masses & a considerable quantity of fluid.

June 27th Patient slept fairly well last night from 11 till 5 & took two glasses of milk.
This morning he is in a semistuporous condition & is with great difficulty roused out of it. He seems to be under the influence of some powerful delusion which prevents him speaking. He constantly bowed his head to go to all sorts of places in answer to voices.
There is a great deal of tremor about his lips & facial muscles.
He is very obstinate in refusing to take his food himself but by coaxing he takes by the spoon. July

28th Patient is stronger today & his skin is losing the waxy look mentioned on his admission. His condition is not so stuporous as y'day & he has spoken a little but only in answer to questions. The tremor in his lips & infraorbital muscles is very marked when he begins to speak & of this patient himself is very conscious. He tries on July

to overcome it by muttering over his reply before attempting to speak it aloud.
The tremor of his tongue is very marked & general. In pronouncing such words as "truly moral" his powers of co-ordination quite fail him. When reasoned with as to not taking his food he states that it is "God's will that he should not do so".

30th Patient has not slept so well for the past two nights but has taken a good quantity of nourishment. His delusion to food is not nearly so great at night as in the daytime.
He is suffering from hallucinations, seeing witches coming in at the window & he is also under the delusion that he is to suffer so many lashes at their hands. He was fed again today by the spoon.

July 2nd Patient had a draught last night but notwithstanding slept very little was very restless. He took a large quantity of food however during the night. Mentally he is much as a last note, dull & apathetic but starting up every now & then when the devils come to the window.

3rd Today patient is somewhat stronger but in consequence is more obstinate in his refusal of food. (He was twice fed by the tube in consequence of failure with the spoon.)

On July 5th

to p. 69.

Charles Samuel Twigg
admitted June 28th 1890

Patient is 21 years of age, single, a protestant & till three weeks ago a clerk in a Lawyer's office. He was brought [illegible] St. Enoch & admitted at the instance of his

attack of insanity & it two days according son further in seem that patient unsettled state for No cause is stated A seem to have been life.

but he has threatened showed violence during towards his Brother se who were trying

in the warrant but information has been marked M.P. in his ame of which is seen ecount.

sisters bear that he is s delusions about he. ing his relations working against & about his being guilty of acts which have no foundation in fact: that he is violent & broke the drawing room window: that his con-

Mothers Family.

6 Brothers patient's eldest

1. Drunkard, died in publichouse from heart disease & drink.
2. Died in Lochgilphead Asylum "brain paralysis thro' drink".
3. Now in Greenock: drinks hard periodically.
4. Had D.T.s 2 years ago but has since reformed.
5. Steady & well balanced.
6. " "

3 Sisters

1. Patient's mother: hypochondriacal melancholic tendency: "making mountains of molehills".
2. Died of Phthisis.
3. Now in Greenock: horribly fully same: very gambling & rambling.

Father's Family.

Clear of Insanity.

versation is incoherent.
Patient is a tall dark & pale youth evidently much overgrown. He has a somewhat phthisical type of Complexion.
On admission he was somewhat excited & restless. At first he resisted being detained but after being reasoned with he calmed down & shortly after his admission began to play draughts with another patient.
His Conversation is quite coherent & he answers questions quite readily & frankly.
He admits having been a heavy smoker but other bad habits he denies.
He is to have ordinary diet with eggs & milk extra & no tea or tobacco.

29th. This morning patient is somewhat restless Constantly moving his shoulders about & shifting from foot to foot in a Chorea-like fashion.
Mentally he is very facile, flitting quickly from one subject to another. He is slightly exalted in manner & expresses himself as quite pleased with his quarters here.

30th. He slept fairly well last night after 12 o'clock. Today he is more subdued in manner & is not so restless as yesterday.
He says that what made him ill was his not liking his work in the office & that he wished to become a farmer.

to p. 47.

Charles Samuel Twigg
admitted June 28th 1890

Patient is 21 years of age, single, a protestant & till three weeks ago a clerk in a Lawyer's office. He was brought from 33 Newton St. Greenock & admitted to the West Sta. at the instance of his Father.

This is his first attack of insanity & it has only lasted ~~two~~ days according to the warrant but on further inquiry it would seem that patient has been in an unsettled state for several weeks past. No cause is stated but patient does not seem to have been happy in his home life.

He is not epileptic - but he has threatened suicide. He also showed violence during the first two days towards his Brother & also towards those who were trying to restrain him.

No H. P. is given in the warrant but since Admission information has been received of a well marked H.P. in his mother's side the nature of which is seen in the annexed account.

The medical certificates bear that he is greatly excited, cherishes delusions about being his relations working against & about his being guilty of acts which have no foundation in fact: that he is violent & broke the drawing room window: that his con-

versation is incoherent.
Patient is a tall dark & pale youth evidently much overgrown. He has a somewhat pasty type of complexion.
On admission he was somewhat excited & restless. At first he resisted being detained but after being reasoned with he calmed down & shortly after his admission began to play draughts with another patient.
His conversation is quite coherent & he answers questions quite readily & frankly.
He admits having been a heavy smoker but other bad habits he denies.
He is to have ordinary diet with eggs & milk extra & no tea or tobacco.

29th. This morning patient is somewhat restless constantly moving his shoulders about & shifting from foot to foot in a chorea-like fashion.
Mentally he is very facile, flitting quickly from one subject to another. He is slightly exalted in manner & expresses himself as quite pleased with his quarters here.

30th. He slept fairly well last night after 12 o'clock. Today he is more subdued in manner & is not so restless as yesterday.
He says that what made him ill was his not liking his work in the office & that he wished to become a farmer.

Edward Johnstone

Group. 2.

June 20th Is getting on well. The bronchus is well up and the ends of the bone in good position. Scalp wounds now healed. In mental condition he is rather depressed & has many delusions regarding his bowels &c.

June 30th Still getting on well so far as his bodily condition is concerned. Mentally he is depressed & delusional.

July 13th Now up and going about, his arm being now all right. Still very depressed mentally with the old delusions - without physical basis so far as the units can make out - about his heart &c. Picking up flesh again and getting some colour in his face.

August 12th

One of E. Johnstone's Letters

August 1890

Still very depressed & miserable saying he is going to die real. his heart is going to stop &c. Requires constant talking to in order to interest him in anything. B. M. &C. are rather improved but he takes his food indifferently & practises it is feared bad habits —.

" 28th Making no progress, continuing white and thin in spite of all the nourishment that can be given him. He complains of never having "a movement of his body" and is anxious to see the French. He requires con-

Edward Johnstone

cont'd.

stand running in order to set him to do anything and after leaving him he soon lapses back into an apathetic state.

Sept. 17th. State very depressed and with many visceral delusions such as that his bowels are never moved, that he has no stomach &c. Gaining no flesh in spite of Cod Liver Oil &c

October 15. Remains very vain & pale in spite of C. L. Oil &c. Very miserable & with numerous delusions about his bowels &c. Languid & torpid

October 31. No change to report. Depressed & dull, refusing to interest himself in anything and miserably melancholic.

Nov. 27th. Yesterday at dinner this patient assaulted another patient by striking on the head with a delph cruet stand. He inflicted a small scalp wound. Subsequently in the court when patient had just passed his books he stepped out of & inflicted a severe blow on the face of a demented patient T. F. Kane. A black eye & cut over his left upper lip were the result.

Today patient has nothing to say as to his reasons for his action. He is a Catholic & the first attacked patient was a member of the Salvation Army & often shouts out "To h— with the Pope". This may have been the "raison d'être".

Sept. 18th

John Millar

Cont. from p. 36.

June 28th. Patient's mind was again drawn off today: it is quite normal & thoroughly concentrated. His temp. still continues high but reversed exam. fails to discover any local inflammation.

Patient saw his wife today & roused up somewhat but only to tell her to go away. After her visit he was very excited & restless shouting out unintelligible phrases & requiring two attendants to keep him in bed.

" 29th. Late last night patient answered some questions put to him by the writer. Today he has done the same. He is distinctly stronger both bodily & mentally & has not required to be fed. His mind was drawn off in the morning but this afternoon he roused himself.

" 30th. Patient still continues to gain strength. He slept well last night & now takes plenty of nourishment. He is depressed & drowsy today but answers questions when roused up. He has not required the catheter today.

July 3rd. Patient is today somewhat better & has lost to a great the typhoid look which was so marked. He is much stronger & has not required the use of the catheter.

He is still drowsy this attention is difficult to arouse. His conversation is very rambling though he can when pressed answer questions in a coherent manner. He is suffering from loss of control over his rectum & passes everything in bed.

4th He has again required the use of the Catheter the bladder & rectum being in an atonic condition, the condition of the latter being rendered worse by the existence of a fissure in his anus the remains of an old fistula for which he underwent an operation some years ago. Inevitably he is much worse today. He has been in a state of low delirium which in the afternoon broke out into an attack of acute mania. He was placed in a tepid pack for 50 minutes & this had a very soothing effect along with some Chloral & Bromide.

In the earlier part of the day before his actions became very violent his hands were constantly working about his penis in an automatic fashion. He seems to entertain some delusions regarding them & says that he is "quite empty there."

8th Since last note the Catheter has been required once a day but there are some signs of

to p. 5-1

Charles Sam. Twigg.
Cont. from p. 42.

June 30th. He wrote a very sensible letter home to his mother in which he expressed sorrow for his conduct in the past. This letter was quite Coherent but in it he seemed to look on his present surroundings with almost too roseate a view.

July 1st. From information received today it would seem that he has always been of an impulsive disposition with very little self control. & very limited powers of application

July 5th. Patients condition is a very uncertain one. At one part of the day he seems as though going on towards recovery rapidly & in a few hours he will irritable, sullen & when spoken to for a little time emotional & ready to break down & weep.

The restlessness which was formerly so marked is now less, although patient still when speaking shifts from one foot to the other & throws his hands about & wriggles his body in an uneasy manner. His demeanour is somewhat indicative of masturbation but this he denies & he has not been discovered practising the habit.

12th. Patients mental condition still shows great instability. This morning he was very irritable

& aggressive in his conversation, accusing his friends of persecuting him & the officials of keeping him here with the avowed intention of really driving him mad. After talking in this strain for a little time & expressing his fixed determination not to be persecuted in this way & this in tones as strong as almost to amount to bravado he suddenly broke down into a flood of tears & piteous though almost incoherent entreaties to protect him from evil.

17th. Patients bowels are very costive & this morning he was ordered some aperient medicine. This he refused to take from the attendant spitting & sputtering it all over his clothes. At the morning visit he was again asked to take it. At first he refused clenching his teeth firmly together & hissing out in a most vehement manner "never never". In a few minutes however he took up the glass & drank off the medicine sobbing like a cross child. By evening he was quite cheerful & out playing cricket with great zest & enjoyment.

19th. Today patient wrote a very sensible & affectionate letter to a sister, in which he showed that his family instincts are still strong within him. His manner & conversation are in accord with the spirit of the letter being

to p. 67.

John Turnbull, 30
Admitted 7th July 1890.

Private patient admitted to day to the East House.
He is 30 yrs of age, single, a restaurateur, and a mem-
-ber of the Established Church. He resides at 116 George's St
He has been insane about a year. This is his first
attack and the cause is uncertain. No G.P.
Medical certificate's bear that he has a vacant & moody look
talks incoherently. thinks his sister and those in the
house are plotting against him. He is sleepless and
restless, threatening to do for his sisters —.
a wee built and wee nourished young fellow
with no discoverable lesion of thoracic or abdom.
organs. On admission he is quiet and talks
readily with the smile. He has a lisp in his talk,
his palate is more arched than normal and narrower
and there is a want of symmetry of it one side
being rather more developed than the other. Looking
at his face one is apt to think that one side is
also weaker at all events in expression than the
other. This is the writers opinion but it is not
that of others. Urine non albuminous & normal.
His conversation is rambling says he has come
here for a few days. that he is going to his work
in the mornings and coming to stay here at
nights. Says he has not been well of late and thinks
his business has been against him.
8th July. Slept well last night. was quiet and well-be-
-haved. To Day he distinctly gives the impression
after a long conversation that he is weak minded
His talk is silly. his look shifty and he displays
a pleasantness with his present surroundings

John Turnbull
cont.

not to be expected or wished for in a healthy individual

12th July. Remains in much the same state and has shown none of the indicia of mental derangement indicated in the Bertillon scales. That that is so there is no doubt about his insanity. Is eating & sleeping fairly well and was out last night playing cricket —.

August 12th Mentally much the same. He is, it is feared, one of the patients for whom little can be done. He works regularly in the Grounds and gives no trouble ——.

Sept. 17th The same weak minded facile man, evincing no special or strong desire to get away. Happy & slightly apathetic. Working regularly and in good health.

October 15. No change to note and certainly no improvement. Very facile & silly and easily amused & tickled over.

October 31. The diagnosis of a partially weak minded man is being confirmed. When his mother was up seeing him she was in great distress. This did not seem to affect him in the slightest and he did not seem fully to comprehend the state of his mother's mind concerning him. His bodily health is good & he works regularly.

1891

7 March. There seems now to be no doubt but ~~that this~~ patient is becoming demented. He answers questions in a listless dreamy way & even his speech has become very childish. He smiles in a fatuous fashion & talks to witness in what passes around him. He is in very good bodily health & condition.

To p 104.

NB

John Miller

Cont. from p. 46.

July 8th The function of the bladder once more coming into action. The incontinence to of the urine is not so marked. He complains of pains all over his abdomen but these would really seem to be due to the weak & at times full condition of his bladder, the emptying of which gives him a great deal of relief.

Mentally he is now much improved & can now talk in a very sensible manner. He is still however very depressed. He is taking his food without difficulty now & is sleeping fairly well at night.

10th A large carbuncle is forming over patients left hip & is causing a good deal of uneasiness.

The use of the catheter was dispensed with yesterday. His bladder still shows a great lack of tone & irritability never emptying itself till nearly full.

Mentally patient shows little change since last note.

16th The carbuncle is now healing a considerable quantity of sloughing tissue having been discharged from it. It has had a most wholesome effect on patients mental state. He is now much brighter & getting out of

the torpid apathetic condition in which he has been for some days past. He is still a little slow & dreamy in his way of talking but his conversation is quite coherent & intelligent. What seems chiefly wanting now is volitional power patient being too passive. There are signs of this returning however patient having expressed a desire to get up today.
As the paralysis of the rectum is very great today he is not to rise. The bladder condition still continues to improve.
Patient is sleeping well now. Through a few nights ago he was seeing "things coming after him". This however has not been repeated.

19th. Patient has been up for a few hours for the last two days & is looking greatly the better of it. He is feeling very weak & shaky. His rectum still continues to trouble him by its atony. His bladder continues doing well.

30th. Since last note patient has been up daily for a gradually increasing length of time & now is so much stronger as to be up the whole day. The rectal difficulty still continues & is having a very depressing effect on patient's mental condition. This latter however is improving greatly every day showing a quickening of his mental faculties.

to p. 101.

John Reid
admitted July 7th 1890.

Patient is 27 years of age, single, a probationer of the U. P. church. He was brought from 33 Abbotsford Place & admitted to the West House at the instance of his brother.

Second attack

This is his second attack of insanity & it has lasted for several weeks. He was a patient here in 1888 see Vol. III. 145 & was discharged "recovered". The Cause of the first attack was supposed to be "overwork" but for the present attack no Cause is known. He is not epileptic or dangerous to others but he may be suicidal.

Cause unknown

H. P. good.

A maternal uncle was insane for a time. The medical Certificates bear that "he has frequently say despondent words, in which he finds his nervous system completely prostrated: that his imagination completely runs away with him & that many things which he recently spoke of as true he knows to be false eg. that a wealthy gentleman was going to adopt him & that a beautiful young Lady was in love with him": further they bear that patient is here of his own wish & is quite aware that he requires to be looked after.

Patient is thin & his skin has a muddy & anaemic look. He is suffering however from no organic disease. His

appetite is fairly good but he has not been sleeping very well of late. He has too been suffering from headaches.

Since his last illness he has kept fairly well till within the past week or two when he became depressed & troubled with the headaches noted above. The delusions noted in the medical certificates only appeared ten days ago. Dr. Y. saw him in consultation & advised him to go away to his family who are at the coast & spend three weeks with them. This he did but did not stay more than when he left & went back to Alloa where he is assistant in the U.P. church. Dr. Y. then advised him to go back to the coast but this he refused to do as he wished to stay in the Asylum. He also refused to write to the Commissioners to ask permission to come in as a Voluntary patient & so certification was necessary.

On admission he seemed restless & moody answering questions in an abrupt & semi-defiant manner. His answers however are quite coherent. He states himself that his imagination has been running away with him but he does not seem to be altogether convinced of the falsity of his delusions.

John Reid
Cont.

He feels depressed but not markedly so. the term "ill at ease" would better express his Condition

July 8th Patient slept fairly well last night. This morning he does not seem at all anxious for conversation & assumes a "bored air" when spoken to. He complains himself in reading & seems to enjoy it.

9th Patient is again somewhat sullen & repellant in manner & very disinclined for Conversation. His conversation however, short & curt as it is, is quite Coherent & intelligent.

Patient is pale & anaemic looking with somewhat greasy skin. He admits that his bowels are very sluggish in action. He is today put on Arsenic & Iron tonic.

10th When spoken to regards his delusions patient admits they were all the result of imagination & sleeplessness. He now thinks he was very foolish in not trying to fight against them instead of coming into the asylum. He is a little downhearted as to the effect his residence here will have on his chances of getting a church again. He has made up his mind however to make the best of it to com-

-Constrate his attention on getting into a
good state of health bodily & mentally.

15th Patient is now really quite sensible & talks
facts in accordance with this. He is how-
-ever very easily moved by trifles either towards
mental pleasure or mental pain. Thus a
successful stroke at billiards causes great
joy such as one might expect from a child
& again any little annoyance puts him
greatly.
His social qualities have developed greatly
within the last day or two & he takes
a great interest in the other patients.

18th Patient has continued so well that today
he has gone home on trials

Aug. 2nd Today discharged
Recovered.

Readmitted. August 19th 1891.
See (Vol IV) Page. 477

John Smith.
admitted July 10th 1890.

Patient is 60 years of age, married, a publican & a protestant.
He was brought from 154 High Street Dumbarton & admitted to the Hall House at the instance of his wife.

first attack

This is his first attack of insanity & it has lasted about two weeks. The supposed

cause - "worry"

cause is "worry."
He is not epileptic or suicidal but he has been dangerous to others.

no H.P.

No H. P. is given.
The medical certificates bear that "he refuses food & will not go to bed neither will he go out or near his business: he thinks he is not in his own house: he strikes his wife now: he will not answer questions & keeps kicking the ground with his feet."
From patient's wife. There is a history of rheumatic fever & also of "inflammation" some years ago. He has been troubled with bronchitis more or less for years past. He had an attack of dysentery in Aug. 89 which weakened him greatly. There was an exacerbation of his bronchitis in Feb. of this year & from this he is still suffering. Since February dates his mental derangement. At that time he had a good deal of worry in regard to business

matters (buying horse.) This worry preyed on his mind & he began to lose his appetite & get sleepless. This continued till ~~six~~ weeks ago when he got very irritable especially in the mornings: his memory also got bad. If left alone he was apt to be destructive & on several occasions he struck his wife & children. This however he used to describe as being "all in fun".

At this same time the restless movements of his arms & legs began to get noticed. His wife states that for two years past he was prone to "tapping with his hand" when speaking & also to exclaiming "yes yes" in an automatic fashion. These movements have got worse ever since. February.

For the past month patient has taken very little food always stating that he had no appetite.

On admission patient was mentally in a somewhat excited state but could answer questions when these were put to him.

The noticeable features were the almost Constant Constant Choreic movements which affected his whole body & limbs.

His eyes were rolled from side to side in an indefinite manner, their move-

John Smith
Cont

ments however being to a certain extent under patients control. The muscles of the face are likewise affected + especially those of the jaws ~~and~~ and lips which were barely at rest. He has a plate of false teeth in his upper jaw + these champs constantly while in his mouth.

The affection of the facial muscles causes him to grin + smile in a sardonic fashion.

The arms are also affected but in them the movements are very widespread the whole limb being thrown about like a flail. The movements affect both arms equally + they follow no distinct course. The arms like the legs are to a certain extent under patients control + so also are the hands with which he can perform fairly delicate operations such as buttoning his shirt etc.

There is a contraction (dupuytren's) of the middle finger of the right hand.

The muscles of the trunk are also affected + by their movements greatly hamper physical exam.

The affection of the legs is also bi-lateral + equal + similar in character

J. S.

-er to that of the arms.
Patient is suffering from bronchitis & seems to have great lack of expulsive power in his trachea.
His pulse is weak but regular. As noted above physical exam. is hampered by his movements but there would seem to be some enlargement of the right ventricle owing to the difficulty in finding the apex beat.
His urine is normal.
His speech is choreic in fashion & essentially explosive. It is hard to make out what he says owing to his mumbling his words from the absence of his teeth.

11th. Patient slept little yesterday morning after his admission. He took very little food yesterday & there great difficulty in feeding him owing to his movements.
Today he is much the same as on admission. The movements of his body are greatly increased on any one going into his room & speaking to him. He is able for a minute or two to hold a stethoscope in his outstretched hand but very speedily loses control over its movements, the hand always tending to clutch the stethoscope.

12th. Still the same. Refusing food but clearer mentally.

to p. 63.

61

James. Mc Kenzie. 38

Admitted 13th July 1890

Private patient admitted to-day to East House.
He is 38 years of age, unmarried and an engineer residing at 6 Blythswood Road, Renfrew. He has been insane 5 weeks. This is his first attack and the cause is put down as Influenza. He is not epileptic or dangerous to others but has threatened suicide. No known H.P. - There is an H.P. but remote.
Medical certificates bear that he thinks he has ruined his health by his own misconduct. Thinks he would be better dead. On admission he is seen to be a case with a good deal of the congenital element in it. His head is badly formed being very dome or sugar-loaf shaped, his palate is acutely arched & narrow and he has had a hare lip. His hands are badly shaped & his look distinctly lacks expression.
He says he knows very well what he is here for that we are going to put an end to him that he is not surprised, for he deserves it since he has been very wicked &c &c. His bodily health is very poor and he is thin. He is about the average height his hair scanty, dry and red and his fonts large.
1st August. He has been put on nourishing diet with Bovril, eggs &c. and tonics. These have not as yet had much effect but his appetite is fairly good though he is not sleeping at all well but is having no hypnotic. His delusions persist and when the writer was taking a cast of his mouth the other day he believed the end was come and that he was to suffer for his sins. He is very sluggish requiring rousing and manifests no anxiety or wish to help in the Gallery nor is he interested

20 Ch.

James McKenzie
cont'd.

in what is going on.

20th Aug. Not improving much mentally though gaining in flesh. Has begun to scratch his head where he is bald and has produced some ulcerous like patches there. Still very dull and listless and disinclined for exertion. Has not been detected practising vicious habits.

It seems that he was employed as an Engineer in Blyzebank up till the April. He then has an attack of Influenza and was in bed all April and May. He got comparatively well but was very headstrong and went to work too soon, consequently relapsing. About 5 weeks before admission mental symptoms were first noted. He talked nonsense went off his sleep and continued to brood. Got worse and the day before admission he attempted suicide in a very half hearted way by jumping over a window. He is said to have always been temperate and to have led a good life.

Regarding his family history it may be said
His father died of Typhoid fever which went to the brain
His mother died of spine disease (at 64). Doctor called it
nerves of the spine
Of his brothers & sisters. one brother died young when teething
Three are alive and one is very evidently nervous, and has a cast of features very strongly resembling patients
Two others are strong & well. He has 3 sisters all of whom are dead, one of consumption, the others of unknown causes. No neurotic history can be made out in uncles or aunts except that one paternal uncle was queer.

Jofp. 115

John Smith
Cont. from p. 60

July 13th Patient is weaker today & still refusing his food. He had a draught last night but slept none. He took some beef tea during the night. He was also sick.

Mentally he is better than on admission. He talks in a fairly coherent manner but is apt to ramble.

14th Today patient had to be fed with the tube twice. He is very weak & is showing signs of cyanosis especially after the feeding. At night he was somewhat stronger.

15th Today patient was somewhat stronger in the morning & having slept for three hours during the night. (His movements cease while he is sleeping) He took some breakfast himself this morning.

In the afternoon at 2.45 he was again fed with the tube having refused to take any dinner. Very little difficulty was experienced in doing this. Almost immediately after this had been done patient's lips began to get livid & his pulse small & his breathing very labored & accompanied by the rattling of mucus in his throat. The pulse got fainter & fainter but after stimulants had been freely given by mouth & hypodermically

for a time he seemed to recover. This was only for a time however & the apnea got greater the dyspnoea increasing, the conjunctiva becoming insensitive, the breathing becoming shallower & spasmodic till finally the heart ceased beating at a greater or fewer.

At the time of partial recovery above noted patient's limbs again began the Choreic movements this being chiefly marked in the arms & more especially in the right one. The movements were of the same character as previously noted being flail-like & without definite course. The mouth & face generally showed also signs of returning Choreic movements.

He never however showed signs of consciousness.

The circumstances of the case were made known to the Procurator Fiscal who did not consider an examination called for.

Cause of Death: Chronic Bronchitis with Dilated Heart & Exhaustion from maniacal excitement.

James Alexander Leitch.

Cont. from p. 32.

Aug. 20th Since last note, patient has continued in a more or less exalted mental condition. He is going to marry a princess one day; the next, he is founding orphanages all over the world & so on. The physical symptoms of the disease keep pace with the mental. The lingual & buccal tremor is more marked than ever & the incoordination in his speech is increasing. He is falling off in bodily condition & is becoming less attentive to his personal appearance than formerly. For the past few nights he has been very restless ~~for the past few nights~~ carrying on conversations with various persons. He is still very erotic & masturbates greatly: there was some

irritation of the skin on the right side of the groin of day evidently due to this.
The above photograph was taken just at the commencement of this attack of excitement & the attitude was adopted for the purpose of bringing both sets of sleeve-links into view.

Oct. 30th Since last note patient's mental condition has changed considerably & now shows a great amount of torpor & stupidity.
Patient does not ~~throw~~ speak readily about his delusions altho' he still entertains them. All his powers of mind seem of late to have been blunted.
His bodily signs have not made any great advance since last note.
Patient has of late been sleeping badly being restless & talkative.

Jan. 22nd Patient getting more demented. Speaks little and keeps much in the background. His hair is getting very white

Mar. 12th - Last night patient endeavoured to address the performers at the concert as the proprietor of the Establishment. He said he owned 300 asylums as well as several hydropathics. A week ago (last night) patient had a congestive attack, from which he had quite recovered by the next morning.

Continued p. 305

Charles Samuel Twigg.
Cont. from p. 48.

July 19th Cont. Frank & cheerful.
Physically he is looking much better today.
21st Today patient refused to take his food so was fed by the tube. He seemed very sorry afterwards at his refusal & kept over it. In the evening he was bright again.
Aug. 4th Patient shows very little sign of improvement. He has not given any trouble with his food since last note. His mental condition is essentially unstable & variable. One day he is frank & free in conversation, again he is sullen & suspicious of those around him & refusing to speak & yet again full of bluster & threats against those who sent him here & those who keep him here. He rarely looks me straight in the face & when spoken to constantly shifts from foot to foot or toys nervously with his handkerchief or buttons. At times his manner is strongly suggestive of masturbation but he has not yet been found practising it.
Physically he shows but little improvement since last note. He is sleeping well.
" 20th The above note still describes patients mental condition. He is showing

very little improvement mental or bodily.

Sept. 25th Patient has become worse since last note. He is now in a condition of partial stupor & can hardly be got to answer questions. His replies when given are often quite irrelevant. His bodily condition is somewhat similar to his mental. His movements are very slow & show a great lack of purpose. Patient is however gaining weight. His appetite is fairly good. He is sleeping well.

Oct. 11th Patient shows some signs of coming out of his stuporous condition. He is more easily roused but his attention cannot be retained for any length of time. His neck was today blistered freely.

Nov. 1st Patient reacted but slightly to the blistering. A small carbuncle has now formed on the previously raw surface.

His mental condition is now worse than ever. He is restless in his manners & slouching in his gait & has all the appearance of becoming demented. He can with difficulty be roused but his answers to questions have rarely anything to do with the questions asked. He is at times very emotional & weeps without cause. He still shows the same suspicious gaze & restless movements of his hands which were previously noted. This morning he seemed more confused than usual.

to p. 145.

William Burgess.
Cont. from p. 40.

July 5th. Patient is much stronger. Was today fed twice by tube. Mentally he shows little change the hallucinations + delusions being still present. He is however more easily roused + speaks of his delusions. The tremor is still very marked + there is ~~more~~ inequality of the pupils visible.

" 8th Patient has been sleeping fairly well since last note but only in fits + starts + only after having a draught. His aversion to food still continues + it is only given him with great difficulty.
No change in his mental condition. He was today observed masturbating while in the W.C.

" 12th Today patient gave a most graphic description of his bodily feelings. He states that his inside is all eaten up by an army of mannikins who gain entrance by his anus. These mannikins were once human beings who were drowned. There not being a sufficient number of graves for their bodies they were cremated + the ashes resulted were changed into a diminutive form. These have eaten up all his bowels + other viscera + hence the absurdity of his talking food.

In addition to these there are some birds which fly down his throat & assist in the excavation processes.
Patient also states that he has syphilis and having diagnosed it from an exam. of his urine.
Today he has talked more than he has ever done & with more spontaneity. His conversation was in great part concerning the above delusions.

14th. Patients bowels were thoroughly moved y'day by Black draught with the result that he has said nothing today about his inside.
His stationary is now not severely confined to his feeding but today he refused to get up. He of his own accord made an attempt to do so but whenever his legs were out of bed he refused to go any further. He had to be turned up & dressed by the attendants.

19th. Since last note patient has been in a dull & apathetic state only answering questions after much pressing. His face & general appearance are in accordance with his mental condition. The tremor is still very marked as also the incoordination in speaking. He is in the habit of making hissing & choking noises & also of feigning as it were fainting fits.

William Burgess
Cont.

19th Cont. When this is taken notice of any anxiety expressed on the faces of those around he smiles in a pleased way at the success of his trick. He still is under delusions as regards his food at times mistaking that it is poisoned & again that God has told him not to take any.
To day he complains of being eaten up inside by insects. He is to have some aperient medicine to discharge them.
His bowels & bladder are both very sluggish in action the latter for the past three days only acting once in 24 hrs. but on these occasions a large quantity of water was passed.

22nd To day patient is much brighter & talks with much greater ease the tremor & incoordination being not nearly so marked as formerly.
He took his breakfast himself this morning & with good appetite.
The medicine has removed the insects.

Aug. 4th Since last note patient has continued to take his food himself & has required very little presence to make him do so. His bodily condition has consequently

improved & his weight increased.
Today however he has been several times
times dirty & has been put in bed. Last
night he was perspiring very profusely his
temperature however being normal. Physical
exam. of his chest gives no evidence that
this arises from a lung condition.
His mental condition varies greatly at
intervals he being at one time
on the point of death, or accor-
own statement actually
a few moments quite bright
his old life with a smiling
to this feeling of death coming
identity done in assumed with
of tearing those around him
on a previous occasion.
traces of hearing are still pre-
The shape of whispering voices.
writer spoke to him he re-
not to be interrupted as he was
very giving testimony of the nature
of which however he did not care to give
information.
The tremor is still very well marked in
his face & his voice & his speech tends to
be aphasic.

Aug. 19th. Patient's condition shows no improvement.
He has not been sleeping well since last
note save after hypnotics.

bp. 99.

William Burgess
Cont.

19th Cont. When this is taken notice of any anxiety expressed on the faces of those around he smiles in a pleased way at the success of his trick. He still is under delusions as regards his food at times vomiting that it is poisoned & again that God has told him not to take any

Today he complains of pain eaten up inside by in to have some apparent discharge them.

His bowels & bladder a sluggish in action The past three days on once in 24 hrs. but recessions a large water was passed.

22nd Today patient is & talks with much incoordination The tremor, being not nearly so marked as formerly

He took his breakfast himself this morning & with good appetite. The medicine has removed the nausea.

Aug. 4th Since last note patient has continued to take his food himself & has required very little pressure to make him do so. His bodily condition has consequently

improved & his weight increased.
Today however he has been several times
times dirty & has been put in bed. Last
night he was perspiring very profusely his
temperature however being normal. Physical
exam. of his chest gives no evidence that
this arises from a lung condition.
His mental condition varies greatly at
very short intervals he being at one time
depressed & on the point of death, or accor-
-ding to his own statement actually
dead, & in a few moments quite bright
& talking of his old life with a smiling
face. As to his feeling of death coming
on it is evidently done in assumed with
the purpose of teasing those around him
as noted on a previous occasion.
Hallucinations of hearing are still pre-
sent in the shape of whispering voices.
Today when writer spoke to him he re-
-quested not to be interrupted as he was
very busy giving testimony of the nature
of which however he did not care to give
information.
The tremor is still very well marked in
his face & his voice & his speech tends to
be aphasic.

Aug. 19th. Patient's condition shows no improvement.
He has not been sleeping well since last
note save after hypnotics.

bp. 99.

Walter Neilson, 43
admitted July 19th 1890

Admitted to-day on a Transfer certificate from Lenzie. a big strong looking fellow. of whom this is a short history so far as his illness is concerned.

He has been sleepless and has has headaches for six months Depressed and with delusions regarding Religion. Says he has neglected God for 43 years and that lustfulness has been his sin

There is practically no H.P. His mother suffered from Cancer for the last six years of her life and during the latter part of that time her brain was affected to some degree.

He is extremely frank about his delusions pouring out a long story about his sins of the flesh and if permitted dwelling on the details in a most filthy way. He is very depressed, sighing & groaning because his sons is lost &c.

a physical examin is negative. His urine is normal and his bodily organs seem acting in a normal manner. No trace of venereal disease to be found.

August 12th He is now out regularly working in the Garden & works very well but mentally he is unchanged and requires sometimes to be very sternly checked to prevent him gloating in the descriptions of his own wickedness. He is not sleeping very well at night but his appetite is good & he behaves well.

August 20th Unchanged.

Septr. 24th This man shows an improved physical condition but it cannot be said that mentally he is

Walter Neilson

cont°.

in any way improved in spite of hard work every day in the garden &c. at night he moons about the gallery talking to himself or he sits down in a corner and turns his face to the wall. He is taking his food well. is improving in physical health and is sleeping well.

October 31. He has been picking his skin a good deal of late and also his hair and he is very sure that the worst fate is in store for him. Bewails the day he ever went to a Whiskey shop and thus got led into temptn. Mentally he is no better still as anxious to go into all the details of his sins and to if possible magnify anything he has done. Bodily he is in fairly good health.

Nov 28th In improvement mentally & still a great deal of skin irritation. He has disfigured himself greatly by plucking out his beard & hairs of his head.

1891

Jan 16th Still very depressed & brooding over his own wickedness. He continues to remove his hairs in spite of constant advice to the contrary. He is in fairly good bodily health.

7 March. Patient continues in the same miserable condition. He is very dull & can with difficulty be roused to conversation. His bodily condition is very indifferent. He works regularly in the garden.

To p. 392.

Pat. M. McCrone
Cont. from Vol. III p 566

July 22nd Cont. A few nights ago he broke his bed by kicking out the bottom of it. He asserts that certain of the attendants by a concentration of their minds on him caused electric shocks to pass through his back.
Apart from his delusions he is very sensible & intelligent
His bodily health & condition are excellent.

Aug. 4th A few nights ago patient had a seminal emission & accused the night attendants of having been the cause. His suspicions are beginning to take a wider range than formerly but are all centred around his own person & injury done to it. He does not smoke regularly & the other day after indulging in a pipe he became sick. He accused the writer of having been the cause of this & says that he will not have the chance of doing the same again: by this he intimates his intention of avoiding the pipe.

Oct. 30th This patient is not improving.
Since last note he has slept fairly well till within the past ten days.
Since then his old suspicions have been roused up. He now accuses the writer of putting quicksilver into his

Letter written by patient

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ening that organ. To the writer
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t times threatening looks. Be-
ook he abuses him in most
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some of trivial acts such as
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e strokes at billiards & this
they are in a different party
t the time.
condition is good but of late
1891 he has been sleeping badly.
Jan. 22nd Patient seems to be getting demented.
Occasionally he breaks out into a passion of
abuse for actions that he imagines are directed against
him. These are most varied and remarkable.
At one time he accuses one of putting "animal
sympathy" on him; at another "expectoration
and concentration." When the writer expresses
an ignorance of what he means he sneers his
doubts. His delusion is, however, that it is Dr
Yellowlees who is at the bottom of it, and that those
below him are his tools, and not so much to blame.
Dr Yellowlees he greets with terrible abuse at times.
He spat in the face of another patient & would have
assaulted him one day lately.
Jan. 27th Transferred to Morningside

Alex. M. M^c Crone
Cont. from [illegible]

July 22nd Cont. A few nights ago [illegible] bed by Rushing out [illegible] He asserts that Certain [illegible] by a Concentration [illegible] on him Caused electr[illegible] pass through his bo[illegible] Apart from his delu[illegible] sensible & intelligent [illegible] His bodily health & con[illegible] -ent.

Aug. 4th A few nights ago pat[illegible] mission & accused [illegible] of having been the cau[illegible] -cions are beginning to take a wider range than formerly but are all centred around his own person & injury done to it. He does not smoke regularly & the other day after indulging in a pipe he became sick. He accused the writer of having been the cause of this & says that he will not have the chance of doing the same again: by this he intimates his intention of avoiding the pipe.

Oct. 30th This patient is not improving. Since last note he has Rept fairly well till within the past ten days. Since then his old suspicions have been roused up. He now accuses the writer of putting quicksilver into his

food & sending it up to his brain with the object of weakening that organ. To the writer he has become sullen resents him with lowering & at times threatening looks. Behind his back he abuses him in most forcible language. He is also very suspicious of certain of the attendants accusing them of all sorts of trivial acts such as causing his pipe not to draw well, or marking his cards at billiards & this although they are in a different part of the house at the time.

His bodily condition is good but of late he has been sleeping badly.

1891
Jan. 22nd Patient seems to be getting demented. Occasionally he breaks out into a passion of abuse for actions that he imagines are directed against him. These are most varied and remarkable. At one time he accuses one of putting "animal sympathy" on him; at another "expectoration and concentration." When the writer expresses an ignorance of what he means he sneers his doubts. His delusion is, however, that it is Dr Yellowlees who is at the bottom of it, and that those below him are his tools, and not so much to blame. Dr Yellowlees he greets with terrible abuse at times. He spat in the face of another patient & would have assaulted him one day lately.

Jan. 27th Transferred to Morningside

Robert Waddell.

Cont. from Vol III p. 64.

July 22nd 1890.

This patient is a bed ridden G.P. He is quite sensibles & unable to speak, save for a few words, but still has the feeling of hen ether to judge by his smiling face.

His bodily health is very low & there is a great tendency to hypostatic congestion, his feet becoming quite blue when he is raised to go to the stool.

His eyes are unaffected: pupils being equal & regular in action responding to action of light. He has no difficulty in swallowing.

His bowels are managed by having an enema at regular intervals. His urine dribbles away from him & at present does not tend to irritate the skin.

He passes a large quantity of very foul-smelling flatus for which vegetable Charcoal is to be tried as a remedy.

There is constant tremor of the left foot & leg & there is also some contraction of the 2nd 3rd & fourth fingers of the left hand: this cannot be overcome by traction & when attempted this seems to cause pain.

The plantar & patellar reflexes are greatly exaggerated & so also is the abdominal. The Cremasteric &c.

-flex is absent.
There is still marked clonus in the left ankle.
Sensation all over the body is greatly dulled.
He is occasionally noisy at nights,
Partridge does not now gnash his teeth as he formerly did
During the day he wears muzzle as he is destructive.
If a newspaper be put beside him he will in an automatic fashion try & fold it over. His powers of coordination are not equal to the task.

Jan. 22nd 1891 Bodily condition still wonderfully well preserved. Mentally no change to record.

Mar. 18th — — J. S. 2. —

May. 11th This patient lies constantly in bed - and never speaks tho when he is moving, which he is occasionally, he calls or hauls out words, which are too indistinctly pronounced to recognise. He hears acutely - is always on the alert when people come near his room. All the deep & superficial reflexes are exaggerated.

July. 13th Continues in much the same state - circumference of wrist - exaggerated reflexes volumes - & irritability of muscles & as far as can be judged diminished sensation - Outlines of pupils very irregular & almost no reaction to light - The condition of the legs - when he is out of bed seems rather ataxic, than paraplegic -
There has been a little difficulty in swallowing of late -

To page - 433.

George arthur. (Voluntary) 60
Admitted 1st August 1890

Voluntary patient admitted to-day from Stirling
He is about 60 years of age and a draper being a
very highly respected man in the Burgh.
He is a hypochondriac and can intelligently tell
all about himself. He states that he has not been
out of bed for some months and that he has had
to use a catheter since 1885. He is very fearful
and in a very poor state of bodily health, being
a small man and very thin and emaciated.
His very look is peevish and he is very miserable
On admission he was most distressed, cannot
understand why his friends had brought him to this
place and complained of the treatment he was having
soon after he was admitted. Said the cruelty was
most abominable and that the Bulgarian atrocities
were nothing to it. An examination of his chest
and abdomen is negative and his difficulty in
micturition evidently depends on a large prostate.
He has been humoured at home and encouraged to
believe that he was worse than actually was
the case. He has had the control of the catheters
passing one sometimes every hour insisting that
if he did not do so he would rupture his bladder.
10th aug. Now about 10 days after admission he is rather
better in physical health but very miserable
mentally. He moans saying its awful that
he should be persecuted in such a way. That
he should have to stay in this awful place &
says he gets more food than he can take &
that he is forced to take it when it is quite

George Arthur.
cont.

certain that it can only do him harm. Some days after admission he was allowed up but he was so frail and such a nuisance that he is sent back again to bed & all sort of fluid nourishment poured into him. His sleep is still very indifferent and he is only allowed the catheter at certain times and by so doing it is hoped that the need of it may be overcome.

20th Aug. Still in bed and gaining a little flesh but still very grumbling and groaning in spite of coaxing, threatenings and moral lectures. Sleeping better at night and taking his food now very well, tho he says it is tampered with, that he is persecuted and that every one is trying to do him all the harm they can —.

" 25th Today transfered to the West House.
Patient is quite convinced that only harm can result from the change. He asks in a peevish way why people can't leave him alone. He is to have the catheter only at regular intervals. He is very thin weighing only 7 stone & takes his food very indifferently.

Sept. 15 * A marked improvement has taken place patient having gained 7 lbs. in weight since last note. His mental condition proportionately benefited. He begins to think there is a chance of his getting well. His manner is less querulous & he is interesting himself in what goes on around him.

to p. 141

~~Hugh McCormick.~~
~~admitted Aug. 4th 1910.~~

James Proudfoot from 369.

in the large hall and eats very well. ~~the~~
Urine is normal. Weight is 8st. 3lb.

April 1913. This patient remains D.S.Q. He is suffering at present from an eczema of his buttocks but otherwise is in good health. During the winter he has been in bed on several occasions for chill or on account of his restlessness and excitement. He is more settled at present.

Nov. 16. 1914 Patient was examined to day before being transferred. He is very thin, but the heart and lungs are normal. The right tibia shews two small ulcers, there is a bruise on the spine and one on the right elbow. Mentally he is entirely demented.

Transferred to Hawkhead
Nov. 16. 1914.

Hugh McCormick.
admitted Aug. 4th 1890.

Patient is 43 years of age, married a protestant & a publican by trade.
He was brought from 107 High St. Renfrew & admitted to the West Ho. at the instance of his brother-in-law.

1st attack — This is stated to be his first attack of insanity & the cause is Chronic alcoholism. It has lasted

5 months — for 5 months.

He is not epileptic, suicidal or dangerous to others but he has been

H.P.? — There is no H.P. stated but on inquiry it appears that his brother, who is also publican, is a drunkard & has had D.T. frequently.

1. Medical certificates bear that "aberration of mind on certain points. Complete. talks of things which are not feasible to thought or which cannot be possibly executed, dreams of a peculiar & constant type with rambling & poetic meditations: he has been extravagant has made incoherent statements without foundations of facts."

2. "Found patient lying on bed trousers down at his ankles & half naked. on telling him he would catch cold he said he was too honest to catch cold. He said that he had been in the bellies of half the women in Renfrew & that he was quite exhausted with the exertion & that he must go to the Royal Infirmary for a rest. He is bringing blame on his family by his foul & abominable language, calling his daughter a whore &c. He has threatened their lives more than once."

Patient has been drinking hard for five months.

Hugh McCormick

never being altogether free from the influence of alcohol. He has been a drinker for a great many years but has given up the habit at intervals only however to relapse again & again. He has never had D.T. but his mind has been affected though never to such an extent as at present. Whiskey has been his usual drink but his taste has varied, he at times taking stout, milk along with it. As seen from the certificates he has been outrageous in his conduct & dangerous to the lives of his wife & children.

Patient is a man of full & bloated habit. He has several bruises on his arms & legs as though force had been used to restrain him.

On admission patient was partly intoxicated & talked in a maudlin & foolish manner. He required a good deal of coaxing to induce him to leave the cab & enter the house.

There was very marked tremor in his hands & tongue which was foul & furred. His speech is thick.

In the course of the evening after his admission he was somewhat excited & shouted out loudly for more drink.

Aug. 5th. Patient slept none last & shouted out loudly for drink at intervals. He took five cupfuls of beef tea during

the night. This he is able to take but on trying to take solid food at his breakfast he vomited. His stomach is in a very irritable Condition & he suffers greatly from flatulence The liver dullness is under the average but this is probably due to distention of the colon with gas.

His skin is hot & dry & his eyes have a suffused appearance. The tremor in his hands & tongue are well marked. His pupils are equal & reactive to light & accommodation. He answers questions readily & in a Coherent manner. He knows where he is & knows the reason of his being here. He considers that whiskey is not the reason, & states that he was shot by some women.

6th. Today patient is somewhat better his stomach being less irritable though the flatulence is still severe. He complains of pain in the right side of the chest just under the nipple: on examination no cause is found for this in shape of bruise or fractured rib. It was relieved by some carminative medicine. Patient was inclined to put this down to rough treatment which he received & thinks says all his trouble is due to this.

Tremor is less marked today.

He is more sensible today & has not given expression to any delusions

to p. 91.

John Forrest

Cont. from vol. III p 5-83

Aug. 5th

Still the same: restless noisy, careless of his appearance & withal assuming a certain stunt in his walk as though Borrowing full well that he is "somebody".
Rarely sleeps more than 4 or 5 hours & while awake is a great annoyance to the other patients by his constant shouting & singing.
This small amount of sleep is only obtained by giving him heroic doses of various hypnotics.
General health fairly good.

Oct. 6th

This patient is still in a state of chronic mania. Of late however his symptoms have been somewhat less acute. His sleep has been much better & obtained with smaller doses of drugs than ever before. During the day he is also less troublesome. He is still distinctly exalted & when asked regarding his health answers in an ~~over~~ optimistic fashion. There would however seem to be a method in this decrease of his madness. He is in hopes of getting home when Dr. Y. returns from his holiday. He draws this conclusion from the fact that his last discharge was after Dr. Y's. return from his holiday.
His bodily health is good.

Dec. 21st For the last three weeks patient has been much better and has been removed up to No 4 ward. He now sleeps well, is not noisy, and his general behaviour good. His manner is quiet and his bearing very sensible.

Feb. 13th Patient had continued well since last note, and arrangements were made for his going home; but the last few days he has complained that he has not felt quite so well. He has not slept very well at nights, and last night he got 40 grains of sulphonal with good results.

Mar. 18th Not very well yet. He has ups & downs, nights of little sleep and good nights. He is considerably demented. One day he is "no vera weel," another, "a wee bit better".

April 24" The appearance of this patient is rather restless and depressed. He is very quiet and unobtrusive - and when spoken to answers quite sensibly - He believes that he is much better than he was - but complains of some shortness of breath & occasional return of his asthma at nights - and this he thinks is the cause of some rather sleepless nights he has had lately - There is also a pain in his head, at the posterior part of the vertex, which annoys him, tho' it is not severe - His bowels are rather costive: at present he is taking Fluid Cascara: his tongue is furred: a mixture of Bromide & Iodide of Potash was ordered. His face is still red & blotchy -

To Page 329

Alfred Henry Walton.

Cont. from Vol. III p 518.

Aug. 5th Cont.. His general health & condition are now all that could be desired. The growth of his beard is much stronger of late.

Oct. 6th Since last note patient has improved considerably. He is not more rational in his conversation & conduct but still shows a great deal of waywardness & lack of purpose. His one desire at present is to get home but he seems to have no thought as to what is to happen after that. He seems quite content to live in the present & have no thought for the morrow. When spoken to seriously about his future prospects he laughs in a light hearted & almost reckless manner.

He is going down to work in the store for a few hours every day.

His bodily health is excellent.

Nov. 1st The storekeeper reports very favorably of patient. He has been willing, industrious & very biddable. His manner has been a little more staid of late but still shows too much recklessness of the future.

He was taken home today on pass.

Nov. 28th Discharged

Recovered.

James Phillips

Cont. from vol. III p. 451.

Aug. 5th A few days after patient refused to take his medicine & on sister insisting on his doing so he broke out in a perfect storm of abuse & said worse in a few minutes than he has done ever since sister knew him. Bodily health good.

Oct. 21st Patient is to day discharged. She was removed 28 days ago by his daughter on trial.

Relieved.

John Stevenson. (Voluntary)
Admitted 5th August 1890

Dwabl patient admitted to-day to Each House.
This is the second time he has been here and it is only some months since he was discharged Recovered. He kept well up till about 4 days ago and then broke down rather suddenly and came up this morning with his brother. (See Vol III p.487.)

His occupation is that of an abialyst, he being employed at Broxburn. For other details see prev. admission.

On being admitted to-day he is fairly quiet and able and willing to sign a note to the Lunacy Board requesting permission to remain here. Shortly after admission he became excited and shouted out loudly some indistinct words. His skin is hot but moist and greasy. his pupils are widely dilated but very mobile and his tongue furred and his breath foul. Pulse is 76, full and bounding.

He remained in a semi-quiet condition all day having occasional brief excited attacks but being manageable. In the evening he got worse rushing about the Gallery jumping into the beds and muttering & shouting. at 9 o'clock it was found necessary to place him in the padded room. In the forenoon he had Haust. Nig. q.s. No sedative is given and he has taken no solid food since admission but has drunk some milk.

6th Aug. Noisy and restless all night. Wet & dirty. This morning he is excited, screaming one moment & soon after being sullen & refusing to speak. Gesticulating a great deal.

John Stevenson
cont'd.

7th Aug. Nothing to report in the way of improvement. Slept none last night. To-day he is out all day in the airing court and is taking rather more nourishment. Ordered 30 grs Chloral & 30 grs Bromide for to night.

8th Aug. Slept none last night and was very noisy. To-day he is excited running up and down the Gallery and shouting at the pitch of his voice. It is determined to try Sulphonal with him and he is ordered 30 grs now and thes to be repeated 2ce during the day, giving him before 8 o'clock to-night 90 grs in all. His bowels having been freely opened last night he is in good order for the trial

9th Aug. The 90 grains had no effect and he slept none. To-day there are no indicns of the Physiological action of the drug either in vision, locomotn or Speech. He is given to-day 100 grs, 30 in the morning 30 at midday and 40 at night.

10th Aug. Slept some hours last night and now the drug is distinctly having effect. His speech is slower & thick, he complains of seeing things double. & his tongue is white and silvery and is protruded very slowly and his walk is distinctly affected. Sensation is externally also dulled. He has none to-day but in the evening gets 35 grs to be repeated in 4 hrs if necessary. He is on fluid food and takes it readily. Urine normal.

11th Aug. Slept very wee last night with one powder. His condition to-day is practically that of yesterday. He is ordered sufficient Sulphonal to keep him under its influence and his state is carefully watched.

To p. 105

Hugh McCormick.
Cont. from p 84.

Aug. 7th Patient slept badly last night & suffers from hallucinations seeing his wife & daughter looking in at him as he lay in bed. He states that his wife is poorly & that he is to go home today with an attendant. He is somewhat excited & will not bear contradiction, when reasoned with as to his having really seen his wife.
The irritation of his stomach is much less & he has been able to take some solid food.
His urine today contains a large deposit of pink mates but is otherwise normal.

8th Patient is today sullen & disinclined for conversation being evidently ill-pleased that he has not gone home as he desired to do.
He vomited again this morning.

" 19th Patients condition is now much improved both mentally & physically. He is now much less sullen & reserved in conversation & gives expression to no delusions. His manner is still somewhat suspicious. He is very anxious to get home to his business.
The tremor which was formerly so marked is now much less though still present.

Sept. 18th Since last note patient has improved

greatly. Tumor is now scarcely visible at all. Mentally he is now well, being frank & having lost the suspicious manner previously noted. Today discharged

Recovered.

William Primrose

Cont. from Vol. III p. 471.

Aug 8th Cont.. His gait is hemiplegic in type & he is bent towards the left side. On standing erect with eyes shut & feet close together he has tendency to fall.

Jan. 22nd There is no change to note in this patients' condition bodily or mentally.

April 30th 1891 Bodily health remains good. He is always cheerful and pleasant. Has not been asking to get away - but when questioned he says he feels bodily & mentally sound.

Aug. 31st. Of late he has often expressed a strong desire to get away - says he feels quite able now to leave & that as well as he can ever expect to be. He sleeps well - & is everything desirable in behaviour and manner & most orderly & polite always - except that his dress is sometimes a little untidy.
He perfectly recognises his late illness & is very sensible about it. It is doubtful whether he could ever successfully mingle in business again, as his mental condition is certainly weakened & deteriorated - but at the same time he is certainly no longer a fit case for detention in an asylum, & is quite able & understand the responsibilities of freedom - and seems to be deserving of them.

December 3. In the Case Books of an asylum for the Insane, it is difficult to make such a note of this patients condition, as would justify the belief that he should be longer kept here. His mental health standard is not a very high one, his finer intellectual faculties

William Primrose
cont'd

are blunted and there is a dulling in the activity of mental actions. But while probably he cannot never engage in his business work again, he could be outside perfectly well and is very anxious to be away. The reasons of his being here are more social than medical. His brother supports him, the family, & he fears that were he out & living with his wife, more choosen and so the burden on him er. How far is this a competent reason an asylum —.

unchanged. He is extremely weak - n no delusions. In good bodily health

troubles him at present. Though he very yet he is always full of assurance. better, that he is very well &c. In shows a great facility & easiness not consistent with good mental health have and not so persistent in his way. —.

during the last few months & enjoys fairly good health. His memory has been observed to be deficient of late, more than was previously noted. He does not remember to insist on certain things being done & is more facile than he was some time ago. A specimen of his hand-writing is annexed

Dec. 16 no change. Troubled with lumbago a good deal. Otherwise unchanged.

1893

Jan. 31. no change. Growing very slowly

Joh. 598

Wm Primrose
16 Sept 1892

William Primrose

Cont. from Vol. III p. 471.

Aug 8th Cont.. His gait is hemiplegic in type & he is bent towards the left side. On standing erect with eyes shut & feet close together he has no tendency to fall.

Jan. 22nd There is no change to note in this patients' condition bodily or mentally.

April 30th 1891 Bodily health remains go... cheerful and pleasant... get away - but when questioned ... & mentally sound.

Aug. 31st. Of late he has often expressed ... away - says he feels quite ... well as he can ever expect ... well - is everything desire... manner & most orderly & po... his dress is sometimes a l... He perfectly recognises his ... sensible about it. It is ... could ever successfully m... as his mental condition ... & deteriorated - but a... is certainly no longer a fit case for detention in an asylum, & is quite able & understand the responsibilities of freedom - and seems to be deserving of them.

December 3. In the Case Books of an asylum for the Insane, it is difficult to make such a note of this patients condition, as would justify the belief that he should be longer kept here. His mental health standard is not a very high one, his finer intellectual faculties

1892. January ... July 14 ... October ... Dec. 10 1893 Jan.

William Primrose
cont'd

are blunted and there is a dulling in the activity of mental actions. But while probably he could never engage in his business work again, he could be outside perfectly well and is very anxious to be away. The reasons of his being here are more social than medical. His brother supports his family, & he fears that were he out & living with his wife, them might be more cheerless and so the burden on him, would be increased. How far is this a competent reason for detention in an asylum —.

1892.

January 19. Practically unchanged. He is extremely weak-minded but has no delusions. In good bodily health & condition

July 14. Severe lumbago troubles him at present. Though he suffers considerably yet he is always full of assurance that he is better, that he is very well &c. In this he certainly shows a great facility & easiness not compatible nor consistent with good mental health. He is extremely suave and not so persistent in his wishes to get away. —.

October 3. Has changed little during the last few months & enjoys fairly good health. His memory has been observed to be deficient of late, more than was previously noted. He does not remember to insist on certain things being done & is more facile than he was some time ago. A specimen of his hand-writing is annexed.

Decr. 16 No change. Troubled with lumbago a good deal. Otherwise unchanged.

1893

Jan. 31. No change. Growing very slow

Joh. 598

Thomas Frew.
admitted Aug. 12th 1890.

Patient is 36 years of age, single, a master watchmaker & jeweller & a protestant. He was brought from Lisfield Burnbank Road, Hamilton & admitted to the West Nr. at the instance of his Father.

First attack — This is his first attack of insanity & it has lasted more or less for 10 months.

10 months — The Cause is unknown.

There were three epileptic fits at the beginning of his illness. He is not suicidal or dangerous to others.

No H. P. — No H. P. stated.

The medical certificates bear:-

1. "He states that twenty thousand pounds have been collected for his benefit by the various Churches & that he is about to buy a business worth sixteen thousand for four thousand. For some months he has been acting in a most insane manner, buying goods he had no need for, stating that he was going to get married, rising in the middle of the night & declaring that strange men were sleeping in the house.

2. His appearance & general demeanour are very much ~~changed~~ altered from what they used to be. He talks incoherently regarding the large sum of money he

he has, & the shop he is going to take in Dumfries. He believes he has ten thousand pounds & soon, which of course is not the case. His brother James tells me that Thomas has been behaving in a most peculiar manner lately, wandering about the streets, imagining he has a large collection of pictures & much furniture stored in a house in Clydesdale St. Hamilton which is not the case. He has also many other strange fancies.

Patient, on admission was happy & contented & very facile in conversation. He did not realise where he was but thought he had come here for treatment for his kidneys.

His physical condition is fairly good.

13th Patient slept fairly well last night & this morning he is in much the same mental condition as on admission.

Patient's face has an expressionless & vacant appearance when at rest & when he speaks there is marked tremor in the lips & under the eyelids. His tongue is markedly tremulous & his speech corresponds to this & the lip condition: it is slurring & tremulous & faulty when difficult words are attempted.

The eyes are slightly exophthalmic: the pupils are equal & regular & respond both to light & accommodation.

The Knee reflexes as also the cremasteric reflex are exaggerated on both sides.

Thomas Frew.
Cont.

The plantar reflex is deficient especially on the right side.
There is well marked "increase of base" in his gait & the heels are planted on the ground with unusual vigour.
He has considerable difficulty in turning round suddenly when walking: he requires to make a slight detour before he can do so.
On standing erect with heels close together & eyes closed there is distinct tendency to giddiness.
Patients whole condition points to G. P. well on in the second stage.

Aug. 14th Patient slept fairly well last night. He now seems to know where he is but it seems to affect him little if at all. There is evident dulling of all his mental faculties. During conversation his attention is apt to flag & he expresses numerous delusions though not of a very grandiose type: the delusions are of a fleeting character. He has a well-marked sense of bien être & says that he wishes to go to Hamilton to attend to his business.

" 15th Patient slept well last night. His mental condition shows no change today. He swallows without difficulty.

Aug. 19th Patient still continues as at previous notes. Today he is somewhat dull & shows no desire to carry on conversation. He is sleeping well though last night he was a little restless.

" 26th No change to note in patients condition save that he is sleeping somewhat badly.

Sept. 25th No change to note. Patient is sleeping better.

Oct. 30th This patient shows no advance of the physical signs of his disease. Mentally he has become very stupid & dull & paying no attention to anything going on around him. He can hardly be roused up to answer a single question. He is sleeping well.

Jan. 22nd 1891 Patient going down the hill. He is getting thin and very stupid. As a rule he can still be kept up; but occasionally he ~~has~~ is too weak to sit up.

Mar. 18th 1891 Confined to bed for the last few days. He is now really too weak to be out of it.

April 30th 1891 This patient is now confined always to bed. He lies there in a perfectly passive condition - never speaking, and not often moving. Passes his water in bed. The pupils are usually equal in size, tho' the size varies, there being considerable dilatation at times.

May 11th Knee jerks & ankle clonus present in excess on both sides. Superficial skin reflexes exaggerated. Never speaks to visitors - but recognised & spoke to his brother the other day. Speech was then very slow & stuttering.

To page 489

William Burgess.

Cont. from p. 72.

Aug. 19th Cont

His bodily condition however is keeping up, his appetite being very good. The tremor is still well marked but there is as great an improvement of his walk. He has not been dirty again.

Mentally he is changed & has developed numerous grandiose delusions. He is now "King of Scotland" & has been endowed with powers by which he can avert wind & rain at will. He is the possessor of millions & millions. The thought of this causes him to chuckle & smile in a gleeful manner.

At times however he is still depressed.

His memory is but little affected. A few days ago he saw an old friend whom he had not seen for a long time & gave him a most cordial welcome.

A specimen of his handwriting has been annexed. In it tremor is visible & also the missing out of numerous words.

Sept. 25th Since last note patient has gained a great deal of flesh & is now becoming corpulent. Not much change in his bodily symptoms. Mentally he has lost

dullness of late & has not given expression to so many delusions although his thoughts seem constantly occupied with them.

Oct. 30th Patient has gained greatly in weight & is now very corpulent. His face has a heavy & expressionless look when at rest & facial movements are performed in a clumsy fashion. The physical ~~symptom~~ signs have not made any great advance since last note. His gait is still good.

Mentally he is still very delusional & talks of going to his castles in different parts of the country. He has occasional attacks of excitement his language being then very coarse & obscene.

His habits have become of late very depraved & he is frequently wet & dirty.

Dec. 19th Patient much the same as at last entry. He is noisy occasionally, but if anything quieter.

Jan. 22nd In every way much the same.

Feb. 12th Patient this morning seized his opportunity, and burnt his leg against the protector of the fire. His trousers were burnt and a burn inflicted of some 10 in. extent on the calf of the right leg. There is a slight tendency to vesicle otherwise it is not severe. A super-saturated solution of soda was applied. Patient gave as the reason for burning his leg that it was poisoned.

Continued p. 241

John Millar

Cont. from p. 52.

July 30th Cont. The former condition is showing very little sign of improvement as yet. He is using Suppositories of Formic Acid: as yet the time is too short to judge of their efficacy

Aug. 10th The paresis of his speech has now disappeared & patients mental condition is in consequence much brighter. His health is now very good. When spoken to he is frank & sociable & apparently free from delusions & depression. At times he is still dreamy & listless as though his thoughts were far away. He is sleeping very well & his appetite is so good that patient doubts if it is a true one.

" 20th The last cloud from patients mental horizon has been removed. The cloud consisted in his belief that he had syphilis of a very bad type & that his employer had been informed of this & also of the fact that he could not be kept in the Asylum any longer owing to the filthiness of his case. Patient states that he heard this quite distinctly mentioned when he was lying ill in bed.

On being assured of the falseness of

these beliefs he was greatly relieved & stated
this was the only thing which had kept him
back from complete recovery.
He has today been allowed the liberty
of the grounds.

30th Today discharged
Recovered.

Oct 30th Patient is reported to be Resting very well &
talking in terms of admiration about the
wonderful medicine which made him ill.

David Carmichael

Cont. from p. 12.

Aug. 20th Cont. His antisocial tendencies have been more marked of late. He sits by himself in the darkest part of the gallery & broods over his own imaginary wickedness.
His bodily condition is good: his appetite is described as being false. He sleeps very well.

Oct. 11th Since last note patient has made very little progress. His delusions are as fixed as ever but he does not obtrude them as frequently as formerly.
His bodily health is excellent.
He was today removed by his brother to the highlands.

Discharged
Relieved.

Readmitted see p. 125.

John Turnbull

cont. from p 50

1892

September 28th — Owing to the confusing of this patient with another of the same name no note has been made for some time but on comparing his present condition with that described in former notes it is at once seen that there has been not much change. At present he is the subject of mild dementia and gives no trouble. He is unable to keep up a rational conversation and is very facile. His general health and bodily condition are excellent.

December 20th — There is no change; he is happy and contented and expresses no wishes or desires.

1893

June 30th — He has been shifted from No. 4 to No. 1 and he has expressed neither dissatisfaction or the reverse at the change. When spoken to he looks at one in a fatuous manner and with a fatuous smile and instead of answering often repeats over the questions asked. He walks outside regularly and his general health remains excellent.

Dec. 28th — Continues in good health and with nothing special to note about his mental condition which is that of dementia.

1894

December 29th — There is no change to record during this year. His health continues good.

1895.

Dec. 20. — Silly + apathetic he is very demented and enjoys very excellent health.

1896

Oct. 6 — J S2 both mentally + bodily. Sometimes excited then he might strike.

Cp. VIII. 427

John Stevenson
Court Crompt. 90.

17th Aug. His nights have been very good since last note & the Sulphonal seems to have had a good effect apart from merely procuring sleep. He is now allowed to come out of it and to-day while a little excited is distinctly better than he was a week ago. He is still rather incoherent and impulsive anxious to get home and talking more than is his usual.

20th Aug. Last night he was a little restless and talkative but to-day he is more settled and is taking his food very well. The total amount of Sulphonal given him from the 8th to 16th inst amounted to 340 grs. —.

28th Aug. Settling down but somewhat slowly, and very uncertain yet. apt to have short but very violent outbursts when he jumps on the table, strikes any one near him and is distinctly dangerous. Talked sensibly to his father when he saw him yesterday He has slept well for the last few nights without drugs. — Pupils are to-day mobile, moderately dilated and equal. Tongue slightly tremulous & coated. Pulse 78 and full.

10th Sept. Now in No 4 Gallery and settling down somewhat. Is still very excitable & uncertain. He has been sleeping very well at night without hypnotic and it is hoped that his progress towards recovery will be rapid.

14th October. Has had to be sent back to 2nd ward. He was impulsive and violent to be violent & rough, talking a great deal & shouting. He is now quieter in 2nd & is settling down slowly.

John Stevenson

cont'd.

October 31st Back again in No 4 and distinctly better but in an uncertain condition. The least thing making him excited and inclined to talk loudly and not quite rationally. On the whole he is improving but slowly. He is sleeping well, requiring no sedative and his appetite is good.

Nov. 18th Patient is back again in Infy. ward in consequence of a return of the excitement. This has to a certain extent calmed down now. He still shows great bodily & mental restlessness & talks in an exalted fashion. He is quite coherent however & free from delusions. His bodily condition is keeping up & he has been sleeping well.

Nov. 28th Patient again in No. 4 & keeping wonderfully well. He is still somewhat excitable & unstable in his manner. He is quite coherent & apparently free from delusions.

Dec. 12th Patient is again back in Infy. as another maniacal outburst seemed imminent. He has however calmed down somewhat within the past two days. His condition remains very unstable.

1891

Jan. 16th Patient is back in No. 4 & settling down steadily. He is still erratic in conversation & very excitable. His conversation is however coherent & free from delusions. He is in fair bodily health & condition

to p. 278.

Rev. William Martin Watt.
admitted Sept. 1st 1890.

see Vol. III p. 540

Patient is 71 years of age & minister of the parish of Shotts. He was discharged from Gartnavel on June 8th as "relieved" & has been at home with an attendant since. He Repd fairly well till six weeks ago when he was upset by some Church matters in connection with the appointment of a successor to him.

Since then he has again developed numerous delusions as to his own utter unworthiness & wickedness & as to his children being ruined on this account. He has been very depressed with occasional outbursts against his children in order to save them from their ruin. He did not threaten suicide. Since he became worse he has required the use of the catheter on several occasions.

On admission patient was in an excitedly melancholic condition, very restless, wringing his hands, & very emotional, his face being swollen with weeping. His conversation was coherent but rambling & consisted of a repetition of all his sins & unworthiness & of the ruin which was hanging over his & his children's head. both he & his children were to be put out into the street

& left to die.

Since his discharge patient has gained flesh & is now in fair bodily condition. There is evidence of senile changes in his blood vessels & his pulse is very irregular.

Sept. 25th Since his admission patient has been sleeping very well. His appetite is also good. His mental condition shows less excitement & the restlessness is less marked than on admission. He is still very emotional & expresses the same delusions as on admission. He is suffering from a small boil on his neck.

Oct. 30th Patient is now looking much better. He is gaining weight or as he puts it himself he is fattening up for his condemnation. His mental condition is improved, although he still is filled with ideas of his own utter unworthiness & the injury which he has done to his family. He is taking more interest in outside things than on admission. He now reads his newspaper with more enjoyment since the dispute in his parish has been settled. His distress is to a certain extent automatic being chiefly marked when the writer speaks to him. He is without hope or even desire to get well & seems almost annoyed at the improvement in his bodily condition. He is still sleeping very well.

to p. 113.

James Augustus Pedew
Admitted 7th Sept. 1890.

Private patient admitted to night to the West House. He is 20 years of age. single and a Protestant. By occupat. he is a clerk and resides with his father at 279 West Regent St. He has been insane for an indefinite period, but his friends have noticed him becoming worse for about 8 mos. This is his first attack & the cause is uncertain. He is not epileptic suicidal or dangerous to others. No known H.P.

Medical certificates state that he believes his mother wishes to poison him, that he believes he can live without food & that he has lost his calculus &c &c.

Patient is thin & undergrown & has a haggard expression.

On admission he was very excited & restless. He talked in a rambling & incoherent manner & gave expression to delusions such as noted in the medical certificates.

8th Patient slept fairly well last night but is still very excited & restless this morning. Conversation incoherent.

10th For the past two nights patient has hardly slept at all being noisy & restless. The excitement is still great today his body being rarely at rest & his conversation rambling & at times incoherent.

12th For the last two nights patient has had a draught & has thus got a few hours sleep though still very restless & noisy. He was wet last night.

J. augustus Tedew.

Today he is very much excited & still talking in a disjointed & fragmentary fashion.
His appetite is good.

18th Since last note patient has improved only slightly. He continues to be very excited especially at night when he has slept very little & only after a draught. He is noisy & restless & careless of his dress & has a most dishevelled appearance. His skin is hot & clammy. His conversation is still quite rambling & full of delusions. "He has lost his history & calculus" & so forth.

24th Patient is now settling down somewhat. There is not so much motor excitement as previously & his conversation does not tend so much to incoherence. He is much less noisy at night & has passed several quiet nights without requiring a draught.

Oct. 7th Patient is still improving being quite rational in his conversation & with less motor excitement than previously. His conversation is now coherent but very rambling in character & at times almost unintelligible. In it he expresses numerous delusions chiefly having reference to his own body. He is now sleeping fairly but has been restless several times of late. He is taking quinine a course of Gorkhas to check this.

to p. 121.

Charles Johnstone, 23

Admitted 13th Sept. 1890.

Admitted to day to West House. He is single, a clerk and resides at 400 Brown St. He has been insane a few days. This is his second attack. For the first attack he was in this Asylum some years ago. (See Jour 22 p. 479. O.S.). Cause is uncertain, overwork not epileptic, succesa or dangerous hotters.
a Paternal uncle was insane.

Medical certificates bear that his conversation is rambling and incoherent and he has delusions. Says he has power over peoples actions. Says that if he were to go into a room full of ladies he could make them all fall madly in love with him.

Patient is undersized for his years & is not of a robust constitution. He is troubled with Chronic Pharyngitis.

On admission he was talkative & boastful saying that he was busy writing two or three novels & that it is quite a simple thing to do.

14th He slept well last night & today is again very loquacious & assertive.

18th Since last note he has been sleeping fairly well. He complains today of headache to which however he is subject periodically. His conversation is frank & expresses a large amount of self confidence. He tends to be boastful.

28th This case is one on the borderland of sanity & insanity. Patient is quite coherent in his conversation & free from

delusions unless a false idea of his own intellectual powers can be called a delusion. He is extremely self-assertive & impulsive. He exhibits a great lack of balance & application for work. He is going to work for a few hours in the store every day but his work, this, is very erratic in character & wants method.

His mental constitution is defective & ill-developed & corresponds to his bodily condition: his mouth & teeth are ill formed & his palate is unduly high.

Oct. 17th Patient was today taken home by his mother. His mental condition is still very unstable but it is doubtful if prolonged residence here would have improved him in this respect. The report from the store as to his work has lately been more favourable but this improvement is too probably due to the prospect of his getting home if he showed more industry.

Relieved.

Readmitted.

see vol V f. 468.

Thomas elboore. Voluntary
Admitted 15th Sept. 1890.

Sept

Voluntary patient admitted to East House 4 day. He was ill about 3 weeks ago consulting Dr. Yellowlees & states that he wished to come to the asylum. He would only do so upon certain conditions such as that he got no medicine, has a room to himself, was not to mix with other patients &c. These conditions not being agreed to he did not come in then as a patient.

To-day he comes back and promises to stay at least six weeks in the asylum signing a paper to that effect and coming in without making any conditions.
He is a man of average height and of fair complexion and very evidently introspective. States that he has had 24 Q
no settled place of abode for years, that he has no friends and has not worked for 2 years, his last situation being as a jeweller's assistt in America. His symptoms 29
mainly are, great dread that he is going to become insane that there is something wrong with his head. that his health is failing, and that his digestive system is all gone to the dogs. He is not at all suicidal but is a miserable hypochondriac. He is allowed the freedom of the grounds and is advised to go to the garden and exercise there.

17th Has been sleeping indifferently and is full of complaints says the tea is too strong (a most unusual complaint) that the meat he eats does not digest. Implores the doctor not to think that he is a fraud, says its all because he never had anyone to take an interest in him. Denies ever having been a masturbator but acknowledges to have had Syphilis. He has an habitually anxious expression and a very nervous manner.

George Elboore.

cont^{d}.

Sept^{r} 20th This morning he was very full of complaints. said he believed he was not being properly treated. that the people he associates with were doing him harm and said he would never have come here had he known what sort of place it was. He went out walking in the forenoon. after dinner he complained of not feeling very well and the writer saw him but his complaints were vague and he seemed to like being in an Asylum. In the afternoon he again went out walking alone and did not return Search was made in the grounds for him but he could not be found.

24th a note was received from him to-day from Inveraray where he is at present working at his trade. He wishes to be discharged.

27th Discharged

Relieved

James McKenzie
from p. 62.

Sept. 17th. Brightening up somewhat and decidedly gaining in flesh. He now interests himself in ward work and has given over picking at his skin. He still says he knows very well what he was brought here for and that we may finish him at once.

October 14. Distinctly better and now out working in the grounds. His sleep is not yet quite satisfactory but is improving.

October 31. Better somewhat but still far from well and not up to the normal standard of cheerfulness. Working out regularly but goes about everything in a very languid way and when talking with him says what's the good of doing anything. There's nothing he can do well etc. His bodily health looks good. —.

1891
7 March. This patient is becoming more normal. He is dull & disinclined for conversation. His cry is still "What's the use". He has been picking his head very badly of late

& there were several nasty sores on it.
His general health is fairly good.

June 16. Some days ago patient was brought down to Inf. Ward on acct of a discharge from his penis. The organ was found swollen & congested with pus exuding from the urethra. With some little difficulty & by enlarging the orifice of the urethra there was removed a lucifer match & the tooth of a large comb. Fomentns were applied and the swelling subsided. As he wd not leave the dressings alone buttoned gloves were put on. To-day a probe is passed with the canae and about 3" in it comes distinctly against a foreign body. This is beyond the reach of ordinary forceps so it is let alone for a day or two with the hope that it may be washed out by the stream of urine. There is now little discharge from the urethra, the swelling has considerably diminished and micturition is free. — Mentally he is very stupid and was quite unable (or unwilling) to give information as to what foreign bodies were in his canal

June. 21st. With a good deal of trouble by means of a loop of wire & a hernia director two stiff straw fibres from a broom and another comb tooth of horn were extracted from patients urethra. and the passage seems quite clear.

June. 25th. Patient is now up and going about & has no further trouble with his urethra. he has gone down stairs again. He has been picking his head a great deal of late.

September 1st. His urethra has not been giving any more trouble but he has taken to picking his head & wont leave it alone. Mentally he shows no improvement & bodily he is not at all robust. Has not been in the Garden since the beginning of June.

Jos. 498

John Watt – 32
Admitted 23rd Sept. 1890.

