**New case book series: females, vol 5**

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HB13/5/153



o West
Vol. V.

(Volume completed)

Unfinished Cases carried on to later Volumes.

1922:
all carried forward.

Black Euphemia
Miller, Margaret Anderson or
Moir, Mary Ann
Peskett, Mary Jane
Sheriff, Eliza Adam
Shyre, Hannah. (fr N) transferred to Hamet.
Watson, Margaret White
(~~Wilcox~~, ~~Mary Ann Paterson Howe or~~) Read XXV
Young Martha

1924 Aug 5.

12. Akitt, Margaret McKelvie. ✓

322 Aitchison, Jessie Watson ✓

380 Atkinson M. C. (Vol) ✓

B

8. Black, Mary. ✓

64 Bryson n. O'neil. Helen ✓

174 Bain Jessie ✓

178 Black Agnes. ✓

300 Bennet Elz: Stewart Dalgleish ✓

406. Brownlie Janet. ✓

420. Black Euphemia. Ja Vol VIII p252

440. Birk mc Laren Elizabeth. ✓

4444 Bryson, Jeannie Jameson or. ✓

579. Brown. Jane Hastings or ✓

✓

C D E F G H J K L M Mc N O P R S T U V W Y Z

9. 54. Crawford, Isabella Brown, or. (b).
72 Claremont, Marianne Ewing or Mc Neill Hamilton or
126 Cameron, Jessie.
194 Cochran - Ann Boyd Smith or -
213 Cameron - Margt Nicol or
242. Clark. Mary.
252. Clunkscales, Rachel Stobie.
246. Cameron, Christina McTavish or
288 Campbell. Emily.
292 Campbell. Jeanie
472 Cranstoun. Elizabeth Paterson
498 Campbell. Mary.

1873

C D E F G H J K L M Mc N O P R S T U V W Y Z

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236 Duncan, Margaret Crawford, ✓
318. Dunlop. Joan Walker — ✓
587. Davidson Marg Nimmo &c ✓

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334. Ferguson, Lindsay Lusan or Glass.

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W.H.

E.H.

W.H. 86. Gardiner, Jane. ✓

E.H. 102 Gorman, Mina. ✓

138 Gordon, Grace McCallum or. also at H. 572. ✓

264. Graham, Jane McCall, or ✓

394 Gilchrist, Jessie Henderson ✓

572. Gordon, Grace McCallum or. ✓

✓3

✓

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2. Haigh, Jane Russell Miller, or, ✓
24. Hall, Isabella Catherine. ✓
32. Hay, Rachel. ✓
20. Hazelton, Johnetta Phoebe, ✓
378 Henderson, Margaret Ure ✓

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344 Johnson, Margaret Ditchie or

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E. H.

28. Keen, Annie.

W.H. 204. Kinloch, Catherine Small

E.H. 270 King, Sarah (Readmission begins page 390).

400 Kay, Margaret

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E.H.

E.H. 110. Lindsay, Annie Watt or

486. Liddell, Flora Campbell

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E.H.

E.A.

E.H.

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| | 180 | Mitchell. Margaret Anne | | ✓ |
| E.H. | 274 | Murray, Ann Erskine or | | ✓ |
| E.H. | 296 | Moir, Euphemia Watson | | ✓ |
| | 304 | Melross, Margaret - Dalziel | | ✓ |
| | 466 | Motion, Jessie Oswald | | ✓ |
| | 576. | Miller. Margaret Anderson or | G.W.M. P568 | |
| | 590 | Moir Mary Ann | G.W.M. P557 | |

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158. McThail Elizabeth
134. McCalkie, annie S.
314. Macdonald, mary Maclean.
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382. McDonish, MacGregor Christina
414. McNish. Watt. Margaret.
434. Macdougall, Jane Knox or
577. McLaren. Christina. from Oct. 10.

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EH. 114 Niobet, Ellen
284 Nairne, Margaret J. (Doe.)
454 Nunn Jane Ann.

E. H.

E.H. 300 O'Neil, Jane McHaffie or

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WH. 92. Peskett, Mary Jane. t.l. VIII p. 894
150 Paul - Sa Kilgour Ross.
96 Paterson, Wm Mary
366. Preston, Elizabeth Snowdon.

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216. Robertson, Mary Ruperton or ✓
226 Reid, Robina ✓
326. Rowe. Jane Laurie or, ✓
348 Robertson, Elizabeth Lennox or, ✓

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60 Wyllie, Wilhelmina Duston or. ✓
68 Wright, Marion Hoan. ✓
164. Watt. Elizabeth allan or, ✓
168 White Isabella Burns. ✓
187. White, Margt. Paterson Hong or. Reg'dm. xxv 552
260. Watson, Jessie ✓
338 Watson, Margaret White 2 Vol VI p 523
354 Wallace, agnes — . Readmitted Vol XIV p 235
444 Watt. margaret Mc Neil or. ✓
424 White, Bethea Readmitted Vol XII p 266
430 Wylie, Jane ✓
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476. Welster. Theresa Speers or. ✓
504. Wilson, Wilhelmina Jane ✓
589 Wallace Sophia Margaret 2 Vol VI p 550

✓

521 ~~Watson Margaret White Dead~~
White (v above)

W
Y
Z

374. — Young, Martha. to Vol VIII p. 473.

Y

Z

Jane Russell Miller or Haigh.
Admitted. May. 21st. 1892
Vol. 640. Sandy. Cert. Justices

This patient is 62 years of age, and has been a widow for the last seven years. She used to live in Gourock, but since her husband's death she has resided in the Bromhill home for Incurables, & she was examined there, & sent on to the Asylum. She is said to have been insane for six weeks. & it is her first attack. She is not epileptic or dangerous to others, but is suicidal, and at the time she drank some Liquor Ammoniae, about a month ago, & was very ill in consequence.

There is no H.P. stated.

I. Medical Certificates mention - "Her general appearance, incoherent talking: Labouring under extreme excitement, very delusive, & suicidal tendency. Sleepless, restless & suicidal."

II. "wild looking & excited. Talks very much, with re-iterations about her bodily condition. Says that the half of her head is either eaten away or as useless as tissue paper. Spoke to me about putting an end to it"

Physically the condition of this patient is very poor. She is much affected with rheumatoid arthritis, in the phalangeal joints, wrists & knees, & her general nutrition is unsatisfactory.

At the apex of the heart & for a little distance above that, & also slightly towards the axilla there is heard a musical rough murmur, systolic in time. It is not loud. There is nothing else abnormal in the sounds of the heart or its size.

It is thought that the mitral valve is thickened.

Jane Russell Miller a Waigh

Her tongue is rather dirty. There is nothing abnormal detected in the abdomen.
There is no sign of organic brain disease.
Mentally she is depressed, suffering from hypochondriacal melancholia, with suicidal inclinations. She dwells greatly on her own troubles, talks and thinks of nothing else. She asserts that she is hopelessly ill, that nothing can cure her, and that she would like to die. She believes her brain is softened, & 'all flaking away' - or that it is 'detached' & she feels it giving way. She places her hand on the nape of her neck & complains of 'agony' there, not pain, she insists, but 'pure agony'. She has heard a read about the brain, & talks of her 'diseased cerebellum'. She says it is all wasted away like 'shell work'.
She says that she has not slept for a long time, and that nothing will make her sleep. Her drive here has made her 'fifty times worse' having shaken up her brain so. She says she has heart disease (Quite true) - and disease in her abdomen - & venereal disease. She says she has every kind of venereal disease.
She is very restless & querulous & finds fault with everything - & is very anxious that her statements should be believed. Is not put down to imagination.
Her left knee is ankylosed partially - the result apparently of rheumatism - tho she states that is due to venereal disease. There is grating on movement of the right knee.

Jane Russell Miller a Haigh

She says she has never had health since she married thirty years ago. that she had six miscarriages, & never a living child (which I believe is true). She says the "softening of the brain" has lasted twenty years: & that it gets always worse, and the pain more excruciating - & that though she knows that suicide is wicked, & would like to bear her troubles under God's will, that she would probably end her life if an opportunity was given to her. She despises all doctor's drugs, & recounts the amount of them she has taken, & talks of them as 'poison'. She is sure nothing will do her good, or make her sleep.

Whatever may be the presumable cause of the pain she feels there is no gross disease present to account for it. The rheumatoid affection of the cervical articulations might explain it - but so far there is no evidence of this.

She eats well - occupies herself in knitting & her expression tho' far from cheerful or restful is not that of a person suffering 'agony'. Her hair is getting rather scanty on the top.

She said to the writer that the noise of the other patients was making her heart beat with terrible rapidity - Her pulse was at once felt. It was quiet & regular.

23rd. Slept all night, after 3½ℌ Paraldehyde - rather to her surprise, & disgust. She says she is for worse, & that draughts are 'not for her.

24th. Slept well with 3ii Paraldehyde.

# Jane Russell Miller a Haigh

May. 27th Has had paraldehyde - 3ii every night - has slept fairly. For ever complaining of her 'agony', & thinks & speaks of nobody but herself.

June. 1st Hypodermic injection of water into the neck, at seat of supposed pain, today. She was told it was a powerful remedy, & was made to lie down after the injection. In the evening she said that all pain around the injection for an area the size of one's hand had ceased, but that elsewhere it was far worse.

3rd. Injection of water on the other side of the neck today. In the evening she said it had done good locally, but that everywhere else she was far worse, & that it was no use trying to cure softening of the brain that way.

10th She has certainly slept both with Paraldehyde & without it. But this she indignantly denies. Her appearance is improved a little - but her mental condition is not altered.

17th Assures every morning that she is "much worse" - & yet her appearance belies this statement. She takes her food fairly well.

27th Hepentate in 12m. doses thrice daily has been tried during the last week, but with no good effect. It seemed to disorder her stomach & has been stopped.

July. 6th At present down in No. 1. & sleeping there. She knits & dances &c. & has actually played the piano & sang a comic song. Yet at morning prayers she stuffs her fingers into her ears - saying the

noise nearly kills her. Yet the 'prayers' are more musical than her singing. She makes unfounded complaints about the noise in the ward, the behaviour of the attendants &c.

July 28th. In a measure more cheerful, & looking a little stronger. But she has not lost faith in any of her hypochondriacal ideas. She does not sleep at all well, certainly, & her stomach troubles her. She has lately been put on a glass of Port wine daily.

Aug. 3rd. Calomel in ½ gr. doses was tried for a week & fulfil various indications, but was not successful. At present she is taking a mixture of Rhubarb (Tincture) & Sal Volatile, Soda, Orange & Gentian, with benefit to her digestion & foul tongue. The nurses declare that she sleeps fairly well & they make a special note of her condition nightly.

Aug. 19th. Medicine stopped. Walks in the grounds.

Sept 10th Lactophenine, Rhubarb, & Grey Powder ordered. Her tongue is often foul. We doubt a strict diet would help her, but this so far has not been given. She is sufficiently indulged. She is really a very great deal better. She is usually very cheery. She does not refer to her brain at all now. Compared with the 1st Haigh of May 21st there is a striking difference, physically & mentally.

October 21. With one part of the above note the Medical Officer in charge of this case now, cordially agrees & that is that she is sufficiently indulged. She is one of the quiet and meek & mild-looking, and well kind. She is for ever full of

Mary Black.

Admitted. May. 28th 1882.

Hy. Surety. Joanna Black. Bromlands. Milngavie.

This patient is 37 years of age - single & following no occupation. She has been more or less insane for over four years. It is her first attack. The cause is uncertain. She is not epileptic, suicidal, or dangerous.

There is no known H.P.

I Medical Certificates state: "She is very restless and excited: she is very talkative and incoherent: and she is delusive in her ideas." "She is occasionally noisy, violent, and unmanageable."

II. "Talking incoherently. Says her mother killed her father, which I know to be a delusion. For the last three years I have attended her at her home, as a person of unsound mind, and she has lately become worse."

This patient had Chorea when fourteen years of age. Five years ago she had an accident, the nature of which has yet to be ascertained. During her stay at home, while insane, she has been at times very weak & confined to bed. On examination she is found to be thin & in poor health. The left lung shows marked evidence of chronic tubercular disease.

Her appearance is suggestive of chronic Insanity. She looks weak minded - She is very restless and talkative - She says she was raped some time ago. Points to her hands, and asks me to examine them carefully - There is no rational sequence in her flow of words. Her hair is nearly quite grey. The pupils are unequal in size.

# Mary Black.

The palate is somewhat narrow and high.

29th Slept none. Restless & talkative all night.

30th. Slept all night - Temperature normal this morning. But her pulse is usually about 100 or over & her skin clammy - The temperature at night is to be recorded. She is in very poor health & in a state of subacute excitement.

June 7th. Has settled down very well & seems fairly happy. Talks a great deal, & touches on a dozen topics in one sentence, something wrong in her thoughts -

9th Coughing a good deal last night. & looking rather pale.

14th. Showed some oedema of ankles & feet two days ago & was kept in bed. No albumen in urine. It seems unlikely to be due to cardiac weakness & general debility - It is quite gone now with the rest in the recumbent position.

25th. Oedema recurring - if she does not rest a good deal.

July 29th. During the late good weather she has improved a good deal & is now stronger & stouter than she has been since admission. The oedema of the feet no longer troubles her.

Aug. 22nd. Very greatly improved, physically & mentally. She looks stout & rosy. She is in No. 4. & is quiet & pleasant, albeit forlorn at times & weak minded to a certain degree.

Sept. 10th Keeping very well

Oct. 21. Very well, but silly at times & not to be altogether trusted. Her bodily condition good

Mary Black /.

December 12. Probably as well as she will ever be. Her bodily condition is very good & she is now simply a little weak-minded with delusions of a variable & non-obtrusive character. She might now be at home quite well —.

Decr. 29th Her friends have now arranged to take her home. Since last note she has still further improved, and there is now nothing wrong with her mental health —

Feb. 28th after being on trial for 28 days she is now discharged

Recovered.

Margaret McKelvie Aikitt.
Admitted June 2nd 1892

Roth Ward.

This patient is 32 years of age, single, a Presbyterian, & of no occupation. She has lived at Burntisland for nine years lately - but for the last two or three weeks has resided at Lenzie. She has said to have been ill for "probably three weeks." It is the first attack. No cause can be assigned. She is not considered dangerous, but is said to be suicidal. This is very doubtful.
There is no D.P. stated.

I. Medical Certificates:- "Tendency to suicide - incoherency, irregular fits of violence" "Her mother informs me that she will not dress herself properly, giving no reason, and sometimes sleeps out of bed."

II. "Very impulsive & excitable. Laughs much without cause. Says that she cannot sleep, when is the case, a result of her extreme nervousness." "At times she cannot be controlled. Tried to jump out of an upper window."

The patient is a medium sized dark complexioned woman, well clothed, & healthy looking - with good face. Her teeth are good & the palate not markedly abnormal.
She is considerably deaf, especially in the left ear.
She has been under a specialist with little or no improvement for three & four years.
There is nothing abnormal detected on medical examination. It is noticed that there is a distinct growth of hair on the upper lip & chin.
The tongue is coated. The temperature normal.

Margaret McKenzie Schutt

June 3rd Her pulse is quick & short. She is believed to be due to nervous excitement. Her manner is very peculiar. She is much abstracted & seems taken up entirely with her own thoughts. She laughs to herself: gazes in a rapt manner at the air & seems to be thinking intently of something: claps her hands to her head, & presses them over her eyes; & inspects her palms & wrists very closely: shows much restlessness & sleeplessness. She takes little real interest in her surroundings. & has no notion of where she is. Her memory however is acute & she can tell to an hour how long she has been here, how many nurses & doctors she has seen.