Admitted to-night to East House.
Patient is single, 32 years of age, by trade a ranbuilder, and resides at 116 Pollok St. Glasgow.
Father states that a change was first observed about two years ago. He had a ticket for the Exhibition and went frequently showing great interest in it. Gradually his interest began to fall off, and he shewed more desire to stay at home than go out. He became dull and stupid in manner. Where he had previously been a very clever workman, intelligent, and interested in his business, he now became careless, listless, and untrustworthy. His work was unsatisfactory.
This condition got gradually more marked. 2/
He preferred to be left to himself and said little. About a year ago his speech was noticed to be more thick than it was and 20th
slower in utterance. One day he would be rather excited, on another dull and stupid. About three weeks ago he became very feeble and remained all day in bed. 1st
A good deal of tremor was noticed in his hands and legs when excited.
Father can give no cause for patients' illness. States that he has always been well conducted and thoroughly reliable. Has never seen any sign of masturbation.

On admission patient was found to be fairly well nourished, somewhat pale but with ruddy cheeks. He has an extremely stupid and vacant look, and sits where he is put as if it was of no interest to him. He can only walk with assistance, and shews considerable tremor. Does not incline to eat, swallows with difficulty, even milk causes a good deal of trouble in deglutition.

Examination of the lungs and heart shew them completely sound. The pupils of the eyes are regular, if anything slightly dilated. Urine tests shew negative results. Sp. g ~~1020~~, slight deposit of phosphates.

There is a slight erythematous eruption on the back. No scar is observable on the penis.

27th Sept. Patient inclines to lie in bed and be left to himself. He replies when addressed slowly and reluctantly. He is quiet at nights.

20th Oct. Patient sits all day in one position without shewing interest in anything. He occasionally starts along the ward towards the door as if trying to escape, and comes back reluctantly.

Nov. 18th Further observation of this patient strengthens the idea that he is a General Paralytic. His face when at rest has a vacant sodden expression. When spoken to he smiles but in a heavy & clumsy fashion his facial movements being very slow.

On speaking, a slight tremor is visible.

to p. 169.

Harry Park
admitted October 6th 1890

Patient is 32 years of age, single a protestant, of no occupation residing at 1 Hamilton Crescent, Partick.
He is admitted to the West House at the instance of his father.
This is the third attack patient having been a patient in Gartnavel in 1883 & 1885. (vol 22, p. 395 & 05. & p. 446.)
The present attack only commenced this morning patient becoming quite suddenly very excited abusive & destructive. For a few days past patient had been behaving in a strange way ~~in conduct~~, laughing to himself & staring at objects in the house with which he was quite familiar, in a peculiar & absorbed fashion.
He is not epileptic or suicidal but may be dangerous to others.
There is no H. P..
The medical certificates bear that he is wild & furious; offers violence threatening to strike; has broken a mirror & windows: that he is excited & incoherent: thought the Dr was Drs. Park & a detective
On admission patient was very excited but sullen & disinclined to talk. On questions being pressed on

him he became suddenly very abusive & in his talk expressed delusions as to the identity of those around him. His eyes were very bright the pupils being very mobile were widely dilated & again contracted but both equally so. His breath was very foul & his tongue dry & covered with a yellow fur.

Patient's general health is good physical exam. being negative in detail. His urine contains a heavy pink urate deposit. His body is fairly well developed & muscular. His palate is unduly arched & high.

Oct. 7th Patient slept fairly well last night & this morning is much quieter. He seems to realise where he is & on being examined was greatly pleased to find there was nothing wrong with his lungs. He has a slow & dreamy way of answering questions which however he did in a coherent manner.

30th Since admission patient has behaved in a calm & orderly way. His conversation is slow & "far off" but quite coherent. He has a childish manner. He plays fairly on the piano & makes himself useful in the gallery. He is quite happy & contented with his position. He is sleeping well & his bodily condition is good.

to p. 142.

J. Augustus Peden.

Cont. from p. 110

Oct. 7th Cont. Five nights ago patient had a short return to his acutely maniacal condition. The cause was masturbation. He screamed loudly refused to stay in bed & was very excited & quite incoherent. By restraining he was again quiet.

30th This patient has improved greatly since last note. He is now in Ward 4. He is much calmer & talks in a coherent though somewhat dreamy manner. He has a tendency towards stupor. He stands for a long time in fixed attitudes gazing at some trivial object. He twitches his mouth & screws up his eyes in a nervous fashion. His bodily condition though improved is still not up to a proper standard. He is still sleeping under observation & very well. He has for the present given up masturbation.

Dec. 10th For the last fortnight patient has been excited again. Talks incessantly and incoherently. He was put on small doses of sulphonal thrice daily. He is rather better to-day; but is thin & very pale and pasty-looking.

Dec. 19th Still excited and stupid. Sulphonal has been withdrawn paraldehyde being substituted with good effect. He is taking cod liver oil, and tonic.

Dec. 25th Patient has been losing flesh lately and becoming worse mentally. Chiefly it is believed on account of masturbation. Two pins were put in his penis to-day to try to check the habit.

Dec 27th Patient distinctly improved. He is brighter-looking and stronger, and answers questions coherently. The penis is somewhat swollen.

Dec. 29th Last night patient removed the pins, and is not quite so well this morning.

Dec. 31st Patient decidedly relapsed. He is again talking in a rambling fashion. There is little difficulty in fixing the cause. The pins have not been reinserted but he is walked about in the open air all day.

1891

16 Jan. Patient was today transferred to the Convalescent. He is restless & rambling in conversation & never looking one in the face. He is in very indifferent bodily condition.

17 Feb. Patient is improving in bodily condition & is now becoming fat. He has been working regularly in the grounds. He seems to have given up his bad habits. He now talks much more frankly & seems much happier & brighter. He has been sleeping much better.

to p. 279.

123

David Black.

Admitted 7th October 1890

Patient is married, aged 67 years, a pattern-maker, and lives at 389 Duke St.
Patient has been ill only a few weeks at this time; but his first attack occurred 23 years ago, and he has been repeatedly insane since then. He has only been treated at home before now. It is questionable whether he is dangerous to others or not. He once attempted to cut his throat. H.P. uncertain.
Medical certificate shows that he will not engage in conversation, speaks of himself as extremely wicked, refuses food and medicine, thinking people are attempting to poison him.
His family say that he is full of delusions. He imagines himself to be condemned and expects the Judgment Day. He has suggested that he thinks it would be better if his family were all slain, and on one occasion he threw a paraffin lamp on the fire.
On admission ~~very little~~ no information could be got from him. He refused to speak, turned his face away, and groaned. When questions were pressed on him he groaned the more, and his breathing became more quick and excited. His lungs and heart seem sound.

20th Oct. Patient now slightly more communicative. Does not moan so much, and speaks of

a wish to see his family and know if they are all well. Still much depressed and anxious.

Nov. 11th Patient is now improving somewhat & is in No. 4 gallery. He speaks with greater readiness now & is anxious to get home to his friends. He is still very depressed & takes a morbid view of life. In todays conversation he expressed no delusions. His face has an anxious & gloomy look & he is very thin. He is sleeping fairly well.

" 18th Still improving though slowly. Very depressed & anxious about his friends. He is greatly troubled with constipation. He is now feeding better & sleeping as a rule well.

" 28th Patient has been sent back to the Infirm & has been put to bed. He requires much attention. His digestive system is very weak & his delusions centre around it: he has not had a motion of his bowels for weeks according to his own statements. He is put on milk diet & small quantities of Lactopeptine. He is still very depressed and anxious as to his family.

Dec. 12th Patient has improved slightly in his health since last note. He has been kept in his bed most of the day. His bowels still remain a great source of trouble & mental anxiety to him.

to p. 193.

125.

David McCubbin Carmichael
Re Admitted 19th Oct. 1890
East House.

Patient is 47 years of age, single, a warehouseman, and lives at 14 Berlin Terrace, Pollockshields. He has been 12 months insane this present attack. It is his second attack; the first occurred ten years ago. He was previously treated in the Crichton Institute, Dumfries, and latterly in the West House, Gartnavel, from which he was only discharged on the 11th October, relieved, to be taken to the Highlands.

(See present volume pp. 7: 12: 103)

His delusions seem to be precisely similar, and as fixed as ever. He seems to take almost a pride in his fancied illness, and follows people to tell them about it; still he always keeps them at a distance as he says he should be shunned. He says the illness in the Infirmary Ward is caused by infection from him.

22nd Oct. Patient refused food until this morning when he took his breakfast.

Nov. 12th Patient shows no improvement other than that he is now more easily managed than on admission & is now taking his food.

In addition to his delusions as to his worthlessness he now believes that he has got syphilis. How he got it he cannot say but still he is convinced he has got it.

Dec. 22. No improvement. Delusions still fixed but he is not more so otherwise with them.

1891

17 Jan. Patient has today gone home with his brother for a few days.

14 Feby. Word was got from patient's brother Pratt he has behaved very well since he was taken home & they have determined to keep him. He is therefore today discharged.

Relieved.

John C. Sharp. (voluntary)
admitted Oct. 21st 1890.

Patient is 48 years of age a widower & a protestant. He is a draper residing at 6 Battery Place Rathmines & is admitted as a voluntary patient to the Hospital.
Though only 48 he has the appearance of a man 10 years older, his hair etc. showing signs of premature old age.
His life has been a sorrowful one he having lost two wives. His illness dates from the death of the second wife two years ago. He has gradually become depressed in spirits & has lost confidence in himself. This along with business worries has so unnerved him that he is unable to keep his attention fixed on any subjects for any length of time. He has become very emotional readily breaking out into tears. He admits having had suicidal inclinations & it is the fear of this which has induced him to put himself under treatment.
He has been sleeping badly for some months & has suffered greatly from constipation. His weight has been gradually falling his appetite being poor or rather he fears to take much food in case it should disagree with him.
His manner at first is uncertain & hesitating but after a short conversation he seems to gain more confidence.

He entertains no fixed delusions his mental condition being one of simple depression.

Oct. 30th Patient has improved somewhat since admission. She is taking her food with good appetite & no bad result. Her bowels are being regulated with mineral water but tend to be very costive. She has been sleeping on the whole fairly well though not-less for a day or two after admission. She is still depressed about herself & her children but is not more hopeless of recover-ing. The whole bent of her mind is gloomy but he brightens up wonderfully after conversa-tion. She is always worse in the morning & improves as the day wears on.

There is a very strong H.P. in this pa-tient's case. A brother was a patient here & was transfered to another asylum. He was a melancholic with very strong suicidal tendencies & made more than one attempt on his life (Vol. 22 p. 229 O.S.)

Another brother & a sister were also insane

Nov. 10th Patient is improving somewhat but his condi-tion varies greatly. She is becoming more self-reliant & better able to fix his attention on what he is reading. For the past day or two he has not been so bright going to some work about his business. His appetite is good & his bodily condition improving & he is lighter & more active in his movements.

to p. 159.

John Stirling
admitted Oct. 22nd 1890.

Patient is 67 years of age married, a protestant & ex-governor of Glasgow Prison. He was brought from 9 Lucens Crescens & admitted to the West House at the instance of his wife.
This is his second attack & it has lasted about 2 weeks. He had a similar attack four years ago but was not under restraint. No Cause is mentioned in the warrant but it is drink.
He is not epileptic or dangerous to others but he has threatened suicide.
There is no H. P.
The medical certificates bear that there
1. is a "marked change in habits, from being quiet he is very noisy & restless. Has threatened suicide. Has threatened to smash everything in his room if any wish was not granted at once. Has delusions as to presents of money & that he is employed on important business by the Caledonian Railway for which ideas there is no basis of fact. There is marked inclination to steal. At times violently excited with rapid incoherent & obscene speech.
2. "Talks in a very excited way & incoherently. Asserts that he is employed selling horses & arbitrating in disputes connected with horses which is not true. Says he must go to Elgin, Oban &c. in connection therewith which also is untrue. He has been in this

condition of excitement for about a fortnight & at times been very violent. Has repeatedly threatened to commit suicide. Asserts he was the Duke of York. States he is always receiving presents of money & articles of value. Has repeatedly taken articles of value from various places surreptitiously.

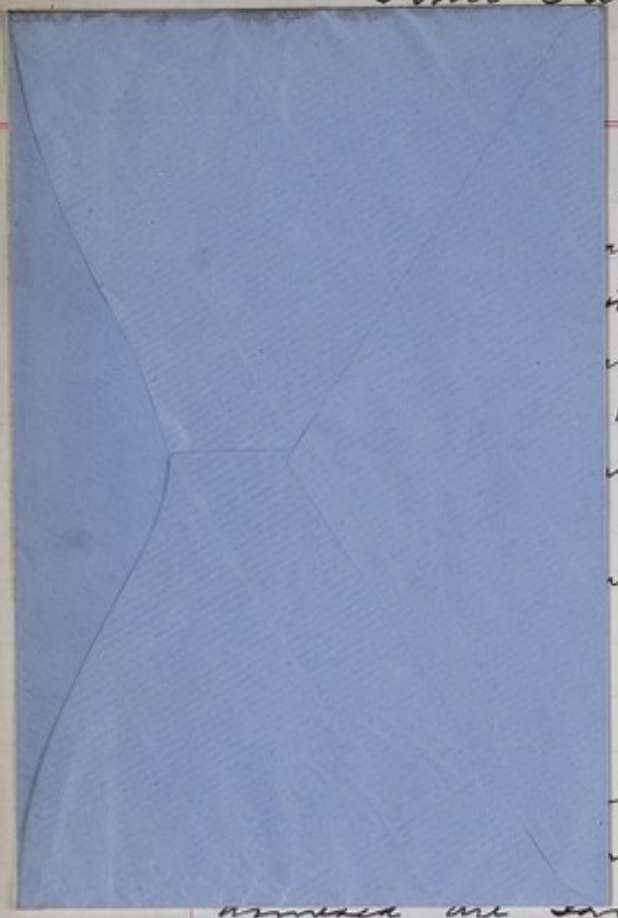
Patient is of very obese habit with a greasy & waxy-looking skin.

He has a very weak circulation. His heart is irregular & intermittent & very weak in action though free from murmur. Both feet show a considerable amount of oedema.

On admission patient was very excited & talked incessantly on all sorts of subjects & in a coherent fashion. His conversation was very coarse & abounded with oaths & coarse & obscene terms. In it he gave expression to numerous delusions some of the type mentioned in the certificates others with reference to the identity of those around him with many of whom he claimed acquaintanceship of many years standing. His manner was authoritative & bullying in the extreme.

Oct 23rd Patient slept none last night. Early this morning he complained of a severe stabbing pain in left side over the region of the 11th rib. On exam. This was relieved by hot fomentations. On exam. slight friction was

John Stirling



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coarse & blasphemous
being more marked
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s letters of which the
numbered are samples.

Oct. 24th Patient slept very little during the night & talked almost incessantly. He quarrelled with the attendants because he considered they did not show him enough attention. His bullying & lecturing manner is more marked today. There was slight return of the pain in his side. Faint friction sound made out.

Patient has been in the habit of getting morphia regularly which probably accounts for his want of appetite. He has again taken very little food till tonight when he got eggs & milk with gr. XXX Sulphonal.

28th Today patient still complains of pain

in his left side. It has been painted with Iodine & patient has been confined to bed. He has been put on a course of Digitalis. He slept for two hours last night was very noisy excited shouting out for the Doctors & saying that he was going to die at a certain hour this morning. He is today very weak & exhausted.

Sulphonal has very little effect on him. His appetite is still very capricious.

Mentally he is unchanged.

30th Patient slept well last night & is today much calmer & more reasonable. His condition has been much benefited by the rest in bed & the Digitalis. The oedema of the feet is almost gone & his pulse stronger though still very irregular. His appetite has improved in the last two days. His side has been much benefited by the Iodine the pain being now gone.

There is still a great deal of mental restlessness. He talks a great deal & writes numerous letters to various acquaintances & to the Editor of the Herald suggesting various improvements in the house & its management.

Continued p. 191

John Stirling
Cont.

detected but this was not constant.
No other lesion was discovered in the lungs. His urine was 1011, faintly acid free from albumen but contained a some phosphates
Tongue is moist & very slightly furred.
Temperature normal. His appetite is very poor & today he has taken very little food. His mental condition has been similar to that noted on admission.
His conversation coarse & blasphemous these characteristics being more marked if attention is paid to him. He has written numerous letters of which the annexed are samples.

Oct. 24th Patient slept very little during the night & talked almost incessantly.
He quarrelled with the attendants because he considered they did not show him enough attention. His bullying & blustering manner is more marked today.
There was slight return of the pain in his side. Faint friction again made out.
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There is still a great deal of mental restlessness. He talks a great deal & writes innumerous letters to various acquaintances & to the Editor of the Herald suggesting various improvements in the house & its management.

Continued p. 191

William Robertson

Admitted 24th October 1890

Patient is 22 years of age, single, a student of law, and lives in Gairestown, Wigtonshire. This is his first attack, and he has been some months insane, but has not been under treatment anywhere before.

An aunt was insane.

Medical certificate says that he is "restless, excited, and his friends have no control over him."

His father states that he has no control over him in preventing him from doing foolish things, and he considers that he should be put under restraint.

On admission he was found to be restless, excitable, and foolish in his manner: extremely conversational and vivacious ~~in his manner~~: wanted to make himself agreeable, and chatted with anybody, patients or attendants. He was inclined to be boastful in his manner, anxious to shew off some slight medical knowledge he had obtained from his brother, who is a medical student; but said he was a better medical student than his brother. He boasted about his bodily health, and said it was not on account of taking care of himself that he was so strong. In a word his whole manner and behaviour seemed to imply that he considered himself a devil of a fellow, but notwithstanding was

ready and willing to make himself generally agreeable.
Physical examination shewed his chest to be sound, but the heart irregular in its beat, about every 5th beat one seemed to overtake the other. There was no history of rheumatism, but some vague account of a strain some years ago.
The left wrist was swollen and useless the result of a fall from a bicycle some months ago.

23rd Patient did not sleep very well last night but was inclined to be talkative & restless. Today he talks freely about himself & his doings but in a boastful & foolish fashion. The fingers of the left are partially & forcibly flexed owing to adhesions which will be broken down.

28th Adhesions were today broken down. Patient is not now so talkative & becoming suspicious in his manner. He has been sleeping better & his appetite is fair.

Nov. 15th Since last note patient's condition has varied considerably. His conduct & manner as a rule are silly & he laughs in a childish fashion when speaking. At times he talks readily & again he is repellent & rude in his manner as though he considered himself too good a man to talk to the writer & others.

to p. 167.

James B. Gemmell

From Vol III. p. 423.

1890.

October 31st a weak minded patient who works in the Grounds and enjoys good health. He has been in asylum for some years and there is nothing in his mental condition calling for notice. His bodily health is good.

1891

7 March. No change to note in this case. He has worked regularly all winter through against his will. He is in good health.

July 2nd There is little change in this man's condition. He is in good B H + C. He is constantly asking to see the lunacy acts + the warrant on which he is confined. but when shown the act he is quite unable to make anything of it.

Nov. 6th Unchanged. Asks for musical instruments, song books or other articles. He does not really want them, but is always happier if he grumbles or complains of something.

Dec. 25th Weak minded + querulous. + in need of supervision. Has many fancies + makes numerous silly requests + complaints to the Officials.

1892

April 8th. An ill-conditioned surly man. always complaining about mere trifles. + endeavouring seemingly to annoy the Officials, for the pure sake of doing so. If his wishes are granted he is no better.

Aug. 9th. Foolish + irritable. Gives as much trouble as he can when the mood of grumbling is on him. No better in any way.

Dec. 16th Sometimes + makes himself as disagreeable as he can to the officials by his continual grumbling chiefly about being kept here.

James B. Gemmell.

At other times he is surly and reserved and refuses to speak. He is not now sent into the Grounds to work as he gives too much trouble by continually trying to run away.

1893

April 24th — He doesn't grumble so much now - the probable reason being that he is getting more demented. He often looks as if he would like to say something.

June 30th — His manner is furtive and confused. When he tries to argue about the necessity of ~~him~~ being allowed home he shows an utter want of reasoning power. Lately he has been somewhat abusive. B.H. & C. good.

Sept. 25th — Still remains one of the malcontents. He lately wrote a letter in a scrawling hand to his brother. It only consisted of a line asking his brother to come and see him. It had the same shabby looking appearance as the patient himself.

Dec. 28th — He always has a look of discontent on his face which often breaks out into open grumbling and sometimes abuse. He is easily led on and excited by the other malcontents.

1894

June 29th — This is a very troublesome demented. He is the spokesman of all the discontented in the Gallery. His health continues fair.

December 29th — During the past month or so he has been rather more civil but has not lost his shifty and furtive look. He sometimes persuades to write letters to various people.

Jo Vol VI p 342.

Samuel R. Findlay. Voluntary
Admitted 13th October 1890

For former admission see Vol III. p. 429.
This young fellow is admitted to-day as a voluntary patient. Since he left here he has had several ups & downs. For about 4 mos he kept very well able to be clerking &c. Then he got very dull & has practically continued in a dull state till now. He told his friends he wished to come back here for a time.
On admission he is dull & stupid, inclines to stand in one position for a long time and when asked a quest. taking a long time to answer it. When he did answer it had sometimes no connection with the question. Bodily he is in pretty fair health.

October 31. His cond. since admission has varied. For some time he was inclined to be violent, hitting out at the attendants and generally making a row. He is pretty strong so that he gave some trouble. Now however he has somewhat improved and is in No 4 Gallery. He is still moody with a heavy sleepy look on his face and his pupils are dilated. He is eating and sleeping well and on the whole improving.

Nov. 16th Patient continues to improve somewhat. He is still dull & morose in appearance & inclines to adopt fixed attitudes. He speaks more readily however & is beginning to mix more actively attempts made to rouse him. He was induced to play on the harmonium but might but only did so after much coaxing.
He is working in the grounds nearly

all day & his general health is undoubtedly improving. He is sleeping well.

28th Patient is now more communicative & has begun to take more interest in his old accomplishment - music. His bodily movements are correspondingly more active.

Dec. 18th Improvement slow. Patient very variable & moody now frank & pleasant again morose & reticent. Bodily health good.

1891

Jan. 16 Patient gradually emerging from his moody condition. He is now much brighter & franker. His bodily movements are also much more energetic. His bodily condition is improving.

6 March. Patient has continued to progress very favourably. He talks briskly & with much more interest. He takes a keen interest in the weekly dances enjoying them most thoroughly. To day he is discharged

Recovered

Readmitted Dec. 27th 1892. ide Vol. V p 498.

Colin Govan.

From Vol III p. 453.

1890.

October 28. Just now he is quiet and rational? but probably in some days he will be excitable free of delusions and using bad language to the medical officers &c. Has the idea that his wife is dead here and not allowed to see him His bodily health is good.

1891

7 March. There is no improvement in this case. He talks in a foolish childish fashion & uses coarse & abusive language towards the medical officers. Still constantly asking for his wife. His conduct at the dances has been very bad & on one occasion he had to be removed from the hall. He is evidently becoming weak-minded. He is in good bodily health.

April 12th Transferred to the Roll of Govan Combined Parish -.

1891

June 16th much quieter recently and especially since he was allowed more freedom. Conducts the Psalmody Service sometimes now & does it well. With more self control but still with a day now & then when he is abusive & very nasty. This improvement is, of course, comparative only but is quite marked. Bodily health is good.

Sept. 12th Very variable, at times pleasant, again surly insecure & incoherent. B. & T.C. good. He worked in the Garden the most of Summer.

Nov. 6th. Much excited about his affairs lately - his estate having been sequestrated. Insolent, abusive, and irritable. B. & C good.

Jo 5/14.

Matthew Love.

From Vol III p. 463.

1890

Novr.

1891

7 March. Since last note there has been little real improvement in this patient. His delusions are very fixed but he thinks himself the machines are losing their power & becoming less annoying. The Riccarton people since occasionally speak to him at night. He is constantly finding out something new with regard to them & thinks that some of the attendants here are aiding them in their designs on him. He is now working very well & has been of great use in helping the juniors. He is in excellent bodily health.

Sept. 1. To the writer this patient bears a great hatred, believing as he does that he has been the means of him being acted on by the Riccarton people. Now he believes that his father also is being troubled by these machines & this makes him very sorry as he can bear it himself but his father would be able. Patient generally shows no improvement his delusions remaining very fixed. at times he is very excited about them but they never leave him and in his troubled look and agitated manner it is easy to know that of them he is thinking. His B. & T.C. is fairly good

Nov. 6. Of late constantly excited by delusions - Refuses the meat as he says it is harming him, most likely being intended to do so. Says he must get out by New Year - & he will begin Dact. Says he has powerful friends outside - very wealthy - & writes and his case will be tried in Court & all offenders against him heavily punished.

Dr 5/13.

George Arthur (voluntary)
Cont. from p. 80.

Sept. 28th Patient is still rapidly improving both in bodily & mental condition. He is now taking his food with relish & his great ambition is to get his weight up to 8 stone & then get home. He now has one pound to make up.
Mentally he is much improved. He is bright & cheery & walks & talks in a brisk fashion. He is sleeping very well now.

Oct. 15th Patient is now practically well & back to his normal condition. He has now a very contented & sleek appearance & his mental condition corresponds to this. He has been out lately visiting friends & has greatly benefited by the little outings.

27th Patient was discharged today. He is in excellent bodily condition & deeply grateful for his recovery.

Recovered.

Harry Park.

Cont. from p. 120.

Oct. 30th 1890.

10th Dec. Patient continues in good health. No improvement mentally.

April 30th 1891. The bodily health of the patient continues good. He is well nourished - and pretty looking - In conversation tonight his face was rather flushed and his pupils dilated - but he had been washing himself - At first he spoke sensibly - then rather rapidly - and with a rather uneasy manner, looking away from one's face - He said he remembered being noisy and breaking things before he came here - but he thought that that was all past - but continuing to talk he became quite incoherent, and began to speak of the Judgment Day of God in quite a meaningless and pointless way - He said that partially he had been sent from home to some other house, which he named, so that he might read the Bible. Though he expressed no new fixed delusion his rambling chatter and manner disclosed a mental defect which his appearance and ordinary behaviour, morning greetings &c. would not have led one to expect.

May 30th He is quiet, well behaved & seemingly contented - He seldom speaks - never unless spoken to & then he is reserved. His appearance & expression indicate a weak & dulled mental state.

Aug. 31st. No change here.

Dec. 3rd. Partially demented. B. H. & C. good

1892.

January 19. Just the same. Slow in his mental actions & at times stupider than often. B. H.C. good.

Jos. SHI

Rev. William Martin Watt.

Cont. from p. 108.

Oct. 30th 1890

10th Dec. Mental condition much the same.
Bodily health good.

19th Dec. Patients ears have been syringed with considerable benefit. He is now being treated by Politzer's method for insufflation of the Eustachian tubes.

22nd Jan. 1891. The insufflation is still continued regularly. A slight improvement is fancied. Mental condition little improved.

Mar. 18th Insufflation performed every second day still to patients comfort & satisfaction. He is now on parole off the grounds.

April 30th 1891. This patient has improved. He takes food well and is cheerful in conversation - and leads the life of a well disposed seemingly contented old gentleman. But at times he is still depressed and worried about things.

June 8th. Continues just the same. He is apt to believe in a kind of mystic agency & influence pervading the simplest & most trivial affairs - he seems at times to dread something which is going to happen - he cannot say what.

Aug 22nd For the last week this patient has been confined to bed, suffering from complete retention of urine, due to a congestive condition of an enlarged prostate. The urine has to be drawn off regularly - There was also at first some straining & irritation about the lower bowel, but this is now gone - He is thinner & his complexion not so healthy - The urine was very scanty at first - & an alkaline diuretic was given. The diet consists chiefly of milk.

Rev. W. Watt

Aug. 31st. A good deal better & the catheter is no longer necessary. Boracic acid is being taken internally - & under it the urine improved greatly - loosing its high color & being disagreeable smell. His temperature in the evenings ranged to between 101 - & 102 a few days ago - but is now normal. At times he is very depressed & nervous - & works himself into a state over trifles.

October 31st. His water-works are now in fairly good order, but cardiac palpitation troubles him a good deal, and the fear of this coming on worries him. He describes it as a fluttering about his heart & after it his pulse is very unsatisfactory being hurried & irregular. At present he is having a course of Digitalis & Strychnine. His general health apart from this is fairly good, and at times he is wonderfully cheery. —.

Dec 3rd. Better at present. Cheerier and less gloomy in his views. B. A. & C. at present fairly good.

1892.

Jany. 1892. Palpitation & considerable cardiac irregularity still trouble him especially when anything troubles him. The death of a grandson prostrates him recently & he has been very despondent since. Still insists that the future life will be very gloomy for him. Anything done for him he objects to as he thinks it gives trouble. His bodily health & condition at present are fairly good —

1892.

March 14. Palpitation & cardiac irregularity are troublesome symptoms of his cardiac condition. Mentally he is just the same.

Jos. 542

Charles Sam. Twigg.
Cont. from p. 68.

Nov. 1st Cont. He persisted in trying to remove his clothes & would give no reason for his conduct.
His bodily appearance is falling off: he is pale & very haggard.
His weight shows no increase within the past six weeks.
He sleeps well & without any hypnotic medicine.

Dec. 10th For the last few days patient has looked rather brighter, although still very stupid and apathetic. He is suffering from a boil on the back of his neck.

Dec. 19th The brightening process is being maintained. He occasionally seems to make an effort to speak. He still picks at his clothes.

Jan. 14th Still getting steadily brighter, but very slowly. He shakes hands regularly now.

Mar. 18th - Has changed very little since last note. He smiles and occasionally looks as if he would speak. but has never done so yet.

April 24th There is little change in the condition of this patient. He never speaks now. but sits about and slouches along with a vacant manner. When spoken to he smiles emptily - moves his arms and legs about, keeps his head down and his shoulders bent, and makes no effort to brighten up or take active interest in anything. He is perfectly quiet and inoffensive — simply a passive, apathetic nobody.

May. 25. Has been having a course of Iron & Quinine & a blister was applied to the nape of the neck. He is out a great deal & takes part in the evening cricket - in a very listless lazy fashion however. He cannot be said to have improved since last note & is very awkward, shy & loutish still -

June 1st Runs wayward & silly Catch. In the cricket field he amused himself by wandering here there & stuffing his pockets full of leaves - He laughs in a stupid way - and has defect of attention & control - The Right hemiplegia somewhat larger than left - both are small & react to light & distance - ont'wise regular -

Aug. 31st Not improved. He has often enough broken silence & spoken to writer now - but never speaks to any purpose - is very foolish & silly in his conduct - & slovenly in his appearance.

To p. 494.

Robert Clark
admitted Oct. 31st 1890.

Patient is 41 years of age, married, a butcher & a protestant. He is admitted to the East Horsi at the instance of his wife.
This is his first attack & it is stated to have lasted some months.
The causes alleged are drink & business worry.
He is not epileptic or dangerous to himself but he is so to others.
There is no alleged H.P.
The medical certificates bear (1) Incoherent. States that he slept with his arm round his sons wrist to keep him comfortable. That he cannot do anything but people say he is drunk when he hasn't taken drink for some time. Attendant states that he threatened to stab him with a knife & that he lifted the fender & threatened his wife with it." (2) "Found him sitting at the kitchen fire muttering nonsense to himself & evidently in a condition from drink unable to be held responsible for his actions. His brother-in-law states that he has been drinking for some months & is now dangerous & has threatened him with a knife & has also attacked his wife with some instrument or other.
On admission patient was quite drunk

& incapable of standing on his feet. He
mutters one or two inarticulate words &
made a futile attempt to strike his friends
& thereafter sunk off into a deep sleep
which lasted well on into morning.

Nov. 1st Patient slept as above noted & this morning
has in great part got rid of his poison.
He is a man of fine physique but today
looks limp & weak. He is very shaky not
only in his hands but all over his body.
His voice has a distinct tremor. His
tongue is very foul & tremulous.
There is no abnormal condition of the
eyes save slight suffusion of the con-
junctiva: the pupils are equal regular
& mobile both to light & accommodation.
Knee reflexes if anything are exaggerated but
equally so. Patient's gait is a little unsteady
but has no ataxic symptoms.

Patient speaks freely of his condition &
acknowledges frankly that the cause is
drink. He began his bad habits at
the beginning of this year being prompted
to do so by business losses & worry.
In conversation patient shows a decided
tendency to ramble. He seems however
to have no delusions to know where he
is.

3rd For the past two nights patient has slept
better & today & has taken better meals

Robert Clark.
Cont.

Nov. 3rd Cont.	than he has done for months past. He is still very shaky, this term being applicable alike to his bodily & mental condition.
" 8th	He is today transferred to the N. House. Since last note patient has improved greatly in his bodily condition. The tremor which was so marked has now almost wholly gone. In his face this has been replaced by a very expressionless appearance & a certain clumsiness of movement is also noticeable. His mental condition has improved somewhat but still is far from normal. There is hesitation & slowness in his mental actions as from a dulling of his mental faculties. He has very little self-confidence. He does not show any great anxiety as to getting away home such as one would expect to find. His appetite is good & he is sleeping well.
Dec. 18th	Patient has been steadily improving for some time. He has now more self confidence, and shews an anxiety to get home. Says he has learnt a lesson. The fibrillar trembling in the tongue is much improved, though still present. He works steadily in the store, and is reasonable and agreeable.

Dec. 29th – Discharged to-day –
Recovered

George John Richmond

Cont. from vol. III p. 582.

Oct. 30th Cont. His mental symptoms seem to be lessened in intensity while the asthmatic attacks are present.
He still preserves silence towards one in the house. He has of late made no attempt on his life but his suicidal inclinations are still very strong & a constant source of anxiety.

Jan. 14th 1891. Patient has taken to reading lately. Otherwise he is just the same. He never speaks to the writer.

April. 30th. Been rather troubled with asthma lately - probably he is getting Iodide & Bromide of Potassium. Mentally he continues in the same state of utter despondency and indifference to all around him - as evinced by his listless depressed expression of countenance and his attitudes - for he never speaks. He is pale and looks ill, and very thin. Is taking his food just now without trouble.

Aug. 27th. For the last month his asthma has been very troublesome - especially at night. Nitroglycerine has been given an extended trial in 1/100 doses in a little Tr. Card. Co. This certainly affords relief - & just lately he has not required anything - but today it was again commenced.

Aug. 31st Has derived considerable benefit from Nitroglycerine. Days & nights are much better.

October 31st Remains much the same, asthma troubling him a good deal at times. He does a little work in the wards. replies when spoken to, &

G. J. Richmond

now & then plays a game at draughts with the writer. His bodily health is indifferent

Decr 3rd. In his mental condition there is no change. Asthma varies, sometimes being very bad, & again not troubling him so much. There seems to be no relation in his case between the acuteness of his mental symptoms and the amount of asthma present. B. & T.C. fair

1897

Janry 19. Asthma at times very troublesome & there is now associated with it an enlargement of the thyroid gland. This enlargement is variable but when the asthma is bad, quite distinct - He is extremely silent & seldom speaks nodding or shaking his head when asked questions - His B. & T.C. are indifferent -

March 14 1897. No change in his mental or bodily condition

July 14. Mentally Mr Richmond is rather better. He is brighter sometimes often, but refuses to speak any. Takes a great interest in Political matters and interests himself in Ward work & in games &c. Asthma has not been so troublesome of late & he has been sleeping better -

Octr. 3rd Mr Richmond is much brighter. Answers questions briskly & engages in conversation. He also works very well & is very helpful. Still he is not fit to be trusted to sleep out of the Hall Gallery & he has not very much control over himself. He strikes on little provocation and gets very angry when remonstrated with quite loosing all self control His bodily condition shows improvement & the asthma has been less troublesome of late. Jop. 582.

David Torrance Handyside.

Cont. from vol III p. 472.

Dec. 30th 1893.

Mar. 18th - No change to note. Stands in one position all day unless asked by the attendants to help in the work of the gallery. This he does readily. He will not take his food unless he has done enough work to satisfy him that he has earned it. He never speaks.

July. 31st. To night for the first time since writer came on duty - 3 months ago - this patient spoke to him. In answer to some remark of the kind usually addressed to him at the visit, to which all this time he has never answered except by a scowl - he beckoned me to follow him - which I did, into the parlour where he wrote the two questions answered on the paper. To my answer he gave merely a contemptuous toss of his head - but afterwards he said - "I will make an exception with you" & then he talked rapidly - loudly for a long time, abusing the officials - arguing for his release - & betraying generally a delusive state of mind, in keeping with the former notes regarding him. He was confidently excited - He had seen his father today - & this visit seems to have unsettled him a little - & he was thus led to break the long silence which he maintains before his persecutors i.e. the doctors - His language was violent & rude. But to the writer personally he was civil - having, as he said, received always civility from him.

Aug. 31st. Has maintained absolute silence since - but is not so offensive in his expression - & even smiles in a faint manner sometimes. "Bld. - C. good.

J. 493

George Russell Alexander.

Cont. from vol. III p. 35.

Oct. 30th Patient still very depressed hypochondriacal. He shows a good deal of motor excitement which however is almost wholly automatic. His bodily condition & health are fairly good.

Dec. 20th Condition the same as last entry. Patient removed off books of West House and put on those of East House Paupers.

May. 19th This patient would seem to have improved somewhat [illegible]. He certainly is still [illegible] fits of depression & irascibility. [illegible] useful in conversation, & [illegible] at first - but a little [illegible] to talk - & attacks [illegible] to the East, a broad [illegible] He has seen a [illegible] face [illegible] man. His defects [illegible] excitement without cause, [illegible] suspicions against his neighbours with a good deal of irascibility at times. He can recall his condition before entering Gartmavel & acknowledges when he came in that he was quite off his head - He refers two to a previous attack of insanity when he was about twenty years old. He has often been troubled with piles but at present his health is fair.

Aug. 31st No change - Often depressed outwardly emotional -

October 31. Just the same. Complains a good deal & grumbles at all that is done. B. A. TC. good

Dec 31st Just the same. Grumbles a good deal & has periods of considerable depression B. A. TC. fair

Top. 519

David Torrance Handyside.

Cont. from vol III p. 472.

Dec 30th 1890.

Mar. 18th - No change to note. Stands in one position all day unless asked by the attendants to help in the work of the gallery. This he does readily. He will not take his food unless he has done enough work to satisfy him that he has earned it. He never speaks.

July. 31st. Is right for the first time since writer came on duty - 3 months ago - this [illegible] remark of the [illegible] which all the [illegible] scowl. He [illegible] the parlour [illegible] on the [illegible] contemptuous [illegible] "I will make [illegible] rapidly - [illegible] arguing for his [illegible] state of mind, in keeping with the former notes regarding him. He was evidently excited - He had seen his father today - & this visit seems to have unsettled him a little - & he was thus led to break the long silence which he maintains before his persecutors i.e. the doctors. His language was violent & rude. But to the writer personally he was civil - having as he said, received always civility from him.

Why do you assist to keep 200/300 respectable men & women in bondage?

Why are all the gates not open

Aug. 31st. Has maintained absolute silence since - but is not so offensive in his expression - & even smiles in a faint manner sometimes. "Bld. - C. good.

George Russell Alexander.

Cont. from vol. III p. 35.

Oct. 30th Patient still very depressed & hypochondriacal. He shows a good deal of motor excitement which however is almost wholly automatic. His bodily condition & health are fairly good.

Dec. 20th Condition the same as last entry. Patient removed off books of West House and put on those of East House Paupers.

May. 19th 1891. This patient would seem to have improved somewhat from the last notes regarding him. He certainly is still a depressed looking man & has fits of depression & irascibility but he is often interesting & cheerful in conversation, & humorous. He is reserved & shy at first - but a better acquaintance he seems to like to talk - & recalls his experiences in travels thro' Europe the East, on board ship & on the Crimean war. He has seen a lot of life & is an intelligent shrewd man. His defects mentally are depression - & excitement without cause, & seemingly unfounded suspicions against his neighbours - with a good deal of irascibility at times. He can recall his condition before entering Gartnavel & acknowledges when he came in that he was quite off his head - He refers two to a previous attack of insanity when he was about twenty years old. He has often been troubled with piles but at present his health is fair.

Aug. 31st. No change - Often depressed outwardly emotional -

October 31. Just the same. Complains a good deal & grumbles at all that is done. B. A. TC. good

Decr 3rd Just the same. Grumbles a good deal & has periods of considerable depression B. A. TC. fair

Top. 519

John Orr Dickie.
admitted Nov. 6th 1890.

Patient is 37 years of age, widower, a ships-smith & a protestant lately residing at 4 St James St., Kingston Glasgow.

He was today brought from the Richmond District Asylum, Dublin & admitted to the West House at the instance of his brother.

This is his first attack of insanity & it has lasted some weeks.

The alleged cause is intemperance & the death of his wife.

He has had fits but these were apparently alcoholic in origin.

He is not suicidal but is dangerous to others.

There is an H.P.: a maternal uncle was insane for a time.

The medical certificates bear:-

(1) He talks in a rambling & incoherent fashion: informs me that he has been drinking & smoking to great excess which was the cause of his illness: he also tells me that he has 20 wives one of whom gave birth to six children this morning (4 boys & 2 girls): and that he has an income of over a million & a half a year all of which is of course without foundation in fact. He has been

for some time in a Dublin Asylum from which he was brought only this morning.
(2) His Language is incoherent & he has delusions. He says that his wife died a few weeks ago & that he got her dug up & found her alive & well. Yday she gave birth to six children. His father & mother died 8 or 10 years ago. He is going home this morning to get them dug up & says he will find them enjoying themselves in their graves."

Patient is of spare habit & somewhat pale & anaemic. His general health is good.

On admission patient was somewhat excited. He talked freely & readily about his sail across from Dublin. The steamer was the Duke of Leinster": & he is a nephew of that gentleman. He expressed numerous other delusions including that regarding his wife & the six children

His eyes have a somewhat wild expression but the pupils are equal & react both to light & for accommodation. His tongue is distinctly tremulous. His speech is somewhat thick but this quality partakes more of the nature of a "burr" than of any drawl. There is no tumour of the breast or

John Orr Dickie.
Cont.

infra-orbital muscles when he speaks. Reflexes are normal. There is no affection of his gait or giddiness on closing the eyes.

Nov. 7th — Patient slept only at short intervals last night & was noisy. He was very anxious to get away back to Dublin. His mental condition is still one of exaltation.

8th — Patient has made himself quite at home & seems pleased & satisfied with his surroundings. He continues to express delusions of a grandiose type. He has also developed strongly marked Hypochondriacal symptoms & for all & sundry articles.

He slept somewhat better last night & is taking his food well.

Dec. 19th — Patient is getting more vacuous in expression, and shews a tendency to lose flesh. He has been troubled with a sore ancle which makes him rather lame. Nothing particular can be made out in it. Such is his feeling of well being that he can hardly be brought to allow that his foot is sore.

Jan. 14th 1891 — No farther change for the worse. Condition pretty fair.

Feb. 20th — Little to note. Condition pretty fair. Getting more demented.

Mar.

April

May

June

Mar. 18th Getting steadily more demented. Yesterday he wrote a letter to his wife, who has been dead for some years. Bodily health keeps good.

April 27th 1891. This patient is usually quiet and unobtrusive. He moves about very little and is now reticent and with difficulty get to speak. To the writer he has not expressed any delusions. The face is losing character & expression. The attitudes of the body are becoming slovenly.
The right pupil is slightly larger than the left. Both are sluggish under the influence of light.
The tongue is large & flabby. & tremulous in fine waves of motion over its surface. There is marked twitching of the buccal muscles. most marked on the left side.
The knee jerks are almost absent. The patient can stand quite firmly with his feet close together and his eyes shut.

May 1st: Last night at the weekly dance he was excited & forward and had to be restrained. Has expressed several delusions in conversation recently. that he has 1000 horses and* boxes. that he has millions of money. and so on.

June 1st Has lately been communicative & very readily indulges in his ideas of grandeur. He has written orders for victualling his yacht(s) - ordering thousands of gallons of wine & food of all kinds.
His pupils are equal. & react both to light & to distance. They are both irregular in outline. there being a flattening of the pupil in an oblique axis. best seen when the pupil is dilating. as if from an irregular action of the Dilator Pupillae.

To page 381

John C. Sharp. (vol.)
Cont. from p. 128.

2nd Dec. Dismissed
Well.

Readmitted see Vol VI
August 1893

David Robertson

cont: from Vol. III / p 5-89

1893
June 30th — He works regularly outside but in a listless way. Mentally he is unchanged. B H & C poor.

Dec. 30th — Nothing new to note about this patient.

1894
December 29th — His condition is unchanged. He is deeply demented and will not answer if spoken to. At times he has attacks of excitement. He works with the mason.

1895
Dec. 20. — There is no material change here. His life during the past year has been uneventful. He is very demented but assists with outside work. His general health is good.

1896
Oct. 6. — Quiet demented and uninterested he enjoys fair health. He often assists the mason but his aid is not of much consequence as most of the time he stands idly by without even paying attention to what is being done.

1897.
December 26. — Still in much the same condition both bodily & mentally.

1898
Oct. 19. — There is nothing new to note in this demented man's condition. Still attends the mason. B H & C fair.

1899
May 1. — B H & C fairly good. Quite demented.

1900 Oct. — The same in all respects. B H & C fair.

1901. April — No change to note in this Demented man's mental condition. The skin of one of his heels is broken so he has to remain indoors.

to Vol VII / p 550

John Ross.
admitted Nov. 9th 1890.

Patient is 45 years of age, married an ironmonger by trade & protestant. He was brought from 196 N. Regent St. & admitted to The East Sts. at the instance of his wife.

This is his third attack of insanity & it has lasted one week.

The cause is doubtful.

He is not epileptic, suicidal or dangerous to others.

There is no H. P.

The medical certificates bear :-

(1) Patient lay in a state of depression & when addressed by me expressed himself in a very incoherent manner, giving no clear account of his own condition & suddenly threatening to strike me I having given him no offence. He then suddenly became affectionate in manner seizing my hand & kissing it for no apparent reason. He had been excited during the previous night he was in our Asylum about ten years ago as a patient.

(2) He answers questions incoherently & rambles in any statement he makes. He fancies he will be a great man & very wealthy. He has slept very little for several nights past & he promises to do great things for his friends.

Patient is a man of good physique & had no marks of injury on his body.
On admission he was in a state of subacute mania being excited restless & talking in a rambling & at times incoherent fashion expressing numerous delusions as in certificates. His skin was hot & his face flushed. Eyes suffused & with dilated pupils. Tongue very foul & slightly tremulous.

Nov. 10th Patient slept none last night & this morning he is still much excited, talking to himself & constantly tossing about on his bed. His conversation is almost completely incoherent. He has delusions as to the identity of those around him.
His appetite is good.

11th Patient slept for a few hours last night but today is still very restless & excited. He was allowed up for a time but was so violent that he required to be put back to bed. In his struggles he bit & bruised his lips & face but not to any great extent. His conversation is quite incoherent & he talks a great deal to himself.
On his left ear are the remains of an old laceration which occurred when he was a patient in Bromsgrove. There is a considerable amount of shrinking & disfigurement.

to p. 165.

William Ainslie.
admitted Nov. 9th 1890.

Patient is 62 years of age, married a carter & a protestant. He was brought from 172 Greene St. & admitted as a pauper chargeable to the City Parish.
This is his first attack of insanity & it has lasted a few days.
The cause is unknown.
He is not epileptic but he is both dangerous to himself & others.
There is no H.P. stated.
The medical certificates bear:-
(1) He asks those about him for a knife to do for himself & his conduct is maniacal & violent. He attempted to commit suicide: he imagines people are speaking about him & he expressed a desire to go to the river & drown himself.
(2) Talks incoherently. Hears imaginary voices & thinks people are conspiring against him: is most easily excited: is quite incapable of taking care of himself & is dangerous to himself & others.

Patient is of good physique & in good health save for a right inguinal hernia.

On admission was somewhat excited but no information as to his mental condition could be got from

him
as he preserved silence.

Nov. 10th Patient slept very little last night & was restless. Today he is still very taciturn & only a few disjointed words can be got from him in answer to questions.
He is taking his food well.

11th Patient was up yesterday but was very excited all day & very hard to manage.
At dinner time he was anxious to put a Knife into his stomach.
He slept none last night & today is still somewhat excited. He remains very taciturn & can with difficulty be got to answer the least question.

17th Patient has been sleeping somewhat better. He is still kept in bed. He is still very reserved & can with difficulty be got to speak about himself. He has however declarations as to a vague something which is going to happen to him. What this is he will not say. He admits having been a heavy drinker & also that to this his illness may be due. He is somewhat suspicious of those around him & if urged to take his food will not do so. When this is left beside him he takes it himself & as he thinks unobserved.

28th Patient has brightened up considerably & has improved vastly in bodily appearance. He is now more communicative & acknowledges he is better.

to p. 183.

John Ross

Cont. from p. 162.

Nov. 17th Patient has now settled down consiederably but is still Kept in bed. He has been sleeping somewhat better though still inclined to be restless & talkative at night. His conversation is more coherent but he tends to ramble & he is also emotional. He realises where he is & as yet no delusions have become apparent.

28th Patient has been in a state of subacute excitement for the past few days. He is constantly chattering & almost incoherently. His conversation for a time was distinctly expansive & he had grandiose delusions as to his being a brother of a Spanish princess etc. He shows a great deal of motor restlessness & his hands are rarely at rest. He continues to be talkative often awake at night. He is now on a course of Bromide & Hyrocyanine. He takes his food well.

Dec. 12th Patient is not progressing either mentally or bodily. He is constantly chattering in an incoherent & rambling fashion occasionally singing a snatch of a song. He gesticulates wildly with his hands & can with difficulty be got to sit still even for his meals. His appetite has fallen off & he is losing flesh.

Dec. 1 ... "2

18 Jan.

7 Ma

He is at present being Kept under sulphonal but no yet with doubtful benefit.
He sleeps very irregularly & is noisy when-ever he wakens.

Dec. 16th. Patients neck was blistered today. Still very excited, incessantly chattering incoherently.

" 28th. The blister had no good effect. He still continues to be very noisy restless. The restlessness is so great that he can with difficulty be got to take food even by the spoon. He is sleeping very irregularly only after full doses of Paral-dehyde.

1891
Jan. 16th. Still noisy, chattering constantly & showing great bodily restlessness, gesticulating with his hands. Has a great idea of his own powers as a singer. Attempts becomes emotional & weeps bitterly. He is very thin but taking his food better than at last note. Occasionally can be got to do a little work in the gallery.

7 March. This patient still continues in his sub-acutely maniacal condition: Noisy, restless shouting out verses of Latin poetry, scraps of French etc. in an incoherent fashion. There is still much motor excitement. He is in fairly good health but is very thin. He still requires a hypnotic regularly & even with this is frequently restless & talkative at night.

page 367.

William Robertson

Cont. from p. 134.

Nov. 15th Cont. Some more admissions were today brought down on his left hand. He has now more power in his fingers but they are still very weak.

Nov. 26th The annexed letters were written by patient & show him to be full of delusions as to those around him. It is feared that these delusions have been to a certain extent engendered by a mischief making patient. He firmly believes that several patients have been done to death & that atrocities of various kinds are daily practised. His manner is no at last broke. His hand is improving rapidly the power of grasp being greatly increased.

Dec. 12th Since last note patient has been somewhat more settled in his conduct. He seems quite contented with his surroundings & does not all appreciate his position. His letters to his relations have been very sensible & show that his affection for them is not altered. The chief mental symptom at present is an extreme facility in conversation & lack of control over his emotional nature. His hand continues to progress satisfactorily.

Dec. 28th Patient is at present suffering from conjunctivitis. Mentally no change.

184
9 Ma

April

1891
9 March. This patient was recently seen by Dr Gardner in consultation with Dr Yellowlees. Throughout patient was quite coherent in his conversation but expressed a most unnatural feeling of hatred towards his father or stepmother. He laid the blame of his illness. He denied that his affection towards his father was absent but that his father's affection towards himself was a thing of the past. He also expressed belief in his past statements regarding Dr Yo's murderous treatment of patients.

He is at present calm & quiet & not at all inclined for conversation. He is still subject to little outbursts of laughter without cause. He is in good health & his bodily condition is good.

April. 18. Transferred to Crichton Institution.
Relieved.

John Watt

Cont. from p. 118.

Nov. 18th Cont.

The tremor is most marked in the buccal & supra-orbital muscles & is also present in the lips. His tongue too shows tremor ~~blood~~ of a gross kind. His speech is characteristic having a drawl a slight slur & a "tremulo" quality in it. There is not much mis-ordination of speech as yet.

There is no inequality of the pupils but they react very slowly to light & also to accomodation.

The reflexes are normal otherwise.

His gait is very slightly affected but he raises his feet in a clumsy manner.

Since his admission he has been frequently wet both night & day.

Mentally he is very stupid but facile & apparently with a sense of "bien être": when spoken to this is well marked.

He can answer a few simple questions such as refer to his name etc..

1891
Jan. 15th

Patient has become more & more stupid since last note & now can hardly be roused up to answer a simple question. His bladder is now quite beyond his control & he is very often wet.

He has become very destructive tearing his clothes into rags. Unhooked gloves were put on

his hands for two or three days & this has had a very good effect on him. He has been sleeping well of late though occasionally restless.

9 March. Patient recently had to have a renewal of glove-treatment for a day or two ~~relapsin~~ with good effect. He is now very dull & stupid ~~&~~ difficult to rouse to conversation. His face has assumed a very expressionless look. He is frequently wet & noisy at night. His bodily condition is fairly good.

May 3d. This patient died to-day after a repeated series of shocks.

Died.

P. W.

Cause of Death.

General Paralysis

John Hart.

Cont. from p. 28.

Nov. 18th Cont. He afterwards apologised however but in a dogged manner & asked if he would require to write an apology. He has lately written letters home in the same strain. He is very restless & talks much to himself & laughs in a foolish fashion.

Dec. 30th Since last note patient has kept fairly well till two days ago. Since then he has had a relapse & has become excited & talkative. He shows great restlessness both at night & day. He is very aggressive in manner & forward in his conduct: picks up little pieces of paper etc. & points out hidden beauties & powers in them. His conversation in a short time becomes quite incoherent.

1891

Jan. 16th Patient is now settling down. He is less restless & sleeping better. He is still however very muddled & repellant in his manner. His bodily condition has fallen off since last note.

9 March. Patient is at present in No. 10 gallery where he was removed ten days ago on account of an outburst of maniacal excitement during which his language & habits were most objectionable & the source of annoyance to other patients in No. 4. His attack was similar in chara-

ties to Brown previously noted. Is now passing off but passions remains very sullen & easily excitable. His general health & bodily condition are good.

29th Feb 94. at present in No 9 Gallery on account of excitement. About a fortnight ago he became excited, his language and actions were threatening and so he was sent down stairs mentally - apart from the present period of excitement - he shows no improvement. Unreliable and irritable he cannot be much trusted and distrusts all, more especially the Doctors. B.H.T.C. fair.

16th June. Stee in disgrace. Got a black eye from another patient the other day, with whom he had been interfering. Declines to say how he got it. Quieter & more civil. —

Sept. 5th Stee downstairs and at present rather noisy. but with nothing calling for particular observation B H T C good

Nov. 6th Quiet just now - moody & not favouring any advances on part of Others.

Dec. 23rd. At present considerably better. He has been sent up to No. 1. He is willing to talk - & is civil, but not affable. He is quiet, clean, and fairly reasonable in what he says. He fully recognises that he has had attacks of illness - In conversation he is seen to be very nervous - at least his hands tremble much & his mouth & cheeks are very tremulous.

1892

Feb. 22nd So far no return of his maniacal outbursts, & this has proved to be the longest interval between such attacks. His mental condition really seems more stable. His conduct cannot at present be described as insane - He is perhaps rather dull & reserved -

Jo 5'33.

William Shannon
admitted Nov. 22nd 1890.

Patient is 36 years of age, married, an iron miner & a protestant.
He is a pauper chargeable to Cadder Parish.
This is his first attack & it has lasted seven days
The alleged cause is an injury to his head.
He is not epileptic or suicidal but is dangerous to others.
There is an H.P. His mother was ~~dead~~ in an Irish Asylum.
The medical certificates bear:-
(1) He is very excited: talks incessantly about blood & other nonsense. When questioned answers in a nonsensical manner.
His wife & his brother say that for the last week he has been getting greater & greater talking all sorts of nonsense & sometimes getting into violent fits shouting at the pitch of his voice & running wildly about in a meaningless manner.
(2) He is labouring under great bodily & mental excitement throwing his limbs & body about in an aimless fashion: constantly chattering in an incoherent fashion: repeating strings of words having no relation to one another. When asked his name gives an altogether irrelevant reply.
On admission patient was in an

acutely maniacal condition with very excessive brain action + great bodily excitement. His eyes have a suffused glistening + prominent appearance. His face is very muddy in colour + his lips + tongue are very dry + covered with sordes. His pulse is very feeble + rapid but impossible to count accurately owing to his great excitement. His skin is hot + dry.

24th Patient slept none last night + was very noisy + restless. This morning he is very excited + has a very worn appearance. He takes food with reluctance.

His wife gives the history of his accident. Patient was engaged in splitting a knot by driving in Steel chisels. One of these rebounded struck him over the left orbit producing a small wound which healed quickly. Some days after the healing of the wound patient became suddenly excited + violent.

There is now a slight scar over the left orbit but no signs of any bone depression.

26th Patient has been somewhat quieter since last note + has been sleeping fairly well under the influence of paraldehyde which has also had a salutory staining action. He has taken a large quantity of eggs + milk with whiskey.

to p. 181.

Thomas Ballantyne
admitted Nov. 21st 1890.

Patient is 17 years of age, single a Presbyterian & having no occupation. He was brought from Balquhaage Lemnoxtown & admitted to the East House at the instance of his mother. This is his first attack & it has lasted more or less for two years. No cause is alleged.
He is not epileptic or suicidal but he has been dangerous to others.
There is a well marked H. P. A maternal uncle & aunt & a paternal aunt were insane.
The medical certificates bear :-
(1) Mind feeble : ideas confused & wandering : forgets immediately what he has just seen or heard : gives strange answers to questions. On several occasions he threatened to strike his mother & tonight he struck one of his sisters.
(2) He is imbecile & his language is incoherent. He imagines that the people at the farm where he is staying put something in his food to induce headache & make him.

Up till the time he left school patient was as other boys. At school he did fairly well. Thereafter he became very wayward, & could not be got to work. His temper was very uncertain

& he was at times very impulsive & destructive. He has been treated at home till now. Last night he attacked his sister with a chair & cut her head severely.

On admission patient was quiet & calm & did not seem to realize where he was nor did he endeavour to do so. He answers questions in a slow & dreamy fashion & his face has vacant & expressionless appearance.

Physically he is a typical fat, healthy looking boy. His bodily movements like his mental operations seem to be very slow & clumsy. He adopts awkward looking positions in his chair.

His head seems normal in shape & his mouth shows no great arching of the palate.

" 22nd Patient slept well last night & seems to be very fond of his bed. On being asked questions he as a rule answers "oh aye" & thereafter repeats the question which has been put to him.

25th Has slept well since admission. He is stupid & apathetic taking no interest in his surroundings. He is to be out working today in the grounds.

28th Patient is now working in the grounds. He seems to be totally void of originating power although able enough to do things when told to do so.

to p. 179.

George L. Sawers. Aet 22
Admitted 15th Nov. 1890

Admitted as a voluntary patient.
during the night. Patient has been behaving in rather a foolish way recently, and last night attempted to take laudanum, two bottles of which he had in his possession. He has a delusion that the bones of his forehead are becoming smaller.
He has contracted venereal disease, and is at present suffering from a soft chancre.

1st Dec. Patient since admission has been quiet and well behaved. His manner is always that of a person thoroughly satisfied with himself, perhaps the more natural as he is of very diminutive proportions. He has never expressed the slightest regret for any of his foolishness, or distaste at his present quarters, beyond a wish to be removed to another gallery where he might meet people more intellectual and therefore more suited to his society.

7th Dec. Patient says that he sees no reason to alter his opinion that the bones of his head are becoming smaller. Otherwise he seems fairly reasonable.

Dec. 28th Patient's case has been today taken over by the Govan Parochial Board. He is thus transferred to the East Ho.. Actual transference has not yet been

made. He has been entered as a certified patient. The medical certificates bear:-
He labours under delusions that the bones of his face have decreased in size: his brain has been crushed in consequence that has been rendered unfit for his work that feelings towards his friends have been altered from love to the reverse. He attempted suicide on account of his misery.

There is no change in patient's condition. He is to remain in West House at present.

1891

Jan. 16 Patient still remains in West House. His bodily condition is improving but his delusions are still strong. He interests himself in music & takes a great deal of pleasure in the Concerts.

13 March. Patient does not yet see his way to alter his opinion as regards his facial condition. He gets irritable when the subject is referred to. Apart from his delusions his conversation is quite coherent & rational. He is a frequent performer at the Concerts & entertains a very high opinion as to his vocal powers. His bodily condition is very much improved & he is sleeping fairly well. He has small doses of Bromide occasionally at night to check seminal emissions to which he has been subject.

To page 335.

Thomas Ballantyne

Cont. from p. 176.

Nov. 26th Cont. He has passed the 6th Standard at School but is an indifferent reader & writer (see annexed letter.)

Dec. 12th No change to note. He had to be withdrawn from working in the ...ries to turn away & ... to settle down to ...

... has again been ...rking & has been ... it. This is the only ...dition ... in particular unusual ... is more tractable. ... health ... father today, discharged

Relieved.

Robert Downie

cont: from Vol. III p 602.

1894
December 29th He remains as before - deeply depressed, shown chiefly by his attitude and expression. His health is only fair.

1895
Dec. 20. He is quiet and demented and his appearance is that of great depression. He gives little trouble but his bodily health is feeble

1896
Oct. 6 There is nothing new to note about this demented patient. His bodily condition is poor.

~~Downie~~ This man's mental condition is unchanged
Dec. 31 His health is fair but his condition is poor.

Transferred to Gartloch
Relieved
November 12th 1897

Thomas Ballantyne
Cont. from p. 176.

Nov. 26th Cont. He has passed the 6th Standard at School but is an indifferent reader & writer (see annexed letter.)

Dec. 12th No change to note. He had to be withdrawn from working in the grounds as he tries to run away & could not be got to settle down to work.

Dec. 29th Patient has again been out working & has been more easily kept at it. This is the only change in his Condition.

13th Feb. No change in patient's mental condition save that he is more tractable. He is in good bodily health.

24th Feb. Removed by father today, discharged relieved.

Relieved.

Robert Downie

cont: from Vol. III p 602.

1894 December 29th	He remains as before - deeply depressed, shown chiefly by his attitude and expression. His health is only fair.
1895 Dec. 20.	He is quiet and demented and his appearance is that of great depression. He gives little trouble but his bodily health is feeble
1896 Oct. 6	There is nothing new to note about this demented patient. His bodily condition is poor.
~~Downie~~ Dec. 31	This man's mental condition is unchanged His health is fair but his condition is poor.

Transferred to Gartloch
Returned
November 12th 1897

William Shannon
Cont. from p. 184.

28th Nov. Patient is today in an acutely maniacal condition talking loudly & constantly in an incoherent fashion & gesticulating in a grotesque manner with his hands.
He is taking his food however much better & has gained strength in the last two days. He still has a blue worn & haggard look this being increased by his earthy colour.
He has been passing his urine under him in bed but only in very small quantities. This seems due to diminished secretion as there is no sign of retention.

Dec. 1st Patients acutely maniacal condition has now subsided but a less subacute chattering mania, still continues. He shows great mental restlessness & incoherence. For the first few days he has been Kept in a single room during the day & partly under Sedyptonal & has benefited greatly.
His sleep has been irregular but of late has improved. His urine has repeatedly been drawn off this being specially necessary when he was getting Paraldehyde as a hypnotic.
His appetite is excellent & he is getting plenty of nourishment.

18th. Patient is slowly settling down. She is still excited & quite incoherent in conversation. Occasionally she makes a sensible remark.
The Catheter has not been required for some days.
She has been sleeping better though very irregularly.

28th. Patient still continues to be very restless & incoherent. Her bodily condition has improved greatly but mentally she is just as at last note. She is now taking her food herself & this with good appetite. She is sleeping much better though only after small doses of Sulphonal. The restlessness is now more mental than ~~bod~~ motor.

Jan. 16th. Since last note patient had up till today made great progress. She was much quieter both day & night & beginning to conduct herself in an orderly fashion & even doing little pieces of work in the gallery.
Today however she has again been very noisy & constantly talking in an incoherent & rhyming fashion handing the names of King William & Lord Hill.
Though her mental condition is there very unsettled her bodily condition is now very good & she has gained much flesh. Her appetite is good & stimulants have now been given up. She slept all last night under Sulphonal & tonight she has again a dose.

to p. 223

William Ainslie

Cont. from p. 164.

Nov. 28th Cont. There is still the vague something to come however.
He has been put upon Hawkey & is sleeping much better. He is now working in the infirmary yard.

Dec. 12th Patient has improved greatly since last note. His bodily actions & mental operations show much more briskness & spontaneity. He answers questions readily & quite intelligently. He still has an air of depression however. He is now in No. 9 & is sleeping well. He continues to work well in the garden. 13th

" 18th Patient still improving though slowly. He has been put on an opposite writer which has had a good effect.
He still shows a great lack of energy & originating power. He talks sensibly but only when spoken to. 29th.

" 29th Patients progress continues to be very slow. His thoughts seem to centre round his bowels & he is almost delusive as to their want of action.
His condition now seems to be that of partial stupor. After seeing some friends lately he said he fancied he had seen them before but was not sure. All his mental faculties like his memory seem as it were to be under a dark cloud. 2nd

to p. 205.

Edward Johnstone
Groups. 44

13-12-96. Patient does not improve mentally. He is full of delusions as regards his bodily condition very amiable. He cannot be got to do work. He sits in a listless position & his bodily movements are very sluggish. His general health is fair & he is sleeping well.

29th. May Patter out foolisher. From the Inspector of Poor who visited him the other day it is elicited that there is a distinct D.P. and this must have been known to the Inspector at the time of filling up the Certificate He is mentally weak, subject to occasional outbursts of irritability and ill. temper and of very little use in the Wards

2nd June. Patient is exceedingly dull and uninterested in what goes on. As regards his bodily condition his face is the best of him and is rather misleading as he is very much emaciated. There is marked wasting of the dorsal interossei of the right hand especially of the thumb. the scapular muscles also on both sides but

pg. 363.

Alexander Macrae
adm. Dec. 2nd 1890.

Patient is 48 years of age & is married. He was admitted at the instance of the Procurator Fiscal & is chargeable to the City Parish.
He was formerly a private patient here (see Males Regt. vol. XXII p. 363)
On admission patient was rambling & at times incoherent in conversation. Said he was suffering from blood in the brain which caused nervous feelings all over his body.
He says that he is a claimant for the Lovat peerage & that a firm of lawyers are ready to take up his case.
Gave a confused account of how he came into the hands of the police.
Says he came to Glasgow to go to the Infirmary & that the police finding him helpless in the street took him in charge.

Dec. 3rd Patient slept very little last night. This morning he talks readily & much in the same strain as noted above. He seems essentially to be a weak-minded man with numerous delusions.

9th Patient was today taken over by the parochial authorities & is now admitted as a pauper patient chargeable

to the City Parish.
The medical certificates bear
(1) He is excited, talking loudly maintaining that he is Lord Lovat & that he is deprived of his rights. He imagines his brother-in-law is persecuting him & getting people to do him harm.
(2) His conversation is rambling & at times quite incoherent. He has delusions viz. that he is in a very weak state of health, that he has an estate worth £100,000 & is heir to the Barony of Beaufort.

18th Patient still continues to express delusions as to his health, constantly asking for Bromide & Easton's Syrup & he has been put on the latter preparation. He walks in a dreamy fashion & has a vacant & far off expression on his face. His conversation & letters are quite coherent though expressing delusions. His appetite is good & he has been sleeping well on the whole with an occasional restless night.

1891
Jan 14th In spite of medicinal treatment patient remains hypochondriacal. His mental condition is unchanged. His friends have come forward with money & so he is today taken off the Parish & transferred to the West House.

Feb. 2nd Patient gave himself a black eye to-day. He said Christ made him do it.

Continued p. 249

Charles Hagen Owen
Admitted 1st Dec. 1890

Admitted to-day as a Voluntary patient.
Patient is a schoolmaster residing at
27 Arnoyd St, Dewsbury, and is 26
years of age. He has been insane for
three weeks, and this is his first attack.
The supposed cause was overwork,
and no H.P. is stated.
From information received patient has
been residing with his parents at
Stirling for some weeks and behaving
in a peculiar manner. On Sunday,
31st Nov., he disappeared from home
and turned up that evening at Professor
Drummonds' house, 3 Park Circus, Glasgow.
He had no acquaintanceship with
Professor Drummond; but gave out
that his great admiration for him had
brought him there, and called him "master".
Here he behaved in a peculiar way.
His manner was always excited, and
he said he had a lecture on toys to
deliver, and that he had received toys
from all parts as illustrations; and
that he had made a great many book- 2nd
marks as inventions. These he shewed;
they consisted of bits of paper cut into
strips and ornamented with coloured pencils.
He began to send telegrams to all parts of
the country. He stated that he was
going to be married in three days, and

that he had been in town ordering the ring.
He talked constantly, and frequently incoherently.
On admission his manner was one of extreme self importance. He was restless and excited. One moment he would sit down at the piano, the next he would play bagatelle, or draughts. He settled at nothing. He made arrangements for his comfort as if he were in a hotel, and of an extravagant kind inaccordant with his means. Stated that he was only to be here for three days, and generally took command of the place.
On the morning after admission he was quiet and asked to be allowed to remain in bed as he had a headache. He received a black draught which acted well.
In the evening he was dressed and very emotional. He spoke hysterically of his position "in a mad house," and said his heart was broken. He burst into tears at tea, and sent impassioned letters to different people requesting interviews.

2nd Dec. To-day patients manner is completely changed. He is arrogant and haughty toity. He treats the officials of the house with an insolent air of superiority. He has noted down on piece of paper his needs and affects to note down points he is dissatisfied with for publication in the Glasgow Herald.

Charles Hagen Owen
Continued

His requests are many and ill assorted. He wants a few cigars 'till his own arrive, sweetmeats, a Spanish Dictionary etc. He annoys the attendants by his whims in dressing etc, and the patients by his incessant talking.

5th Dec. Patient certified as insane. Dismissed as a Voluntary, and readmitted as a certified case.

6th Dec. Patient at breakfast became so troublesome to the other patients and so impudent that he was removed from No 4 gallery to No 1. In the evening he was penitent. Promised to behave better, and was sent back to No 4.

7th Dec. This morning patient is more amenable to discipline. He is still very restless, and lively; but seems anxious to attend to the regulations, and try not to disturb others.

19th Dec. Patient has been quiet and docile lately, seemingly anxious to make himself agreeable. His actions are still evidently studied for effect; they give the idea that he wishes to impress on others what a clever fellow he is. One day he will be found reading the bible with his hand over his eyes and a serious demeanour, another he will be working at Spanish with another patient and an air off appropriate liveliness.

13th Jan. Patient until to day has been very well, conforming to the rules and making himself agreeable to the patients and Attendants. To-day he is excited again, Exalted in manner and refusing to speak when addressed.

14th Jan. To-day he is excessively genial. He apologised for his discourtesy yesterday and went quite to the other extreme in excessive cordiality. Last night he wanted to sleep in his drawers and socks.

16th Jan. Yesterday patient refused to speak to anyone and kept his fingers in his ears during the visit. To-day he speaks freely. He says he has brain fever and talks incoherently. He jumped onto the tables and misbehaved generally, and has been sent to No 1.

19th Jan. Patient has continued very ~~riot~~ excited. He shouts incoherently. During the night he shouts: "Who are you?" until he either falls asleep naturally or a draught is given to him. He asks a great many irrelevant questions and adopts a very lofty manner with all about him.

Feb. 3rd Since last note patient has continued excited and very foolish. He sleeps well now and doesn't shout; but his manner is still very erratic. At one time he is insolent and sneering: At another too cheerful and amiable. He talks and writes silly things.

Continued p. 239

John Stirling
Cont. fr. p. 131

10th Dec. Since last entry patient has been steadily and distinctly improving. The digitalis seemed to be having a stenotic effect on the pulse and was discontinued, and a combination of squills and spirits of nitre given as a mild diuretic, the ankles being swollen. Paraldehyde was substituted for sulphonal. The change of treatment has been regarded as satisfactory.
Beyond occasional outbursts of temper, generally over some very trifling cause, he has been much more easily managed lately. He has been more amiable and his bodily health is distinctly improved. He still writes a large number of letters to various people, and occasionally threatens legal actions and various punishments; but these threats generally depend on a want of cigars or a refusal of some article of diet (such as Gouda cheese). As a general rule he is very amiable and cheerful when the visit is made. He does not swear so much, and, though not at all correct yet, his bearing to the attendants is improved.

19th Dec. Patient very much the same as at last entry. He is still very troublesome occasionally, principally during the night.

27th

His temper is very unreliable. At one time he will shew the most friendly attitude to someone and at the same time be writing a complaint about him.

27th Dec. Patient to-day transferred to Perth at the suggestion of the commissioners. He is better than when he came in but far from well yet.

Discharged.
Relieved

David Black.

Cont. from p. 124.

Dec. 12th Cont. They can rarely be moved save by using an enema & it is feared there must be some organic obstruction altho no tumour can be made out. The stomach is dilated & there is always a considerable amount of hyper-pyrexia present.
His mental condition seems to depend on the condition of his bowels when they are clear he is a little brighter & when loaded, depressed

29th There is very little change to note. There is still the same trouble with his bowels. His stools as a rule are dry & dark & in round bullet like masses & only obtained after using the enema. Mentally no change.
He is at present having a course of Lactopeptine which is helping his digestion somewhat.

1891
Jan. 16th There is no change in patient's mental state. His bodily condition has improved slightly since last note but there is still the same trouble with his bowels, & the stools are of the same shape as noted above. He shows the same obstinate disregard for food. He is sleeping well.

13th Feb. Patient has been looking brighter of late & his face has a better colour. He has two

shown less obstinacy with regard to his food. His thoughts still centre round his bowels. He is still very depressed miserable. He is sleeping well.

9 March — Unchanged either in mental or bodily Condition

29th May. He now in No 4 Gallery and is much better mentally much cheerier and brighter not full of so many complaints and with an improved bodily condition. The condition of his bowels still requires attention and at times he is irritable but on the whole decidedly better.

July. 2. The improvement in this patient still continues he is brighter & talks more readily on other subjects than his bowels or general health. Though this he is in pretty good health and takes his food well and sleeps well. His bowels are still the greatest trouble but are much better since he was put on Cascara & Strychnine. Today this was changed for Aloes & Iron pills.

Aug. 30 Home on trial.

Sept 8th This patient has now been home on trial over a week. Today a letter from the son reports that he is doing fairly well. ~~According to~~

~~Discharged~~. Relieved

on ~~8th Sept~~ 19th

9th Sept — His time of probation is extended to the 19th Sept. The latest account is not favourable.

19th Discharged. Relieved.

Charles Gibson
admitted Dec. 12th 1890

Patient is 46 years of age, married, a Contractor & a protestant.
He was brought from 116 N. Frederick St. & admitted to the East Ho. at the instance of his wife.
This is his second attack & it has lasted three months.
The alleged cause is alcoholic intemperance.
He is doubtfully epileptic, he is not suicidal but he is dangerous to others.
There is an H. P.: a sister is at present in an Asylum her case being also alcoholic. He is of a hard drinking family.
The medical certificates bear:-
(1) He has become dirty in his habits - refuses to change his clothing night or day. has become utterly negligent of his personal appearance - hair unkempt face dirty goes out in the street only partially clothed. He is extremely irritable - raised his hand to strike during our conversation. He has been drinking steadily for the past three months & is utterly incompetent to transact business of any kind. He has offered violence to his wife & servant
(2) His language is quite incoherent & it is almost impossible to understand what he says.
He seems to be suffering from Chronic Alcoholism & partial paralysis. He is utterly incapable of doing anything for himself & requires constant care & attention.
On admission patient was in a very

weakly state. His gait was very feeble & paretic. His face pale & pupils contracted with pupils dilated but equally so & reacting both to light & accommodation. His tongue is tremulous, furred in the centre, & red & irritable at the edges which were indented by the teeth.
His speech was with difficulty understood being much slurred & mumbled. This seemed to be due to want of coordination.
It is difficult to estimate his mental condition owing to his deficient speech.

13th. Patient slept only a few hours last night & was very restless. This continues this morning.
The speech difficulty is very marked again today but the tremor seems to be limited to the tongue & does not involve the buccal muscles.
Patient seems to understand what is said to him & can answer simple questions correctly but in a very mumbling manner. He has no difficulty in swallowing but he is kept on milk diet owing to the irritable state of his tongue.

15th. Patient has been very restless all day being with difficulty kept in his bed. This evening he had a well marked epileptic seizure. This affected both sides of his body but his face & eyes were turned towards the right side.
The convulsions affected all his limbs & body.
Since the fit the restlessness has been more

Charles Gibson
Cont.

marked. He mumbles constantly & tries to get out of bed. He has taken his food well since admission & has retained everything.

Dec. 18th Patient has remained very restless since he fell. Has continuing both night & day. Last night he had a draught of Paraldehyde which gave him four hours sleep. He was again sleeping at the hour of visit this morning. He has been vomiting occasionally.

28th Since last note patient has made a great advance. His bodily condition has greatly improved. His stomach has regained its tone & is now retaining food well. His tongue shows a corresponding improvement although coat is still present. He is now out of bed & is doing some work in the gallery. His gait has improved greatly & any deficiency in it would seem to be due to a general feeble condition rather than to paresis.
His speech is still mumbling though not in so marked a degree as before. He is bright & happy looking although he feels weakly.
He is to be tried in No. 4 tomorrow. He still has slight difficulty in swallowing but this has seems to be

passing away. He is sleeping well.

1891 Since last note patient has been in No. 4
Jan. 16th gallery & has made considerable improvement.
His conversation now is quite coherent
though difficult to make out owing to
the drawling scanning nature of his
speech. He is quite sensible of his position
but does not seem to be much affected by
it. He seems to have very little will power
left & all his doings mental & bodily are
very slow. His mental faculties seem all to be
blunted.
His appetite is good ("it is always is after
drinking" is own statement) & he is feeling
much stronger though not yet quite up to his
normal condition. He is sleeping well.

Feb. 13th Patient has had a relapse since last note.
He has had a series of epileptiform fits ex-
tending over three days. Most of these were
abortive but one at least seen by the writer
was well marked. The fit started with twitching
in the muscles of the face the mouth being
drawn towards the left side. The right arm
& leg were next in succession involved &
finally the left arm & leg but the latter to a
very slight extent. The spasms were all of the
clonic variety, the period of tonic spasm being
almost imperceptible. There was little or no
lividity & stertor in his breathing.
For several days after the fits ceased

& p. 245

Rev. Thomas Robertson.
Re-admitted Dec 24th 1890

Admitted to the West House to-day as a Voluntary.
He was a patient in Gartnavel last winter from Jan. 11th 'till March 22nd when he was discharged recovered.
See p.p. 499 & 519 Vol III. N.S.
So far his illness is not ~~of~~ at all of such a serious nature as the previous one. He is dull and apathetic, inclines to sit very close to the fire and stare at it. When addressed he answers questions sensibly; but he does not seem to incline ~~to do~~ much on his own account. When set walking he walks, and when placed on a seat he will sit for a long time without stirring. His mental condition seems dull.

27th Dec. Patient yesterday held a tolerably sensible conversation with the writer. He recognised that he had got better before and that on that occasion he had been much worse than on the present occasion; but he maintained that there was no hope of his recovering this time.
To-day he is more apathetic again, and would not speak when addressed.

14th Jan 1891 Patient much the same. He has been suffering from a cold lately —

22nd Jan. There is nothing to note in this patients' mental state. He has not improved much.

It seems that he has been suffering from bleeding piles for some time and has not thought fit to mention it. He is given suppositories of hæmamelin.

Jan 24th. Removed home by his wife to day on probation

Feb. 22nd Discharged—
Relieved.

William Anderson.
admitted Dec. 26th 1890.

Patient is 5-5 years of age, married, an Hotel Keeper & a protestant.
He was admitted to the East Ho. at the instance of his wife.
This is his first attack & it has lasted about a month. The alleged cause is intemperance.
He is not epileptic suicidal or dangerous to others.
There is no H.P.
The medical certificates bear:-
(1) He thinks his wife, the Doctor who attended him in Glasgow & his servants are in league to poison him. That he is now walking about Dunoon in full Highland Costume when in reality he is in bed in Killin. States that he has founded & endowed a magnificent College in Edinburgh & talks of his difficulties in appointing officials.
(2). Labouring under delusions that he is being poisoned. Has all the looks of an insane man. Erratic in his conversation etc..
Thinks himself a great person & of great wealth & has given away much in charity. & is much abused by his wife & own friends.

On admission patient was somewhat excited & protested against his detention in the Asylum. His conversation though coherent was rambling & in it he expressed numerous delusions regarding his wife & people who had stirred up strife between them.

He is in poor bodily condition. His tongue is foul & irritable at the edges: fibrillary tremor is visible in it but no deviation from the middle line.
The pupils are equal & react to light & accomodation.
His speech has a slight drawl & is somewhat slow especially with letters r & l.
There is no tremor of the lips or buccal muscles during speech.
His gait is very paretic & he with difficulty can stand upright even with his eyes open & utterly fails to do so when they are closed.
The Knee-jerks are slightly exaggerated especially the ~~right~~ left.

27th Patient slept a few hours last night & was somewhat talkative when awake. He knows perfectly where he is & is ready to talk for hours on the injustice of bringing him here. He has a pleasing manner & is very friendly & cordial in his greetings & very anxious to become confidential.
Since admission he has taken his food well & seems to have no difficulty in swallowing.

30th Patient now says that he is quite well & ascribes his difficulty of walking to his friends having fed him with nothing but medicine for some time past.
On being asked about the college which he

William Andrews.
Cont..

founded in Edinburgh he says that what he said about it is nonsense. His delusions seem to centre round his wife & near friends. He continues to sleep fairly well.

1891
Jan. 6th This morning patient has been very sick & has vomited everything he has taken. He is somewhat weak & depressed. On exam. no cause for this can be made out. There is no diminution in the hepatic dulness nor any tenderness over the liver or stomach. His tongue is biliously coated & the vomit latterly consisted of bile. Poultices placed over the abdomen have relieved the sickness & he has since retained a little Soda water & milk. He has been sleeping

7th fairly well through beginning small doses of Paraldehyde.

Today patient is very depressed & full of vague fears as to evil to come. He thinks things are not going right at home. The sickness has passed off for a time but patient is still being kept on fluid diet.

The drawl in his speech previously noted is still distinct. Patient was wet this morning.

13th Patient has again been sick vomiting nothing but soda & milk with a little Whisky

lying on his stomach. He has again got relief by poultices. An enema was given him & this has had a good effect on the vomiting.
His mental condition continues to be one of extreme depression. He is disinclined to talk & his face has assumed a very dull & stupid expression.

" 16th Patient died somewhat suddenly this morning at 4:30. Yesterday a bedsore was found to be forming over his sacrum & he was accordingly shifted on to a water bed. At the night visit he was quite rational but his pulse did not suggest any immediate danger. He sank however very rapidly during the night & died as above.

17th A post mortem exam. was made to-day & a tumour was found in the left cerebellar hemisphere surrounded by an extensive area of softening. This along with a tumour in the right supra-renal region seemed to be of gonomatous origin. P. M. Journ. p. 35.

Cause of Death
Cerebellar Tumour.

William Ainslie

Cont. from p. 183.

Dec. 29th His appetite is good & he is sleeping well.

Cont.

1891

Jan. 16th Patient still makes very slow progress. The reason of this according to himself is his bowels & their want of action. On this subject it is very clear that he is delusive & his thoughts on this subject are very fixed. He is at present having a course of sulphur which is acting satisfactorily tho' not sufficiently so to please the patient.

He is sleeping well.

Feb. 13th Patient has been looking stronger & brighter of late. The fault still lies in his bowels. He is now talking more readily & showing signs of coming out of his unfortunate condition.

9 March. Patient still continues to improve though. His mental operations are all very slow but he is now more hopeful of his own recovery. He is in very good health & bodily condition.

May 12th Has continued to improve and is now well. Will be discharged soon.

May 14th Discharged

Recovered

Duncan Miller

cont. from Vol III p 5-86

1893
June 30th His remarks are sometimes shrewd. He has a wonderful 'gift o' the gab' which he exercises freely if listened to. There is no change any way.

Dec. 28th He keeps in good health and spirits and is nearly always cheery and talkative.

1894
May 2nd He has not been looking so well the last few days. Examination of his heart shows hypertrophy, the apex being in the 6th interspace and in the nipple line. There is a well-marked systolic murmur heard all over. His temperature is ~~Do~~ above normal. He complains of nothing.

" 9th His temp. is nearly always up in the evening, sometimes to 102° while in the morning it is generally normal. His face is flushed and he is a good deal worse. His pulse is weak and irregular. He complains of no pain and his usual answer to is 'healthy' when asked how he is. He has got more dull & stupid.

" 16th The above symptoms since last note have become exaggerated and he died this morning. For the last 24 hours he became semi-comatose but before that one could make out nothing from him. He was much more stupid than usual. There was a good deal of albumen in his urine. There were no definite nerve symptoms whatever.

Death on May 16th 1894

Cause of Death. Meningitis and Heart Disease.

For Post. Mortem vide Pathological Register p 213.

Hugh McCormick, 43
Admitted Jan. 4th 1891
To West House.

Information from Warrant -

Patient is 43 years of age, married, a publican, and lives at 107 High St, Renfrew. This is his second attack, his first attack was about a year ago when he was confined in Gartnavel. The supposed cause is intemperance. He is not subject to epilepsy; he threatens suicide, and is dangerous to others. There is no stated N.P.

See page 91. Vol III

Medical Testimony bears that the doctor had taken out his spine, and that he would send his wife to the grave; that he is incoherent in his language. He makes terrible charges against his wife and family.

On Admission he was very much the worse of drink and talking wildly about his wife, said she wanted to do away with him, but he would prevent it. He said he had tasted no drink since he was discharged before until that day. The constables (in charge) said that he had been drinking steadily ever since.

In the morning he was much quieter in his manner, a large black draught had been given him. He still inclined to harp on his delusions, said that his wife was a bad woman. He complained of a severe pain occasionally in his stomach. He said he felt it first when

he was lifting a baby. He said he vomitted some blood on one occasion. It was not quite clear whether this was a delusion or not and an examination was made of the abdomen with negative results.

Jan 8th Patient is quiet in manner now and more settled. He complains of being brought to Gartnavel and is less inclined to talk of his delusions.

Jan. 12th Patient still complains of occasional pain in his stomach. He calls it a "tearing" pain. He had not taken any meat food till yesterday (the day before) for sometime when he vomitted it up. It is difficult to get a satisfactory account of his symptoms as he inclines to mix up manifest delusions along with more real sensations. He got up this morning at 5.30, he says to give the people a sight of him.

Jan. 21st There is very little change to record. He makes a great many complaints of pains here and there. They are generally believed to be mental after investigation. His demeanour is quite

Feb. 3rd Patient is now quiet and reconciled. He is respectful and ~~pleasant~~ pleasant in manner, and makes no complaints now at all.

Mar. 12th As at last note. There is something not altogether right yet. His manner is pleasant but reserved. He never speaks of going now.

Continued p. 297

Rev. James Christie, 53
Admitted 7th Jan. 1891
To West House.
as a Voluntary

Jan.

Brought to-day from Carlisle where he is minister of the Scotch Presbyterian Church. He has been sleepless, and nervous & excitable for some time and has felt the need of some restraint and routine. He had been speculating a little which may have been partly the exciting cause. Before admission he was troubled occasionally with dizziness and ringing in the ears and fulness in the head.

On admission he was found to be somewhat elevated and excited in his manner, a little over-genial in conversation, restless, and ready to talk with anyone he met. He tried the piano and moved about the gallery smiling on every one. He was very willing to give any information about himself and make himself agreeable generally. For the rest he seemed a refined, intelligent, and broadly educated man, neat in dress and appearance, and polished in manner and address.

Feb

Feb.

Ma

Jan. 20th Patient has been put on parole and walks out in the grounds a great deal. He walks rapidly and seems to like to be spoken to about it. His manner is most courteous and genial to all, and he has established himself a favourite with all the officials outside and inside the house.

Christie

Jan. 22nd A noteable point in this patients' manner is a kind of jerkiness; what strikes one as a kind of bottling up of emotion. He seems to be anxious to be genial, and seems to feel genial, but at the same time feels a relief when the interview is over. Everything is done by jerks. He jerks out to walk, walks very smartly round the grounds, and jerks in again. His action of shaking hands is characteristic of the same. He plunges his body forward and then draws it back suddenly. His face although well-coloured has a puffy look, and the lines of expression are not very strongly marked.

Feb. 7th Patient has been put on leave beyond the grounds, and he walks long distances. There is nothing further to record in his case.

Feb. 20th - Nothing further to note: still jerky and impulsive in manner. He takes long walks and is in first rate bodily condition.

Mar. 12th - Nothing to note. He is going shortly on a trip to the Cape.

March 23rd — Dismissed —

Recovered.

John Moore
admitted Jan. 7th 1891.

Patient is 33 years of age, married, a stamper in the P.O. & a Protestant.
He was brought from 248 Parsley Road, & admitted to the East Ho. at the instance of his wife.
This is his first attack & it is stated to have lasted one week but on inquiry it seems that he had shown symptoms five months previously.
The Cause assigned is overwork.
He is not epileptic or suicidal but he has been dangerous to others.
There is no Previous H.P.
The medical certificates bear:-
1. His thoughts run riot: he talks incessantly & in an incoherent manner: writes letters upon religious subjects with no sense or connection of ideas. He is sleepless excitable & with a tendency to use violence. He has threatened to shoot his wife with a revolver, he has thrown articles of furniture at her & attempted to jump through the window.
2. He is suffering from mental hallucinations. Great religious excitement being called upon to go forth & rescue others (generally his friends whom are not requiring such attention). He has become wealthy & is very desirous of contributing to all benevolent schemes. He has always been a kind & attentive husband but now he threatens his wife & throws articles of furniture about at her he has threatened her with a revolver.

Patient is in very poor bodily condition being thin & pale. A systematic exam. of his organs was rendered impossible owing to patient's excited state.

On admission he was very excited constantly talking & in an exalted fashion. He is filled with a great sense of his own ability, says he is to be Editor of the News & is going to make the world stare at the brilliancy of his comic literary & artistic work. His delusions are of a fleeting type but grandiose & exaggerated.

His mental condition is suggestive of G.P.

There is a distinct tremor in his speech & over difficult combinations of sounds manifest incoordination.

The tongue is tremulous but not to any marked degree.

His pupils are equal & ~~irregular~~ regular but he will not allow an exam. of their reflexes.

His Knee-jerks are normal & there is no affection of his gait.

8th Patient slept 2-3 hours last night was very talkative when awake. This morning he is as described above.

9th Patient is still very noisy & constantly chattering in an incoherent fashion & now & then sings a snatch of a song.

His mood is gay & happy.

He is very restless & tosses up & down in his bed all day long.

to p. 221.

Edward Gillon.
admitted Jan. 14th 1891.

Patient is 35 years of age, married, a labourer and a Roman Catholic. He was brought from 141 Castle St. Glasgow & admitted to the East Ho. at the instance of his brother-in-law.

This is his first attack & it has lasted a few days obviously through drinking on gradually. The alleged cause is intemperate habits. He is not epileptic or suicidal but might be dangerous to others.

There is an H.P.: his father was intemperate.

The medical certificates bear:-

1. He imagines he has died & been buried for 3 months: that his dead body is on the floor: that heaven & hell are under his commands: he is very excited & dangerous. He has been drinking & has been excited & talking maniacally for a day or two.
2. His language is incoherent & he has delusions. He says he has been in the Asylum several days, tho' he was admitted last night. He recognises the other inmates as old acquaintances. He says he has been employed lately in working an engine. He also hears unseen people speaking to him.

Patient is a thin & prematurely aged man. His hair is grey & he has a worn look. On admission he was much excited & full of delusions of the type mentioned in the first medical certificate. He believed he was sent here by God to execute a mission for him the nature of which he does not yet know but

he is shortly to be informed regarding it by a visitation from the Almighty.
His voice shows a good deal of tremor as also does his tongue. There is no marked tremor of the buccal muscles. His pupils are regular but markedly unequal the left being much dilated. Patient was too excited to test the eye reflexes. His gait is not affected.

15th This morning patient is not so talkative. He seems very confused & unable to say where he was admitted. On being asked about his statements last night as to being dead he says it is all nonsense. His language after a few minutes becomes quite incoherent. He takes his food well & seems to have no difficulty in swallowing.
On exam. his chest this morning his left apex is found to be in a doubtful condition. The R. Br. is somewhat broken & expiration prolonged & rough.

16th Patient asked this morning to get away in order to claim his two estates worth seven millions which a man had left him. He is suffering from auditory & visual hallucinations & turns round to talk to imaginary persons behind him. He plucks at a towel as though trying to attract some persons attention. His condition today suggests G.P. but he does not seem to experience any mental fear or depression.

to p. 219.

Yousuf Hamis, about 26
Admitted 12th Jan. 1891
to West House.

Patient is single, a Student of medicine, and a Roman Catholic. He lately lived at 7 Huntly Gardens, but is a Syrian by birth. He has been obviously insane for some days, and it is his first attack. The supposed cause is ill health and the abuse of opium. He is not subject to epilepsy, has threatened suicide and is dangerous to others.

Medical Testimony states that his conversation is incoherent, that he is under the delusion that his landlady and others are trying to poison and injure him. He sees things on the wall and about the room. He has risen in the night and seized the poker to protect himself from people who are trying to injure him.

On admission (about 5 minutes to 12 at night) he was restless and suspicious in his manner, afraid to trust anyone and sneering at anyone trying to help him. Occasionally he would shout out something unintelligible and his conversation was incoherent. He refused to take beef tea imagining it was poisoned. In the morning he was rather quieter and took some opening medicine and breakfast. His language was still incoherent, and he complained about people trying to injure him. He spoke

a great deal about the Marquis of Bute, and blamed him for with getting him shut up. It is difficult to understand what he says. He has been in this country for a considerable number of years, but still speaks very badly. Incoherence added to this decreases still further the intelligibility of his language. The writer remembers him at the University 6 years ago. He has lived a very irregular life, then and since, and he has been so long over his medical course that he had got to look on it himself as rather hopeless. He wanted to go back to Syria. An examination of his chest showed some slight bronchial catarrh in both lungs most marked at the bases. His tongue is very foul and his breath fœtid, and he looks most unhealthy. He has been put on nourishing diet.

16th Jan. There is little change to record in patient's state. He is more settled, but sleeps badly and mutters to himself.

19th Jan. On Saturday-night (17th), patient suddenly became most violent, fighting with everyone near him. He was put into canvas with great difficulty. It took five men to do it, and the strength and agility he displayed were most extraordinary. He destroyed his bed linen & anything at hand. Locked gloves were put on, and he was put in the padded room.

Contin. p. 225

William Brown.
admitted Jan. 16th 1891.

Patient is 50 years of age, married, a plumber & a protestant. He was brought from the Southern Police Office & admitted to the East House at the instance of his wife.
This is his first attack & it has lasted over one month. The cause is uncertain but he is stated to be very rheumatic.
He is not epileptic but he has threatened suicide & been dangerous to others.
There is no Brown H.P.
The medical Certificates bear:-
1. He is very dull & melancholy walking about the cell & will not answer questions. Was brought to the Office for disorderly Conduct & has been very excited all night.
2. He is dull & melancholy, wanders about the cell & will not answer questions: he has an insane appearance. Was brought to the Office for disorderly Conduct & has been very excited.

Patient has a very broken down appearance & looks much more than his age. He is in poor bodily health. There are scars in both groins the remains of old buboes. Round his anus there is a mass of condylomata of papillitform shape & very soft & liable to bleed when patient has a stool.

On admission patient was in a

very torpid condition & could only with difficulty be roused to speak or rather to mumble out a few unintelligible sounds. His eyes have a fixed & lustreless appearance & but the pupils are equal & react to light.

17th. Patient slept none last night & was very restless & with difficulty kept in bed. Today he has been the same & this morning wanted a knife to put in his throat. He also tried to injure himself by tearing at his penis & testicles. Buttons gloves were in consequence put on him.

19th. Patient had a draught last night & slept for six hours & today is looking much stronger & his eyes have a more healthy appearance. He is very confused & has a difficulty in speaking. His speech is explosive & he seems to have the words in his mouth for a time before he is able to blurt them out. What he says is quite fragmentary, "blast" & "explosion" being the most easily made out words.

He is taking his food fairly well & to-day put on Pot. Iodid. gr. X 3'ce daily.

Feb. 23rd. Patient still very excited & shouting incessantly & displaying much restlessness. He is constantly trying to get out of bed. He is taking a good deal of food & his strength is keeping up. He is having paraldehyde at night but with doubtful effect.

to p. 243.

Edward Gillon.

from p. 214.

Jan. 16th Cont. He speaks in a hoarse whisper & says he is unable to speak otherwise.
He has had little or no sleep since admission & tonight has a draught of Paraldehyde.

Jan. 28th Patient has slept well since last note & is now a new man. He looks sensibly & smiartly & is doing a little work in the gallery. He is eating with good appetite & his bodily condition is steadily improving.

29th Patient is now very well & in No. 1 gallery where he is a capital worker. He is now quite settled & acknowledges the cause of his illness & the necessity for avoiding it in the future.

Feb. 11th Patient was today discharged

Recovered.

James Victory Hughes

cont. from Vol III p 31

1893

June 30th — He can and does talk by the hour. It is a matter of indifference to him whether he has an audience or not. His harangues are chiefly about Freemasonry and Lunatic Asylums intermixed with politics. K H & C. good.

Dec. 28th — No change. In good health.

1894

December 29th — Many have been the speeches he has delivered throughout this year - all of them consisting of bombastic nonsense. There is no change and his health continues good.

1895. June. 11. — Has been confined to bed for the last week or so after a sharp attack of diarrhoea with blood in the motions. There was complaint of abdominal pain & some fever. This has all passed off now and his temperatures are keeping normal. He is getting up now. His mental condition is unchanged.

Dec. 20 — At his usual work and lecturing to all around on masonry and its mysteries. He is not happy unless he is teaching and takes a superior view of all around him. He is demented & happy. Health is fairly good.

1896.

Oct. 6 — There is no change here. He works fairly well but with many & interruptions for lecturing which he does to his imaginary audience at the Top of his voice. His general health is good.

Dec. 31 — as above.

Transferred to Gartloch.

Relieved

November 12th 1897

John Moore
Cont. from p. 212.

Jan. 16th Since last note patient has continued very noisy restless & excited. His speech is wildly incoherent & he seems to be labouring under numerous delusions. He has been having Paraldehyde at regular intervals every day but this has had very little effect in lessening his excitement. His speech still has the well marked tremor previously noted & this symptom has become worse in the past day or two. He has also cut himself several times. His excitement has not remained of the same gay type but now he frequently bursts into tears & strikes his hands wildly against the wall & sides of his bed.

His condition now is strongly suggestive of General Paralysis.

Feb. 13th Patient is now less excited & is sleeping better. This improvement is only of a few days duration however. At present he displays a great deal of mental & motor restlessness & has numerous lofty delusions as to his wealth which he reckons in millions. His speech & the tremor of his facial & lingual muscles are still strongly suggestive of G.P.

His appetite is now somewhat better but he requires to be fed by the spoon.

9 March. Excitement now much less patient is sleeping well. Signs & symptoms of G. P. are still very well marked.

29th Oct. Since he under returned to duty about the middle of April this man has been very quiet and in No 1 Gallery. There is evidently a remission in the course of the disease and meanwhile to a careless observer & a non professional one the evidences of the disease under which he labours might pass un-noticed. But they are there as the same, and in the tremor of the tongue, the obliteration of the naso labial folds, and the affection of speech there is ample evidence of the existence of G. P. At present however he has no grand delusions but is distinctly self satisfied and complacent. He is getting fatter and his appetite is good.

June 16. Passing quickly into the 2nd stage. Is now very quiet and with dulled senses. answering questions only very slowly and after a distinct interval. Face very expressionless & great filling up of the lines about the nose and mouth.

July. 2. Two or three days ago patient has retention of urine for 24 hours but the catheter was not required as his bladder empties when his bowels moved. and was never very much distended. At this time he was moved into the Infirmary from I. The difficulty in micturition has now passed off. He is very dull and stupid now & sits with a vacant confession on his face. When he can be got to speak tremor is well marked. but it is difficult to get more than Yes or No out of him. The pupils are sluggish to light, the consensual reflex being

Cf. page 424.

William Shannon.
From p. 182.

Jan. 16th

6 Feb. Patient has again settled down & this time in a more hopeful degree. He is now working well in the gallery. He talks coherently & answers questions readily & seems to be free from delusions. His power of self-control also seems improving. He has been sleeping well for the past week & this without drugs.

9 March. Patient has made a great advance since last note. He is now in Iro. 10 & working very well. His conversation is quite coherent & he seems free from delusions. He is in good bodily health & sleeping well.

May 12th He again improving after a severe relapse. This period of illness lasted about 10 days. He was somewhat excited, constantly talking, maintained that many friends were near him and gesticulated greatly when marching up and down the ward. Now he is quieter, somewhat more coherent & his bodily health has not suffered from the attack.

May 29th Continues to improve but still a little emotional and seems to laugh in a silly fashion whenever he is spoken to. Bodily health good and as he is working every day in the garden there is hope that mental improvement will be rapid.

July 6. Improvement has been on the whole maintained and he is better but still somewhat silly in his manner, facile as it were, and with a vacant look about his eyes when he speaks. His bodily health is good & he is at work regularly.

William Shannon
cont'd.

September 11th. He is not falling back, but is doubtfully improving & certainly has not yet reached the level of health. He is calm & quiet, talks readily & works well, but there is a great silliness about him both about his conversation & manner. Has at times is worse than at others, but is at all times present & shows no signs of passing off. B.N.A.C. good.

Nov 6th. Much the same as at last note. There is a slight vacant look about him. He has not the behaviour quite of a man in possession of normal mental power. If called to for some time he betrays a vague state of mind, even to the extent of harbouring delusions, & becomes somewhat excited & confused. He says that for three months after he came here he was totally without "food or raiment" & makes other absurd & mysterious remarks.

Nov. 12th. Seized apparently with Influenza today. temperature 103- pulse quick - shivering & pained all over - & slight Cough. Phenacetin ii & grain doses every 3 hours.

13th. Better. Temperature lower - Pains less.
Phenacetin 5 grs every 4 hours.

Nov. 20th Better a little ago & relapsed again - & rather poorly. Coughing much, with signs of bronchitis - Sputum Copious, & mucoid. Cough mixture & poultices -

Nov. 28th Much better - Cough almost gone. Getting up.

Dec 23rd. Back in 10. now - & quite recovered his bodily health. There is still a vacant look about him mentally - a kind of facility & indifference, which seems marked.

J. S. S.

Yousuf Hamis

Continued from p. 215.

19th Jan. cont. Yesterday he was still very violent. A purge was given him which operated. This morning he is quieter, but weak and ill looking. His tongue is rather better but still very foul. He was dressed in the morning but has been sent back to bed.

20th Jan. Very sullen in manner this morning & Refuses to speak. He has resolutely declined food yesterday and this morning, but he took a cup of beef tea during the night and one about 12.30 to-day. His habits are dirty. He is kept in bed.

21st Jan. Patient answered this morning when spoken to, and showed his tongue, which is considerably improved. He looks thin and ill and his complexion is dirty-looking. He has taken a little breakfast, and occasionally he takes a switched egg or some beef-tea.

22nd Jan. Patient has taken his food better to-day, and is slightly improved generally. He is still kept in bed, and shows little disposition to get up.

25th Jan. Patient now removed to 5 & 6 galleries. He is tidy, docile, & well behaved; ~~and~~ takes his food well and sleeps well. He is still far from well mentally. He stands for long periods if permitted in front of a chair tapping his lip with his finger. He answers quietly and pleasantly when addressed.

Feb. 3rd Patient is distinctly improved. Instead of standing in strange attitudes he now walks up and down the gallery. He says that he feels much better and more composed. His face is much healthier & fuller, and his tongue is greatly improved. At the same time he still ~~more~~ shows a want of inhibition to some extent. He laughs foolishly at little or nothing occasionally.

Feb. 10th Mr Hamis is decidedly improved since last note. He is more composed, has more repose, and is docile & well behaved. He says that he feels that he is improving.

Feb. 18th - Patient has been quiet since last entry and making steady progress. This morning he broke a plate and cup. On being asked why he did it he said it must have been some "mad idea". He was visited the other day by Professor Charteris and expressed the delusion that he had been put there by the machinations of the professors. He said he did not ask for mercy; he only wanted justice.

Feb. 23rd Patient has written a letter to the Marquis of Bute containing most remarkable delusions. He says he is surrounded by devils in whose power he is, and his only chance of escape is by the renunciation of the Roman Catholic Religion. He is most reticent to the officials of the house, and were it not for these

Continued on p 263

James Lusk.
admitted Jan. 27th 1891

Patient is 23 years of age, single, a Chemist & a Presbyterian.
He was brought from 25 Forsyth St. G'wich. & admitted to the West House at the instance of his brother.
This is his first attack but it has lasted more or less for three years though he has been much worse within the past six weeks.
The cause is uncertain. Feb.
He is not epileptic or suicidal but he is sometimes dangerous to others.
There is an H.P.: his paternal grandfather was epileptic.
The medical Certificates bear:- Feb.
1. Though speaking intelligently on many subjects there are others on which he is distinctly rambling in his talk & has delusions. He asserts that he has some connection with the "laws of evolution" & that these laws have caused temporary mental aberration among the men at present on strike: similar explanation is given of recent events in Irish politics. He asserts that he could aid by his connection with these laws in bringing the strike to a close & that he has already seen Dr. Walker & Dr. Gait. Previous strikes had similar explanations. He was the indirect cause of the strike. Feb.
2. States, he is a chosen messenger of God: that he has divine authority to say the Railway men should work 12 hrs a day: Knowing he had this authority he called upon some of the Railway Directors to intervene in the dispute. States, that Dr. Parnell's conduct is due to atmospheric influence:

that the whole condition of things at present is foretold in Revelation. Rambling talk of atmospheric influence on political men + daily events.

Patient is in fair bodily health with a fair + ruddy complexion.

On admission he was excited + protested against his detention but talked freely on subjects mentioned in the certificates. His conversation was coherent but rambling + easily led.

Feb. 3rd Patient has now settled down. He has improved so much as to recognise that he had some strange notions and allow that they were delusions. He is more cheerful in manner, and amuses himself with games.

Feb. 10th — Patient relapsed. His querulous manner has returned, and he petulantly besought to get away this morning. His delusions have returned although perhaps not quite so strongly. He now says that he failed in regard to the railway strike; but there is no doubt that he had the mission to mediate.

Feb. 20th Rather better again, and a little more amiable. He plays the piano fairly well, and amuses himself with that and various games.

Feb. 23rd Yesterday patient informed Dr Yellowlees that he was the ~~+~~ man-child mentioned in the Book of Revelations, and brought the bible + pointed out the place in the 12th Chapter.

Continued p. 261

Adam Bald Maclaren, 33.
Admitted 23rd Jan. 1891.
To West House.

Information from Warrant—

Patient is 33 years of age, married, and is by occupation a bookmaker or Turf agent. He is an Episcopalian and resides at 13 Ashton Terrace, Hillhead. He has had three attacks within a year, and this is said to be his fourth attack. His first was at the age of 32. He has only been treated at home before. The duration of existing attack is about three weeks, and the cause intemperance. He is not epileptic or suicidal; but is dangerous to others. A sister, now demented is confined in the Ladies' division, Gartnavel.

Jan.

Feb.

Medical certificates - state that he hears voices throughout the house, and becomes furious if contradicted, and that he fancies the house is undermined and bags of gunpowder are placed there: that he is dreamy, restless, and preoccupied, and answers questions incoherently, etc.

On Admission - he was restless and excited. His power of self control was much weakened, and there was a great deal of motor excitement. His hands, (tongue) shaky, and there was a great deal of fibrillar trembling in the tongue when protruded. His whole nervous equilibrium was overturned. He shivered like a man suffering from extreme cold.

Feb.

His face was thin and ghastly pale, and his lips and gums very anaemic, the tongue furred & dirty. His chest was sound, and his body fairly nourished.
He talked incoherently about voices, arsenic on the walls, etc., and started up to do things without a clear idea what they were.

Jan. 26th A smart purge, a few nights sleep with the aid of paraldehyde, and feeding have done wonders to this patient. He is now composed and clearer, and talks sensibly when addressed. He is still very shaky and has been put on a tonic with extra diet.

Feb. 2nd Patient getting stronger day by day. He has now a tinge of colour in his cheeks. His mental aberation is now quite gone, and he talks pleasantly and freely. He plays billiards and other games and makes himself agreeable generally. He states that for the last 6 months he has drunk on the average a bottle and a half of whisky in the 24 hours, and latterly has neglected his meals very much.

Feb. 11th At the urgent request of wife & himself patient has been allowed to go away. He is perfectly sane, but it is feared that he will return to his intemperate habits, although he promises faithfully that he will not.

Discharged.
Recovered.

John Dawson, 55.
Admitted 31st Jan. 1891.
To West House.

Transferred from Dumfries.

Information is to effect that he is 55 years of age, married, a commercial traveller, and was admitted into the Crichton Institute on the 5th July last. This is his first attack, and the supposed cause is "nervousness". He is not subject to epilepsy, nor is suicidal or dangerous to others. One or two aunts have been subject to melancholia.

Medical Certificate states: "He is a lunatic, being in a state of mental depression, and the subject of delusions."

On Admission he said that he was beyond cure, and that he was in a false position altogether in being brought here. He said that at Dumfries he had to refuse his food because he was fed on human filth — He was fed with the tube for some time —.

Feb. 3rd Patient has not taken his food well since his arrival. He sits and pulls at his beard — He has a magnificent grey beard —, and speaks as little as possible. When addressed he answers reluctantly. When one speaks to him cheeringly he says it is sarcastic. Efforts to get him to join whist parties or play draughts are of no avail. He shows by his manner and actions that he is suspicious

of his surroundings. On being asked why he didn't take his food, he mumbled something about it not being proper food.

Feb. 4th - Patient took his breakfast this morning on it been impressed on him that he must do it. He is still repellant and suspicious in manner.

Feb. 10th Absolutely I.S.2.

Feb. 20th This patient is making no improvement whatever. He sits and rubs his head or pulls his beard, and when addressed stares and answers strangely. His answers while not absolutely incoherent are meaningless — such as: "Oh! yes all very fine," or "Oh! yes that's a grave answer" etc.. They seem more careless than incoherent as if he didn't care to speak at all, and when pressed felt he must say something. He is on Nepenthe mx doses thrice daily.

Feb. 21st Yesterday he visited his home along with the head attendant and took tea with his family. The head attendant says that he behaved extremely well at table, said grace, saw that the visitor was attended to, and acted just as a man does presiding at his own table; Yet he insisted on the road that he had no house, and said he couldn't understand what it all meant. However he knew to stop at the right close, and said: "this is where I used to live.

Continued to p 259

Andrew B. Pairman, 35.
Admitted 24th Jan. 1891
Voluntary to West House.

Patient is 35 years of age, ~~married~~ married, and resides at 3 Cowan Street, Hillhead. He has been nervous and restless for some time, and speculation is alleged as the cause. He has made threats about taking his life. This is not the first attack of the kind. He had a milder one some years ago.

On Admission there was little out of the way noticeable in him, beyond a nervous appearance, & occasional twitching of the hand. His face was pale and clammy and rather drawn. From his conversation he might be set down as rather hypochondriacal, and he complained of sleeplessness. A piece of thin rope about 7 or 8 ft long with a very neat running noose at one end was found in his pocket.

Jan. 30th Since admission patient has slept very badly; paraldehyde is given in ℥ij doses at bedtime & repeated if ineffectual. He is getting iron & phosphoric acid as a tonic.

Feb. 2nd Yesterday patient was discovered making a weak attempt to strangle himself with a scarf tied to a gas bracket. He was also noticed rubbing at his neck with a sharp stone that he had picked up in the grounds. On being taxed with it he scoffed at the idea of suicide, but allowed it was silly. He has been sent to No 1 to sleep for a few

Feb.

Feb.

Feb.

Feb.

Feb.

nights, greatly to his disinclination.

Feb. 3th Patient was permitted to sleep in 6 again last night. He expressed great sorrow for his foolishness, and promised solemnly never to do such a thing again. He still sleeps very badly even with the draught, although he occasionally gets a good night. The other evening the writer found him reading aloud from a book with several other patients in the parlour. He said he was doing it to steady himself.

Feb. 10th – The dose of paraldehyde has been increased, and patient sleeps rather better, but still far from satisfactorily. From 2 a.m. till he rises seems to be a specially wakeful time and he is always most miserable and depressed at this period. A draught (paraldehyde-3i ℈) is regularly administered now at 2 a.m. There is little improvement in general condition to note.

Feb. 16th Patient has made such objections to paraldehyde that to-day he has been put on Chloral amid instead. 20 grains were given last night in ℥ij ℈ of rectified spirit with no effect. To-night gr xl will be given.

Feb. 17th Patient slept rather better last night.

Feb. 23rd Has had three good nights, and is getting quite cheerful. 40 gr. of Chloral amid are administered at 2 a.m, the time when he is most apt to be miserable; —

Continued p. 257

George Jameson Swann. 52
Admitted 8th Feb. 1891.
to West House.

Information from Warrant

Patient is about 52 years of age, single, and the manager of the Irrawady Flotilla Company. His previous place of abode was 5 Wilton Gardens, Kelvinside. He has been insane for about a month, and has had two attacks of "something like paralysis in the fingers." He has previously only been treated at home. The cause is uncertain. He is not subject to epilepsy or suicidal; but is dangerous to others. There is no stated H.P.

Medical Certificates say that he is very violent and believe that his brother and sisters have robbed him. He is inclined to strike persons round him and think they intend to injure him. — He imagines that everything has gone against him.

He was admitted at 3·30 a.m. on emergency certificate. He had been exceedingly excited about midnight and 1 a.m. and shouted for the police thinking he had been robbed.

He slept fairly well and was rather more composed when seen in the morning. An examination of his chest was made, and it was found to be sound. There were no marks on his person, but one of his legs has large varicose veins for which he wears an elastic stocking. Urine normal.

He is a large robust looking man rather inclining to corpulence. He was got out of bed and taken up to No. 576.
On conversation he gave utterance to a great many delusions about the state of the company he served and his own private affairs. He said that he expected every day an announcement of a smash of the company, and his own arrest. He said the shares were worth nothing, and the bad condition of affairs was largely due to him. He had been saying things that he should not have said, and doing many vague injuries to the company. Along with this he said that his brother had got possession of his papers and was making away with his property. He said he (the bogus) had in his possession his Indian Cross and an order which he received from the King of Burmah weighing 50 sovereigns of gold. He recognised his position, but said he would not be here long as the police would be after him immediately. He allowed that he had been worried by business lately. A government railway had been laid up the Irrawady, and besides he was involved in the unsuccessful La Plateau Hoolla Company. His hand was shaky, and his general appearance restless and anxious. His manners very agreable and

George Jameson Swann

from p. 236

gentlemanly.

Feb. 10th Patients papers were brought out and gone over ~~last~~ this evening by my part to try to convince him of his delusions, but it seems to have had little effect. He informed writer that he saw there was some £7000 short, which he alleges his brother has made away with. Up till last evening his manner to doctors and attendants was courteous, confidential and friendly; but suddenly about bedtime he changed his tune, and said he understood the situation now. He insisted that he was surrounded by detectives and refused to go to bed, alleging that it was useless as he would be conveyed to prison immediately. The writer he said was a particularly clever one, who altered his dress and manner to deceive him. He said he saw the lights of the cab that was to remove him, and refused to remove his greatcoat and boots. Ultimately on threat of force he was induced to go to bed; but passed a very restless sleepless night. This morning he was very excited and threatening. A black draught was administered.

Feb. 12th The purge has decidedly relieved Mr Swann. For the last two days he has been quieter and more agreeable. He has been restless

at nights, and on one night threatened to fight his attendant. This morning his delusions seem less fixed, and he inclines to jump from one notion to another.

Feb. 14th – Last night patient informed writer of a new delusion. He said that during the night he heard an engine of some kind in the next room making a kind of blowing sound, and he became conscious of an overpowering gas being forced into the room. He considers this gas was intended to overpower him and render him hopelessly mad. The engine started on a signal being given from without – a cough, answered by a pretended snore from the attendant sleeping in his room. The attendant in his room put his head under the bedclothes, and sniffed something concealed on his person as an antidote. After some conversation Mr Swann seemed to appreciate that this was a delusion; he did not say so altogether, but he remarked that there must be some disorder of the brain to account for ~~the~~ a delusion of the kind. His delusions are very erratic, and he is convinced of one only to adopt another. Two nights ago he took off his pyjamas requesting that they should be examined as he had been accused of self abuse. This had never been entertained for a moment, and how it occurred to him is difficult to say.

Continued p. 251

Charles Hagen Owen

Continued from p. 190

Feb. 14th Still very excited and foolish. He has lately expressed frequently a delusion that he is hypnotised at night and then visited by a female attendant. Last night he was packed for three hours with good results. He slept well, and is not so excited this morning.

Feb 18th Still very excited. He was packed again three hours, but is little im- He is on bromide & hentane. this morning. He threatened ife in Dr Yellowlees if he got ill be packed again this evening s to relieve this patient for relapses again. Last night cited, and this morning he he same condition. He again to-night.

. Is still subject to ups hough quieta for sometime. of this patient has improved Taste. He has not expressed any conversation. has been insolent or assaulting. His manners indeed have been ultra civil and gracious - in fact the Smiling suavity of his manner is the most noticeable feature about him - He says he hopes soon to be out of Gartnavel.

But tonight he came out a little. and in speaking of the dance & concert yesterday

Charles Hayter Owen.

evening, he remarked that "the singing of God Save the Queen was a curious thing," and that he could not join in it being "a man of principle". On being asked what he meant, he said he had often before refused to sing it, and that recent events in connection with the reception of the Prince of Monaco - and the countenance given to gambling at Monte Carlo by Royal and aristocratic people, were things which no man should approve of, and consequently he felt he could not join in the National Anthem: all this in a jocular manner, smiling as if pleased with himself & his principles.

Aprils. "Has not been so jocular lately. His manner and appearance are a little peculiar, but seem to be his natural condition. His power of control increases & at times his emotions nearly overcome him. He is most anxious to get away. He says he has "learnt a lesson" during the last month or two. He admits that he was very peculiar when he first came in here, and mentally unstrung, and that he had some delusions. He says he can look back on it all now - and sees "his folly" - but that he prefers not to look back, but forward.

May 16. Improvement has continued. His bodily health & condition is excellent: he is fat - feels nothing - & strong. Mentally he is sensible, intelligent - & his manners civil & reasonable. He is still a little emotional - but this is very doubt natural to him.

May 30" Discharged. Recovered.

Charles Hagen Owen

Continued from p. 190

Feb. 14th Still very excited and foolish. He has lately expressed frequently a delusion that he is hypnotised at night and then visited by a female attendant. Last night he was packed for three hours with good results. He slept well, and is not so excited this morning.

Feb 18th Still very excited. He was packed again last night for three hours, but is little improved by it. He is on bromide & hentbane.

Feb. 20th – Very excited this morning. He threatened to stick a knife in Dr Yellowlees if he got a chance. Will be packed again this evening

Feb. 23rd Packing seems to relieve this patient for the time; but he relapses again. Last night he was very excited, and this morning he remains in the same condition. He will be packed again to-night.

Mar. 12th No change. Is still subject to ups and downs, though quieter for some time.

April 14th The condition of this patient has improved since the last note. He has not expressed any delusions in conversation. nor been insolent or threatening: his manners indeed have been ultra civil and gracious – in fact the smiling suavity of his manner is the most noticeable feature about him. He says he hopes soon to be out of Gartnavel.

But tonight he came out a little. and in speaking of the dance & concert yesterday

Charles Hayter Owen.

evening, he remarked that "the singing of God Save the Queen was a curious thing," and that he could not join in it being "a man of principle". On being asked what he meant, he said he had often before refused to sing it, and that recent events in connection with the reception of the Prince of Monaco - and the countenance given to gambling at Monte Carlo by Royal and aristocratic people, were things which no man should approve of, and consequently he felt he could not join in the National Anthem: all this in a jocular manner, smiling as if pleased with himself & his principles.

April 29th. Has not been so jocular lately. His manners and appearance are a little peculiar, but seem to be his natural condition. His power of control increases & at times his emotions nearly overcome him. He is most anxious to get away. He says he has "learnt a lesson" during the last month or two. He admits that he was very peculiar when he first came in here, and mentally unsound, and that he had some delusions. He says he can look back on it all now - and sees "his folly". but that he prefers not to look back, but forward.

May 16th. Improvement has continued. His bodily health & condition is excellent: he is fat - pink looking - & strong. Mentally he is sensible. intelligent - & in manners cool & reasonable. He is still a little emotional - but this is very likely natural to him.

May 30th Discharged. Recovered.

William Burgess

Continued from pp. 100, 69, 40, 34

Feb. 13th — Patient took off his dressing twice last night; but notwithstanding the burn looks fairly well. There is a considerable extent of raw surface which might become very ugly if neglected or interfered with. Patient shows a complete callousness to sensation when being dressed.

Feb. 16th — The night before last the wound took an ugly turn, and ~~is~~ shows now a large superficial slough with an angry red margin. It is poulticed with linseed.

Feb. 18th — Shows a slight improvement: not so angry

Feb. 23rd — Charcoal poultices are being applied, and the slough is now separating very nicely.

Feb. 25th — Last night patient was most maniacal about 12 o'clock. He tore at his bandages, and endeavoured to get out of bed, swearing at the top of his voice. His night draught of 20 grains of chloral and 30 of bromide of potash had no effect. It was administered at 12. At 3 a.m. 10 grains of chloral and 20 of bromide were given & he slept till 4 a.m. He then was wakeful & noisy again. He is sleeping in the forenoon.

March 2nd — The slough is now away, and the ulcer is granulating over looking well.

March 12th — The ulcer is now covered with epithelium except a piece about 4 in. long.

March 18th — Still healing well. Patient has lost flesh a little since his confinement to bed.

William Burgess

April 24th At the site of the burn there is a most peculiar cicatrix - All the ulcer is covered with epithelium, except in three small patches - but tho' the growth of epithelium has been great, its quality is thin, & it tends readily to peel off, as it has done in the upper part of the sore - leaving below an unhealthy raw surface. At the lower part & edges of the burn this epithelium is gradually increasing in depth and amount & is assuming the appearance of a fairly firm cicatrix - but throughout the great area of the burn there is no contraction or firm growth in the deep layers of the true skin & the epithelium is exceedingly thin, & thro' it the vascular layers is easily visible and several tortuous and dilated superficial veins. The Dixie Vaselene is being applied just now.

He has been very restless & sleepless lately. Very frequently he keeps calling out, & shouting rather, in a high pitched voice - a sort of shrill cry of distress - while at other times a repeated groaning and grunting is kept up. He pretty often wets the bed - & there is a tendency to paresis of the bladder.

His eyes are mostly half closed - face is expressionless, flabby & pale.

26th Bowels very costive lately & large doses of Mg sulphate have not succeeded - Glycerine enema given & acted fairly. Very noisy & violent - swearing & shouting in a monotonous kind of roar -

To page 331.

William Brown.

Cont. from p. 218.

Jan. 30th Patient is not improving either in mental or bodily condition. In the former sense he is much as at last note, noisy incoherent & sleeps very irregularly & only after hypnotics: he is more hearing subcutaneous & this with more benefit than after the Potassium bromide. He still gives a great deal of trouble with his food. His bowels are very erratic & his pulse are more 94
inflamed & bleed whenever he goes to stool. The Iodide course has now been stopped as he was not reacting well to it & it has a prejudicial effect on his appetite.

Feb. 6th Patient's tongue is very foul & covered with a yellow fur. He is to have a course of Rhubarb & Soda in 5 grain doses. Mentally he is much as at last note. He seems to be partly aphasic as well as having incoordination of his lingual muscles. His speech is still of the explosive character previously noted. 20

13th The course of Rhubarb has to a certain extent cleared his tongue but it is still very dirty & irritable. His stomach is in a similar condition & fails to retain even milk & eggs. He is today consequently reduced to milk & soda water. His pulse to-day is very weak & this in spite of whisky 23

given regularly day & night. His eyes today have a less restless appearance & patient looks very worn out. His pulse have now improved much & have now shrunk up to a great extent, under full opium treatment.
He is still noisy restless & quite incoherent in his conversation. He saw his wife a few days ago & recognised her. He was very abusive & used most foul language towards her.

9 March. Patient is now improved in his general health & taking his food fairly well. Mentally he is still quite incoherent & with numerous delusions of identity. He is still restless & noisy. Perspiration the past few days this has been less marked. His speech is still of the same character.

20th " Patient has again relapsed & becoming very excited noisy & restless. He is with great difficulty kept in his bed. His food is given to him by the spoon & he seems to have great difficulty in swallowing the muscles of deglutition not acting in a co-ordinated fashion. He is frequently wet & dirty. His pulse is weak & thready.

23rd " Patient's weakness is increasing but the excitement is still great. He makes frequent darts from his bed & rushes up the ward evidently under the influence of delusions.

to p. 300.

Charles Gibson

Cont. from p. 198.

Feb. 13th Cont.	patient remained in a dull & stupid condition being with difficulty roused. His speech was quite unintelligible. Now he is somewhat brighter but still very stupid & his speech very unintelligible in character.
29th	Patient has picked up again a little & is now back to No. 4. There is not much real change for the better. His speech is now a little better but still very faulty.
7 March	Patient was today taken home by his wife & is discharged Relieved.

John Hall

cont. from Vol. III p 452

1894
Jan. 2nd — Quiet as a rule unless when he is spoken to which he dislikes and gets restive, noisy and abusive. B H & C. good.

Dumbarton 29th 1895 — Unchanged. B H & C. continue good.

Dec. 20 — Is very abusive and threatening at times. His language being remarkably expressive & forcible but he never strikes his rage passing off in words unless further provocation is given. Very little rouses him as he likes to be left alone. B H + C are good.

1896. February. 28th.

This day removed to Kennyfaulds and discharged.

Relieved

James McArthur,

Brought forward from Vol. III, p. 542.

Feb. 13th
March 12th No change. Patient is remarkably well, and very sharp in conversation, and were it not for his ~~absolute~~ partial loss of memory would seem most intelligent to ordinary observers. His face has, however, acquired the expressionless G.P. appearance to a considerable degree.

May 6th But few symptoms present, in this case, of a typical nature. There is slight lingual & buccal tremor - but mentally the usual delusions are not prominent - & never expressed spontaneously - nor indeed to the writer at all, as yet. The knee reflexes seem to be absent entirely. Pupils unequal. The ~~left~~ right being much smaller than the ~~right~~ left - & also irregular in outline - probably from old iritis.
The 'arcus senilis' is well marked in both eyes.

May 28th. Last night this patient went into the bathroom & was then seen to fall - unconscious, to the floor. His head was a little bruised about the temples. He was not convulsed - & was seen by the writer as he was regaining his senses - He had been unconscious about two minutes altogether. The eyes were deviated conjugately to the right side - He was soon able to rise - His face & lips were very pale & he was shaky on his legs - & a distinct paresis of the left leg & arm was noticeable. The grasp of his left hand was found to be very weak indeed.
He was put to bed - & this morning Black drench ~~&~~ was given. His pulse soon after the attack was found to be beating regularly but very fast - 124 per minute.

James Mc Arthur

This high rate of pulse was continued up to this morning - but by evening it was found to be slower - His heart has also nearly resumed its power. But all today he has been a good deal confused - & restless - His face has been flushed & then warm.
His heart was examined - but nothing abnormal was detected.

29th In the outer canthus of the right eye - on watching him closely in & his nose - a sub conjunctival haemorrhage is seen to have occurred - about the size of a farthing.
He has now quite recovered from the attack - was up again in his 4. today.

June 1st Just in his usual health just now & at his usual occupations. Chiefly reading the papers at the present. The attendants have numerous instances to relate of his very defective memory - He will resist going to bed & get quite angry - but if left alone & then asked again in about five minutes to go to bed, he does so quite pleasantly, apparently forgetting entirely his refusal of a few moments ago.

July 4th No change to record - He does not noticeably deteriorate - & certainly he does not improve.

Aug. 12th If it be stated that the lingual tremor & facial tremor twitchings in this patient are somewhat more marked, a sufficient note of the slight change in his condition is recorded.

Aug. 17th This evening the patient had a severe convulsive seizure - The convulsions were violent & lasted an hour about twenty minutes - His face became excessively cyanotic - There was no affection of one side in particular. No paralysis remained after the attack - & a few hours later he was in his usual condition.

J. 491.

Alexander Macone

Continued from p. 185

Feb. 18th 20

manner remains very
vagant. He does not start
riously as a rule, but when
he does not stop readily.
full of references to
ds to run into obscenities
d talkative. He writes
rkable letters to various
exalted style.
delusions still as the letter
ed, shows- His delusions
t to his personal property.
numerous letters- all of a
- freely expressing his
y which are that he is
ngest on earth". that he is possessed of great
properties & much wealth - and is a person of
great political importance. He addresses his
letters chiefly to Lord Salisbury & also to the
Queen & Dr. Aveling & Jameson
He is restless at night sometimes & during the day
walks up & down the galleries a great deal &
talks to himself & disturbs being stopped or
questioned in any way.

27th The writer having told him that he was an impostor & should
not annoy any longer with his letters Dr. A. Jameson &
Lord Salisbury - the patient as was anticipated has
written some very insane letters - in which various
delusions are expressed regarding the writer (Dr. A.).
Two of these letters have been annexed.

Alexander Macmillan
Continued

July 4th. His nights are very bad just now - sleepless & talkative. & he is as full of delusions of the grandest type, as an egg of meat.

22nd. Sleeping much better - He had Trional for some nights & it suited well & he now no longer requires it. He worked and some conversation with him today - & he expressed delusions too numerous to mention - for instance, that he, Mr Macmillan had not spoken for two years and that the voice heard so often (he is a great talker) was not his, but Christ speaking thro' his body - Also that he had frequent communications with Michael the Archangel, who appeared to him also & spoke to him aloud - & with Apollyon & Abadon, the Spirits of evil - He has hallucinations of hearing & also of sight & sees numerous heavenly visions - The voices speak into both ears. & the visions appear to him whether his eyes are open or shut. Voices too, he says arise in all parts of his body & limbs & travel up to his brain by his stomach &c. He writes letters every day - of most insane character. One of these is answered today.

Aug. 28th. For the last week this patient has not been sleeping well - restless & talkative. A further trial of some hypnotic will be made.

October 31. Continues to write many letters & in that & other ways to give expression to his many delusions. For some time back he has been quieter & he has been sleeping fairly well. Hannig ceased no draught. On the whole his condition is practically unchanged.

Decr 3rd. No change & is port Delusional as ever. B. of TC. are good

Jops. 5/18.

Alexander Macone

Continued from p. 185

Feb. 17th This patients manner remains very silly and extravagant. He does not start a conversation himself as a rule, but when he is addressed he does not stop readily. His language is full of references to Christ, and he tends to run into obscenities

Mar. 18th Still restless and talkative. He writes a number of remarkable letters to various people in a very exalted style.

April 30th. Has numerous delusions still as the letter of April 1891. attached shows - His delusions concern his body & health & his personal property.

June 1st Has been lately writing numerous letters - all of a very characteristic kind & freely expressing his delusions - the chief ones of which are that he is "God's agent on earth". that he is possessed of great properties & much wealth - and is a person of great political importance. He addresses his letters chiefly to Lord Salisbury & also to the Queen & Mr Andy Jamieson

He is restless at nights sometimes & during the day walks up & down the gallery a great deal & talks to himself & disturbs being stopped or questioned in any way.

27th The writer having told him that he was an impostor & should not annoy any longer with his letters Mr A. Jamieson & Lord Salisbury - the patient as was anticipated has written some very insane letters - in which various delusions are expressed regarding the writer (Dr A.). Two of these letters have been annexed.

Alexander Macmillan
continued

July 4th. His nights are very bad just now - sleepless & talkative. & he is as full of delusions of the grandest type, as an egg of meat.

22nd. Sleeping much better - He had Trional for some nights & it suited well & he now no longer requires it. He writes and some conversation with him today - & he expressed delusions too numerous to mention - for instance, that he, Mr Macmillan had not spoken for two years and that the voice heard so often (he is a great talker) was not his, but Christ's speaking thro' his body - Also that he had frequent communications with Michael the Archangel, who appeared to him also & spoke to him daily - & with Apollyon & Abadon, the Spirits of evil - He has hallucinations of hearing & also of sight & sees numerous heavenly visions - The voices speak into both ears. & the visions appear to him whether his eyes are open or shut. Voices too, he says arise in all parts of his body & limbs & travel up to his brain by his stomach &c. He writes letters every day - of most insane character. One of these is answered today.

Aug. 28th. For the last week this patient has not been sleeping well. restless & talkative. A further trial of some hypnotic will be made.

October 31. Continues to write many letters & in that & other ways to give expression to his many delusions. For some time back he has been quieter & he has been sleeping fairly well. Hearing voices no doubt. On the whole his condition is practically unchanged.

Dec 3rd no change & is poor Delusional as ever. B. of TC. are good

Jops. 5/18.

George Jameson Swann

Continued from p. 238.

Feb. 16th — For the last few days there was a marked improvement. Mr Swann confessed that he had been troubled by delusions, and said he felt an improvement. To-day he is not quite so well again. He complained that his food was tampered with, and that the other patients at table were speaking about him. At the same time, while complaining of disappointment himself, he says he is not dispirited as he is hopeful that it will pass away.

Feb. 17th — Patient says he feels better this morning, and feels calmer. He had a good night and looks more settled.

Feb. 18th — Patient complains that is troubled with some of his notions again this morning, and doesn't feel quite so well. He had not a very good night.

Feb. 20th — Distinctly improved this morning: quieter and more sensible. There is still, however, considerable restlessness; he seldom sits down, but walks up and down the gallery.

Feb. 23rd — Yesterday Mr Swann showed a remarkable change for the better. He was quiet, pleasant, and entirely sensible; anxious to get away, yet at the same time willing to be guided. To-day he cannot be said to be any worse; but he didn't sleep so well last night, and he is a little irritable this morning.

He complains of his surroundings, and is anxious to get away. His complaints are natural enough to a man of his disposition, but there is still a kind of restless uneasiness, an inclination to brood, and he will not read or play billiards or occupy himself.

Feb. 25th Has now been provided with a private room, and is more reconciled.

Mar. 2nd Still keeping well. He is rather low-spirited & morose, and does not incline to converse. He cannot be said to be quite well yet.

Mar. 12th Since last entry patient to all intents and purposes has been remarkably well. He has been put on parole, but never has gone very far from the door. This morning however, he told his sister that there were no doctors or attendants here at all, but that all are detectives, and he is to be taken away at one o'clock, which is very discouraging. He has suffered from an acute non-suppurative tympanitis for some days, which is now almost well.

Mar. 16th For the last few days patient has been as bad as ever. He hears voices, the patients and others rail at and talk about him. He is hypnotised at night etc. He is not improving in condition, and is not so careful of his appearance as he was.

Continued p. 295

Robert Clark, 41
Re-Admitted 13th Feb. 1891
Voluntary to West House

1891
Jan.

Patient came back as a voluntary patient to day, and signed an agreement to stay 6 months. He was only discharged on 19th December last
See page 147.

June

Patient was away little more than a week when information was received that he had begun to drink as hard as ever. Since that time he has been drinking steadily and very heavily.
On Admission - he was in a very shaky condition and seemingly on the verge of an attack of delirium tremens. He could not keep his hand steady while speaking, and his lips were very tremulous. His tongue was foul and tremulous. He had a black eye and various bruises on his face.

Aug

Feb. 16th A small purge was administered with excellent effect, and patient is now getting much more composed and easy. The tremor is largely improved.

Sept

Feb. 18th Mr Clark is much improved, and has returned to his former employment in the store.

Dec

Mar. 18th Still working contentedly in the store.

May 5th This patient has for some weeks been in good bodily health and his looking somewhat characterless & 'soft' - his control and mental power seem fair.
Discharged - Recovered. May 5th 1891.

James Forrest Gillespie

cont. from Vol III p 360

1894.

jan. 2nd He is daily employed outside but what he does is done in a slip shod fashion. He is very dull and lazy and seems incapable of being roused. His health is pretty good.

june 29th A few weeks ago he had a slight attack of pneumonia at the base of the right lung. It began with a rigor and a temperature of 105°. After the initial symptoms had subsided the constitutional disturbance was slight. The signs were dulness and fine crepitation. He now seems well but some suspicious lung signs still showed themselves at the last physical examination. He is still kept in the Infirmary and is not sent out to work.

August 1st There is well marked, medium sized crepitation at base of rt. lung. It is probable that tubercular disease has supervened on the subsidence of the pneumonia. His circulation is very languid. He is not taking his food well and often has to be spoon-fed.

September 29th Having been left some money he is now a Private Patient. There is not much change in his condition; the symptoms of the tubercular disease are not very prominent.

December 24th The left side of the chest is a good deal flattened but the percussion note is more resonant on this side than on the right. Auscultation does not reveal much: the breath sounds can hardly be heard. He is looking fairly well and is not losing flesh.

To Vol VI p 395.

James Cooper Rowe
Admitted 12th February 1891.
To East House.

Patient is 35 years of age, single, a Churchwoman and a Presbyterian.
She was brought from 17 Clifford St. Glasgow and admitted to the East House at the instance of his father.
She has been four times in this Asylum before being last dismissed in September 1890 (See Vol II pages 449.
The duration of the present attack is said to be "uncertain", and the subject cause is put down as "previous attacks". The patient is neither suicidal nor homicidal but is dangerous to others and destructive.
There is evidence of N. P. his sister and a brother having been insane.
Medical Certificates say his manner is preoccupied & shows lack of intelligence. She has heard whispers during the night and has seen God. She addresses answers to questions to "Your Royal Highness" and "My Lord" and to simple questions repeatedly replies he "can't remember".
On admission patient talked in an incoherent fashion & expressed delusions as noted in medical certificates. There is really no change from that noted during his previous stays in the Asylum.
She is in fair bodily health & condition.

J. C. Rowe

cont.

12th May. This man's condition does not require much note. He is partially demented with periods of improvement when his father removes him only to bring him back again at present he is dull, listless, does nothing and replies to questions in monosyllables. B. A. & C. fair

15th June. Better again & asking intelligent questions about his father & friends. Refuses however to take an interest in anything about the House and is suitable.

July 6. His father speaks of removing him soon now, he is so much better. He cannot yet be persuaded to do any work or to take any intelligent interest in anything.

July 30. Removed today by his father.
Relieved.

Readmitted Ad: 5th 1892.
Vide Vol. V p. 422.

Andrew B. Pairman,

Continued from p. 234.

miserable;

Feb. 23rd Contin. — still there is something not quite right about him yet. He is excited over his cheerfulness. He is afraid of losing it, and was singing this morning to keep himself from relapsing into his miserable state.

Feb. 25th — Last night only 20 grains of chloral amid were administered and patient slept well. He is still cheerful & hopeful.

Feb. 26th Only the rectified spirits required to dissolve the chloral was given last night & patient slept fairly well.

Feb. 27th 20 grains of Chloral amid given last night. result very good night.

Mar. 2nd Since last entry patient has only received rectified spirits draughts, and has slept well. He speaks cheerfully now and looks well.

Mar. 5th Draughts discontinued. Patient sleeps well and is much more cheerful. He has been put on parole of the grounds along with another patient.

Mar. 12th Has not slept so well the last three nights. He is still hopeful, however, and is very adverse to returning to the sleeping draughts.

Mar. 16th Sleeping better again. Still cheerful.

Mar. 25th Is now very well, and making arrangements to go off to the Highlands.

March 27th 1891 - Dismissed

Recovered

John Dawson.

Continued from p. 232

March 10th There is absolutely no change to note beyond the fact that patient has if anything lost flesh. He refuses to take flesh meat, and has been put on six eggs a day besides his usual meals

March 31st No improvement to note. Still refuses flesh meat and eggs are given regularly.

April 29th Loosing weight - thin, and worn looking, tho skin is still pretty fair. Tongue pretty clean. Bowels tend to be costive. Aloes & Iron Pills ordered. Has been getting Hepatite, but today Easton's Syrup was substituted. He still has fixed delusions regarding his food - and refuses meat, and sometimes soup. He believes that all questions put to him, with a view to find out his bodily and mental state, are a "mockery"; and it is difficult to get him to speak at all: His face, when being questioned, wears a look of sullen resentment.

May 27th Has gained 2lbs in the last month. There is no change in his mental state - He is depressed Sullen. reserved - suspicious - & labours under delusions of persecution.

July 1. Has lost 1 lb. since last note. He has not improved in any way, nor has he changed in any of his symptoms or in his demeanour. The previous notes hold good today.

Aug. 31st Has lost 2 lbs in last seven weeks. Otherwise he is unchanged - & will answer to any treatment - medical or moral.

John Dawson
cont^d.

Dec^r 3. a most sullen, suspicious & depressed patient. any remark addressed to him. he takes as an insult believing it to be meant as such. The writer asked him a simple question not long ago. He construed it as an insult was much offended and believes it was meant to harm him. He associates with no one, interests himself in nothing and sits silent & alone as much as he is allowed. B. & T.C. fair

1892.

Jan^y. 19. a most unsatisfactory case. Doing no good. His condition since last note has undergone little change. If anything he is more sullen & silent. B. & T.C. indifferent —

March 14. No change. When spoken to he believes that the words are meant to do him harm. Will not believe that any one is actuated by any other than hatred to him. Hrs B. & T.C. are indifferent —

July 14. Not one whit better or brighter. often refuses to speak & scowls in a very surly way. His bodily condition is fairly good. but he takes his food badly & requires much coaxing to get him to take it —.

Oct^r. 3. Unchanged in body & mind & so far as is known.

Dec^r. 16. Speaks very little & believes that the doctor only speaks to him to insult him. His bodily cond^n is poor & his mental health shows no improvement

1893.

Jan. 31. Doing no good. His bodily cond^n is fairly good, but mentally he is in a cond^n of delusional melancholia from which he shows no symptom of emergence. He seldom speaks to the Doctor and views them with great distrust

No. 534

James Lusk,

Continued from p. 228

March 10th Since last entry patient has been quiet, and has never spoken of his delusions except on one occasion. A man had been giving a sleight of hand entertainment, and Mr Lusk was excited after witnessing it. He talked in a vague way about the entertainment as something supernatural, and expressed a wish that if the man returned he might be allowed to stay away.

March 14th - Rather depressed. Speaks about his conscience troubling him. There is a suspicion of masturbation though it cannot be brought home to him.

March 31st Very little change. Is quieter in manner and apparently more resigned. Does not seem sulky.

April 30th His mental condition seems now improved. He is anxious to get home and is corresponding with his friends about it. He says he feels able to lead a quiet life at home, and that he no longer intends to indulge in foolish notions. It is doubtful however if he has quite got rid of them.

May 6th To night his brother came to take him home - according to a written agreement regarding the patient's future conduct at home and observance of home authority. The brother also told him that when he got home he would be asked to sign a document stating that he would never mention to anyone, either in his

James Lusk.
Continued

home or among his friends outside the subjects which had been the cause of his detention in Earlswood. and that he (James Lusk) believed that his opinions on those matters had been delusions. This the patient refused to sign - & so he stayed at Earlswood. In conversation shortly after with the writer, he said that he firmly held to his opinions about the railway strike, that he believed he had authority from God to arrange the hours of labour - and so on. He also said that he believed he was the man child spoken of in Revelations - and further, that it was not due alone to his ideas on those matters that he was confined here, but on account of abominable acts (not further specified) which he had committed. In fact he gave ample proof of his continued mental instability & delusional state.

May 14th Transferred to East House today - from which he is to go out to work in the grounds daily. He is pleased with this idea himself. tho it is doubtful if he will to any purpose.

May 29. Has been working regularly and his physical health at all events is distinctly improving. He has yielded to all the cond's his friends imposed on him should he return home but his delusions are still present tho he certainly does not give so much expression to them. At first he complained a good deal of the other patients and thought himself too good for their company but this is not so now & it is the writer's opinion that the discipline of the E. H. is proving of benefit to his mental health

Jop. 360

Yousuf Hamis

Continued from p. 226

Feb. 23rd Continued — these— manifestations in the way of letters and communications to visitors one would consider him getting better. He always tells writer that he is getting better, and has got over his delusions. He asked for a medical book to read, and has been provided with one.

March 10th — Little or no change. General health good. Mentally much the same.

March 20th — Was visited by a friend the other day who expressed himself pleased with patients mental condition. He really seems to be improving, and has taken to reading his ~~medical~~ books.

April 1st — There still seems to be some mental instability. This morning during the visit he burst into an incontrollable fit of laughter. There seemed to be no cause for it, while if there were it must have been so slight that it should have been more easily controlled.

April 30th — Till yesterday, this patient, so far as he has been under the writers observation, has been quiet, orderly and industrious, his time being much taken up in preparing for his final examination. He has evinced considerable interest in his work, has asked questions about it, and seemed absorbed in it. Has taken his food well, and regular exercise, and occasioned no trouble to any one.
But yesterday he ceased to work— and declared

Joseph Harris.

Apr: 30th. that he would do no more. He wrote rather a forcible emotional note to the Marquis of Bute. To day in conversation he repeatedly said that he would not open a book till he found out why he had been sent here. He stated that he was perfectly sane, and that there never had existed any reason for his being brought here. He was sure that he had been "entrapped" here for the purpose of making him read. and he refused to be compelled to work in that way. He also said that he was surrounded by devils here, but changed the subject on being asked to explain what he meant to convey by that. His conversation was perfectly coherent, and his statements rational, tho' most obstinately put forward. His manner was quiet - and rather depressed. He appeared (except for his allusion to devils) to be sane. but in a mood of sullenness and childish obstinacy.
Tonight he is sitting idle on a sofa, with a depressed appearance. He has been playing the piano the "Dead March"

May 9th He is now reading medical books again. is more cheerful & social in manner.

20. His name has been entered for the final examination & he is preparing for it steadily. & is behaving in a quiet orderly rational manner - & seems able to concentrate his attention on his purpose.

June 1st Keeping very well in every way - Tomorrow he is to get in to the infirmary to prepare himself better for his clinical examinations.

July 25th Has passed his examinations.

Sept 12th Discharged. Recovered

Wm Hamilton

adm. 29th July 1885

Cont. from Vol. III p. 10

1891
3 March. The fits still continue. Patient of late has not been so querulous but very irritable. In very indifferent health.

July 6. Nothing needs to be noted in this patient's case except the continuance of the fits and along with them the instability & delusional condition

Nov. 6th. Just the same.

Dec. 23rd. A coarse looking epileptic, of low bodily & mental development - Skin much affected with Bromide. Full of delusions regarding his body - & of ideas of persecution & torture at the hands of the attendants.

April 1892 8th. B.P. very indifferent.

The fits continue as before. No change to note.

Aug. 9th. No call for a note here - Always ready to point out where his flesh has been cut or his bones broken by the attendants.

Dec. 16th. The ~~fits~~ fits continue as before. Whenever he is spoken to he complains loudly and bitterly of the ill-usage he is subjected to by the attendants. He suffers a good deal from boils on his face and neck.

1893

June 30th. In poor health. No change in number of fits nor in his delusions about the ill-usage he endures. When in the airing-court he remains always under the same tree.

Dec. 28th. His health is much about the same but he has not been troubled lately so much with boils on his neck. His delusions of persecution remain. ~~During the present year 1893 he had~~. There has been some mistake about the number of fits he has had. He has not had a fit since May 10th 1890.

To Vol. V p 340

Robert Barr

adm. 8th Oct. 1885.

Cont. from vol. III p. 19.

1891
3 March. No change to note in this case. Still adopts the same strange attitudes; he is in fairly good bodily health & condition.

July 6. Unchanged. B. H. & C. good

Dec. 25th. Conversible is mood: sometimes answers a few simple questions & remains quiet, & at other times becomes passionate when approached & flushes over the face. But he is not violent, only uncertain & excitable. He is considerably demented - but not troublesome.

1892
April 8th. Just the same. Speaks little. In ~~ordinary~~ fair health.

Aug. 9th. He has not altered in any way during the summer. He has been occupied much outside.

Dec. 23rd. Just now he is dull: at other times he gets excited when he shouts and dances. He still has delusions about being followed by detectives.

1893

June 30th. Just the same. B H & C. good.

Dec. 28th. He generally sits in the same attitude namely straight up with both hands in his pockets. There is no change to note about him.

1894

December 29th. His health continues good. His habits are unchanged and the foregoing notes describe his present mental condition.

1895

Dec. 20 Generally quiet & indifferent he sometimes gets a little excited. He is demented and is employed outside. B H & C good.

1896.

Oct. 6. When spoken to and questioned he gets excited but at other times he is quiet though with an alert look. He enjoys fair bodily health & works outside.

Cp. VIII. 425.

James Legate Reid.
adm. 23rd Aug. 1886.
Cont. from vol. III p. 40.

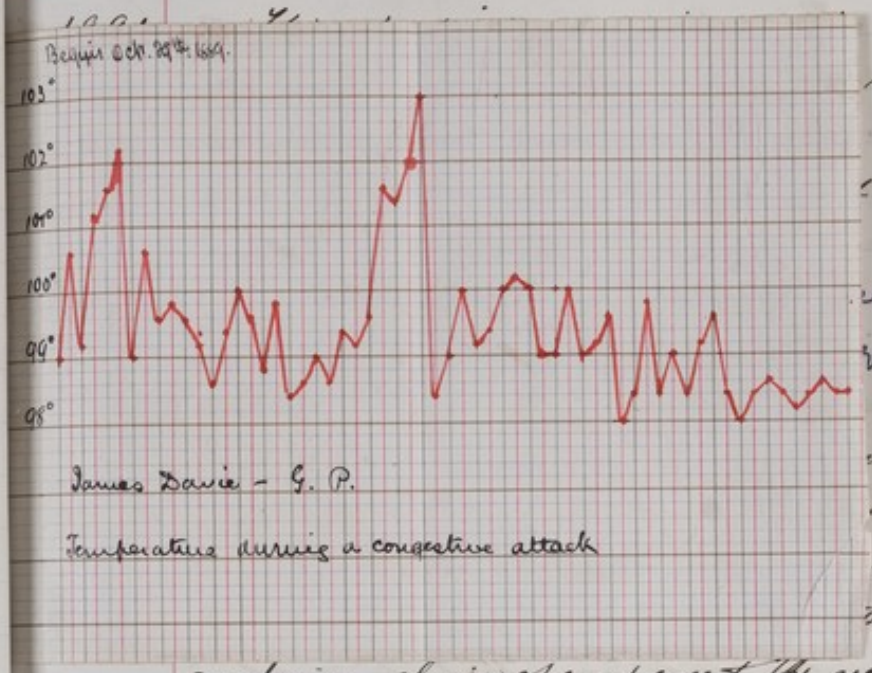
1891
3 March. This patient still attitudinises & enjoys good health.
July. 2. Practically S.S.D. He talks but rarely & then in a silly incoherent way. He is as usual continually attitudinising. B H & C good.
Nov. 6th. No change to note.
Dec. 23rd. A case which after a very acute maniacal attack some years ago has lapsed into dementia with a peculiar motor excitation of the facial muscles & limbs. There is a constant movement & change of movement in other parts - his hands being twisted this way & the other - & his face assuming all kinds of grotesque expressions - also if his limbs are placed in any position he tends to keep them so for a varying period of time - a sort of partial transitory cataleptic state -

1892
April. 8th. A further account of these peculiarities will be added. It seems hardly worth while to add details of all his contortions & grimaces - The most common is a sort of 'saluting' position, with his hands up to his forehead. He answers questions of simple nature, in a silly way - His Bodily H. & C. are pretty good.
Aug. 9th. Unchanged.
Dec. 16th. His grimaces and contortions of limbs and body remained unchanged. They are much exaggerated when taken notice of. B H & C. fair.

1893
June 30th. Whenever anybody comes near him he salutes them in a grotesque fashion and if taken further notice of continues his attitudinising. Sometimes he is more talkative than usual.

To p 568

James Davie
adm. 4 April 1887.
cont. from vol. III p. 5-9.



...smirk shortly.
...slight congestive
...He is still
...abscess has
...e from bedsores.
...qual the right being
...t vegetative
...attacted freely &
...e from sores.
...ences of slight
Convulsions - clonic spasms of eyes & the right - & the head bent towards the right shoulder & the face turned to the left (stertor - motor - right). Her head was also a good deal retracted - & very rigid about the neck. Swallowing was almost impossible.
An enema of Chloral & Bromide was given at evening & there was little or no diminution in the symptoms. Her temperature was 102.8 in the evening - & her pulse feeble. She improved after the enema - & later had a little nourishment.

Oct 3rd Convulsive state still continues - Clonic twitchings of eyes & the left side - & a good deal of rigidity about the neck. Chloral & Bromide enema again given. Evening: The convulsive seizures have hardly ever been intermitted - & the temperature has kept at about 100 - 101. Her breathing tonight is rapid & pulse very feeble. She is sinking fast.

Oct 4th 1889 Died this afternoon at 4.5 P.M.

P.M. See Journal p. 67.

Death - of General Paralysis

James Legate Reid.
adm. 23rd Aug. 1886.
Cont. from vol. III p. 40.

1891
3 March. This patient still stands in grips
July. 2. [illegible]
a silly attitudinising
Nov. 6th. No change
Dec. 23rd A case of [illegible] years ago peculiar [illegible] limbs. [illegible] movement this way [illegible] of grotesque [illegible] ness of his limbs are placed in any position he tends to keep them so for a varying period of time – a sort of partial transitory cataleptic state.

1892
April. 8th A further account of these peculiarities will be added. It seems hardly worth while to add details of all his contortions & grimaces. The most common is a sort of 'saluting' position, with his hands up to his forehead. He answers questions of simple nature, in a silly way. His bodily H. & C. are pretty good.
Aug. 9th " Unchanged.
Dec. 16th His grimaces and contortions of limbs and body remained unchanged. They are much exaggerated when taken notice of. N.H. & C. fair.