In night she was extremely restless & began to call out loudly & to scream. On seeing her she told me that "all day they had been telling her to go to Lennie" & that she wished to catch a certain train that night. She became very excitable when rebuked for making so much noise. 3ii Paraldehyde secured sleep.

4th. When she talks her utterance is slow & exact. She seldom looks one in the face & prefers to be left alone. She seems to have auditory hallucinations.

6th. Had bath for ½ hour tonight. Very restless in the bath, laughing & talking to herself & knocking herself about & splashing the water. Slept very little last night. Quiet but restless.

7th. Much exercise & fresh air today & a bath again at night in which she was quiet.

Margaret McKechnie Aikitt

10th Very childish in manner, & mischievous. She plays with the balls of wool that other patients are knitting with. plays with her food. gathers up sticks & stones on the paths. pulls leaves and branches from the trees. does all in a restless purposeless way. She laughs much to herself. She answers questions quite correctly. When asked if she heard voices speaking to her she said. "Yes, real ones." She knows where she is now, but is quite unconcerned & says she never felt happier & better in her life.

14th Some improvement has occurred here. She sleeps better. not always requiring a draught. though two nights ago she was continually restless. She is not quite so abstracted or childish. Is taking food fairly well, though the nurses have to watch her carefully.

15th It has been learned that a love affair figured prominently in her history within the last year or two. She was engaged. but the gentlemen became concerned in a suspicious bankruptcy (that of his father & himself) & fled to America. His relatives have written several times to Miss Aikitt asking her to come to Chicago to visit them. She was to have gone this summer had her mind not given way.

When at Bournfield Miss Aikitt showed signs of mental disturbance by asking a comparative stranger to mediate in some delicate family matters of a lady friend of hers.

To page. 35.

Annie Watson.

Admitted June 6th 1872

W.H. 640. Sent. (her sister) Jemima Watson. 5 Kirkland St.

This patient is 26 years of age - single, a milliner & a Protestant. She has been insane only a few days. The cause is uncertain. It is her first attack. She is said to be suicidal, but not dangerous, & childlike. Her mother's brother died in Smithson Asylum & her mother herself has quite recently been laid up with a "stroke" of paralysis.

I. Medical Certificates —: "States that her spirit has left her, and gone to another person. Sits crying and praying. Will not dress herself or allow clothes to be put on her. Violently resists being taken into another room. Attempted to rush out of the house, shouting & crying for help. Mrs Austin (nurse) states that she (the patient) stood for two hours at a window, and said she saw people in the street, who were not present: and would not take food. Her sister states that the patient demanded a razor to cut her throat, and several times has attempted to get over the window; is violent & restrained with difficulty."

II "She is restless & excited; is incoherent in her talk & labours under the influence of delusions, such that she is about to die, and that dreadful events have been occurring around her. Her sister states that she has been very violent; & attempted to go over the window & that she refuses food & is sleepless."

The patient is a rather tall & very thin

# Annie Watson

Young woman - the features, which are fairly good, being pinched. Her expression is startled & anxious.
June 7th. There is no evidence of organic disease in her chest or elsewhere. Mammary development is very poor.
Her tongue is slightly furred. The palatal arch is very high & narrow. Her weight is 7st. 5 lbs.
On admission yesterday morning at 2. am. she was quiet, in great contrast to her previous behaviour at home.
She slept an hour and a half that morning.
& last night after 30. grs. Sulfonal she slept about five hours. She knows where she is, and on the whole seems already to have benefited by the change.
She is however emotional, in a hysterical manner, & laughs & cries by turns, in quick succession.
June 8th. Slept pretty well last night, after being out most of the day, & getting 30. grs. Sulfonal. Is more settled, tho' still emotional. Says she heard voices speaking to her & had visions, when at home, but has had none of these things since coming here.
She ran after the writer today, and asked if why her handkerchief was marked 'A. Watson'. When she said that it was in the writer's power to make her far worse than she was & begged him not to do so, began to weep in an hysterical fashion.
She is getting extra diet of milk & eggs.
10th. Sulfonal given each night & she has slept. She is more composed now. & taking plenty exercise & nourishment.
14th. Impulsive & emotional at times - & occasionally has aural hallucinations. She is a very neurotic

& hysterical subject. Sulphonal has always seemed to suit her fairly well. She takes plenty exercise, slight nourishment, & 1 pint of porter daily was ordered today.

17th. Fairly quiet in manner, but unfavourable symptoms are [illegible] continuation of aural hallucinations. [illegible]ther & sister are confined here, [illegible]voices. & got much excited [illegible] the nurses, whom she blamed [illegible] She refuses to sit in certain [illegible] account of some delusion. [illegible]ble this morning & would [illegible] the water & told him to [illegible] business.

[illegible] side of the ward. Holds always [illegible] thinks that poison is put in [illegible]gs. Other unfavourable symptoms. [illegible]d.

25th [illegible] Sleeps indifferently well & is very thin still. Admits that she entertains foolish fancies & has been behaving strangely, but her admission is apparently made so as to prevent argument, & she does not make it sincerely.

27th Aural hallucinations continue the most prominent feature of her case.

July 1st Her condition is most unfavourable just now & common symptoms are present. She has very marked delusions, arising from hallucinations. Her behaviour is at times extraordinary on account of these.

W. 51.

Miss Annie Watson
Boyce Ward
Asylum

## Annie Watson

June 7th. Young woman - the features, which are fairly good, being pinched. Her expression is startled & anxious. There is no evidence of organic disease in her chest or elsewhere. Mammary development is very poor. Her tongue is slightly furred. The palatal arch is very high & narrow. Her weight is 7st. 5 lbs. On admission yesterday morning at 2. am. she was o[ut] in great contrast to her previous bel[ief]. She slept an hour and a h[alf] & last night after 30. grs. S[ulphonal] five hours. She knows [where] while seems already to have [forgotten] She is however emotional, cri[es] & laughs & cries by turns, cri[es]

June 8th. Slept pretty well last night, after [sulphonal] day, & getting 30. grs. Sulph[onal] this still emotional. Says [nothing] to her & had visions, when at [home] had none of these things since co[me] She ran after the writer to day, an[d] her handkerchief was marked 'A. Wa[tson]' Then she said that it was in the writer's power to make her for worse than she was & begged him not to do so, & began to weep in an hysterical fashion.

She is getting extra diet of milk & eggs.

10th. Sulphonal given each night & she has slept. She is more composed now. & taking plenty exercise & nourishment.

14th. Impulsive & emotional at times - & occasionally has visual hallucinations. She is a very neurotic

Annie Watson

& hysterical subject. Sulphonal has always seemed about fairly well. She takes plenty exercise, slight nourishment, & 1 pint of porter daily was ordered today.

17th. Fairly quiet in manner, but unfavourable symptoms are present, in continuation of aural hallucinations. She believes her mother & sister are confined here, as she hears their voices. & got much excited yesterday at one of the nurses, whom she blamed for keeping them. She refuses to sit in certain chairs - probably on account of some delusion - She was rather irritable this morning & would not nod speak to the warder & told him to mind his own business.

18th. Still only walks up one side of the ward. Holds aloof from the others - thinks that poison is put in her food - & betrays other unfavourable symptoms. A letter is answered.

23rd. No progress so far. Sleeps indifferently well & is very thin still. Admits that she entertains foolish fancies & has been behaving strangely, but her admission is apparently made so as to prevent argument, & she does not make it sincerely.

27th. Aural hallucinations continue the most prominent feature of her case.

July 1st. Her condition is most unfavourable just now & common symptoms are present. She has very marked delusions, arising from hallucinations. Her behaviour is at times extraordinary on account of these.

W. 51.

Johnetta Rhoda Hazelton
Admitted June 7th 1872
Eoo Sl. Surety. Her brother in Ireland.

This patient is a voluntary inmate. She is 32 years of age - Her history is recorded as follows.
She comes of a family in which there is no H.D.
She has been ill, mentally, for about a year, or a year and a half - & has developed many curious notions & fanciful ideas. She believes that she is of very repulsive appearance, that she has no mind, is unable to do anything, and is the "only dull one of the family." Her appearance is really rather pleasant. Her face & figure being both above the average. & so far as she has opened mouth since coming here, her disposition is cheerful, & her mind active. She is an Irishwoman, & comes from Belfast - but for the last year she has been living for a year with a brother of hers in Watford, where she practises Medicine. She believes that she has got some severe trouble, about her uterus, it is supposed. A Dublin specialist, it is said, inserted a pessary. A London specialist removed it. Then Dr Savage was consulted & said there was nothing the matter with her - beyond hypochondriasis &.
Lately she has been living at Belfast, & at home - where she has been very moody & depressed - keeping aloof from the rest of the family - and moping in the house, doing nothing & refusing to speak, & saying that she was tired of life. All the efforts of her family failed to do any good.
Her brother says that she used to have two teeth in the front of her upper jaw which were a little

# Johnetta Rhoda Hazelton

notched — irregular — & that there were a great deal of her & that she dwelt on this appearance in a marked fashion so long ago as that. She was engaged to a gentleman & he made some remark about these teeth — & the matter ended in the engagement being broken off — Finally she had the teeth extracted — & false ones put in. That was a specimen of her marked self consciousness & self contemplation.

She is in good health — well made & taking appearance. Her spirits have been very good since she came here — & she has talked readily to the nurses & officials, & chatted & read — & looks perfectly sane. She insists however that her brain "is squeezed" or something else equally dreadful the matter with her.

10th: Slept more for the first two nights — but last night she slept. She continues to look very well — & it is difficult to believe that she entertains seriously the fanciful ideas about herself, that she is said to, & that she freely expresses.

14th. Sleeping fairly well now — up in Ward 8. During the day she is in Ward 4. She works in the kitchen, sews, knits, goes out a lot, is cheerful & talks & is pleasant in manner & appearance, looks in what well in mind & body, but nevertheless insists that she is not.

23rd: Writes home that she is now better, & still insists on this, but excepting for this fixed idea she seems well in every respect.

# L. P. Hazelton

July 4th Plays tennis, works, walks, reads, is a pleasant companion & the other ladies, has been down & Rothesay & out & church in Glasgow - & at present she is looking very well indeed, but her peculiar ideas regarding herself remain fixed -

Aug. 1st. went & Stirling today -

19th. Returned some days ago, looking well, but with the same fixed ideas regarding herself.

Sept 10th Had an irregular menstrual flow, profuse, latchy. This is the first time it has occurred thus irregularly. She seems to dwell on this as a certain indication that she is not well in body, just as she is sure she is not strong in mind.

October 21. Impossible to make anything out of her. Convinced that she is really very ill mentally, that she has no mind & laughs in an unbecoming way when told that no one can see anything the matter with her except herself & that it is pure imagination. Her bodily health is very good & she is very pleasant at all times.

December 12. Convinced as ever that she is mad. All her actions & words & her words apart from those relating to herself are those of a sane woman. Asks whether we think she would stay here if she were not sure that she was quite mad. Says we are all wrong & that she neither feels, acts, works or speaks like a sane woman. At present her bodily condition is good, tho she inclines to be rather pale & thin & she sleeps well. ——

1893.

February 3. Her board has been reduced to a nominal figure & she now works regularly in the Laundry. She has

Isabella Catherine Hall

Isabella Catherine Hall. 56.
Admitted 7th June 1892

Private patient. West House. She is 56 years of age & a spinster. Her brother is her only relative at 48 Sandford St. She has been peculiar for 2 or 3 years getting worse however of late and this is her first attack. It is only about 4 mos since her conduct has been such that she could be called insane. The supposed cause is doubtful but uterine trouble is an element. She has been under treatment for some time for womb. miscarriage & change of life has something to do with it. She is not epileptic suicidal, or dangerous to others. cho d.o.

Medical Certificates state (1) That she talks incoherently & in a rambling incoherent way, telling all her private matters without hesitation to me a stranger: says people call her 'Madge Wildfire' on the public roads, imagines that people follow her suspiciously, says she wears red flowers with reference to her deceased mother, is excited. For some weeks she has been much excited, and wearing out her relatives by incessant talking. Her conduct has been attracting public attention for several weeks in Ayr.

(2) Rambling, inconsequent & irrelevant conversation. Malevolent gossip. Stupid exposure of family matters & spite against innocent individuals. Her brother states that she sings offensively loudly at early morning & late night, is excitable, absurd in demeanour, has illusions of various sorts.

14th June. This lady labours under mental exaltation. Since admission she has been distinctly excited often noisy & at times very troublesome. Her habits are not all that might be desired &

Isabella Catherine Hall

cont.

at times she indulges in the most fantastic conduct, skipping about the Gallery, and dressing in a very juvenile manner. She has been sleeping in the Dormitory of the Gallery but she may have to be removed as she insists on singing songs in the very early morning & disturbs the rest of the patients. She says that she cannot keep from singing she feels so like a bird & wd like to soar away- accompanying the words by appropriate gestures- She knows that unless she keeps her singing within due limits, she will be sent to the refractory gallery may have a good effect. Her appetite is good & tho her bodily condition is meagre, yet, her being of a spare, rather gaunt habit exaggerates her comparative want of flesh.

June 28th Been perhaps rather quieter on the whole, but extremely variable, capable of behaving herself when she likes but almost continually talking & with a smartness in her talk that makes it impossible not to smile at some of her remarks. Extremely juvenile in her dress & actions at times & slightly erotic at times also. Has been sleeping pretty well of late and says she is happy enough here though she will not admit there is anything wrong with her head.

July 20th No practical change in her condition which is one of chronic simple mania without many obvious delusions. She takes off many of the other patients very well but requires a good deal of keeping in order.

Isabella Catherine Hall

cont:

1892

Oct. 14th For the last four or five days has been much more excited. Is constantly talking or singing, walking either up and down the Ward or in the airing-court. She takes off her bonnet and then puts it on again in an aimless sort of manner and sometimes loosens her dress. Three nights ago she was very restless and destructive; broke four panes of glass in her room, tumbled all her bedclothes and furniture about and drenched her pillows with water. For this she had to be sent to sleep in N: 2 and given Sulphonal. She seems to have got thinner lately and has therefore been ordered porter daily.

" 17th Is still very noisy and troublesome. Yesterday tore the curtain in the parlour; burnt her own boots, & also took off the boots of another patient and burnt them. Slept well last night and takes her food well.

Nov. 19th For the last two weeks she has been kept in N: 3, on account of her behaviour. She has been having Spon. of Bt- gr XL with Tinct: Hyoscy. and Tinct Valerian ℥ss aa but this has had very little effect. Cannabis Indica has been given instead of the latter ~~two~~ but & she is still as noisy as ever. Some of the glands at the back of her neck are enlarged this morning due to two small inflamed ulcers in that region. She is taking her food fairly well and sleeping well.

Dec. 19th On her account of her bodily health being affected by her continued excitement she has been kept in bed for the past two weeks. She remains in bed and doesn't as a rule destroy the furniture though once she tore a blanket. Her manner is the same, very foolish and incoherent, constantly talking, laughing or singing.

" 24th Her excitement continues although it varies in degree. Two mornings ago she pelted the night and the attendants with her pillows and ~~night~~ blankets and then performed a war dance in her night gown.

To p 194.

Annie Kearn.

Admitted June 10th 1882

3H E40

This patient is a single female aged 22 years living at home without occupation. She is a Roman Catholic. She has been unwell for three days, and it is her first attack. There is no known cause. She is neither epileptic, suicidal, or dangerous.

There is a distinct H.P. as one of her sisters is at present in Gartnavel, and another sister was here last summer for three months.

I. Medical Certificates bear that she is "suffering from delusions - declining to answer questions put as to her condition, giving reasons for so doing indicating that her mind is wandering. Unable to fix her attention upon any given subject - and great restlessness.

Her niece Miss T Brady tells me that she cannot sleep, declines food is excited."