1893
June 30th Whenever anybody comes near him he salutes them in a grotesque fashion and if taken further notice of continues his attitudinising. Sometimes he is more talkative than usual. To p 568

James Davie
adm. 4 April 1887.
cont. from vol. III p. 5-9.

1891 March. This patient continues to sink slowly. Of late he has had frequent slight congestive attacks but ~~now~~ very severe. He is still free of bedsores & the perineal abscess has not returned.

July. 2. Slowly sinking but happy and free from bedsores. His pupils are markedly dilated & unequal the right being most dilated.

Oct 2nd Till today he remained in the same quiet vegetative condition - all his limbs drawn up, & contracted firmly & the muscles wasted. The skin is free from sores. But today he began to have a repeated series of slight convulsions - clonic spasms of eyes & the right - & the head bent towards the right shoulder & the face turned to the left (stertor - ~~no~~ stertor - right). The head was also a good deal retracted - & very rigid about the neck. Swallowing was almost impossible.
An enema of Chloral & Bromide was given at evening & there was little or no diminution in the symptoms. The temperature was 102.8 in the evening - & his pulse feeble. He improved after the enema - & later had a little nourishment.

Oct 3rd Convulsive state still continues - clonic twitchings of eyes & the left side - & a good deal of rigidity about the neck. Chloral & Bromide enema again given. Evening: The convulsive seizures have hardly ever been intermitted - & the temperature has kept at about 100 - 101. His breathing tonight is rapid & pulse very feeble. He is sinking fast.

Oct 4th 1891 Died this afternoon at 4.5 P.M.

P.M. See Journal p. 67. Death - of General Paralysis

Thomas H. Richmond
adm. 13 Sept. 1887
Cont. from vol. III p. 71.

1891
5 March. This patient continues to have alternations of sullen irritability & good natured contentment in accordance with the absence or presence of fits which occur in same frequency as heretofore. Mr Lee of late become very weak minded. He is in robust bodily health & condition.

15 March. This morning at 4·30 patient was found dead in his bed. His head was clear of the bed & stretched over the side so that his chin rested on the chair alongside. When writer saw him a few minutes after his face was extraordinarily deep in colour nor were any other signs present to suggest asphyxiation as the cause of death.

Died

17th P. Mr. exam. showed presence of bony spicules in the pia mater over both motor regions. Also great dilatation of lateral ventricles & ulcerative process in the floor of ventricles. See Path. Journal.

*

William Coulter.
adm. 28 November 1887.
Cont. from vol. III p. 114.

1891 Still frequently noisy & very helpless.
5 March. In fair bodily health & condition.

4 April 4th day patient was sick & vomited his breakfast. He was sent to bed & some Gregory's powder given him. As this did not operate an enema was given with good result. Today his temp. is up to 100·1 & the sickness still continues. The vomit is bilious in colour & smell. Fomentations have failed to check it. His breathing is quick & there are bronchitic rales all over the lungs.

6th The sickness continues & patient was today seen by Dr. Cameron as Dr. Gallaher was suspicious of a hernia. No hernia was discovered.
Today patient's chest condition has got much worse & there are signs of double pneumonia with dullness & numerous crackling rales. Patient's pulse is very weak & stertorous. 15·0.
The urine so examined 4th day was normal save for slight urate deposit.

7th Patient's temperature fell suddenly last night but this morning has again risen. The lung condition is still further advanced & there is now profuse expectoration which patient is unable to bring away. His pulse is very weak & he is sinking

to p. 280.

William Evans.
adm. 17 March 1888.

cont. from Vol. III p 178.

1891	Patient still works in Dead House.
5 March.	He answers to the name "Gladstone" more readily than to his own. Takes a keen interest in the Track. Dances & enjoys good health. Mentally unchanged.
July 2.	This patient is still working in the W. H. he is in much the same condition mentally a weak good natured & incoherent patient. enjoying good bodily health. He takes a sort of interest in the Cricket on the evenings through in a very ineffective way.
Nov 1	No change. B.H. & C. good.
Dec. 23rd	A foolish rather excitable man. who works well & dances vigorously. Likes to be noticed & is vain. but happy withal & useful.
1892.	
March 14.	In excellent bodily health & cont. & a most constant & brilliant dancer at the Balls —
June 14.	I.S. 2.
1893.	
Decr. 16.	No change. Enjoys the dancing at the Concerts very much. Proud of his own feats & very disparaging in his remarks about the dancing of others.
1894	B. & C. excellent.
August 28	In excellent health. No change.
~~1894~~.	
July 16th	There is no change in his cond^{n}. He is an elegant dancer & proud of his accomplishments in that line. His bodily cond^{n} is very good & he is much demanded.

To Vol V p 556

Robert Mc Auley.
adm. 27th Nov. 1888.

Cont. from Vol. III p. 308.

1891
6 March. There is no change in this patients' mental condition. He has, during long strings of completely incoherent phrases which he repeats over over again in regular sequence. To start him all that is necessary is to give him the "Hypnotic" for any special string of phrases. The action seems now to be perfectly automatic. He is in good bodily health.

July. 3. This patient is in much the same condition mentally. B.H. is poor. If spoken to he ‡ is very restless and anxious to get away to a corner if possible. He still makes use of his rhyming incoherent phrases, the catch words of the two most in use being 'one' + 'Tony'.

Nov. 2nd Just the same.

Dec. 2nd He No. 9 now - is indifferent entirely to all his surroundings. He is an 'automatic machine' for one or two rhymes + phrases. He works as regularly when the spring is touched as any of the patent articles in railway stations.

1892
April. 8th Just the same. He No. 9 now - is indifferent to where he is. Restless, + muttering to himself as a rule.

Aug. 6th Occasionally noisy - repeating some of her phrases. Very slowly, idle + demented.

Dec. 16th He has got more demented and though he is constantly muttering to himself it is difficult to get him to repeat any of his stock phrases even though he is given the hypnotic. His bodily health and general condition is excellent.

1893
May 31st He has just recovered from a large boil - almost a carbuncle on the back of his neck which was healed by fomentations.

To p 560

James Frew
admitted 2nd March 1891
To East Ward

Information from warrant - Patient is 29 years of age, single, and a Protestant. He was brought to this Asylum from 15 Royal Terrace, Crosshill and is detained here at the instance of his father. Patient is described in the warrant as a Commission Agent. He is said to have been more or less insane for four years. The present is his first attack of insanity, there being no cause known.

Patient is not subject to epilepsy, but is at times dangerous to others, and is distinctly suicidal, he having taken laudanum with the avowed object of ending his days, and having threatened to cut his throat.

Any mode of patient's father was insane.

Medical certificates bear:- I "Patient states that he is the object of a conspiracy on the part of the police, and that he took laudanum yesterday in order to kill himself, so that he might escape a worse fate. He is incoherent & rattles F. F." II "Mr. Frew states he is constantly watched by the police and the father of a certain girl; that they are trying to kill him by means of electric machines F. F."

Condition on admission - Patient is a well-nourished man but appears to be rather weak-minded. He is slow in answering

questions and appears to be somewhat apathetic.
She has quite a number of delusions, one being regarding a young lady to whom he had been paying attentions, these attentions being — according to patient — misunderstood & misrepresented by the fair one's father. This mean the patient believes is in league with the police & acting to bring about patient's ruin.

3rd March. Patient only slept 2 or 3 hours during the night but was quiet throughout the night. She has no appetite and seems to suffer from flatulence.

4th March. Since last note patient has had several attacks of sickness & vomiting with abdominal pain. She is now being fomented for this. Still no appetite

5th March. Vomiting has ceased; the fomenting was discontinued last night.

9th March. Patient continues in a dreary, depressed condition. She is with difficulty roused to conversation and his attention cannot be retained for more than a few minutes. The vomiting still continues but its frequency & severity have been greatly reduced by the exhibition of small doses of bismuth & bicarbonate of potassium. — She complains of no headache nor pain in any part of her body. Her tongue is clean & moist.
Albumen having been found in patient's urine he was put on a diuretic mixture.

Continued at page 293

Donald Mackintosh.

adm. 15th Jan. 1889.

Cont. from vol. III p. 332.

1891	
6 March.	Patient is still very listless & difficult to engage in conversation. He has lately begun to pick his skin in various places. No improvement in his bodily condition which is very indifferent.
July 3.	This patient though listless still is easily to engage in conversation. He is weak in mind & memory but takes some interest in what is going on. He scored for the Cartwell team at a cricket match the other day & though not extra good at it he did not do badly. (wrong Mr Butters) a particularly demented patient in good bodily health.
July 6.	
Dec. 23rd.	Just the same. Very quiet & retiring.
1892	
April. 8th	Bodily health just the same. Reticent demented man. Shunning society & living a disinterested idle existence.
Aug. 9th.	Unchanged.
Dec. 16th	He seldom speaks though by perseverance he can be got to enter into conversation when he shows that he is demented. He however expresses a wish to get away. He works a little outside.
1893	
June 30th	Just the same. No change to record.
Dec. 28th	Does a little work. still remains & silent and shuns observation.
1894	
December 29th	Unchanged throughout this year. BH & C. fair. D. B.
1895	
Dec. 20	Quiet & demented he shuns observation. He does some work. BH is fairly good.

Cp Vol VI. page 577

Archibald Norman Stewart Inv. Dutch.
adm. 26 April 1889.
cont. from vol. III p. 390.

1891 7 March. This patient continues to entertain his hypochondriacal fancies. He is in fairly good health & strength this but is always unduly careful of his constitution. He writes numerous letters to his friends all on the same strain, complaining of his detention & confining his illness down to "political spite" etc. He is becoming a little weak-minded.

July. 3 This patient though listless is easy to converse with. He is weak in mind & memory but takes an interest in what is going on. He scores the other evening for the Carluavel cricket team & did it well enough with a little help. He is still as ever anxious to get away & says he would like much to go to the highlands. He is in fair health but very thin. He is suspected to be a masturbator

Nov. 2nd. Bodily health is fair just now. and he is not so inclined at present to complain & magnify trifles. He is quiet & well behaved - and tidy. His letters give the best clue to his mental state. He can hardly be regarded as insane. He regards his detention here as quite unnecessary now - and writes very despondently about it. He is still inclined to blame certain people for conspiring to ruin him & for putting him in an Asylum -

Dec. 2nd. 1892 A nervous hypochondriacal man - very self-centred & not likely ever to be of much use, it is feared.

April 8th. Just the same -

Aug. 4th Unchanged.

Dec. 16th This patient has the same unhappy look about him and is in poor health. He talks chiefly about himself and does not wish to leave.

To p 336.

Thomas M Tadyen.

adm. 5 March 1890.

Cont from vol. III p. 529.

1891

7 March. There is still a great deal of the sleepiness element in this case. He can rarely be got to give relevant answers & questions even his attention can with difficulty be retained for a few minutes. He has a shifty gaze & a suspicious look. He is in fair health & bodily condition.

May 12th Patients condition shows deterioration much more mindless and almost impossible to get a sensible remark from him. avoids the Doctor but not actively and still has considerable motor restlessness. B. H. T C. as fair

July 6. Showing no improvement. Very restless sometimes being unable for a moment to keep himself still at other times quieter and more intelligent. B.H.TC. fair

September 1st Some improvement in his thought has taken place here. Patient is brighter and better generally, talks more rationally & is rather less restless. B.H.T.C. fair

Dec 23rd Just the same. Rather pale. but he is always somewhat so.

1892

March. 22nd Has shown a good deal of irritability of late - has struck at attendants & patients. His behaviour is very mindless & unreasonable. He is looking a little thinner & paler. Examination of his chest does not reveal any definite abnormality - but he looks as if there were some organic mischief about his lungs. He cannot be examined very thoroughly.

J. 5745.

John Stevenson. (Voluntary)
adm. 5 Aug. 1890.
Cont. from p. 106

1891
7 March. Patient has made considerable progress since last note & now is wonderfully well. He is a most industrious reader & interesting talker. His letters of late have been very sensible. He has now much greater self control & frequently speaks about his sister's condition without undue emotion or excitement. His bodily health is good.

31 March. Today discharged.
Recovered.

May 8th Writer saw Stevenson to-day. He was looking very well, was calm & in good mental health. He is working on his father's farm.

I. Augustus Peden.
adm. 7 Sept. 1890.
Cont. from p. 122.

1891 7 March.	Patient is now very fat & the Cod Liver Oil has been stopped. His bodily improvement is accompanied by a similar mental change. He seems now to realise his position & the necessity for an effort on his part to secure his complete Recovery.
1 April.	Today discharged Recovered.

William Coulter
Cont. from p. 270.

8 Apl. Patient gradually sank to day & died tonight at 9.30. This evening temp. was 105°.2 & his respirations & pulse rate greatly increased.

Died.

10th At post. today death was found to be due to Pneumonia & Tuberculous Peritonitis. There was a considerable quantity of bloody effusion in the peritoneal cavity. In consequence of this information was sent to the Fiscal but he did not feel called upon to send us a Medical report & a copy of the Post. report has been sent him. The haemorrhage was not traumatic in origin & was probably coincident with the fall of temp. noted in the evening of the 6th inst.

Vomiting was the only sign of peritonitis present during patient's illness. This deeply demented condition probably obscured the pain & tenderness on pressure which were quite absent

For particulars see P.M. Journal p. 47.

Died

James Ellis Brighton
Admitted 12th March 1891.
To East House.

Information from Warrant - Patient is 16 years of age, and is an apprentice engineer. He is a Protestant, and was brought here from 163 Dorset Road St. Pancras, and admitted at the instance of his father. The present is his first attack & has lasted for three weeks. Patient is said not to be subject to epilepsy, neither is he dangerous to others, but there is a suspicion of a suicidal tendency he having threatened self-destruction.

The statement bears that there is no known N. P. but on questioning the patient's father it was ascertained that an uncle of his, (i.e. a paternal great-uncle of the boy), died insane in this asylum about twenty years ago (Dr. Boyce a G.P).

Medical Certificates state - I "Patient hears imaginary voices & sees visions of angels &c.; also thinks, he says, that he himself is Jesus Christ; gets despairing sometimes."

II "Patient sees various visions of the devil, angels, says he has risen from the dead; is sometimes very despondent, and at other times excessively cheerful and inclined to dance about."

Patient was admitted on an emergency certificate.

Condition on admission Patient is

James Gibbs Brighton
(Contd.)

a well-nourished lad and appears to be in fairly good bodily condition but with a slight tendency to plethora. Examination of chest shows lungs to be normal, but heart is decidedly irregular in action there being a well-marked intermission every fourth beat. Patient states that he has been a heavy cigarette smoker but this statement as accounting for the cardiac irregularity may well be received cum grano salis. Mentally the patient is confused and stupid answering questions in a hesitating way. When asked the cause of his illness he states it was "a girl" and further questioned says "there were several girls, and he was in love with them".

13th March Patient passed a fairly good night. He takes his food fairly well, and has had his bowels moved after a dose of black draught. His pupils are observed to be dilated, and there is a distinct but slight left internal squint, of the existence of which patient says he was aware before becoming ill.

21st March Since last note this patient has been in a very unsatisfactory state. He has been acutely delirious for the last few days and his temperature has been almost constantly above normal, rising at times to 101°.

There has been no febricular eruption to

(Continued at page 283)

James Gillies Brighton
(cont.d)

account for this, and even in his lucid intervals patient has made no complaint of pain. His pupils are widely dilated, and the left internal squint before referred to is still present. Tache cerebrale is well-marked. This morning the temperature is down to normal and mental condition improved, patient answering questions in an intelligent way.

Since admission patient's bowels have tended to be constipated and have been moved twice by enemata and once by castor oil.

27th March. Patient's temperatures are now improved but still tend to rise at night but not in any marked way. Mentally he is much improved speaking in a rational & coherent fashion. He is now free from bodily restlessness which before was so marked. He is sleeping fairly well without any hypnotic. He seems to be free from delusions but his mental Condition & is still very unstable.

6 April. Patient Rept wonderfully well until today but has now relapsed. The exciting Cause was a visit from his parents two days ago. He is again very noisy shouting in an incoherent fashion & displaying great motor restlessness beating the walls & pillows with his arms in a most reckless fashion.

He is taking plenty of nourishment however.

13 April. Patient has continued in a state of sub-acute mania since last note being very noisy restless & excited. He has obtained some sleep each night by means of Bromide & Chloral in doses of 30 & 15 grains. Today a boil has appeared on his right cheek & it is hoped this may prove critical.

June 16. This boy has been under the writers observation for nearly 2 months but a satisfactory diagnosis of his case has not been arrived at. As an additional element in his case it has to be mentioned that about the 16th May he had a distinct epileptic fit. On questioning him he denies it at one moment & the next instant he says that he often had fainting turns in the street. His friends however distinctly state that not to be the case and very probably this is the first fit he has had. His mental condition is one of great instability. Some days he is fairly settled answers questions and is not very restless at other times he will not sit still a moment, is continually touching with his fingers other patients and his conversation is incoherent in the extreme. He is not violent but interferes with other patients in an aimless way. His expression is vacant & his attitude purposeless. Sleeps very indifferently but with a fair appetite. After the fit noted a large blister was applied to the nape of his neck but with no apparent benefit. It was intended to keep it discharging but at the same time a boil on his lip was in active progress & it was thought that was sufficient drain at a time

Jos. 403

Jose Carsi, 23

Admitted 13th March 89

To West House

Information from Warrant - Patient is a Spaniard, single, 23 years of age, a clerk and a Roman Catholic. Previous to admission he lived at 97 Dryden St. but was brought here from 19 Hope St.

He has been insane for two or three days. He is said to be suicidal and might be dangerous to others.

Medical Certificates say that he shows foolish and dangerous behaviour; is quite unable to guide or control himself or to answer questions rationally; Demands poison; denies he has any name. That he is sulky and suspicious in manner.

On Admission he was excited and violent. He speaks a little English; this little was rather incoherent. He kept his head down, and would not look up. He was put in the padded room.

14th March Slept well, and is rather better this morning. He lies on a form with his face covered; but will occasionally start up and expostulate about his environment. A smart purge was administered.

16th March Progressing favourable. Complains about being confined, and says he is not mad. He is a tall well built young fellow rather fleshy.

16th

18th

16th March- Much better to-day. He has been removed up to 4, and walks about brightly taking an interest in his surroundings. He asks still to get away, but is much more sensible.

18th March- This patients' illness seems to have been more a hysterical explosion than an ordinary maniacal attack. He is quiet and reasonable and amiable. To-morrow he will be taken home to Valencia by a friend.

Dismissed – 18th March
Recovered.

William Maclean, 34
Admitted 12th March 1891
To West House

Patient is 34 years of age, single, and resided at Newfield, Partick. This is his first attack but his mind has been getting weak for years. His first epileptic attack occurred when he was 18 years old. He has been violent for 4 or 5 days, and the supposed cause is epilepsy of long standing. He has not been treated in any institution before. He is not suicidal but is at times dangerous to others. There is no stated H. P.. Medical Certificates say that he had delusions that he was not in his own home. "Suspicious of anyone about him trying to take things away from him." That he is violent, and attempts to strike with any thing at hand - refuses to take food - is sleepless. 13th

On Admission patient was in a state of extreme maniacal excitement. He had been very excited for twelve hours, and had been dangerous to his family, having twice knocked his father down. He arrived bound with straps which were promptly removed. 14th

He recognised writer, who had previously been acquainted with him, and burst out into an incoherent story of how he had been kidnapped, stated that

he was in jail, and struggled and fought with the attendants in an aimless fashion. His breath was offensive and face pale. He was placed in a padded room and clothed in canvas. He said he would take some soup, but it had to be forced between his teeth. His speech now lost all coherence and he repeated continually a few meaningless words. Sometimes he stood on tip toe in a corner of his room at others he rolled about on the floor chattering without intermission. Occasionally a cup of beef tea was administered. He resisted feebly, but never stopped talking. He would not swallow voluntarily, but the act of articulation favoured the act of deglutition. Paraldehyde ℥ij was administered at 12 p.m.. He was then considerably exhausted.

13th March - Patient slept none. He is much exhausted this morning; his voice is gone, but he still endeavours to talk.
In the course of the afternoon bedclothes were given him, and he lay down, but did not sleep. About seven o'clock he fell asleep.

14th March - Slept well last night and took what was offered him in the way of beef tea and breakfast. A smart purge was administered & acted well. His voice is gone and he is much exhausted. He is, however quiet & docile & the excitement is quite gone.

William Maclean—
(Continued)

15th March— Patient is now removed to a better part of the house. He is quiet and contented. He enquired for his family, but made no request to get away. His only complaint was in regard to his loss of voice. He seemed satisfied with the cause that was explained to him: his incessant talking.

16th March. Still quiet and well. Voice rather improved.

18th March Voice much better. Has settled down to the ways of the house and seems to be quite contented.

22nd March. Had a fit. Otherwise keeping very well.

28th March Had a bad fit yesterday, and is very irritable to-day. His jaw is a good deal swollen probably through injury during the fit.

31st March. Is quieter and more amiable again. Jaw better. To his satisfaction he has been permitted two cigarettes after each meal.

April 4th Still keeping quiet and composed. He had a fit two days ago, but was not irritable after it.

April 24th This morning at 8. am. he had a fit, described as a severe general convulsion. He had no aura. Yesterday it was noticed that there was a slight irritability during conversation. This morning, about two hours after the fit—

he seemed in his usual. Had no headache, nor stupor, and was not at all irritable. But all day he was slightly elevated in manner & more restless than usual.

May 1st. No recurrence of fit. In conversation it is noted that his lips are rather tremulous and his speech also. It resembles a condition of nervousness, as in other people, but in him it is constant.

May 9th. Had a fit today in morning. During the day he has felt a little "weak in the legs". But has not otherwise showed any symptoms. He is troubled at present with some costiveness & aching about the anus, & slight bleeding. A Hazeline wash for the parts & 3ij doses of Liq. Magnesiæ et Cascar. Sagradæ prescribed.

16th Continues well just now & his bodily health is excellent. He is brown & healthy looking - never complains. & fond of games & out door exercise.

21st. Had fit last night & for a day or two before had uneasiness & pain about his stomach.

25 Last night again he had uneasiness about his stomach and vomited. & was sleepless. Today he was again put on some Magnesia & Cascara (stopped after a week last time) & a powder of Bismuth. Soda, & Dover at bedtime. The gastric symptoms are probably of the nature of a visceral aura - but are undoubtedly accompanied by a slightly disordered state of the stomach.

27th. Today he went on pass to the coast - Blackmore his attendant going with him. The chronicle is to be continued.

June 13th Discharged today. Relieved.

Henry McDiarmid
Admitted 15th March 1891
To East House.

Information from Warrant. Patient is a married man 30 years of age; a Protestant and by occupation a House factor. He was removed here from 197 Ashton Drive, Dennistoun. The present is his first attack, and has lasted a few days. The cause is unknown. Patient is not subject to epilepsy; neither is he suicidal nor dangerous to others. There is no known N.P. Detained at instance of his brother-in-law.

Medical certificates bear:- I "He is somewhat restless and excitable; talks incoherently; labours under the influence of delusions such as that certain persons have conspired against him, & that prisoners' furnes have been put into his house & office by certain unknown persons." 16.3 21.3 29.3

II "He complained first of headaches caused by his hat. Imagines when he goes out to walk that he is followed by the sun. Is very excitable at times. Suffers from delusions that certain persons are trying to poison him." 9.4

Condition on admission. His bodily health is fair. He is somewhat pale but nothing abnormal is detected on making a physical examination of the chest. Urine is normal.

Mentally the patient has well-marked delusions as recorded in Medical certificates, specially those

He complains of attempts by neighbours to poison him by means of noxious gases blown into his office. He protests against the idea that there can be any mistake about this saying he not only smells the fumes when in his office but at times can see them. He thinks he can smell the fumes here in the Asylum but is not quite so sure of this.

16th March. Patient slept fairly well and took his breakfast well this morning.

21st March. Yesterday and this day patient has been considerably excited, and restless. He accuses the attendants of having taken his watch, money &c & appropriated these to his own use. He affirms that he is being told lies about his belongings, and is not receiving enough attention.

29 March. Patient has now settled down considerably. He talks in a coherent fashion but gives me the impression that he is concealing some delusion. He says that the smells no longer trouble him at all. He is sleeping well & gaining in bodily condition tho' troubled occasionally with headaches.

9 April. Patient has been much brighter of late & taking an interest in the life of the home. He acknowledges however that he does not feel quite himself though better than on admission. He shows a certain amount of facility in his conversation & his face has a great lack of expression though free from tremor.

To p. 341.

John Frew
(Continued from page 274)

11th March. Since last note this patient's condition has distinctly improved, the vomiting having ceased and the mental state not being quite so foggy. Albumen much less in quantity.

16th March. The improvement noted above still more marked. Patient now gets a little tea & toast in addition to the milk & porridge he has been having up till now. He answers questions readily now, & does not now speak with his former assurance of his delusions. In fact he now admits that these may have been delusions.

29 March. Patient still improves in bodily condition his urine being now free from albumen. He is taking ordinary diet now & there has been no return of sickness. Mentally, he is less obtrusive with his delusions & is anxious to try & prove that he Came to believe in them. He speaks in an uncertain manner & frequently repeats the same words & phrases in a weak minded fashion: this is also noticeable in his letters.

13 April. Within the past few day patient has become sullen & disinclined for Conversation. He is solitary in his habits & answers questions in a repellent fashion. He seems to be suspicious without cause. A recent exam. of his urine failed to show any abnormality.

John Frew.

cont!

May 12th. Harping otee a good deal on the misunderstanding with the father of a lady-friend. Writes explanations without number on any scrap of paper he can find asserting that his intentions were good and that he meant well. Complains that he is watched by her friends who peer at him thro the Windows and speak to him in every passing noise. Inclined to be emotional, his tone of voice indicating the approach of tears. Habits not above reproach, spits all about the day room and his promises, not to do so are not followed by much improvement. In the dining hall he is obstinate, requires persuasion; and in his general behaviour he shows little respect for the ordinary conventionalities of life. He has not as yet been sent out to the garden on account of his suicidal tendencies and loafs about the Gallery and Grounds —

May 29. Practically unchanged. Perhaps a trifle smarter and not so slovenly in his habits but doubtful improvement Bodily health is good and his appetite fair.

June 12. At dinner yesterday patient managed to secrete one of the knives. In the afternoon when in the airing Court he was observed sharpening something in a distant corner and on the approach of the attendant he rushed at him X with the knife which he had been sharpening on the wall he inflicted a slight wound on the attendant's cheek. The knife was taken from him without much difficulty but he afterwards threatened saying that tho he failed this time he would succeed next time in doing for them. He is sent down to No 6. Gallery and steps again under observation

To f. 391

George Jameson Swann,
Continued from pp. 252, 238.

Mar. 18th - A trifle improved to-day. Still depressed and troubled about his affairs.

Mar. 25th Has been very miserable during the last week. He still has delusions about his papers having been tampered with, and moans and wrings his hands over the prospect he creates of ruin for himself and his friends.

Mar. 31st A little more composed again. Still has his delusions firmly fixed.

April 4th Still keeping a little better. He played a game at billiards the other evening by his own desire. This is the first interest he has shewn in any amusement.

April 24th Has not lately been giving active expression to delusions about business or other matters - but no leading questions or suggestions have been put to him. He is anxious to get away, and says he is quite able to go, and he frets greatly at his being "immured" here. His manner is taciturn, and reserved, but civil. His appearance is usually dejected, as if his mind were ill at ease - and he appears to be constantly brooding over something.

May 1st Last night he slept badly - indeed not at all - was very restless this morning. He was pacing up and down his room in a restless way - and complained of not sleeping last night, and of noises which disturbed him (there was no noise capable of disturbing him) - He then said that

George Jameson Swann.
Cont.

he was under mesmeric influence here - and in the power of other people - and that his will was not his own. He complained of a strange feeling in his head - such as he had never felt before. He refused to take part in billiards & other amusements - & was more depressed looking & more restless than usual. This evening his condition was worse. He was excited & melancholic - His whole appearance was one of 'abandon' & misery - His hair was ruffled - his tie off & his shirt loose at the neck - He paced continually up and down the room. He said there was no hope for him, till the day of resurrection, and then for a moment bowed his head & wept - with all appearance of great mental pain - He refused to take a tablet prepared for him any sleeping draught - stating that to procure sleep by draughts was breaking the divine law of God - He said that God gave sleep - and that God had taken away his sleep and that it would be wrong to procure immature sleep -

May. 5th Yesterday and today he has continued in the same excited melancholic state. He now refuses food and has only been got by persuasion to take a little nourishment occasionally - He states that his food is not food at all - that his body is put to some evil purpose at night - that his brain is all dried up - and he now says that he will eat no more - Refused his tea and M.I.S of Peptonite ordered him.

Cp. pg 337

Hugh McCormick

Continued from p. 208

Mar. 18th — Patient yesterday requested to be allowed to go home. On being questioned as to whether he had got over his notions. He said, that plenty of decent people have notions, and rather tried to put the question aside.

April 1st — During a conversation with Dr Yellowlees patient expressed some inexplicable delusions. He could not explain them himself, and he could not explain why he held them; but he knew he felt them.

April 30th — This patient seems to be improving. Mentally, in conversation, he was coherent, frank, and expressed no delusions. Physically his condition is fair, but he is loosing weight rather rapidly. and to Mr Cowper he recently expressed numerous delusions. He complains of a pricking hot sensation over his face - sometimes over his body - His bowels are in good order. & he takes his food pretty well.

May. 6th — To night he is rather depressed & talks about his family & his wife in a depressed way. He says he feels them "pressing on him". This phrase seemed to be the only approach to a delusive state of mind, as otherwise he talked sensibly though despondingly.

May. 27. — He has lost 6 lbs. in weight since the 28th of April. Nothing can be made out to account for this. He is anxious to get home - and says he is quite able to be at home. Lately he has not betrayed any peculiarities.

Hugh McCormick.

July 2. Since last note (May 27) - he has gained 4 lbs in weight - & his mental condition seems to have gained in stability also.

July 25 If this patient were seen outside it would be difficult to certify him - His demeanour is quiet, orderly, & reasonable. He sleeps very fairly well - eats his with fair appetite. He enters into the amusements of the place - principally bowls - at which he plays very well. Yet there is something about him which does not indicate a sound mind - and he is astute enough to guard his conversation carefully and not betray any of the peculiar ideas & delusions which he used to manifest & which it is believed are still present, tho' kept in subjection. His manner has the appearance of sincerity & frankness, without the reality of them. He speaks carefully about himself & his prospects, his business & his family - & then asks if what he has said is not sensible & true. He evidently wishes to impress the officials with his sanity & self control - the object in view being his release. There is in his talk a tendency to incoherence & confusion, but it is slight & only occasional. He today referred to the Gardeners Association & his connection with it in a perfectly meaningless & irrelevant way, & when asked to explain it he changed the conversation. He said a few days ago that he felt that Mr Angus had an influence upon his play at bowls, either on himself, or on the bowls: he evidently believes that the mere presence of Mr Angus is enough to prevent him from making good play at the game.
He will not take his food unless he has his

James H. C. Macleod -
Contin. from Vol. III., p.p. 598, 476, 467 & 417

1891

Mar. 18th. After again last note, the scolding was resorted to for a day or two patient refused food, and could not speak when addressed. But in a few days he improved and was prevailed on to take cod liver oil & chemical food. He is now much fatter & better.

May. 6th. Bodily condition remains fair - He is pretty fat - but pale & unhealthy looking about the face. He is very shy and reserved - and can hardly be induced to talk.

Aug 21st. Much the same - only lately he has been more reserved than ever - & inclined scowls at any one attempting to speak to him. Bodily health is indifferent - but keeps at much the same level.

Decr 3rd. Has not spoken to the writer for months. He looks up when spoken to, stares at the speaker for a minute and then resumes his reading. B. & C. as fair

1892.

January 19. Just the same. Never speaks & the writer refused to shake hands with him - B. & C. indifferent

March 16. Silent as ever. He is not in very good health & his appetite is poor, but he replies to conversation.

July 14. Never speaks. Silent & repellant in manner. No practical change in his condition ——

October 3. Noticed to be rather thinner of late, but as silent as ever & when spoken to, he either rises from his chair & leaves the room or continues his reading without speaking. It is impossible to say whether or not he has delusions & what their nature is ——

Jop. 583

William Brown.
Cont. from p. 244.

23 March Cont. The difficulty in swallowing is becoming more & more marked.

25th Patient is in a sinking condition & can now with difficulty be roused. He lies sunk in his bed in a collapsed condition but occasionally starts up & mumbles a few incoherent expressions. He can now swallow nothing his mouth & lips being kept moist with glycerine & water. His lungs are becoming congested

27th Patient died today. Died.

Cause of Death
Chronic Organic Disease of Brain in region of Tuber probably syphilitic in character & Congestion of lungs.
See P.M. Journal.

Wm. James Milligan

Continued from Vol. III, pp. 587, 572, & 567

1891

Mar. 18th – Still wanders about at his own sweet will. He is never thoroughly pleased unless he is making himself disagreable to some one and causes a great deal of unpleasantness. He is no whit improved.

April 30th 1891 At present this patient is certainly on his good behaviour, and does not deserve for the time at least the character ascribed to him above. He walks about a great deal. On many topics he is sensible, & talkative – He is rather deaf and humorous on occasions. Bodily his health is wonderfully good. He says now that he can appeal to Caesar at his "incarcerators" – He says that his partner got him put into Gartnavel, as he (the patient) was finding out too much of his wrong doings. At this point he has fixed delusions & is quite insane. Otherwise his mind is stable.

May 9th Is very anxious to get home by the 15th day – his idea being to be there in time for the collection for rents – as he thinks his partner will swindle him – a delusion.

July 2nd Continues in good bodily health – shows no evidence of his mental peculiarities, unless "cross examined" – Has the parole of the grounds & makes good use of the privilege.

Aug. 31st Has once or twice been outside the grounds lately. But just now is on parole outside the grounds & is very fairly well.

Wm Milligan
cont.

Septr. 15 Wm Milligan is to-day discharged Recovered. For some time he has been fairly well, having the parole of the grounds & going into town when he pleased. His bodily condition is good and he has not been railing against any one for some time.

Recovered.

Septr. 26. Came from Dumfries to-day of his own free will and asked to be admitted as a Voluntary patient. Said he found he was not so well as he had thought and that he found the discipline &c of Barhamel was good for him. His sister stated that when at home his condition was very variable & he pleased none in everything said, and done for him. He is therefore admitted as a Vol. Patt and is allowed the liberty of the grounds & permitted to go into town when he pleases. His mental condition does not call for notice

Oct. 15th Wm Milligan has not been behaving as stated above he was allowed to go into town when he pleased. One day this week he went out as usual in the forenoon and did not return as he had promised at tea. time. Nor did he appear that evening and next forenoon an attendant was sent into town to look for him. His partner Mr Stoba was also telegraphed for and they discovered that the previous evening he had been arrested in argyle St. for being drunk & disorderly & lodged in the west. P. Office. The following morning he has been fined 7/6 and had gone leaving his watch in pledge.

Pop. 511

Andrew Paterson

Contin. from Vol. III., p.p. 414 / 120.

1891

Mar. 18th — Little changed. If anything a trifle improved.

July 1st. Stumbled & fell yesterday - giving himself a black eye. Further than this there is nothing to record about his case. He is not usually actively depressed now - but is dull - listless & uninterested - seems content to vegetate in the Asylum - & not to wish any change of ideas emotions, or surroundings. He gives no expression of delusions - Is always quietly civil in Conversation - & well behaved.

Aug. 31st. No change here -

Dec. 7th J. S. 2. Frail but not more so than at last note.

1892.

Jany. 19. Unchanged. —

March 16. Was confined to bed for some days with a bodily swollen condition of his legs. This has now passed off but he is very frail & takes his food indifferently.

July 14. No change in his mental condition. His bodily cond^n. is rather better

Oct. 3. No change. B. & T.C. very indifferent -

Dec. 16. A feeble old man. No change in his cond^n except one of increasing bodily frailty

1893.

Jan. 31. Passed thro the winter so far fairly well. B. & T.C. very indifferent

Feb. 20th A very large carbuncle has developed on the nape of his neck. His strength is very far from good & he takes nourishment badly

Dep. 476

Wm Easton Young

Continued from Vol III., pp. 440 & 102

Mar. 18th – Nothing to note. Seems to be happy. Sleeps & eats well.

May. 16th He is talkative & restless at times – He has no intelligence whatever – & cannot answer or understand the simplest question – His speech is indistinct – & lacks all expression and modulation –

Aug. 31st. No change to note here.

Dec. 12th Just the same. B. & C. fairly good

1892

Jan. 14. No change to note

March 15. No change.

Aug. 9th In fair health – Restless at times – but generally quiet.

Oct. 3. There is no change to note. B. & C. good.

Dec. 16. Practically the same. B. & C. fairly good.

1893

Jan. 31. No change

Sept. 15 Just the same. B. & C. fair –

1894.

Jan. 20. no change. B. & C. fair –

August 28. Keeps much about the same. There is no change in his general cond.

1895.

Jany 11. So just the same. No change in either his mental or physical condition

April 17. No change in any way. B. Cond. good.

September 30th He rarely ever gets restless and talkative but remains silent. His health keeps good and he eats and sleeps well.

To Vol VI p 542.

James Alexander Leitch,
Continued from p.p. 66 & 22

April 1st There has been no further change in this patient's condition since last note.

April 26th. Comparing this patient's present appearance, facial expression, dress, and demeanour with the photograph on page 65. a very marked change is now evident. His then bright and conceited bearing has now been replaced by a sullen, and often expressionless face - and his walk and gestures are now monotonous and undemonstrative. He paces up & down the gallery, with his head hanging down - and rarely looks about him - & never tries to attract attention.
When spoken to he answers always, but is often irritable & never spontaneously cordial.
He gives no expression of his own accord to delusions of grandeur: these however are still present in varied kind: his walk is wonderfully good - and at the last evening concert he danced neatly tho' without any life, but showed no sign of incoordination in his legs. The knee jerks are decidedly increased, & there is a slight ankle clonus.
The tongue is slightly tremulous - the speech is not characteristic - The pupils are of medium size, equal - and extremely sluggish to influence of light.
Hearing is quite acute.

May 14th. First Entry His manner has been peculiarly self satisfied & jaunty. He walks about with an air of body, laughing & smiling incessantly to himself. His gait

James Alexander Leith.

is firm & regular. Appetite rather good.
Tongue thin white - clean - Bodily health fair
June 1st There is a distinct drawling slur of the speech now - especially if he is a little excited - This certainly seems to have become more marked lately, & is now fairly characteristic -
[illegible] feature about this patient just
[illegible] tability & tendency to explosions of
[illegible] not possible to converse with him,
[illegible] him in any way, without his
[illegible] hostile in the face - always in
[illegible] attitude. When left alone he is
[illegible] marches up & down the gallery
[illegible] talking to himself in a most
[illegible] & it is evident that his mind
[illegible] magnificent ideas - & he readily
[illegible] & - before he becomes angry
[illegible] wonderfully quiet at nights
[illegible] well.
[illegible] been annexed.
[illegible] in the bowling green a hemiplegic
attack, which has now developed into a distinct
Congestive seizure. Up to this date his condition had
not altered - & last night before he was quite in his usual,
& played a game at draughts, over which he became a
good deal excited & made numerous false moves, and even
moves for his opponent, & would not stand any interference.
His gait has been remarkably good, tho' the basal ganglia
is evidently a little unsteadiness present.
Yesterday the writer observed him wander off of his own
accord amongst the trees - where he stumbled about a

July 4th 1881.
Jas Leith's letter

James Alexander Leitch,
Continued from p.p. 66 & 22

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The tongue is slightly tremulous. the speech is not characteristic. The pupils are of medium size, equal - and extremely sluggish to influence of light.
Hearing is quite acute.

May 14th. First Early his manner has been peculiarly self satisfied & jaunty. He walks about with an airy manner of body, laughing & smiling inordinately to himself. the gait

James Alexander Leith.

is fair & regular. Appetite robust good.
Tongue tremulous - clean - Bodily health fair.

June 1st There is a distinct drawing thus of the speech now - especially if he is a little excited - His cutaneous scenes to have become more marked lately, & are now fairly characteristic -

July 2nd The most noticeable feature about this patient just now is his extreme excitability & tendency to explosions of rage & violence. It is not possible to converse with him, & to attempt to examine him in any way, without his becoming very excited, flushed in the face - abusive in language & violent in attitude. If left alone he is not at all offensive - marches up & down the gallery a great deal - laughing & talking to himself in a most self-satisfied manner - & it is evident that his mind is full of grand & magnificent ideas - & he readily expresses those if talked to - before he becomes angry & excited. He is wonderfully quiet at nights & sleeps well - & eats well.

4th Two letters of his are here annexed.

Aug 6th This patient had yesterday in the bowling green a hemiplegic attack, which has now developed into a distinct congestive seizure. Up to this date his condition had not altered. A last night before he was quite in his usual, & played a game at draughts, over which he became a good deal excited & made numerous false moves, and even moves for his opponent, & would not stand any interference. His gait has been remarkably good, tho' the loss of speech is evident & a little unsteadiness present.

Yesterday the writer observed him wander off of his own accord amongst the trees - where he stumbled about a

Wm Jamieson Beaton

admitted 15th March 1891

to East Annex.

Information from Servant. Patient is a single man, act. 27, by occupation a Customs clerk. Formerly he resided at 102 Cambridge St. The present is his first attack of insanity and has already lasted more than six months. Previous to admission the patient was under treatment in the Royal Western Infirmaries. The cause of this illness is uncertain but patient was formerly a masturbator. He is not subject to epilepsy, nor is he dangerous to others, but he has frequently threatened suicide. There is an established hereditary taint a paternal uncle being insane. The patient is admitted at the instance of his brother.

Medical certificates bear — I "States that all fluids remain in his body and nothing comes away. Wishes to get something to take him away. Has thrice told me that he will commit suicide." Last night, his mother states, he mounted a bridge to kill himself."

II "Has numerous delusions especially as to the necessity of going through a serious surgical operation."

Condition on admission. Physical examination of chest detects nothing abnormal. Patient has appearance of a man whose general health is decidedly below par. He is pale and pasty in complexion and has a dull and listless appearance. He talks

Wm Jamieson Beaton
(continued)

freely about his abdomen which are visceral in character referring mainly to the condition of his bladder which has for some time ought to receive or retain urine owing to the passages being blocked up with semen. The urine which ought to pass into the bladder is, the patient affirms, stagnating & festering in his body. He earnestly begs to have his abdomen opened in order that a cure of this very abnormal state of affairs may be brought about, and also that the truth of patients statements may be established. He affirms that the present unsatisfactory state of his viscera is entirely due to mistaken treatment before he came here.

16th March. Patient had a fair night's rest and took his breakfast well. Examination of urine shews it to be neutral in reaction with a considerable quantity of phosphates present. No albumen detected.

18th March. For the last two days patient has been troublesome about his food saying he should not take dinner, but when he thought himself unobserved he was seen to put bread into his pockets.

Examination of urine this morning shews it to be faintly acid but albumen is distinctly present though in small quantity. (N.B. It should be noted above

Wm Jamieson Beaton
(Continued)

that when in Royal Western Infirmary patient was examined for stone but none detected, the only abnormal condition at all bearing on his delusions being phosphaturia which examination of his urine showed & for which he was treated.)

21st March — Urine still acid & faint traces of albumen distinctly present. Patient complains bitterly of refusal of Doctor to perform or sanction a serious surgical operation. He affirms that he wishes no food as he is without a stomach but on being reasoned with and urged takes food.

9 April — Urine examined today & found to be acid & free of albumen & phosphates. Patient's bodily Condition has improved & he is gaining flesh. He now thinks that he might have recovered if his case had been taken in time but now it is useless. He is taking his food well but under protest & insists that he is subsisting on his heart & one lung all his other organs having been destroyed by his pernicious urine.

May. 12th — Seen by Dr Adamson. (House surgeon in Royal Infirmary when Beaton was treated there). Wm Beaton was admitted under Dr Fleming. He said that various doctors had treated him for disease of the bladder - unsuccessfully. He came into Hospital to be examined by the cystoscope. which he had heard

of and read about. He complained of many symptoms - many of which were not the ordinary ones of urinary disorder, but statements of various physical conditions and defects from which he was suffering, of which there was no proof - and of some of them, no possibility. Some of his symptoms were ridiculous, eg. that he had "complete retention of urine" - whereas the passage of from 15 - 20 ounces daily was a patent fact. He exhibited me a few small stones, which he said he had passed, and during his stay he produced two more - passed one afternoon; according to his statement. These were not analysed, but it was thought that his story was highly improbable. His urine was frequently & carefully examined - and beyond an occasional excess of phosphates nothing abnormal was found. His urethra, prostate & bladder were also, examined, the latter by the sound & cystoscope & were found normal. On one occasion Dr Fleming thought he detected a deposit & incrustation at the foot of the bladder, & partly to examine the organ more thoroughly, & partly to see if satisfying the morbid craving of the patient for an operation "would do him any good, a median lithotomy was performed - Nothing abnormal whatever was detected. A tube remained in the bladder, passing out by the perineal wound for about a week - & then, after its removal the wound rapidly healed up.

His condition was not the least better after this - & his mental depression and hypochondriacal state became intensified - He refused food - lost flesh - became very pale & thin - emaciated & unmanageable.

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Henry Newman Smith, 43
Admitted 29th March 1891
To West House

Patient is 43 years of age, married, and resides at 15 Ruthven St, Glasgow. He has been insane for several years, and this is his 4th or 5th attack. His age at his first attack was about 20. He has been under treatment here 4 or 5 times, the last about 8 years ago.
The suppose causes are ill temper and previous illnesses. He is not epileptic or suicidal, but is dangerous to others at times. H.P. uncertain.
Medical Certificates say that "he talks volubly and incoherently mixing up the words "brain" and "clavicle" without any meaning. He is confused in his thoughts, asking the same question ten times over. He says his wife refuses him food and tries to annoy him."
His wife says "his account is altogether false: that he is unmanageable at home. talking incessantly in an abusive manner, and acting toward her most cruelly: he has frequently threatened her life."
On Admission at 1 a.m. he was very much the worse of drink and quite confused. He was taken to bed at once. In the morning he was more collected, and spoke freely. He smelt strongly of Chloral. He gave a garbled account of his wife's harsh treatment of him.

and uttered many pious reflections as to his having brought it all on himself. He said he had used very large quantities of sleeping draughts, and had been often cautioned to give them up. His appearance is anaemic, but he is fairly well put on. He was so miserable at bed time that half a drachm of paraldehyde was given more as a moral effect than an actual one. He did not sleep at all.

March 31st His wife states that for a long period he has taken two bottles of whisky in the 24 hours besides 4d worth of laudanum. He never went out, and unless he was supplied with these whenever he wanted them he abused her fearfully and sometimes maltreated her. He got another draught last night of ½ drachm paraldehyde & slept none. To-day he is getting the benefit of open air and exercise.

April 1st Slept several hours after paraldehyde ℥ij ℘.

April 4th Is now able to sleep some hours without any draught. He is more cheerful and looks better.

April 23rd For the last day or two this patient has been much more excitable and restless. and has not been sleeping well. He is constantly talking in a loud demonstrative way, on varieties of subjects, one after the other, usually quite incoherently.

To page. 327

Scott
David, Carlisle, M.D., 65
Voluntary
Admitted 30th March 1891
To West House

Patient is a bachelor, 65 years of age, and for nearly half a century has been in practice in Carlisle, his present address there being No 2 The Crescent. There is no N.P.

On Admission - patient stated that he has been for some time subject to fits of depression and sleeplessness, and occasionally he felt as if he might do harm to himself.

About a year ago he seems to have had some hypochondriacal ideas, and consulted Sir Morell Mackenzie and others about his throat. He seems to have been satisfied that there was not very much the matter and settled down again to his practice. But in the autumn he noticed the fits of depression coming on, and they have been rather increasing in intensity since. He has always been a temperate man, and cannot blame anything to cause them.

His appearance is cheery, and his conversation free and pleasant.

His chest and heart are sound.

April 1st Patient was put on a glass of whisky at bed time with the hope of removing his miserable feeling and composing him to sleep. It was not sufficient, and last night paraldehyde ℥ij ℘ was given,

after which he slept for some hours.

April 4th - This patient strikes one as being more hypochondriacal than anything else. He is concerned about his bowels, and his breathing, and one thing and another without any reason. He takes his food fairly well and rests well at night.

April 24. The bodily and mental health of this patient is satisfactory. He believes that he is better - He is getting Nitro-muriatic acid, and thinks it does him good, in keeping his liver in order, and giving his system "tone". His appearance is genial and cheerful, and his talk and manners pleasant and hearty.

27th Bowels very costive. Since he came in he has not had a natural motion till yesterday - an enema has always had to be given. But 3ii of Compound Decoction of Aloes resulted in a small natural motion - He is now taking Aloes & Iron pills.

May 6th Bowels still very costive - Sleep is poor - most nights being passed in a restless wakeful manner -

14th Condition of the bowels is improved - but Aloes is still required - He is subject to depressed moods still - complaining of want of sleep, but it is not deemed advisable to let him have a room by himself.

25th He can now regulate his bowels with Aloes decoction & a pill of the pill & has to take these less often & in smaller doses. He is sleeping a little better & is less emotional - but a suicidal tendency is still guarded against -

Do page. 373.

John Turnbull.
admitted 27 March 1891.

Patient is 38 years of age, married a music-seller & a protestant.
He was brought from Roberston, Leith & admitted to the East House at the instance of his wife.
This is his first attack & it has lasted two months.
The cause is unknown.
He is not epileptic nor suicidal but may be dangerous to others.
There is no H. P..
The medical certificates bear:
That there has been a progressive mental deterioration & other symptoms of general paralysis such as the loss of the power of articulation & total incapacity to take care of himself.
He has been very delusive, restless & excited.
On admission patient was very dull & unable to answer questions.
There is a marked expressionless look on patients face & when he attempts to enumerate a few words, marked tremor of the buccal & infra-orbital muscles. There is also marked tremor of the tongue on protrusion.
The pupils are equal & regular & react both to light & accomodation.
There are two boils, one on each

wrist with dusky sloughs firmly adherent. His neck also shows one inviable surface over the nape where bleistering has been resorted to.

28. This morning patients bladder had to be relieved by the catheter. Patient very dull mostly able to mutter unintelligible sounds. He has a fixed expressionless look.

29. The boils have been poulticed & the sloughs have separated leaving clean & healthy ones beneath. Several small pustules have appeared on the neighbourhood of the boils as also on patients face. He has been put on a course of Calx Sulphurata. His urine was again removed by catheter.

1 April. Patients bladder has now regained its tone & catheter has not been required since last note.
He is in the second stage of General Paralysis & pretty far advanced. He is still in bed on account of his muscular emphysema but will shortly be raised.

April 30 Transferred to the West House.
May. 16th This patient is steadily failing — Has gait is weak & unsteady — His facial expression uniformly dull & vacant. Speech practically confined to a tremulous "No". which he repeats again & again.

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John Gourlay.
admitted 28 March 1891.

Patient is 40 years of age, married a Dentist & a protestant.
He was brought from 282 Buchanan Street & admitted to the East House at the instance of his father.
This is his third attack & these lasted 10 days.
The cause is alcoholic intemperance.
He is not epileptic or suicidal but he may be dangerous to others.
There is no Previous H.P.
The medical certificates bear:
That he has hallucinations of sight & hearing: talks in a rambling & incoherent fashion & thinks himself strong & fit for work which he is not.
Patient has a typical drunkards appearance. His face is bloated & covered with acne blotches of old standing.
On admission he talked in a rambling fashion but could answer questions coherently. There is a great deal of tremor about his tongue & hands & his gait is somewhat unsteady but there is no affection of his reflexes.
He is very facile in conversation.

29th — 9th day patient informed the writer that he was going away on the back

of a carrier pigeon. He is in a stupid state all his senses seeming to be dulled.

30th Patient while walking round the grounds y'day stumbled & fell scraping his brow & face slightly. He does not seem very strong & will not walk with the other patients. His appetite is fairly good & he is sleeping well.

1 April Patient's feet are both considerably swollen this morning. His urine is free from albumen & the swelling is evidently due to defective circulation. He is to remain in bed. Mentally he is still dull & stupid & subject to fits of laughter without cause.

2. Patient is today postponed a flow of history as an examination of his heart this morning shows a distinct lack of tone in that organ. Patient was wet y'day & this morning.

6th Patient's bodily health more stronger Mentally he is weak & facile & talks in a dreamy listless fashion. Has been wet once or twice during the day & night. He sleeps well & his appetite is good.

13th No improvement in his mental condition. Still talks in a rambling & at times childish way. Was wet & dirty y'day. by day.

to p. 325.

Joseph Kerr (voluntary)
admitted 8 April 1891.

Patient is 52 years of age married a protestant & brassfinisher by trade. He is admitted as a voluntary patient to the East House.

For the past few months he has been very depressed with the feeling that some thing dreadful is going to happen to him & his family. He has been sleepless & restless & unable to fix his attention on his work properly. He has lost weight considerably though still a short well nourished man. He has been induced to put himself under treatment by the feeling that he might do injury to his Children.

Patient is in fair bodily condition but distinctly fat & soft fibred. No lesion is present in any of his thoracic or abdominal viscera.

He talks freely about his condition & realises that he is ill. During conversation he feels that there is always "a something else" which tends to distract his attention. He feels certain that the dreadful thoughts of injuring his family are false but still they will come in to his mind.

10 April. Patient did not sleep well his first night but did so last night after 20 grains of bulphonal. Today he feels

somewhat more settled but still a little strange. He eats well enjoys his food. He is today put on a course of Iron Quinine & Strychnine.

13th Patient has slept better since last note but still requires a small dose of Sulphonal. He was very restless & uncomfortable all day y'day. but today seems more hopeful of his recovery.

11th May. Very considerably improved and working in the Blacksmith's Shop. much cheerier tho complaining sometimes of sleeplessness. Put on small doses of Bromide & Chloral with a little Henbane. Speaks very cheerily about himself and his future and is very evidently in much better mental health.

29th May. In a variable state. some days being very well indeed but at other times not so well and very fearful as for some impending evil. On the whole better and feels fully conscious of this but in very great fear lest the old feelings should come back. He has been sleeping better at night and has the liberty of the grounds.

June 16. Still somewhat variable in his condition but allows that he has now more control of his feelings and can suppress thoughts that some time ago would have mastered him. Has been home once or twice and is none the worse. Bodily health is good & he has been sleeping better. Is almost always in the open-air.

July 6. His condition is variable and tho here he says he is quite well when he goes home he doubts his self control. About a fortnight ago he spent some days at home and seems to have utterly

Dep. 429

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James Kippen Alston
admitted 9th April 1891.
Died 18th December 1929

Patient is 33 years of age, single, a protestant & lately Cattle ranching in Mexico.
He was brought from the Royal Infirmary & admitted to the East House at the instance of his Cousin Germain.
This is his first attack & it has lasted some months perhaps years.
The cause is uncertain.
He is not epileptic or dangerous to others but he has attempted suicide by cutting his throat. This being the reason of his stay in the Royal Infirmary.
There is a very strong H.P.
The Medical Certificates bear:-
He attempted to commit suicide by cutting his throat five weeks ago & is still moody & dejected. Sits for a long time idle & will not answer questions. On two occasions he tried to get out of the window & had to be taken back to bed by force & tied down.
For four days prior to admission patient refused to take food. He is in fair bodily condition but has a nasty sweet starvation smell. The wound in his throat is in great part healed.
He speaks in a hoarse whisper.
On admission patient was very suspicious & could with difficulty be got to enter into

conversation, meeting every question with "Why do you ask that?" When offered food he refused it saying he did not require to take it. When pressed he did not wish to take it on account of private reasons. What the reasons were he did not vouchsafe to say.
He has a dull stupid look & seems to be under some all powerful delusion.

10th Patient took no food y'day & slept none through lying quietly in bed. He steadily refuses to take food this morning asserting that he does not require it. Still suspicious & disinclined for conversation.

11th Y'day. evening patient took an over-night tea & slept a few hours last night. The threat to use the stomach tube proved sufficient to overcome his refusal of food. Today he has taken all his meals & with evident relish. He took a Black Draught without any pressure to do so.

13th Patient slept fairly well last night but this morning refused to take his b'fast. He took it however on being told that it would be given him against his will. He seems unwilling to give any information about himself

May 11th Has had several ups and downs. For a time he improved and was in N04 but had to be brought back to Inf. For some days he refused to get up and was allowed

James Kippen Alston
Cont.

to keep his bed. His bodily health is much better and his appetite good. He refuses to talk much about himself. where he has been to, and gives expression to no delusions. He assists in the ward work, but has anxious but a cheerful appearance.

May 29. Improving very little mentally but in much better bodily health. Still depressed and reserved unwilling to enter into conversation, but civil & responsive when addressed. He refuses to go to No 4 Gallery and considering his suicidal impulses it is wise to have him still in Inf. Ward. He keeps close with ward work but does not associate with any of the other patients and has distinctly a doleful countenance. He does not give expression to any delusions and about himself, his affairs, his prospects and his experiences he is very reticent.

June 11th Patient is found this morning somewhat excited & full of delusions. Says that he has nothing to do with the disestablishment of the Church, about which he cares little, but that he is here he is to blame for it. accuses another patient of insulting him and says the attendants think he is Christ Jesus. His is so utterly different from his usual manner that it cannot escape notice. Usually he is found sitting with his hands in his pockets, looking depressed & replying in answers to questions that he is quite well but his appearance contradicting his statement. This afternoon he is seen walking up and down the airing Court gesticulating and talking rapidly & excitably but his conversation is incoherent. His pupils

J. C. Alston

while he is being spoken to are observed to dilate & contract to a moderate extent but seem to be equal.

June 15. Excitement noted has passed away and to-day he confesses to not feeling at all well. He is very silent & every with difficulty induced to talk. Sleeping badly but not giving expression to any delusions.

July 3. This patient is again a little excited and talks freely. This morning he asked writer to examine him all over to see if he had any disease about him as it was very unjust to keep him here if he had none. On reference being made to his mental health he said he had never been unsound in it. He justified his cut throat & said he had reasons for it which he refused to give. I said he used to think it right to prevent any man hurting himself & committing suicide but he has seen reason to change that opinion. He is still helping in ward work but is more reliable than he was a few days ago.

Sept. 1st. Stee in Infm. Ward and showing little improvement. Becomes he is quite fit to be outside, which he is not. He is quiet & depressed, talks little & not of his own accord and when his past deeds are mentioned to him he has some excuse ready. His B. H. improver cut is not yet good.

" 7th Not sleeping well & complaining always of 'air' & 'currents' & 'people' affecting him. Has numerous complaints to make of his bodily health - talks of 'pressure' & 'hurting within'. All this depresses him greatly - He believes he would be well - if he were outside Earlswood.

Dec. 23rd. Of late he has shown a certain degree of improvement. His manner & expression are brighter. He talks readily & pleasantly & smiles. Has asked to go to

John Goulay
Cont. from p. 318.

11th May. This man has many features common to Chronic alcoholism. C.S. see His facueties and dulled and this he seems now to have no delusions or hallucinations he is silly and rambling, easily put off and displays no eagerness to get any thing he says he wishes. His memory is very deficient and his intellect generally is weak. He is not now dirty either by day or night but at night he is very often wet (this he denies it). Sookline has been given him with partial success. now it is being combined with Strychnine with more advantage. He gives no trouble but is often asking into town —.

29th. Wet almost every night of late in spite of large doses of Sookline. He becomes wet at quite an early hour. going to bed about 8 he is wet at 9 in spite of having been in the closet just before going to bed and passing water there. The bloated appearance of his face is scarcely so marked as it was. Mentally he is unchanged. —.
Is now in No 4 Gallery.

June 15th Unchanged. Silly & fatuous & wet almost every night.

July. 3. Mentally to unchanged this patient is good naturedly silly. He is not often wet at night now, & is rather proud of it.

Septr. 2nd Very often found sleeping in his chair. His facueties are dulled but when shaken up, he becomes brighter. Very anxious to get out to have more teeth, which he believes himself quite able to do. His bodily health is fairly good and he is not so often wet.

John Bowlay.

Dec. 23rd. Mental & bodily debilitude still characterise him.
He is very silly, & slovenly - & sleeps much.

March 31st 1892 " There has been no change in Mrs Bowlay's condition of late.
He is as well now - & has been so - as ever he will be - He may become worse, if he takes to drink again - His mental powers are permanently weakened -
His friends today removed him from the asylum.

Discharged Relieved.

March 31st 1892

Henry Newman Smith. 43.
Cont.d from page 312.

April 23rd 1891 He has optical illusions - fancies he sees angels, and men moving about the room - and a red cross on the wall of his room.
Last night he was put in a hot pack - and his skin acted freely - He remained in it for about two hours. He slept for about an hour after it - & then was restless, talkative and slept badly. This evening he took up some shirts, and is continuing in the same state. He has not been walking about so much today, as yesterday he twisted his foot slightly (left) straining some of the ligaments.

24th To night 3ii of Paraldehyde were given & this secured 7 hours sound sleep. But on waking he was as restless, talkative & incoherent as ever. He if spoken firmly to he always replies to the point.

25th 3ii of Paraldehyde again given at bedtime with no effect - & some hours later another equal dose was given which obtained two hours sleep.

26th Today his condition is the same.

27th Quieter today. less restless - did not sleep well last night.

May 1st Paraldehyde 3iii given last night - & he slept well till 4 am. But was in his usual excited & talkative state this forenoon. For the last few days his hands & fingers have been very tremulous - a fine quick tremor. Tongue clean & steady.
Pupils dilated rather - Skin moist & clammy.
He talks much about women - in a rather lewd way - He did not recognise his wife two days ago.

Harry Newman Smith

May 4th The patient is a little improved since last note. No paraldehyde has been given him since last note, and he has slept fairly well at night - and been less noisy - During the day too he can exercise more control, and for a little talks sensibly and quietly - & then his power of control seems to be extended, and a silly laugh, or incoherent statement follows - There is a good deal of tremor about his hand still.

May 6th Tonight his face is rather flushed - his pupils more dilated - his manner much more excited - and irritable - and his talk incessant, while he walks up and down the gallery - so that his excitement has returned again, after a day & two of improvement. Paraldehyde, 3iii given tonight.

7th Draught seemed to have slept.

8th Last night very wakeful, restless & talkative - & a good deal excited.

9th Had 3iii Paraldehyde last night & slept for 6½ hours - Tonight again the same draught is to be given - if he does not sleep.

16th No improvement - Very noisy & talkative all night if he does not get Paraldehyde. That always seems him a good sleep - There is a suspicion of masturbation - He is constantly talking in a lewd manner - His hands are very tremulous - pupils somewhat dilated - skin moist - Pulse fast.

25th A little quieter now - but extremely incoherent & absent - & very sleepless.

June 1st For last two nights he has had no paraldehyde - & has slept little - & talked much.

↓ Page 361

John Forrest.

Cont. from page 86.

May 15th 1891 Two days ago a blister was applied to the nape of his neck - & now the pain in his head is gone. His asthma is still troublesome. The Iodide & Bromide is continued. Mentally he seems same, (? RIP) tho quiet and looking rather depressed.

May 16 Antipyrin - gr. 5. three daily prescribed.

" 11th His sleep is much broken just now - indeed he gets very little sleep at night. His tongue is furred - & tremulous - his eyes bleared & suffused. His face is less flushed & bloated. & the pain in his head is somewhat less.

On examination of his chest no bronchitic ronchi were heard at all & lately his breathing has been easier. but this can hardly be ascribed to the Antipyrin. In front the lungs seem fairly normal - beyond the very marked emphysema. Behind in the Right Interscapular region - and in the Left Scapular region - there are two points where light friction sounds are audible. There is slight percussion impairment here too. There is no pain in the back - but he has a little pain in his left loin - towards the front.

The heart is covered with the emphysematous lungs but the sounds, tho distant, are apparently healthy, with the exception of the first sound over the Right ventricle, which is rather sharp & short - which along with marked epigastric pulsation seems to indicate a dilated & (slightly hypertrophied) state of the R. Ventricle.

14th Sleep has been procured for last two nights with Sulphonal.

Glen Forrest.

He has been noisy at night & somewhat incoherent.
He is quiet & depressed in the day time. He says he has been so wicked that he cannot sleep. He is concerned about his bodily health.
His pulse beats too rapidly - usually about 102.

16th. Has been getting 20-40 grains Sulphonal daily - the result being that he has slept well & has become quieter & the threatened outbreak has been averted meantime.

19th. Tongue still furred. & pulse at 102. Breathing too fast. Last night he was a good deal troubled with his breathing.

28th. His tongue is a little cleaner now - & his condition somewhat improved. He has had a course of Phenacetin, Grey Powder & Senega & Liquorice. He is quiet & rather depressed.

June 8th. For the last few days he has been kept in bed - & his tongue has certainly become cleaner than it has been for weeks. He is however very depressed - sleeps badly - & says he feels all wrong, tho' in what way he cannot quite say. His urine was found to be normal. The bases of his lungs were slightly deficient in resonance & numerous râles were heard over both - indicating a condition of Congestion & oedema. The point of impulse & left part of sternum there is an area of extra-cardiac dullness which is suspicious of aneurismal dilatation of the aorta. The size of the heart itself cannot be determined owing to the emphysematous state of his lungs.

13th. He is up & about a good deal & seems better. His tongue & complexion are cleaner. He still sleeps very badly.

To page 423

William Burgess -

Cont. from Page 242.

April 27th 1911 He is getting usually from 30 to 50 grains of Sulfonal daily - but is frequently noisy - There is often a continual vocal activity - indeed when he is restless he is always noisy - It is difficult to make out what he says, the words being all run into one another and all pronounced in one quality of voice - There is very little tremor now to be observed about the lips or eyes. The tongue is brown & the breath very foul.
A free motion was obtained this morning - without further injection of medicine.
The burn on his leg is healing slowly, but soundly -

May 1st Ulcer healing well. Dressed only once daily now.
Periods of excitement still continue.

9th Leg practically healed now - In other respects he is in the same condition - He perspires profusely at times.

11th Up for the first time today.

14th He is now stronger on his legs than on the first day he got up. Tonight he contrived to knock his head against a pane of glass, breaking both - but his head was only slightly cut - quite trivial.

16th This morning his water was drawn off by catheter - There was only about 10 ounces in the bladder - and yet he had not passed water for about 30 hours. Tongue dry & breath very offensive, as usual. He seems to be failing pretty rapidly.

20th Extremely noisy all today - Looking very pale & ill - No further trouble with his urine yet.

24th Today he was more noisy & restless than he perhaps has ever been before - He shouted & gesticulated constantly in a most excited way.

William Burgess

26th Has not been very repeatedly today & yesterday.
Burns Sodoroo - 20 M. three daily given.
28th Has not wet himself since the Sodoroo was given.
Has been a good deal quieter later.
June 1st Every day & two he has periods of great excitement - when he is exceedingly noisy & agitated - He seems to hear & see things which terrify & enrage him & at times he works himself into a frenzy - Sulphonal in doses of from 20 - 30 grains usually quietens him in from 4 to 5 hours -
June 8th Has this last week had some terribly noisy & excited turns - & in these his cries & oaths & frenzied talk are most distressing - & exhaust him considerably - Sulphonal controls this but often before it takes effect he passes some very noisy hours - His face is pale & wasted looking - his body now considerably emaciated & his mind totally estranged -
27th In the last week he has been much quieter - Whenever he seems to be becoming noisy 30 grains of Sulphonal are given & this always has the desired effect - Since the diminution in his excitement a week ago he has improved a little in strength.
July 22nd In the last week the condition of this patient has been considerably worse - The excitement has been very great - & in some of his fits of frenzy & terror he has been more noisy than almost ever before - He has been resistive & obstinate too, tho' not in any way violent - Hallucinations seem constantly to be present - & judging from the extreme terror & rage into which they inspire him, & his gestures & expressions of fear & reproach they seem to be of a horrifying & revolting nature -

J. 443

Francis Cowley, 41
admitted 29th April 1891

Private Patient. East House. Single. Protestant & by occupation a Platelayer. Resides at Carlisle. Has been insane one year, this is his first attack and the cause is put down as Intemperance following injury to spine. He is not epileptic but may be suicidal & dangerous to others.

There is an O.P. a maternal uncle being current Medical Certificates bear that he is the subject of delusions believes his food is poisoned, that the poison has wasted his heart, lungs, privates &c. Believes that there is a conspiracy against him &c &c —.

His brother informs the writer that 2 yrs ago patient met with a serious accident on the Rail. his leg being broken and a severe shock to the spine sustained. That was when he was about 20 years of age and after that accident (this doubtfully connected with it) his disposition changed considerably, and he became difficult to live with, at times threatening & very passionate violence. He also took to drink. He was able to be at his work but quarrelled with his fellow-workmen & became sullen & in many ways quite different from his ordinary self. His habits became peculiar and many of his tastes perverted. He seemed to have little flavour-sense left and delighted in all sort of messy and undelectable dishes, often supping great quantities of salt to get up a thirst.

Till about a year ago things continued in much the same state and his brother having married he & his mother lived alone. At times

Francis Cowley.

however his language & conduct were such that for her own safety she has to leave him. A year ago he began to accuse people (& especially his mother) of conspiring against him, of giving him poison in his food and of acting on him by un-natural means. Then his drinking habits became worse and about 6 mos he had what seems to have been an attack of acute alcoholism

Six weeks ago he believes that his private parts were wasting away in consequence of poison given him. That women jeered at him in consequence and that other organs of his body were being affected by being tampered with -.

12th May. Patient is not always communicative. To the writer he tells of delusions somewhat similar to those mentioned above but he believes that since he came here he has had no more poison. Does he fears that not much can now be done for him and his answer in enquiry to his health always is that "he's not very well" He is sleeping well and taking his food, is quiet and gives no trouble Says to night that at nights he is interfered with and that the pain in his head is due to this. Declines to say by whom this is done.

20th To day says he is a little better and that last night he was not disturbed. He is having some simple sedative and seems the better of it. Still suspicious but not inclined to express his delusions and never excited nor abusive to any extent —

29th Is now in No 4 Gallery and feels somewhat better He sleeps well at night and when asked if he is still interfered with at night his answer is a smile

To f. 358

George L. Sawyer

Cont. from page 178.

May 1st. This patient is improving. He has admitted that he was suffering from delusions when he was admitted here - and that now he believes his bodily health and compensation to be natural. He seems always cheerful and well pleased with himself.

11th Today he stated that his bodily health was certainly good, but on being questioned about his head, he said that he thought the cranial bones were now improving, or at least were no worse, and that he still believed that there had been decision & peculiarity in them. This he knew was regarded as a delusion by other people. but he insisted that he still believed in it himself, this now, certainly, rather as a thing of the past, than a present affair. He is still troubled with seminal emissions, about two in the week. Sorkeron - in 30 M. doses three daily was ordered.

June 1st. The Sorkeron seems to have been very effective - at least he has not been troubled with emissions since the first week after taking it. His mental condition seems to be about its normal standard.

June 8th Discharged - Recovered.

Archibald Norman Stewart McIntosh

cont. from p 276

1893

April 24th — He has been writing some letters lately which he has not done for a long time. All of them were in the minor key and related chiefly but not wholly to domestic matters. He was unable to resist the temptation of referring to politics and in one letter said he was as keen as ever about that subject. B H & C. fair.

June 30th — He takes a very gloomy view of life and always looks upon the dark side of things. Any effort to brighten him up lasts only for a moment and he reverts to his old state again. He doesn't seem anxious at all to leave the Asylum.

Sept. 25th — He continues in the same condition - depressed, hypochondriacal and with a gloomy countenance - introspective and taking morbid views on most subjects. He is complaining just now of various pains about his head and of his face flushing &c. His health is poor.

Dec. 28th — Unchanged. B H & C. fair.

1894

June 29th — He has been writing many letters lately, often to mere & former acquaintances. The same refrain runs through them all, the gist of which is that his race on this earth is drawing to a close.

December 29th — He is still very gloomy and depressed and always looks upon the dark ~~shade~~ side of life. He has not been writing so many letters of late. He is pale and anaemic, and not at all strong.

To Vol. V p 5-99.

George Jamieson Swann.
Cont.d from 296.

May 3rd 1879

May. 4th. All today he has been in an excited agitated state of mind - pacing restlessly up and down her room, giving way to outbursts of grief and misery, and reproaches towards the attendants and doctors. He says his body & mind are utterly debased. He refused all food and said that it was not food, but the most "unutterable filth." He was only induced to take some bread & water, and later, some potash & whisky & biscuits, by the threat of removing him to the gallery - & then only when the attendants were summoned, showing him it was no idle threat - He was greatly excited at the idea that he could sit down and eat food, knowing all the time that it was filth, and yet feel no disgust at it - He said he felt all his natural feelings and affections were extinguished - & this thought caused him much mental pain.

May 5th This morning he eat two rolls, & ham and eggs - & tea - He is pale & has lost flesh, and continues in the same restless state of misery.

May. 6th Taking food well now - & more irritable and outspoken with delusions, than depressed - tho' there is a strong element of melancholy still. He looks haggard & pale. Sleeps fairly well in the earlier parts of the night.

8th Has much more control over himself & seems better - as he gives no outward expression to his delusions now.

George Jamieson Symm.

8th He is taking food pretty well - but is still ill looking & decidedly thinner -

10th Improvement continues - & he talks more of himself pretty sensibly - At the same time it seems that he is simply exercising more control over his emotions - and some of his delusions are still active, notably those concerning his money matters & family - & his subjection to mesmeric influence - He is certain that his brain is degenerating - & this causes him much misery - Though not actively demonstratively melancholic, his countenance is gloomy & depressed.

14th Has been driving out again - getting plenty fresh air, and taking his food well.

16th Decidedly more cheerful to day - & looking better & fresher.

25th Slightly excited this morning & yesterday. Extremely anxious to get away - He was allowed to go & town three days ago to his office & look over his affairs, & on his return seemed satisfied - but he is again today evidently taken up with needless anxiety about his business. He is eating & sleeping fairly well. His weight is 13 stone 10 lbs - about 2½ stone less than before his admission.

28th Hallucinations of hearing seem to be present. He holds conversations in his room with people - & is restless & excited looking & somewhat irritable. He has lately said to Matthew Love that he is sure Mr George Angus is not the same Mr Angus that was here four months ago. He refuses to take some Quinine & Opium prescribed for him.

to page 379.

Wm. Jamieson Beaton.
Cont'd from Page 340.

May 12th. His case was now regarded as entirely a mental one. and he was sent out, to have change of air at the Sea side. ~~RD~~. He went to the Western Infirmary where Sir George McLeod diagnosed delusional hypochondria — Finally he was certified for Gartnavel.

May 12th Beaton remains convinced that he suffers from serious visceral disease and now asks nothing but that after death a P.M. be done so that his friends be convinced that he was not a fraud. Still believes that the urinary secretion does not get free exit but is pent up in his bladder becomes absorbed and so is vitiating his whole system. Maintains that he suffers the greatest agony, that his case was never understood and that he is about to fall a victim to delay in Surgical procedure. Writes frequently to his friends (See letters annexed). When in the ward he refuses to assist in ward work, desires to be allowed to remain in bed till 9 o'clock & rushes to attire just after tea. Maintains a semi-recumbent posture insisting that then the agony is less. Communicative to a degree and pours out the story of his hospital experience on the least encouragement finishing up usually with this statement "I maintain, Doctor that my case has never been understood & had I been operated on in September of last year my life might have been saved. Now I fall a victim to delay" ——

W. J. Beaton
contd.

While that is his condition mentally, it is gratifying to be able to note that he is distinctly gaining in flesh in spite of his belief that all food taken rots in his belly. His appetite is good and he sleeps well.

May 20. No change notable. Resists in the delusions noted above and is intensely free of the belief that his body is a mass of corruption. Continues to eat and sleep fairly well.

May 29. Continues to take his food with some appetite and to sleep perhaps more than he showed but there is no improvement mentally. Perhaps he is more emotional and gets rather more excited when talking about himself.

June 6th Patient's name to day is removed from the Books. His sister called 2 days ago and asked leave to have him home for some hours. This request was granted. He was not brought back and on enquiry Dr Yellowlees was told that his conduct at home had been so good that his friends wished to keep him. His brother came to night for his clothes and confirmed this. He states that he has not relapsed since going home to his delusions. That he sat at table with them, and took his food well and they desired to give him a chance. Consequently his name is removed from the Register and he is entered as

Relieved.

Henry Mc Diarmid
From p. 292.

May 12th a patient who is on the whole better, but whose state shows considerable fluctuation. Sometimes he is fairly well, talks sensibly and has control over himself, at others he is full of complaints often very silly in character and treats anything said to him as meant to insult him. Still complains somewhat of headaches but has now no hallucinations of smell and when he is well, knows and appreciates the benefit he has received from his stay here.
Bodily there is still much to be desired. He is white and still thin but takes his food fairly well and relishes it. He is on parole in the grounds when he is well and as yet has not abused the privilege.