II. "Is very excitable talking incoherently, does not know where she is, has delusions on various matters, such as that she is studying art. Is violent at times - refuses food - does not sleep."

The patient was very excited shortly after admission, on the evening. She is suffering from mania. Her general health & nutrition seems very good. Examination reveals nothing abnormal. She is a well made good looking girl, of fair complexion. Teeth are very good & regular. Tongue dirty. Palate and high

# Annie Kean

and narrow.

June 11th Had to be put in a single room last night between eleven & twelve. as she was very restless & noisy. After that she was quiet & slept a very little. This morning she is very restless, getting out of bed constantly. and talking continuously in a rambling incoherent manner.

14th Has slept at nights very fairly well, with Chloral & Bromide. & has been out as much as possible. She is incoherent, & restless. but seems to be getting down. She takes light fluid diet in abundance, milk & eggs &c. She is menstruating. There is a curiously well marked nystagmus in both eyes.

15th Nystagmus is said to date from an injury by a fall, when a young girl.
Tonight she is quieter & has fallen asleep naturally.

18th Became very sensible tonight, after a short period of violence & excitement, in which the nurses had to assert their superiority. She spoke rationally, tho' flippantly. but seemed very anxious to know if she had badly disgraced herself, or said anything compromising during her illness. The warder now learns that for the last six months the patient had indulged in alcohol on every opportunity, having shown a distinct craving for it. This explains her frequent mention of drinks, champagne, &c in her ramblings. & her eager swallowing of

Annie Kean.

both whisky & porter, on two occasions when it was put in her way, accidentally.

23rd. Since the acute excitement had subsided, as noted on the 18th. She was for some days very impertinent & flippant in manner - interrupting the conversation of others at every opportunity, & causing annoyance to all the other patients. Today however she is much quieter - with far less of her impudent garrulousness. She is sleeping fairly well now, without hypnotics, & taking her food well.

25th. Menstruation has occurred again - that is within 10 days of last period. Talkative, & impertinent, with a want of moral tone in her demeanor & manner.

27th. Rather more excited during the last two days, torments the elderly patients & behaves very badly in every way.

30th. During the last three days she has been as bad, if not worse than on admission - She has been noisy & mischievous, provoking the other patients, impertinent & nurses & doctors - & sleeping only with Chloral. & Sulphonal. Today she flung her shoe at a glass door & broke it. Hot baths & Sulphonal had to be given in the afternoon.

July. 4th. Noisy & dirty last night - loosing flesh rather - though taking food well.

6th. Bromide & Hyoscyamus, 20 grs & 3iss. thrice daily.

8th. Cold bath given this morning - She is a little quieter.

Dr. 41.

Rachel Hay.

Admitted June. 12th 1872

B/H. E40.

This patient is 21 years of age, single, & living at home, without special occupation - She is a Protestant. She has been insane more than twelve months - & about this time last year was admitted to Southwark - She has never been well, since first well. The cause is uncertain - She is neither epileptic, suicidal, or dangerous.

For previous notes (last year) see Vol IV p 40.

I Medical Certificates show:- "Alternate laughing & crying. No interest or seeming caring as to her surroundings."
"Had to be helped in everything, dressed & undressed. attempted to go about at various times in a half clothed condition."

II. "She says that a Mr. Murray, a friend of hers, is going to be made King of England. She does not know the day of the week, the month, or the year."

Physically this patient is in fairly good health - She is partially demented & generally foolish, restless & awkward as before.

14th Sulky nervous at times - Is in a dirty dazed silly state at other times - She is mend the same as she was when last here.

17th Not sleeping well - Restless by day & night.

27th Found 'dirty' this morning - with evidently an attack of diarrhoea -

July. 28th In W. 2. Ward. & very foolish & silly in her behaviour - & not very tidy in her habits.

# Rachel Hay.

Aug. 19th Very hysterical at times - & untidy in her ways - & always foolish & weak minded.

Oct. 21. Has been brought down to No 2. Gallery. She became very excited upstairs, running about & laughing in a foolish way. Once or 2ce she deliberately chilled herself in the Ward. — This condition has been of gradual onset & for about 6 weeks the nurses have noticed a change for the worse. She cares not apply herself to any work, but often spoils any thing that was given her to do. She also interferes with other patients pulling their hair & in other ways annoying them. Her attention to her appearance, tc has also fallen off very much & she often eat the saliva, run from her mouth & dribble over her dress.

Nov. 8. The excitement has to some extent passed away but she remains very stupid, requiring to get many things done for her. She is careless about her personal appearance & not very scrupulous in her habits —.

Dec. 12. No improvement, though less excited. She is really becoming demented & her habits are bad. She needs continual watching, and is subject to periods of impulsive action when she rushes aimlessly from one end of the Ward to the other. She pays little attention to her personal appearance. B. M. is fair.

1883.

February 3. Lapsing, it is feared, into Dementia. She is becoming very silly, laughs aimlessly, takes no interest in her own appearance & while improving in bodily ~~appearance~~ Condn. getting worse mentally

Rachel May.
/.

May 2nd. No improvement. Sleepy & chattering, cannot settle to do any work & mentally weaker. B.H.T.C. fair.

June 26. Becoming more demented. B.H.T.C. fairly good.

August 10. No improvement. Becoming demented. —.

Sept. 21. No change — . chattering & silly —

Nov. 20th. Practically unchanged except that her bodily cond^n is not quite so good as it was —.

1894

February 23. Restless at times, and careless of her appearance & habits. She is demented. Her bodily cond^n is poor & in the shape of her head & her hands there is evidence of arrested development.

June 27. She is demented & excitable at times, tending to be destructive & sleepless. Chatters a great deal. She is thin & far from strong looking.

August 21. Just the same. very restless at times. keeps thin and is in poor bodily health.

1895.

April 10. a marked salivation has been very troublesome for a long time & all remedies given have failed to have any effect on it. She moistens her fingers with the saliva & rubs it all over her and allows it to dribble on to her dress & to wet it. She has has all sorts of local astringents & also constitutl. aids to stop the excessive secretion but without effect. She is mentally demented and in a weak state of bodily health. She is hardly ever at rest but chatters to herself all day and moves restlessly about.

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Margaret McKechnie Aitken
from page 14.

June 15th.

21st. Menstruation occurred today.

23rd. The catamenia continue. She has been very restless & excitable today & last night - & very wilful - & resented the interference of the nurses very much. striking at one of them. She is not nearly so well as she was a few days ago - but probably this will pass off - in a few days.

27th. Menstruation has ceased, but she is very restless, mischievous & unsettled - & sleeping badly. Last night she sang & walked about her room till midnight, when Paraldehyde was given & she slept. Her condition just now is much as it was on admission.

30th. Has been semi-maniacal at times, very restless impulsive, destructive, throwing her boots out at the window, pulling at the plants in the room, teasing the other patients, & rushing about in a purposeless way. Very noisy at nights. Paraldehyde given every night at present. Answers the questions quietly & rationally, tho' with a foolish smiling manner when spoken to. Hot baths are being given in order to soothe her.

July 4th. Acute excitement continues - tearing her clothes - & continually restless, & noisy at times. She is looking thinner & less firm.

6th. On a course of Bromide & Hyoscyamus - 20 grs. & 3 ifs given three daily.

7th. Developed suicidal impulses today. Has endeavoured to thrust her head in the fire, & singed her hair.

Margaret McKenzie Aikitt

She was very impulsive. & left no doubt as to her suicidal desire & intent. She said she was married yesterday & was today divorced by her husband with reason & therefore she would die.

There has been a distinct erotic strain in her behaviour of late. Her habits are suspected, but there is no evidence of evil practices so far.

9th Yesterday Bromide & Hyoscy. was stopped. It has had absolutely no effect in her case. Sulphonal in 30 gr. doses night & morning was ordered, reduced today to 25 gr. bis die. Its effect is already beneficial.

14th Under Sulphonal she is quieter & sleeps well. But the good effect ceases there. The suicidal tendencies have not recurred. but there is evidence at present of aural hallucinations, erotic inclinations, & an abstracted self-contemplative mentalisation. She is also destructive to her clothing & still mischievous.

28th Seems getting worse & is thinner & in poorer condition. She has again showed suicidal tendencies & has been very impulsive, & destructive & excited.

Aug. 3rd Sulphonal with decam: she sleeps without it now & on the whole is a little less restless. But her delusions regarding marriage, divorce &c. & her peculiar abstracted self-absorbed manner & behaviour remain unchanged. Her relatives in conversation with her find that she dwells much on her old love affair, & they attribute almost entirely her illness to this cause.

She is getting Clements Meat & Malt wine at present

To page 79.

See note 9 Oct. 1894 ||

Elizabeth Thompson.

Admitted June 21st 1892

Wife of Sandy Husband. John Thompson, Main St. West Kildonan.

This patient is 41 years of age, married & engaged in house & shop work at home. Her husband is a baker. She is a Presbyterian. She has been insane for 6 days, this is the first attack. There is no known cause. She is said to have suicidal tendencies. She is not epileptic, nor dangerous to others. Her maternal uncle was insane & the cousins twice removed, on that side of the family.

I Medical Certificates - "Great mental depression with alternating excitement. Illusions of sight & hearing. Restlessness. Sleeplessness. Incoherence of conversation. General mental disturbance. Secretiveness evinced by hiding articles of no moment."

II "Her depressed melancholic condition, her incoherent & contradictory replies to the same question with the hearing of sounds which did not exist & other general indications of insanity."

The patient is a medium sized woman, slightly stout about the body - but not in good condition - & her face is pinched & pale. Eyes slightly sunken. Tongue pretty clean. False teeth in upper jaw, which were removed. Thoracic & abdominal organs seem sound. Action of heart rapid - Pulse about 116 - small & soft - She was outwardly quiet during examination, but was labouring under suppressed excitement.

Elizabeth Thompson

During the evening she became greatly excited & stamped about the room, not speaking much, but showing much excitement & anxiety in her face. She believed she was in hell & was saving herself & the others by stamping heavily all round the room. Her attention could not be arrested. She took but little notice of things around her — was preoccupied with her delusions. 3ij Paraldehyde was given at 10 p.m. as she was constantly jumping out of bed. She slept only two hours.

22nd Quiet outwardly today - but has bursts of excitement. Taking milk & eggs fairly well.
She has had 10 children, 6 of whom are dead, one from "water in the head". The rest are healthy. She has never had any serious illness or accident, has been of a quiet disposition, & according to her friends "the last person they would have thought would go out of her mind."

23rd Slept 4 hours with 3ij Paraldehyde. She is menstruating today & very excited at times, & vicious in her habits, which is wholly due to the presence of the catamenia. She collects saliva in her mouth, & spits it across it over those near her. Her bowels moved freely yesterday, after Black Draught.
1 glass of whisky ordered daily.

24th Indecent impulsive behaviour continues, coincident with profuse menstruation. She pulls at her hair & says she is covered with wool & asks the nurses to take the "wool off her".

She has also the delusion that she is dead. Taking nourishment fairly well. Paraldehyde given nightly.

27th Still very excited - talking & busily incessantly for hours at a time, restless & sleepless. & pulse keeps quick - temperature varies from normal & a degree higher - Menstruation continues but not so profusely. Last night, despite Paraldehyde in dose of 3iii she did not sleep at all. She vomited yesterday during the forenoon, & during the day nothing but milk was given - & in the evening Castor Oil - This did not act & this morning Black draught was given.

28th Today she will not stand - nor do anything & resists her food - passes everything in bed - keeps her eyes closed, & has really slept most of the day. Pulse about 110.

29th Catheter passed today - To make certain of the condition of the Bladder - 33 ounces of urine withdrawn. The abdomen is large & prominent, but beyond fat & ordinary contents no abnormality is detected - Semi-stupose state continues.

30th The same. Catheter passed again - & 30 ounces removed. Plenty nourishment is given, with patience. Has slept a good deal.

July 4th Since last note has wakened up a good deal, to her former restless state, tho' less so. Can give a coherent answer now. but soon wanders in her talk. Taking food well - but requiring Chloral & Bromide at night.

J. A. S.

Annie Kean
from 1. 30

July 9th. More noisy than ever today. The Bromide + Hyoscyamus was withdrawn. It has done no good whatever. She gets a cold bath daily, but this also has little or no effect.

14th. Reckless noisy wanton behaviour continues. She gets Sulphonal daily & is keeping in fair condition. Tho not always sleeping well, despite the drug.

Aug. 3rd. Metrorrhagia complicates her condition. Every few days much she becomes unwell — frequently. Her condition generally is not improved. Tho she sleeps fairly well. getting 25 grs. Sulphonal night & morning.

Her home life seems not to have had a good influence upon her, — it appears probable that her conduct away from home, in London, &c. was most irregular — if not altogether bad. She certainly led a fast life in London, taking much liquor. & had a love affair of dubious propriety. In all that she showed a want of moral tone & habit that is at present greatly accentuated. Ergot & Iron prescribed.

8th. Considerably quieter today & yesterday — more tidy & more inclined to work.

15th. No return of menses so far. She still takes ergot + iron & cannabis indica. Working fairly well in the kitchen. & a little better on the whole.

19th. Plastering her face with mustard, singing, her hair, in the kitchen, & so removed from there, till she can do better. Sleeping well. No menses yet.

Annie Kean.

25th. Menstruating today, after 3 weeks interval, fully. She is fairly quiet.

Sept. 3rd. Her condition fluctuates considerably. Some days she is pretty well. But yesterday she was forlorn & mischievous, & spat all over the breakfast table seemingly just to annoy the others.

= 10th. Much the same.

October 21. A distinct improvement has to be noted in this patient's condition. Of gradual onset, this improvement has been more marked during the past fortnight and has been co-incident - tho not, it is believed altogether dependant on - a period of bodily illness, sore throat with inflamed sub-maxil glands. It is thought that the effect of a blister applied to the nape of her neck some weeks ago was good. She is much more settled than she was & shows this from day to day. She knows that she has been and is state ill. but seems sincere in her wishes & desires to get better, tho there is a laxity in speaking about past times that is not quite satisfactory. She speaks very frankly about her home life, saying that for her mother she has not much affection, & that she never exercised any control over her actions which were not what they should have been. The nystagmus continues and her bodily condition is good. Tho there is a hardness about her face & a want of womanly delicacy & modesty at times. yet the nurses seem to like her and, say that she can be of very taking & pleasant manners when she likes. In her general conduct & behaviour to others there is a very marked & satisfactory improvement

To p. 143

43

Euphemia Watson Moore

Discharged Relieved Jan. 27th 1893
Readmitted March 4th 1893

Euphemia Watson Moore. 23.
Admitted - June. 25th 1872
Vk. Rate £30. Surg. Father. George Moore. School House. Kirn

This patient is a single girl, 23 3/4 years of age, a Presbyterian. & residing with her father at the School House Kirn. She was formerly a teacher at school, & for the last two years a medical student, working chiefly at the Dispensaries attached to the Royal Infirmary - at Surgery & Gynecology. She is said to have been insane for about 2 years. There was no definite "first attack", but her illness began gradually about 2 years ago. She became impulsive & erratic & disobedient, would spend hours with her Bible in her hand - & attended & took part in 'revival' meetings. She is not epileptic or dangerous, nor is she suicidal, tho' she has said she would rather "go to Heaven than to an Asylum."

There is no P.M. stated.

I - Medical Certificates. "Delusion: Under the influence of which she is wholly possessed of the idea that she is under the direct advice of God & that everything she does has his strong approval. Can talk of nothing but religious ~~matters~~ meetings & neglects all else for such meetings. Habits of life completely altered." "Her parents state her ways are all altered, that she runs away to attend meetings - visits other places & remains out at night, & all by Gods directions & that she orders from which she ought not to & does not require."