May 20th The Parole has been discontinued and he was advised to go out with some others and do light work in the Garden. This he refused to do unless he were paid for it placing evidently a high value on his services. When it was pointed out to him that the work was for his own improvement and not to benefit the institution he was rather excited and evidently to day he is not so well. In the evening he plays cricket & takes a fair amount of interest in the game. Complains still of occasional headaches and is anaemic looking.

May. 26th. This patient appears to be improving. Last night he was much more alert in the cricket field, and today he has consented to do light garden work. He still looks pale and anaemic, but talks sensibly and appears to be pretty free from his hallucinations.

29th. Put H. Bay on 2mm. & Iron & recently on Porter.

Henry Mc Diarmid.

Saturday June. 6th — Patient was today dismissed.

Recovered

James Proudfoot

Cont: from p 38.

1900, May 1. Just the same: demented, fortnight idle.

1901. April 1. No change to note. B & C fair. Demented.

Dec 16 The same in all respects - idle & demented but in fair B & C.

1902 5th December. There is no change in our Proudfoot. He is demented. B & C fair.

1903 17 Aug. Deeply demented - sits alone all day long & does nothing - rarely utters a word. In fair general health.

1904 March 25 His physical health is very poor - he is pale & thin: Open air exercise with abundance of nourishing food has been tried but not with much benefit. He is demented.

1905 March 25 This demented man is in poor physical health & condition & every effort to fatten him has failed. He is addicted to self-abuse.

1906 March 25 During the past year there has not been any change in this demented mans health either mentally or physically.

1 Dec. The same in all respects - demented & requiring constant care & attention

to p 368.

William Barrowman. 23 years
Admitted May. 12th. 1891.
To Lovat House

The patient is single, a protestant - and has been occupied on his father's farm - in the various kinds of outdoor labours, according to the seasons.
The fathers farm is called Lazabar, by Lochwinnoch.
He is said to have been four months insane, but it appears that it is only a fortnight since that his condition and symptoms made clear to his friends that he was really ill, and requiring medical treatment - It is his first attack & no cause is known.
He is not epileptic - not suicidal, nor dangerous to others. The only trace of H.P. lies in the fact that a paternal uncle of his was some time depressed and changed in character, but not to an extent requiring his confinement in an asylum.
Towards the end of last year he had an attack of influenza, followed by a cold, which clung to him for some time - It is since then that his mother noticed a change in his habits and disposition - apparently so slight that his father and friends had not paid any attention to it, or indeed observed it - But now all who have been recognise his changed state, mentally. His disposition before this is said to have been quiet, reserved, industrious and careful. He did not care for parties or convivial meetings, did not like dances &so forth, but still he by no means shunned social life - but was always glad to meet & mingle with friends of the

William Barrowman.
Cont.d

family. He was a good worker, and took interest in the farm affairs. In money matters he was careful & thrifty. He was very much a "stay at home" at nights, and never indulged in drink, or (so far as is known) in vicious habits.
The change which has of late occurred in his character, & become more accentuated within the last two or three weeks, consists in a tendency to be chatty and excitable - and to be restless in manner, and unsettled generally, compared with his former state. He has laughed & talked in a way quite extraordinary for him, and many gestures and mannerisms have been noticed quite foreign to his usual habits. He lately went to a market & spent somewhat foolishly between £2 & £3.
He has continued to work well, however, and to sleep & eat well.
Two weeks ago he was seen in Glasgow by J.S. Moore, who prescribed Bromide of Potash & Sal Volatile, and a Restorative, fluid for the back of his neck.
Medical certificates show that he has indulged
I in "Incessant talking" & "Unconnected discursive conversation" - also that he has
II "Incoherent speech and delusions," that he does not know where he is, nor the proper reasons for his leaving home. He stated that his "illness was caused by love."
The facts laid stress on by his friends were his "noisy manner of speech," & "change of former simple habits".

William Barrowman
Continued

The first night he spent in the Asylum he was noisy, & rather sleepless.
On examination he is seen to be a tall, well grown lad - but not mature for his years, - some of the awkwardness & want of proportion of growing males still being present. He has lately grown in height considerably. His tissues generally are well nourished - his complexion is florid. The only outward blemish is a papular and pustular eruption about the neck & face - presumably occasioned by the Mistletoe fluid. His thoracic & abdominal viscera appear to be sound. The testicles are extremely small - quite abnormally so for one of his years. & rather soft - The penis is well formed - and developed.
He has an external squint of the right eye - & this has been present most of his life.
The pupils are dilated - react readily to light & accomodation - An Opthalmoscopic examination of the fundus & optic disc seem normal.
The field of vision is good in both eyes.
His expression is somewhat vacant & silly. There is a want of life about it - he looks dazed and indifferent. His attitudes too are listless.
He has not talked much since admission - He answers in dull rather slowly - and his intelligence is blunted or seems so.
He makes forced & purposeless movements with his hands - and wept on one

William Barrowman

occasion without any cause.
His teeth are good & regular - His palate is somewhat arched - but not remarkably so.
His tongue is raw & red, & the papillae are very prominent -
The plantar & abdominal reflexes are sluggish - & so also are the knee jerks -
14th Somewhat noisy & sleepless at night - Looks always foolish, vacant & strange - A suspicion of masturbation has not so far been justified in this case.
16th This morning he complained of headache & also pain in the back - He looked pale & ill - & had felt sick the evening before, he says, & cold & out of sorts. His forehead was observed to be reddened, mottled, hot & frampish, all along the junction of the hair with the skin - & a little below it. His pulse was about 110 - soft - regular. His tongue very raw looking & dry - & some sordes were on it & his lips. He was sent at once to bed - His temperature on being taken was found to be 103·5°. Numerous pustular spots are present on his arms & neck - but these were present on his neck when admitted - but several new ones have appeared on his arms. The forehead is in a condition of erysipelatous inflammation.
His mother was here today & says that while he had the influenza & the cough which troubled him - he spat up once a time a little blood She herself did not see this & cannot describe its color

William Barrowman.
Cont.

16th May. On examining his lungs more thoroughly it is found that there is impairment of percussion note at the right apex - some prolongation of expiration - in front. Behind too just above spine of scapula there is a small area where the resonance is a little deficient. - On the left side too anteriorly, there is some impairment just under the clavicle. There are no rales - & the signs do not indicate more than an apparently slight affection of the apices. Posteriorly a few coarse tracheal ronchi are heard. The condition of the lungs does not seem to have anything to do with his present state. In the evening his temperature rose to 103·8 - His urine is dense, full of urates. Sp. G. 1029 - & there is a slight amount of albumen. (This is the first time it has been examined).
Iron & Mendenhall's Spirit & Paranuclein were prescribed - & Boracic & Zinc in Glycerin to paint over the forehead. The eruption in various areas of petechiae - the erysipelatous condition of his head, the tendency to hemorrhage, the albumen in the urine, with the fever & other secondary symptoms seem to point to some infective blood condition, general & widespread.

17th.

Temperature.	Time.	Pulse
102·8	6 AM.	
	10 AM.	104
103·6	12 Noon.	
104·4	8 PM.	116.

All today he has been much the same - & in the evening the temperature rose to 104·4.

William Barrowman.
Cont'd

Antipyrin gr. X was given at 8 p.m. & the skin acted well afterwards - & he slept fairly well & was quiet.

18th Temperature 101·4 this morning. Pulse 102.
Tongue more moist - less pain & aching - Looking a little brighter. The swelling & redness on the forehead has however extended downwards a little.
He spat a little blood this morning but it is mixed with much mucus & of a frothy color & seems to have origin in the patients throat & mouth & not in the lungs. Nothing further detected on examining patients lungs. He coughs a good deal.
Taking nourishment very well. Antipyrin gr. X at night.

	Temperature	Time.	Pulse
	102·2	12 noon.	
	102·8	8 p.m.	
	102·4	12. midnight.	105.
19th	100·4	6. am.	94 (90 o'clock)

This morning he is better - pulse stronger - no pain - & tongue not quite so baked & dry. Urine shows the merest trace of albumen now.
The swelling & redness has extended down the right side of the forehead & the right eyelids are today a good deal swollen - but the condition higher up on the forehead has improved. The various pustules on his arm are fading in intensity. The mental condition seemed clearer since the first day of his illness - but today he resembles a good deal the condition at the time of his admission.

W Page 355.

John Turnbull

Cont. from page 216

May 16th. He does not comprehend anything & is quite past intelligent conversation.
His pupils are rather small - equal - & nearly unresponsive to light. Reflexes all exaggerated, but not extremely so. He is wet & dirty frequently & probably will become bed ridden before long.

25th. Resting very badly at night & very restless - but thro' the day he sleeps a good deal & is always dazed, stupid looking & helpless. Sulphonal is being given at nights.

June 1st. He has lately had 20 grains of Sulphonal in the evening, with little effect. He is always talkative and restless up to 2 a.m. & then sometimes sleeps for an hour or two, sometimes not. Tonight he is to get 30 grains. He daily deteriorates in every way. His eyes have a peculiar glassy appearance. The pupils are equal & react very sluggishly to light. They are always considerably contracted.

June 16th. Sulphonal was given at dinner time with better effect. as he sleeps usually about midnight & is less drowsy during the day.

27th. Sulphonal in doses of 30 grains at dinner time given as to-day - but it seems to be loosing its effect & all last night he slept none, but was restless & talkative continually. Paraldehyde - which he has occasionally had before - is to be tried.

July 2. The paraldehyde is not suiting very well. Large doses have to be given 3ii - 3iv - often then has no effect.
If he does not sleep he spends all night moving restlessly about his room, talking to himself. He is utterly incapable

John Turnbull.

Continued

of any rational & connected thought, word, & action. Nevertheless his bodily condition has latterly improved a little & he is wonderfully strong on his legs.

July 22nd. Trional has lately been given to him as a sleeping draught at night - not to any considerable use. Doses of 10 & 20 grains were insufficient & before a reliable result was obtained doses of 40 grains had to be given. It seems in these doses to have a stupefying & partially paralysing action on the nervous elements - as he is certainly more uncertain on his legs & more lethargic than when he was taking paraldehyde.

Aug. 12th. Supply of Trional has been finished for some time & there is difficulty in getting more. Sulphonal was tried in 40 grain doses & practically failed. Paraldehyde in doses of ℥VI is however pretty reliable - giving ℥iss at a time.

Aug. 31st. Dose of Paraldehyde is now ℥IV - ℥iss at a time. This is doing very well & he keeps in a very fair state of bodily health.

October 31. Since last note Paraldehyde has been continuously given and it seems to do well & have no bad effects. Without it he is sleepless & restless & chattering. Some days he is more excited, but all the symptoms point to a pretty rapidly progressing G. Paralysis. -

Decr 3rd. much about the same. Paraldehyde still being given and acting well. - -

1892.

Janu. 19. Getting very stupid & failing off in bodily condition. It is almost impossible now to make out what he says. Paraldehyde is still given as a hypnotic & acts well.

Jops. 531.

John Shields.

Continued from Vol. III. - Page. 594.

May 17th. 1891 Last night Mr Shields was noisy & restless & declared that there was a most abominable smell in his room (an olfactory Hallucination delusion). He kicked at his door & shouted - & in the forenoon when asked about it he was irritable & unreasonable.

18th. Refused his breakfast today as he said the food had been tampered with - Again complained of smells in his room - He slept in No 1. last night & there were no smells at all in the room in reality.

June 27th. No change - still stubborn, morose - & expressing delusions about his food as before. Refuses to take part in games & to go out in the evenings.

July. 20th Attacked Mr McL. yesterday, a patient who is the object of some of Mr Shields delusions of persecution - He is to be sent to No 4.

Aug. 31st. Has lost 1 lb. in last 7 weeks. But his weight is 8st. 11 - which is within 2 lbs of the highest he has ever attained.

October 24 Weighed to-day is 9 stones. But of late notwithstanding this his appetite has been very capricious & his delusions & hallucinations are very evident. often he will take no breakfast believing the bread to be tampered with and he complains of bad smells in the wards &c. —.

Decr. 2nd The treatment of this patient is causing some anxiety His suspicious delusions & hallucinations are very active. he believes that people here are in league against him, not only attendants but patients. The food he believes is tampered with, and he will not take it. Biscuits when given to him in sealed

times he will eat. Full of accusations against the Cook the storekeeper &c. Thinks that patients & attendants hound him, follow him from room to room & wont give him peace to sleep. Complains of poisonous smells where he sleeps.

Up till now he has been humoured, he has been changed from gallery to gallery, and given every chance. Last night however he was told that if he did not take his breakfast to-day he wd be spoon fed. He was assured his food would be good and if he did not take it he must take the consequences. To-day he has taken a fair breakfast, and is perhaps not so full of his insane suspicions.

1892.

Jany. 19. Full of his delusions & hallucinations. On Sunday he was again fed with the tube the first time for about 6 weeks when he was only once fed. He believes that people here hound him, but he does not blame them much as he thinks they are only the servants of other Conspirators who have branches of their Infernal Society in all the asylums in Scotland. He believes that certain articles of food are antagonistic to his constitution & that the others are tampered with. He is at times violent & has several times struck other patients believing that they hounded him & followed him from place to place. His B. & C. are fair.

March 15. Since last note he has been fed on 3 or 4 occasions with the tube as he has taken nothing. His hallucinations persist & nothing seems to shake them. B. condition is not very good.

To p. 573

Joe Robert Cowbrough &c &c

From Vol III p. 578.

May 15th When the writer returned to duty in April this patient was quiet but since then he has been very excited & only now is he beginning to settle down. The excitement was at one time extreme and lasted for a fortnight & was of the same character as is noted in the earlier part of his case. The Restraint book shows him to have been in Seclusion on 6 different days and on one occasion he had locked gloves. As usual he was very obstinate & abusive, full of accusations against the attendants and very difficult to manage. The fear of his hurting himself was only equalled by the fear of his hurting others. He slept in the Infirmary Ward when it was at all possible to keep him out of the Padded room and on 2 occasions he assaulted a patient - quite inoffensive - who slept in the next bed. - See Account Book - His extremely suspicious nature rendered it very difficult to get him to take medicine by the mouth and Hyoscine has been twice given hypodermically

One evening at 7.5 o'clock he had 1/100 gr. 5 minutes previously his pulse was 84. At 7.15 it was 92 & at 7.20 it was 100. He was lying in bed slightly supported on his bent arms, his shoulders & head being thus free according to a favourite habit he was moving his head up & down extending it one time till his face looked straight up & then down till his chin touched his sternum - His movements he made in accordance with a divine command & he believed that he heard his brother speak when he did them. They were rhythmical and wonderfully steady averaging

Robert Cowlrough.
contd.

about 20 per minute. There was some undue prominence of the thyroid noticed.

The 1/100 gr has no effect on him and he contd. excited and talkative. at 7.50 the heart was again at about 80 and the skin moist. at 7.55 he was given 1/65 of a grain at that time pulse was 86. at 8 o'clock it was 98. at 8.10 it was 106 and then it was observed the Hyoscin was telling. The movements alluded to became less regular, the head resting for a few minutes now & then on his pillow & the eyes closing now & then. The struggle between his desire to keep awake and the drug terminated at 8.15 when he fell asleep and slept for 3 hours. Pulse was not again taken till he awoke when it was 86 and good. - at the same time as Cowlrough has in another patient, somewhat less acutely excited had 1/100 gr. He fell asleep in 10 mins and slept 6 hours —. When Cowlrough awoke from his sleep he was more excited than before and the rest of the night he spent in the Padded Room. Hyoscin has not been continued -.

at present he is fairly quiet but the least knife seems sufficient to set him off. He accuses the A.M.O. of unlocking his letters, continually calls out for D^r Yellowlees or Police if he is even spoken to and his conduct and condition are such as to require constant watching and the utmost patience on the part of the medical officers and attendants. He has taken his food fairly well & though of medium stature his physical strength is very great.

C/p pg. 383

William Barrowman
from 348.

May 20th This morning at 6 am. temperature was 101·8
at 12 noon. - - - - - 103·6
- - evening at 8 pm. 104·
The rise in temperature was associated with marked spread of the erysipelas down the right side of the face, the right eye being completely occluded. Several vesicles are present on the cheek. Tongue - pulse + general state much the same.
He sleeps + rests pretty well - + is quiet - but his mind at present seems dull + inactive. He does not know where he is - takes no interest in anything.

21st. Temperature at 6 am. 102·2.
.. - - - - - 12 noon. 103·6 Pulse 96.
. - - — 8 pm. 102·4. Pulse 88
Face dusted with Boracic Acid, Zinc Oxide + Starch.
Iron increased to 20 m̄ every 3 hours.
Considerable dullness at the right base of lung this morning + by evening this was more marked - with diminished breathing + crepitations of fine character - bottom inspiration + expiration. but chiefly inspiration - + also a few coarse ronchi.
Temperature steps dipped to back.
Left eyelids slightly swollen tonight.

22nd. Temperature today ranged from 98·4 to 99·8.
Spitting some blood tinged sputum - but tendency to congestion at bases of lungs is less

23rd Better decidedly Temperature normal. Swelling of face much better but eyes let still very low.
Pulse weak - skin cool. +

William Barrowman
Cont

In the evening the right lower eyelid was lanced & a considerable amount of pus escaped.

25th Abscess in eyelid still discharging - & the left eyelids are still ~~closed~~ a little swollen. But Wm is convalescent - Temperature normal. He is decidedly torpid & apathetic.

28th A large boil has developed on his left leg - which was poulticed today & burst - matter discharging. Wm is improving steadily. Mentally for the last day or two he has been brighter & clearer & more alive to things generally. There is a good deal of tremor still about the facial muscles. Tongue moist - but still somewhat raw looking.

30th A boil has formed & burst in the occipital region of the scalp - He sleeps & eats well. tongue ~~good~~ clean & moist -

June 1st He was up today & yesterday - & out in the sun for half an hour today. There is still a good deal of tremor about the cheeks & mouth - but less vagueness & dullness in his manner. He is sensible & fairly bright.
He is getting a pint of porter daily - a quinine & iron tonic & several eggs daily.

6th - Out a great deal now & walking in the garden. He is certainly improving.

27th The quivering about his eyes, cheeks & mouth is still present - as the only sign of any nervousness still remaining But he seems Wm in the enjoyment of good bodily & mental health.

July 4th Has gained 9 lbs since June 4th - which speaks for itself.

July 16th Nothing exciting with. Works well daily - Mentally & bodily considerably very good.

July 23rd Discharged. today - Recovered

Re-admitted Nov. 28th 1894 vide Vol VII p 246.

357

Michael Hughes

cont: from Vol III p 18

1894 Jan. 2nd	One of the workers in the West House - demented and one in whom there has been no change for a long time.
December 29th 1895	Unchanged. B.H.& C. fair.
Dec. 20	Continues to work in West House and is little changed. He is demented & enjoys fair bodily health.
1896 Oct. 6	D.S.2 There is really nothing to note here His bodily health continues fairly good
Dec. 31.	Unchanged & a fair worker under direction.

Transfered to Gartloch
Relieved
November 12th 1897

Francis Conley

From p. 334

on which different interpretations might be placed. He looks better but still clings to the delusions of poisoning &c. before he was brought here.

June 8th Complained to-day of pain & stiffness in his neck, doubtless due to cold. When this probable cause was mentioned to him and a cure suggested he smiled, saying he knew better and that it was caused by his enemies, who not content with annoying him by day, were now putting all sorts of aches & pains on him. Mentally then, he is no better. His bowels are now however acting better and his appetite is good

June 10. Refused to speak to the Visiting Lady to-day and evidently on account of some delusions.

July. 3 For a few days he looked brighter and spoke more freely. but to-day he again refuses to speak and sits gloomily with his head down. brooding over something. When questioned he refuses an answer but occasionally his eye lights up as though he ~~would~~ could tell you of something but won't.

July. 13. For the past few days has been specially gloomy & restless. He appears to have strong delusions but he won't give vent to them. He often sits or walks about clutching his throat. He is being closely watched as his condition suggests a possible violent attack. but he has done nothing of that sort yet. His B.H.C. is good.

Sept 30th. No improvement - Reticent. depressed. & harbouring delusions as before -

Nov. 2nd. Lately he spoke to visitor and angrily asked him to "Begone", with his "bloody murderous heart" - & shook himself roughly out of reach. Since then he has not spoken - but maintains a moody silence.

P.T.O.

Francis Cody.
from page 358

1891
Dec 23rd Not quite so repellant in manner - but never speaks. Walks about always with one hand on his forehead - & often makes curious smacking noises in his throat. Has many delusions about his head - persists in — & about the officials. Bodily health good.

1892
April 7th Rate of board reduced. He is less surly. But still most reticent - & entertains his old delusions. His temporal muscles are much hypertrophied from his habit of chewing. His general muscular system is well developed & he is a strong built man.

Aug: 8th Not to be trusted. He turned fiercely on the writer lately threatening to strike him and calling him a "bloody murdering villain". He was greatly excited. This is a rare occurrence on the whole with him - He is very taciturn - & doubtless being noticed. He has many delusions but keeps them to himself.

Dec. 16th His manner has been more agreeable lately. He won't express any of his delusions. He dislikes being taken notice of. He used to ~~he~~ have the habit of making a peculiar and disagreeable noise with his mouth like a pig grunting but this he has stopped.

1893

Feb. 6th Yesterday when walking round the grounds with the other patients and when near the farm he asked to be allowed to go to one of the outside W.C.'s. An attendant accompanied him but he made a bolt for the wall instead and got over it on to the railway. He was however easily overtaken by the attendant and brought back with some difficulty.

March 20th Been surly of late and sometimes fiercely demanding to get away.

James Lusk

From p. 262.

June 11. Still working regularly in the garden and in the evening playing cricket, at which game he has had considerable practice. It would be difficult to certify him but in some little ways he shows mental instability. When playing cricket unless kept at bowling he inclines to wander away and must be looked after. The garden attendant says that his work is rather spasmodic. Nevertheless he is improving and is at all events keeping his delusions to himself, and declines to talk about them when he is spoken to regarding them. He is practically cut off from home communication not being allowed to write letters. His bowels are rather constipated. Otherwise his health is excellent and his appetite good.

July 3. This patient is in good health and looking brighter. He seems to be better able to keep his attention on the game now when playing cricket. As a rule he gives no vent to his delusions but on talking for a time the other day he told Dr Oswald and afterwards the writer that he still believes that he had had a special mission to arrange the strike &c. He knew that we all thought it nonsense but he believes it, showing that the old delusions were still in force though hidden as a rule. His B. H + Co. is good.

Aug. 1. James Lusk was today removed by his ~~father~~ brother. He is in better health but his delusions are still present though not spoken of.

Discharged. Relieved.

Henry Newman Smith.
Cont. from page 328

June 1st. During the day he has been a little quieter - and less restless - his skin more healthy - pupils less dilated - & his hand a little steadier - But still his pulse remains abnormally rapid - & his speech most rambling & incoherent & frequently obscene -

June 8th. Has not again had Paraldehyde - has not had it now for ten days - and five nights ago he slept sound for six hours - But last night he was very restless - & wet his bed & his room - and during the day his boisterous and restless manner & talk still continue -

13th. His remarks have lately been most lewd & obscene - & his behaviour degraded in every way - He is taking just now Cannabis Indica, 3iv thrice daily - & is sleeping fairly well at night. Today he was sent to the East House - to see if the change will have any moral effect on him -

July. 3. This patient is not much better, though his language is less obscene, but still generally pretty well interlarded with oaths. Blistering the back of his neck does not appear to have done much good. He was quieter for a time but that was because his thoughts were taken up with his neck. A certain amount of effect his transference seems to have had as he seems to be more easily managed than he was in the W. H. and at least his language he does not annoy the other patients in the same way.

July 10. He has been getting Sulphonal of late & is very much quieter & better under its influence. His left ear has been discharging of late owing to his irritating it & poking things in & he gives some trouble & constantly

Henry Newman Smith.
cont.

getting pieces of tobacco + rubbish + putting it in.
He is otherwise in good B.H. + C.

Aug. 10. This patient has improved very much. He is quiet and reasonable now. talking sensibly and altogether looking a different man. His Sulphonal has been stopped and he has been transferred to No. IV.

Sept. 5th. Mr Smith is still in No 4. and is quiet in behaviour, & manner. - his habits now apparently being clean & good. He sleeps pretty well. & takes his food well. He is mildly depressed now - a very different condition from his former maniacal condition. He regrets at times his previous vicious habits & alcoholic excesses - and this adds to his depression - He is usually brighter by the evenings. but as a whole his manner is reserved and he is not very sociable.

Nov. 2nd. Improved & generally more cheerful. Was pleased to see his wife the other day. tho' he was somewhat emotional during the interview. Has had a cellulitis over the right tibia during last few days, but it is now resolved.

Dec. 23rd. Very quiet - & clean & tidy. Always glad to be spoken to. There is want of mental activity - his mind

1892 seems blunted, intellectually, & he is emotional -

April 7th Mental the same. He is now as well as he can be. but his mental level, & moral content, are not of much value.

Aug 9th Working in the garden - but not much good at it. He is quiet - but blunted & weakened mentally -

Dec. 15th Sprained his left foot about a fortnight ago which has kept him indoors. It is nearly all right now. He is quiet, agreeable but unintended. B.H. & C. good

To p. 434.

Edward Johnstone

from pg 184.

2nd June. much more markedly on the right are wasted. There does not appear to be any spastic condition of the legs nor can any ankle clonus be made out. The knee jerk on both sides is normal. Sensation also appears to be pretty normal though it was a little more doubtful about the fingers of the right hand. There is quite marked fibrillary contraction of both biceps on tapping the muscle sharply. The muscles of the chest both pectorals and intercostals are more wasted on the right than on the left side. and possibly largely in consequence of this there is less movement of the chest wall in breathing over the right subclavicular area. On percussion there is distinct dulness all over the right apex. though there is nothing very much wrong with the quality of the sounds on auscultation they are only faint. The pupils are sluggish but equal. Patient answers simple questions pretty intelligently though slowly. He has no spit. and takes his food well. He is occasionally heard to cough but it is very slight. After examination patient rose and dressed himself fastening his clothes apparently without much trouble.

July. 3. Patients condition is much as at last note. His health is only fair & changes but little. His condition is very poor, and his face is the best part of him.

July. 10 Some swelling has been noticed of this ~~patients~~ feet & ankles for some days. but there is no albuminuria & his always feeble circulation quite accounts for it. His emaciation is rather greater & is more equally marked over both scapulae. He takes his food very well & seems to be pretty comfortable. though there is little doubt his poor condition is greatly increased by his habit of self abuse.

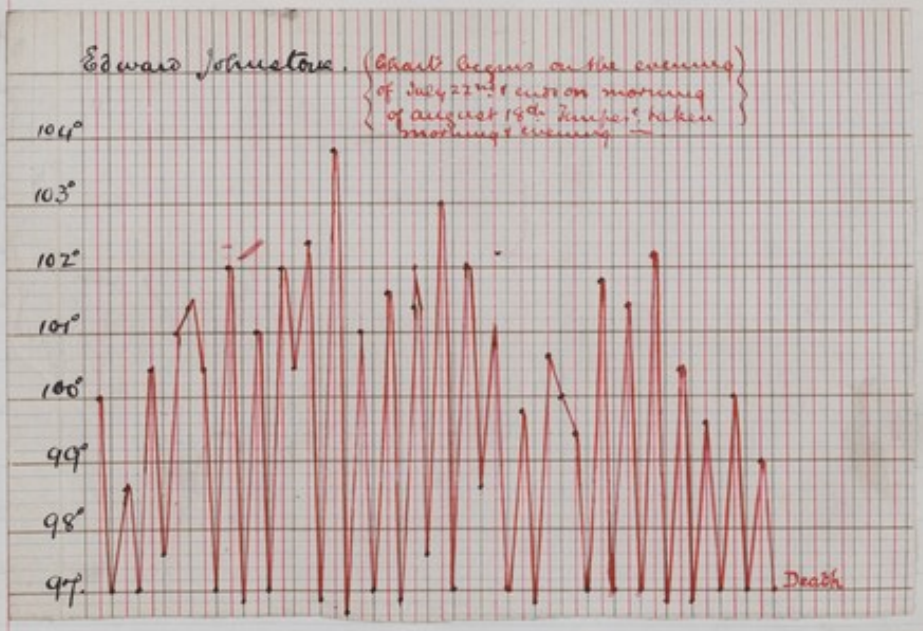
Edward Johnstone.

August 18. Patient dies to day ab. 1.50 after being much worse than is previously noted for about one month. Symptoms of pulmonary mischief were at that time recognised tho they must have been present for sometime These rapidly advanced the lung fast breaking down and to day he dies. The symptoms presented nothing peculiar and his case calls for no further note. No P. M. Temp.e chart appended.

Died

No P. M.

Phthisis Pulmonalis



William McElwraith

from pg. 570. Vol III.

June. 4th 1891. There is no improvement in this patients condition. His bodily health is good. but mentally he is as weak as ever. His dress is as fantastic as ever and he still refuses to converse or hold any intercourse with the Officers of the Asylum. His delusions with regard to a Masonic conspiracy against him seem as fixed as ever. and he is apt to become violent if anything irritates him. as when an answer to a question is insisted on or an attempt made to force him into talking.

June. 12th When Dr Oswald said Good morning to him and asked how he was to-day this patient started up in an excited manner and told him that he was well enough and did not wish any of his "Masonic Calvinistic or Spiritualistic muck." and when asked to explain himself he said that if we did not know what he had said he certainly was not going to trouble himself to repeat it. His appearance is as peculiar and conceited as ever.

June 16. a note showed the manner of his mans destructive habits. When clothes are sent him he destroys them especially if they are underclothing. His "pants" he cuts across by the knees and of the lower portion he makes gaiters adorning them fantastically with buttons. His conduct is very high handed but order have been given that he be not allowed to fantastically array himself in that way.

July. 3. This patients condition bodily and mentally is much as usual. if anything he is more inclined than ever to notice the Officers for purposes of insult. and he has a very large vocabulary of abuse. His appearance and dress is as fantastic and peculiar as is permitted him.

William McIlwraith.

Sept 30th Cont[inued] ... date, & his bearing & all ... ctory. Asked the writer ... Skillet Freemasonry" of the ... good.

... full of delusions regarding ... letter of this date is

... delusions of unseen agency, ... gant & insulting in ... s.

... eals & the writer. ... , & then he retires ... sulting & insane ... in. But his inclinations ... lucer strongly are

Wm McIlwraith / Calton / Dec 23rd 1891

Oct. 24th Since writer came on duty Mr McIlwraith's manner has considerably changed towards him. At first he was affable and ready to enter into conversation. He referred to this place as being a hot bed of Freemasonry. After a week or so his manner became more strained and now he never speaks unless to abuse everybody connected with the place.

Dec. 15th His general health and condition are good. His manner, air and gait are even more vain than before. His walk is like that of a peacock: he doesn't walk: he struts. He ~~often~~ seems fond of talking but as he doesn't care about being contradicted he generally talks to a demented patient who simply never answers. When any of the officials come in he often tries to appear to be in earnest conversation with this demented patient. When he does speak to any of the officials it is only to use threatening

So p. 402.

William McElwraith

from pg. 570. Vol III.

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William McIlwraith.

Sept 30th. Continues in exactly the same state, & his bearing to all the officials is haughty & insulting. Asked the writer lately if he had observed the "hellish Freemasonry" of the house. Is so forth. B.H. & C. good.

Oct. 23rd " Haughty - & abusive as ever - & full of delusions regarding plots & conspiracies. A letter of this date is annexed.

1892 April 7th " Just the same. Full of delusions of unseen agency, persecution - & most arrogant & insulting in manner to all the officials.

Aug. 9th " Just the same. He never speaks to the writer unless talked at for a little, & then he retires uttering curses, & using insulting & insane language - He is very vain - but his inclinations to adorn his person - to dress strangely are kept in check for him.

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So p. 402.

John Ross.

from pg 165.

June. 4th There is still a great deal of motor excitement about this man. He quotes Latin verses &c in a loud tone and sometimes asks a question; getting very excited if an answer is refused or not given at once. and using very strong language. But although excited in this way he is very harmless ~~any~~ and gives little trouble. He is thin but in good bodily health. He has grandiose delusions varying very rapidly. at one time he possesses all the wash hand basins in the wards. at another the whole place belongs to him & or he is God Almighty.

July 1st Removed by his wife 6. night on her own Responsibility

Relieved

July. 9th This patient was re. admitted to day on an emergency certificate.

July. 11th As patients friends neglected to complete the necessary legal forms patient was sent home to. night. 952.

Infirmary.

James Proudfoot

1907. from p 368.

1 May. He is a confirmed masturbator and his general health is very poor in consequence. He is quite demented.

1908

April 3 There is no change to report in the patient's condition. He is quite demented, dirty, wears a bib and suits. His general condition is poor.

Sept. 14 For the past month Mr Proudfoot has been kept in the Sanatorium in bed and has made considerable improvement in his physical condition. He is quite demented

1909

March 8 There has been no change to record in the mans case. He had been losing weight and was tried for a time in the

1910 Sanatorium. He is quite demented. Physical condition is poor.

May. 10. Mr Proudfoot is a thin retiring man shunning observation. He is in No 3 and does a little work but he masturbates very frequently. He takes his food fairly well in the large dining hall and sleeps fairly well as a rule.

Oct. 21. Mr Proudfoot's general condition is poor and he is very thin. There has been no change in his mental or physical condition during these last six months. He is quite demented but does a little house work.

1911.

September 12th This patient is still in the same miserable condition. Keeps his head down, has a frightened look on his face, and seems to fear detection. He eats a great deal, steals from the other patients' plates and is still very thin & badly nourished: he masturbates frequently: he does not speak to any one.

Folio 369.

James Moffat 75 years.
Admitted June 3rd. 1891 Merchant.
3 Victoria Terrace. Mount Florida.

David Robertson
from p 160.

1907. Dec 16 Mr Robertson is deeply demented. He works outside with the coal man. B.H.&C fair though he has been getting thinner of late.
See vol VII 550.

James Proudfoot.

1912.
May 24th This patient goes about with a furtive hunted manner suggestive of delusions of persecution. To these he does not give expression however being too demented to express himself in words. He is impulsive at times and has been taken from the indoor working party on this account. His predatory habits continue but his physical condition is very poor.

August. This patient is at present in bed with an eczematous condition of his skin. He is unaltered mentally and physically otherwise. He is a small ill nourished individual with atrophied muscles. His reflexes are normal and no abnormality can be detected in any system. His teeth are defective and decayed while his tongue is furred. He is very demented and at times impulsive. He goes about in a hunted manner and is often in mischief. He steals anything he can reach about this person. He is in No III during the day and sleeps in 6/4. He has his meals

See 87.

James Moffat.

This elderly gentleman was admitted to the West House on a certificate of emergency at about 9-30 pm.
He had been driven to the Asylum in a cab from his home. He is 75 years of age - married - a Protestant - & a merchant & trader.
He has been mentally deranged for 2 years - has been gradually failing - but for the last 10 days his mental symptoms have been much worse. He is not suicidal - epileptic or dangerous to others.

I. The Medical Certificates show - that he is "rambling & incoherent in his talk. has delusions; believes he is in a lunatic asylum & requires restraint." & that he is "very excited & cannot be kept in bed at night - struck his daughter".

II "Imagines that a man was appointed to watch him & others lest they should run away with £20,000 or £30,000 - He talks in a rambling confused way - He is restless & unmanageable & becomes easily excited."

After admission he complained of being somewhat cold & tired with his long drive - He was restless & looked anxious & disturbed - but was quiet & reasonable - expressed his willingness to go to bed - He went to No. 1.
In conversation he said that he had been under medical treatment for some time & had had a great many medicines - : that he was suffering from nervous disorder - & was not getting better. He seemed to indicate that he did not know where exactly he was going when he left his home, but that now he understood where he was, & hoped to get benefit from his stay here. His manner was unbuttoned - & this with his restless manner & expression

James Moffat.

seemed to indicate that he had lately been labouring under excitement. He was given some warm beef tea on going to bed. About 10-30 - an hour after he had gone to bed newly - he was found extremely restless & quite sleepless. He complained of his room, of the bed, of the blankets - of the pillows - nothing was right. He said he was very cold & could never get warm in a bed like that - whereas his skin all over, including his feet, were warm, & he had on five blankets - & was lying on a blanket - & was clothed in a warm flannel shirt - His pulse was beating at about 85 - it was regular, rather soft - of fair volume. The vessel (radial) felt somewhat hardened under the finger.

There was no oedema of his feet - no cyanosis - He had a cough of rather hard nature, character, pretty frequently, without expectoration - His cough was vigorous & loud. He stated in reply to a question that he was not, ~~a user~~ feeling short of breath & never did so. The ear of writer was applied to the cardiac regions, (without divesting patient of his shirt) but no definite result was obtained, & the exact sounds of the heart were heard, & the presence of any loud valvular murmurs negatived, no accurate idea of the state of the heart & large vessels was obtained - as it was not thought necessary to disturb the patient by a rigorous examination at that time of night - so soon after his arrival - especially as he was restless & impatient. A dose of 3ij of Paraldehyde was given & in about

James Russell

ten minutes he began to doze & did soon asleep.
He slept quietly till about 12-30 a.m. He then awakened up - & resumed his complaints. He was quite warm and a warm bath had been at his first entrance he was last seen by writer. He seemed in a state of considerable mental grief & anxiety at his condition & groaned about it freely. "This is a new phase of life for me - Who would have thought I would ever come to this" & so forth. Longing for his own room & his own bed. His pulse was regular & beating steadily & satisfactory. He lay down & seemed as if he might sleep again - but he continued pretty restless till 3 a.m. when he fell asleep till a few minutes after 6 a.m. It seemed that he then awakened & talked & planned as usual & nothing was noted by the attendants about him that was unusual. He did however complain of severe pain in his left side, but not of severe character. He was to get some warm beef tea & the attendant went to prepare it, leaving another attendant in the room. Shortly after this the attendant in charge observed that the face of the patient had changed - was very pale - in fact that he was dying. The writer was called & was present immediately - & found him dead -
The death was extremely sudden & in every way unlooked for & seemed to have arisen from Cardiac syncope -

P.M. on June 6th. See Records Page 57.

June 6th Death from Rupture of Left Ventricle

David Scott Carby Co.
Cont. from page 314.

June 4th

This patient has seemingly regained to a considerable extent control over his emotions & by his own account has lost his feelings of nervousness & depression - He talks of going away to the sea side - or for some change of air - At the same time while outwardly more cheerful & less emotional there are few material indications of improvement in his general condition - His bowels no doubt are now capable of regulation by medicine - without trouble - either by a podophyllin pill or a draught of Aloes decoction - & his tongue & stomach are in good order - But he is seldom without some little complaint at the morning visit - & takes a great interest in his bodily state -
The ulceration on his leg is not healed yet - & an accident to his wound skin, causing an abrasion of the skin, has developed into another very similar small ulcer - but these give very little trouble & are kept carefully clean - His sleep on the whole is better - & he has had some fair nights - but quite recently, (yesterday & the day before) he has not slept at all well & has been very miserable during the night, crying & despairing about himself -
He has complained of an uneasy feeling about his throat - & has asked for a throat gargle - Nothing in the fauces or Pharynx to account for this feeling is noticeable - except that the uvula is somewhat long & relaxed - This morning he said that he had had an uncomfortable feeling of weight & oppression in his chest - high up - last night - She seems to be anxious about this -

David Scott Carlyle

He admits that walking fast or going up stairs makes him a little short of breath. He has no cough or difficulty in walking - at home -
His chest is examined. The apex beat of heart is displaced outwards & downwards mostly outwards - it slightly diffuse & heaving & is irregular & occasionally intermittent - There is a general prominence in the region of the precordia - No abnormal pulsation is seen. On percussion the absolute dull area of the heart is increased - & the upper margin of relative dulness is slightly increased upwards - & the relative dulness of the right border is decidedly increased towards the right - There is a dull area corresponding in the region of the Manubrium sterni & a little to the left of it also - distinct from the cardiac dulness - On auscultation the first sound at the mitral area is a little higher pitched than normal, thus approximating to the second sound. & is followed by a faint but somewhat coarse systolic murmur - This is not conducted to axilla - & is heard better towards the base of the heart - In the pulmonary 2nd sound is reduplicated faintly - The 1st sound at tricuspid area is clear & a little prolonged -
Over the sternum & at the aortic area the 2nd sound is distinctly audible & followed by a short distinct murmur - There is no systolic murmur heard at the aortic area - The signs point therefore to some hypertrophy dilatation of left ventricle - & of left auricle - a general increase in the cavities of the heart - the primary lesion being an affection of the aortic valve causing incompetence - (atheromatous degeneration)

David Scott Carby 6

June 4th 1891 There is no history of rheumatism. The pulse & the general symptoms & the condition of the heart do not indicate a very serious lesion - or a rapidly progressing failure of the organ. There is also indication of a dilated condition of the aorta - in its second part - for as well as the dullness probably due to this, it is noticed that the heart sounds & the diastolic murmur are abnormally well heard over this area - non-cardiac in position.

He states that he is passing much more water than usual.

13th. For the last day or two he has been more restless & stupid. & his nights have been very bad. His general condition is poorer & his face is paler. Last night he had 10 grs Sulphonal - but it had no effect - & he refused to take any Paraldehyde later on. At night - time he is constantly getting in & out of bed - & is very confused. This morning he was weak & ill looking & stupid & restless.

His urine is healthy.

June. 18. Patient has slept better with 30 grs Sulphonal for the last two or three nights & has more self control. His leg. (shin) which he hurt in getting into bed one night his post slipping is a good deal inflamed but is improving under simple dressings.

June. 23. Patient was today removed by his friends. He has been getting very silly & emotional & is in weak health.

Dismissed.

David Scott Carlyle

Discharged No better.

1891.

Decr. 20 His gentleman's death is seen recorded in the Daily Newspapers of this date.

377

Francis Napoleon Bingley Groves. Benson. 50.
c/o Jn° Remington - Palermo - Bray - Co Dublin.
c/o Thomas Remington - Palermo - Bray Dublin. Admitted. June 6th 1891.

This patient was admitted to the West House.
He is 50 years of age - married - a late Captain in the 99th Regiment. The existing attack of insanity is his first & has lasted for 2 years.
The supposed cause is Hereditary influence.
He is not epileptic or Suicidal but may be dangerous to others.
His father was insane for years & died insane.
He has been under treatment in several places. lastly at Dr. Pattons, Finglas, County Dublin.

I. Medical Certificates show that he is "incoherent" & has "auditory hallucinations, violence & temper."

II "Mistakes the identity of people around him - speaks very forcibly - Mind evidently greatly weakened - Is totally unfit to guide himself."

He was brought to Portrane from his retreat in Dublin. On arrival he seemed to have no recollection of his voyage - to feel no surprise at his change of surroundings - no desire to return amongst familiar faces. In fact all the change of surroundings both of place & people produced no impression on him - exemplifying the complete inactivity of his receptive centres & his memory.
His conversation was quite incoherent & forcible - his manner the same - He seems to mistake the identity of everyone near him - & cannot identify the same person five minutes after he has seen him.
His bodily condition seemed fair - & no evidence of organic disease was detected.
His speech is slightly tremulous & stammering at times.

F.W. B.G. Benson - 50.

Cont.

There is often a good deal of tremor about his face & lips & eyes. His hands are also tremulous. His gait is a little uncertain & he stoops somewhat.
As a rule he sits quietly enough, perfectly indifferent to all around him & often difficult to arouse - & his attention difficult to engage. When he does recognise anyone's presence he commences a perfectly insane number of questions & remarks. His expression is dull & changes very little. His mood alters a good deal. At times he is affable & all smiles - at other times he is irritable & inclined to be violent.

June 7th. Sleeps indifferently. Takes food fairly well & looks after himself. Rather noisy & out of temper this morning.

9th. Left pupil a little larger than right - especially when contracted. No irregularity.

13th. He is up in the A. & gives very little trouble. His condition remains the same.

July 22nd. No change to note here. He continues in the same bodily & mental state. Is always excessively excitement. He is easily managed. Is at times noisy & disinclined to talk - & then he swears a little -

Dec 2nd. at times surly and silent, at others talkative & pleasant. B. H.T.C. good.

1892.

Jan. 19. a demented patient with periods of excited restlessness. B. & T.C. good.

March 15. J. S. 2.

Aug. 9th. Unchanged.

Oct. 3. No change. Demented. B. & T.C. good. Sop. 584

George Dawson Swann

Contd. from page. 338.

June 8th. He has not ceased to ask daily to get away - and argues his case with considerable reason and apparent sanity - & only occasionally evinces a morbid emotionalism - which however is marked only in its degree - & has undoubtedly a rational cause in his deprivation from his old life & the society of his friends. But when alone or when excited, as he sometimes is, the undercurrent of suspicion & of apparent delusions comes to the surface - but he now seems to be aware that any loss of control on his part tends to disfavour his case in the eyes of the Medical attendants. While his voice may sometimes be heard in loud protestations of grief & despair in his room. he appears, if the door is opened, fairly quiet & indifferent - & tries to appear cool & reasonable.

June. 20 Patient is still heard talking aloud with imaginary persons, but talks very reasonably about himself (when spoken to). He is very anxious about his affairs & will not believe that they are well managed for him. He still refuses to interest himself in anything, & is constantly glooming & brooding walking up & down his room in a restless unhappy way.

27th. Today he was allowed to drive with his friends & tomorrow he is to drive with them - He is probably to be allowed soon to go to the coast with them to see if a change will improve him - His mental condition is not really any better but his bodily state is improved & he has gained about 10 lbs in weight in the last 6 weeks - & looks fresher & better.

George Jamieson Stuart
Continued

June 28th — This morning, after spending ~~the day~~ yesterday with his friends, he was certainly more cheerful & collected than he has been - smiled actually. He looks forward to getting out soon. He would seem yesterday, when amongst his friends, to have been very emotional at times.

July 9th — Today he was allowed to go home to his friends for good - on their responsibility. He is really better - agrees no expression & delusions - & says he now has no cause for depression & suspicion. At the same time his mental condition is by no means stable - but doubtless the change to the seaside will benefit him & he may ultimately recover.

Discharged - Relieved.

John Orr Dickie

Cont. from page 158

June 1st 1891

[illegible] left is hardly detected - does [illegible] he sings very slightly on listening [illegible] a straight line very well - The [illegible] Vacantly inpaired. [illegible] silly - must Reasoned with [illegible]

Letter of Lady 24th

[illegible] Patients weight has not [illegible] He hardly looks as well as [illegible] ed natured & facile - [illegible] for - He has marked [illegible] everything he can - [illegible] declaring that the whole [illegible] been writing letters addressed [illegible] ing and with many of the typicae symptoms of G.P. - .

Decr. 2nd Not much change here. Disease not actively progressing but very destinctly present.

1892.

January 19. Has periods when his grand delusions are very present. at other times he is duller & not inclined to talk. B. M. & C. good.

March 8. No change. Rather interfering at times and stirker on slight provocation. Disease not actively progressing but were marked - .

May 9th. No change.

October 3rd The disease advances slowly, but all the symptoms of G. P. are well marked in his case. He is becoming more facile than he was & agrees with

John Orr Dickie

any statement reflecting on his honour & glory, without the least hesitation.

Decr. 16 — No increase in the progress of the disease which is in fact almost stationary. He has grand ideas & the usual marked speech of G. P. Also he is tricky, hides things, destroys articles belonging to other patients &c. He is also at times angry, strikes others & has to be controlled. His bodily condition is good —

1873.

Jan. 31. A patch of eczema on the right thigh troubled him recently but is now better. There is no active advance in the disease —

July 22. Yesterday he had a slight congestive attack becoming very faint & sick, and almost unconscious for a minute. He recovered quickly but in the evening there was a distinct increase in the thickness of speech & the grasp of both hands was feeble, but equally so. He retained his urine for some hours & was not sick. To-day he is all right again he says, but he slept none & was restless at times —

Septr. 16. Has had 2 more slight congestive seizures not accompanied by convulsion. They have left him very stupid ——.

Nov. 30. About a fortnight ago he got one of his hands burned when lighting his pipe, & his allowing it to come in contact with the bar of the grate. It is now quite better. He is passing into the 3rd stage & has become very stupid & at times restless. His bodily condition is still good & he eats voraciously

Joh. 309. Vol VI

John Orr Dickie

Cont. from page 158

June 1st 1891. R. reflex patella is absent & left is hardly detected - His gait is steady enough - but he sways very slightly on turning - does not walk along a straight line very well - The basis of support is widened.

July. 13th. Taste & smell are not apparently impaired.

He is still good humoured & silly - much pleased with himself.

July. 24th. Letter annexed.

Aug. 31st. During last 7 weeks the patients weight has not altered - 12st. 7. lbs. He hardly looks as well as he did however. He is good natured & facile - & full of grand ideas as before - He has marked Kleptomania - & pockets everything he can.

Sept. 29. Has been rather "high" of late, declaring that the whole of Saxelbank is his. He has been writing letters addressed to himself. very facile getting and with many of the typical symptoms of G.P. - .

Decr. 2nd Not much change here. Disease not actively progressing but very distinctly present.

1892.

January 19. Has periods when his grand delusions are very present. at other times he is duller & not inclined to talk.

B. P. & C. Good.

March 8. No change. Rather interfering at times and stirker on slight provocation. Disease not actively progressing but well marked - .

Aug. 9th. No change.

October 3rd. The disease advances slowly, but all the symptoms of G. P. are well marked in his case. He is becoming more facile than he was & agrees with

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Jan. 31. A patch of eczema on the right thigh troubled him recently but is now better. There is no active advance in the disease —

July 22. Yesterday he had a slight congestive attack becoming very faint & sick, and almost unconscious for a minute. He recovered quickly but in the evening there was a distinct increase in the thickness of speech & the grasp of both hands was feeble, but equally so. He remained his usual for some hours & was not well. To-day he is all right again he says, but he slept none & was restless at times —

Septr. 16. Has had 2 more slight congestive seizures not accompanied by convulsion. They have left him very stupid ——

Nov. 30. About a fortnight ago he got one of his hands burned when lighting his pipe, by his allowing it to come in contact with the bar of the grate. It is now quite better. He is passing into the 3rd stage & has become very stupid at times restless. His bodily condition is still good & he eats voraciously

Joh. 309. Vol VI

Robert Cowbrough

from pg. 354.

June. 8th. 1891. Since last note patient has varied a good deal. For some days he has to be kept apart from the other patients as he was inclined to be violent. When thought to be getting better he was taken into the airing court alone & when sitting quietly in the day room with the others he suddenly made an attack on another patient. Since then he has been quiet, but with an uneasy unsettled expression in his eyes, till Saturday afternoon (the 6th) when he became excited & was put to bed for that night a few minutes earlier than usual. On Sunday morning he refused to dress himself & kept up a continual talking to himself. Taking his food however pretty well. Today he is quieter, that is he is talking less but still appears as sullen and inclined to be violent on interference of the visitors. His bodily condition is good but mentally he is very stupid & reserved.

June 29. This patient died this morning at 2.16 - 2.20 a.m. After the note made on June 8th his condition did not materially alter for some time but about the 16th he became worse, more excited, more irritable, more quarrelsome and much more dangerous to himself & others. For some time he was managed outside in the ward but on June 23rd he was put in the Padded Room for 6 hours and to have on locked gloves. The locked gloves were however not found of much service. He easily bit thro the cloth of which they are made and removed the stuffing from them. He was not to be approached. The most civil salutation he construed into an insult, refused to take medicine and in consequence no sedatives could be given him. On June 23rd Hyoscin was again tried 1/80 of a grain being given. It had simply no effect.

Robert Cowbrough.

It was again given on the 26th both morning & evening 1/80 in the morning and 1/60 in the evening. It was thought then to quieten him for a very short time and he was not so restless at night but on the 26th he was more excited than previously as noted. In the early morning he managed to tear up one of the pads and standing on it he reached the guards electric light which he endeavoured to destroy. He was only with difficulty approached. Sudden in his attacks on those around him & biting most viciously he was difficult to manage. The most of his time he was noisy shouting for Police & D.Y. saying the nurses was not his doctor that the attendants were killing him. He refused to do anything asked of him, answering any question with the foulest language and endeavouring to spit on those near him or to smear himself or them with faeces which he endeavoured to pass. On the evening of the 26th he had 1/50 gr. Hyoscin and the following morning 1/45 without any effect beyond maybe a slight quietening for an hour. There were no ill effects following the admin. of the drug so far as could be known and he was often seen & the cardiac condn. noted and the effect on the Secretions by the nurses. On Sunday morning the 28th he remained excited & noisy & then had 1/42 gr. For some hours he was quieter but in the evening his excitement was extreme. This seemed to be as bad as could be imagined about 6.30 o'clock. He was at that time being seen by the nurses. During the day he had been in seclusion but had removed the locked gloves from his hands torn up the pads and by climbing up to the window & electric lamp he was in danger of doing

Joh. 401.

William Gemmill
from Vol III. pg. 580.

June. 12. This patient is in good bodily health and has lots of flesh. He will not take part in any outdoor exercise. cricket &c. but loafs around or lies on the grass and looks on. He is rather irritable when spoken to & will not readily engage in conversation. Generally he is found sitting moodily apart brooding and doing nothing. sometimes but comparatively rarely he reads. He is inclined to make a grievance of trifles as when lately one of the galleries was swept he complained of the dust for two or three days after. saying he actually felt it and that it annoyed him to breathe such an atmosphere. And this at a time when the gallery was as cool sweet & fresh as could be desired.

July. 3. For some days past he has been more easy to talk to more cheerful & sometimes actually speaking first but he is getting distinctly more childish. and from being a well read intellectually inclined man he now only likes books with pictures, especially bright coloured prints & of these he talks in a childish way. His B H & C are pretty good.

Oct. 16th Rather pleasant & inclined to talk of late. Occupies himself muttering verses at times & drawing plans of the Solar system - but as a rule he is idle. While he does not seem worse - there is no sign of returning mental vigour.

Dec. 23rd Decidedly weak minded - & at times he has shown a good deal of irritability & moodiness. He made a great fuss about a dirty piece of paper containing some lines of poetry & a few sketches of the earth & sun in their planetary relations - which he gave to the writer, who did not preserve it: several weeks after he asked it back & when told

Mr. Wm Pennell.
visits.

it was lost he got very angry - & asked how Shakespeare would have liked to have had parts of his plays lost - & said he was producing a great poem of which the scrap was a part - For days he returned to this -
He has been coughing a little lately & says he has congestion of the lungs - & talks about it quite a silly way, considering his medical knowledge -
Just now he is writing verses at times - or sleeping in a corner - He takes no active interest in anything & is rather a ready grumbler.

Dec 26. To day - taken home by her brother -

Discharged -

Relieved

Dec. 26th: 1881.

Robert Orr - 60
Admitted June 10th / 81
Rusk Farm. Lochwinnoch % brother - James Orr - Bell Trees Farm

This patient is probably 60 years of age - a farmer by occupation all his life - and only comparatively recently mentally affected. He has never been married - is a Protestant - & "established Kirk" man. His illness is said to have lasted three or four months - but is his first attack - He has always been a very healthy man. & moderate as regards drink, but not a teetotaller. He has not previously been under any special treatment.
There is no supposed cause known -
He is not suicidal, nor epileptic, nor dangerous to others -
The only trace of G.P. Granville is the fact that his father was a very nervous man - but he never was actually insane nor in an asylum.

I Medical Certificates Show that "he insists that all the people in the house are combined to do him injury. He is under the delusion that the cattle in the House are starved, and no one to give them food."

II "Has delusions that something has gone wrong with himself & his family". He has also expressed a fear that he may do himself harm.
When admitted he was nervous and depressed - and a little excitable at times.
He is a rough & rugged specimen of farmer - with ruddy Complexion - & has evidently accustomed to plenty hard work out of doors -
His brother says that for the last three or four months the patient has been very restless and

Robert Orr -
Continued.

unmanageable - & this more particularly at nights. Then he would get out of bed & dress & go out and wander about & call on neighbouring farmers - & frequently asserted that his land & stock were all bad & that he was ruined, which is really not the case at all. Living at home, as a bachelor - it has been very difficult to control his insane vagaries. Previously to this change in his natural disposition he seems to have been a hard-working man - who never before showed any mental alienation -

He complains that he is very weak - & unable to take food well - or to sleep at nights - & these are facts, as proved by his short residence here - His first night was spent in a restless & sleepless manner -

The lungs fairly nourished - He complains of some pain in the left side of the chest. His pulse is beating at 80 per minute - full - soft - unsustained. The radial vessel is atheromatous & the temporal artery also is seen to be very tortuous.

The apex of the heart is slightly displaced outwards. The size of the heart does not seem to be increased. (?)

At apex there is a systolic murmur, short & rather faint, but of roughish character following a distinct clear first sound - The second sound is a little accentuated. This murmur is not conducted well to axilla.

The Pulmonary second sound is normal - the systolic murmur being heard pretty well here too - & well marked over sternum, but best as in apex mentioned.

In aortic area & episternal notch the 2nd sound seems accentuated.

Ward 11.

Continued.

2nd Tricuspid area the murmur is also harsh - but less distinctly. It seems to be aortic in origin. His lungs - & kidneys - liver & other viscera seem to be healthy.

June 11th Slept badly - was not very restless - If spoken to he said he was dying - & was very weak & would never be able to put on his clothes.

12th Slept better last night was quieter & more sensible today.

13th This morning he was excited & restless & very depressed - He kept his head bent down & uttered only "Oh. doctor, doctor - Oh! doctor. doctor -" & wringing his hands & rocked about in apparent misery. This condition became much increased if he was spoken to - and when left alone he was pretty quiet but depressed & dull. His skin is moist - Sleeping better & taking his food well.

Wt. 10 st. -

June. 18. Patient's condition is distinctly better. His restless misery and constant moan has gone & tho he is still depressed & looks miserable he is quiet & answers sensibly when he is spoken to. Two days ago he was put on Tr Opii and its effect was almost immediate in quietening his restlessness. He says himself that the draught he has got has a wonderful power as without it he was bothered with queer fancies and got confused so that he did'nt know what was going on. His appetite has failed a good deal since he began the opium but still he took a fair breakfast this morning. The opium has been combined with Casc. Sag. to help the marked constipation. Writer caught him masturbating just now in a corner of the summer house in the airing court. He is sleeping pretty well at night now.

Robert Ann
Continued

22nd. Has had some diarrhoea lately. Probably due to the Cascara which was given along with the Opium. Both were stopped.

24th. Diarrhoea has ceased. He is still miserable & dull - but seems to take a more reasonable view of his position. He is getting now three eggs in milk daily, & a glass of whisky daily, as he was not taking the ordinary diet well. Repeat Tr. Hyoscyamus 20 minims & mist. prescribed.

27th. Repeat Tr. Hyoscyamus 20 m, to be given 3rd daily from today.

July 4th. There is quite a distinct improvement here. He looks more cheerful & is never now actively agitated & restlessly melancholic as he was on admission. He talks sensibly about himself - and says there is a cloud over his spirits which he cannot throw off. He holds up his head & looks more brightly about him - in striking contrast to his miserable abject slavishly attitude a few weeks ago. Still at times he tends to relapse into his former state, but not for long, nor often. His bodily health has improved greatly & he looks fresher in the face. Has gained 6 pounds in weight. He sleeps fairly well & takes his special diet readily. His tongue is clean & moist.

July 11th. Continues to improve - Looks much better. He is however a little hypochondriacal now - very anxious about his bowels.

23rd. Chloryd. Potass ordered. He is mentally very well now - & looks well - but his bowels are costive & certainly a little troublesome.

25th. For last day or two has complained of shortness of breath and vague pains about his chest. There is some bronchitis & congestion in the left lung especially. His pulse is a little rapid - The heart is as before - but both ventricles seem somewhat enlarged. The murmur thought to be

To page 445.

John Frew.

From 1894.

Previous to his homicidal attack he has been manifesting more irritability and one evening in the C. Fields he assaulted the writer who was endeavouring to rouse him. He is distinctly unreliable and improving now.

July 1st. Not doing any good and refusing to be interested in anything or do any work. When talked sharply to he inclines to get angry. Slovenly & untidy in his dress and dirty to some degree in his habits. He does not now incline to talk about himself and seems to feel less acutely now than he did some time ago.

Sept. 30th. Not improving so far. He is suspicious & reserved & awkward in appearance & manner. His state of mind is still delusional.

Oct 1st Letter annexed. Still harping on the old ideas.

Nov. 2nd. Has been working in the garden for the last two weeks. & is somewhat less reserved & more tidy. Still in 9 to 10.

Dec. 23rd. Up in No. 4 now & behaving fairly. Plays whist & reads a little. Otherwise he is lazy and reticent still & uncertain in ~~his~~ conduct.

1892

Jan. April 7th Rather surly to his friends.

Somewhat improved. A little smarter in appearance. Works regularly in the garden.

22nd Last night this patient made an attempt at suicide. He had procured a knife in the garden. It was taken out of a drawer by another patient, it is believed, Squire & Frew, who when he got into the house went to the bath room & there wounded himself in the front of the neck - above the hyoid - not deep or serious.

O/N 561.

Walter Neilson

from p. 74.

June 12. Distinctly improved. Less miserable and with his belief in his delusions shaken. Now converses on indifferent subjects with readiness but displays considerable nervousness, plucking at his beard and rubbing. Takes great interest in the bowling game. His bodily health is good –. distinctly improving. He is brighter and so generally displays more sharpness and zest in what is going on. His bodily ills he does not pluck at his beard and hands to the extent he did a week or

Relieved

John Frew.

From 1894.

Previous to this homicidal attack he has been manifesting more irritability and one evening in the C. Field he assaulted the writer who was endeavouring to rouse him. He is dis- -proving now.

July 1st. Not doing any good and [illegible] anything or do any[illegible] he inclined to get [illegible] dress and dirty to so[illegible] not now inclined to ha[illegible] feel less acutely now

Sept. 30th. Not improving so far[illegible] backward in appearance[illegible] mind is still delusive[illegible]

Oct. 7th Letter annexed. Still [illegible]

Nov. 2nd. Has been working in [illegible] weeks. & is somewhat less reserved & more lively - Still in 9 to 10.

Dec. 23rd. Up in No. 4 now & behaving fairly. Plays chess & reads a little. Attendant says he is lazy and reticent still. & uncertain in conduct.

1892

Jan. April 7th Rather surly & his former.

Somewhat improved. A little smarter in appearance. Works regularly in the garden.

22nd Last night this patient made an attempt at suicide. He had procured a knife in the garden - It was taken out of a drawer by another patient, it is believed, against his will, who when he got into the house went to the bath room & there wounded himself in the front of the neck - above the hyoid - not deep or serious.

O/W 561.

Letter of Dr. Frew's Resignation Dec. 2nd 1899.

Walter Neilson

from p. 74.

June 12. Distinctly improved, less miserable and with his belief in his delusions shaken. Now converses on indifferent subjects with readiness but displays considerable nervousness of manner still, plucking at his beard and rubbing his hands. He takes great interest in the bowling green and enjoys a game. His bodily health is good –.

July. 3 This patient is distinctly improving. He is brighter and talks more freely, and generally displays more sharpness and readiness with interest in what is going on. His bodily health is good and he does not pluck at his beard and nervously rub his hands to the extent he did a week or two ago.

aug 20. Discharged

Relieved

William A. McCracken

from Vol III. p. 488.

June 12th. This patient's memory is very bad. he often cannot remember what meal he is going down to and will think he is going to breakfast at dinner time or to dinner at five o'clock. Yesterday afternoon he was allowed out into the grounds alone and did not go into the garden as he was told or else came out of it & joined a group of female patients on the plateau. Here he was seen by Dr O. who told him to clear out & keep to the garden part of the grounds. Some time after when the laundry patients were out walking, he is reported to have appeared on the scene and began to undress, actually letting down his trousers and exposing his privates. He was stopped by one of the patients seizing a broken branch from a shrub and striking him with it. On being taxed with his misbehaviour to day he said he could remember nothing about it. He is generally jolly and pleasant though foolishly extravagant in his manner: but at times, & pretty frequently the last fortnight, he has been cross & irritable at not being allowed home &c. Even however when angry I have never seen him other than gentlemanly in his language and behaviour. His gait and speech but his gait in particular is much affected, the inco-ordination being most typical and marked.

(An error was made here. The patient who behaved in the indecent manner related was not Mr McCracken but Mr Brown - of Ward 1. Mr. B. (an imbecile).

July. 3. This patient bodily and mentally is as at last note. His constant wish is to get out. but he can as a rule be easily led from the subject and his memory is very bad.

Sept. 15th. Today he was examined & the following condition noted. Sensation in limbs & body, to touch, is not impaired or delayed - & heat & cold are readily distinguished. He does not, or will not, admit any subjective sensation of abnormal kind.

William A. McCracken

His muscular power is wonderfully good there is no atrophy of the muscles.
The superficial reflexes are all slightly present.
There is distinct but slight knee jerk on each side.
No ankle clonus.
The pupils are somewhat oval in outline & the right is larger than the left. They both react to light.
His gait continues to be extremely incoordinated & unsteady.

Dec. 29th. Just the same. Clamouring lonely to get out & getting into great passions - from which he in a moment changes into a jovial foolish manner - very facile - Uses all sorts of threats in the event of his not getting out immediately - A little tobacco & the promise of a stroll in the garden pacifies him at once.

1892
April 7th Unchanged - Foolish at times - always facile, often angry - His ataxia is just the same.

Aug. 8th Has been out walking a great deal this summer & his general health and special nervous disease are in statu quo.

Dec. 23rd Still the same facile, rather foolish man with now and then outbursts of temper which however are more like summer thunderstorms - they clear the atmosphere.

1893
April 24th His outbursts have been fewer lately: to a certain extent they depend on whether or he has any tobacco or not as he is a great smoker. There is no change in the condition of his limbs or in his walk. He is very pleasant and goodhumoured ~~when he is~~ as a rule and laughs heartily at the slightest thing

So p 514.

Francis Fleming. Age 19.
Admitted June 11th. 1891

To Agnes Fleming, 19 Holyrood Terrace, Glasgow.

This patient was admitted today to the West House. He is a lad of 19, unmarried - has been working as a lawyers clerk. This is his first attack of Insanity & it has lasted about 8 months. The supposed cause is "Over-study" & the ~~[illegible]~~ influence of Spiritualism -

He is not epileptic nor homicidal, but may be dangerous to himself.

There is a bd. O. in the fact that an Aunt of the patients was insane & was under treatment in Gartnavel.

I. Medical Certificates bear that he has a "Vacant expression incoherence of ideas: he tells me his spittle is sufficient for him - he requires no food: he is unnatural & his taking food or warming himself hurts other people - Movements of the bowels hurt the worms inside. Voices tell him to cut his throat because he has committed murders in the Spiritual world." His mother states that he tried yesterday to go out without shoes or stockings - & without a shirt or jersey as he wanted to get myself ready to die: he sat in jacket & trousers in the coal cellar & locked himself into it. He has refused food & has required forcible feeding.

II. "He states that he hears voices in the night: that spirits are through him & tell him to burn himself & make away with himself. Says he ought not to take much food as other people have to force it into his bowels: that he should live on his spittle - that he feels his body is not fit for himself.

Weight . 8

June.

Francis Fleming.
Continued.

On admission he was dull & listless & difficult to interest or to arouse attention his own bowels. He freely showed his insanity by fragments of sentences - saying that he wanted very much work - should not eat - ought to cut his throat - put his eyes out. He said he ought not to be here - but doing rough hard work elsewhere. He is a thin ill-nourished lad - with dull skin & somewhat sunken eyes - the pupils a good deal dilated. There is a slight tendency to acne form eruption on his face - His various organs seem sound.
He is decidedly depressed & speaks suicidally as above noted. His volition is impaired - his interests dulled - his reason & feelings abnormal.
He talks much about spirits & the spirit world - & says he hears numerous voices telling him to do various things.
At present he is to stick in his bed to get plenty nourishing diet & to go out & work & walk about a great deal & be interested in cricket - tennis &c.

June 13th He was down at cricket tonight & ran about a good deal - but was constantly objecting that he ought not to be playing at games - was somewhat difficult to keep interested in what was going on - He sleeps & eats well.

Weight. 8st. 11lb.

June. 18. There is little or no change in Fleming he eats and sleeps well. Does what he is told in the garden where he has been sent to work. & plays cricket in the evening. He still thinks he is doing wrong to eat or play games because voices tell him so. and he seems to take no interest in anything. He is slightly costive in his bowels & in consequence he says that

p.t.o

Francis Fleming.

other people get the benefit of the food he eats as his bowels don't move.

June. 25. Last night patient took a good deal more interest in the game of cricket altho sometimes he expressed his opinion of what took place in a sort of sulky disagreeable way. (Wt. 8st. 6lb.) He has gained five lbs since he was admitted. He is still getting his cold bath in the morning & eats well tho he still says he is wrong in so doing as people tell him it to take food.

27th. This morning he was very reserved & dull - could hardly be induced to speak - His appearance cannot be said to be much altered, but his tone is in a slightly more healthy condition - Aloes & Iron pill given.

29th. As well as the Quinine & Iron, he was ordered to take a dose of 30 m. Cascara, morning & night.

July 2nd. Weight - 8 st. 8 lb - a gain of 7 lbs since his admission

4th. Mental brightness - taking interest in cricket in a satisfactory way. Last night he was quite talkative, but not altogether in a normal mind - seeming to be a little excited & foolish.

11th. He is up in No 4. was & continues to do well.

20th. Codliver Oil substituted for Quinine & Iron.

29th. This morning he is not so well mentally - tho' up today the improvement may be said to have been gradual and steady. However he today expressed the idea that he really should not eat so much - & complained that he could not help himself from eating - He also said that people from the spirit world were speaking to him & that he ought to leave here & go home.

Francis Fleming.

He felt that he must try & escape if he cannot get away home. His appearance was dull & preoccupied - & he had not dressed himself so carefully as usual.

30th. Yesterday, some hours after his conversation with writer he actually made good his statement & escaped - when out for the morning walk. He went straight home, but finding that the house was still shut up, his family being at the Coast, he came back again of his own accord - was met on the road by one of the attendants. He promised not to endeavour to escape again - seemed to have shaken off the depression & ridden of the morning.

Aug. 12th. The progress of the case is disappointing. He has improved up to a certain point - but no beyond it - & has lately been always much the same. He looks dull self-absorbed - & is foolish in his conduct - & pretty restless at night at times - Bowels tend to be costive. Seldom speaks about anything except his food &c &c - & still seems to have a love communication with the "spirit world". His bodily health is certainly better - but his appearance does not suggest health. There is a torpidity & stagnation about him - bodily & mentally.

15th. This patient has always been suspected of practising the habit of masturbation - but till today he was never so detected - but this morning there was proof of it & he does not deny it.

24th. There is certainly no improvement here - He does not masturbate freely but partially does so secretly still - He is untidy in his dress - & always skulking away into the lavatories - & his drawers are often embuttoned. He is restless at nights occasionally. His appearance is dull & depressed - & he is shy and

William Hutchison, 62.
admitted 13th June 1891.

Private patient admitted this morning at 2. a.m. to the East House. He is married, an iron-monger & a Protestant & resides at 144 Buccleuch St.

He has been insane about 6 weeks. This is his 2nd attack & his first was 7 yrs ago. Cause is unknown. He is neither epileptic, suicidal nor dangerous to others. There is an H.P. but not very marked.

Medical certificate states that he hears voices accusing him of filthy habits & annoying him. The voices tell him of his wife's unfaithfulness". He was found barricading in his room for protection.

The other certificate states that he is dull & pre occupied says he has been in low spirits -.

The history of the case briefly is that about 6 years ago he became mentally ill, depressed & delusional and without warning sailed to America. There he recovered and returned home & continued at his business until about 2 mos ago. Then he began to be morbidly suspicious especially of his wife, refused his food & slept badly. He took to wandering about the streets. About a week ago he went with his daughter to Mull and there he behaved very strangely, not mixing with the others but walking about alone talking to himself & accusing the neighbours of calling him a thief. He left there without warning returned to Glasgow & seems to have shut himself in her room & refused to allow any one to enter it. Two attendants were sent for him and with them he came quietly enough.

14th J

12th J

12th A

10th S

William Hutchison

cont'd

14th June. Patient is very inoffensive cooking and it is difficult to believe either from his conversation or his behaviour that he could ever have been dangerous. He talks about his delusions most of which have reference to his wife. Believes her to have been unfaithful to him. Says that when he was in Perth people in Glasgow used to peep in at him & told lies about him. Says in a sad plaintive tone "I don't know what it all means". He is a tall thin man & his bodily condition is obviously very much under par.

12th July Improving somewhat and has gained a few lbs in weight since admission. Out working regularly in the Garden and reconciled to being here. He does not talk much about his delusions but it is understood he still believes in them. It is difficult to carry on a conversation with him as he is reticent and dull, bemoaning his condition and not inclined to do anything to improve it

12th Aug. Continues to improve and is now really fairly well. He is more active, tries a game at Cricket & generally shows a healthier mental cond". Bodily also he has improved and he is now practically on Parole in the Grounds.

10th Septr. Has continued to improve and is to-day discharged Recovered

Robert Cowbrough.
Rose p. 384.

himself previous bodily harm. As long as he was both dangerous to himself and others and he writes on his own responsibility about 7.30 - after trying to manage him an hour - ordered him an Hydropathic Pack. The sheets were wrung as dry as possible out of warm water and the blankets round them were very loosely put on, so much so that after he was placed in it. the writer coved & did push his bared arm right down the back of the patient to near the hips. He was put in the pack at 8 o'clock and no effect was produced. The writer remained with him for a time saw him again at 9.30 and again about 12 o'clock on both visits giving him a little whisky - too much against his wish. Respirn was then not profuse. Pulse as judged from temporal artery was beating free & of good strength and there was nothing to indicate the approach of danger. Leaving instructions with the night attendants the writer left him at 2.15 he was called. and when he saw him in less than 5 mins. he was dead, He was by that time out of the Pack and being rubbed. Ether was injected to and artificial respirn kept up for over an hour. but without avail. The Syncope seems to have been very sudden.

1895
March 2
June -
Sept 2
Novembr
Dec. 2

Death.

P. M. See Path. Records.

William M: Gilvraith

cont. from p 366

1895 and insulting language.

March 28th There is no change in this patients condition. He is fond of adorning himself but not fond of being noticed.

June 30th Still full of his own created ideas that this is a hotbed of freemasonry. He warns the ~~~~ officials about 'the wrath to come' and says that they will soon be led to the gallows amid shouts and execrations. For pure insult and abuse his language would be difficult to surpass. His figure and ~~expression~~ his expression of countenance all both show the suspicion and hatred he bears to this place.

Sept 25th He is suffering from a slight cold just now but any offers to prescribe for him is met with abuse and derision. A favourite question of his to any newcomer on the medical staff is whether eczema is contagious and if they say it is not he scorns them as being quacks. He himself holds strongly that it is contagious.

November 17th He is still very fond of adorning himself. Instead of ordinary white collars and cuffs he seems to prefer striped ones so he inks his over so as to make them appear black and white. Another peculiarity of his is that he pulls out all the hair from his face so he has the appearance of being clean shaved.

Dec. 28th He has been quieter of late and has not been so ready to offer insults. If however a persistent effort is made to engage his attention he soon pounces up and shows that his knowledge of the vocabulary of abuse is as great as ever.

To Vol. V p 237.

James G. Bruglioli

Rom 284

1891.

July 6 Somewhat better and now in the garden every day. He is less restless, rather more coherent and expresses himself as much better. The fits have not recurred and in short there is more mental stability. His bodily health is fairly good.

July. 11. Patient is not so well today. He is restless & uneasy looking & stupid more than usual when spoken to. His appearance almost suggests a fit brewing. He is being kept in the Infirm. Ward today.

July. 13. Much as usual today though still a little restless. has gone out to work today again. His pulse still shows the old marked irregularity. and his bromide is still being continued.

Sept. 11th Since last note he has improved a great deal & is better all round. He is pleasant, useful, & active, & has lost the dull listless expression & carriage of body that characterised him.
He is today allowed out on trial for a week.

Oct. 9th 1891 He has been out since last note & is presumably well- as no further account has been received about him.

Discharged - Recovered.
Oct. 9th. 1871.

James S. Brighton
cont'd.

Discharged.
Recovered.

Thomas Armour. 77
Admitted 16th June 1891.

Private patient transferred from Ayr District Asylum. He is a miner, a tanner by occupation and he has been insane since Dec. 1890. Cause is not known and he is neither epileptic, suicidal or dangerous to others.

Transfer Certificate says that he is in a demented state and labouring under delusions of untold wealth and also that he hears people blowing their pipes at him and trying to poison him. When admitted to Ayr Asylum he was albuminuria & Chronic Bronchitis but his general health for his age is good.

July 3. His bodily condition is fairly good and he enjoys ~~good~~ fair health but mentally his condition is unchanged. He still believes that people put Arsenic to into his tea and that money sent to him is stopped by some unknown persons at the post-office. He has very large ideas of his wealth & but constantly believes that people are attempting to injure him in some way. On being spoken to he talks freely & is glad to have a chat.

July 4. This patient believes also that he has beasts inside him. two of them. He cannot say what kind they are but points to his cough & the sound he makes when he takes a deep breath as evidence of their presence. He also says there are more outside only they can't get in to him. He is taking his food and sleeping well just now. & is improving in condition, being better than when he came in.

Oct. 21st Continued much the same till today - but he then became sick - & complained of not feeling well.

Thomas Armour

He has caught cold - & is coughing - Bronchitic sounds are present in the lungs - He has fever with evenings - usually about 100° - & 100.5°.
Poultices applied - & vomit & stimulants administered.
He is very frail.

24th Improving - but still a little fever at nights.

Nov. 2nd. Better & to be up today - will not allow that he has had bronchitis - Says he is as sound as a bell - & that he is only troubled with people blowing at him through pipes - & putting arsenic in his food. Gets irritable if contradicted & makes frequent mistakes in the identity of those around him.

Nov 9th. Well now, comparatively - & up & about his usual.

Nov 17th. Very stupid - & feeble today - helpless & unable to speak properly - & temperature up to 103 - It seems as if he had had a "cerebral" attack of some sort Pulse irregular and feeble.

19th Very weak - & not taking his food - Temper very dicky - He daily loses ground.

21st Some bronchitic sounds heard in lungs - but the condition is not important - There is an utter prostration about him - & he does not improve.

23rd Tonight he is sinking rapidly -

24th I. Am.

Death. November 24th. 1871.

P. M. Bronchitis & Pneumonia in both lungs.

See P. M. Register.

James Daly. 42.
Admitted 16th June 1891.

Private Patient. East House. By occupation a draper, & resided at 13 Hampden Ter. Mount Florida. Has shown
Turbatt. signs of mental disorder for 2 years, much worse for a year. Cause is unknown. Not epileptic suicidal or dangerous to others. There is a decided H.P.
Medical Certificates bear that his speech is incoherent & tremulous. He has delusions about himself, his wife and his brothers.

July. 10. On examination on admission his physical condition was good. no organic disease at all being detected. His reflexes are pretty normal as seen in knee jerk & on tickling the soles of his foot. ~~nowhere~~ is there any wrist or ankle clonus. The response of his pupils to light is however poor. there is no consensual reflex & the ordin. ary accomodation to light is a little sluggish. His pupils are also slightly irregular in outline & the right is if anything the larger. His speech is at times a little incoherent & is distinctly thick & tremulous. His tongue shows marked fibrillary tremor. and there is a good deal of tremor in his hands though his grip is good even unusually strong & he is still pretty steady & active on his legs. He has markedly grandiose delusions as when he states his intention of roofing in the island of Arran with glass. & is not quite certain which end he will make his drawing room & which his dining room. Latterly his main idea is that he is to do business in a very large way as a draper & make a huge fortune in pins. He is very restless and unsettled & gives some trouble by his desire to undress frequently. In the airing court he walks up & down at a great pace & states an intention

James Hay
contd.

of doing so for so many days & nights without stopping. He refuses to wear a hat while so doing. It was with great difficulty the writer induced him to sit down and talk for a few moments. He takes his food well and is in good B H & C.

Sept. 16th: The condition of this patient is at a somewhat lower level than that of the last note. He is more stupid & confines himself to repetitions of meaningless phrases, which he shouts out with great noise. Knowing the form of his delusions these phrases however can be partly explained. For example - "Scotland, all Scotland" - "Ten thousand pounds" &c &c, are the automatic expression of claims of grandiose ideas running through his mind. There is a good deal of restless excitement about him, & he is often noisy at night. His face is rather vacant & expressionless, but he does show at times a pleased & ecstatic frame of mind in his gestures & appearance. Various sedatives have been given at night - sulphonal, trional & paraldehyde. There was at one time a little trouble with his urine, & it had to be drawn off once or twice. On the substitution of paraldehyde for the sulphonal which he then was getting, these symptoms disappeared.

" 26th Just the same - Reflexes tested today; Plantars are slightly present - Cremasteric well marked on both sides - & abdominal reflexes are faint. Knee jerks are slightly in excess. The condition of the pupils could not be tested. No further trouble with his urine.

James Hay

Nov. 1st. Frequently noisy - Gets excited & flushed in the face & keeps up a monotonous howl or repetition of words - Is failing off physically.

Dec. 23rd. Just the same - Noisy & irritable - Seldom speaks at present. & resents any examination -

1892

April 7th. Much less noisy of late - merely resentive to interference, & hardly ever speaks. He has fallen off in bodily health too - Of late his urine has had to be drawn off pretty often. The passage of the catheter seems to give him a pleasurable sensation, if any.

Aug. 3rd. Failing rather rapidly of late - He has been very noisy & has required Sulphonal, - still gets it. A large perineal abscess developed & was opened - It healed very rapidly - His temperature is irregular, rising at night sometimes - & in the morning sometimes standing at 100°. He is emaciating greatly - the pulse is quick & soft - The lungs cannot be examined properly: so far as can be made out they are not implicated - beyond impaired resonance over a small area under the left clavicle.

8th Much weaker - & pulse at times very faint. Twice he very nearly choked when being fed - but managed to cough up a little food - semifluid - that had entered the larynx. The nurse was summoned, but when he reached him he was better & still moved of himself. He is sinking pretty rapidly - Two glasses of whisky ~~daily~~ by day & night are given.

13th Died today.

P. M. General Paralysis - & Intercular disease of lungs. See Register.

Death Aug: 13th. 1892

411

James Smith, 68
Admitted 18th June 1891.

Private patient. East House. Single and a weaver residing at 24 Ferguslie, Paisley. His illness is recent and this is his first attack. Cause is unknown but there is a distinct H.P. He is not suicidal, epileptic or dangerous to others.

Medical certificates bear that he hears trumpets and numbers of men running after him, and he thinks people creep thro his house at night preventing him from sleeping. He answers questns with the greatest difficulty. He is incoherent and has the delusion that he is poor and has no money.

On admission he was very quiet, would not speak & all his movements are very slow. He took some tea & bread in a very leisurely way, holding his head down & only after some persuasion. He would not talk about himself nor give expression to any delusions.

June 15. Rested fairly well but slept little. To-day he is very obstinate, not doing as he is asked and only protrudes his tongue after several demands. He is a well nourished man. His cheeks being especially very full & his legs not so well nourished. He has a shock head of hair of fair colour. There is a very loud blowing mitral systolic murmur.

July 3. This patient's bodily condition is bad. His pulse is very feeble & irregular about 80. as is to be expected with the dilation & incompetent valvular action of his heart. His condition is aggravated by his refusal to take more than an occasional small supply of fluid food & the impossibility of forcing him to take more in his present condition. He sleeps poorly

James Smith.

at night and when awake is restless. It impossible to say much of his mental condition as he refuses to speak save for a word or two occasionally.

July 7. This patient is sinking steadily. Digitalis has had but little effect and he can only be coaxed to take a little food occasionally.

July 9. Patient dies early this morning. 4:30 a.m.

Died.

Cardiac disease. Both mitral & aortic.

Michael Angelo Nicholson. (xxx
from pg. 374. Vol I.

Aged 50. on admission on 4th December. 1882.

Oct. 16th 1891. There are many peculiarities in this case. He still labours under chronic excitement & delusions, presumably of the same nature as those he has been so long subject to. The Aural hallucinations also continue - and he indulges in paroxysms of rage, shouting & swearing & shaking his fist, at his unseen persecutors. It is not safe to approach him closely - and if talked to he becomes always excited & abusive - His answers are very difficult to make out, from the rapidity of his utterance, & the frequent repetition of the peculiar sporadic bark - which is his most remarkable characteristic. The phonation of this sound seems to be "Pack", & it comes from his lips with explosive violence & facial contortion - & nodding of the head. He is often noisy at night - & always so before falling asleep. The other day he stamped about the airing court in great rage at something, with his person exposed.

Dec. 23rd. He writes has had several conversations with this man. But it is seldom that he permits such a liberty. He utters many sarcastic remarks about the officials here & criticises their walk & appearance freely. He does not express any delusions - Uses very bad language - & becomes very excited.

1892 April 7th. The same noisy irascible man - He apparently hears voices, & has visions, for in the airing court often quite alone, he looks up above & shouts & gesticulates, often walks on, turning round again to repeat the same.

Michael Angelo Nicholson

Aug. 9th A treacherous patient, not to be approached without caution - Very noisy, foul tongued, & abusive to all the Officials - Spends most of her day in the airing court shouting & swearing - Goes to bed an hour before the other patients, as he has done every night about an hour & much noise in his bed & then he goes to sleep, and sleeps soundly -

Dec. 15th The above note exactly describes his present condition. There is no change.

1893

June 30th He has not been so noisy of late especially if he is left alone but the moment he is taken notice of he begins to 'quack, quack' and to mimick what is said to him and in addition to use foul and abusive language.

Sept 25th Some weeks ago he had a struggle with an attendant whom he tried to seize by the testicles. In the struggle he fell and received a few slight bruises. He was kept in bed for a short time and was much quieter than was expected. He is now back again to his usual state.

Dec. 28th He is nearly always restless and noisy: sometimes he is so bad that he can be heard a long way off from the airing court. He seems to be answering voices which are abusing him and which he tries to drown by denouncing at the top of his voice. His health continues good.

So Vol. V p 223.

Robert Wilkie, HH
Admitted 20th June 1891

Private Patient. East House. Admitted on a Transfer certificate from Bothwell Asylum where he has been for some months. He is single, a gardener and has been weak-minded since birth. The cause is unknown but recently he got much worse on the death of his mother on her way to church some months ago.
He is neither epileptic, homicidal or suicidal. M. H.B.
The medical certificate bears that he labours under melancholia and is weak-minded. His bodily health is fair.

This is a congenitally weak-minded man in very indifferent health. He has always been weak-minded but the shock following on the death of his mother seems to have still further disturbed his brain balance and he is now is full of the most miserable delusions. His speech is very indistinct and one side of his body is more developed than the other. His walking is one sided and one hand & arm is weak.

August 20th. Since admission he has been working in the Garden. There he is allowed to potter about as he pleases and is on Parole. He harbours miserable delusions the principal one being that he has broken the 7th & 8th Commandments & that eternal punishment is reserved for him. Bodily he is better & he has been put on a pint of Stout daily.

September 6. Improving bodily but very slowly mentally. He interests himself in the games that go on in the Ward and speaks cheerily enough about some matters. —.

Robert Aulkie

Nov. 2nd. Contented with his life here. Is outside a great deal - plays round at dominoes & but very badly - is decidedly weak minded - & very emotional and ready to refer to his delusions of misconduct &c.

Dec. 23rd. Much the same. May soon be tried at home. Will always require care. & be nervous & emotional.

Dec. 26th. Discharged today. Her sister taking him home

Discharged - Relieved. Dec. 26th. 189,

Charles Morrison. 46

Admitted. June 25th 1891.

Surety: Mr. John McCulloch. Merchant. 12 Woodside Road. Pollokshields.

This patient was admitted to the West House.
He is married & a commission merchant (Com.) & trader.
Has resided in Brooklyn. U.S.A. for some years & latterly
in Pollokshields. He is said to have been three
or four weeks insane, though his friends thought him
peculiar for some little time before this. It is his
first attack. He has not been under any previous
treatment in an asylum. The supposed cause is
stated to be 'sunstroke'. He has had 'several
fits resembling epilepsy'. He is not Suicidal,
nor dangerous to others.
There is no stated H.P.

I. Medical certificates thus:- "His mind is very
confused; talks incoherently; mistakes the identity of
those around him; has no clear idea where he is,
declared that his late brother was a doctor, and afterwards
said he was a banker (which was correct); fancies he
was transacting business yesterday; he appears unable to
remember anything two minutes. He is unable to
care for his business or to transact any business. He
might readily become dangerous."

Facts Communicated: "His mind has been distinctly
weak for some weeks & lately has become much more
so. He is occasionally not very manageable."

II. "He talks in a rambling and incoherent manner.
Often fails to recognise his wife & other relations.
Has no sense of where he is - saying one minute he is in
New York, the next in England."

Facts Communicated:- "Getting much more irritable &
difficult to manage. Has had several severe epileptiform fits."

Charles Morrison

continued

Farther information is to the effect that he has not had syphilis.

In conversation he is found to be incoherent & confused. He is capable of answering questions correctly when definitely put to him. But if allowed to talk himself he cannot maintain one train of thought & remarks on a introducing evidences of great mental alienation as regards identity of people around him, his residence, occupation, & his memory of recent events. At times he seems to perceive his own mental confusion - but this does not put him about in any way & he soon becomes composed in another direction. He does not express any grandiose ideas - nor any hallucinations or delusions of personality.

His speech is not altered, to an extent at least appreciable by those who have not seen him before. His hearing & sight are good.

On examination his viscera generally seem to be in good order. His face is somewhat pale & colourless - & rather devoid of expression. There is no tremor about his face. But in the tongue fibrillary tremor is well seen. The surface of the tongue is somewhat coated.

The pupils are above the medium size & are slightly irregular in outline.

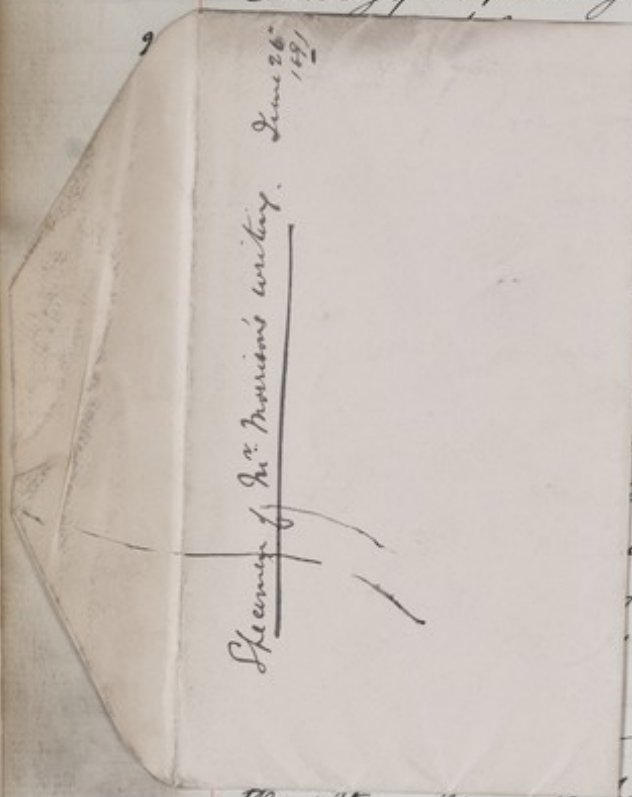
There is nothing marked in his gait - but when made to turn round rapidly he has slight difficulty in maintaining his equilibrium.

The superficial plantar reflexes are much exaggerated & the knee jerks considerably so. The cremasteric & abdominal & epigastric reflexes are all present but not exaggerated.

Charles Morrison

continued

It would seem that the facts in the Warrant regarding the length of time he has been insane are inaccurate. & that he has been mentally estranged since January of the present year.



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& could not be roused.
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is annexed. It is coincidently
to be, according to the
this pupils are very
Left is slightly larger than
the right. The size is larger than normal, but a fair
light causes them to contract to medium size, as
the mobility to light action & to accommodation is
very good. The consensual action is also quite
good. The reflex dilatation or stimulation of
peripheral nerves (forehead) is not however capable
of being elicited.
Yesterday he was in clinic & be irritable & grumbly.
but this morning he is cheerful & contented.
The forehead & vertex are rather peculiar in shape.
the vertex being more than usually flat & the

Charles Morrison

Continued

[illegible] more than usually rounded as it joins the vertex. & the appearance on the whole is one of abnormal breadth transversely - from temple to temple.

This evening he had another epileptiform attack, similar to the last - ushered in as before. It was over before any of the medical officers could observe it.

30th. Just as his usual this morning.

July 2nd Exceedingly confused & stupid as before. Is always asking to get out & attend to his business & thinks that he was at work yesterday & so on.

3rd. Tonight at 9.30 he had another very severe general convulsion - the same as the previous ones. The face was pale during it & somewhat livid.

4th. Quite well this morning, but the mental confusion & amnesic state are present as before. He is constantly asking to get to business.

10th. Last night he had another convulsive attack - the same as previous ones.

11th. His eyes were examined by Mr Marcus Gunn last night. The fundus generally seemed healthy - the disc was well outlined - but the physiological cupping seemed less marked than usual - & parts of the disc in both eyes seemed a little blurred & indistinct & the vessels not quite so clearly outlined in parts. The veins seemed larger - slightly congested. Beyond this nothing further was made out.

He is constantly mistaking the identity of those around him. Has no knowledge of time & place - makes delusional statements as to when & where he last transacted business. He is constantly asking to be allowed to go out to attend to business -

To page 431

Charles Morrison
Continued

It would seem that the facts in the warrant regarding the length of time he has been insane are inaccurate. & that he has been mentally estranged since January of the present year.

26th This evening he had an epileptiform attack - not seen by the writer. It was general - with foaming at the mouth. It did not seem to involve any limb or portion of the body especially, nor did it commence so far as is known in any particular part. Pupils were altered as the fit commenced. Seen just after it he was very drowsy - stupid & could not be roused. Rather pale - pupils equal & mobile. Plantar reflex almost gone - knee jerks just as before. His temperature just after the fit was 97.8.

27th Kept in bed today, but quite recovered.

29th A specimen of his handwriting is annexed. It is considerably changed from what it used to be, according to the statement of his friends. His pupils are very distinctly irregular - & the left is slightly larger than the right. The size is larger than normal, but a fair light causes them to contract to medium size, as the mobility to light action & to accommodation is very good. The consensual action is also quite good. The reflex dilatation on stimulation of peripheral nerves (forehead) is not however capable of being elicited.

Yesterday he was in clinic & irritable & grumbly but this morning he is cheerful & contented. The forehead & vertex are rather peculiar in shape. the vertex being more than usually flat & the

Charles Morrison

Continued

forehead more than usually rounded as it joins the vertex. & the appearance on the whole is one of abnormal breadth transversely - from temple to temple.

This evening he had another epileptiform attack, similar to the last - ushered in, however - It was over before any of the medical officers could observe it.

30th. Just as his usual this morning.

July 2nd. Exceedingly confused & stupid as before. Is always asking to get out & attend to his business & thinks that he was at work yesterday & so on.

3rd. Tonight at 9.30 he had another very severe general convulsion - the same as the former ones. Red face was pale during it & somewhat livid.

4th. Quite well this morning, but the mental confusion & amnesic state are present as before. He is constantly asking to get to business.

10th. Last night he had another convulsive attack - the same as former ones.

11th. His eyes were examined by Mr Nettleship last night. The fundus generally seemed healthy - the disc was well outlined - but the physiological cupping seemed less marked than usual - & parts of the disc in both eyes seemed a little blurred & indistinct - & the vessels not quite so clearly outlined in parts. The veins seemed larger - slightly congested. Beyond this nothing further was made out.

He is constantly mistaking the identity of those around him - has no knowledge of Time & Place - makes delusional statements as to when & where he last transacted business. He is constantly asking to be allowed to go out & attend to business -

To page 431

David Miller
admitted 22nd October. 1844.
from Vol. I. page 480.

July. 3. This patient is again in from the garden where he has been working with advantage for sometime. He says he feels too weak for outdoor work, but nothing can be found to account for it. and his bodily condition has been improving of late. His depressed state as marked as ever and his complaint of weakness is probably just part of his mental condition.

July. 13. Still says he feels weak & out of sorts. quite unfit to work. but looks well bodily.

Oct. 30th Does not improve. Facial expression despondent. & he lacks will or inclination to work. Denies that he was ever ill - & thinks he ought not to be here

Dec. 23rd An unhappy man who cannot interest himself in anything - will not try to work as he says he has no strength for it. His manner does not encourage much attention, & any attempts at rousing him have not met with success.

1892
April. 7th Devoid of interest & spontaneity. Sits way to his depression & seems careless of what happens him.

Aug. 8th Much the same - Quiet & retiring. Mentally depressed, fanciful & weak minded.

Dec. 15th No change to record. Seldom speaks but listens or appears to listen and therefore made use of by another patient who is fond of talking but who doesn't like to be contradicted in what he says. Does a little work inside. S. C. good.

1893
June 30th No change either bodily or mentally. He generally sits in the same seat and takes no interest in anything around him. B N & C. good.

To p 503

Albert McKechnie.

Admitted. Dec. 15. 1887 (the 55 year old)

Continued from Vol. III. 484.

June. 29th 1891 While in bed an examination of his chest - besides discovering med. cupitant rôles on inspiration at the bases of the lungs - disclosed a faint diastolic aortic murmur - not heard down the sternum, but best at the apex or a little above it - just after the 2nd sound - The size of the apex is not increased - The tubes is full round outward - & the incompetence of the aortic valve must be very slight - The vessels are markedly degenerated -

July. 2nd Up again & the foot nearly better - & his strength much as usual -

22nd About his usual rest - & his foot is better -

Aug. 31st His strength is fairly maintained - & at times he uses it to the best of his power - He is rather offensive in his habits - & pays no heed as to where he expectorates or urinates - & thus disgusts Mr Alexander exceedingly - This morning he came to blows with D. S. but the affair was not serious

October 31. Habits have been rather offensive of late and he has a habit of undressing at the most awkward times & in most unsuitable places. Sleep is at times bad but he accounts his bed being interfered with. The writer has some influence over him as he believes him to be the Duke's Factor & fears he will be evicted from his farm if he does not obey orders —

Decr. 3rd Got a black eye recently from another patient with whom he interfered. His habit of interference is one of his troublesome ways and gets him into mischief He thinks some of the other patients owe him money & he torments them for it. Bodily he is very frail & mentally he is very stupid

Dop. 576

John Forrest.

Continued from p. 330.

July. 2nd. This patient is at present in better condition all round. His tongue is wonderfully clean. His skin less blotchy than previously. & he is sleeping now fairly - without any draughts. Mentally he is quiet orderly & reasonable. Tho he looks a little depressed & seldom speaks unless spoken to. & seems to take little interest in anything.

11th. He is up in No 4. now & improvement still continues.

August 1st. There is a slight return of sleeplessness & asthma. from which he has been lately wonderfully free.
Nitroglycerine at bedtime & during night is being tried for the asthmatic affection.

12th. A little improved, but on some nights he is troubled both with sleeplessness & asthma.

September 8. Up till a day or two ago Mr F. was so well that it was arranged he shd be taken home. He then became much worse mentally (& also had with asthma) & at present he is in bed. He is deaf, can hardly speak, his breathing is laboured, and his pulse hard. He slept none last night. His bed was quiet and it is feared the cond^n of chronic mania is returning

Sept^r. 15. The above mentioned mental disturbance has passed off and he is again in No 4. and much enjoys asthma very troublesome

29. asthma has been troubling him very much. and he has not been sleeping well. His general health has been slightly affected. but mentally he is fairly well and cheerful. Burroughs cure for asthma has been found beneficial.

Jo$.504.

John Moore

from page 222.

July. 2. about. In shape the pupils tend to be oval, this being most marked in the left which is slightly the larger of the two.

July. 10. This man is passing very rapidly thro the second stage. He is unsteady on his legs, partly owing to the sleepy way he goes about with his eyes half closed. He can't be got to talk though a yes or No may be got from him. He is in bed just now to see if this tendency to fall will pass off a little. * His bladder condition requires constant watching & there is a marked tendency to retention. He is taking his food fairly but is falling off in flesh.

Aug. 31st Brighter of late, replying more quickly to questions & showing more spontaneity. Getting very stout - Bladder trouble has passed off &.

Sept. 16th Fairly well just now - works in the galleries at times. and takes a little more interest in his surroundings. The superficial reflexes are all present & the knee jerks are decidedly increased on each side.

27th This afternoon this patient was attacked by a series of slight epileptiform convulsions - on both sides of the body. with transient unconsciousness, cry, & foaming at mouth &. There was repeated & frequently recurring clonic spasms of the limbs. When seen by one of the officials there was paresis of the left side of the body and some rigidity on the right side, but that being the twitchings had ceased - the temperature was 98°. He was very stupid & restless

28th Slept very badly - Twitchings occurred at intervals all night. This morning there is no paresis, but the left arm is a little rigid. He is exceedingly stupid.

J. 509.

George Kerr

from Vol III. page 76

1891

Sept. 15th 1891 In fairly good health, & mental condition much as before - tho' of course is still takes fits. tho not so often just now as before. Very facile & weak-minded - but on the whole pleasant - & seldom irritable. Talks very foolishly at times - He is soon going home, as he might very well live there.

Oct. 10th Discharged today.

Relieved. Oct 10th 1891.

John Phelps
from Vol III. page 448.

1891
July. 4 Little change to note in this patient. There is still a great deal of twitching of his right hand ~~the~~ for which he is still getting Chloral & Bromide. The Sycosis from which he was suffering on his upper lip is now cured. His general health is pretty good.

See p 496

Robert Hay

from Vol III. page 450.

1891.

July 4. This patient is getting more feeble. He keeps as far as possible to one seat & is always glooming & depressed. He has been complaining sometimes lately of pain in his head but is not very definite as to the site. His account of his own feelings is not much to be relied on. but he is sleeping fairly and taking his food.

Sept 30th. Just lately he has been a little more cheerful & occupies himself a great deal with bagatelle. His attitudes & general demeanour are not so depressed as before - but his mind & body both seem to be becoming more feeble.

Dec. 23rd 1892 Just the same. Retiring & moody - & his appearance & expression indicate a continued despondency.

April 7th. Not changed.

July. 12th. Miserable ideas still trouble him. He believes he is to be taken out & burnt or boiled.

Complains of his head. Is moody & silent - & feeble.

Dec. 23rd 1893 Very depressed. Has same delusions as formerly. Habits & C. fair.

June 30th He is very unwilling to express his delusions but his manner and expression of countenance evidently show that he still has them. He is not however so influenced by them that he does nothing: he often plays a game of draughts a bagatelle etc. His general health is poor.

Sept. 25th Continues in the same condition both mentally and bodily. There is nothing new to record.

Dec. 28th His general health and bodily condition are by no means satisfactory. He is thin and feeble. Mentally he is the same - depressed and full of delusions about himself.

So Vol. V p 222

Peter McCurrie.

from Vol III page 454

1891.

July 4 is in fair condition. He is still fed twice a day by the tube & gives but little trouble as he is rarely wet & never dirty.

July 13. On Saturday this man was visited by two brothers. They spoke in his presence of the struggles his wife was having to support his family & when doing so the charge attendant reports that his eyes filled with tears & he began to cry. He neither spoke nor attempted to speak.

Sept. 16. Since last note there has been no similar observation to record. He is nursed in the same state. He gapes more often on the feeding tube & the eyelids frequently quiver - but Memnis there is no movement on his part. The various reflexes were tested lately & found fairly normal. The abdomen is always somewhat distended & tympanitic & occasionally he vomits some of his food. A copious enema is the best treatment in these circumstances.

Dec 23rd His bodily condition just now seems a little improved. The passage of the tube through his mouth causes a copious secretion of saliva which runs out at his mouth.

1892. Feb. 8th Lately Nepenthe, in the equivalent of 2 grains Opium daily, has been given, increased to equivalent of 3 grains. The rationale of this treatment was the presence of almost constant rigidity of the muscles at the back of the neck, and of the abdomen - indicating it was thought a state of nervous energisation - No effect whatever has so far been produced - Reflexes are all present - & all slightly increased, especially the knee jerks. No definite ankle clonus.

To page 549.

Joseph Kerr.

From p. 320.

July 6. (contd.) broken down. He feared he would perish from the window was utterly miserable and slept none. He was glad to get back here. His feeling he himself thinks is less acute? Has proposed going home again soon for a day. In average mental health he has certainly improved, and he sleeps much better. In conversation he is cheery and very intelligent, interesting himself in all that goes on.

Sept. 7th Patient himself believes that he is better. He says he can now fix his mind on a definite subject for a longer time and that he is not so full of miserable thoughts as he was. He works about the garden and workshops, and when indifferent subjects are talked about he is perfectly rational. When he is asked that by an effort & by 'willing' he might do himself good he shakes his head. Recently he was again at home for 2 days and seems to have got on better. Tho' he says the only place he feels secure in, is the Asylum. He has been sleeping well & his appetite is good.

26th Still doubtful of himself - & unable to throw off entirely the groundless fears that affect him. He cannot settle to a morning's work, without frequently being disturbed in the old way. He does not see how he can help himself. In appearance he is stout & healthy - & he is always cheerful, even over his own condition.

Lately he has been having 10 grs Sulphonal at night - & a course of Quinine, & Phosphoric Acid.

Oct. 30th Feeling better - & looking very well.

The Sulphonal & Quinine Tonic are now withdrawn.

The Sulphonal had a slight sedative action.

Joseph Kerr

He is now sleeping very well, without anything.
It's pretty busy just now outside.

Nov 6th. He left today - and may be said to be recovered. He can work well & steadily & is able to banish any distracting ideas that come into his head. He finds a pleasure in his work - He is in excellent bodily health & condition - & says he feels well & able to keep well.

Discharged Recovered.
Nov. 6th. 1891

Charles Thompson

from page 420.

July 11th. Those questions & requests of his are easily parried - & he is facile to a degree -

13th Taste & smell tested today - & they do not seem affected - but he says the odors & tastes is deficient - but the [illegible] stored in the cerebrum. [illegible] evidently exaggerated. He is [illegible] with some difficulty. [illegible] He is a little less forgetful [illegible] walked very sensibly - [illegible] during the day time. [illegible] & sleeping badly. [illegible] in last night. & to be given [illegible]

[illegible] were - very severe - general [illegible] ten minutes - There was great [illegible] at the month - [illegible] He had another convulsive [illegible] few minutes - when the [illegible] only half conscious & very dazed & stupid.

29th Yesterday afternoon he had another convulsive attack - & he was very confused & somewhat irritable after it - He has again been sent to No. 1.

August 5th Mind settled now & contented - not so unfortunate in asking out.

12th Confusion still extreme - & leads him into many delusions regarding the people round him & the place.

29th His letters are somewhat tidier & better written at present - He was weighed today & was found to have lost 11 lbs since July 1st. His general

appearance does not indicate any such great falling off - but certainly his habit of body is slight - and indifferently nourished.

May 30 Extract of Dram: Tumine. ordered - 2 oz. first of forty daily -

Sept. 7. Mr Morrison had a severe epileptiform seizure yesterday morning at 8 o'clock. He was restless afterwards & wanders. To-day he is back to his ordinary state, asking many questions & complains of many small ailments -

Sept. 15 another very severe fit last night at 9.15. He bit his tongue severely. Yesterday morning he complained of a feeling of weight in his head. Has he cannot understand. also very he was so sleepy. He has no recollection of the fit, but thinks his tongue being sore is due to gastric acidity. mentally he is unchanged

16th Fit again last night at 10 o'clock.

21st Mr Morrison's friends have thought it desirable that he should have a change of air and scene and it is now to be transferred to the Murray Institution. Perth. Before his departure it may be wise to make a short note of his present condition.

Reflexes. Superficial plantar reflex exaggerated especially on the left side, tickling the sole of that foot in the slightest way eliciting a cry almost of pain and causing violent convulsive drawing up movements of the leg lasting for some minutes. No ankle clonus. Knee jerk about the same on both sides and rather in excess of normal. Cremasteric, abdominal & epigastric reflexes can also be normal elicited.

To 507.

Charles Thomson

from page 420.

July 11th. Those questions & requests of his are easily parried - & he is facile to a degree -

13. Taste & smell tested today - & they do not seem affected - but his memory of odors & tastes is deficient - but the sensations themselves are registered in the cerebrum. The R. patellar reflex is considerably exaggerated. The left is elicited slightly with some difficulty.

17. A Letter today - is annexed. He is a little less forgetful just now & at times has talked very sensibly - He is to go up to No 4. during the day time.

22. Very restless at nights - & sleeping badly. Chloral & Bromide given last night - & to be given again tonight -

24th. This morning he had a severe - very severe - general Convulsion. lasting fully ten minutes - There was great motor convulsion & frothing at the mouth -

25th This morning about 9-40 he had another convulsive attack - lasting only a few minutes - when the writer saw him he was only half conscious & very dazed & stupid.

29th Yesterday afternoon he had another Convulsive attack - & he was very confused & somewhat irritable after it - He has again been sent to No. 1.

August 3rd. Mind settled now & contented - not so unfortunate in asking out -

12th. Confusion still extreme - & leads him into many delusions regarding the people round him & the place.

29th. His letters are somewhat tidier & better written at present - He was weighed today & was found to have lost 11 lbs since July 19th. His general

appearance does not indicate any such great falling off - but certainly his habit of body is slight - and indifferently nourished.

May. 30 Extract of Iron & Quinine ordered - 2 oz. pint of porter daily -

Sept. 7. Mr Morrison had a severe epileptiform seizure yesterday morning at 8 o'clock. He was restless afterwards & wanders. To-day he is back to his ordinary state, asking many questions & complains of many small ailments -

Sept. 15 another very severe fit last night at 9.15. He bit his tongue severely. Yesterday morning he complained of a feeling of weight in his head. Has he vomited not understand. also very he was so sleepy. He has no recollection of the fit, but thinks his tongue being sore is due to gastric acidity. mentally he is unchanged.

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To 507.

Robert Waddell—

Continued from 78.

July 13th 1891 — No change to record here. Occasionally requires a draught — usually Salfhond — at night.

Septr. 29. — Just the same.

Octr. 31. — Just the same. a most remarkable S. P. —.

Decr. 2nd — J. S. 2.

1892.

January 19. — no change. —.

March 15. — no change. Noisy now & then at night. Digitalis infusion regularly with the water every morning. boxing him with his gloves hands —.

Aug 9th — Unchanged.

October 3rd — Just the same. no worse than he was — to all appearance a year ago —

Decr. 16. — no change —.

1893.

Jany 31. — no change.

March 20. — Just the same. Has a great deal of vitality considering his condn. as he got over a bad case, not long ago, very well —.

August 7th. — no change. —.

Novr. 30. — Restless at night, making moaning sounds, but not evidently the result of pain. no change in his mental condn & his bodily condn is good

1894.

January 20. — Cough has troubled him somewhat of late, but it is evidently more a nervous than a cough due to pulmonary disease. He is the same & remains very well nourished.

July 12th — Took suddenly ill this morning & died in 3 hours. The P. M. shows the nervous signs of S. P. there being especially marked dilatn. of the ventricles

Death. G. Paralysis P.M.

Henry Newman Smith

cont. from p 362.

1893
April 24th — Never complains - sometimes says mildly that he thinks he would be better at home. He is very facile.

1893
June 30th — Good. natured and contented and in good health.

Sept. 25th — His life is & an easy-going and contented one. He seldom reads or does anything requiring mental effort but he walks outside regularly in fine weather although the amount he does is not large. His general health is good.

Dec. 28th — Unchanged. B H & C. good.

1894
June 29th — He dislikes work and is very easy but still with a little persuasion can be easily got to do a little. There is no change mentally.

December 29th — He has had a pretty severe cold lately but is all right now. He takes life as it comes and seems to enjoy it in a negative way.

1895
Dec. 20 — Unchanged. He makes every possible excuse to avoid work he can think of. He is good natured and demented. General health is good

1896
Oct. 6 — Weak minded and smiling he makes much of any trifling ailment as an excuse to avoid his work at the store & when there shows a greater liking for a quiet pipe at the door than for work. Bodily health good.

Dec. 31 — There is no change in the condition of this happy demented. His bodily condition is good.

1897.
Dec. 27. — D. S. O. both bodily & mentally.

to Vol VII. 327

John Lawson. Age 54 years
Admitted July 14th. 1891.

Lunacy. Mr. Lawson - Govan. Rate 16/

This gentleman was admitted last night to the West House. He is a Merchant in Govan - has been married twenty years. Has eight healthy children. He is a Protestant - He has always enjoyed good health till recently. This is his first attack of Insanity & it has only existed a few days. The supposed cause is said to be injuries to the Skull - on the 20th June - He is not epileptic. Suicidal, or dangerous to others. There is no G.P. stated.

I. Certificates bear -: "Very excitable in manner, irritable, and erratic in movements - In-grains there is legal restriction put upon him, that he is not in his own house - being in Argyle & Ballieston - wants away with the train, with other incoherent and rambling statements." Communicated by Others - "Goes about with bundles of papers in his pockets, imagines they are business Communications & require being looked after."

II. "He is in a very excited state, moving from room to room & finding fault with every person in the house. He cannot find time to enter into Conversation as he says he is very busy with the business & must have all Communications in writing". Communicated "He imagines he has been watched, & must have revenge upon some person. He wants to go & visit his father, who has been dead for some years - He thought he had been in Argyle Yesterday."

It seems that this gentleman has never notoriously exceeded as regards alcohol - but still has been able to carry -

John Lawson. 54.

from a five glasses of whisky daily - habitually for some time - but that he ever was the worse of drink - but he had got accustomed to a considerable amount of alcohol daily. He took a fair amount of exercise - at bowls &c.
On June 20th 1891 when returning home from a somewhat heated political argument he stopped & fell near his own door - striking his head violently. He is said to have been unconscious for two days & blood came freely from the left external meatus. & he was treated for fracture of the skull. It was after this that his change in manner & deportment began - & became so marked as to render it necessary to have him removed here.
In conversation he is found to be very sensible & coherent - (this morning) on most things - but at times he gets confused - He is inclined to talk a good deal, & along with this restlessness of mind there is a little irritability & excitability - & great anxiety as to his business affairs. He is confused too as to where he is - He has no idea that he fell & hurt himself - & though his manner & behaviour at home have most evidently been peculiar & unusual he has no idea of it - He has no delusions or hallucinations -
On examination he is found to be a strongly made & fairly healthy looking man. There are no signs of local paresis or in his limbs. His walk is good & his grasp & use of arms normal - His reflexes are not abnormal. His tongue is somewhat foul & coated at the back - but in the front it is quite clean. It looks as if it were cleaning up after being generally foul.

John Lawson. 54.
Continued.

The tongue is protruded straight.
There is no facial paresis or atrophy. The pupils are unequal - the left being larger than the right - & both are a little irregular in outline. They react to light & accomodation - (her sight is quite good)
The hearing of the left ear is considerably lessened - & about half that of the right ear -
There is no pain in the head - nor sign of bruise &.
The 2nd frontal headaches since days ago -
On examination of the chest the lungs seem healthy tho' voluminous & slightly emphysematous - the cardiac area being quite covered by them - Chest is large slightly rounded -
There is a marked pulsation in the episternal notch & in R. Supraclavicular region - Apex beat cannot be seen or felt - as any other pulsation, normal or abnormal. Percussion of heart is not available owing to condition of lungs. At the apex the sounds are but heard, the 2nd being accentuated - Is murmur - & sounds faintly pure.
The accentuation belongs to the aortic sound - & the character of the 2nd sound in aortic area is somewhat loud, prolonged & twanging - This sound is heard very well in an area outwards & upwards from the "aortic" cartilage - & on percussion in the area where this sound is so well propagated Comparative dulness is found - There seems to be some dilatation in the region of aorta & communicated, anemorical in character - His pulse is regular - 110 - 120 - soft - vessels at wrist slightly rough - The tendency

Thos Lawson

The arterial degeneration is further seen in a fairly well marked Arcus Senilis.

Abdominal viscera seem normal. There is no sign or history of Syphilis.

His urine is clear - light in color - without deposit - but a faint mucus-cloud. Reaction marked. S.G. 1013. On boiling a distinct cloud forms disappearing at once on acidifying the urine. is phosphatic in nature.

16th. Pulse still rapid - 115 - Skin moist - Temperature between normal & 99.8. Says he feels well, but is excited a little & sleepless. Taking light exercise - walks in the evening.

17th. Sedative powder this morning. Pulse slower & steadier. Looking well. Pupils still much dilated.

20 Iodide of Potassium in 5 gr. doses - three daily.

25th. Keeps fairly well. But is writing letters & telegrams, and is a little fussy & excited - & no doubt if he was at home would have his own way in everything - & insist on working & attending to business. Left pupil remains always a little larger than right.

Aug. 3rd. Very sensible, orderly, well, on the whole. Sleeps fairly well. takes light exercise & has fair appetite. All that can be detected is a little elevation & brain ētat - not quite natural; a talkativeness which is partly usual with him; and a capacity for listening to Mrs Gray's interminable stories & ceaseless talk which no sane man has yet evinced.

12th. Improved. & really seems fairly sane - & able to leave for rest & change whenever - which he is soon to do.

14. Has gone home on probation today, having given a written promise to live regularly & quietly & do no work.

Sept. 5th. Discharged Recovered

Robert McFarlan. 33 years.
Admitted July 14th. 1871.

This patient was admitted to the West House -
He is single - aged 33 - by occupation a bank clerk.
He has been mentally deranged for about 3 months -
He has not been previously under treatment in an asylum. No supposed cause is stated
to be irregular habits of life - He is not
suicidal nor dangerous to others - nor is he
subject to epilepsy.
There is no history of Hereditary Predisposition.

I Medical Certificates state —: "He states that he has plenty of money, and is going to build a number of houses, previously visiting Paris, London, &c.
He laughs foolishly to himself. and rambles from one subject to another."
Facts communicated are —: "His brother showed me letters written by Mr. McFarlan containing the most absurd proposals as to building property."

II. "When seen by me he was much excited - and his language was in coherent vindicated numerous delusions. He seemed to have no idea as to where he was stated that he had come to stay for a few hours, was going off at once to Glasgow to lift large sums of money. He stated that he was about to build very extensively at Kilmarnock that he was going to secure the influence of the people in the neighbourhood that he would require to drive 20 miles a day for many months to come."
That seems to me no doubt that this gentleman has led a fast & riotous life. He worked as a

Robert Wm Farlan
Continued.

bank teller - a fairly ordinary occupation, one that must during the time occupied at such exercise in a high degree the brain tissue - His non-professional life was born - as regards drink & women, in both of which he is said he has got into debt in stated that he lived [illegible]

The first symptoms of his his business & confusion in his his post in the bank as he duties - He went home & a doctor there & drew chalk in locked behind the ears, & a few weeks he was found & was finally certified for

Letter of Robt Wm Farlan
July 7th 1891
(before admission)

[illegible] ted, & does not know where [illegible] to find out - the surroundings or his neighbours, [illegible] exuberant - often singing [illegible] & greets total strangers with an air of flippant joviality & indifference. He has written letters containing exalted ideas of personal property, & has various 'grandiose' notions of what he is going to do & where he is going to travel to. In his pockets were found various lewd & immoral pictures. He is dressed in Knickerbockers - & is evidently careful enough about his personal appearance. He looks younger than his age - His expression of face denotes self satisfaction & complacence.

(A letter is annexed).

Robert McFarlan. 33 years.
Admitted July. 14th. 1871.

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He is single - aged 33 - by occupation a bank clerk.
He has been mentally deranged for about 3 months -
He has not been previously [illegible] asylum.
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require to drive 20 miles a day for many months
to come."
There seems to be no doubt that this gentleman
has led a fast & vicious life. He worked as a

Robert McFarlane
Continued.

Bank teller - a fairly arduous occupation, one that must during the time occupied at such exercise in a high degree the brain tissue - His non-professional life was loose as regards drink & women, in both of which he is said to have indulged to excess. He has got into debt in consequence - but it is not stated that he had fraudulently ~~in embezzlement~~ from this. The first symptoms of his disorder were carelessness in his business & confusion in his books. He had to leave his post in the bank as he was obviously unable for its duties. He went home & was under observation by a doctor there & drew about in the fresh air - & was thought behind the ears, & on the temples - but in a few weeks he was found to be decidedly worse. & was finally certified for admission here.

He seems happy & contented, & does not know where he is & displays no curiosity to find out. He expresses no surprise at his surroundings or his neighbours. He is mentally exalted & exuberant - often singing & laughing boisterously & greets total strangers with an air of flippant joviality & indifference. He has written letters containing exalted ideas of personal property, & has various 'grandiose' notions of what he is going to do & where he is going to travel to. In his pockets were found various pencil & coloured pictures. He is dressed in knickerbockers - & is evidently careful enough about his personal appearance. He looks younger than his age. His expression of face denotes self satisfaction & complacence.

(A letter is annexed).

Robert McFarlen
Continued

His memory is decidedly deficient. His capacity for addition of figures mentally & on paper is greatly impaired. He cannot add together the simplest sums.
His writing, as seen in the annexed letter, is shaky & badly formed. He repeats phrases again & again - leaves out a word here & there - & misspells very badly -
His gait is quite steady - He stands firmly with his eyes shut & heels together.
His pupils are unequal in size, somewhat dilated, especially the left, which is the larger - His left pupil reacts very well to outline, & the right pupil is also irregular in outline & a less degree. The consensual reflex is absent & the reaction to light cannot be elicited - or if present is exceedingly faint.
The accommodation contraction is fairly good.
The palate is high & narrow - & teeth crowded in both jaws - His speech is slightly indistinct (not typical of GP)
There is very slight tremor in his tongue - nothing notable or characteristic.
The Patellar reflex is very slight on the left side - on the Right side it is absent (on two examinations).
Skin reflexes
The thoracic & abdominal viscera seem healthy -
There is no history of syphilis.

17th Sleeping fairly well - & taking food well.

18th Vomiting pretty often after food. Tongue only slightly furred. No pain or any other abnormal gastric symptom.

22nd Complained of headache yesterday - & is still vomiting at times - Last night his eyes were

Robert Mc Farlane
Continued.

- Nothing abnormal in the
ent - The examination was
Reflexes - Field of vision

Boracic Acid & Salts of Strychnine
gr. - to control the gastric
ation some letters Catchy -
ching perhaps of ambitious
ally formed, but not very
ally worded & illiterate.
A very characteristic letter

Effs & Paralysis of Insanity given - 3rd Ed.
Insanity.
all extremely characteristic -
has been sent home - He was after to excite the other
patients & make mischief.

Letter of 21st & 24th July. 1891
Grandeur idea - Artificial - Not working syllables
Letter evidence of great mental deterioration since

Sept. 8. Symptoms of G. P. very marked and becoming more so every day. Recently he asked the writer if he could get away for a day. He wished to go to Ireland with a friend of his a millionaire and he would give the writer Fifty thousand million Pounds on his return. Recently his stomach has been troubling him but he forgets himself if not carefully watched. He is in very good bodily Condn & gains in flesh

Sept. 29. Has been made to dine at a separate table & since then by regulating the amount of food he gets, his stomach has not troubled him. mentally he is the same grandiose and full of delusions.

To p. 479.

Robert McFarlane
Continued

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addition of figures mentally
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Robert Mc Farlane
Continued.

examined by Ophthalmoscope - Nothing abnormal in the disc & fundus was made out - The examination was rather difficult from his restlessness - Field of vision seems to be normal.
Today some Bromath. Hyd. Inorganic Acid & Spirits of Chloroform & Camphor water was made up - & ordered to control the gastric irritability. He has written some letters today - devising absurd schemes - & making proposals of ambitious nature. The writing is badly formed, but not very shaky - The letters are badly worded & illiterate.

29th. Vomiting has ceased now - A very characteristic letter of today is annexed.

Aug 4th Today a mixture of Iodide of Potass & Perchl. of Mercury given - 3rd day. 5 grs doses of Iodide - & gr 1/48th Mercury.

12th He is writing numerous letters - all extremely characteristic - Has been sent into No. 2. as he was apt to excite the other patients & make mischief.

Sept. 8. Symptoms of G. P. very marked and becoming more so every day. Recently he asked the writer if he could get away for a day. He wished to go to Ireland with a friend of his a millionaire and he would give the writer Fifty thousand million Pounds on his return - Recently his stomach has been troubling him but he forgets himself if not carefully watched. He is in very good bodily condn & gains in flesh

Sept. 29. Has been made to dine at a separate table & success been by regulating the amount of food he gets, his stomach has not troubled him. mentally he is the same grandiose and full of delusions.

To p. 479.

William Burgess

from 332.

July 22nd 1891 There seems to be a certain paresis of some fibres of his bladder - which is increasing - or at least it becomes at times greater - as of late his urine has been passed at long intervals - & his bladder retains a pint & more of urine for some time. On several occasions it has been necessary to draw off the urine with the catheter. A little difficulty in doing so occurred once - & the finger was introduced into the rectum, when it was readily noticed that the sphincters were paralysed & inactive. The lower bowel contained a considerable amount of faeces - & a purge was ordered -

23rd. Urine drawn off.

31st. Urine pretty often has to be drawn off. It is somewhat turbid, neutral, and offensive on odor - Under microscope amorphous matter & some neutral lime crystals are seen - No pus cells or epithelium. Boracic acid in 20 gr. doses given internally - about 20 grs three daily.

August 1st. He is very feeble now & his legs hardly support him. Sulphonal stopped just now - as it may cause a continuity this weakness & feebleness of gait - & Paraldehyde in doses of 3ii given when he becomes excited - with some Tr. Aurantii & Ol. Limonis - which seems to disguise the taste & smell as well as anything else. He however has always a little trouble in swallowing fluids - more so than he has in swallowing solids - which he can do well. He is emaciated & feeble -

August 3. The urine has much improved - is clear - acid - & smell is no longer offensive & the catheter is not so often required now.

Aug. 8th. The Paraldehyde is still being administered - but the

William Burgess

dose has had to be increased - as on several occasions the dose of 3ii was quite ineffectual. Last night 3iii at 5. pm. & 3iii at 10.30 pm. seemed him a drowsy & quiet evening, & slept all night. The draught for him is now to contain 3iii regularly & 3ii if it has to be given frequently. Since the Salphonal was stopped his power of walking has improved a little - The catheter is now used much less frequently - & the urine is healthy.

Aug. 12th. Catheter no longer used - but no improvement otherwise. Several times lately he has been fearfully noisy - & the doses of Paraldehyde now given are usually 3iii & this takes from 16½ hours before he quietens down - & a period of excessive excitement usually occurs before this - & he presents a countenance of rage & horror - & yells & swears at imaginary people or sights - constantly saying "You are killing me - you are killing me" "Take him away - far away. far away." & then oaths & shouts - the paroxysm causing profuse perspiration - flushing of face & general tremor in facial muscles & limbs - & increase of saliva which dribbles over his lips.

The best way to give the Paraldehyde is perhaps as follows -:

℞ Paraldehyde 3iii
Ol: Cassiae. m. vi -
Mucilaginis
Aquae } partes equales ad 3iv
F. Haustus -

27th Paraldehyde still given as required - For the last two or three days he has not been so noisy - He is now incontinent of urine & fæces frequently wet & dirty. He is emaciating steadily & looks very thin & pale. Today he was put on Goodeve - 30 m. 3ia daily 480 -

To page

Robert Orr
from 390

July 25th To be indicative of aortic disease & dilatation if not made out today. A turpentine stupe was applied - patient kept in bed - Stimulant & expectorant prescribed.

27th Pulse still above normal rate - ronchi pretty numerous in chest - Kept in bed. He is not depressed about this illness at all, and is quiet, civil and pleasant to talk to.

29th Nitroglycerine tried to relieve bronchial condition - but it did not suit him & he said it caused pain in the epigastrium.

31st Today he has been put on Digitalis - 4m. doses - on the view that the ronchi visibles - & also the murmur heard at the base - indicating a bronchial & pulmonic venous congestion - from an inefficient cardiac contraction.
There is evidence of a dilated condition, associated with hypertrophy too in all likelihood of the ventricles - a diffuse wavy cardiac impulse - epigastric pulsation & displacement outwards of cardiac apex.
He cannot stand a heavy diet, mentn. as the digestive action is impaired - so light foods are given & a glass of whisky daily.
The liver dullness is slightly increased.
The pulse, as noted before, is soft, well-sustained - Coats of vessel considerably degenerated.

Aug 3. Pulse still soft & beating 100 per minute & 98. Feels a little easier, but physical signs are not changed -

Aug 7th A little improved. Pulse rate 88 - 90. Sleeping better & feeling easier.

Aug 12th. Still a little better - but ronchi are still present. But his nights are better - & breathing much less troublesome.

Robert Orr

Aug. 20- His body health still requires care & attention - but he is now mentally very well - & was today removed home by his friends -

Discharged. Recovered.

Hugh McCormick.
from page 298.

July 28th. Spectacles suit him - & this is not because he cannot see well enough. but for some idea that he does not explain. It is thought possible that he thinks he cannot be seen so well by others when he wears his spectacles. These & other slight occurrences like them are about the only evidences of an estranged mind - & are little in themselves. The ~~sore~~ bruise is still on them & has for a time ~~gathered about~~ it still.

Sept. 22. He is now fairly well, probably as well as ever he will be. His friends have however arranged that he stay here another quarter to give him every chance. Sometimes he feels a good deal urging to get away but as a rule he is fairly contented. B.C. good.

December 2nd Continues to be fairly well. at times suspicious and captious but not so usually. Bodily his health is good

1892.

January 19. Of very variable disposition & temper. Pleasant at times and chatty. again silent & repellant in manner if not in action. Broods over his confinement here a good deal & thinks his wife is much to blame. B.H.&C. good.

March 15. On the whole rather silent & reclusive & irritable but often pleasant. When playing at cards he can't be trusted as he cheats freely. B.H.&C. good.

Aug. 9th. No better.

October 3. Very anxious that he should get away now & at present he is very well. though it is believed that

Hugh McCormick

he represses delusions. At times he has a little burst of temper but on the whole he is better behaved than he was —.

1892.

Dec 16. Noisy at nights occasionally, but usually pleasant & civil. His mental condition shows no change. His bodily condn is good.

1893

Jan. 31. Has been quieter of late, and not giving any trouble B.H.TC. good.

Mch 20. No change —

Aug. 24. Just the same. Much pleased at getting Parole in the evenings & not abusing it —

Nov 30. Very little change in his condition. Usually pleasant but now & then rough a bit & swears at large. B.H.TC. good —.

1894.

April 14 No change. At times cheerful & nice, but as a rule sociable enough & civil. B.C. good.

Augt 28. Keeps pretty well. Though he does not give expression to them it is believed that he has delusions against his wife & other friends. His bodily health is fairly good He has partial parole of the grounds —

1895.

Jany. 11th He keeps in good bodily health and his mental condition is much as has been noted. He is undoubtedly delusional, but does not give free expression to them - He is now & then excited & abusive —

April 17. Was very excited with his wife & friends when they visited him recently. He is quiet as a rule but puts evil into the head of others. B.H. TC. fair

To Vol VI p. 429

William Huskie. 38.
admitted July. 28th. 1891.

This man was admitted as a private patient to the East House. He has up to now resided at 1 Holmhead Place. New Cathcart. His brother's address is 79 Abbotsford Place. Glasgow. Patient is married & 38 years of age. an iron-monger. This is his first attack. and is said to have only lasted a week or ten days. Supposed cause is business difficulties & want of success. Not epileptic or suicidal but might be dangerous to others. Uncle insane after injury to head. Medical certificates bear:- "That he is very excitable & garrulous but good humoured. Also "He is considerably excited talks incessantly has many delusions. He imagines that he is possessed of great wealth & that his life is insured for over £100 000". He promises certifier £250 as a present.

The history of the onset is obscure he is said to be excitable naturally but for some months previous to any much being noticed he seems to have been rather raised & extravagant in his ideas. He is the youngest of the family & has had a slight attack of rheumatism. He has never so far as brother can tell been a drinker but he may have been a little loose with women: though his only special reason for that idea is that he has of late shown a tendency to make remarks on & notice girls in the street to in rather a lewd way. This was not formerly his style. The first thing that seems to have alarmed his friends was his restlessness at night & refusal to go to bed about a week ago.

July. 31. Patient is very excited & talkative. His ideas are grandiose. with great good nature as a rule but with a

Wm Huskee

tendency to be irritable with patients round him who refuse to answer questions &c. He notices all that goes on around him. Talks about his winnings on horses. & his powers as an operatic singer. His nerves at rest. Owing to his irritability with non responsive patients he has been put to sleep in the padded room at night. There are remains of old synovitis about his right knee. a cicatrix with thickening & creaking. There is absence of the patellar reflex on both sides. but no clonus. There is very little tongue tremor but some slurring in speech & he ~~frequently~~ can't say "Truly rural" without an effort. He is in good health & condition bodily & has a pretty sound chest.

Sept 3rd The excitement which at first was a very marked feature in this case has now largely abated & he is in Pool. H. B. He is good humoured, sociable, & glad to talk. & has a marked feeling of bien-être. Seems satisfied with his surroundings & condition He sleeps fairly, and takes his food well.

Oct 1st At his own particular request he has for some weeks been working outside. & he takes a fair share of indoor work as well. He is stout & in excellent bodily health. He is always affable & inclined for conversation - & a vein of self importance & satisfaction runs thro' all he says & does.

20th. This patient is to leave shortly - his wife insisting on removing him. He is really fine from well. He quiet, clean, civil & outwardly but little to notice. However he is always

William Hewitt
Continued

over lofty. & sanguine, in a condition of bien être.
He has no means. & is out of work, yet he talks
of what he is going to do, & how he will finance
this - & bring himself into that & so forth.
He has by no means expressed any absurd grandiose
delusions - but the tendency of his mind is in
that direction. He talks much about betting -
& says he has backed various horses for approaching
races. He has been singing at the weekly
Concerts - much to his own satisfaction.
He is a great 'swell' on these occasions - &
most gallant in his attentions to the ladies.
In a word he is egotistical, conceited, & foolishly
sanguine.
His pupils are belated & shy pupils.
He is otherwise very well physically.

Oct. 26th 1891 Discharged - Relieved.

1893
June
Sept.
Dec.
1892
June
December
1893
Dec.
1894
March
Oct.
Dec.

Francis Conby

cont: from p 359.

1893

June 30th — He is sometimes noisy and excited at night: in the daytime he is moody and depressed and refuses to talk. The delusions therefore under which he is labouring are difficult to obtain. His general health is fairly good.

Sept. 25th — He has developed a habit of jerking his head. There is nothing else new to record about him. He is sleeping better at night but there seems no mental improvement.

Dec. 28th — Not been quite so restless lately but not showing any mental improvement. He shuns observation and seems entirely wrapped up in himself.

1894

June 29th — He has given over to a great extent the habit of jerking his head. Mentally he is the same.

December 29th — Unchanged. B H & C. good.

1895

Dec. 20 — Self absorbed and demented he keeps out of the way. He is demented & enjoys good B H & C.

1896

March 13. — Is recovering from an attack of pleurisy with bronchitis. the latter being slight.

Oct. 6 — Is in his normal health. He lacks energy & mind and body, keeps out of the way in corners though he is good natured when spoken to. He has a habit of retaining his saliva in his mouth & sometimes will not speak on that account. He is incapable of sustaining a conversation and is happiest out when left alone.

Dec. 31 — Sits as usual in his corner smoking and jerking his head about. DSD.

Vol VIII. page 497.

John Gardner. M.D. 43 years
admitted July. 31st 1891

This gentleman was admitted to the West House at the instance of his wife. He has been in practice as a doctor in this country - married with family - 43 years of age. He has been insane, at least ~~three months~~ eight months, but the insanity has gradually supervened on a chronic spinal & cerebral affection: The supposed cause is overwork - He is neither epileptic nor suicidal. But is at times dangerous to others

I Medical certificates show -: "He has an old standing disease of the nervous system dating from 1881 ..... this has been gradually increasing on him & has for the last two years obviously affected his mind, producing childishness of demeanour & entire incapacity for any of the ordinary duties of life, or even for the government & control of his own family household: of late he has been quite morbidly emotional and sometimes quite irrational in conversation, forgetful both of dates & facts that he ought clearly to have known." Communicated - "Mr. G. says that last night he was wandering about the house aimlessly & is rather violent when thwarted: he goes out to catch trains without any idea of where he is going to: once he tried to push her down stairs, & he has frequently struck his attendant: it has been necessary to keep the children out of his way - and altogether he is becoming unmanageable."

II "He says he quite forgets what he did yesterday: he is childish & laughs stupidly - He has exhibited violence towards his attendant - - He has been

John Gardner

seen to give his attendant blows with his fist. or so."
The patient himself is quite unable to give particulars
of this long illness - but the following have been obtained.
Thirteen years ago he had a severe attack of peritonitis.
This was followed in three years by twitchings of hands
& feet & side, first on the left side of the body only, but
still some years later on the right side as well - & then
the symptoms reappeared on the left side, from which
they had for some time disappeared. Professor Gardiner
who has frequently seen the patient, along with Dr Finlayson
referred to the case as an obscure nervous one, with
"peculiar choreic movements". In 1886 the speech
became defective & has continued so. In 1880, in
month of October, the symptoms became aggravated.
& there were marked flushings of the face. Since then
they have become progressively worse - and a noticeable
point is the development of a violent & ill-controlled
temper.
Such is an outline of the history of this patient.
He is found to be a man of fair height & development -
but wasted & weakened by disease - & his shuffling
feeble gait - slightly spastic - his general weakness
& loss of power - his vacant expressionless look -
his ~~imperfect~~ defective articulation - bear witness
to the presence of an advanced affection of the
cerebral & spinal nervous systems -
A detailed account of the symptoms & signs of the nervous
system is not practicable. It is found however that
sensation is lost in the lower extremities - & touch
& pain - (at least he at present says he feels nothing).

John Gardner

This sensory defect seems also to be present in the upper extremities & in the body - but sensation does seem to be normally present in the scalp & face.
He describes no subjective symptoms of any kind -
The knee jerks are both much increased - more so it seems on the left side - Ankle clonus on each side is also present, but is most easily elicited on the left side.
Slight radial & ulnar reflexes are also elicited - but not satisfactorily - The plantar, cremasteric & various abdominal reflexes are all absent.
The extensor muscles about the ankle are readily put into a state of tonic contraction in the efforts to elicit the ankle clonus.
The grasp of each hand is weakened - & the right seems if anything to be the weaker. There is also defective motor power in the limbs slightly.
The muscles all over his body are soft & small in bulk - & the eminences of the hand show this well, but there is no essential atrophy from neuro-degenerative causes but rather an atrophy from disuse & malnutrition.
The tongue is moist - with a yellowish mucous coat - & is faintly tremulous - He speaks in a whisper usually - & articulation is slow & somewhat slurring. & there seems to be some paresis in the labial & glossal muscles.
The pupils are unequal - the right being the larger: their outline is irregular: they are usually rather dilated, but the reaction to light, the sluggish is not absent - & the consensual reflex even is

John Gardner

elicited fairly. It cannot be stated accurately whether they resist accomodation or not; probably they do.
There is no Argyll Robertson Pupil.
(Field of vision & Fundus see later report).
Hearing seems normal.
He states that he has difficulty in passing urine & to what extent it is difficult to say. Likely a difficulty in starting the act. At any rate he has passed plenty urine since admission. & this Paddles is not over distended.
The Urine is normal in character.
His lungs seem fairly healthy. The apex of the heart is slightly displaced outwards & a systolic murmur, functional, is generated at the mitral valve.
The pulse is occasionally intermittent & irregular.
Beyond this there seems to be no marked change in his viscera.
In conversation he is weak-minded & slow to answer. But he can answer pretty fairly when he does speak.
But he is silly & forgetful. He said his age was 22 years. but seemed to understand when he was corrected, but laughed freely & said there was nothing impossible in it. He has as yet shown no sign of irritability. He must be regarded so far as an example of organic dementia.
Any delusions or hallucinations have not yet been elicited. He slept fairly his first night. and today (August 1st) is manageable, contented & imbecile.
Aug 3rd Sleeping fairly well. Quiet & manageable. But is desirous of getting home again. Slight difficulty in swallowing & has to be looked after in this respect.

John Gardner

Aug. 4th His eyes were examined with Wilmorse's field of vision tested as far as possible - but unsatisfactory. No morbid change in disc or fundus was detected.

12th His condition changes little - Bowels rather costive - Is occasionally wet at night - is generally feeble & helpless.

28th Very frail - & sometimes falls out of bed - requires a good deal of looking after - Is very quiet & manageable - & at present passes urine & faeces naturally, tho occasionally he wets his bed.

September 8. Passing thro an excited attack the first he has had since admission. He has been violent, struggling with the attendants. at night also he has been very restless, walking about his room and not keeping his bed. When so excited he does not talk much but his eyes stare & protrude & he clenches his teeth Murmuring him he is fairly easily managed.

Sept. 29. Has been very quiet of late and in reply to queries always answers that he is very well. The spinal disease does not show much evidence of progressing and he is practically unchanged since last note

October 31. Just the same.

December 2nd Just the same Mambanis a fairly good bodily condition

1892.

March 15. Comparative paresis of one side of the face has of late been observed & he is more stupid than formerly. His bowels are extremely constipated, & the sphincter seems paralysed at times. Mentally there is no change. —

John Gardner

Aug. 9th. Confined to bed now. The weakness & general paresis necessitating this. He is at present keeping about one level physically & mentally is childish & demented. His speech is unintelligible. He cannot articulate. His laugh is a curious sort of scream, which is made out to be a laugh only by observing the pleased expression of his face & eyes. He gets nourishment & stimulants during the night. He is quite helpless & has to be tended in every way.

October 3. Remains in the paralysed state described above. His dull days are more frequent now & he has been to say.

Decr. 16. Bedridden & failing. He is not now able to stand without support & is very feeble. Speaks little & that most indistinctly.

1853

Jan. 31. No change.

Feb. 3. A slight erysipelatous looking blush appeared on the left cheek yesterday. To-day the left cheek is also slightly redder than usual, but it is not rapidly spreading & the temperature is over 99.4° this morning. The affected area have been painted with Collodion. Mentally he is unchanged very helpless, & requiring to have every thing done for him

17th Feb. The Erysipelas subsided, but it has left him much weaker & in a critical state generally. He did not appear to recognise his friends when they were recently here

Apl. 7. Taken to-day to a Nursing Home in Hollhead, his friends not wishing him to die here

Relieved

William Pender Logan - 40 years
Admitted: August 4th 1891.

Sister. John Logan - Clitherfield House - Islington.

This gentleman was admitted to the West House this afternoon, at the instance of his brother. He is a Bachelor - occupied in business as a Bleacher - & has been insane for 14 days. This is not his first attack; - he has been twice insane before, & on the last occasion, six years ago, was under treatment in this asylum, for about five weeks - (see Vol. 23. Males West O.S. page 33).
His first attack of which there is no record nor statement occurred when 24 years of age.
There is no definitely known cause - but he has lately been somewhat arduously engaged at a volunteer camp - as he is a Colonel in one of the regiments.
He is not suicidal, or epileptic, but may be dangerous to others.
The hereditary predisposition is well marked: Grandmother was insane: his father was passionate & unstable - & a maternal uncle committed suicide.
His condition before admission seems to have been somewhat the same as now - & as stated in certificates.

I. These show: "Has delusions: talks incoherently and incessantly, is restless & unsettled in his manner, has high & exalted notions & behaves in a most extravagant manner". Commentated - "that he used threatening language - is violent & unmanageable in his behaviour, is inclined to be destructive, sleeps very little - was confined in an asylum six years ago."

II "He has always been quite for 2 years most kind & gentlemanly - This morning he was excitable & could scarcely speak - Insisted on leaving me & refused to

William Pender Logan.
Admitted Aug 4th 1871

drive into town with me. He remained more in the mood of chaff, till a slightly contradictory remark roused him & he became violent, knocked his sister on the ground and rushed into the bedroom - I followed & he became so outrageous, and threatening & shook me, and knocked me down with a thick stick, I was glad to get out." Communicated that "he is placing flowers round the photos of dead friends - On Tuesday last he threatened to cut his sister to pieces with a knife. His brother tells me that he threatened to shoot two friends on the road, last Friday, & threw an open knife at one of them."

His condition on admission was excited & reckless; he was self satisfied, & arrogant in manner - gave orders freely to people around him; talked much in a boisterous manner - & was irritable if contradicted. He was forward in behaviour & conversation - & rambled from one subject to another. No delusions were expressed. He seemed quite pleased with his surroundings however - & swaggered about the airing court, talking & smoking continually, & inclined to resent interference. He became more excited at night - took almost no tea - & when in bed was continually calling out & quite sleepless. He demanded food, & some biscuits were given to him. He became very passionate & would readily have become violent - had he been contradicted or reasoned with - He said that he would drive away next morning at 9 a.m. & take legal proceedings against his brother & all those who assisted to detain him.

William Pender Logan

Had a warm bath last night.

Aug. 5th He slept about 3 hours last night & was restless & talkative when awake. This morning a dose of Black Draught & Bromide Potass was given & acted very freely. At the morning visit he was a great deal quieter & more reasonable in every way.
His tongue is furred centrally. Palatal arch is narrow & high. Bodily condition very good, tho' he is not stout. Viscera generally seem healthy.
Pupils of less than medium size, equal & mobile.
No ankle clonus - very slight.
Knee reflexes a little more marked than normal.
At the examination he was foolish & restless. answers
& draw attention to his penis. R. D.

6th Slept much better. It decidedly improving. but became excitable when talking about some of his letters. which he thought were not to be posted & rightly; one of them is annexed here.
His attack seems to be a simple mania. and the prognosis favourable. He has not been lately intemperate. nor is he usually so.

8th He is up in No. 6. during the day now. & is improving. Last night he drew up his last will & testament. a foolish kind of document but showing very little incoherence & on the whole fairly expressed. It is annexed.

12th The mental balance of this patient seems now to have readjusted itself. & he appears to be perfectly sane. He eats & sleeps well. & is very pleasant & affable. & enjoys books, billiards, music &c. He will shortly leave.

William Penden Logan

Aug. 15. Mr Logan has made a good and rapid recovery. He is now quite well mentally and a very sensible pleasant fellow.

He was dismissed, recovered today.

see Vol V p. 7.

William Bender Logan

Had a warm bath last night.

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His tongue is [illegible] narrow & high [illegible] he is not stout.

Pupils of less [illegible]

He outlines is [illegible]

Knee reflexes [illegible]

At the exam[illegible] & draw atten[illegible]

6th Skeff must be [illegible] became irritable [illegible] letters. [illegible] & rightly; an[illegible]

His attack [illegible] and the prognosis [illegible] as not [illegible] so lately interrupted. was is to usually so.

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He was dismissed, recovered today.

Readmitted see vol V p. 7.

James A. Leitch.
from 306

Aug. 6th 1891.

stumbled about a good deal - & seemed to run into trees & branches in a stupid way - He was led back - & was then seen to be very dazed & stupid - & unable to speak as before, or to move his left arm, & only his left leg a little - His face was somewhat flushed - His tongue when protruded deviated very decidedly to the left side - & there seemed to be slight paresis of the left facial muscles. His speech was very feeble & indistinct - He was nearly helpless & had to be assisted up to the house & put to bed - A little later he seemed to have regained some power on his left side, tho' still distinctly paretic - There was also a spastic & contracted element in the limbs - a primary contracture - The knee jerk on left side was exaggerated considerably - No ankle clonus - the attempt to elicit it causing firm tonic contraction of the muscle - At 1.30. this morning his temperature was 100.2 - He had vomited once or twice - & the contents of his stomach consisted of large pieces of meat & bread which he had evidently bolted the previous day - A dose of Black draught was given - & this morning an injection as the bowels had not moved.

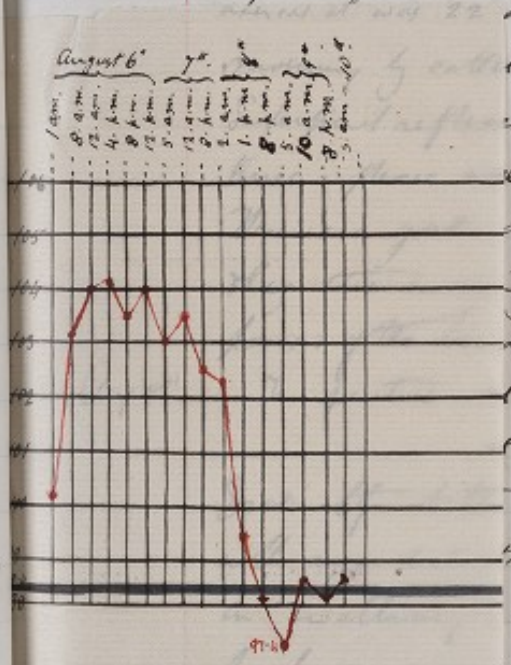
Temperature at 8. am. 103.2 at 4. pm. 104.2
at 12. am. 104 at 8. pm. 103.6

Pulse about 100 - fairly good - regular - He has passed water - but still remains very helpless & only partly conscious - Evaporating lotion constantly applied to the head.

James A. Leitch.

Aug. 7th Temp. at 12. midnight 96°. 104. at 8 pm 102·6
7th at 8. am. 103. "
at 12. am. 103·6

He continues in much the same state - semi comatose - face flushed - tongue rather dry - pulse very fair & usually at 98 & 100. Breathing a little quicker this morning - 34 per minute, [illegible] a 20 before. Urine drawn off this [illegible]



[illegible] of feet & thigh much congested. [illegible] less marked on both sides. [illegible] deal of rigidity on the right side, arm [illegible] - & as far as can be elicited a decided [illegible] & arm.

[illegible] 2. am. was 102·4.
[illegible] 1 pm. was 99. 5:
[illegible] - but very stupid, unable to speak [illegible] ness. He has a decided difficulty [illegible] no doubt due to some pharyngeal [illegible] ll as lingual paralysis, which is still quite marked. The expulsive power of the bladder is very poor, as seen by the flow of urine [illegible] the catheter, which has to be regularly employed.

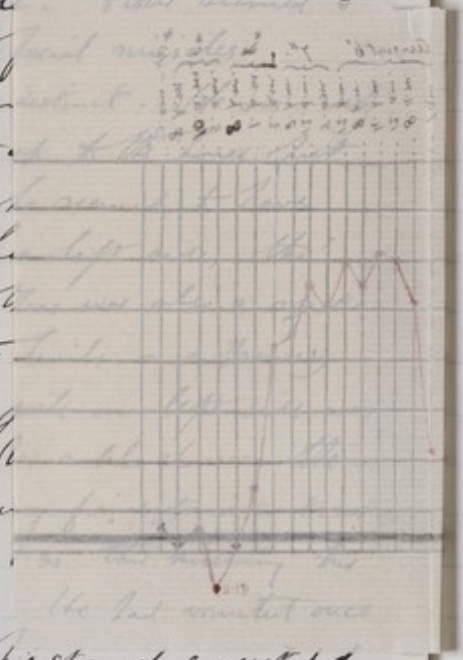
The urine of yesterday shows a decided trace of albumen - it is otherwise normal. This was probably due to a congestive condition of kidneys - as evidence of such congestion was also present in the lungs -

9th. Passed a fairly good night - but this morning at 9·15 a.m. he was seized with a severe general epileptiform convulsion which lasted some minutes. When seen by writer

James A. Leitch.
from 306

Aug 6th 1891.

stumbled about a good deal - & seemed to run into trees & branches in a stupid way - He was led back - & was then seen to be very dazed & stupid - & unable to speak as before, or to move his left arm, & only his left leg a little - His face was somewhat flushed - His tongue when protruded deviated very decidedly to the left side ... & the slight paresis of the left ... His speed was very feeble & ... helpless & had to be assisted ... to bed - A little later ... regained some power on ... still distinctly paretic - ... & contracted element in the ... contracture - The knee ... exaggerated considerably - ... attempt to elicit it, caused ... of the muscle - At ... temperature was 100·2.



or twice - & the contents of his stomach consisted of large pieces of meat & bread which he had evidently bolted the previous day - A dose of Black draught was given - & this morning an injection as the bowels had not moved.

Temperature at 8. am. 103·2 at 4. pm. 104·2
at 12. am 104. at 8. pm. 103·6

Pulse about 100 - fairly good - regular - He has passed water - but still remains very helpless & only partly conscious - Evaporating lotion constantly applied to the head.

James A. Leitch.

Aug. 7th Temp. at 12 midnight 96°. 104. at 8 pm. 102°6
7th at 8 am. 103. 98
at 12 am. 103·6

He continues in much the same state - semi comatose - face flushed - tongue rather dry - pulse very fair & equally at 98 & 100. Breathing a little quicker this morning - 32 per minute, whereas it was 22 & 20 before. Urine drawn off this morning by catheter.

Superficial reflexes of foot & thigh much exaggerated. Knee reflexes much less marked on both sides.

There is a good deal of rigidity on the right side, arm & leg this morning - & as far as can be elicited a decided paresis of the hand & arm.

Aug 8th Temperature at 2 am. was 102·4.
at 1 pm. was 99·8.

Distinctly better - but very stupid, & unable to speak with any distinctness. He has a decided difficulty in swallowing - no doubt due to some pharyngeal paralysis - as well as lingual paralysis, which is still quite marked. The expulsive power of the bladder is very poor, as seen by the flow of urine through the catheter, which has to be regularly employed.

The urine of yesterday shows a decided trace of albumen - it is otherwise normal. This was probably due to a congestive condition of kidneys - as evidence of such congestion was also present in the lungs -

9th Passed a fairly good night - but this morning at 9·15 a.m. he was seized with a severe general epileptiform convulsion which lasted some minutes. When seen by writer

James A. Leitch.

Aug. 9th The convulsive movements had ceased - and he was deeply unconscious - inert - stertorous - and the conjunctival were quite insensitive. This condition rapidly disappeared. On his recovering his previous condition, no new or increased paralysis was to be found & he did not seem worse - & a little later his temperature was 98.6. His urine had to be drawn off. During the day he spoke a good deal, but the defect in speech is greater. He is extremely irritable & excitable.