## Euphemia Watson Moore

II. "She can talk of nothing but religion and that in a peculiar way. She desires to be quite alone in order to pray all day. She is under the belief that she has direct commands from God for her conduct, although her parents order her otherwise, & no provision is made for carrying them out." "She started on a journey for a religious mission without money or other provision."

The patients bodily health seems good, though she is slightly under-nourished. Her colour is good. Features & body well formed. The teeth are irregular & the palate arched high. She is at present rather depressed, apparently at being brought to the Asylum, & weeps continuously. She is quiet & manageable.

27th Has slept poorly & cried much. Is very quiet & never volunteers any remarks - & is not readily drawn into Conversation.

July. 1st For a day or two was apt to be slightly hysterical. but she has settled down now & is really a nice helpful girl - neat & pleasant in appearance & manner - anxious to assist the nurses, & frank when spoken to. She has really not betrayed any insanity so far - but no effort has been made to sound her on her ideas yet. She sleeps in Nos.

8th Looks in capital health - Pleasant & useful - & behaving quite rationally.

July 11th Wrote a letter to her sister today. which was well expressed. but dwelling much on herself. & with towards the end a really marked degree of religiousness, considering her history & tendencies.

" 24th Keeping very well. & seems to take a more level-headed Common sense view of religion, & its relation to daily life. Though she still allows her thoughts very largely to centre around religious ideas.

Aug. 15th Usually seems very well, cheerful, & active. But once or twice at night she has been restless & praying aloud for a long time. Her association with Mrs. Crawford, who is morbidly depressed & ready to listen to ultra religious nothings calculated to do harm to both has been stopped by sending Miss Rose to No. 4. gallery.

Sept. 10th Fairly well in every way. She seems more sensible. & says she has learnt a lesson & will behave with more sense in future.

" 16th When in kitchen this morning had an attack of temper; thrown herself on the ground and cried and screamed. She was taken up to Superior and when with her she was a little exalted and declared that she must get home, that this place was killing her and that she felt a great strain on her head from living here. The latter she had expressed in a letter to her sister a few days ago.

October 22. There is a strong hysterical element in this patient's condition. She dislikes being spoken to or in any way scolded & frequently after being remonstrated with she has a paroxysm of sobbing, crying aloud, throwing herself on the floor & having no control of herself. In one of these attacks

Bp. 145 She cut herself

Eliza Napier -
Admitted. June 29th 1872.

W. H. Ebs.

This patient is a single woman - 42 years of age. She followed no occupation, but resided with her father, at Irvine. She is a Presbyterian. She has resided during the last month at Miss Baker's, 2 Queen's Crescent, a nursing home for cases of her nature. It is the second attack, & the first is said to have occurred a few months only before the present one - which has lasted 4 weeks. (Practically it is the first attack, a relapse occurring after improvement). The cause is stated to be Influenza & the Change of Life. She is not epileptic, suicidal, or dangerous. No H.P. stated.

I. Medical Certificates - "She keeps up nearly Constant incoherent mutterings. (2) She is totally unable to answer the simplest questions. (3) She cannot take care of herself in any way. (4) She cannot attend to her natural wants. (5) Requires constant care from nurses."

II. "Incoherency of speech, when awake constant muttering & making noises, refused to take food & to walk; general behaviour."

This patient has been closely confined to the house for the last month - The nurses in charge have had very great difficulty in feeding her - & report that she is getting steadily worse, & weaker. She is in wretched bodily condition, mouth & teeth foul (no teeth in upper jaw), and

Eliza Napier

her face & body thin, & her features pinched & anxious. eyes bright & restless - & an appearance of hectic at times. She is very restless, sleepless, continually apprehensive - & keeps up constant rambling talk, giving evidence of a melancholic condition of mind. Pulse weak & quick - Temperature 1° above normal in the evening.

She cries & expectorates some purulent matter, which will be reported on later, also the condition of her lungs, of which at present her restless state prevents a satisfactory examination.

30th Slept about an hour. Getting out of bed, & restless during the remainder of the night.

Laxative medicine given. Extra diet of milk & Eggs - & a glass of whisky daily ordered.

July. 1st. Chloral. 30. Bromide. 30. last night. She slept four hours. In the early part of the evening she was very much excited, in a quiet weak fashion. her expression of countenance showing great fear & anxiety.

4th Out for half an hour today, but was restless. Lay down on the ground, &. Thinks she is the cause of wickedness in others - fears she is to be burnt - Taking food much better - soup. milk. eggs - & whisky. At first she was troubled with vomiting a little.

6th: Nothing so far detected in her chest. Believes she is accused of stealing everything, & has other miserable notions - She goes down on her knees

# Eliza Napier.

& begs to be laxatived. She is very restless indeed.
Chloral & Bromide have to be given at night.

9th. To sleep in a single room meantime. She usually requires a hypnotic. Taking food well.
Very restless, with missuelle delusions, self accusation, &c.

14th. Slightly improved. Looking stronger, & has put on a little flesh. Sleeping better. & taking nourishment very well.

28th. Progress is not satisfactory. She has lately been very restless & miserable & sleeping very badly. She was tried in a single room, but did not sleep any better there. She has some delusion about her urine, & endeavours to retain it as long as possible causing herself pain & uneasiness. When she does this she becomes so restless & excited that the nurses know what is the matter & take her to the closet & persuade her to pass water, after which she is quieter & at ease. But when the urine is passing from her she becomes much alarmed & calls out "What have I done - I should not have done it." There does not seem to be any local pain. The urine is not abnormal.
On the evening of 26th. she got 3ii Chloral mm & slept well. about 7 hours. On 27th. 3ii was again given but she slept only about two hours & was restless during the rest of the night.

Aug. 3rd. This morning she was much excited & assaulted several patients, slapping their faces & knocking one old woman down. This behaviour was an extraordinary contrast to her usual timid retiring manner.

To page 77.

# Annie Watson
## from 18

July 1st Was the other day she went to the bath room & stripped herself naked, & began to shake all her clothes very carefully, thinking that they contained vermin which crawled on her skin. Yesterday she was taken to the closet, but passed nothing, but immediately on leaving the closet she wilfully defaecated in her dress. It is believed that some delusion prompted her to do this. She constantly hears voices. She listens at the wall intently & then goes away & does something unreasonable. At dinner she will seemingly listen to something, & then rise, declaring her food is poisoned &c.

4th More settled today & yesterday. Sleeping well. She has a delusion about her ovaries & always takes an opportunity of expectorating

6th. Improvement so far maintained. Wrote a pretty sensible letter to her sister today. Is working quietly - sleeping very well.

9th Walks out with voluntary & quiet patients. Keeps sensible - & looks improved physically. Her mental condition during the last two days has made a really sudden change for the better. The various hallucinations seem to have left her. She recognises that she was far from well & that she is better now.

11th. Menstruating today. Is quite composed & sensible. Working in the kitchen. Looking fresh & healthy.

July 22nd Up till 3 days ago the above noted improvement was maintained but she has since been very distinctly

Annie Watson
cont$^{d}$.

relapsed & is now, excited & delusional, hearing voices &c.
She is very impulsive & untrustworthy, and is evidently under the influence of some strong morbid ideas. The delusion about her sales a continues. The other day she broke away from some ladies with whom she was walking, rushed up to the waiter, shook him, & said he was the devil. She got very excited, refused to go away & gave utterance to some remarkable delusions about the identity of those around her. She has been sleeping badly & has had hypnotics every night.

28$^{th}$ The relapse is apparently gradually subsiding. Tho she is yet far from well. She is sleeping better.

Aug: 5$^{th}$ Not nearly so well during the last two days. Her manner has been flippant & hysterical at times, her dress untidy & she has been idle, all signs of a further relapse.

8$^{th}$ Singing & dancing nearly all day. She is getting Chloral & bromide at night.

10$^{th}$ Very far from well. excited & foolish.

15$^{th}$ Settling down again - doing a little work, dressing more tidily - & sleeping better.

22$^{nd}$ Fairly well just now - & accordingly occupied in the kitchen, ward, &c & on parole in the grounds when accompanied by Mrs Crawford.

25$^{th}$ Became ill again last night - talking & pointing at the pictures - expectorating into her clothes - laughing foolishly. She spent a very noisy night.

Sept 3$^{rd}$ Hysterical - excited in appearance - & untidy. She expectorates all over her clothes & is very fanciful & full of tricks.

J. W. H. 89.

Isabella Brown a Cranford.
Admitted. 24. July 1st. 1872
Ht 5.20.

This is a voluntary patient - who comes seeking relief from depression & apprehension - & weakness. She is married, the mother of six children, & keeps house for her husband. She has been a healthy woman always, although of an anxious disposition. Her illness has lasted about 18 months. It was then that she began to feel weak, to go off her food, and to feel unable for her ordinary duties. She consulted several doctors, but never felt any better - indeed grew worse, & became haunted with the fear that she was going out of her mind. Her family history is a healthy one. There is no bad. About that time her monthly illness became more copious - & they have continued so. They occur regularly every 4 weeks & they have not altered in any way, excepting that the flow has been excessive. This has weakened her. She has got a good deal thinner - She becomes easily worried over trifles, feels that she cannot plan, or carry out her duties, & is much depressed at times.
Physically she is a thin dried-up looking woman. She is not anaemic. At the left apical region there is slight impaired resonance, but no auscultatory signs. She has no spit, nor does she sweat at night.
At present she is to be in the Infirmary Ward, to have recumbency there, & in the Kitchen, and daily regular exercise. Extra diet ; a pint of porter.

# Isabella Brown or Crawford

July 4th. looking contentedly - seems hopeful of recovery - Ordered teaspoonful of Parrish's syrup after food.

" 9th Depressed for the two previous days, but better again today. She was prescribed yesterday a mixture, a dose thrice daily, containing M. 10 of Ext. of Hyst, & Sulph. Ferri & Tepentine.

" 14th Keeping fairly well. & looking better.

28th Depression overcomes her at times - despite gain in weight & physical improvement. She has just passed through a menstrual period - about as frequent as before - despite remedies.

Aug. 8th Confined to bed for last week with pelvic pain, feverishness & return of menstruation. She has passed clots & much fluid blood. Pain relieved by fomentations - and skin kept acting with Mindererus, with small doses of Tepentine. The Hyst mixture is withdrawn at present (the flow having ceased) and a Quinine tonic with Hydrobromic Acid & Arsenic prescribed. Her mental condition is really no better. This is the first occasion on which Her menses have occurred regularly, except once, many months ago.

10th Up now, and looking pretty well, but mentally depressed as before.

15th More cheerful at present & looking really very well. Her quinine tonic is continued.

19th Seen by Dr. M. Cameron, yesterday: who found retroversion & is to insert a pessary.

Sept. 3rd. A pessary has been inserted - tho' it does not fit very well. She is very depressed at times.

Isabella Brown v Crawford

& has expressed herself as tired of life - & as feeling worse & more dispirited. She certainly is not any better. A monthly illness is just over, which was very profuse. She was kept in bed.

10th Pessary has come out several times, but was last replaced in the semi-pectoral position. & has been well retained. Depression recurs every second day, & sometimes daily. It comes & goes She felt miserable, She does not know why, & weeps quietly. Physically she is looking decidedly better.

Sept. 30. Taken home to night by her husband at her own wish.

Discharged

Relieved

# Elizabeth Thompson

from p. 40.

July 6th. Decidedly quieter & more rational. Complains of feeling giddy & 'all in a whirl' & confused & "downcast". Does not know where she is & what has lately happened to her. She thinks she has caused the illness of those whom she sees around her.

9th. This morning she was confused again, refused food & did not seem to recognise persons & things around her. Later in the day she became much better, but again at night she was restless & confused. These attacks come on at irregular intervals. Yesterday she was wonderfully sensible & referred to the 'cloud' that seemed at times to come over her.

14th. During last few days she has not been so well again. She has been restless & confused - this sleeping fairly well.

28th. Her condition fluctuates a good deal. Some days she is wonderfully well. but that does not last long - She becomes restless & apprehensive, thinks she is very wicked - & complains of feeling confused & giddy. She is sleeping a little better - but occasionally requires Chloral & Bromide. She takes food well but still looks pale & her expression is anxious. She does very little. at times a little sewing - Progress is slow and uncertain.

Aug: 5th. Very depressed & confused - Has suicidal feelings. She eats grass if she can when outside - but her habits are otherwise good. The parade battery was given today. but did not seem suitable.

Elizabeth Thompson

Aug. 10th. Last night her face became very flushed & her skin hot after an initial rigor. Her pulse was between 140 - 150 & respirations 38 - 40. Temperature was found to be 103·4. She complained of "pain all over". On examination nothing could be detected except slight comparative dullness & absence of breath sounds at after part of right base. Mindererus Spirit (drms) was given during the night to the extent of 3vi. This morning the temperature is 99°. Skin moist & cool. Pulse is 116. but she seems better every way.

15th. Feverishness did not return. For a day & two she was more composed. more sensible. but today she is again declaring that she is most wicked. & the greatest sinner living.

22nd. Fixed delusion & depression continue. She has to be fed usually by the nurses. She is sleeping better. & has not lately been suicidal or excited. but yet there is no real improvement whatever.

Sept 3rd working in the kitchen. but very depressed.

Sept 10th. Much the same.

October 21st a very distinct improvement falls to be noted here. She is much more cheerful and has lost a good deal of the anxious expression that was formerly so marked a feature in her case. She has improved in bodily condition & has been sleeping well, taking her own food &c. In these circumstances, tho it is not recommended, no obstacle is put in the way of her husband taking her home.

Oct. 26. Discharged Relieved.

Wilhelmina Duston or Nyelle

Steamer of Pay Captain Corydon R.
Aug: 15th 1862.

Wilhelmina Duston or Wyllie. 40
Admitted 7th July 1892.

Private patient. West House. She is forty years of age married & the wife of a C. Traveller, residing at 252 Passley Road N. She has been insane about a fortnight. This is her second attack, and the supposed cause is miscarriage. She is not epileptic or suicidal but might be dangerous to others. No A.P. known.

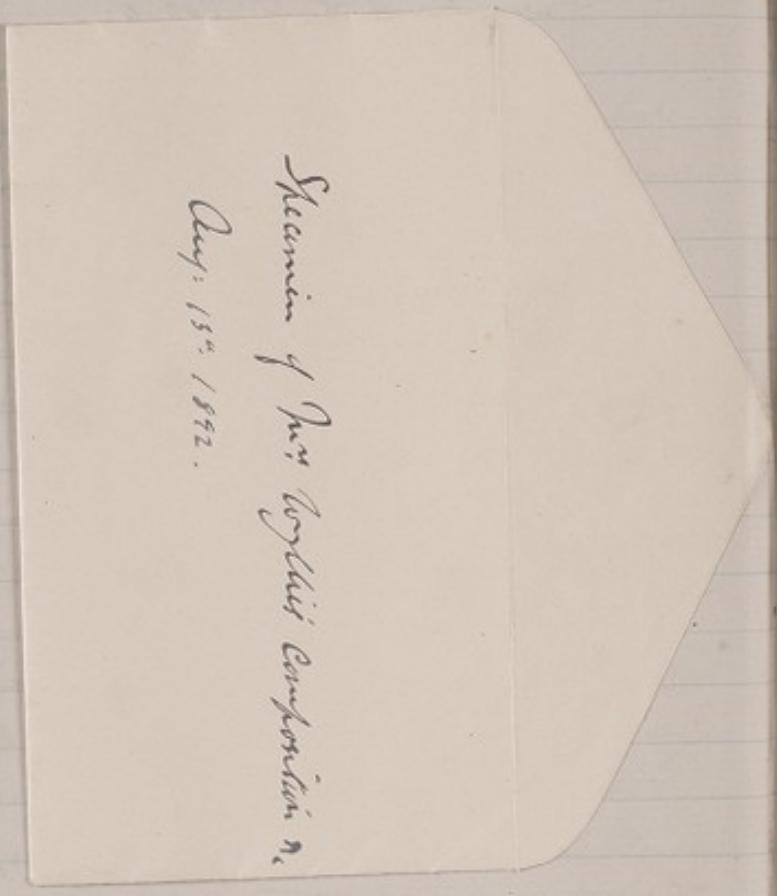
Medical Certificate bear I. That she is very excited talks incoherently, keeps her eyes shut & answers incoherently even simple questions. Cannot tell what city (She) is in at present is noisy & violent, in short is maniacal Her friends say that last night she broke a great deal of earthenware & was excited

II. She is restless & excited, talks loudly & maniacally, Imagines she is surrounded by detectives who have beaten in her head. Says her husband has plotted to put her into an asylum. Insists on stripping off her clothing to be examined for unreal malady. She uses indecent language & practices self-abuse. Was very violent last night & broke the bed-room ware. Wished to get Laudanum & destroy herself.