10th Stronger - & better in many ways - but he had a very restless & sleepless night - with many delusions and hallucinations. Passes urine himself now - wetting the bed. The lingual paralysis seems to have disappeared now - and also the pharyngeal, as he has no longer any difficulty in swallowing.

12th. Left side still paretic, tho the tongue is no longer so. Otherwise his condition is pretty much what it was before the attacks.

24th Walking about, much as before & there seems to be little trace left of his serious attack.

28th Any examination of him is at present impossible - as he becomes excited & resents in the least notice being taken of him.

Sept. 22. A sinuous ulcer on one heel troubles him somewhat. He is annoyed at any attention being directed to it & 'damns' generally when it is dressed. His mental condition shows no change.

October 31. No change to note, unless that maybe he has been less irritable of late

James a. Leitch
cont.d

Decr 2nd Transferred to East House Roll.

Dec. 23rd Nothing particular to note about him. He has been very quiet lately - & most civil - no attention being paid him beyond the usual salutations - as past experience has proved that he cannot converse & be examined without becoming excited & violent. He seems happy - & dwells amongst his delusional ideas.

1882

April 7th Irascible & a degree of late - & very threatening, & using 'terrific' language. He has hallucinations of hearing, & probably of sight. The voices he hears are often apparently in answer to questions asked by him of invisible people - & he stops a minute listening, & then tells you what his answer was. Thus he will yell out "Commence Dragons, arrest them - x x x - - - " & then says that the troops are coming immediately. Or he engages "Waterbury" in conversation about his watch, which he constantly holds to his ear. Possibly he construes the ticking of the watch in voices & something of the sort.

July. 12th. Extreme irritability, vivid hallucinations, very magnificent delusions, characterise him. Eating & sleeping well & not going down the hill at present. He has made several wild rushes at the warder, & used appalling language, but tho' of a mind to be hurtful, he is not really so dangerous as he appears.

Aug. 22nd On the 20th in the afternoon he was noticed to be quite unusually dull & stupid & uncertain on his seat - apt to fall off. He was roused & taken to bed - & his left side was found to be paretic.

D. 579

William Alexander. 46
Admitted August 9th 1871

Surety. Alexander Ross. Blythswood Hotel. Argyll Street.

This patient was admitted at about 1 pm. at the instance of his brother-in-law - and he was brought up in a cab by two of our attendants, as he was reputed to be very violent & dangerous.
He is 46 years of age - and an engineer & block maker by trade. He is married - since eight years ago - He is said to have been insane for six months.
It is his first attack - But as long as a year ago there is a history of an "attack" - apparently of the nature of 'petit mal' combined with passing paresis of some of his limbs - It occurred when he was at his dinner, at a restaurant, & he was unable to lift his knife & fork, or to speak, for a time. He has not been previously under treatment. His friends are anxious to ascribe his illness to a railway accident 2½ years ago - but there seems to be no sufficient reason for this belief. He is not epileptic nor suicidal, but is dangerous to others.

I. Certificates show -: "Talking about his having purified the Clyde - that salmon in abundance are there, & can be seen jumping out of the water, which is perfectly pure - fresh or salt four feet down. Want of sleep - constantly chattering & excited."
Communicated "Suffering from insomnia, for last year & is restless & excitable & constantly speaking."

II. His language is incoherent & he has delusions. He imagines that he is possessed of immense wealth & he says he has so much money that he does not know what to do with it - He is about to dispose of the

William Alexander

Glasgow sewage question, and prevent the pollution of the Clyde - without expense to the Community."
He entered the Asylum willingly enough, believing he had come out to see a fine collection of pictures, & to further ... the Clyde. When ... he insisted - & became ... & go to bed in the ... s.
... hours & sleep - he was ... been violent in the ... inserted on getting out ...; his attempts at ... later in the day he ... ing to talk on all sorts ... ous delusions of grandeur ... tements of his great ... ilant future. He was ... sed with himself - & seemed ... his former desire to be released at once. He is a very powerfully built man - of coarse dissipated appearance. Especially in his earlier life he was a heavy drinker & led a dissipated fast life, indulging in sexual excess as well, & contracting venereal disease - but whether Syphilis or not, is uncertain at present. His friends for some months have noticed his changed behaviour, as he became more excitable - & took up all sorts of fancies & hobbies & spent money on them - his greatest craze being for Photography. Just of late too he has been drinking a good deal, tho during his married

July. 9th 1881.

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This patient was admitted at about 1 pm. at the instance of his brother-in-law - and he was brought up in a cab by two of our attendants, as he was reputed to be very [illegible]
He is 46 years of [illegible] trade. He is [illegible]
He is said to have [illegible]
It is his first a[illegible] ago there is a his[illegible] of the nature of [illegible] passing paroxysm of [illegible] when he was at ha[illegible] was unable to le[illegible] for a time. He [illegible] treatment. H[illegible] his illness to a [illegible] but there seems to [illegible] this belief. He [illegible] but is dangerous [illegible]

I. Certificates show -: "Talking about his having purified the Clyde - that salmon in abundance are there, & can be seen jumping out of the water, which is perfectly pure - fresh on top - salt four feet down. Want of sleep - constantly chattering & excited."
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William Alexander

Glasgow sewage question, and prevent the pollution of the Clyde - without expense to the Community."
He entered the Asylum willingly enough, believing he had come out to see a fine collection of pictures. & to further evolve his scheme for purifying the Clyde. When undeceived he was inclined to be violent - & became excited - & only could be induced to go to bed on the appearance of several attendants.
Next morning - after three or four hours sleep - he was pretty excitable & would have been violent in the absence of superior force. He insisted on getting out & wrote off to his lawyers &c.; his attempts at letters are here annexed. Later in the day he quietened down, & was willing to talk on all sorts of subjects, & expressing numerous delusions of grandiose nature, making frequent statements of his great wealth & power - & his brilliant future. He was jovial & elevated, mind pleased with himself - & seemed to forget his surroundings - & his former desire to be released at once - He is a very powerfully built man - of coarse dissipated appearance - Especially in his earlier life he was a heavy drinker & led a dissipated fast life, indulging in sexual excess as well, & contracting venereal disease - but whether Syphilis or not, is uncertain at present - His friends for some months have noticed his changed behaviour, as he became more excitable - & took up all sorts of fancies & hobbies & spent money on them - his greatest craze being for Photography - Just of late too he has been drinking a good deal, tho during his married

William Alexander

life generally he has been fairly temperate - that he seems to have had whisky daily - up to about four glasses - this for him being moderate drinking.
His tongue is foul - & breath offensive. The tongue is slightly tremulous, but not remarkably so.
The pupils are equal - rather small - very irregular in outline - being much flattened in their vertical axes - & the reaction to light is extremely sluggish.
His speech is at times thick & slurred - as in saying "photagraff" - & generally during his conversation there are indications in his articulation of indications of G.P.
His condemnation as shown by his writing is unimpaired.
His gait is rolling, but not really affected.
The knee reflexes are both present, but very feeble.
No ankle clonus.
His various organs, as examination, seem sound.
Urine - Reaction Acid - Sp. G. 1012. Clear. No Albumen or other abnormal constituent.

May 10th. Black Draught moved his bowels freely. & all today he has been boastfully self-satisfied & full of grand schemes & ideas. He would be violent at any provocation - & was very unwilling to undress & go to bed - & only did so on being told that attendants would be called to make him do so by force, if he did not comply willingly.

" 11th. He handed the writer a "new scheme" today - (see envelope) full of incoherent ideas - written very badly - & very suggestive of G.P.

" 12th. Very restless last night - & after sleeping a few hours he woke up & became highly excited & shouted the

William Alexander

night stot in pieces & injured the shutters & his bed.

Aug. 15th Chlord & Bromide given last night - & he slept 6½ hours after 30 grs Chlord & 60 Bromide This morning he was violent & struck the attendant - & fell himself, bruising his face.

16. Patient was yesterday put on Sulphonal as he was very excited and it has done well with him. He slept well and is quiet this morning comparatively.

27th Still gets Sulphonal - less violent - but restless, full of grandiose ideas - delusions - His mental condition seems characteristic of general paralysis -

28th The Sulphonal has a decidedly useful effect here - was given to him in doses of 20 grains when he becomes unruly, till he is more orderly & agreeable.

Sept 18th Delusions very grandiose and very numerous. Somewhat excitable at times; but excitement easily controlled by Sulphonal. Very angry because all his telegrams are not sent away & all his mistakes accepted

Oct. 21. Full of the grandest delusions possible to imagine. These are remarkable not only for their grandeur but for their number & the field they cover. Excitable at times but not markedly so. Sleep has been bad recently but varies. B. H. T. C. good.

Dec. 2. The disease is actively progressing and just now there is ample evidence of the inflammatory conditions going on in the brain. He is noisy and excited almost always talking continually & carrying on conversations with imaginary persons. At nights he is also restless sleeping badly & not keeping his bed. His bodily cond.

William Alexander
cont'd

shows a slight falling off, but his appetite is good. He eats a great deal but his writing is now so bad & the blots are so numerous that it cant be read. He is full of very grand ideas of all sorts and many of the physical evidences of G.P. are marked.

1892.

January 19. Patient has been much noisier of late & has had paroxysms of rage lasting for a few minutes & closely resembling congestive attacks in their character. He is extremely restless at times & cannot brook being in any way contradicted. His ideas of grandeur are just now very evident. He says that he & another man are fathers & mothers of every body, that his name is not Wm Alexander, but some other name & that he is omnipotent. His speech is very slow in character than it was & his face is becoming expressionless. Marching up & down the ward the whole day, talking to himself & forming grand schemes. His bodily condition remains very good & his appetite excellent. Of late Sulphonal has been more often given as his nights have been noisy —.

Feby. 16. Extremely irritable and difficult to manage. Full of the most grand delusions and refuses to answer to his name, saying that is not his name, that we know that, that Doctors are no use &c. There is considerable convulsive movements of the hands at times, and he seldom sits down, moving about the gallery, talking to himself and rubbing one hand against the other or standing with his face pressed against the glass of the windows

William Alexander.
cont'd.

talking to imaginary persons outside. Of late some hoarseness of his voice has been noticed, but he resolutely refuses to allow his throat to be examined, getting very angry if the demand be insisted on, & his throat has never been examined. His wife states that for some time he was under treatment for some affection of the vocal cords —

March 3. To-day he was found looking out the window, nervously rubbing one hand against the other and talking incessantly. The following is a pretty exact report of some of his talk.

"Mahogany will stand and grow 4 the sois 100 feet, for "ever and ever. That will do splendidly and then never "a crb of wood will come up and it will get up in "the heavenly world. In the world raised up that is "to-morrow night, no, it is to-night it is to be raised "up & planted that way and it will grow for ever & ever "and the gutta percha & the picture frames and after "that we will get the whole of the islands in, and by "that time we will be feet of soil on the roofs of the "mansion houses for growing silk worms. We'll make "locomotives with quadruple expansion engines & drive "them 12000 revolutions a minute & we'll have 4 feet for "growing silk worms, and the whole of the silk worms "will grow in the soil and a thread of silk & one of hemp "will make 2000 colours and we'll get all the sea horses "and thousands of ballasted steamers and fill them up with "grain from my grain stocks, and we'll have pieces of "wood & we'll go through the 3 mile canals and "we'll go across the Atlantic Ocean in a very "short time, & the ships will go so fast that no one "can see them &c &c &c

To p. 537.

William Wright
Admitted 17th August.

William Wright. 60.
Admitted 17th Aug. 1891.

Pauper patient admitted to W. House. He is married a baker and Protestant? resides at Shelton St. Denny He has been insane about a week this is not his first attack (Prev. in Sanatorium see (Vol. III p. 67. & Vol. II p. 583. N.S.)
The Cause is not known. he is not epileptic suicidal. nor dangerous to others. Distinct M. C. Medical Certificates bear, I, that he is excited and talks of matters in a disjointed way. His wife says he has been singing & doing queer things for nearly a week.

II. His language is rambling & incoherent. Says he has come to the asylum for a holiday —.

Aug. 27th The patient is rather a robust & plethoric individual, & not so stout as he was some years ago. He seems to be in good bodily health & condition.
His tongue is rather foul at the back. The palate is arched somewhat elevated & narrow. The teeth are considerably decayed - but regular in outline.
He is in No 4. gallery & is at present well behaved - & fairly quiet. He has settled down into the life of the house & occupies himself reading - or playing draughts. He has not been violent -
His conversation is quite coherent & he expresses no delusions - He seems to have had an attack of mild simple mania or excitement, from which he is recovering now -
His appetite is fair - & he sleeps well -
31st. A little foolish at times & inclined to talk on all subjects - but Mannie there is little to indicate any mental derangement - Somewhat untidy in his dress.

P.T.O.

William Wright.

Aug 31st / Sept 8. For some days he has been excited and it would seem as if he were on the verge of a maniacal attack. He is much more demonstrative and his actions are very silly at times. Bodily he is obese. Has his ears syringed out yesterday and to-day he says in consequence he sees & hears much better.

Sept. 15. Much the same. Remains in a semi-excited state as if he were to have an explosion every minute. Talks foolishly & acts in a silly fashion showing little control

Sept. 29. Continues rather excited and very foolish and incoherent. Does very silly things now & then but is in no way violent. His bodily condition is very good, and of late he has been sleeping very well without draught.

October 31. The condition of silly-excitement continues. He is at times destructive but in a very aimless way. Incoherent in his language & foolish in his conduct, but with a good appetite and on the whole getting good sleep.

Decr. 2nd a most gratifying improvement has taken place in this patients mental condition. He is now quite well and is to-day discharged

Recovered

Andrew Paterson

From p. 303.

1853.

Feb. 28th The core has now come out of the carbuncle, but it has left a very large open wound in the skin & deeper structures, from which septic absorption is I & feared taking place. He is not at all well: takes nourishment only with great reluctance & is mentally very depressed.

Mch 4. Became much worse yesterday his temperature running up to 102.4° & there being a large area of inflammn. round the open sore. over the brow there is also some erysipelatous looking blush. Stimulants are ordered & he is brought down-stairs.

5th. No better and temperature has been running higher than before reaching 104.2° this evening. anti-pyretics are being given & free stimulation. Lungs are clear & urine is normal -, but he is mentally wandering.

10th. Sank & died early this morning

Death. R.M.

see Path Reg

Exhaustion from Carbuncle & long. contd melancholic depression

John Reid. Age. 28.
Admitted August 19th. 1891.

This gentleman was admitted today into the West House as a voluntary patient. He has twice before been an inmate of this asylum. These occasions being the only two on which he has been thus confined. For previous notes see. (Vol. III 145-146-208 & Vol. IV 53-56)
His present illness was preceded as before by restlessness & occipital & vertical headaches & he felt himself unable & co... in need of rest & supervision, ... come here. His general ... good. & there is no sign of ... of his organs.

Aug. 27th His manner is a little abru... disinclined & talk, ... himself. When answering q... look the questioner in the ... ease. but still to answer... not defiant or sullen, as ... speaks intelligently & betrays ... delusions. He is now slee... headaches no longer trouble ...

" 31st Improving certainly. Has appetite.

Sept. 22. Mr Reid wrote 2 letters to Dr Yellowlees yesterday & both show how much his mental balance is disturbed. He said in one that in both places where he acted as assistant, he could & did preach & please the people better than his "Bishop". In consequence they hates him & spread abroad stories reflecting him. Some parts of the letter showed a slight amount of incoherence

Dec. 2

1892.
Jan. 19

Mar...

One of Rev. J. Reid's letters

John Reid. Age 28.
Admitted. August 19th 1891.

In conversation he is very guarded and does not express any such opinions as before dates. He is however reticent and while he will converse freely about ordinary matters when his own health is mentioned he draws back & will not talk. Mrs B.C. is good.

Decr 2. In the winter patient is always polite & civil but he will not talk about himself, nor enter into his own feelings. at times he complains of headache and of sleeping badly, but not often. He does not mix much with many of the other patients, and spends most of his day reading magazines books &c. His B.C. is fairly good. Quite recently he gave me writer a sonnet he had written. He said it was the real, genuine sonnet, but it seemed awfully stiff.

1892.

Jan. 19. Mr Reid is madder than words be imagined by a conversation with him. He wrote Dr Yellowlees the other day that he wished willingly be Mr Yellowlees eldest son &c. To the writer he is polite enough & often, will asked about himself. That subject he will not discuss. Does not take the interest in things around him he once did & is very careless about his personal appearance. Complains much of headaches & feelings of oppression.

March 8. This patient is to-day discharged as a voluntary & readmitted as a Criminal Patient at the same time he is also transferred to the East House

For some time back he has been giving many evidences of his diseased state of mind. He has written several letters to Dr Yellowlees, addressing him as his father & on enquiry he says that that is true & that

Jop. 539

Jas. McFarlane

Jas. 4442.

1892.

~~Dec.~~

Aug. 9th. There has been no great advance in the symptoms during these latter months. If anything he is more shaky. His speech certainly is less distinct. He is constantly in facile good humour, very pleased with himself & his surroundings. He is typical of the placid happy paralytic. There are no special physical symptoms more than have been noted. He is fat and well so far.

October 3rd. Is passing through an excited period, and has got the worst of it over. He has been for about a fortnight acutely maniacal, noisy & destructive Feb
duty in his habits & sleepless at night. Sulphonal & other hypnotics have been given him & he is now quieter, but there are evidences that his maniacal attack has hastened the course of the disease — Feb

Decr. 16. Some weeks ago he developed a left haematoma auris. This was promptly incised and there is now only considerable thickening & not much deformity. He has been in bed for some weeks and is getting very stupid. His circulation is very sluggish & his hands often somewhat swollen. He has not been so noisy for some time & for whole days he is apathetic, refusing to speak or not being able to. —

1893.

Jany. 31. Getting very stupid, & with his face almost devoid of expression. Still able to bend, but getting more feeble on his legs.

Robert Mc Failane.

Feb. 22. The left ear got a bruise, it is presumed, about 4 days ago & there has now developed a severe attack of erysipelas of the face. The ear itself - the seat of a haematoma has become very much swollen, and the erysipelas has invaded the whole of the left side of the face, the right side to a less degree & also the left side of the neck. His temperature yesterday was 104° F. To day it is rather lower 103.° He is taking a fair amount of nourishment. The treatment adopted has been the painting of the affected area with Collodion. If anything he is to day a little better than he was last night —

Feb. 23. Is better to day and now the whole scalp has been invaded by the Erysipelas, and there is some boggy feeling at the left side. The ear - left - is much swollen & fluctuant.

Feb. 24 Sank & dies to day.

Death.

P.M. See Path. Reg.

General Paralysis. with Erysipelatous inflammn. of Scalp & suppurn. of L. auris

Thomas Treesdale

From Voe III p. 22.

Sept. 3rd. Has had fewer excited periods recently, and has been working more. Steer not to be trusted. B. H. & C. good.

Dec: 23rd. Lapsing into dementia - Has a curious fixed stare in his eyes - and a cunning look about him. He is a dirty untrustable kind of fellow, not amenable at present to any improvement.

1892

April 7th. Nearly chopped off the tip of one of her fingers the other day. But it was stitched on again - merely a fleshy piece. No improvement mentally.

July. 12th. No better - no worse -

Dec. 23rd. He works outside and his general condition is good. He is very untidy. He still often gets excited and is sometimes dangerous.

1893

June 30th. Unchanged B. H. & C. good.

Dec. 28th. One of the workers outside which he does pretty well. He is a rough and untidy man who gets excited and makes a noise.

1894

December 29th. His health is excellent and has remained so for the past twelve months. Mentally there is no change.

1895. July. 17. Transferred to Hartswood

Received

Colin MacDonald.

From Vol III p. 444.

1891

Sept. 3rd. Destructive as ever, always asking for a trial at home, for which he is quite unsuited. B. & C. fairly good.

Oct. 23rd. Rather troublesome of late - rattles & interfering with other patients & getting into trouble with them. He has been put up into Infirmary Ward at nights. He has these violent turns at intervals - and at any time is a destructive & untidy man.

1892

April 7th. Just the same. Has fits of depression & restlessness & is then more than usually destructive.

July 12th. After many appeals on his part he was sent up to No. 1. & given good clothes. For some days he resisted his habits of destruction, but gradually gave way to them, tore & shewed his handkerchiefs on the sly, annoyed the other patients, and used bad language - & finally reduced his good coat & vest to threads - destroyed his drawers & in every way proved his inability to conduct himself decently. He was sent downstairs again.

Dec. 16th He has several times asked for another trial but it would be of no use as he still tears away at anything within his reach. He says he has an overpowering desire to clutch and tear things and asks for something to overcome this desire. He is still sulky and moody and very untruthful.

1893

June 30th A most unsatisfactory patient. He is plausible and often appeals to get chances but it would be of no use to give them as even in No. 10 he finds something to tear.

£0 p 5·00

Francis Jonniey

From Vol III p. 46.

Sept. 3rd. now confined entirely to bed. where he is very happy. resenting still in a laughing way the imputation of being a Protestant.

Dec. 23rd. Helpless in every way - Not so often heard laughing or talking now - Friends his teeth a great deal.

1892

He is getting thinner & weaker.

April 7th. Somewhat thinner & weaker - speechless & motionless.

June 7th. Sinking, with disease of lungs - Phthisis -

Contraction of arms - emaciation - Never speaks now.

Dec. 16th A bedsore the size of a halfpenny has developed on right buttock. Patient is very frail and helpless but still hangs on.

" 17th This morning about 4:30 Wylie was called to see him as he had suddenly got worse. He was breathing ~~rapidly~~ horribly but did not seem unconscious. Pulse was small and rapid. He died a few hours later.

Death

on

December 17th 1892.

For Post Mortem vide

Pathological Register p 167

John Scott.

From Vol III p. 51.

1891

Sept. 3rd. Quiet and contented; working usually. His health & Garden B. H. & C. good

Dec. 23rd. Just the same. Nothing calling for note in his condition.

1892

April 7th. In good health & employed in the garden.

July 12th. Of late a little sulky, & not inclined to talk much; it was thought that an attack of excitement & irritability would develope, but so far this has not happened. He has suffered from toothache lately, & also from headache. He at all times is reserved - but has not been really troublesome or dangerous for many months.

Dec. 16th Works well outside. For the past four months he has not been troublesome and has also not been so reserved. His peculiarities as regards his mode of dressing remain.

1893

June 30th Works regularly outside. There is no change in any particular.

Sept: 25th He has sometimes an attack of excitement, generally when he is not working, in which he storms and rages; his language and demeanour being very threatening but soon passes off however.

Dec. 28th Unchanged. B H & C. good.

1894

December 29th He was very comparatively quiet and civil at table. His health is good.

1895

May 6 About a fortnight ago patient was sent to bed on account of piles. While in bed the calf of left leg became swollen & painful; in two days the leg was well then he complained of right leg which became swollen & painful from foot up to Poupart's ligament. There was no redness of skin, no enlargement of glands & T never rose higher than 100·4. Leg is now nearly well

1897. November 12th - Transferred to Garlands. Relieved

Thomas More.

Trow. Vol III p. 104.

1891

September 3. a chronic maniac, with intervals of comparat[ive] quietness. B. & C. fairly good.

Dec: 23rd. Not of late excited or violent. Mind is becoming weaker & less capable of active explosions. He is a treacherous patient - of repulsive aspect. Nothing can be made of him. The is best left alone.

April 7th 1892. Since last note there is nothing to record, save that he suffered for a day or two with a traumatic orchetis, how caused is uncertain; probably a kick from another patient. He was in bed for a day or two.

July 12th No change.

Dec. 23rd A very treacherous, dirty patient of aspect akin to that of a pig, and having periods of excitement.

1893

June 30th Now and then excited and dangerous - at all times not to be trusted.

Dec. 28th Unchanged. B & C. good.

1894

December 29th His chief pleasure consists in making an attack upon somebody else and in doing it in as sly and treacherous a manner as possible. There is no change in his condition.

Aug. 16. 1895. This patient is sly & treacherous as ever. He is more demented & less violently excited than at times he used to be but his mischievous tendencies are strong still. His B & C is good.

Transferred to Hartwood.

Relieved

Samuel Brown.

From Vol III p. 108.

1891.

Sept. 3. Keeps in fairly good health and with nothing in his bodily or mental condn. calling for special notice.

Dec. 23rd Just the same - works in gallenies &c. Demented - but in pretty good bodily health.

1892

April 7th A demented clatterer - who likes to sit by himself - rugloves in a 'fool' pipe - & possibly he mixes his tobacco with weeds &c.

July. 12th No change.

Dec. 23rd Quite demented - incoherent. Thinks he is double-bodied and a female. Still thinks he is tormented by ladies in America.

1893

June 30th still likes his solitary habits. There is no change.

Dec. 28th Very delusional and equally demented. His health is good and he works outside.

1894

May 10th He has not been looking so well of late and on examination it is found that he has tubercular disease of his lungs, probably both.

" 22nd The disease is rapidly advancing. He is very thin and emaciated and his breathing is hurried. His temperature goes up in the evening. Well-marked moist crepitations are heard over both lungs.

June 1st He got worse and worse and died to-day.

Death on June 1st 1894

Cause of Death - Phthisis Pulmonalis

No P. M.

William Burgess.
from 444

Aug. 31st Still not frequently - As yet the Gotthard cannot be said to have had any effect.

Sept. 8th Recently he had one or 2 gleams of great sensibility. He remarked to his wife one evening. "I will never get better". and to the nurse he said "This weather is very bad". Otherwise there is little change. His nights vary, but are at best indifferent in spite of about 30 Paraldehyde nightly —.

Sept. 15. Paraldehyde has been stopped. It seemed to make him very often sick and now he is having a little Sulphonal but recently his nights have been very bad, & he is very distinctly failing fast. He is very thin compared with what he was & takes his food indifferently.

Sep. 22. To-day he is noisy, but for some nights he has been getting on an average 5 hours sleep without any draught. He is however much thinner & at times looks very ill indeed

October 31. Failing and that very markedly. On the whole he has been quieter of late, but has not been getting much sleep, and has noisy times occasionally when he curses & shouts most loudly & painfully. Sulphonal in 30 gr. doses is given now & then but it does not seem to have a very decided effect. His appetite is good & his bowels & bladder have been giving little trouble tho he is very often wet & dirty —.

Decr. 2nd Patient's bodily condition is being fairly well maintained. Mentally he is weaker. At times noisy and restless, at others quiet & getting good nights There is no other change to note -

William Burgess
Cont^d.

1892.

Jan^y. 16. Nothing special to note. Has quiet periods & now & then a noisy day or night, and he then gets Sulphonal as may be required. He is getting very "drawn" in appearance & his attention can hardly now be captured for any time tho' in this respect his condition varies —

March 8. Showing a good deal of alternation of condition, having 2 or 3 quiet days followed by a noisy night. Bursts of wild shouting are not uncommon lasting over a short time and accompanied by some motor excitement, quick walks up the ward & continual smoothing & rubbing of his head with his hand. Sulphonal is given now & then perhaps every 4th day in 40 gr doses. His condition is one of gradual & intermittent deterioration —

March 16. No practical change. Has a noisy night now & then & this the day a burst of excitement. But these are perhaps not so long lived as they were. — .

April 24 Noisy at times & has Sulphonal about once a week in 40 gr doses. This has an effect for several days. An ammoniacal condition of his urine is being treated with 10 gr doses of Boracic acid with benefit mentally. There is little change. His walking remains remarkably good & the principal feature in his case now is the unhappy nature of his delusions, not very unusual in G. P's. —

Aug. 5th Unchanged.

October 3. For some time the disease has not actively progressed & he remains able to go out &c. but his speech is becoming more impaired & there is considerable impairment in swallowing due to the diminished sensibility in part. Sulph-onal is occasionally given & with benefit. Dep. 685

Thomas Frew
from 98

Aug. 27th Two mornings ago he was pushed over by Mr. McCutcheon & struck his head in falling on a table & inflicted a deep scalp wound in the occipital region. Two wire sutures were inserted. The wound did not reach the bone. It seems to be doing well now.

31st Healed practically - and without any trouble.

October 3rd Was in bed for a few days with basic pulmonary congestion & disturbed stomach but is better again. He is in the 3rd stage of General Paralysis though not very far advanced. B. H. & C. are yet fair.

Decr. 2nd Just the same. —

1892

Janr. 16. Going into the 3rd stage and frequently requires to be kept in bed for some days. His feet & legs swell considerably at times, and he is very stupid & "footless" —

March 16. Very stupid. Troubled at times with swelling of the feet. Beginning to lose flesh. —

Aug. 9th. Confined to bed. Has restless nights at times. Chloral & Bromide in moderate doses is given then. It is seldom required.

October 3. Cannot now walk & always in bed. His bladder requires watching. His bodily condition began to deteriorate.

Decr. 16. Not much change since last note. Very restless & often destructive. Reflexes exaggerated especially the knee & cremasteric. B. cond^n fairly good.

1893

Janr. 31st No change. —

Pop. 597

Francis Flemming.
from 398

Aug 27th reserved in manner - His bodily health is fair - but his complexion is rather muddy & pasty -

Sept. 8. Do not improving any. He is listless & inactive, answers questions slowly and making irrelevant remarks. He has not recently been detected masturbat. but probably he still indulges in that vicious habit.

Oct 13th 1891 Discharged - Relieved - being taken home by his mother -

Readmitted
See Vol V

James McArthur.

from 248.

Aug. 18th He is excited & restless this morning - quite different from his usual quiet reserved manner.

Aug. 28th Still continues irritable & restless - This morning he was facing up Ward where he was in an excited manner. He stated that he had just shot four men, out of eight who had attacked him and tried to murder him with sticks. Somebody put a pistol into his hand from behind - & he told the assailants to withdraw - he would fire at them. They did not do so, and he fired on them, & four of them fell - His walk is wonderfully steady, firm - His speech is a little thick - & his tongue shows a general fine tremor -

29th Chloral & Bromide draught tonight.

31st Considerably improved - much quieter - & his delusions less prominent - He still gets into a 'state' over the loss of keys, or rings, but soon loses the idea - He is sleeping well now -
The pulse has lately been beating at about 100 - but there does not seem to have been any elevation of temperature. The pulse rate is falling now -

Sept. 22. Continues very "high". In exuberant spirits. Some time ago he pulled the most of his hair of the beard out and when spoken to about this, he became very excited and threatened to strike the writer Now however he is very gracious and somewhat coarse - being very full of a "well being" feeling and saying he is in the enjoyment of excellent health.

October 10th Has a severe well marked general convulsion today

James Mac Arthur
cont.

Decr. 2nd No fits since last note, but there is distinctly more tremor about his face and hands. He is extremely touchy about the state of his health and seems being thought to be in anything but the most robust health.

1892.

Jany. 16 Facile, and good-natured as a rule. No more seizures In very good bodily condn.

Feb. 16. Considerable more facility, coupled with an certain incoherence & impulsive - irritability not previously noted. There is much more tremor in his hands and in his facial & lingual muscles and his gait is somewhat stultified. No more fits. B. & C. good.

March 16 No change.

April 24. A considerable amount of irritability has been noted in patients conduct of late. He has been more suspicious and at the same time very boisterous in his manner. Very forgetful of things happening very recently and showing considerable ataxia in his gait -. These symptoms & others presage a coming fit it is feared -

Aug. 9th. Fairly well at present. His gait is on the whole good. On this morning for a little the attendants noticed he was leaning a little to one side.

Oct. 3. Speech is more affected than it was. No more fits of late.

Decr 12. See this morning no particular change took place in this patients condn. His speech has been getting more indistinct & his walking worse. There being especially an imperfect. in the movements in walking of the left leg.

To-day at the morning visit he was noticed to be drowsy, not willing to shake hands, and having lost all his assertive geniality. In the afternoon the stupor

Jops. 587.

David Torrance Hardyside
from 153

Aug. 31st

October 8th — on Sunday the 4th patient escaped from the attendants when walking in the grounds. He got over the wall and his movements afterwards are uncertain but on Monday he was found near Laurel and lodged in the asylum there. He was brought back here yesterday. His clothes were somewhat torn, and one of his ankles is somewhat bruised but no bones are broken. His father called to-day to see him but he would not speak to him nor will he give any account of himself to any of the officers of the House.

October 31. — It was thought some few days ago that he was better but this slight improvement has not been maintained. He is silent & secretive. –.

1892

Jany. 16. — Silent & reticent in manner as ever. He is rarely ever known to sit down, usually standing in the middle of the gallery with his hands & arms folded. Speaks none. B. Condition good.

March 16. — Has been seen sitting more of late, but otherwise no change. Never speaks. – .

Aug. 9th — Was taken the writer mysteriously aside occasionally, & points to open windows, or places Oliver & Boyd's Almanac in his hands. He will not speak & the train of his delusions cannot be followed.

October 3. — Places the chair in a particular way the other evening & objects to them being replaced. He is unchanged

Decr. 16 — No change. Speaks none

1893.

Jan. 31. — No change.

Jop. 599.

Charles S. Inigs.
from 146.

Aug 31st

October 31. Has been very silly in his conduct of late. behaving badly and wetting himself. night & day. There is no improvement and any change points to deepening mindlessness.

Dec. 1st Periods of restlessness & mischievous mindlessness have been of late frequent. There is no mental improvement and his bodily health is fair.

1892

Jan. 16 No improvement. Becoming demented. Habits bad Sometimes wet & even dirty. Careless of his appearance & showing no soundness of thought, word or deed. B.A. & C. are good

March 16. Very silly & stupid at times. Becoming demented -

July 26th. Taken home today on trial by his parents, who are hardly wise in their concern over him.

August 23 Discharged from the Books.

Relieved.

David Boyd.
from Vol. III p. 569.

Aug 31st 1891 — No material change here. He has frequent severe headaches - which last off & on 36 & 48 hours, most of which he spends in bed - which are treated by a smart purge - & antipyrin - but treatment has little influence on their duration. He at times suffers from ~~the~~ pustular eczema on the leg - which is treated by Boracic lint applications. Mentally he presents the same aspect - conviction of his coming punishment & eternal doom to hell fire - He is always under observation -

Septr. 29. — Practically unchanged. Now & then in bed for a day. A gum-boil troubled him recently but is better. His B.C. is very indifferent.

October 31. — At ~~bed~~ present in bed with the old pain in his side. Ordered a draught at night as he has not been sleeping well. B. H. & C. very indifferent

Decr 12th — Transferred to East House. No change in his condition since last note

Dec. 25th. — Delusions are very manifest & freely spoken of. At present he affirms that he is the "7 seals & 5 beasts" spoken of in Revelations - & that he "will never die." Hopelessly despondent - and still threats of suicide. Confessed to head attendant that he twice had procured a knife ~~but~~ during last year & two - and had hesitated to use it & then given it up to some attendant. Apart from his delusions he is a pleasant little man, ~~is~~ always gloomy in appearance & tone of voice - but there is a talking frankness about him. He is thin & pale. Porter has been given to enhance him a little.

L 521.

John Phillips

(From Vol III p. 448).

" " IV p 426

Sept. 3. The twitchings of face & hand have been less marked of late. but the paralysis of one side including the face continues.

Dec. 23rd 1892 In fair health - quiet - tidy - facile.

March 17" The general health and condition of this patient remain much the same - It is not easy to trace the manner in which her present physical condition has become established - Nor is it easy now to gauge the exact mental condition.

There is, as before, paralysis of the right side of the face, the right arm, and the right leg - & the tongue is protruded slightly to the right side.

There is permanent deformity of the hand - (This condition will be more fully noted later - also the sensory symptoms) -

There is a partial aphasic condition - He ~~is~~ used to be an intelligent man, but now his use of words is very limited - He makes much use of "Yes Yes" "Eye" "Well" - but can repeat words when he hears plainly well - He cannot read, nor name simple letters - and appears to do this & to answer questions seem to confuse him - His writing of words might be possible, if his right hand were not paralysed - but partially not. He does not comprehend alphabetic letters written plainly before him - He is facile - & quiet. Memory imperfect.

April 7th He tactile sensibility was tested, but reliable results were not obtained - Certainly it seemed that there was a certain amount of blunting - He now handed it

to 5548.

William Forsyth
From Vol III p. 388

1891.

Sept. 3rd — He must in his mans nature continues. He works in the grounds. is in good bodily health, but is in. -solent & surly to a degree, refusing to speak or being foul in his language. He appears to have no delusions but his friends could not possibly manage him at home. He preyed on them before and would do so again.

Oct. 15th — At present he is somewhat better: is more cheerful & alert talks pleasantly & laughs: & is not using foul language.

Dec. 11th — Improvement recorded in last note was not of long duration: he is at present a morose, sullky & abusive fellow - of whom nothing can be made, while this humour lasts. He delights in swearing at the writer - & abusing all the officials generally.

23rd — In the same mood - & associates with patients of similar character.

1892
Feb 22nd — Some time he was sent down to Ho. P. for using foul & abusive language - He afterwards expressed regret for it - & was allowed back to Ho. 1. & he has not offended in that way again. He said he felt his position here was in a way a hopeless one, & that his friends neglected him (Lastly time) & that nothing was done here that would do him any good: & that then he felt irritable & lost temper. His mental condition is an unfortunate one. Tho' he seems better just now it is improbable that he could get on at home.

April 7th — Has been civil always to the writer since last note - & has been much employed in the garden -

Jo 547

James McKenzie
Trouw p. 116.

last note Septr 1

Nov. 2nd The condition of this patient is far from satisfactory. Mentally he is partially demented - unable & unwilling to do anything. He picks at his head - masturbates - & all round shows a perverted and degraded tone. His bodily health too is very poor - He is subject to purpuric eruptions on the legs - is haggard & stiff - a good deal below his proper weight - & has lately been coughing badly. His chest, so far, does not reveal any organic disease - but the right apex does seem slightly less resonant than the left - This however must be verified by future examination.
He is just now in the Infirmary ward - and has a small ulcer on the left internal malleolus - the result of an inflamed blister - which rapidly spread into an ulcer - A slough is separating & the surrounding inflammation has subsided.

Nov. 6 A closer examination of his chest reveals disease in both lungs - Both apices in front & behind yield impaired percussion note - particularly the right apex. On the left side about 3rd or 4th rib in anterior axillary line there is impaired resonance - The auscultatory signs are not at all well developed - There is at present a marked morning rise of temperature - up to 102°. The presence of phthisis is undoubted. He is very hoarse - & probably there is laryngeal ulceration -

Dec 9 This patient is getting rapidly worse. He is now very emaciated and a superficial bedsore has developed over his sacrum.

Dec. 11th Turned very weak this forenoon & at 11-15 AM he Died. Dec. 11th. 1891.

William McC. Taggart
From Vol III P. 460.

1891

Sept. 3rd — In good bodily health and mentally probably as well as he ever will be. He is fairly bright and intelligent, but is somewhat silly at times and shows a want of energy. He has always been somewhat silly and not much more improvement can be looked for. —

Dec. 11th. — Just in the same state — in good health, but weak minded.

1892

April 7th — His friends have taken more interest in him of late. He has written them more sensible letters. They now propose removing him, which is probably the best thing that could be done for him — as he is mentally as well as ever he will be, & he might become more lively under outside influences.

May 6th — Continues really very well & may be considered recovered. He is discharged today.

Discharged. Recovered. May 6th 1892

Colin MacDonald

cont: from p 482.

1894

Jan. 2nd — He still has to have untearable clothing and even that he tries to tear. He is a great grumbler complaining about the food and various other things.

June 29th — He can talk much more intelligently than one would expect from his appearance. His power of self-control as regards 'clutching' to use his own phrase is almost gone. This he composes and laments over.

December 29th — His habits etc remain unchanged and his health continues fair.

August 20. Patient is not well. He has been put to bed. There is a certain amount of rough râle in chest all over and at apices especially there is lengthened expiration and some increase of V.F & V.R.

Aug. 31 — Patient has a marked bronchitis and on the evening of the 29th suddenly developed difficulty of breathing of a spasmodic kind the sounds being slightly asthmatic in quality. The P. R ratio is about 134 . 48 and though the pulse is regular and fairly full it is soft and easily compressible. His temperatures lately have been somewhat inverted though not high till the 29th when there was a Temp of 101°.7 + since then it has been higher. He is not taking his food well.

Sept. 2 — Distinct VS mitral murmur ~~and~~ which is pretty widely diffused. Some tendency to bronchial breathing. He is not doing well

Sept. 6. — Patient sank steadily + died this morning at . 1·40.

P. M. Died of Cardiac disease valvular with very marked oedema of lung.

Joseph Dalgleish. 66.
Admitted August 10th 1891.

This patient was admitted today to the East House, as a voluntary patient. He comes here seeking relief from two things (1) Sleeplessness — and (2) A noise in his left ear, which is continuous & absorbs his attention.

Note made some time after admission

His trouble has lasted six months or thereabouts, and came on gradually. He believes that his sleeplessness is caused by the noise in his ear. This noise is worse at times. sometimes nearly being absent. He likens it to the blowing off of steam. It is not of a pulsatile nature — it is not modified by firm pressure on the carotid artery.
He has been a healthy & temperate man all his life. He cannot account for the origin of this trouble, but both he & his wife lay stress on mental worry & distress occasioned by his dismissal from his employment because he was getting old & unable to work as formerly he used to. He had served about 30 years in the work — & thus dismissed without recognition or pension in the heartless way stated caused him much grief. His work was connected with cloth manufactury — but there was no loud noise of any kind, from machinery or other agents in his department.
A friend of his having obtained great benefit from residence here Mr Dalgleish applied for & obtained leave to come in. to see what could be done.
He is getting frail now — from advancing age — but & his vessels are somewhat atheromatous — but no disease of any organ is detected —

Joseph Dalgleish.

The condition of his urine is normal. + the tongue + pupils indicate no abnormal nervous influence.
He is rather deaf - & has been so for some time. His is worst in the left ear. A considerable amount of wax was present in both meatus - removed by syringing, but without any benefit to the noise in the left ear & the hearing. Examination by the speculum revealed nothing in meatus & membrana tympani as far as could be made out.
A watch is heard at about 3/4 inch from left auricle
Bone conduction is not present.
A watch is heard at about 3 inches from right auricle, but there is no bone conduction either.
Sulphonal at nights was given at first - & made him sleep better. Exercise & open air were freely allowed, under the shade of the grounds.

Sept. 7th: A little better as far as sleep is concerned, but there is little or no improvement in the 'noise'.
A blister applied behind the left ear.
14th: Result of blister is practically nil.
Bromide of Ammonium, 15 grs. 3 times daily ordered.
29th: A little improved - & for last years & general state he is pretty well. He is nervous about himself.
Oct. 6th: Blister behind the left ear.
Nov. 2nd: In fairly good health - & now less troubled by the sound in his ear. Seems greatly relieved when told it is not regarded as serious at all. Has gained flesh.
Nov. 9th. Discharged. Relieved.
Nov. 9th. 1894.

Re-admitted on October 30th 1894. vide Vol VII P 206.

503

David Miller

cont. from p 421

1894 Jan. 2nd	There is not much to note about him. He is demented and nothing seems to interest him. B H & C. fair.
December 29th 1895	There is no change. His health is as usual.
Dec. 20	Is depressed and quiet. Mildly demented he is interested in none of his surroundings. His health is fair
1896	
Oct. 6.	There is no change. His health is fairly good but fancies himself weaker than he is. He shows no interest in his surroundings and lacks energy and initiative
Dec. 31	Unchanged.
1897	
Dec. 27	This man has been confined to bed for some time now. He is depressed & is becoming slowly more emaciated. At the back of his chest there is impaired or rather dull percussion on the right side extending from base to Spine of Scapula. V.R. & V.F. R.H. are deficient as compared with Left side. There is evidently a small amount of Effusion. In front of chest — tubular breathing h
1898.	
Oct. 19.	Since above note there has been no change in his condition other than that he has become weaker. Has been confined to bed during the past year owing to his chest condition
Dec 14th	Slowly sinking
Dec 29.	Died this morning at 9.35 am. Phthisis Pulmonalis.

John Forrest

From p. 423.

1891. Continued Vol. V p. 364.

October 31. He asthma has lately been complicated with a little Bronchitis but that having passed away he is back to his old self again mentally just now he is fairly well, but he sleeps badly and his stomach has been much out of order for some time

Decr. 2nd. just at present he is fairly well both mentally & physically. Very anxious to get home to Lanark, the air there he maintains being better for asthma. mentally there is nothing to note -

1892.

Jan. 16. asthma is again troublesome after a period of betterness. mentally he is just now fairly well, but very home-sick. B. H. & C. are good.

March 16. Fairly well at present both mentally & bodily. though now & then asthma troubles him -

July 7. Periods of comparative well being as regards his mental condition associated with a degree of asthma alternate with periods when he complains of pain in his head, of gastric ailments & sleeplessness. He is then irritable, & despondent by turns & at these times his breathing is free to a great extent Looking at his condition as a whole there has been during the last few months a slight improvement but not such as to warrant his leaving the Asylum. a brother of his was mentally ill some time ago but the attack passed off without his having to go to an Asylum.

Aug. 6th. He Lacey been out on trial for last 28 days. & keeping pretty well. was today discharged

Relieved. Aug. 6th 1892

Re-admitted Aug. 26th/92. v. Vol V p 364.

Hugh Kennedy Erskine
Form Vol. III p. 549.

Oct. 15th 1891 — This patient is still liable to recurrences of insane behaviour - in which he is often angry & irritable - or morose, & reticent. In the most part when unwell he looks rather dejected, & will not talk readily. He is restless, pacing up & down the gallery.

For the last two months he has never been quite right. & has not been trusted to work outside. Once & twice in the summer time he was home for a day, but was troublesome, & brought back razors with him & hid them & refused to tell where they were. He was kept in the Infirmary ward till he confessed where they were — in the stalls.

Dec. 11th. — Was allowed home about a week ago to spend Saturday & Sunday with his brother. He took advantage of this to take out & post the letter of another patient, which should not have gone. He is cheerful & fairly well just now - but is at best uncertain & not to be trusted. He is not frank in manner -

Dec. 23rd. — Somewhat dull at present - Acknowledges it readily himself. He looks awkward & shy - but the condition has not been marked & is passing off.

1892
April 7th — Much the same - His moods are uncertain - Sometimes he is quiet & able to work outside - again he is dull & reserved & shuns society - & again he may be excited, irritable & impertinent.

July 12th. — Pretty well just now - & getting home occasionally for a day or two. But the 'dull turns' come on here just as before, at irregular intervals.

Dec. 15th — For the past few months has been pretty well though there is

Hugh Kennedy Erskine

not much change in his manner. He has been home several times and behaved himself.

1893

April 24th — His mood varies slightly but he is generally dull and reserved. He evidently dislikes talking about himself.

June 30th — Tolerably cheerful just now. He was away for a week at the west for a short time ago which he greatly enjoyed. There is no material change.

Oct. 4th — Remains in good health bodily but mentally there is no change. He goes away now and then for a few days visit to his brother when he himself feels fit for it.

Dec. 28th — Now and then dull, depressed and irritable when he will hardly speak. He knows himself when these periods come on and he generally remains inside and does no work till they have passed off.

1894

June 29th — His bodily health is good. He works regularly about the stables and in appearance would not disgrace a groom. Mentally he is much the same and subject to variations of temper.

December 29th — A week or so ago he was allowed to go to his brothers from a Friday to Monday as is often his wont. He was not very well at the time and evidently did not behave himself as he was sent back on the Saturday. He himself gave as a reason that they were too full at home. He knows himself when these attacks come on and says that at the beginning of them his vowels are always consistated.

~~To p~~ Vol. V p 594.

Charles Morrison

From p. 432.

Sensation in lower limbs is good and there is no delay in cerebral action. Both limbs seem equally strong judging from the amount of force they oppose to a hand holding them down. There is a very distinct Tache produced in about 10 secs. on drawing the end of a pencil over the abdomen. This last about 4 min and in 6 mins. the redness had quite faded away. Passing to the arms it has to be noted that on drawing a feather over the left palm, and palm seemed to be felt and this condition of hyper-aesthesia was not present in the right hand. Dynamometer registered 50 m.m. in each hand.

The tongue is coated and shows considerable tremor both fibrillary & coarse, the fibrillary predominating at the point & margins and in the middle there being larger waves of movement. There is no deviation on protrusion. The whole face is certainly not full of expression but below the right eye there is observed in the muscles there a curious rythmical tremor not before noted. This is quite marked to-day. Of the pupils it has to be said that the right is rather the smaller of the two. Both have perfectly regular margins, but both react very slowly & imperfectly to both light and accomodation apart from this reaction, there is considerable rhythmical contraction & dilation going on in both eyes not caused by any external stimulation

Site of tremor

Hearing, taste and smell are tested and found good and there was no delay in answering. At times it was thought that one side of his face when he

became interested in a subject showed more expression than the other, but if so, any difference was very slight.

His mental condition is much as described in fore-going notes.

Septr.22. at 2.30 this morning he had a severe general convulsion

To-day he is Removed to Perth

Relieved

John Moore.

from Page 424.

Sept 28. The convulsive movements have ceased -
A large turpentine enema ordered.

29th. Sulphonal. grs 20, last night. Has slept none, and was very restless. He is fed with difficulty.

Oct 6th. Quite in his usual again - & perhaps a little more cheerful.

Nov: 2nd. Is fat & rosy just now. & mind inclined to talk - & notices things readily. Very facile -
Pupils dilated - & very sluggish indeed. His speech is very characteristic - and the under lip tremulous -
The facial muscles occasionally twitch - The hands are tremulous -

Dec. 23rd. Passing through a period of typical hilarity & facile happiness - Very forward - & always talking & attracting attention. Tremor of limbs & face & speech very marked - Still fat, but his strength is less.

1892
Feb. 22nd Since last note his condition has been one of unvaried good-humour & childish happiness. He is always ready to talk & laugh - works about the ward willingly - takes a childish interest in the other patients & is exceedingly well pleased with himself. He eats a large amount of food with relish & sleeps well & is fat - but his muscular strength is poor & is power of co-ordination much weakened. His speech is very characteristic - No more fits have occurred.

April 7th Symptoms are not much changed & advanced. He eats well & sleeps well - is very unsteady, very talky & talkative & absurd - & his speech extremely characteristic

John Moore

July. 12th Slow progress towards terminal dementia & helplessness. No change is imperceptible day by day.

Nov. 24th Some convulsive movements in the arms and face have been noticed during the night. He is not looking so well and has been kept in bed.

Nov. 28th He has had several convulsive attacks the last few days but not severe. His urine has had to be drawn off several times.

Dec. 1st Improving slightly. No more attacks. Often very noisy at nights so that Sulphonal gr xxx has to be given.

" 15th Still kept in bed and very stupid. Often noisy and his urine has occasionally to be drawn off.

1893

Jan 4. In much the same condition though weaker and more feble. Is often very noisy, disturbing the rest of the patients for which Sulphonal has to be given.

Jan. 24th This morning patient is very ill: temp 102°, breathing rapid and some convulsive movements of right arm. He is quite unconscious. There is some edema at the base of both lungs.
In the evening his temp. was 104° and he gradually sank.

Death on January 24th 1893

For Post. Mortem vide Pathological Register p 171.

William Milligan
From p. 302.

a description of his appearance was sent to the Central P. Office. with a note of the fact that as he was a Voluntary patient he could not be arrested. However the same evening he went himself to the Central P. Office to ask a bed, saying that as they had lodged him the previous evening he thought they might do it again. He was put into a cab & brought out here. The following morning he was very shaky but not penitent Said he had always wished to see something of the shady side of Seasgow life & had got his wish. For the present his Parole is quite stopped

November 1st Mr Milligan has relapsed into his old ways & is now pleasant & inclined to stay indoors. He is again allowed the freedom of the grounds and the staff think him to be more pleasant & less fractious than he was. At present his bodily health is good.

1892.

Jan. 16. Has several times declared his intentions of going away but has always been induced to stay. He has the parole of the grounds but is not allowed outside the walls. His B. H. T. C. are fair - - Mentally there is no change.

March 16. About 3 weeks ago as he declared his intention of leaving, he was certified and is now on the Books as a Certified patient. Suicide that was. Done of course much against his will, he has been more easily managed. His B. H. T. C. remain good

William Milligan

1892 J. July 9th	Cery. E. Not very well lately. Talks to himself and annoys the Asylum. Says it is the "worst managed place in Great Britain" - is querulous & irritable - takes dislikes to various people. Very fond of speaking to the female attendants & patients & he began to frequent the terraces & to pay attention to the East H. females to such an extent that he was forbidden to go to that part of the grounds, at which he was very indignant.
October 3.	Pretty well just now. but very caustic in his criticism of how things are managed here. Behaves on the whole very well & not so much down on the "incarceration" of late.
Decr 16.	Very well at present both bodily & mentally.
1893	
Jan 31.	Continues very well bodily & mentally Peculiar of course, but not objectionably so.
March 17.	Has become very fussy with peppermint drops sweeties. varying them with a cayenne lozenge mentally & physically unchanged. Happy here & not really anxious to get away though very indignant with his 'incarceration'
May 30.	Been abroad for some days & not at all pleasant Excitement passing off now & will coming back to his usuals.
June 24	Down in his own parlour in Ch 2 - and much better there. He is easily irritated & gets on best when left alone. At present he is very well.

Dep. 586.

Matthew Lowe
from 140

Nov. 6th. Seems the idea that he is insane - and still insists on 'influences' brought to bear on him, tho' he is more chary of talking about them, as he finds they are thought to bear witness to his insanity.

Dec. 23rd. Refuses to take meat at present - but he is allowed so far to humour himself - as there is no fear of his starving. A patch of subacute eczema on the extensor aspect of each forearm seems now & then to make much of it - He has warned writer lately that he (Lowe) is shortly going to succeed, & to be careful. What his meaning is cannot be said - he does not explain - but looks very full of mystery. As before he continues full of delusions of "influence by machinery" & plotting against him - & has many insane ideas regarding himself & the attitude of outsiders & strangers towards him. There is a good deal of vanity & egotism about him. Some of his delusions are grandiose - that he has friends outside ready with any quantity of money to back him up - £80 or. Pages might be written about him.

1892

April 7th Hypnotic suggestion was lately tried in his case - but he failed to be hypnotised - He said that he did not want that, but a "medical examination". Very abusive to his father when visited by him - & most importunate in his demands to get away. Keeps his mental peculiarities very much to himself now. He has an exaggerated idea of his importance, & of the effect of his "beginning to write", as he always threatens to do.

To 546.

Colin Govan

from 159.

Nov 6th

Dec 23rd Very uncertain in behaviour, & readily excited. At the weekly concerts he is always so, & behaves quite foolishly - & sometimes not very nicely. He enjoys them immensely - The uproar about his appears has somewhat [illegible] caused just now in etching [illegible] mottoes &c on his [illegible] well. & is immensely [illegible] in any notice being taken [illegible] difficult to manage under [illegible] tendencies & conditions [illegible] for him to live outside [illegible] intercourse with one of H.M. [illegible] house since very rambling [illegible] Said he believed that [illegible] only had been mesmerised [illegible] becomes excited & foolish.

Jan. [illegible] asked where better [illegible] at present.

Oct. 24th [illegible] he takes great interest in them and evidently enjoys himself but nevertheless behaves very foolishly. When a few weeks ago one of the Commissioners of Lunacy came round he had a talk with him but did not get much satisfaction. He was told that if he showed himself sane here he would soon get out. This however Mr Govan holds to be impossible in an asylum.

Dec. 15th Not been behaving so foolishly lately though his manner is still variable. He has been writing many letters to his wife for not coming to see him. They are interlarded with passages from and references to scripture but on the whole are fairly sensible. His H H & C is good.

letter of Mr Govan's
from 14th = 1892

Matthew Love
from 140

Nov. 6th. Seems the idea that he is insane - and still insists on 'influences' brought to bear on him, tho' he is more chary of talking about them, as he finds they are thought to bear witness to his insanity.

Dec. 23rd. Refuses to take meat at
so far to humour himself
starving. A patch
external aspect of each
makes much of it.
that he (Love) is short
careful. What his
he does not explain.
As before he continues
by machinery" or
many insane ideas
attitude of outsiders.
There is a good deal
Some of his delusions
friends outside ready
to back him up - 250 or. Pages I might
1892 written about him.

April 7th Hypnotic suggestion was lately tried in his case - but he failed to be hypnotised - He said that he did not want that, but a "medical examination." Very abusive to his father when visited by him - & most importunate in his demands to get away. Keeps his mental peculiarities very much to himself now. He has an exaggerated idea of his importance, & of the effect of his "beginning to write", as he always threatens to do.

To 546.

Colin Govan

from 139.

Nov 6th

Dec 23rd Very uncertain in behaviour, & readily excited. At the weekly concerts he is always so, & behaves quite forcibly- & sometimes not very nicely. He enjoys them immensely - The upset about his affairs has somewhat subsided. He occupies himself much just now in etching with a fine point, flowers & wreaths, mottos &c on tin boxes. He really does it very well. & is immensely proud of it himself. & delights in any notice being taken of his work. While not difficult to manage under Asylum care he has all the tendencies & conditions which would make it impossible for him to live outside.

1872
Jan 28th A good deal upset by an interview with one of H.M. Commissioners in Lunacy. Wrote some very rambling & foolish letters afterwards. Said he believed that various members of his family had been mesmerised

April 7th Found the same. Readily becomes excited & foolish.

B.H. & C. good

June 14th A very foolish letter annexed, which shows better than any note his mental state.

Oct. 24th Now that the dances have begun he takes great interest in them and evidently enjoys himself but nevertheless behaves very foolishly. When a few weeks ago one of the Commissioners of Lunacy came round he had a talk with him but did not get much satisfaction. He was told that if he showed himself sane here he would soon get out. This however Mr Govan holds to be impossible in an asylum.

Dec. 15th Not been behaving so foolishly lately though his manner is still variable. He has been writing many letters to his wife for not coming to see him. They are interlarded with passages from and inferences to scripture but on the whole are fairly sensible.

His B.H. & C is good.

Colin Govan

1893

March 21st He has not been so foolish lately in behaviour and is exercising a little more self-control. He is very anxious to get away and work for his own living. His conduct especially towards women which is silly in the extreme renders it doubtful whether he could live outside. He lately expressed the view that electricity had something to do with his being kept here but he probably had got the idea from some of the other patients.

June 30th His moods vary: sometimes he is dull, depressed and irritable and will hardly speak and if he does so he uses abusive language: more often he is foolish in manner and conversation, laughing unmeaningly at hardly anything. There has been practically no change for months.

November 11th There seems to be no change in his mental condition: he has not got obviously worse during the last few months nor has there been any return to a state of greater mental stability. His foolishness and eroticism are well marked in his conduct at the Concerts and his mental enfeblement is shown by the explanations he gives afterwards of such conduct. He is untidy & and careless in his dress.

Dec. 28th His general health continues good. He never complains but says himself that he enjoys excellent health. But this he also says of his mental health: he does not realise in the least that there is anything wrong with him. He is always ready to explain his foolish conduct or else to turn it off with a laugh. In his letters home he sometimes uses objectionable language and often quotes texts.

To Vol. V p 218.

Robert McKechnie

From p. 422.

1892.

March 16. Feeble, but wonderfully alert for his great age. Is very trouble-some often, undressing in the ward, taking his chamber pot in her hand wherever he goes. His habits are at times very dirty & he sleeps indifferently. –

July 8. Has been failing somewhat of late & to day is being kept in bed on account of bronchial catarrh associated with a degree of pulmonary congestion of the right base. With his failing strength & advanced years his condition is serious –

Aug. 9th Strength has returned a little. He is up daily now. but more frail & inclined to rest & sleep more than ever. Just at times when excited he shows some of his old fire & stamps about in a wonderful way.

Oct. 3. any change is in the direction of increasing weak-ness & that considering his great age is only to be expected. –

Dec. 16. Has come through a good deal recently. First a severe attack of Shingles of the left side & more recently a pretty large carbuncle on the right temple. From this last he is recovering now. For his age his strength is wonderful. At times he is very restless & full of ideas of a senile character.

1893

Jany 1st The carbuncle has healed, but the old man is very obviously breaking up & cannot now stand alone.

Jany 15. Became much worse yesterday, his breathing laboured and he died to day at 2. 0c.

Death. 10 P.M.

Cause of Death. Senile Decay.

William A. Mc Cracken

cont. from p 394

1893

June 30th — He is much happier and less liable to outbursts of temper in summer as he generally gets out all day and occupies himself with reading, writing notes or talking to the birds in the grounds.

Sept. 23rd — Now that he gets out less he sometimes has an 'explosion' in which he ~~dete~~ declares he is no longer a subject of Queen Victoria and vows vengeance all round.

Dec. 28th — Been comparatively quiet and cheerful lately. His state of mind depends a good deal on the amount of tobacco which he has. His temper rises in inverse proportion as his tobacco diminishes.

1894

March 27th — There is no change mentally. His bodily health keeps fairly good.

June 29th — The summer months seem to be his happiest time. He is out nearly all day and spends most of his time in the garden.

December 29th — Unchanged. B H & C. fair.

1895

May 20th — He has improved somewhat of late. Raining yesterday. He is also not now so subject to these outbursts of insane rage.

Dec. 20 — So bright & more equable so. He is mildly demented & has the parole of the grounds. He is less liable to outbreaks of excitement but is still hot them occasionally B H is good & his control of his limbs has also improved.

Cp. Vol VII. page 6

Alexander Macomie

From p. 250.

1892

March 15. Her gentleman states believes in being "Duke of Argyle" "Prince of Scotland" Writes numerous letters to his law agents, asking them to bring actions against various parties, sometimes the assistant M. officials for large sums of money. He cant be made to see the small likelihood of being able to get large sums of money from A. M. Officials at times he gets very angry especially when accosted in a familiar way & he nearly faints with surprise when the nurse slapped him on the back, punches him in the ribs & said "How are you Macomie" — B. & TC. good but he is often sleepless at night and performs remarkable antics in his bed —

Aug. 9th He is an "Emperor" now — & seems totally disinclined to speak to the ordinary crowd.

Oct. 3. much of his time is spent in delineating his estates on the maps hanging in the wards. Part of Turkey is his & every day sees more added to his territories ——.

Dec 16. do change. B. & TC. are good Has the habit of picking at the skin of his head & making sores.

1893.

Jan. 31. Free of delusions regarding his own exalted position in society, the size of his estates &c. do change in either his mental or his bodily condn.

Mch 20. do change —

August 25. Cursing heartily just now because he is not on his moors. He has so many to shoot over that he has to begin early. Weather with many threats thus keeping him here. just the same. —— Joh. 371 Vol VI

George Russell Alexander
From p. 154.

1892.

March 15. No change. B. U. T. C. good. —

Aug. 9th In pretty good health. His mental peculiarities remain just the same.

1893.

Jany. 31. Just the same. Has periods of melancholic restlessness when he rubs his hands, laments his condition &c. Again he is fairly cheerful talks sensibly & is fairly well. B. U. T. C. good

March 3. At present suffering from an attack of pneumonia in the right side. This has taken the form of consolidation of a patch of lung on the right side about 2" below the clavicle and small in size. Associated with this there has been a good deal of râle in other parts of that lung. Temperature has been as high as 101.4°. but is now down, & the physical signs are those of resolution He thinks that he has been much worse than he was & is rather depressed at present — mentally his condn is unchanged.

March 17. Better again, but the attendants think that besides weakening his body, his illness has weakened his mind. He is stiller, more full of fanciful ideas about his own health &c.

He is now up & about as before his illness. —

April 11. Back to his usual & the same apparently as before this illness. He has taken to smoking & it is 7 years since he last touched tobacco. He seems more talkative than he was & is not so miserable.

G. R. Alexander.

1853

May. 13. For some time back Mr Alexander has been observed to be better mentally. He has lost much of his old habit of bemoaning his former condition and has been more cheerful. He has been more uniform in his behaviour, more sensible & settled and his son Mr. Day taken him away on trial for a time. Should this be successful, & the improvement progress it is feel that he may finally be regarded as having recovered —

June 10. After having been absent for 28 days on trial he is Mr. Day discharged. but viewing his cond.n generally he is discharged

Relieved.

David Boyd
from 495

1892 Dec 23rd – Feb 26th. His great idea now is that he is a "horse" – nothing can get him & give up this idea. At times he will smile at things, & talk for a little, apart from himself – but very little else but the repeated asseveration of 'Oh. I am a horse' 'I'll never die' can be got from him – & he is always despondent & idle – He is by no means demented & in many ways shows himself to have been a clever & observant man – & he has seen a fair amount of the world.

April 7th. Early he had an attack of severe occipital headache – & pain in his back which he thought was due to kidney disease. He seemed rather relieved when assured that it was not. At present he is very depressed & quiet. It is not longer thought that he is suicidal and he has been allowed to walk out by himself.

June. 15th. Insists that he is the 'prophetic number' of revelations, which he says is 666. Believes that he & his brothers will be hanged. His delusions are very fixed & his depression unalterable.

July. 12th Just recovering from a severe attack of headache, backache & anorexia – Rather pulled down in condition in consequence. Says he is "ready for the rope" at any time.

Dec. 15th still believes and believes firmly that he is the number 666 mentioned in the Revelations and that his brother is the horse. He says that the Government must and will hang him and his brothers and that he is ready at any moment. At a 'Punch and Judy' show at one of the weekly Concerts the piece ended by several of the actors being hanged. This strongly impressed

J. P 530

James Kippen Alston
from page 324

Dec. 25th: to the concerts - & has danced there, & enjoyed them. He bursts heavily in the gallery - & is better in bodily health. His voice is stronger. Yet with this improvement it is found that he still persists in some of his hypochondriacal notions - that his lungs are out of place, his stomach also - & so forth. But he does not voluntarily refer to them at present & his mind is as far as possible diverted from them. He is sleeping & eating well.

1892
Feb: 26th He has, since last note, been even better than therein recorded, but is now again not quite so well. He has been up on No. 4. since the beginning of the year, & at times has been very cheerful & pleasant. Even now he is marvellously different from the condition in which he used to be. At present it is not at all likely that he would attempt suicide - & as long as he remains nearly as well as he is. He talks of former times frankly, and says he was not responsible for his actions - he describes various depressing & tormenting bodily sensations, experienced by him then - Voices used to speak to him from his stomach - & there were sounds & ringings in his ears - & voices speaking from his temples & cheeks. Apparently the Vagus & the 5th Nerve were the chiefly implicated in the sensations conveyed to his brain - Feels of dizziness too were present - He also used to feel pressure in the chest & abdomen, & believed his organs were all out of place. He smiles at these now, & yet says he is not sure that some of it was not true.

Period of marked insight.

To 535

David Allison
from Vol. III p. 601.

1891
Dec. 23rd His condition is, as before, subject to variations. Just now he is inclined to talk, says he feels well. & has more life about him than in his other mood, when he is dull, morose, and brooding over his bowels & health, & wondering why he is kept here. His mental condition generally is one of dementia.

1892
April 7th Practically unchanged. Refuses to work - and sits idle most of the day.

July 12th No change to note - Suffers from constipation - but is hypochondriacal in his tendencies & apt to exaggerate things.

Dec. 23rd Still inclined to constipation and in manner is very variable. He gets excited if spoken to and lately ended by saying that the Head Attendant was a 'damned daft Doctor'.

1893
May 13th He was sent up to the Infirmary Ward this morning as he neither felt nor looked well. His hands are cold and bluish as are also his lips and tip of his nose. His respirations are increased. Pulse quick and feeble. There is no difference on percussion of the two sides but loud sonorous rhonchi are heard all over both lungs, (obscuring heart sounds). Mentally he is not greatly so early.

May 14th Much worse. Temp. last night 103°. Respirations more difficult. He answers questions about himself sensibly. Sounds evening he got worse and died.

Death on May 14th 1893

Cause of death - Phthisis Pulmonalis and fatty degeneration of heart.

For P M vide Pathological Register p 181

William Tuite
from Vol. III. p. 488

1891
Dec. 23rd It is not seeming an ordinary Phthisis - as at present the signs are basal - & not apical. The fact that he was a stone-mason is important. The right lung at present seems fairly sound. He has a slight evening rise of temperature - up to 99·5° occasionally. He is getting hypophosphites, cod liver oil & Porter - & is in the Infirmary Ward.

1892
Feb. 26th Looking better - & stronger.
Very surly in temper & morose in habits.

April 7th His bodily health has certainly improved. He is in the Infirmary Ward still - & his mental characteristics are just the same. At times he is dangerous.

July 12th Silent & moody as a rule - & suspicious. Is best left alone.

Dec. 28rd His general condition is better. He is milky and won't speak or work. At times but seldom is excited and dangerous.

1893
May 31st He was noticed to be looking ill a short time ago. There is dulness at left base with medium-sized crepitations. The left side does not move so freely as the right. He has got much thinner and perspires a good deal at night. His temp. is generally raised in the morning, about one or two degrees. Great difficulty is experienced to get him to take sufficient food. He is much more civil of late and not so suspicious - a bad sign.

June 8th He is getting much worse and rapidly so. The crepitations are well marked. He perspires a great deal and has difficulty in breathing.

" 17th Died this morning.

Death on June 17th 1893

Cause of Death - Phthisis Pulmonalis.

No P.M.

John Drummond
from Vol. III - p. 394.

Dec. 30th 1891

This patient having become improved was discharged to-day relieved. He is still slightly silly in his ways, but is very cleanly & tidy - and is quite fit to be taken care of at home.
The condition of his lungs also renders it more advisable for him to go.

Discharged.
Relieved

February. 1892. We writer has heard that a little more than a month after his discharge, he died.

John Gentleman.

from p. 323. Vol III.

1891
December
April 7th 1892 Restless, clattering, dirty, & destructive. Sometimes he becomes so noisy & objectionable that a course of Sulphonal in 10 gr. doses, night & morning, is given, always with good effect.

July 12th The same troublesome degraded patient – for whom no suit even of canvas can be found tough enough.

Dec. 15th When spoken to he grins and makes faces. His condition is unchanged and now and then Sulphonal has to be given.

1893

April 24th Sulphonal in gr XV has to be given pretty regular as he is often very noisy. Otherwise the same.

June 30th Constantly chattering and making grimaces and mimicking what is said to other patients like a parrot. Requires Sulphonal regularly.

Dec. 28th Unchanged in every respect.

1894

December 29th Throughout the past twelve months he has kept in pretty fair health. His habits are unchanged and his periods of excitement remain as before.

1895

Dec. 20 Dirty & destructive, filthy in language & habits & address when it is to cover an outbreak of obscenity. His health remains fairly good.

February 28. 1896

Removed to Merryflatts.

Discharged. Relieved

William McNicol
from Vol III. p. 63.

Dec 24th. 1891

1892 April 7th. Avoids attention as usual - if it is pressed upon him he gets irritable. Entertains evidently some delusions on the subject - Is very silent & asocial.
B.H. & C. fair.

July 12th. Unchanged.

Dec. 15th Still as unsocial as ever and avoids observation as much as possible. Seldom speaks. B.H & C. fairly good.

1893

April 24th Unchanged.

June 30th Speaks none. Looks at one suspiciously and passes on.

Dec. 29th Continues silent and reserved and repells any advances. B.H & C. moderate.

1894

December 29th Now and then he looks as if he might speak but he never does so. His health is fairly good and there is no change in his condition to record.

1895

Dec. 20. Likes to be left alone. He is quiet & harmless and does some ward work but he will strike if interfered with. He is demented & enjoys fair health.

1896

Oct. 6 There is no change here. He likes to be left alone. and will assist a little in ward work. He enjoys fair health.

Dec. 7. Confined to bed with high temperatures and marked morning remissions. There are signs of decay at the right apex heat got behind.

Dec. 31. 1896. Since last note has been steadily sinking and died today. Cause Phthisis Pulmonalis

Alexander Smith.

from Vol III. p. 25

(1891) Dec. 26°	Nothing new to record about him. He is quiet now - & does a fair amount of work in a mechanical way. B.H.&C. slightly better.
1892 April 7th	Deeply demented - Employed daily. B.H.&C. fair.
July 12th	Unchanged.
Dec. 23rd	Works fairly in a mechanical way. He has a vacant stare and when he speaks he doesn't look one in the face.
1893	
April 24th	Unchanged.
June 30th	He is in fair general health. His conduct though not noisy is very foolish.
Dec. 28th	Works as usual. No change.
1894	
December 29th	He has been employed throughout the past year in Ward work and this he does fairly well. Mentally he is the same.
1895	
July. 17.	Transferred to Hartwood.

Relieved.

Richard Docherty.

from Vol III. p. 5.

1891.
Dec. 26th A quiet civil man mostly - but at times excited & irritable, from his delusions, which take the form mostly of being 'outraged' & 'interfered' with at night. R.H. & C. very fair.

April 6th. Excitable every now & then. & brooding over his delusions.

July. 12th. Very angry & threatening on one occasion of late - resenting the persecutions & injuries done to his body & mind in Gartnavel.

Dec. 15th Has remained the same for the past few months. Does no work but is as a rule respectful in manner. Has a depressed look always on his face. His delusions about being interfered with and annoyed at night remain fixed. sometimes very irritable. V.H. & C good.

1893

April 24th Sometime ago when asked how he was got very excited and declaimed violently against the persecutions he was subjected to especially at night. He soon quieted down. He is often very amused at the incoherent language and absurd remarks of some of his fellow-patients.

June 30th Sits brooding most of the day over the persecutions he is subject to in Gartnavel. His expression is that of despair and he says they are getting worse instead of better.

Sept 23rd For some weeks he has been getting thinner and paler and not taking much food. On examination of his chest friction is heard below and behind the left nipple. The percussion note is impaired behind on the same side. His temperature is slightly raised at night. Counter-irritants have been applied and Quin. & Pot. Iodid. internally with as yet no appreciable effect.

To Vol V p 89.

Daird Boyd

cont: from p 521.

Mr Boyd and the next morning he said that the hanging had begun. His general health is poor. He is troubled with headaches, lumbago and sometimes an attack of tonsillitis.

1893

April 24th Continues to believe his delusion about the fate that is to befall him and his brothers. He is very thin and does not take to his food well.

June 30th In summer he sits most of the day in the garden but in his usual attitude with his head bowed down and picking at a piece of hair of which he keeps a stock in his pocket. He takes no interest in the flowers and vegetables: his mind is too full of his delusion for that.

Sept. 23rd The explanation he gives of his habit of always picking at a piece of hair is a sensible one - it is to save him from picking his skin. There is no change in his condition.

Dec. 28th As delusional and melancholic as ever. He says he is quite willing to remain here. His health is poor and he gets very depressed on having the slightest ailment.

1894

June 29th He seems to be entirely occupied with himself and his supposed woes and will not voluntarily speak of anything else.

December 29th As a rule he is silent and will hardly answer any question. At other times he is so full of his delusions that he can not keep silence but readily expresses them. His health continues poor.

To Vol V p 595.

John Turnbull

From p. 350.

1892

29th February. On account of his great restlessness at night - (he being much quieter by day) various hypnotics have been tried. Of late Trional has been given and has done well but it produces great weakness in walking or rather it intensifies the weakness that was present.
The pupils are at present distinctly unequal & the right is the smaller of the two. it reacts very slowly to light. Right patellar reflex is very doubtfully present while the left is very active. Sensation is dulled generally but not otherwise abnormal. —
He has had fair fair & for some days has been in bed partly on account of diarrhoea & partly on account of his great restlessness in walking —

July 7th Getting weaker especially in walking. Signs of G.P. very marked. and his case has no very special or exceptional features about it except it be his great restlessness & sleeplessness at night & his tendency to sleep by days. Paraldehyde is still being given & acts fairly well. His articulation is now very indistinct & what he says can hardly be understood but he knows his friends when they come to see him & repeats his own name -

October. 3. Gradually getting weaker & with his articulation becoming very indistinct & his gait more unsteady. His bodily condn is also less satisfactory —

Decr. 16th Disease progresses but not rapidly. If anything he is rather better than at last note. He walks better. His speech is less indistinct & he is sleeping better at night.

John Turnbull

1893.

Jan. 31. Very little change. Disease advancing, but slowly. His bodily health & condn are fairly good.

Mch. 17. Very slow invasion of the disease. His articulation is rather more distinct than it was and his gait steadier. He has been sleeping much better of late without draught –

Apl. 11. Yesterday he had what seemed to be a slight congestive attack. He got very pale vomited his breakfast, pulse became very weak, and he seemed unconscious for about ¼ hr. Then he rallied somewhat, but seems weaker to day & is unable to stand on his own feet –

May 30. Been pretty comfortable since last note. He is becoming quite unable to walk & is weaker. Often very restless at night but less so than he was. Destructive also & now & then has a buttoned glove on to prevent the destruction of bed clothing. —

June 24. The catheter has had to be used once or twice usually and he has been more noisy at night but has been sleeping a good deal by day. He is worse generally, but the disease is not rapidly progressing

August 25. Getting more feeble. Nights often noisy. At present he has Paraldehyde. Able just now to be up for some hours every day. Speech now quite unintelligible

Septr. 15. Last night he had four fits. The first of these was general & severe, the others affected only the right side & principally the right arm. The convulsive movements were most marked in the right hand & fore-arm, & the head was drawn over to the right side. Breathing during the attacks was

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John Hart.
from page 172.

1892
Feb. 22nd But he talks readily enough & sensibly. He is working outside just now - & is not so nervous in manner as he was. He is anxious to get home.