July 28. Progress of this case has so far not been satisfactory. On one or two occasions she showed great violence & excitement - & was mischievous & destructive. At present she is quieter & more manageable - but is still an inmate of W.3. W.

Aug. 5th. Inclined to be restless in the mornings, singing & talking. She is very foolish & believes that one of the officials is married to her. & that all men worship her. She is "man-mad" according to her nurses' opinions. At times she has been so given to

Wilhelmina Duston or Nyelle



Wilhelmina Duston or Nellie. 40
Admitted 7th July 1892.

Private patient. West House. She is forty years of age married & the wife of a C. Traveller, residing at 252 Passler Road N. She has been insane about a fortnight. This is her second attack, and the supposed cause is miscarriage. She is not epileptic or suicidal but might be dangerous to others. No A.P. known.

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II. She is restless & excited, talks loudly & maniacally, Imagines she is surrounded by detectives who have beaten in her head. Says her husband has plotted to put her into an asylum. Insists on stripping off her clothing She examined for unnatural malady. She uses indecent language & practices self-abuse. Was very violent last night & broke the bed-room ware. Wished to get Laudanum & destroy herself.

July 28. Progress of this Case has so far not been satisfactory. On one or two occasions she showed great violence & excitement - & was mischievous & destructive. At present she is quieter - & more manageable - but is still an inmate of No. 3. W.

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Wilhelmina Deuten v Boyle

destroying her clothes that canvas clothes were put on her. At present the tendency is decreasing & she wears her own garments.

Aug. 13th Very foolish & vain. and much taken up with the male sex. Sleeping & eating well.

Sept. 30th Not nearly so foolish and vain but still pres on that side. Talks sensibly. Very anxious to get home.

Discharged Recovered

on Dct. Oct. 8th 1892.

Re-admitted on march 31st 1896
vide Vol. VIII p 34.

Rachel Hay
Ward. 34.

1895

September 28th The salivation continues and is very disagreeable both for herself and to those around. She is quite demented and in poor health.

December 31st She does not now salivate so profusely but it has much diminished. Otherwise there is no change in her condition.

1896

March 31st The salivation has practically stopped without any special treatment. She is very foolish in manner and behaviour and is at times a typical example of a foolish demented creature. Her health is only moderate.

September 30th Unchanged. B M & C. poor.

1897

March 31st There has been no return of the salivation nor is there any change in her condition.

Sept. 30th Unchanged. B M & C. poor.

1898

March 29th At present she is suffering from acute bronchitis but she is a most unsatisfactory patient so she will not allow anything to be done for her nor her throat to be examined. She keeps her bed but is very restless.

Sept. 30th Unchanged. B M & C. poor.

To Vol VIII p 19.

Helen O'Neil or Benson 40
Admitted July 16th -/92

Private Patient. East House. She is forty years of age, married and the wife of John Benson, spirit dealer residing at 901 Bank St. Coatbridge. She has been insane three or four days and it is her first attack; the supposed cause being a miscarriage. She is not subject to epilepsy and is not suicidal but is dangerous to others. No H P known.

Medical certificates I. "Delusions - in that her husband is suffering from D T; that he is neglecting his business and that those in charge of the business are drinking while she is the only one taking care of all".
II. "Accuses her husband of drinking and suffering from Delirium Tremens; thinks there are thieves in the house and all are combined against her and in league against her; thinks that her shopmen are drinking and grossly neglecting their duties etc. Miscarriage eight weeks ago predisposing."

Admitted this afternoon in a sub-acutely maniacal condition. She is somewhat thin & not at all healthy looking.

July 28th No note made so far owing to illness of Officials.

The course of this patient's illness has been one of uninterrupted acute mania. She has been most troublesome. Physically her condition was very poor, & still is, tho' improved. Her tongue dirty, sordes on lips & teeth, cheeks flushed, body temp. & pulse apt & weak, menstruation profuse. Such was her condition for some time; there was also a very offensive vaginal discharge, which has been removed by free use of Carbolic syringe. The lips & finger nails showed slight cyanosis. but no examination of heart & lungs of satisfactory nature was possible. She has been continually noisy, sleepless, destructive & violent, & very obscene in her language. & indecent in her general behaviour.

# Helen O'Neil v Benson

She is dangerous in her reckless behaviour - & very difficult to manage - & has to be fed by the nurses with trouble. She usually tries & shrank about the floor & ground - & does not lie on her bed at night, unless under drugs.
Paraldehyde was useful at nights, but Sulphonal was substituted, to obtain its soothing influence during the day. & She gets at present 30 grs. night & morning - & mittal is still very excited & troublesome.

Aug: 3rd Sulphonal was increased to 40 grs twice daily. till she was well under its influence & is now being gradually diminished. To day she has had 20 grains only. She has been very difficult to feed, resisting always, believing that every time she takes food one of the her Childrens' souls goes to hell: so she says.
She curses & uses horrible language, - in the next breath repeats a prayer & the Virgin, and crosses herself. Her mouth became inflamed swollen & the lips ulcerated - with much sores - so she was fed by the nose - a tube being attached to the feeding cup - reaching to the Pharynx. Since this was done the condition of the mouth has improved. She practises self abuse & is most indecent in every way - passing everything below her & smearing her excrement everywhere.
She is less noisy under Sulphonal, & sleeps better - but is still a most degraded & troublesome case.

Helen O'Neil v Benson

It has been ascertained that she used to drink a good deal, although of late she has not indulged in it.

5th. Kept in doors for last two days. She lies on her bed. rolls about, exposing her person, & displaying great depravity & vicious habits. Her mouth is much improved. Her bowels are kept moving well.

8th. This morning she presented rather a sudden change. She took food herself, after being assured there was nothing injurious in it. She talked fairly sensibly, & behaved better. She was dressed in her own clothes. She seemed to partly realise her position. In the evening her temperature was 100·4. Her skin hot & moist. She had been excited at times during the day, but on the whole much improved. No cause for the rise in temperature has yet been discovered.
She asserted that she ought never to have been brought here.

10th. Improvement continues. She talks quietly & fairly sensibly tho' she thinks the old patients in the Infirmary are witches who wish to harm her. Takes her food well, herself. Last night she was sleeping in the Prof. Ward, but was removed to a single room, as she became so restless.
She is far from well yet, but compared with her former maniacal & degraded state the change is most striking.

Jo-p. 83.

Marion Sloan Wright 40
admitted July 19th/02.

Private Patient. East House. She is 40 years of age, a Protestant, married and wife of James Wright residing at West Sunguhar Lge. She has been insane for five days and it is her first attack, the supposed cause being weakness following Influenza. She is not subject to epilepsy but occasionally talks as if she were suicidal and is not dangerous to others. No H.P. known. Medical Certificates I "Incoherence of ideas: insane delusions: violent conduct". II "Incoherent raving and loss of memory: violent muscular action especially of arms & face: involuntary evacuation of bowels: screaming".

July 20. Patient was admitted to the East House late last night in a weak condition. She is today very excited & detailed physical examn. cannot be made but she is thin & anaemic, her lips are bitten in places and her teeth covered with sordes, her tongue is coated & fairly moist & her pulse rapid (110) soft & weak. She is continually chattering, her conversation being quite incoherent. So long as she is let alone she is not violent, but will lie fairly quiet in bed tho tossing about a good deal & now & then rising & moving to the window. a dress of check-material has therefore been put on to prevent her getting a chill. When touched or much spoken to, or interfered with in any way, she becomes very excited, shouts & screams & gets quite breathless in a few minutes. Her hair is dry & rather scanty and her skin is fairly moist.

Later. This afternoon she became much more excited, tore her dress & the bed-clothing, kicked & bit & screamed & became so bad that she had to be placed in a single room under observation. Here she became somewhat quieter to-night she has had an Enema. To-day she has taken nourishment fairly well, including 6 eggs, Whisky &c.

Marion Sloan Wright
Cont.

July 21. Was in a single room all night & excited the whole time sleeping none. To-day (morning) she is quieter but also weaker pulse being 110 & soft. She is menstruating very profusely & it seems that before admission she for some time menstruated every 2 weeks. She has taken nourishment fairly well as yet & is ordered a glass of whisky later. Kept in bed all day & has not been acutely excited. She has talking incessantly & throwing herself about in bed. To-night her cheeks are rather flushed, but her strength since morning is fairly maintained.

July. 29th It has been ascertained that her family history is by no means good - several members having showed symptoms of insanity - & there is also a suicide in the record. She has had a week of maniacal excitement, interrupted by intervals of quiet, outwardly at least - Her conversation is quite incoherent - She puts her tongue out &c, but does practically nothing for herself. She has slept very badly & has usually required full doses of Paraldehyde - She has fortunately taken nourishment & stimulants well. Her condition is a serious one - she is so thin & weak. Tongue dry, breath very foul. Aperients are regularly given as required. Pulse 110 - 115 - rather fuller, but short & soft. At times she looks quite ghastly, so thin & white is she. The excitement is abating a little at present.

Aug: 3rd. Temperature ranging from 99 - 100.5 - falling now. Restlessness extreme. Excitement intense at times. She has hallucinations of hearing -

She seems to hear her father calling her & come to her - & rushes down the ward. At times she flings herself on the floor & screams loudly. She exhausts herself then & is then quiet. At intervals she is comparatively sensible. She is not dirty & degraded in habits. She requires sandbeds at nights. She is taking food well. Some days much better than others. She gets about 2 glasses of whisky daily. Her mouth is dirty & tongue furred, but moist. She is still very haggard & ill-looking. Her bodily condition is wretched in the extreme.

5th. Voices of her relatives impel her to impulsive acts & excitement. But on the whole she is a little better & her habits are perfectly good.

8th. Fed on milk alone today. She has had diarrhoea for the last three days. The nurse reports presence of blood in some of the stools - not like the blood from haemorrhoids. The stools are offensive, and in one of them the nurse said there was yellowish matter, just like pus. She is usually dirty in consequence of the diarrhoea. Her temperature is again normal. & no cause in abdomen or elsewhere can be discovered for this condition. A dose of diarrhoea mixture is ordered occasionally. She remains very thin - very restless & incoherent, but with moments of comparative lucidity.

10th. She has had very offensive stools daily. Her bodily condition is not improving - & there is but very little betterment mentally.

To p. 81

71 Marianne Ennig or Mrs Neill Hamilton or Claremont
Admitted 2nd July.

1902.
May 6th The following cutting was taken from 10 days "Sportsman".

SCOTTISH LADY'S MYSTERIOUS DEATH IN LONDON.

On Saturday afternoon, Dr G. Danford Thomas, Coroner for Central London, held a long inquiry at the Marylebone Coroner's Court with reference to the death of Marianne Stopford Claremont, age fifty-five years, widow of Colonel G. Stopford Claremont, of the Worcestershire Regiment, lately staying at the Norfolk Hotel, South Kensington. The lady was found dead in the tunnel of the Metropolitan Railway, between Baker Street and Edgware Road, on Wednesday morning last. Mr William Beard, solicitor, of Ayr and Glasgow, deposed that the deceased belonged to Glasgow, where her sons were living. She had an independent income of £600 per annum, and generally enjoyed good health. Seven weeks ago he last saw her alive at Glasgow, when he informed him that she was not in very good health, and intended to travel to Madeira for the benefit of change. The deceased had never at any time threatened to take her life. Charles Stafford, a platelayer in the employment of the Metropolitan Railway Company, stated that on Wednesday morning, at ten minutes past twelve, he was walking through the tunnel from Baker Street to Edgware Road, and when some 570 yards in the tunnel he saw the deceased lying down by the wall of the up-line. On examining her, he found that there were injuries to the head, and that life was extinct. Detective-Inspector John Kane, of the D Division, stated that from inquiries that he had made he was able to show that the deceased was in the compartment alone, and an examination of the compartment showed that there had been no struggle. The door was one which, if a person fell out, would close of itself. It was known that on the train arriving at Baker Street Station no door was found open. There was evidence to show that the deceased fell from the train, for an examination of the tunnel showed that there were fingermarks on the wall for some nine yards, as if she had made an endeavour to save herself from falling. He considered that the deceased went to sleep, awoke, and thinking she was at the station had got up and went to go out, and finding out her mistake had put up her hands to the wall to attempt to save herself, after which she fell. There was the dust from the wall on the gloves. The Coroner said that it was very likely that the deceased fell asleep in the carriage, and, waking up suddenly and thinking she was at the station, opened the door and wanted to get out, and fell. There was an entire absence of any foul play, because deceased had her purse, umbrella, and ticket when found, and again there was no evidence to show that she was a person likely to take her life. The jury returned a verdict of accidental death.

Marianne Ewing or McNeill Hamilton or Claremont
Admitted 21st July 1892.

Private Patient. West House. She is 45 yrs of age, a widow & an Episcopalean. Resides at Broomhill Rd. Larkhall. She has been insane for 6 weeks. This is her first attack & the supposed cause is grief, disappointment & business worries. She is not epileptic, but may be suicidal & dangerous to others. Delusions &c.

Medical Certificates bear I "Great excitement & delusions about money matters. The delusions known to be unfounded. Her maid states that she is sometimes almost unmanageable. She went into a window with the roof apparently to commit suicide. She says that she & her household are in want & will starve. The fact is known to the writer"

II "Delusions Incoherent ideas about money. Fears of starvation of herself & servants. Periods of great excitement & fear of her committing suicide.

Patient was brought out this afternoon from the Benhar Hotel. about a fortnight or 3 weeks ago she was seen in consultation by Dr. Yellowlees & a nurse was sent out to her. She became worse however & it was felt that she should be put under control. She is a widow & has been 2ce married her 2nd husband having died about 15 mos ago. His death was very sudden and she then sustained a great shock being in bed for 2 mos after his death. From his aunt her 2nd husband had great money expectations & with these in view Patient had contracted a considerable amount of debt. With her husbands death these expectations ceased & the debt remained. Patient is said to have been a gay woman fond of society, admiration &c & to have drunk to the full of the pleasures of the world. Now she finds herself left

Mr Claremont

with a small income, a family of 3 boys & 2 girls. About 6 mos after her husband's death some things were noticed, which in the light of future events are to be regarded as symptoms of a beginning mental disorder. Her maid states that then she got very irritable, slept badly & took a despondent view of the situation generally. She seemed unmindful. For some time this did not go any further & till 2 mos ago she remained fairly well. Then things assumed a more definite shape. She began to have distinct delusions, such as that there was no food in the house, that her servants were starving, that she no longer had any money to pay for the education of her sons, that everything would have to be sold, that she had drawn her allowance from her agent before hand & spent it, that no one understood anything about her affairs or in what a desperate position she was placed. This depressed her very much & at the same time she grew more sleepless, had fits of crying & several times expressed a desire for death. At present her condition is simply an exaggeration of that mentioned above all last night after admission her whole talk was about her terrible situation, about the want of food & the non-payment of her servants wages. When she knew where she was she was principally grieved not because of being here but because she had no money to pay her board while here. Then she got angry at having been brought here without luggage & with such a plain frock when she has so many at home. So did the little touch of vanity come in

Mr Claremont

She is a little wizen-faced woman, with features that must have been very prepossessing once. but now she is very careworn & drawn looking. Her finger-nails are bitten to the quick and her manners lacks repose. In speech & conduct she is a perfect lady. It is elicited from her maid that patient has had attacks of acute Rheumatic fever & that when in her excited moods she becomes very blue about the lips & face.

Aug: 3rd Continues restlessly melancholic - & a prey to strange fancies about her money matters - about what the people here think of her - the manner in which she has dressed here - & so forth. She declares that they call her Miss Ewing - & say that she is not Mrs Claremont & was not Mrs Wm. Hamilton. Her rings were taken from her & she dwells on this a good deal. Her expression is puzzled & anxious. She is very restless, always walking up & down the gallery & picking at her fingers or rubbing her hands - She talks continually of herself & her affairs & takes little interest in anything else. She is sleeping a little better lately.

On 2nd occasion she had 3ss of Chloroform. It answered well the first time & gave fully six hours good sleep, without any unpleasant symptoms. It practically failed on the second occasion - & she dozed for an hour & then woke up restless & talkative. She is sleeping in No. 2. now. If a nurse sleeps with her she talks to her & excites herself. She is taking nourishment fairly well - & exercise daily.

# Mrs. Claremont.

cont:

1892

Aug: 5th Sleeping fairly well – more composed during the day. She takes her food well.
Her weight yesterday was 8 stone - 3 lbs.
She is now getting Sulfonal, 20 grs. night & morning.

13th Sulfonal stopped two days ago. She is now getting a 2 minim tonic. She is said to have gained 8 lbs since Aug. 5th. but this cannot be accepted as a fact. She is very stupid & dull just now – has lost nearly all of her restless anxiety, rubbing of hands & fingers, & she sleeps well at night, & is up in the A. dormitory; but she shows much confusion – possibly due in some measure to the sulfonal she has had.

" 30th Has been somewhat excited the last few days. She talks as usual about her being so poor and having no money to pay ordinary expenses. This morning she was much brighter owing chiefly to a visit paid her by his & her sons. She said more than once how glad she was to have seen and readily gave a long account of their doings and prospects. She looks well and has a better complexion.

Oct: 5th After a visit from her maid she became excited and began talking in her usual manner about having no money. This however passed off in a couple of days. She still has the habit of picking her finger-nails which suffer in consequence. Mentally she has improved and is much brighter and more cheerful. In manner she gives one the impression of a lady of good birth; which in fact she is.

Nov. 19th Not been sleeping so well lately which she attributes to the noise made by the trains. She objects to the sleeping-draughts as they make her so tired the next day. She has been a little restless in consequence but she easily quiets down. She takes interest in some of the other patients in the Gallery.

# Mrs Claremont.

cont.

1892.

Dec. 12th — For the last week has been more or less restless. One night at cards she seized another lady by the neck and tried to bite her because she herself was losing. Last night she was very noisy and excited, beating at her door a good part of the night. This morning she is walking about the gallery in a state of great misery because as she says her two sons have been murdered by the order of the Queen.

Dec. 14th — Was given sulphonal gr $\overline{XXX}$ which had a marked effect upon her, made her sleep all night and made her stupid next day.

" 19th — Has been very quiet for the last few days but also more stupid than she has yet been. She looks as if she were drifting into dementia. She is slow at answering questions and is now constantly picking at her finger nails, or what is left of them.

" 24th — She is full of delusions and is constantly hearing voices telling her of the fearful fate of her sons. She has to be carefully watched in consequence as she is both suicidal and dangerous. She has once or twice lifted a chair to strike another patient but has never actually done so. Tinct: Cannabis Ind. ℥ m $\overline{XX}$ & Bprom. of Pot. gr $\overline{XV}$ are given three times a day. Her general health has not been so good lately.

1893

Jan. 10th — Continues to hear voices and has many delusions. She sometimes attacks the other patients and the attendants and afterwards complains that they fight with her. She is very impudent and still sleeps in No 2. Her general health is stationary.

" 24th — Her condition ~~was~~ varies a good deal; at one time she will be quiet and pleasant, although partially demented; at other times she will be excited, destructive and dangerous. Her manner is treacherous as she is under the influence of the ~~m~~ voices she hears which evidently ~~tell~~ a constain her to do certain acts.

To p 268.

Eliza Napier
from 50

Aug: 3rd. She said she wished to get away from here, & this reason explains her conduct, as she thought those she struck were keeping her here.
The Chloroform showing no advantages, especially in her case - it has been stopped - & Paraldehyde, as a pure hypnotic substituted.
Her physical condition is decidedly improved - but there is no sign of returning mental power.

Aug. 5th. During last two days has shown greatly increased restlessness & the habit of striking people who come near her continues - & a most troublesome extent.
To control this motor restlessness & diminish her turbulent behaviour Sulphonal 20 grs night & morning is being given - & paraldehyde withdrawn.

8th. Sulphonal readily effects her; she becomes sleepy and dazed looking & less secure on her feet. Only when quite under its influence does it prevent her walking about, with an injured expression on her face, ready to strike whomsoever she meets.

10th. Screams & sobs every morning - & is violent. These paroxysms subside later in the day as a rule.

15th. The same - & dangerous to the old - frail in her ward, whom she strikes or knocks over at once if not prevented.

19th. Screaming & crying at night & morning - Begging to be taken away - Getting Paraldehyde 3ijs at night if required - sulphonal being stopped.
A history of phthisis in her family has been obtained.

## Eliza Napier

Sept 3rd Since last note has been much quieter - tho' sometimes excited. She has been more rational, has recognised that she is unwell - has been occupied in the kitchen, &c &c forth, but at the same time the improvement has not progressed beyond a certain degree.
We left ear developed a commencing haematoma - it was Mastoid. Very little effusion developed - & it is now subsiding nicely - To day she was more restless during the morning than she has been for some time, asking her head & hands to be cut off &c.
Physically she is fairly well.

" 10th Looking wonderfully well physically. But she is still at times very restless, has delusions, and seems to hear voices. Yesterday she became so excited she had to come up from the kitchen - where she was working. She had to sleep in the Infirmary ward at night. She was sure that the Metcalfes (her relatives) were being killed, & their hands cut off. Curiously enough Miss Napier had quite by accident cut another girls hand in the kitchen that day, and had been greatly grieved about it. Almost no trace of the haematoma can now be made out.

October 22. There has been some improvement here & were it not for the above reported haematoma attri & the presence of several marked developmental neuroses in her family history one would almost take a favourable view of her case. Dr. Yellowlees is of opinion that the prognosis is grave. She is full of delusions still but they are of a non fixed character & She

To p. 114

Margaret McKenzie adult
from 76

Aug. 3rd. in order to improve her general health. She has lost a good deal of flesh lately.

8th. Sulphonal had to be given today: she was so impulsive, with suicidal attempts.

13th. Very excited today - laughing much to herself - and at times getting into a partially frenzied state. She has delusions regarding the writer, thinks she is married to him &c.; also about other men whom she sees, painters or workmen &c.; She is sleeping well at night without any hypnotic, and has lately improved a little in her general appearance & health.

19th Has delusions about the officials, & the workmen about the place; thinks she is married to & divorced from, them: has hallucinations of hearing: mistakes identity of people &, asserts that people of her acquaintance & relatives have been staying here & seeing her, when such is not the case. She sleeps well now, without hypnotics - which is the only good sign about her, if it be one.

Sept. 3rd. On the whole quieter of late - except a few days ago when menstruating. Taken to the piano lately, she played, but soon became much excited.

There is no real mental improvement, tho' for the time the acuteness of the symptoms has passed off.

10th. Rather depressed at times now. Takes little interest in things. Sometimes gets excited. Says she wants away home.

Physically she looks a little stronger.

Margaret McA. Akitt

—

October 24. With the exception of a slight relapse about 10 days ago & lasting for 3 days. There has been a fairly steady though slow improvement here. During the relapse it was ascertained without a doubt that she practises self-abuse. Up to then she has been sleeping in a single room. That was stopped & much against her will she slept in the ward directly under observation. She understood that once she gave up the habit she would have privacy. She now sleeps in a private dormitory. Her bodily cond.n which was wretched now shows improvement. She says she never ate as much in her life as she does now & she says she feels very well. She reads a great deal & is very pleasant tho' just a little querulous & complaining. a failing of the farmer as evidenced in those relatives who come to see her. No delusions or hallucinations have been manifest for some time. The approach of the next menstrual period is viewed with apprehension —

Nov. 8. Continues to show a very satisfactory improvement. Sleeping, eating & thinking well & healthily. Has passed over a menstrual period safely without mental disturbance. Looks on her illness in a sensible way & is improving daily in bodily condition —.

Nov. 26th Discharged

Recovered

Re-admitted Oct. 25th 1905

Vol XIV p 35-9

Marion Sloan Wright.

from p. 70.

Aug. 10th Paraldehyde has been stopped: she sleeps at present without it, and it was thought it might be keeping up the diarrhoea. Port wine has been substituted for whisky. Today she is to be given powders of Salol & Bismuth.

13th Diarrhoea slightly better, but motions still loose when they occur. Previously yellowish & yellow-brown in colour they are now much darker from the Bismuth. Her temperature this morning is normal & she looks a little better, but is very weak, and haggard - and yet she is extremely restless and constantly getting out of bed if not watched. The skin over lower end of Sacrum is very nearly giving way. Her restlessness & the diarrhoea have made the nursing extremely difficult. No spots of any kind have yet been detected on the abdomen - & the temperature has never confirmed to any type of typhoid fever.

Today 15 grs. Sulphonal was given to control the extreme restlessness & give the nurses a chance.

15th Diarrhoea still - but more irregular. Her temperature keeps about normal now. Her husband writes that she usually was much troubled with constipation - She is very restless still - & refuses food.

19th Kino & Tr. Opii (M. xl) four times daily - & Bismuth & Salol stopped - having proved almost useless & no deodorising & antiseptic effect from the Salol has been appreciable. On examination of lungs there is impaired resonance at the right apex -

Marion Sloan Wright.

& the R. murmur is harsher, & expiration more prolonged than on left side. & an occasional sound of creaking nature is heard. but accuracy is difficult.
At right base, low down there is a small area of dullness, where numerous crackling fine & medium rales are heard. The apex posteriorly is also slightly deficient in resonance.
Last night a stool containing dark coagulated blood was passed - with a good deal of mucus.
Temperature rises a little at night - but is never above 100°. Possibility of tubercular ulceration is entertained. She is getting Brandy, & Milk & arrow root - small quantities at a time.
22nd: Diarrhoea was better till this morning - when it returned. She does not look any better.
Mentally she is confused, subject to delusions, & restless.
Left 3rd: Slightly improved. The diarrhoea still continues, to a less extent. Her diet has been increased to minced meat, a little fish, puddings, toast, tea - &c. Still improvement is uncertain & not steady or continuous. She is very restless at times - at others quiet & wonderfully sensible. She is much emaciated & does not appear, despite all, to gain in flesh or strength.
10th: Much the same. Fluctuates between slight improvement - & returns of symptoms, diarrhoea, restlessness & delusions. Often looks 'hectic'.
Temperature keeps about 100 - 99 - 98.
Catechu, Chinin. Opium given every 4 hours at present.

Jo. 99.

# Helen O'Neil a Benson
from 83

1892.

Aug: 13th Keeping quiet & well behaved & taking food well & sleeping well. She is very suspicious about the people around her & thinks they all went to learn her.

15th Last night became excited & restless again, declaring there were thieves in the house, & she attacked the nurses. She slept well in a single room, with Sulphonal. Today she complains of a pain in her left side, at the base & axillary region. Her temperature is 99·6. She was so restless an examination was fruitless.
A mustard & linseed poultice was applied.

19th Keeping quiet. Confined to bed. Blister was painful area has relieved pain. Is suspicious of the nurses & other patients, thinks her husband & children are dead, & has other delusions. But otherwise she is greatly improved bodily & mentally.

22nd Taking food well. But looks haggard yet. Confined to bed. temperature ranging from 98 to 99·5°. No pain in side & nothing detected, but pulse is usually about 100. per minute. Her mental state continues to be one of suspicion & delusional fancy, at times tending to excitement.

25th Complains of rats, cats & mice, & running about the room & up her clothes. She evidently has visual hallucinations.

Sept. 3rd Violently excited at times. Entertains the same delusions. Looks rather haggard.

Helen O'Neil a Benson

1893

Sept. 10th Sometimes very depressed, obstinately sullen & silent. Again excitable, excitable, & possibly violent.
She is sleeping fairly. & taking her food well, but her appearance & symptoms are not very encouraging.

" 26th She has been in bed for the past three days. Is in a sullen stupid mood. Before being put to bed she had to be carefully watched; in fact an attendant had to be always beside her as without warning she would rush to the fire, take off the guard and sit down on the fire. Once while the attendants were occupied cleaning the room she managed to burn her clothes but without injuring herself. She will not answer when spoken to and is emotional. Sulphonal has been stopped for the last few days as its effects on her were marked.

October 24th Remains in a very delusional condition. Insists that she is not even Benson, that her husband is dead and that she has no sons. Her impulsive suicidal desires are still present and she requires strict watching. She does not readily speak even when spoken to and has some delusion about her breath. It is of foul odour & she believes that it causes contamination. Her bodily condition is inefficient and looking at her case as a whole are forming a grave prognosis. At present she has small doses of Sulphonal with boracic acid.

Oct. 29th Seen her husband recently. Makes herself down on the floor & would not rise. Said he was not her husband. Been very dirty in her habits for some days. Rejects food if she can keeping it a long time in her mouth. No improvement.

Sops. 161.

Jane Gardiner

Jane Gardiner.
Admitted. Aug. 12th 1882

Eff. West House.

This patient is 63 years of age - single - & occupied as housekeeper to her brother. This is her first attack; it has lasted 2 months - fully coming on gradually. She is not epileptic or dangerous, but is suicidal.
No H.P. known. Her brother is a Clergyman in Springburn.

I. Medical Certificates: "Says that Satan has got dominion over her & that she is condemned to eternal punishment. She says she has been very unkind to & has ruined her brother, for which reason there is no foundation in fact. She labours under other delusions." "Her brother - Rev. John Gardiner - tells me that she has been labouring under delusions for months, and threatened suicide. The woman who looks after her tells me that today she attempted suicide by trying to hang herself - & then by jumping over the window, one storey high."

II. "She is very dull & melancholy - is a prey to morbid fancies - & constantly reproaches herself for being wicked - & unkind. She suffers from religious depression."

Physically this patient is frail, and old even for her years. Senile changes well marked. Skin loose & pale. The body however is fairly nourished. No organic visceral disease detected. She is suffering from the effects of her fall over the window - There are pretty severe contusions in region of right elbow, right hip, & the right ankle. - lower part of right leg

Jane Gardiner

cont:

1892.

& foot are much swollen & a good deal discoloured. There is an abrasion of the skin at the right elbow - & on the left shin. She is to be put in bed & in No. 2.

Aug. 13th Slept fairly well & was quiet - Her bruises pain her a good deal. There is no fracture - In night she became very restless, knocking her head against the wall, & tossing about in bed - Said she was very wicked, had ruined the whole world. that the devil was after her - Her face was anxious in expression - Her pulse quick - She was decidedly excited & suicidally inclined. Bromide 3iss given - She slept pretty well.