April. 6th Just about the same. Quiet & well behaved, but not showing the healthy mental & bodily bearing of a man at his time of life. No clue to any delusions.

July. 12th This man escaped from the grounds about this week ago - but was brought back in about 24 hours. He had gone to his old home, but his friends were away at the seaside. When he found the night he will not tell. He is fairly well at present - as far as can be made out, but his manner & expression are far from frank - & may cover a more morbid mental state than is apparent.

Sept. 29th This patient has improved. He is still reserved.

Discharged Recovered
on
October 14th 1892.

Readmitted Feb. 3. 96
Vol. VIII page 218.

John Dawson
from p. 260.

1893

March 20. Is not any better. Talks readily enough to his friends when they see him but very little to any of the officials. Reads a little, but his favourite attitude is one with his hands in his pockets. Spoken to he looks up in an angry way and then walks away. B. M. is fairly good —

May 30. No change. —

Sept. 15 Seldom speaks & when he does it is to make some nasty remark. Gloomy in expression & manner. No improvement.

Nov. 30. Has been down in No 2 for some time. His mental condition is unchanged. He is silent & sullen, believes that everything that is done to him is meant to do him harm & that no one here is actuated by friendly feelings to him. About a month ago he had what seemed to be a slight attack of enteritis. His temperature for about a week was above the normal, usually 3 or 4°. and he was difficult to treat, as he resisted a good deal. Now he has got over that reserve & is back to his usual self but is thin & of poor appetite. At present he is having Quinine & Iron in moderate doses —

1894.

Jan. 12. This gentleman is to-day removed by his wife & discharged Relieved. He is not any better mentally, but at home he seems to be brighter & to take his food better & his family are anxious to try him there

Relieved

James Kissen Alston
from 5th 22

1892
Feb. 26th — At present he is a little depressed - not so often & pleasant as he was a few weeks ago. He complains a good deal of a "bubbling" in his head - & puts his finger on the frontal region, near the centre. This feeling depresses him. Some weeks ago, at a magic lantern entertainment he had something like an hysterical convulsion - He was not at all unconscious, but had much coarse tremor in all his limbs, fell down - looked pale - could not speak apparently. When the writer saw him he was gasping in a curious way - & trembling - whispered that he could not move. A few words to reassure him, & assistance, in his getting up & going down to the Infirmary Ward, had the effect of curing him - At least he walked down stairs, with two attendants, & a little later was seen talking off his clothes & going to bed, as if nothing had happened.

Hysterical convulsion?

He has been having recently a glass of whisky daily - & a bitter tonic.

April. 7th — Not very well - Still allowed to be in No. 4. but pretty often dull - & brooding - & fanciful about himself & his health. It is doubtful if he will ever be much better

June. 15th — Fairly busy now about the Infirmary Ward - where he went some weeks ago declaring he could not speak or stand - For some days he lay in bed & was allowed to rest - The fit of hypochondriasis (?) passed off gradually & he is now gradually getting brighter.

L. K. Celston

One of his great complaints is that he has no breath & can't talk. While he always complains of 'bubbling' in his head, (frontal region) and giddiness.

July 12th. Not any better than when last reported on. Has 'bad days' pretty often. when he says he cannot talk, & can just manage to stand & walk. Complains of his body all twitching; & pulling, of giddiness, & of being unable to see straight or to read - & so forth.

Dec. 16th 1893 For the past few months has been in exactly the same condition.

April 24th He has been worse for the last month - indicated chiefly by his giving up his usual occupation that of cleaning the dishes. His complaints are the same - of not being able to bear the light, of his nerves being all wrong etc. His general health is fair.

June 30th Still very depressed and full of delusions about himself. He keeps his eyelids tightly shut as he says he can't bear the light. When taken notice of he gets distinctly & worse and screws up his face.

Sept. 23rd His regular answer to enquiries as to how he is, consists of saying he is a little better. In reality however he is not. He is not at all obtrusive and does not express his delusions unless closely questioned.

Dec. 28th He has had a boil on one of his fingers. Otherwise there is nothing new to report. Mentally he is the same: full of delusions about himself.

So Vol. V p 140.

537

William Alexander

From p. 472.

1892.

March 15. Continues very excitable & talkative & since last note requiring demanding special attention has taken place in his condition. —

July 7. Free of the same delusions as have been previously noted. Refuses to answer to his own name, saying that he is 'Francis Balfour Esq'. Says men in this asylum are all to be sent to Penal Servitude for life for what they have done to him. On one occasion the cattle had to be passed and for this indignity the writer has to suffer the most awful tortures. He refuses to allow any examination of his tongue, even to any attempt to do so makes him very angry & he lets out at everyone. Sees also he talks to imaginary people but does not interfere with the others —.

Sept. 11th In the last six days has been passing little water and little obtained by the use of the catheter. His abdomen is swollen and on passing a hypodermic syringe there was obtained the ordinary straw-coloured fluid. It is dull on the flanks but prominent in the centre. The abdominal walls are tight. It is with difficulty that any examination of the patient is made. He has to be held by four attendants as he struggles fearfully thinking he is to be murdered. He shouts and calls out for help and tells everybody around him to run etc. His face gets purple and about tired with rage. It should be added that the first thing which attracted special attention to him some six days ago was incontinent purging.

" 12th The abdomen was tapped yesterday and 14 pints of the ordinary straw-coloured peritoneal fluid were withdrawn. To-day it has re-collected to a certain extent but not sufficient to necessitate interference.

" 14th The abdomen is refilling. The condition of the patient is distinctly worse; he is not so violent when examined; his pulse is weak and he has got thinner about the face.

William Alexander

1892

Sept. 16th The abdomen was re-tapped to-day and about 10 pints of straw-coloured fluid drawn off. The patient made very little resistance; he said it was unnecessary to draw it off as he could pass the urine himself if he tried.

" 18th The condition of the patient is very grave. His pulse is hardly perceptible and he is troubled with continuous hiccough. A little whisky and milk is all he can swallow. His face is worn; extremities cold.

" 19th Patient gradually sank and died in the afternoon.

Death on Sept. 19th 1892.

For P.M. vide Pathological Register p. 161.

Rev. John Reid

From p. 478

D. Yellowlees is his father. He believes also that he is more than human, & has he wont express it openly it is thought that he believes himself to be Jesus Christ. Recently he came marching up to the rails in the Ward, holding up his right hand & pointing to a slight bruise in its palm. "Do you see that" said he "Mark it & remember that I am no ordinary patient. Think over it & study the sonnet I gave you some time ago."

Recently also he took a dislike to the nurses saying that he knew him an untruth and his salut: often was "Do you know where hair go". Sometimes he wrote nurse a note advising them i.e. the nurses to read a particular psalm or paraphrase before retiring to rest. At times his conduct in the Ward has been very peculiar, now arrogant & haughty, now rude & repulsive. Now seldom he has been pleasant exchanging a few remarks about things in general.

His bodily condition has recently been below par and at present he suffers from a small carbuncle on the inside of his thigh, and round her there are other smaller ones —.

1892
June. 15th. Has been lately troubled with a crop of boils - mostly on the buttocks. Is troubled with headaches & confusing sensations in her head. Is sallow & unhealthy in appearance. Reserved in manner - & entertains numerous delusions - regarding his position here, the people &c &c. It is not easy to "draw" him however -

Rev. John Reid

June 15. Under a fairly civil & quiet demeanour he entertains it seems an ill-will to many people here & to the Institution. Says he never has had the least cause.

July 12th. Her health is better, at least no more birds have appeared. But he looks sallow & torpid. His manner is merely polite — never cordial. When interrogated the other day regarding his mental state he became irritated & declined with much hauteur to "discuss such matters."

Dec. 14th In fairly good general health. He has not had any birds for some months. When questioned about whether Dr. Yellowlees is his father he denies ever saying that but says that Dr. Yellowlees is his spiritual father, not his father in the flesh. He further says that there was something peculiar about his birth as four years elapsed ~~before~~ between the birth of an elder brother and himself. So this he attributes his illness. He says he hopes sometime to get out but does not think it would be advisable for him to leave the Asylum yet as he doesn't think he is well enough. Mentally he is the same. Sometimes he complains about various things.

1893

Jan. 28th Continues foolish especially shown by some of his letters. He has taken a dislike to some of the other patients and sometimes annoys them a good deal by praying aloud for the salvation of their souls. He constantly complains about his ~~the~~ fellow-patients, the table he sits at during meals etc. In making them he speaks quietly and civilly.

April 28th He lately ~~the~~ asked to speak to with Dr. Yellowlees in private as he had something to say to him. His important

To p 558.

Harry Park.

From p. 142.

1892.

March 16. In a weak. muscular condition. Acc his faculties are very slow in responding to any stimulus. B. & C. very good.

June 7. No change. Works in the garden in the fore-noons. Mentally perhaps rather weaker -

October 3. No change. B. & C. good.

Dec. 16. Works in the joiners shop, and is practically in an unchanged condition.

1893.

March. 20. No change. Partly demented & at best very slow & sluggish in his movements - B. & C. good.

August 7th. Has worked in the joiners shop during the summer in the forenoons, but just at present he has struck work, & is rather excited. He is just the same & though very slow, he yet retains some remnant of mind -

Nov. 30. No change. Has not worked in the joiner's shop for some time. Says he sees no need why he should work. Slow & torpid in many of his actions. —

1894.

January 20. No change. —

April 14. Works in the garden though very unwillingly. Lazy & torpid. B. C. good.

1895.

January 11th He is demented & as a rule quiet & disinclined for exertion. But now & then he breaks out into a torrent of abuse regarding his detention here. B. C. is good.

September 30th If anything he is getting more demented and stupid. He sits doing nothing most of the day gazing vacantly into space and when asked a question can answer only in monosyllables. His health is good.

To Vol VI p 45-7.

Rev. W. Mc. Watt

From p. 144

July 9th The irregularity & palpitation of the heart continue but are not so frequent as before and on the whole Mr Watts bodily condition is better than it was. He is out a great deal in the garden & grounds & is at times fairly cheerful. again however he is very sure & despondent, weeping & bewailing all the harm & evil he believes he has brought on his family. as has been previously noted he is really a most estimable man & probably as 'unspotted' as any one. as the Head attendant says he is the only minister whom he has had under his supervision for 30 years, of whom it cd be said that in all his daily life & conversation he acted up to his profession as a Christian minister

Sept. 26. Mr Watt is to-day taken home by his friends. Mentally he has of late been wonderfully well & it is a matter of satisfaction that he is so bright as he is

Discharged

Recovered.

John Shields

From p. 352.

July 7. At Mr Shiels's request he was examined as to his mental condition by 2 Doctors of his own selection. He chose Drs. Renton & Knox & on the 20th inst they examined him. Their report is annexed. It cannot be said it has had any effect. His hallucins remain the same, and he believes in the 'conspiracy' that has been formed against him. He has been taking his food rather better of late, but he will take no interest in out-door sports. not will he go outside the airing court to walk. He reads a good deal & takes an interest in the questions of the day.

October 3. Little change to note. Delusions persist & he quarrels with other patients at times, resenting their talking to him & striking them. He has been taking his food fairly well, but is given it to a great deal. He has afflicts - since he cannot be discharged altogether - for a change of asylum.

Dec. 16. The same delusional man with hallucinations of smell & taste. Went recently at his own urgent request to Greenock to see the Doctor who certified him much disappointed because he would not declare him to be mentally sound. He has the same delusion about his food believing it to be tampered with by the cook who is in a conspiracy to do him harm. Does not think it would do him any good to go to an other asylum as there are ramifics of the Conspiracy in all asylums &c. He takes the idea that there are smells in the rooms where he sleeps & that these smells come in thro

John Shields
cont'd

the ventilators. The other night he refused to stay longer in bed on account of the smell & was brought down-stairs & at present he sleeps in the Gallery. It may be that in him & other things he is too much humoured. His bodily cond.n is fairly good.

Copy of Certificate furnished by Drs Campbell Renton & Hogg regarding Mr Shields

Glasgow. 20th June 1872

We the undersigned hereby certify that we have this day at Gartnavel Royal Lunatic Asylum examined John Shields, an inmate of the Asylum, as to his mental condition. We find that he is subject to delusions and hallucinations of the senses and that they have persisted practically unchanged for the last five years, while he

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must say. "If a man
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that asketh him thou
to eat that ye wot
ye do it unto me
my people" &c &c.
3 times with the tube
He has had milk, bouil
e, but no eggs or
he has an objection
, a belief not founded
tube and has become

mentally worse. He is very violent & resistive refusing to go into the Room to be fed & having to be carried Jops. 591.

John Shields
From p. 352.

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has been resident in the Asylum. We are therefore of opinion that he is of unsound mind, quite unfit to take Care of himself & manage his own affairs and might even be dangerous to himself & others -

D A Knox - M.D.
Surg. Roy. Asylum.
J. Crawford Renton. M.D.
1 Woodside Terrace
Glasgow

October 3. Little chan quarrels with them talking taking her too great Dear - be discharged

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John Shields
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Room p. 352.

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Decr. 29. To-day Mr Shields had to be fed with the tube. He refused food all yesterday taking only a glass of milk in 24 hours. The delusions have increases in intensity and last night he slept little getting out of bed & standing with his hands folded & his face raised. When remonstrated with he spoke many passages of Scripture. Said he was not allowed to remain quietly in bed, that God called him to be doing in his vineyard, that he had neglected God's message & he must now suffer for it. Then he would say. "If a man compels thee to walk with him a mile, go with him twain". "Him that asketh turn thou not away". "I have food to eat that ye wot not of." Inasmuch as ye do it unto me ye do it unto the least of my people" &c &c.

To day he has been fed 3 times with the tube and has not resisted. He has had milk, Hard ground biscuits & peasemeal, but no eggs or whisky, as to both of these he has an objection believing that they injure him, a belief not founded it is thought on actual fact.

Decr. 31. Continues to be fed with the tube and has become mentally worse. He is very silent to-day & resistive refusing to go into the Room to be fed & having to be carried Jop. 591.

Thomas Mc Fadyen
from 277

1892
March 22nd
May 23rd Insane irritability, & causeless violence at times, characterise him. Sulphonal in 15 g. doses night & morning - has some effect after these moods are on him -

June 21st Many bad language lately - & startling much - Sulphonal given for a few days gave - result good effect.

July 12th Not so troublesome lately - but very demented, & no doubt will in time become troublesome again.

Dec. 14th He is sometimes troublesome as he occasionally indulges in a fight. He never speaks. In fair general health. His habits are cleanly.

1893
June 30th Now and then gets restless, foolish and talkative but not to any marked extent. He has not required Sulphonal for six months.

Dec. 28th He is a big rough and careless fellow who is apt to be quarrelsome if interfered with.

1894
December 29th His health continues excellent. His habits remain as before; if anything he is even less trouble.

1895
Dec. 20. Has had several slight hemorrhages from the nose. There is the slight impairment of the R[illegible] of the optics and he is thin but enjoys very fair health. He is still sleeping in a single room as he is apt to be irritable. He is quiet and occupies himself in nothing and frequently will not answer when spoken to

to Vol. VII. page 11.

Matthew Love
from 513

1892
April 7th

Lately he was seen by one of the doctors who certified him. (His opinion will be enquired later). He is at present very restless, & continually asking to get away. Almost every day he asks the writer - "Is there any word of my getting away." He does not recognise and will not admit that he was ever ill: he is very careful in what he says now - & when asked to explain some of his mysterious remarks, says, "No - You will just say it is a delusion". He states however that if he were allowed into Glasgow for one day he could produce books to prove all that he has ever said. He has recently been very threatening in his attitude, and has warned the writer to "look after himself." He does not intend violence, apparently, but some legal action. He asserts that he "knows" a great deal - and that if he once begins to write what he knows, every one in the Asylum will be in his power. He says that a terrible amount of "villainy & blackguardism" is committed here - and is very vindictive in his remarks about The Superintendent, Dr. Oswald, & Angus (Caledonia). He made false and malicious charges against attendants to the writer, stating that he had seen a patient struck and hurt severely. He referred to a very dangerous and homicidal patient with whom occasionally it was necessary to overpower - but he was never ill-treated. He insists that he is detained here, not because he was, as it, violent, but because the officials are afraid of him, and seek means so as to silence him. He says he has lost £600 by being here & asks to be released.

To 559.

William Forsyth
from 497

1892
April 7th To his mother lately he was on the verge of becoming abusive + his nature remains, it is feared, unaltered though he has found it useful to exercise a little more control before the Officials.

July 12th Keeps quiet - + rather moody. Associates with the malcontents. His manner is no franker, nor his expression of face any more indicative of a healthy mind, than formerly.

Dec. 14th This patient remains moody and irritable and seldom speaks. His relations when they come to see him have to be careful of what they say to him as the slightest thing upsets him and he breaks out into a volley of abuse.

1893
June 30th Does not speak to visitors unless spoken to. He seems to shun observation. Is quiet as a rule. B H & C. good.

Dec. 28th There has been no change in his condition during the past six months.

1894
June 29th He is regularly employed outside in the ordinary farm + garden work. There is no mental change.

December 29th Unchanged. B H & C. good.

1895
April 4th Of late he has refused to go out and work and gives as his reason that he wishes home.

1895. Dec. 31. Transferred to Hartwood.

Relieved

John Phillips.
from 496

1892
April 7th

become complete anæsthesia. And even in parts where it seemed to be so, continued stimulation seemed to impress him, & especially if his attention was directed to the part. Sometimes he confused the locality touched, even to the extent of referring touch on the arm to the leg. Sensation seemed in parts to be delayed also. These variations were only present on the paralysed side. There is a condition of hyperextension of the fingers at the metacarpal joints - especially the thumb. & an irregular choreic movement of them - a post hemiplegic athetosis.

May. 12th. During last night the paralysed side was affected with several slight Convulsive seizures - enough to make his position in a chair insecure. but never reaching anything like general convulsion, or unconsciousness. It was a true Jacksonian epilepsy. To day he has had 14 such seizures, despite free use of Chloral & Bromide, which had been stopped for a day, & which he has taken fairly steadily for a long time.

13th.. Had numerous slight seizures during the night, & between 6. am. & 10. am. he had eleven. The head is deviated, & the eyes, & the right, & after in the right leg, & arm, & both, a series of quick choreic spasms follow an initial rigidity. He utters a sort of cry as the fits come on, but is quite conscious during & after them. His temperature is 101.6 - the pulse & breathing quickened - & at the bases of the lungs the breathing is diminished & accompanied by a few râles.

To 563.

Peter Currie

do. from 428

1892.

April 7th. No sensory stimulation has any effect on him. He may wink a little more quickly, especially if it is the face that is experimented on. But there is no sign of pain, or even of feeling, beyond that.
Strong Ammonia held under his nose has not the slightest effect. Infusion of Cough caused marked flushing of face & increase in pulse rate, but had no other effect at all. Yet if food is put into his mouth he certainly makes a successful effort to expel it. The muscles of his neck at the back, are rigid still, & also of the abdomen.
His general nutrition keeps about the same.
He is very pale still, but not more so than before.
It is now over 4 years since he passed into this state.

July. 12th. Exactly the same. No change in any direction.

Nov. 3rd. For the past two days this patient has been fed with the spoon. For a few days previous to this he had slightly resisted the passing of the stomach tube by trying to expell it. A little difficulty was thus experienced in passing it. He has also been restless for the last few nights; talking quietly to himself and laughing. This morning when asked how he was, he replied 'Fine' and further said that he wished to put on his clothes. When asked how long it was since he had put them on he replied '3 or 400 years'.

" 8th. He still takes his food with the spoon and laughs and talks to himself. He also answers simple questions. He seems to understand all that has been or is said to him for when questioned about ~~what~~ some things that were said to him two years ago he says he remembers the said things being talked about.

Peter Mc Currie
cont.

1892.

Nov. 23rd For the last fortnight there has been no change in his mental condition. He has been getting steadily lately.

Dec. 14th Not so well this morning. He didn't take his food very well yesterday and was vomiting. Abdomen rather swollen, resonant all over. Pulse fairly good. Temp. normal.

" 15th Much worse this morning. Looks very ill. Abdomen distended greatly and tympanitic all over. He passed very little water last night so a catheter was passed this morning and a tablespoonful of urine only drawn off, not blood stained. According to the reports he had been passing water regularly and plentifully up till last night. His bowels have well opened yesterday by an enema. Previous to this they had not been opened for two days. Temp. 99. Pulse small and rapid. Opium fomentations are being applied and Tinct Op 3fs given by the mouth every three hours. Stimulants are also been given. He vomits any food that is given.

" 16th Last night he had three loose motions and in the evening he had passed about 7 oz. of urine. His abdomen is still swollen, more marked over the stomach than anywhere else. It is tympanitic all over and the sense of resistance to palpation is not so great. Light percussion does not seem to give pain. His pulse is still small and rapid and his temp. is 102°. There is nothing ~~else~~ abnormal detected in his lungs. He ~~is~~ is having hot fomentations to the abdomen sprinkled with turpentine, and nutrient enemata every four hours. Whisky is given by the mouth. There has been no more vomiting.

" 17th Last night his nose was slightly swollen and the skin reddened, which redness had a defined edge. This morning the rash has spread and involves both cheeks. Its edge is serrated and slightly raised. The colour is not brighter but only moderately so. He asked the writer this morning if he was the Devil; and

To p 589.

William Shannon
from 224

1892

April 8th Remains in an unsatisfactory state. A few weeks ago he very obstinately refused food & was rather irritable. Possibly he procured it secretly. At least he did not fall off in flesh, before he himself resumed taking his food. Still refuses to work. He is strange in manner at times, & entertains queer fancies.

June 16th Making no real progress. Accused himself of being a thief the other day, & was somewhat excited & restless. His mind is more unsettled than his apparent & usual behaviour would lead one to suppose.

July 12th Not working - & showing still a defective mental balance. & a good deal of brooding & moodiness.

Aug 30th Has obstinately refused to work: says he will work plenty outside but Gartnavel, but never while he remains in it. For the past few days he has exhibited much more marked mental aberration - refusing all food & behaving in an excited foolish way. It is a distinct recurrence - & his illness seems to be falling into a recurrent type. He stated this morning that a horse was once brought into her room & made to trample all over him - & that the "little black doctor, Dr Stewart" who was once here cut off the point of her penis with a knife one night, but that he Shannon at once put it on again & that it grew there. All this he tells with much gesticulation, taking of oaths & fervour - He might be dangerous. Person is dirty. All medicine refused.

So p 581

John McKinlay.
from Vol. III - 600

1892
April 8th Unchanged. Usually quiet - inoffensive. The fits continue as before.

July 12th The fits continue - & nothing in his condition calls for special note.

Dec. 14th On an average has a fit nearly every day. He is sometimes violent and when so is very obstinate as for example if he attacks and kicks with his slipper another patient force has to be used to get him to desist. When in that mood it is difficult to get him to do anything or to desist from doing what he should not.

1893
June 30th Fits continue as before. There is no change any way.

Dec. 28th In poor health but unchanged. During the present year 1893 he has had 185 fits distributed as follows:
Jan. 15. Feb. 14 March 11 April 16 May 15 June 9
July 17 Aug. 16 Sept. 18 Oct. 18 Nov. 21 Dec. 15.

1894
December 29th There is no change in his condition. During this year he has had 195 fits distributed as follows:
Jan. 24 Feb. 13 March 17 April 23 May 18 June 22
July 23 Aug. 18 Sept. 8. Oct. 7 Nov. 11 Dec. 11.
The only noticeable feature is the marked falling off in the number during the last four months of the year.

1895.
Dec. 20 Fits are much less frequent now but they are severe and his tendency to fall on his right side suddenly and without warning secures that he has occasionally his right eye bruised & blackened. Protection with a padded cap has been found of little use. He is good tempered as a rule & is very demented. B N is good.

Vol. VII. page 76

Alexander Paterson Barr
from Vol. III : 453.

1892
April 8th
July 12th Goes messages - walks in the wards - is quiet & useful; in appearance clean & trim - He seldom speaks -

Dec. 13th No change to record. Works steadily, quietly and well - in short mechanically.

1893

June 30th Unchanged. B H & C. good.

Dec. 28th Quiet, civil but demented to a certain extent. He is very useful and trustworthy. He is a vegetarian in diet and his health remains good.

1894

June 29th He is a meek, quiet and ~~man~~ unobtrusive man, quite willing to go any messages or do anything that is asked of him, provided it does not go beyond the scope of his intellect which is limited.

December 29th Unchanged. B H & C. good.

1895.

Dec. 20 Still as of work a trusty parcel carrier. He is quiet and demented and takes little notice of what is round him. His B H & C is good.

1896.

Oct. 6. This man is no longer the 'Prince of the House of David' he says now he is only a 'message boy' accurately describing the part he plays in the Asylum. He enjoys good health and is fond of a solemn walk about the grounds alone.

Dec. 31 1892.

1897.

Dec. 27. There is nothing new to note here, His B H & C is good.

Vol. IX p. 16.

Patrick Gorman
from Vol. III - p. 41.

Dec. 24th 1891
1892
April. 12th A steady worker. Very silent of late. Continues to respectfully salute the Officials.

May. 30th Last night complained of pain in his bowels. A laxative dose had no effect. A large enema brought away nothing. Some dulness detected in left flank today. Temperature brought rose to 104.2 — pulse 120. Tongue furred, but moist. Pain not excessive — by any means. The abdomen is very slightly fuller than usual.

31st Turpentine enemas have brought away a small amount of faecal matter. The abdomen has remained much the same, the dull area being more evident however. Turpentine stupes have been applied. He has frequently got up to stool, but passed nothing. It seems that he is in the habit of going often to stool. when in his usual health the nurses from piles. His sickness & vomiting are less acute today. It seems that the condition is one of local peritonitis. His struggle with him, a fall, has recently taken place.

June. 2nd General swelling of abdomen. Retention of urine. Temperature 100 - 101.5°. Pulse 116 - 120 - soft - fairly full. No vomiting. Tongue dry & brownish. Local pain not severe. No motion of bowels, but flatus has passed. Opium & fomentations & enemata as treatment & catheterisation.

4th No improvement, but not worse. There seems to be a small amount of fluid in the abdomen. No motion of bowels. The case seems to be one of subacute spreading peritonitis, causing partial (semi-acute) obstruction.

No. 565.

Hugh Kerr
from Vol III. p. 26

1892
April. 12th The boil referred to in last note got better & returned again. He has had teeth in the upper jaw. Little can be done for him when he has these troubles, as he resents interference, & continues to be irritable, & insolent.

June. 25th The abscess referred to above healed well. But he has lately been looking thin & has been very quiet & dull. Examined some days ago & there was found unnatural resonance in front in the right infraclavicular region & prolonged bad expiration. Lower down crepitations of fine character were audible. Left side did not seem affected. He was kept in bed to observe evening temperature & a marked rise was observed. Last night up to 103°. At the same time an acute gumboil is forming on the right lower jaw.

July. 9th The condition of this patient is now quite hopeless. He has sunk better rapidly since last note, with signs of advancing consolidation & breaking down of both lungs, recently more on the right side. Her temperature rose at times to 105, in the evenings. He is much emaciated & very weak.

July. 10th Today he died.

Death - July. 10th 1892

P.M. July. 11th. Phthisis Pulmonalis

See Register. p. 137

Duncan Mac Millan
from Vol. III Page 25

1892

April 12th In good health. Sometimes noisy, when he shouts out incoherent religious phrases. Usually good humoured & fairly useful.

July 12th Has not played cricket this year — evidence of his advancing dementia. A good ward worker & if noisy, not troublesome.

Dec. 14th His general health remains good. He is very stupid. He often shouts and sings, though the former predominates. A favourite expression of his is "To Hell with the Pope". He works about the house.

1893

June 30th Continues in good health but getting very demented, which completely prevents him from playing cricket. He does the ordinary drudgery about the place done by the demented.

Sept. 23rd He does about his work with his head hanging down and he with a loitering air. His health is pretty good.

Dec. 28th Unchanged. B N & C. good.

1894

July 10th He has injured his hands by beating them against the door of his bedroom. There are a few small ulcers, some due to his biting them. They are a good deal swollen. He is very stupid and quite demented.

Sept. 29th He has given a great deal of trouble of late. tearing his clothes and injuring himself. A few weeks ago he got his scalp injured but the wound is now nearly healed. He bites his fingers etc.

To Vol. VI P 294.

Thomas Morris

from page ~~517~~ 16. Vol. III

1892 April 12th	Fairly useful in the wards. Writes unreadable letters to his friends pretty regularly - is glad to see them when they call. Bl. & C. very fair.
July. 12th.	Has taken a great dislike to the writer, also gave him a heavy slap on the back, as a morning greeting, which Morris insisted on regarding as an violent assault. Threatens to "smash the face" of writer & calls him many bad names, which cannot be properly made out.
Dec. 14th	He constantly writes long letters to his relations which as regards sense and writing are almost & impossible to make out. He never speaks, only mumbles and gets very irritable if spoken to. He works about the Gallery.
1893 June 30th	There has been no change in this patients condition for the past six months nor has there been anything new to record. His letter writing continues as does his usual mode of life.
Sept. 23rd	He works fairly well in the Wards and gives little trouble. His general health is good.
Dec. 28th	He takes great objections to different people for only slight causes and his mode of expressing himself is by energetic signs.
1894 June 29th	He has a craze for writing letters to his relations and also to the senior Assistant Medical Officer. The letters to the latter, to say the least, are not carefully preserved. His writing is almost unreadable.

to Vol. V p 543.

Rev. John Reid

cont. from p 540

1893

business was a request for £10,000 for his father. His mood is very variable but he does not now get so irritable as formerly - he is more facile.

June 30th He has been dull and depressed for some time though always civil. He often stands in a particular spot in the airing-court for some length of time. He has been writing no letters lately nor making any more foolish requests. There is however no mental improvement.

Sept. 23rd He has been asserting that Dr. Yellowlees is his father and making other foolish statements. He continues quiet in manner and has no great liking for his health to be enquired after. He is very whimsical and unstable.

Dec. 28th Some days and as a rule he is quiet and ~~foolish~~ civil but in addition is apt to be low-spirited; at other times he is very foolish. His health is only middling.

1894

March 27th He is very delusional: thinks that he is a Peer and often refuses to answer to the name of Reid. There is no improvement.

June 29th He is very queer and whimsical and one can never gauge with certainty what his state of mind will be on any given day. He has been very quiet of late and has not been given to much talking or making many requests. Sometimes he even condescends to smoke a pipe and even seems to enjoy it. His health is fair.

To Vol V p 571.

Matthew Lark

from 546.

1892

April. 27th. He also believes that outside he could earn £1 a day, besides his board + maintenance. He wants to go to a "respectable English asylum" for six months. He says he can find the money for that - + will be content if that is allowed to him - tho' he does not deem himself a fit person for any asylum. All round he is irritable, querulous, threatening, and suspicious. And in his ignorance + prejudice, has nourished various errors + delusions regarding his detention + here, the uses of asylums generally, and the conduct of this one in particular.

June. 15 It has been arranged that he go aboard to America with his cousin. Since this was settled he has been quiet, unimportunate, exceedingly civil - a changed man. His mental peculiarities. tho' not so powerful as they were are no doubt still present; but there is a ~~certain~~ decided gain in control, in common sense. + his perception of the relations of himself to others &c.

June. 16th. Today he was

Discharged.

Relieved.

June 16th. 1892

Robt. McAulay

cont: from p 242

1893

June 30th He has not been in good health for some little time. At present a bruise on his right hand is keeping him in bed. How he got it is not known. He is continually wetting himself. When anything is done for him he is very resistive. Mentally he is more demented.

Sept 23rd He is all right again and is down in Ward No. 10. His eyes sometimes trouble him from slight conjunctivitis.

Dec. 28th Continues in fair health but not now making so much noise as he used to.

1894

March 27th This poor man's condition is now such that he has to be kept in bed. He is constantly wet, & is very ~~cruel~~ helpless, requiring a good deal of attention.

April 17th He has been failing greatly of late, getting thinner and feebler. Yesterday morning a change for the worse noticed: he looked ill, his extremities were cold, his pulse very feeble and heart sounds could hardly be heard. His temp was 99°. Towards evening he became a great deal worse; his breathing became laboured and pulse imperceptible. He died early this morning.

Death on April 17th 1894

Cause of Death - Fatty degeneration of heart.

For Post. Mortem vide Pathological Register p 209

John Frew
from 391

April 22nd 1892 He desisted when the wound was made & did not really desire, it seems, to kill himself. His attempt was by no means a desperate one. He could very easily have succeeded if he had set about it properly, as the knife was large & sharp. He went up to tea & it was after the meal that blood was noticed about him. A wire stitch was all that was required. & he was kept in bed.

30th. Quite settled now & he is in his usual health. He's talking freely & all kind of nonsense about machines, &c. trying on humour. (The old story about the girl & the detectives.

June. 16th. Up in No. 4 now, quiet, self-contained, & well behaved. His mental condition seems to be one of fixed delusion of "suspicion & influence".

July. 12th Lazy, & sulky at times. No sign of betterment in any direction.

25th Bolted from attendants today, when they were at some distance. & got over the wall. He ran along towards Dorden hill & plunged into the water in the old quarry, just outside the gate of the Asylum grounds. The report of eye witnesses is that he would have drowned, the water being deep, had not a young man gone in after him & pulled him out. It is said that Frew finding the water deep did his best to prevent himself from sinking: this is doubtful. He was more the worse of his ducking & was brought back by the two attendants in pursuit who were

John Frew.
cont.

1892.

just in time to see his rescue completed.

Oct. 19th This morning patient, who is generally last to get up, was noticed to get up much sooner this morning. During the night he had been observed to be restless. On the night-attendant approaching his bed after he had given a few drops of blood were noticed on his bed. On further examination it was found that he had inflicted a small wound on the front of his neck ~~ach~~ with a nail which he had in his hand. The nail was a large one and had evidently been carefully sharpened by the patient. His clothes are always searched at night, but nothing had ever been seen of it: The wound is lacerated, about an inch in length in front of the thyroid and superficial. One stitch has been put in and the wound covered with Boracic lint.

" 20th The wound is doing well. In one of patients stockings was found an improvised knife, evidently made by the patient himself. It consists of a sharp piece of steel about two inches in length which is stuck in an old piece of wood and wrapped round with string. It is covered with blood.

Nov. 1st The wound is entirely healed and there are no bad effects from it.

Dec. 13th He is still kept in Infirmary Ward to prevent any further attempts at suicide. He is dull and depressed and ~~with~~ can with difficulty ~~can~~ be got to enter into conversation. He has to be carefully watched.

" 30th Yesterday morning complained of a sore throat and it was found to be red and inflamed. This morning looks very feverish: temp 102. throat a good deal inflamed, dull, heavy look about the eyes with furred tongue. There is also an erythematous rash over all the body, well-marked in the flexures of the elbow and thighs which leaves no doubt ~~but~~ that he is suffering from scarlet-fever. He has been accordingly removed to the cottage Hospital to-day.

So p 567.

John Phillipps
from 5'48

1892
May. 13th A large enema was given this morning & Chloral & Bromide posted. He is looking thin & worn. He is taking food well, but his condition gives rise to considerable anxiety.

17th. The fits have continued in great numbers - as many as 40 in a night, & 50 in the day-time. The total number must be between 200-300 - but will be stated later. Chloral & Bromide have been given in large doses. Yesterday & the night before he was having 20 grs. Chloral & 25 Bromide every 4 hours - Under this the fits did seem to diminish in number & intensity - but this morning tho still the fits continued the dose was lessened, as he was practically semi-poisoned by it. His temperature two days ago reached 103°. but to-day about 99° mid - & his pulse is fair - so that as yet the prognosis is merely guarded. The tongue is exceedingly foul. He takes food fairly well & a glass of whisky was ordered yesterday to be given daily.

19th He has now had more than 500 fits, but they are decreasing - He has had none today since 10.30 A.M. & the Chloral & Bromide is diminished - He is weak & stupid & tongue excessively foul - but it seems now that he is going to come round all right. The Fundi of the eyes were examined. The vessels were fairly well outlined - The discs seemed slightly irregular & blurred at the margins - & more of a brownish grey colour - suggestive of a slight old neuritis - But there was no acute recent change

John Phillips

May. 24th — No more fits. & he is not getting any sedatives now as his stomach was much out of order & vomiting troublesome. His temperature has not fallen satisfactorily & last night & this morning was 102°. The explanation of this that the lungs are affected with tubercular disease, especially at the apices.

June. 7th — Evidence of phthisis very complete. There is a cavern in front, in upper part of right lung. & breathing down generally with numerous moist rales at both apices & consolidation in parts a.

Occasionally he has clonic twitchings of the right arm. He is getting Chloral & Bromide morning & night.

July. 12th — High temperatures at times e.g. 103.4 the other evening. Gradual weakening.

Aug: 5th — Today he died. after a gradual further decline in strength.

Death: Aug: 5th. 1872

P.M. Tubercular disease of Lungs.
Chronic Inflammation of Meninges of Brain
& Cerebral Softening (Left Hemisphere)

Patrick Gorman
from 554.

June 7th. The bowels moved twice yesterday, naturally. Motions formed, constipated, yellow, offensive, & mixed with bright blood from piles, which are numerous. Temperature varies from 98.4 to 98.8. Pulse slower - abdominal swelling less - pain nearly gone. Urine still retained. But improvement is distinct. He is getting 3iv beefsteak daily.

15th. Catheter used since last note. & now all bad symptoms have gone. Abdomen remains a little 'doughy'. Bowels moving naturally. On June 4th the propriety of operative procedure was discussed. The absence of vomiting - & also the fact that flatus was occasionally passed indicated that obstruction was not complete. The delay proved justifiable. He will soon now be out of bed.

July 12th. He is not very strong yet - & is pale & thin, but all acute symptoms have subsided - since last note. He is up daily. - takes his food well. But his pulse is easily quickened. & he is rather shaky on his legs. The abdomen has never quite returned to its previous shape or consistence. There is a feeling of slight distension & thickening about it yet. He has a very fixed notion that he never passes anything from him - he never "gets rid of his nuisance". He will affirm this even a few hours after a free motion. He is continually going to the closet & straining - & nothing will prevent

P. German

herein doing so & he is too deaf to argue with. His delusion about his bowels existed before his recent severe illness. He has suffered from bad spells for long: this may have something to do with the idea.

Aug: 15th Has never picked up strength & has lately steadily lost it, & become very feeble, thin & haggard. Retention of urine has lasted for several weeks lately. no cause being discovered. but two days ago a large ischio rectal abscess was opened & a great quantity of pus escaped & is still coming away. It was only noticed the day before it was opened & did not externally indicate its serious extent. Probably this accounts for all his symptoms. He has only required the catheter once since it was opened. He is excessively weak & unless he gains strength in a day or two he will probably not survive.

Sept. 15th Slowly but surely sinking. The swelling of the left leg is now confined to the dorsum of the foot. He is much thinner and his face is drawn.

Oct. 4th Very ill. Small pulichial haemorrhages on the backs of his hands.

Death on Oct. 7th 1892.

John Frew

cont. from p. 562

1893

March 1st — He is now back again after having been eight weeks in the Cottage Hospital. The attack of scarlet fever as was a mild one with no special symptoms to note about it. His mental condition has not been improved in the slightest by his late illness. He still has delusions of being persecuted by machines especially at night and still refers to his old story about a detective. He evidently from what he says has still thoughts of self-destruction and is therefore kept in the Infirmary.

June 30th — A few weeks ago he secreted one of the ordinary blunt knives at dinner and sharpened it. It was found however that evening in his pockets and taken from away which displeased him greatly and next morning he made in consequence several complaints about the way he had been treated. His delusions of persecution remain unabated as indeed do also his thoughts of suicide.

Sept 23rd — There is no change in his condition. His conduct has not been such as to excite suspicion lately but his delusions are still present. He firmly believes that machines are worked above so as to annoy him and expresses incredulity when the writer says he knows nothing about it.

Dec. 28th — During the past three months he has been in much the same condition. As a rule he lounges on a chair and will hardly speak though when he does so it is in a gruff and surly tone. His delusions of persecution still remain and as far as can be made out do his thoughts and intents of self-injury.

To Vol V p 139.

James Legate Reid

cont. from p 267.

1893
Sept. 23rd — At present he is suffering from a small corneal ulcer with accompanying conjunctivitis. Otherwise there is no change.

Dec. 28th — He still is constantly making his curious contortions especially when he observes that he is noticed. He is demented and quite unable to talk rationally.

1894
December 29th — During the past month or so he has been somewhat troubled with subacute rheumatism of the joints of the hands, wrists and ankles. Sodium salicylate proves of benefit. Otherwise there is no change.

1895.
May 27. — Transferred to day to Lanark District Asylum at Hartwood

Relieved

David Craig.
from 596. Vol. III.

1892 Aug. 15 1892.	
Dec. 13th	He never complains now about pains in his bed though he still believes he used to be troubled with them. He sleeps and takes his food well, and works in the grounds. He says he is quite satisfied here though some day he thinks he may possibly leave. In manner he is pleasant and agreeable but very facile.
1893	
June 30th	Walks about No 4 Gallery and takes no notice of any of the other patients. His thoughts such as they are seem all about himself. He is weak minded and facile. His general health is good and he works outside.
Sept. 23rd	continues in good health. Quiet and inoffensive; contented and good: humoured; untroubled about the future his existence is a negatively happy one,
Dec. 28th	No change to note. He is in good health and never complains.
1894	
June 29th	Sometimes he speaks to one of his own accord but this is rare. Happy and contented in a negative way there is nothing special to record.
December 29th	Unchanged. BH & C. good.
1895	
Dec. 20.	There is little change. He is demented & has no idea on the subject of why he is here. He seems happy & works in a garden a little. BH is good.
1896	
Oct. 5	So in I now his board having been reduced the change is of no import to him. He is in same condition bodily & mental.

Cf. Vol VIII page 423

John Barr.
from Vol. III. p. 590.

Aug. 15th Requires much nursing & care. He is deeply demented & very helpless.

Dec. 14th Hardly ever utters a word so he is quite demented and perfectly helpless. He is very dirty in his habits and requires a great deal of care.

1893

June 30th Has been failing a good deal of late. He has got a large boil on one buttock which is healing up with difficulty. He has also had a purpuric eruption on both thighs which however is now almost well.

Sept. 23rd He has picked up strength lately and is now back to his usual condition. Now and then his urine has to be drawn off, an operation which he greatly objects to.

Dec. 11th Not so well. He looks feverish and his temp. is above normal.

" 14th There are mucous râles over both lungs, thereby obscuring the heart sounds. His pulse is quick and weak. He takes nourishment well.

" 19th Getting much worse. His temp. keeps up and the respiration is quick and somewhat laboured.

" 22nd Died early this morning.

Death on December 22nd 1893.

Cause of Death. Old age and debility from hemiplegia.

No P. M.

John Charles Veitch

from Vol. III - p. 188

1892 Aug. 15th	
Dec. 16th	Demented - walks a little - talks a little - cleanly in habits.
1893	
June 30th	Unchanged. B H & C. good.
November 9th	Instead of working with the coal party he has been sent off to the West House and does fairly well.
December 4th	The expectations formed about him have not been fulfilled and he has been dismissed from his post as one of the workers in the West House for carriages, stupidity and inability to learn. He is now more suitably employed with the Coal Party - his former occupation. When spoken to he smiles in a sheepish way. His general health continues good.
1894	
September 29th	He is even more stupid and demented than a year ago. He will not even wash his face in the morning unless put on his own clothes. His bodily health and general condition are good.
December 29th	Unchanged. B H & C. good.
1895	
Dec. 20.	Needs a great deal of looking after and is very demented. His work requires to be very mechanical and under very close supervision. B H good.
1896	
Oct. 5	Assists with the coal truck. Mentally and bodily condition unchanged
Dec. 31	D S D.

Transferred to Gartloch.
Returned.
November 12th 1897.

John Wallace

from Vol. III. p. ~~##~~ 53

1892 Aug. 17th	
Dec. 14th	No change to record. He sits in the same place as a rule and takes no notice of anybody or anything. His general health is good and his habits are cleanly.
1893	
June 30th	This deeply demented patient is still in No. 4 as he gives no trouble. B H & C. fair.
Dec 28th	Unchanged. His health remains the same.
1894	
December 29th	During the ~~passed~~ past year he has not changed either mentally nor bodily.
1895	
Dec. 20	Sits unmoved in IV. and takes no heed to what goes on around him. He is deeply demented but enjoys fair health.
1896	
Oct. 5.	I S 2 mentally and bodily.
Dec 31	There is nothing new to note here.
1897.	
Dec. 27.	I. S. 9. mentally. B H & C. fair.
1898	
Oct. 19.	Deeply demented & it is only occasionally
1899	that he can be got to speak. B H & C good.
May 1.	B H & C fair. The same in all other respects as at last note.
1900 Oct 1.	no change to note in this patient: deeply demented.
1901. April 1	Deeply demented. Occasionally refuses food. ~~requires~~ ~~was ordered that his gums be syringed each morning~~ ~~attended~~
1902	
Dec 16	No change to note in this patient. B H & C fair.

to Vol VII p 552

573

Dennis Gallocher
from Vol. III p. 52.

Aug 12th 1892

Dec. 14th	He has got stouter and stronger the last few months. He can talk but what he says is quite incoherent. He is constantly making a clicking sound like a pigeon. This is done chiefly with the lips.
1893	
June 30th	Unchanged. B H & C. good.
Sept. 23rd	He sometimes plays cards with another equally demented patient and they both seem to be interested in a sort of way.
Dec. 28th	His peculiarities remain as before. He gives little trouble and is in good health.
1894	
September 29th	He got a little excited lately when he talked rapidly, indistinctly and incoherently. There is no change and his health continues good.
December 29th	He has had no excited attacks since the one mentioned in the last note but has remained in his usual condition.
1895	
Dec 20	Unchanged. He is rarely excited now but is very demented. B H + C fair only
1896	
Oct. 5.	Demented. B H and C fair
Dec. 31	This man's eyes are very tender + he has suffered a good deal lately from a conjunctivitis. It is practically well now.
1897.	
Oct 27.	95 Q. Mentally + Bodily.

Discharged - Relieved. - to Gartloch.
Nov. 12. 1897

M. Cowan Buchanan
from VA. III. p. 32.

Aug. 17. 1892.

Dec. 14th Completely demented. Seldom speaks and when he does so it is quite irrelevant to anything that has been asked him. He does no work but takes his food well and sleeps well.

1893

June 30th Continues in good health but there is nothing new to record. He never works and his dementia is deep.

July 20th His brother removed him to-day on 28 days probation.

" 29th He was brought back to-day as he was found quite unsuitable for boarding out on account of his dirty habits.

Sept. 23rd Quiet and inoffensive but deeply demented. V.H.C. fair.

Dec. 28th His health continues much about the same. He requires some attention on account of his habits which are not cleanly.

1894

December 29th There has been no change in his condition during the year. He has led a quiet and uneventful life - common to many dements. His habits have not improved and his health continues fair.

1895. June. 11 Speaks little or not at all. Sits staring vacantly before him. His habit of self abuse is much less noticeable now. His dementia is marked. Condition of his chest and heart is satisfactory but he has lost flesh considerably.

Dec. 20 No change to note. His health is feeble.

1896

Oct. 5 Demented and in feeble bodily health & condition

Dec. 31 Respiratory movement is very poor all over thin mans chest but there are no definite signs of P.P.

Discharged Relieved:- Gartloch.
Nov. 12. 97.

Colin Campbell
from Vol. III. p. 24.

1892.
Nov. 1st No change to record. Good bodily health. Mental condition unchanged.

~~Discharged~~

Transferred to Woodilee Asylum, Lenzie

Relieved

November 15th 1892.

James Miller
from Vol. III - p. 13

1892.
Dec. 13th — Never answers a question but is constantly muttering to himself. If interfered with he would readily strike. He does a little work as beating carpets &c. B.C. good.

1893
April 22nd — Continues in the same condition and in good health. He is not left alone.

June 30th — Employed a good deal in the summertime beating carpets which is about the only work he will do. He works with a gang but will not do anything alone. There is no change.

Sept. 23rd — No change. Is constantly muttering to himself or but never speaks to anybody else. B H & C. good.

Dec. 28th — No change to record.

1894
June 29th — Busy with his summer occupation - that of beating carpets. No change.

December 29th — Unchanged. B H & C. good.

1895
Dec. 20 — Unchanged. Does some work. B H & C good

1896.
Oct. 7 — Walks frequently with the coal man. He does not like any interference and is apt to strike if touched. He never answers when spoken to. Health good.

Dec. 31 — Nothing new to note here.

1897.
Dec. 27. — There is really no change to note in this man's condition. Recently he has had a sore on his finger preventing him from working, otherwise his B H & C fair.

1898
Oct. 19. — Unchanged either bodily or mentally.

1899
May 1. — Has had a touch of cold lately; mentally unchanged.

See Vol V p 594.

Larkins. Ward

from W III 1-8

Aug. 16. 1892.

1892

Dec. 12th Seems very frail; too frail to cause much trouble by his irritability. Sits in his chair all day with his head bent upon his chest. When roused always asks for a 'bit of 'baccy' to chew. Can walk with difficulty.

1893

Jan. 28th Has become much more frail and is now confined to bed. He has a bedsore on right buttock and has been placed on a water bed. Still retains energy to swear and ask for a bit of 'baccy'.

Feb. 10th The bedsore on right buttock has extended and patients' condition is getting worse.

" 14th The skin of the left heel has become black. Pillows are placed under the the knees to keep off pressure but he is so restless that and continually drawing his legs up so this is of not much avail.

" 27th The gangrene is extending and now involves the whole of the skin of the left heel. He is gradually sinking.

March 6th Patient died to-day.

Death

on

March 6th 1893.

Thomas Scobie Jenkins.

from Vol. III. p. 6.

Aug. 18th 1892.

1893	
Dec. 13th	Still has the same delusions of persecution. He is very irritable and grumbles whenever he is spoken to. B H & C. fair.
1893	
April 22nd	His conversation, expression and demeanor denote that of an ill-tempered man. He rarely speaks unless spoken to and only when pressed gives expression to his delusions of persecution
June 30th	Seldom speaks but when he does so it is in a ~~rough~~ gruff and unmannerly tone. He often backs up other patients when they make complaints. B H & C. fair.
Sept. 23rd	He amuses himself by playing draughts and reading the papers which is about all he does except grumbling. He is pale but seems in fair health.
Dec. 28th	Unchanged. B H & C fair.
1894	
June 29th	His health continues fair. He is a grumbling and discontented man, bothered more by his expression than what he says.
December 29th	There is no change to note in his condition. His health is as before.
1895	
Dec. 20	Still in one wards east. He is a sour looking man and occupies himself a little in gardens. His health is good but he is pale & sallow.
1896	
Oct. 5	Mentally sour and depressed with delusions of persecution He is in fair bodily health.
Dec. 31.	252.
1897	
Dec 28.	There is nothing new to note here.

to Vol VII: 529.

James A. Leitch.
from 466

Aug. 22nd His face was slightly drawn to the right & his tongue when projected was pushed to the left. His speech was practically absent — merely a confused mumbling, & he was only semi-conscious. Skin quite cool. Knee jerk on left side distinctly increased compared with right side. Paresis passing off gradually when seen some hours later. Temperature began to rise & on 21st was between 101° & 102°. Paresis on left side still distinct, especially about face & tongue. Very dull - keeping eyes closed - never speaking - & not understanding what was said to him. Large enema given.

To day he is in much the same state. Skin flushed & hot - temperature 102°. Able to swallow liquids.

25 Yesterday in early morning he had a number of convulsions, beginning on the left side of the body, it was said, & becoming general - severe. He had fourteen used. The urine was not called - the fits ceasing about 7. am. They began again about 9. am. & continued rapidly & severely. He was deeply unconscious - face drawn to right side slightly. Convulsion commenced by the head being strongly turned to the left side - with conjugate deviation of the eyes to the left - & then sudden & powerful twisting of the head to the right - with general rigidity of limbs - becoming rapidly ~~chronic~~ clonic - There was not much lividity.

James A. Leitch.

His pulse between the attacks was very weak, & his state appeared critical. Chloral 30 grs & Bromide 30 grs was given per rectum - & in a little the interval between the fits lengthened & finally about 10.30 they ceased. At 2.30 P.M. another occurred & the Chloral was repeated. During last night a further dose of Chloral was given. He seemed no much better - conscious, but very dazed & unable to articulate intelligently - Left side of face & body, paretic as before.

26th Seems better this morning - tho very weak. Urine has to be drawn off. Tongue very dry. He is restless & confused. Râles crepitant at bases of lungs.

Tonight he seems much weaker & breathing is very rapid & laboured & temperature is 103°. The pulse is short & soft. 120 per minute. The respirations are 60 per minute & more at times.

Ammonia & Digitalis given every 3 hours.

The pulmonary condition seems worse & increasingly so.

27th. Died this morning - apparently from exhaustion, & oedema & congestion of the lungs.

Death. Aug. 27th 1892

W. Shannon.

from ~~1891~~ 5-5-1.

Aug 30th 1892.

1892.

Dec. 12th — For the past few months there has been no change in this man's condition. He still has been the same self-complacent and self-satisfied man. He says with a smiling air that he is quite contented, that he is as happy as a king and that he has no wish to leave. He generally sits in the same seat in N° IX gallery and is one of the laziest men in Gartnavel. He eats and sleeps well. His manner is foolish, facile and self-satisfied.

1893

Jan 5th — Two days ago he was noticed to be more stupid and not to be taking his food well. When spoken to he hadn't his usual happy and contented though foolish expression but looked rather cross and disinclined to talk. Yesterday evening he was very excited, talking and shouting so that two attendants had to be constantly beside him and also because he was dangerous to the other patients. Sulphonal gr XX was given with the result that he had a good night and this morning is quieter.

" 11th — The excitement passed off in a couple of days and now he is practically back in his old contented state with the exception that he is rather more stupid.

June 30th — There has been no change to note. He says he is quite contented. He has had no attacks of excitement since the one at the beginning of the year.

Sept. 23rd — No change with the exception that he has been duller of late and less inclined to enter into conversation. He has been free from excited attacks. B.H. & C. good.

November 9th — For the past day or two he has been sometimes rather excited, demanding his liberty and saying that he doesn't want to remain a pauper etc. During these attacks his face becomes pale.

To Vol. V p 90

George J. Richmond
Rom p. 152.

1892.

Dec. 16. Has been very noisy of late & especially at nights when he talks a good deal and disturbs other patients. He reads aloud a great deal & does not like being remonstrated with. He has expressed over & over again of late his wish to die. His bodily health is fairly good. Of late he has been singularly free from asthma.

1893.

Jany 31. He is just about the same. More delusional than he was some months ago. Is very noisy at night sometimes. I believe that the noise he makes keeps away his asthma. His bodily condition is indifferent -

March 17. Reads aloud a great deal & takes great interest in political matters. Has delusions about the identity of those here and believes he might be at home. at times he becomes very excited & swears very much. He has not given expression recently to any suicidal ideas. B.O.K.C. indifferent. Free from asthma -

Apr. 11. Has been very anxious recently to get away. Says that he is a sane man, that no one has a right to keep him here. asks for money that he may go for a holiday somewhere. When told that he does not behave as a sane man he gets excited, swears &c. at times he is more pleasant, but is untrustworthy, and believes his friends have asked the Doctor to keep him here.

June 22. Been ~~very~~ rather excited recently. accuses the Doctors of tampering with his food & of interfering with him at night. Has numerous delusions & hallucinations

To Vol V p. 552.

James H. C. Macleod.
From p. 299.

1892.

Dec. 16. No change. Silent, never speaking. B.H.T.C. fair.

Dec. 28. Has has to be brought down to Ward. On account of violent conduct. He speaks none nor will he explain his conduct which consists in throwing a flower pot at an attendant breaking a picture & striking another patient.

Feb. 3. Back in Ward 5 & 6 Gallery and rather better mentally. —

March 17. Has been rather more pleasant recently, nodding & looking up when spoken to. Otherwise there is no change.

August 25. Some time ago he knocked his head against the wall once or twice during the night & since then he has slept soundly. He would give no reason for what he did, but said that he did it himself. His face was very slightly marked. Silent & reserved.

Nov. 24. Has been looking thinner recently & is more careless & less precise in his dress & appearance. His appetite is however good & he sleeps well. —

1894.

January 20. Smashed a picture in 5 & 6 Galleries a few days ago & was brought down to No 1. He has not spoken since, but smiles in rather a superior way when addressed. He gave no reason for breaking the picture & whether it was done under the influence of a delusion or not is not known. He is taking his food fairly well just now. But is rather anaemic & thin. He reads a great deal but does not take part in any amusement.

To Vol V p. 375

F. N. B. G. Beusow

Kromp. 378.

1892.

Decr. 16. Demented with periods of irritable days & restless nights when he swears as befits his profession. At other times frank & pleasant & full of delusions regarding those around him & the place he is in

1893

March 17 Just the same. B. & T.C. good.

August 24 No change.

1894.

January 20. No change. Noisy at night occasionally.

April 14. Broke a picture in the gallery about 2 mos ago. Will give no reason for it. For some time was down in No 1. but is back again to 6. Is not looking so well but is taking his food. Never speaks & little can be made of him.

August 28. Has not spoken to the writer since last note. There is no change in his mental condn. His bodily condn is rather better than it was.. ~~Here~~

(N. B.) These last 2 notes refer to Rev. Macleod.

August 28. In consequence of his noisy condn at night he was brought down to No 1, some mos ago & he has been there since. He is quiet at present but has these periods of noisy abusive excitement & then gets a little delusional. — His bodily condn is good.

Nov. 26. Is much the same. Sometimes frank & pleasant in a silly way, but often noisy & abusive & dangerous to interfere with. His bodily condn is good.

1895

April 17. Is now down in NO 1 and as a whole quieter than he was. Mentally demented Physically fairly well.

Vol
Jour. VI p. 435

William Burgess
From p. 488.

1892.

December 16. Mr Burgess has not been so well for some time. He has been more noisy than usual & his nights have been bad. There seems to be some irritation at present more than usual in the brain as he rubs his head a great deal with his hand & the shape of his head seems to have somewhat altered. The frontal eminences having become more prominent & the forehead squarer. His swallowing is also impaired, and he has to be very carefully fed in case of choking. His walking is bad & he leans a good deal to one side. His delusions are evidently of an unhappy character, though his speech is now so imperfect that what he says cannot be made out.

Decr. 20th Became much worse to-night his breathing laboured & his temperature ran up to 104.6° F. He has evidently had a congestive attack. & is very very ill

Decr. 22nd Sank slower & died to night

Cause of Death
General Paralysis
Not P.M.

William ~~Burgess~~. Milligan
/. Rom p. 572.

1893.

August 7th — On the 3rd inst Mrs Milligan left for Dumfries on trial sub on 10th - his friends wrote that he was not doing well, getting irritable & on 12th August he came back voluntarily. Since then he has fallen into his old ways & seems to be fairly happy here though at times he is uncertain in temper —

Septr. 8. — Pretty well at present. Pleasant & free of grumps & pleasantries —

Novr. 29. — Since he got back to his old room in Block 2. he has been more easily managed. He goes in there & gets his ill-temper venting as a rule however he has been less cross of late & pleasanter. He is on parole & goes about the grounds a great deal talking to many of those he meets. — B. H.T.C. good.

1894.
Jan 20. — Been very pleasant for a long time. Walks in the grounds a great deal. —

April 14. — at present i.e. to-day he would not speak to the nurse. By evening he will probably be pleasant & chatty. Has often declared that he was going away. has fixed the day & hour but has been told that it is for his good to be here & has acquiesced. Parole in the grounds and frequents the society of ladies a great deal. B. H.T.C. wonderfully good.

August 28. — Has given today one of his frequent notices that he will leave on a certain day. By which time his mind will have changed. He is irritable at times, but as a rule is pleasant. His habits are doubtful. He stows away all sorts of rubbish in his drawers. old bread, bits of wood, coal &c. He is much addicted to speaking to visitors especially ladies

Dof. VI p. 553

James McArthur
Room p. 492.

Decr 12th (cont?) deepened & he was put to bed. He was capable of being roused but denounced to speak.

Decr. 13th Dozed the greater part of the night and to-day is in the cond^n. of deep unconsciousness with very evident paralysis of the left side of the body & in a less degree of the same side of the face, The reflexes on the right side are much exaggerated & there is distinct ankle clonus Temperature this morning is 104.2°. and his face is flushed. The paralysis of the arm seems more complete than that of the leg.

Decr. 15th Temperature to-night is 102.6° F. Deeper unconscious Face less flushed. Bowels were cleared out to-day with a turpentine enema. Passes water this evening. No albumen.

Decr. 14. Bed sore formed with great rapidity. Situation over the left part of the sacrum & outwards from that. Of considerable size. Put on a water bed. No other change in his condition. Sounds of lungs reveal some pulmonary engorgement but not much. Breathing rapid but not noisy. Pulse 108 ? Temperature (evening) 101.2° F.

Decr. 16th (morning). A considerable change for the worse this morning. Up till last night it was thought he might pull thro. The unconsciousness passed off and he very soon he could be roused & yesterday he answered questions. The paralysis of the face was then evident. The paralysis of the arm & leg are less marked & are passing off. This morning however the breathing is very rapid & laboured & accompanied by a great deal of rattle. The bases of both lungs are dull & the

James McArthur
cont'd/.

pulse is weaker & more rapid over 100.
Evening. Has sinking. Breathing is very rapid & laboured &
he is perspiring freely. Temperature & rectal is 106.6° F. He
cannot be roused in the afternoon & answered in an un-
disturbed tone that he was not suffering any pain.
Later. Died 6. night at 10 p.m.
For Post mortem see
Pathological Records.

Death.

Peter Mc Currie

cont. from p 5-5-0

1892

he knows where he himself is. Temp. 101. He Passed water and bowels upon last night. Abdomen the same.

Urine - acid - 1030 - cloud of albumen - water. no sugar.

Dec. 19th The rash has extended a little and is now on the forehead. There is no infiltration of the subcutaneous tissues His temp is 101. The swelling of the abdomen has a good deal diminished and the fomentations have been stopped. He takes milk by the mouth without vomiting.

" 20th General condition better though rash has extended all over the forehead. Temp. 99°.

" 24th The erysipelatous rash is now fading after it had reached a little below the neck. It was painted with collodion but seemingly that had no effect in limiting the spread. His general condition is a good deal better. The swelling of the abdomen has all gone down and he now takes all his food by the mouth.

" 30th Practically well now as far as recent attack of erysipelas with is concerned.

1893

Jan. 16th Patient is still very resistive. He will hardly ever speak and can with difficulty be shewrried. He is got up every day and sits by the fire.

" 28th The battery was begun several days ago. A weak current has no effect but when the strongest is put on he opens his eyes, twists about, groans and often will request it to be stopped.

Feb. 22nd As he got used to the battery its temporary good effects passed off and he is now as resistive as ever with the exception that he can be got to take enough food with the spoon.

March 13th About a week ago was again attacked with erysipelas beginning at the same place. the nose. It spread down the back as far as the loins. His temp. at night was sometimes 103°. The rash has

Peter McCurrie

1893

now faded and he is well again. A few days ago he quite suddenly began again to speak and expressed himself fairly sensibly. He complained about his food and said that it didn't agree with him which was quite true as he has been suffering from swelling of the abdomen due to flatulence. He wished however to take none. After some persuasion he once or twice took it himself. This state of mind only lasted a few days and as the erysipelas faded he got more good provided both as to speech and taking of food.

June 6th For the last two and a half months he has been practically back to his old condition again with the exception that he allows himself to be spoonfed and does not require the tube. He never speaks now but lies like a log. He is however got up every day and dressed and put in a chair. His general health is poor. When his children come to see him it makes no impression on him. He takes no notice of them.

Sept. 23rd Nothing seems to make any impression on this patient: He has to be spoonfed and does not as a rule make much resistance to this. He never speaks nor gives any sign of consciousness. He is pale and flabby and in not very good health. He is up and dressed every day, but does nothing for himself.

Dec. 21st He has begun again gradually to show some improvement: the first thing noticed was that he didn't require to be spoonfed, that he was able and willing to feed himself. He seems a little brighter and talks a little but in a low voice.

To Vol V p 154.

John Shields

From p. 544.

1893.

January. 3d. On the 1st he had to be put in canvas. He got the idea that God had ordered him to go about without clothes, or at all events with only one garment and he kept undressing himself in the Ward. When he was restrained he struggled, and fought with the attendants. Tube feeding is being continued. His nights have been better of late & he has been getting 30 grs Chloral (at first with 25 grs Bromide) in his evening food. Purgatives proved almost useless & to-day his bowels have been well cleared out by an enema, tho he did his best to prevent the enema acting. His tongue is fairly clean & moist, his pulse of moderate strength, and his skin moist.

January 6th. On the 5th he passed no water and to-day the catheter has been used. He has passed into a pseudo stuporose condition. He has not spoken for some days, and has developed suicidal impulses, making endeavours to get at bars of the fire &c. He will not walk, but has to be carried to & from his room. To-day with the tube & getting a glass of whisky daily. Still with canvas dress on. He is not looking at all well to-day. His face is becoming very haggard & there are some sordes on his lips. He now sleeps in the Padded Room and spends part of the day there a man being with him always.

January 9. Sulphonal is begun to-day on account of his great resistance. He has had 50 grs to-day in his

John Shields.

food. To-day he has also shown suicidal tendencies by attempting to gouge out his eye with his fingers. He at the same time muttered away to himself, and now & then he spoke loud enough to be understood & then it was "If thine eye offend thee pluck it out". He seemed to be answering questions or holding a conversation with some being & this is understood to be God. Left to himself he will not stay in the room but tries to force his way out. Catheter passed 2ce daily. Eggs in his food to-day with 1½ pts. whisky daily. A very anxious expression on his face & strength not being very well maintained. Enema to-day & acted well.

Jany. 11. No improvement & he looks as if he would die in spite of all that can be done for him. He now has all his food peptonised & besides milk, eggs &c he has raw-beef juice. Has taken Sulphonal & has slept all night for two nights. Yesterday he had only 20 grs being fully under the influence of the drug. The unfavourable symptoms are (1) a rapid soft pulse (110 per minute) (2) a distinct dryness of the tongue which is also brownly coated (3) an increase in the anxious expression on the countenance & (4) a continuance of the stuporous condition with bladder unpulled. Catheter is still required. Canvas is still worn, with bottoned gloves.

Jan. 13. Rallied somewhat and to-day after a good night's sleep from Sulphonal he is rather stronger. He is being fed with the tube 5 times daily and the peptonised food is thought to be keeping him. Catheter

John Shields
cont'd

is still required. He speaks little, resists all that is done for him & makes determined efforts to get off the buttoned gloves

Janr. 16. To-day he is not so well. When fed by the tube he has all day rejected the food & it is evident that there is some gastric irritn. A good purge of Calomel & Rhubarb is given and partially retained. In an hour afterwards about ¼ pint of warm milk is not rejected. Strength fairly well maintained Passed water himself this morning.

Janr 17. Duty 3 times last night. Drank a glass of milk himself this morning, but said after-wards that he thought it was water, complained afterwards to nurse that he would not let him do God's will. In the forenoon he had a bottle of stout by the tube but ejected it all — .

In the afternoon he promised Dr Fellowes that he would do himself no harm if the gloves were taken off. They were accordingly re-moved. He also complained of sore-throat & on examn it was seen to be pretty acutely in-flamed. He drank in the afternoon 2 tumblers of warm milk & gargles his throat with a Chlorate of potash gargle

Janr. 18. Has taken a fair amount of milk to-day and has passed water all right. Throat still very sore. The delusions are very fixed. Says he cannot do a thing because he is judged. He says cannot understand his case because we do not know how God has judged him & how he has condemned him. He now

John Shields
cont'd/.

talks more. Considering all things he is a little better than he was.

Jany. 20. A new development in the form of a carbuncle on the chin is giving rise to anxiety. He will not allow any local application to be made to it & believes that there is no good in doing anything for him as things do not act on him in the same way as on others.

He has not been fed with the tube again & is taking some food.

January 24. Practically unchanged. Taking a fair quantity of milk himself. but will not take any other form of food. Says that he dare not, that he is judged &c. Will not put on his own clothes, nor sleep without the canvas dress. Says that it is most comfortable and that he likes it because it is so cool. Has been sleeping fairly well. Last night from 10 till 3 & from 5 to 6. The carbuncle on his chin is discharging freely and he now admits that the poultices do him good & allows of their application —.

Jany 31. Being fed with the tube again. Throat better & the small carbuncle on the chin has discharged satisfactorily. Has the same delusions, that he cannot take food, that he cannot pass water as he has been judged —.

Feby. 4. Still being fed with the tube. Getting Coleman's Meat, with strong beef tea &c &c. Delusions unchanged. Bodily cond^{n} not improved but strength being fairly well maintained. Sleeping fairly well usually about 6 hours without draught. Complains of Rheumatic pains in right arm. Still in Canvas.

(over)

John Shields
cont.

Feb. 22. Still fed 3rd daily with the tube. but taking some food himself also. This he does not wish the doctor to know, so he is being tube fed still & is gaining in strength. His mental condition is unchanged though he is not so miserable & is sleeping much better. He is still in the padded room & still has on a strong dress. That he will not dispense with & till he is stronger he is humoured. —

March 3. Taking some food, but still being tube fed at irregular intervals. Bodily considerably better, mentally the same. Cannot be induced to put off the canvas & put on the ordinary clothes. nor will he keep out of the padded room. His delusions remain the same & he believes that the milk & biscuits are tampered with —

March 17. Little change. He has now on his own clothes and is in the day Room with the other patients. He was compelled to do this & does not like it. He says he will be judged for it & will be heavily punished for disobeying God's orders. Still fed with the tube though taking a little food himself. No practical improvement in his mental condition but bodily he is a little stronger —

April 11. Been pretty continuously fed ~~with~~ by the tube since last note, but generally has been much worse since the 2nd inst. He then began to refuse to keep on his clothes, & became very destructive to his underclothing. All this was - he said -, in obedience to God's command & having been

John Shields

judges he has to accept the judgment. During the night also he became destructive to the bed clothing, and refused to lie down, but stood up, praying to God & quoting Scripture. For about a week he has almost entirely refused to answer questions, and he has become depraved in his habits, having been detected drinking his own urine. He says he is forbidden to pass water into a chamber, allows it to dribble away and wets his bed & the floor persistently. He refuses to walk, has to be carried from his room to the chair. &c. He has now on Canvas and will not allow any thing else to remain on. Withal he has some acuteness. E.g. When told that he would have to pay for all he destroyed, he thought a little & then said. "Well you had better give me another attendant to myself to keep me from tearing. It will be cheaper that way". He denies most emphatically that he can stop from doing these things. The commands are on him & he must obey.

April 21. The endeavour to arrive at a clear understanding of the nature of this man malady have not been successful, & the phase through which he is passing just now increases the difficulty. Up tree this morning he remained very ill mentally. Yesterday he was in seclusion for 6 hours on account of excitement & violence directed against others. When in his room with an attendant he would not leave him alone, but kicked him, bit him and endeavoured to do him as much injury as possible.

Jof. 600

Thomas Frew

From p. 489.

1893.

May 30.	Just the same. Bedridden & with all the reflexes, superficial & deep, exaggerated. ankle clonus marked — He is fairly quiet, picking away at things, but is not very destructive —
July 22.	Has been more destructive of late & very restless. Put on Sulphonal in 15 gr doses 2ce daily. No practical change in his condn.
August 25.	Put on a water-bed some time ago. his skin having threatened to break. No change
Septr. 15.	Been noisy of late at nights & has had Paraldehyde in 3ij doses with advantage.
1894.	
January 20.	Very little change. Bedridden entirely. Restless at times & noisy at nights. —
Februay 20.	Getting thinner. Considerable contraction of tendons has taken place & his legs are now drawn up. —
April 14	Getting weaker but very slowly. urine quite lost & must be drawn. Waiting for death.
June 12th	He lingered on much longer than was expected but died to-day.

Death on June 12th 1894

Cause of Death. General Paralysis

For Post-Mortem vide Pathological Register p 219.

William Primrose

From p. 94.

1893.

August 7th. 1894. Slightly demented & very facile. Stout & in good health.

Janu. 20 Just the same. Pleasant & gentlemanly always. Stouter than he was; but unable to take much exercise.

August 28. Continues the same. Gives many evidences of facility such as by asking the same question & being easily put off with a evasive answer. He is not able to walk much but is in good bodily condⁿ

1895.

Janu. 11th Shows a considerable degree of facility, and does not now ask to get away. He is becoming rather obese & is not able to take much exercise. He is always pleasant & polite —

September 30th His health is good and there is no mental change to report.

1896

March 31st He has been troubled lately with his old enemy. lumbago for which he has a great belief in a belladonna plaster. His mental state is one of greater facility and he hardly ever asks to get away. He reads the papers and takes an interest in what goes on outside but in conversation it can easily be seen that he is mildly demented.

September 30th Throughout the summer he has kept pretty well but he finds great difficulty in walking and requires some assistance. He is always pleasant and smiling.

To Vol VIII p 435.

David J. Handyside
Diomp. 493

1853.

May 30.	a considerable change has come over this patients mental condn. within the last few weeks & this change it is feared depends on a change for the worse in his bodily health. He has from being rebellant sullen & obstinate become pleasant & talkative & very agreable, answering questns. smiling & making remarks. about a fortnight ago, he was feverish at night, his temperature being over 1000. He has been noticed to be becoming much thinner, and to be ill-looking. He refuses to allow any examinn of his chest to be made & it is not insisted on. but it is feared that his lungs are affected. He is humoured in his diet as much as possible & induced to eat & drink as much as possible.	ap.
June 18th	He steadily got worse and died this morning. His lungs were examined some days ago & found extensively diseased. His mental disposition changed a good deal & he became talkative & pleasant. seeing his father & sister & being nice to them. The end came rather suddenly. there being a fresh access of pleurisy.	

Death. no P. Mx.

Phthisis Pulmonalis

John Shields
Room 596.

Ap. 21. (cont?) When feeding him he made attempts to get at the window to break them, and said that he did not wish to hurt himself. He was super commanded to break the window & had to obey. All last week he was then excited, singing psalms a great deal, kneeling down on the ground & kissing it and at night when not asleep standing with his face pressed against the wall of the padded room. He refused, tho' he was abs olutely compelled, to pass water & several times the catheter was used. He had to be carried from & to his room and would do nothing for himself.

Last night he slept fairly well having had 40 gr Sulphonal yesterday at mid. Day - This morning there is a great change in his condition. He said to the attendant that he wished his own clothes, a dress shirt &c, that he was now quite well, that his atonement had been accepted that punishment was now done &c. He took breakfast well & heartily, afterwards writing to his brother, declaring that he was now well, asking for several of his friends, and wishing to be taken away to-morrow. When the Doctor entered the Ward he came forward smiling asked that he might have a bath &c, & repeated the statement that his punishment was now at an end, &c. He would give no more detailed statement. Since then he has been out walking in the grounds, has taken some beef-tea &c.

a satisfactory explanation of this sudden change.

John Shields

is not easy to find, but it seems to the writer that there is a strong element of sexual perversion in the case & that the relief from the punishment has something to do with self-abuse. For some days while very ill about a month ago, he endeavoured to interfere with himself, but he has never been detected actually practising self abuse —.

In the meantime he is keen family news & the change is a most welcome one —.

May 9th Continues very well, giving expression to no delusions, taking his food well, conversing rationally & generally doing well. In over a few things is there anything abnormal noticed. Quiet. He reads none, reads at no games, and yet says that he does not find the time hang at all heavily on his hands. Pressed to say what he thinks about all day, he smiles & simply shakes his head. Second. He maintains that there never was much wrong with him & that although he was ill, yet he is now well, & we have no reason to be suspicious of him. Third For some reason he declines to sleep out of the Padded Room, saying that it is very comfortable & that he prefers it —.

May 30. Remains fairly well, and wonderfully sensible. But he still believes in his old delusions & in answer to a question the other day he said "that when the fire had not been put on him." He takes little interest in what goes on but has been induced to come out now & then to the Cricket field.

John Shields

1893.

June 20. Gone on 28 days leave to stay at Lees. He has been very well for some time. Better than at last note. He has taken more interest in things and has had parole of the grounds ——.

July 22 Returned some days ago & gave a favourable impression of his well-being to D Yellowlees. He left the same day having been granted six

1894. months probation —

January 19. Was brought back to the asylum by D. Orr, having become depressed. It seems that during the time he has been away he has had several slight relapses, but these have quickly passed off. On admission ~~yesterday~~ by D. Orr he is dull, speaking but little, but saying that he is well & that he need not have been brought back here. In the evening he took no tea, but would give no reason for refusing it. His looks were, being stout & ruddy.

Jan. 20. Slept little last night, but took some breakfast this morning. Is just the same, dull, disinclined to talk, but civil enough.

Jan. 22. much more depressed this morning, and has taken little food for 2 days. 2 glasses of milk & ½ slice of bread yesterday. Will hardly speak, but stands in the hallway in a despondent attitude his head hanging down.

January 24th Fed on evening of 22nd & 3rd daily since. He is becoming mentally worse, refuses to sit down, but stands about the Ward. His hands are blue & cold & his circulation languid. He speaks very little, does not resist feeding & seems to know all that is said to him. Gives no reason for refusing his food

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