15. Kept in bed still - So depressed & self-reproachful as before. Talks freely of the devil.

20th Still in bed, and as depressed as before. Is afraid of mad man coming in to take her to her doom, that the latter consists of the worst way. Left ankle still swollen. Lead lotion applied.

Sept. 28. Now out of bed. Knitting work has been given to her but the progress made with it is almost nil. Her usual attitude is to sit in a chair with her head bent forwards and leaning upon her hands. Her look is distant and vacant. Often sighs heavily when spoken to. Her mental condition is not improved; and while the constant theme of her talk is that she is going to be punished the form of punishment, as she represses it, ever varies.

Nov. 14th No change. In the same depressed condition; speaks in a

# Jane Gardiner
cont:

1892.

whining tone of voice and speaks of nothing but the cries and groans of the men whom she hears murdered every night. Bodily she is frail.

Dec. 24th She still thinks people are murdered every night. So very depressed and miserable-looking in consequence. B H & C. frail.

1893

Jan. 24th Works at knitting in a feeble, half-hearted manner, sitting with bowed back and miserable countenance.

Feb. 18th No change in this patient's condition. She is in number No. 2 Galley and is fast becoming like unto the majority of patients in that Galley - an incurable chronic.

April 17th Slightly more cheerful in her countenance for the last four days although her delusions are still remain. If anything better as regards her bodily condition.

May 12th Constantly asking what is to become of her and what she is to do. Nevertheless works a little at some fine needlework. Her general health is fairly good considering all things.

July 24th No change mentally. She has got thinner and looks a miserable object. Her habits also have become bad and consequently she gives a great deal of trouble.

Sept 22nd Constantly knitting but still miserable and depressed, and having numerous delusions about people being murdered and about the great wickedness of the world.

November 8th Her health is poor and she is feeble and frail: nevertheless she is an industrious knitter. Her expression is gloomy in the extreme. Her habits are bad: she is often dirty. She requires a good deal of care and attention.

To p 98.

Annie Watson
from 52

Left 1st
1892.

Sept. 10th She has now again become quiet & sensible. & has written a nice letter to her sister. She perfectly realises the nature of her illness & is hoping just now that the attacks of excitement & hallucination will not return.

" 26th For the past week she has been very forlorn. laughing without cause and busy in her usual occupations when having a relapse.

October 7th. Brought down to No 3 on account of her destructive habits. She has delusions about the pictures in the wards & it is these she usually breaks. It would seem that her power of controlling herself is not so far gone. She knows that her neck would be bleistered if she persisted has a good effect for some days on her habits. She must certainly abuses herself & some of her ideas are very erotic. Her habits are dirty & she often deliberately eats her floor or the bed. Her general bodily health is fairly good.

Oct. 29. Has had 30 gr Sulphonal daily at present. but her destructive tendencies are as marked as ever. Even when staggering from Sulphonal she will endeavour to smash a picture. Sleeping well under the Sulphonal, but mentally the same.

Nov. 8. Sulphonal is being continued as is required. There is no improvement. Fits of destructiveness occur when she rushes at a picture to break it. These attacks are somewhat controlled by the Sulphonal which gives her sleep at night.

December 12. She has during the past few weeks been quieter, but it is probable that this is merely due to the Sulphonal she gets. There is no evidence of a more healthy condition of

Anne Watson

C.

mind. She talks fairly sensibly but is very evidently under the influence of some powerful delusion. This it is that impels her to do acts for which she is afterwards sorry. Her bodily condition is fair & she sleeps well - of course having hypnotics regularly.

1893.

February 4. There is no improvement to note. Her habits are vicious and she shows no tendency to return to healthy mentalisation. Her bodily condition is good enough, she eats fairly well, and for some time she has been sleeping better.

May 2nd. For a week she has been in Cl. 4 fairly well. Till a week ago she was in Cl. 3 suffering from chronic excitement. Suddenly she became well, was quiet & sensible & was sent to Cl. 4. Just as suddenly she has to-day relapsed, is excited, laughing & chattering, and incapable of exercising any self control. Her bodily cond.n is very poor & she eats very little. She is tried to-day in 4 & a good sleeping draught given. If she is not better to-morrow, she returns to Cl. 3.

May 27. That last little relapse lasted only a day or two & she got well, continuing well till yesterday. To-day she is somewhat excited, but not much, lacking self control & laughing a good deal. But she is not at all bad & slept well last night. Been put on the Bromides & Valerian.

June 26. Continues fairly well & is still in Cl. 4. She shows no very active mental powers, but is quiet & behaves well. Joh. 41D

Mary Jane Peskett

£60

1892

9/12/20 Miss Peskett (visitor)
The Cottage
Lansdown Road -
Engineering
W. Littlehampton.

Edward Wannop
Solicitor Littlehampton.

Sept

Oct.

Nov

18

Jan.

# Mary Jane Peskett

Re-Admitted Sept: 2nd-/92.

£40 Surety Husband, Frederick Peskett, 22 Gardiner St, Perth

1992. Previous Admission inds Vol. III p 248.

This Patient only left about seven days ago and was taken home also by her husband. They had some difficulty about house management with the result that Mrs Peskett got up early on the morning of Sept: 2nd and came to the asylum to see Dr Yellowlees, arriving about 6 in the morning. She was sent to the Lisbon Ward and detained on a certificate of emergency. Medical Certificate I "She is very rambling and incoherent in her talk. She admits having bought a number of things without having money to pay for them."

II "She is excited in manner and talks volubly and almost incessantly about trivial matters; her conversation at times is incoherent."

After admission she became very excited, singing songs and talking incessantly. She said that she had become pregnant and wished to leave the Asylum at once as Dr Yellowlees had prevented her before from having a child and she didn't wish the same to happen this time.

Sept: 5th Patient is quieter but writes innumerable letters, in some of which she expresses her delusion about being pregnant.

Oct: 18th No change to note. Is still foolish and excitable. Is very angry with her husband for keeping her here.

Nov. 19th Is constantly writing letters on any pieces of paper which she can get a hold of. In them she complains bitterly of the attendants and some of the patients. She magnifies the most trivial matters. Is as constantly working at necks and sleeves; most of them would be difficult to fit any size of foot and in design they are most fantastic. She has lately cut part of her hair which is by no means an improvement in her appearance. In conversation she is voluble and sometimes incoherent.

1893

Jan. 18th This Pt ladies condition is practically unchanged. She is very variable: sometimes pleasant though rather boisterous in her laughter.

# Mary Jane Peskett

1893

at other times sulky and unwilling to talk. She is continually writing letters of complaint very often interlarded with Scripture. Her capacity for working garments chiefly underclothing is only excelled by their marvellous shapes and sizes. Her general health is good.

Feb. 18th — A change has come over this lady's manner for the last 10 days. Instead of being talkative and cheerful and active she is silent, dull and idle. She says she is waiting for her husband to come and take her away and often complains about being shut up here.

March 20th — More cheerful and more interested in her surroundings. She has not of late been making either in word or letter her usual complaints. On the whole she is distinctly better.

May 12th — For the last month she has been making what she calls a stand out for her rights and she evidently thinks that in doing so she has the sanction and permission of the 'Most High', as she constantly quotes Scripture. This consists in refusing to go to any of the Concerts or even to Church. When pressed to go she says she ought to be at home and that this is no place for her.

July 24th — She has just returned from Stirling where she has been for a month with some of the other ladies. While there she gave some trouble as she wrote to the Provost of the town and also went into a jewellers shop & ordered several things. She is in rather boisterous spirits on her return. There is no change mentally.

Sept. 13th — Her boisterous spirits are still present though now and then they overflow and the consequence is that she becomes a little excited and ~~she~~ makes complaints of the attendants etc. Her language soon becomes incoherent and unintelligible.

# Mary Jane Peshell

1893.

November 8th — Her general health is excellent. She is very stout and eats both well and heartily. Mentally she is unchanged. Her delusion about being pregnant seems still to be present and some weeks ago she evidently thought that it was going to be verified so one afternoon she lay on a sofa for some hours expecting the event to take place. Nothing practical however occurred so she resumed her usual occupation of knitting. She still makes many complaints usually in writing. If no notice is taken she seems to forget them. Her conversation when excited is incoherent as are also some of her letters.

December 30th — She is in rather boisterous spirits just now & when so her insanity becomes well marked. She gets excited, talks in an incoherent manner & expressions delusions of persecution.

1894

March 21st — Her general health is excellent. She is very stout and eats enormously. Mentally she is unchanged. She looks upon herself as the champion of truth and delights in speaking straight out. When she does so it is with noisy vehemence and her language soon becomes an incoherent jumble.

June 28th — She is better just now than she has been for a long time. She is quiet and not nearly so talkative or obtrusive. She does not give expression to any delusion nor has she written any incoherent letters lately.

So p 189.

Mrs Mary Paterson.
Admitted. Sept. 8th 1892
£40. Surg. James Paterson, son, 43 Welbeck Cres. Yorn.

This patient is 55 years of age, married - a Protestant. She has been insane 5 weeks - & it is the first attack. Cause is unknown. She is neither epileptic, suicidal, or dangerous - No. H.P. known.

I. Medical Certificates - : "Rapid succession of unconnected ~~ideas~~ & insulated ideas, and evanescent & unconnected emotions, forgetfulness, abolition of the faculty of judgment, perpetual activity - " "Refuses food - obstinate"

II " Incoherent in answering questions, as when talking - very restless, sits with her head down, and picks at bed clothes." "Refuses to take food, tries to leave the house, offers violence when intercepted."

This patient was brought into the Asylum in a condition of extreme weakness. Her sons gave an imperfect & unsatisfactory account of her illness & previous health. They say that two months ago she was in excellent health, of mind & body - & that she has never been seriously ill in any way, nor affected mentally for more than five weeks. She has had no food for nearly two days. She is much emaciated - of a grey ghastly color - finger nails & lips blue, pulse rapid & soft. She was carried up to the ward, resisting, & offering violence in a mild way. The excitement was intense however for she is in her feeble condition.

# Mary Paterson

On examining the chest there was found on both sides in front, & imperfect resonance in patches, bronchial, & in places almost Cavernous breathing, moist râles, & on the left side a creaking sound, dueller like friction. Posteriorly there was imperfect resonance & râles in upper regions. The condition seemed to be one of scattered consolidation, breaking down, in both lungs. The temperature in the afternoon rose to 103·8. Food & stimulants were given by the nurses after great trouble.

Evening. Exceedingly weak, cold & pale, temperature falling. She lies more quietly - but seems much worse & weaker. Whisky (3ss) every two hours - & nourishment - warm bottles &c.

- 9th Found the same - less restless - very feeble. Taking food pretty well.

10th Seems a little stronger - can't that she is talking about, beef tea - milk - Tongue cracked & dry. Temperature 100·4 this morning - She has expectorated a little purulent blood stained sputum.

13th This morning is in a dying condition.

Death on Sept. 14th 1892.

~~Ste M.~~ For P.M. see Pathological Register p 160

# Jane Gardiner

cont. from p 88.

1893

December 30th — She had a whitlow lately but it soon healed. She is as depressed as ever and her general health is very poor.

1894

March 21st — No change. Sits knitting most of the day with bent back and depressed look.

May 29th — Transferred to-day to East House.

August 29th — Soon after coming to the East House she was sent down to the Cottage and she there lives a comparatively happy life. She is depressed, but not extremely so.

1895.

January 8th — Delusional thinking that she has ruined the World. But mildly so. Lives at the Cottage. No change.

April 10. — Is a little careless in her habits than been dirty once or twice Becoming feeble, but still worries out melancholy about having ruined the world &c.

July 4th — There is no change in her condition and as she has become a pauper chargeable to Barony Parish she was transferred to-day to Woodilee Asylum, Lennie.

Discharged Relieved

on

July 4th 1895.

Marion Sloan Wright.
from 82

1892.

Sept. 23rd — For the last few days has shown signs of improvement. She is much more sensible; has a normal temperature and sleeps well. She has been up for an hour in the afternoon. The diarrhoea has ceased.

October 8th. A great improvement since last note. Patient is now mentally very well & only remains to get her strength up before going home. She has improved most satisfactorily during the past month and now looks upon things in a true ~~light~~ light & her relations to her environment are correct —. She is out now every day & is fast gaining in strength & condition —.

Oct. 29. Continues mentally well & is gaining rapidly in bodily strength. Everything points to a satisfactory recovery, were it not for the strong H.P.

Nov 5 — Discharged to-day

Recovered.

Marion Sloan Wright

chor 5. Discharged

Recovered.

Maria Gorman

# Mria Gorman

Admitted Sept: 8th/92.

Z 4D  Surely Isabella Gorman, 42 Charlotte St. Stranraer.

1892

This Patient is 23 years of age, single, dressmaker by occupation and a Protestant. This is her first attack and it has lasted four days, the supposed cause being fright of being lost in the City. She is not subject to epilepsy nor is she suicidal but she is dangerous to others. No H.P. known.

Medical Certificates I "She declared that I was going and came to take her away. She is violent, tears her hair and tries to choke herself by putting her hand into the throat." Her mother says that her sister aged 25 died of convulsions.

II "Outburst of passion declaring to me that I was the Devil and herself Beelzebub, shrinking to get away from her enemies: putting her body into shapes, tearing her hair and continual —"

This patient is an unhealthy looking girl, ~~not~~ with anaemic face. Her mammary development is poor but all her organs seem normal.

She was very excited on admission and talking incoherently. She mistook Dr Adamson for the devil and her thoughts are evidently of a religious nature. She soon quieted down and slept fairly well.

Sept: 15th  Since the day after admission she has been practically in the same state. She sits in the same position for hours together; will not answer any questions; never speaks. On being asked to show her tongue she protrudes it slightly after a good deal of persuasion. Saliva dribbles from her mouth and she has to be fed with the spoon. On placing her arms they remain in any position they are put into. Her pupils are slightly dilated.

" 22nd  There is some slight improvement. Patient is not so stupid; will say 'Good morning' if first addressed; Has also been employing herself for a short time with knitting. Saliva doesn't dribble from her mouth and the sores about the gums are nearly healed.

" 26th  The improvement in this patient continues though she is still very dull. She does some work in the ward and sometimes answers when spoken to. She looks better; saliva doesn't dribble from her mouth so formerly. She sleeps well and takes her food ~~fairly~~ fairly.

Maria Gorman

October 24. Very little improvement has taken place here & neither patient's bodily nor mental condition is satisfactory. Her circulation is very languid & her extremities consequently cold & blue. Her alimentary canal is disordered, her tongue coated & her bowels sluggish. Her attention when our wants is deficient & she allows the saliva to dribble from her mouth. Peripheral sensation is dulled, the hand pricked with a pin not being drawn away, nor is the conjunctival reflex active. Knee reflex only elicited with difficulty. Mentally she is very torpid. She moves about when led in an automatic way, works sew away at the same piece of cloth for an indefinite period & requires to be fed with a spoon. Her state contrasts very markedly with that on admission when she was in a state of great or considerable excitement.

October 29. Has been getting the interrupted current regularly for some days & there has been a considerable improvement, partly due to that & partly to an improved bodily condition generally. Of her own accord she wrote a letter to her mother & she replies more briskly to questions, & does what she is asked without such a long pause between the request & its response. In short there is less torpidity of brain & body —

Novr. 9th always a little hysterical after she gets the Battery. She shouts & screams at a dreadful rate even when the current is very weak. She dictated herself the other day when having the battery. She now does things more quickly, but there is still very little anima-

Maria Gorman
1.

-ation in her manner. She looks very stupefied, her eyes being half open, her head bent, her hands hanging listlessly by her side & she standing in whatever place she has been pushed to, or moving along in a very slow, fashion.

December 12. Improving a little, and really gaining in mental acuity though very slowly & still very dull. She now answers questions more readily, though still slowly and she writes a letter now & then to her mother. She is in the Kitchen the greater part of the day and works a little. The prognosis is a little more hopeful than it was.

Decr. 30th Improvement has been going on for some time and she is now really much brighter than she was. Her friends wish to have her at home & no obstacle is put in their way.

1853,
Jany 3. Discharged

Relieved

Later. Reports from home state that she has gone on improving & may now be considered

Recovered

Janet Merkle

Janet Meikle Voluntary.

Admitted Sept. 16th-/92.

£60 Surety Her Father Robert Meikle, Clockston, Craigie nr Kilmarnock.

1892 This patient is 24 years of age and is admitted to the East House as a voluntary.
She comes from Kilmarnock and for the past few days has refused food saying she is not worthy to eat anything.
She is healthy looking, of fair complexion and light hair. She is not stoutly made but delicate both the worse of her abstinence from food.
Her menstruation has never regularly established itself. She has had no definite occupation except home work. There is no sign of depression about her: in fact the opposite as she is bright and cheerful. On referring to the subject of her not taking food she says it is simply because she has no appetite, because she can't, not because she won't. She feels quite well without food.

Sept. 19th Patient still continues to eat very little; in fact would eat nothing at all if not watched. Her person is the same. She can't. She has not been very contented, she wishes to get home and thinks it foolish for her to have come here at all.

" 24th Has lately been writing some strong letters to her friends at home expressing a wish to be taken home at once and also the opinion that she ought never to have come here, that she ought to be at home working as she is more fit to do that than some of her sisters. She has been taking her food slightly better the last few days but still not nearly enough. She does looks slightly thinner in the face since admission. She has no delusions and in manner and appearance is quiet and ladylike.

October 24. This lady is very anxious to get home. That is her continuous cry & wish that she get home. Says she would be quite well there that nothing is wrong with her &c. She is not yet taking her food at all well and her habits are not quite those of a lady. She declines taking much food and put her porridge in her pocket the other morning in order to escape taking them. She has also

Sarah Cheetham

the habit of chewing meat & then rejecting it, putting it on the floor or on her dress or into her pocket. She has no delusions, and behaves apart from that in a sensible way, working in the kitchen & in the Ward. She is not violently naturally of a cheerful disposition & cries when spoken to about her mis-doings. She has not menstruated since admission. At present Cantharis & Pulsatilla Co. is being given, as yet without obvious benefit.

October 29. Sent this to Infirmary ward to-day. Though for a few days she has been taking her food better, yet since she came here she has lost considerably in weight. She is now more reconciled to a residence here for a while & mentally seems somewhat better.

Nov. 8. Since 2nd June she went to Infirmary, no other change in her condition.

Dec. 12. Unfortunately there is little improvement to be recorded here. She is in better physical health than she was but mentally she is the same. Convinced that it is all a mistake, that we are all wrong & that it is our stupidity in not understanding how things are that is worrying her. She cannot be reasoned with & gets into a pitiful state of excitement when her condition is referred to. She keeps well, interests herself in some of the other patients & keeps her room (cell) tidy.

1893.

Jany 31. This patient seems to have only one delusion & that has reference to her food. She thinks that she ought not to eat anything & believes that in making

Janet Meikle

Letters of Cleis Meikle

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she must suffer just as much as she
ercent. She is a pleasant, kindly girl,
worker & is of great assistance to many others
in the Ward

Mch. 4. She has been giving more difficulty with her food recently. She tries in every way to escape taking it, by hiding it, by getting other patients to take her share, by pretending to be sick &c. She in-sists that her whole case is misunderstood, that we do not know what or how much she suffers &c. In other respects she is fairly well. She takes a kind & sympathetic interest in other patients, works a great deal at fancy work &c & dances with enjoyment at the concerts.

March 17. Contracted Scarlet fever, how is not quite known and is at present isolated in the Fever Hospital. The attack is proving a very mild one & no complications have yet appeared To f. 360

Sarah Ebeikle

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1893.

January 31. This patient seems to have only one delusion & that
has reference to her food. She thinks that she ought
not to eat anything & believes that in making

Janet McCrickle

her take her food we misunderstand her case entirely. She asks often that she get a chance of doing her own way & it is quite sure that she will not be well till she gets doing as she would like. She has her food at a little table away from the others & she needs watching because she would secrete some of it were she not watched. She sleeps well.

Feby. 20. There is no improvement. On many subjects she talks sensibly, but she says that she will never be well until she is allowed to go without food for some time. It is all a mistake insisting on her taking food, she says, & till the true nature of her case is understood she must suffer just as much as she is doing at present. She is a pleasant, kindly girl, works well & is of great assistance to many others in the Ward

March 4. She has been giving more difficulty with her food recently. She tries in every way to escape taking it, by hiding it, by getting other patients to take her share, by pretending to be sick &c. She insists that her whole case is misunderstood, that we do not know what or how much she suffers &c. In other respects she is fairly well. She takes a kind & sympathetic interest in other patients, works a great deal at fancy work &c & dances with enjoyment at the concerts.

March 17. Contracted Scarlet fever, how is not quite known and is at present isolated in the Fever Hospital. The attack is proving a very mild one & no complications have yet appeared

Jos. 360

(Mrs)' Annie Lindsay

Admitted Sept: 14th 1892.

£60 Surety Her Husband. Thomas Lindsay, Main St Lennoxtown.

This patient is aged 39, married, a Protestant and admitted as private patient to the East House. ~~This~~ She has been insane with frequently recurring attacks for the last seven years; the length of time of this attack not being known. She has never been previously under treatment; the cause is not known. She is not subject to epilepsy, nor is she suicidal and she is not at present dangerous to others. No H.P.

Medical Certificates I "very violent in manner; mind confused and wandering; thinks that she is persecuted by her husband and neighbours"

II "She is excited and talks at times incoherently; she imagines that her husband and friends are in league against her; she has had suspicions about them for the last few years and has brooded much over them when alone".

On admission she was quiet quiet, knew where she was and seemed quite oriented. She said however that she had to be forced into the cab which brought her here. She first night she slept well.

The next morning a physical examination was made and all her organs found to be healthy.

On conversing with her she gave expression to a good many suspicions about her husband. They have lived unhappily for some time, according to her account. He never spoke to her or if so only to tell her to make ready his meals; she says that she never had time to make herself tidy; that her husband was extravagant. He earns about £13 a month and out of this she keeps £1 as pocket money while half of the remainder he puts in the Bank.

Sept. 22nd Since admission there has been no change. She seems a quiet industrious woman, very seldom idle. She often expresses a wish to go home because she thinks it her duty to look after a family but she doesn't press this with any strength. She has not expressed any suspicions about those around her.

Oct. 26. The only notions or ideas of the nature of delusions entertained by this patient have reference to her husband & to her other friends in a less degree. How much or to what great an

Annie Lindsay cont.

extent these have any foundation in fact is not known but patient says that for a number of years she & her husband have not got on well together. She is of a quarrelsome disposition & one can imagine how her conduct & tongue must have tried her husband. Here she shows the same disposition, complains of the food, refuses to go out walking with the others, annoys the nurses by all means in her power, as by being late in dressing, by being the last to leave the gallery for meals, and by associating with patients of a fault-finding disposition. Whilst she is kept here that the institute may profit & access her husband of putting her here that his own ends might be served. On the other hand it must be said that since coming here her husband has not been very attentive to her. He seldom writes & only comes once a fortnight to ask after her. He does not visit to see her. He seems to have no influence over her, nor does she seem to have any respect for his wishes & rather, she has taken to telling the neighbours things about him, derogatory to his character & nature.

There are days when she can be talked with & days when her whole talk is a volley of abuse, abuse of her husband, of the place, & of the nurses. She has a nasty tongue & an insane glibness of speech —

Nov. 8. The other day she was very nasty. Said she did not get more treats here, that she was kept here for the board she paid &c. Her tongue is a very bad one & she uses it freely. In the Dining Hall she annoys the others at times a good deal. She rises & wishes to leave before grace has been said, pushes back her chair

making a noise makes remarks in a half whisper about those near her to. -

Decr. 12. For about 3 weeks patient has shown a considerable improvement. She now works in the Laundry, is much more amenable to reason & less excited, abusive & insolent. She says she cannot believe she did see the things it is said she did, but she really seems sorry for it all & anxious to do well in the future. She works well, is more forebearing to those around her. and taking her condition as a whole there is in the meantime an improvement

1893.

Feb. 6th When she is well she is very well, but she is still subject to outbursts of temper and when she becomes very nasty, talking foul language & making wild accusations. She believes she is kept here for the sake of gain to the Institute & that her husband has persuaded the Superintendent to keep her here always in order that he may indulge in impure pleasures outside. She is very low & vulgar in her conversation. These & these attacks last usually for 2 or 3 days. Then she becomes fairly well and is quiet & subdued. Her bodily condition is fairly good & at present she has a summer & iron tonic. She works in the Kitchen for a part of the day.

May 2nd The outbursts of temper have not been so frequent of late and in the intervals she has been very well Yesterday however she was excited, accused the nurses of boiling urine her, said her bed was not fit for an animal to sleep in &c, which is untrue. Her B.M. is good

To L. 362.

# Ellen Niolet

admitted Sept. 18th -/92.

760 Surety Her Husband Richard Niolet, Warehouseman, 4 Lesly Ct, Rothschilds.

1892. This patient is 65 years of age, married & a Presbyterian. She has been insane for three or four weeks and it is her first attack, the cause not being known. She is not subject to epilepsy, nor is she suicidal, nor dangerous to others. She was a domestic servant before marriage and a foundling so that nothing is known of her family.

Medical Certificates I "Patient tells me that nearly all her relations have entered into a conspiracy to kill her by poison; that her food is poisoned; her medicine also; that the poison in her is coming out through her skin" "The delusion as to poisoning has lasted over a fortnight; at first she feared death by violence and ran from the house thinking her friends were going to kill her. She resists administration of food; drinks enormously of water and induces vomiting to rid her system of the poison: has at least twice recently had medical attendance."

II "Fixed belief that attempts are being made daily to poison her; that the poison is appearing in various parts of the surface of her body" On Physical examination she appears rather thin. Viscera appear normal. There are some slight bruises on both forearms.

She states very readily and with great clearness the attempts that have been made to poison her. Arsenic, she says, was the poison used and the effects can be seen in her hands and feet so that is the channel by which it chiefly comes out. On Her hands & show the effects of rheumatism, some of the joints being enlarged. She also says that she induced vomiting by tickling her throat in order to get rid of the poison. The chief accusation she makes is against her step daughter who, she says, conferred to it: These attempts at poisoning have been going on for the last week or two and she has been obliged to give up taking her meals with her family ~~and~~ and to take her food alone and on the sly. She has also been drinking great quantities of water.

Sept. 22nd Patient has been quiet and comparatively contented up till this morning when she accused one of the attendants of poisoning her. She says she

# Ellen Nisbet cont:

1892.

does not get the protection she expected and wishes to go home. She seems a discontented person, pleased with nothing.

Sept. 26th She has been removed to Nº 3 on account of her habits which annoy the other patients. She continually puts her fingers into her throat to induce vomiting in order to get rid of the poison. She assures the visitors of attempting to poison them. Some of the patients in Nº 3 rather frighten her and as she is a nervous person and has not been looking very well, she is to be removed to the Infirmary.

October 26. Delusions of poisoning continue and she resorts to her old practices to get her food rejected. There is no excitement about her condition, nor can it be said that there is any depression though her condition tends in that direction. She is perfectly cool in her delusions makes the most delusional statements sometimes with a smile on her lips, and declines to be convinced that she is wrong. Says that she knows better. Does not express great anxiety to get home, as she got poison there also. Looking generally at her condition during the past month it must be said that her bodily condition is one of improvement. She is rather fatter than she was, but this has only been accomplished by her being carefully watched & prevented from going to the closet after meals. She has been sleeping well. She has not recently made any specific accusations against any nurse of poisoning her —.

Nov. 8. Got some fruit from her friends recently, and when asked why she did not eat it, she smiled meaningly and said that she knew better. She would give it she said to others but if it did them no harm then she might take it. From this it will be

Ellen Nisbet cont:

gathers that her delusions remain the same, though she does not talk so much about them. Her bodily condition is fair but it is with difficulty she is persuaded to take food as she believes it to be poisoned.

Decr. 12. Not quite so delusional. The nurses say that she is a very nice person & so willing to help in any way. She may have the delusions as fast as ever but she does not give expression to them. Her bodily condition is improving, but she is quite as bitter as ever against her friends & convinced that they mean her harm.

1893.

January 17. Very much improved and now in No 4. She has lost a great many of her delusions, and no longer believes so firmly in others. She has improved very much in bodily health though still ill & in many ways she is a different woman from that described on her admission

Feby. 6. Continues to improve in bodily health, but not at all anxious to get home. She says that her friends would be kind to her, but she is now so well that she could be at home quite well.

Feby. 20. Continues very well & mentally there is now nothing wrong with her. She goes home soon though not at all anxious to go. She says that her home life was not a very happy one.

Feby. 22. Taken home to-day by her husband & discharged

Recovered

Marion Annan or McVicar
Admitted 27. Sept. 92

This patient is 58 years of age; a widow; and a Protestant by religion. It is her first attack, and she has been insane for some months. Cause is unknown. She is not epileptic. She has threatened suicide, and has also threatened the family. There is no H.P. so far as known.

Medical Certificates show :-

I. "Says she will injure her children. Says she hears noises in her body which no other one hears"

"Her daughter says she (patient) strikes her without cause. Daughter has to hide knives from her.

II. "Says there is a roaring furnace going on all through her: also that an explosion like that of gas occurs every now and again from her body. No one else can hear anything of this."

"Her daughter says she is refusing food, and today through the food at her without cause. She also says that her mother gets up through the night and tries to leave the house".

= threw?

Marion Annan ætat 46. Vicar, 58.
Admitted 27th Sept. 92

October 10th. It is doubtful whether a patient such as this can receive much benefit in an Asylum. Certainly since admission she has been worse than when at home. She continually frets herself, will not take an interest in anything, nor do any work, her whole cry is about her ailments real or imaginary. A Physical examn. of her chest gives negative result. Both bases (pulmonary) are clear to percussion, tho with a few moist rales. Cardiac dulness is normal in area & sounds pure. The right lower abdominal region on admission gave increased resistance to percussion & palpation but a more recent examination fails to confirm this. Urine contained some urates but no albumen or sugar. The only fact ascertained apart from her own statements is that almost steadily since admission the evening temperature has been one degree over the normal, the morning being normal or subnormal. No cause for this can be made out. There is no spinal tenderness. She complains very much of the burning heat all thro' her which begins in the belly & passes up to the head and is almost unbearable, also of the pricking pain in her limbs, gradually working into the trunk of her body & "seizing hold of her heart". There it is between the scapulæ. Complains much of flatulence & has had enemata given to the stomach & bowels. A very small dose of C. Oil purges her. For some nights she has had Chloral & Bromide, but she said before she took them that she was sure they would do her harm & not good. She blames all her illness on drugs that have been given her by Doctors. She is full of imaginary illnesses

Mrs Mc Vicar

and gives a long description of them & of the medicines she has taken & of the Doctors in whose hands she has been. When engaged in telling about them, or when she has been interested in some one, she seems to forget to some extent her own pains & burning heats. Says also that she has her good days & her bad ones & her good nights & her bad nights & this has been borne out since she came here. She takes food badly & tries the patience of the nurses a good deal.

Oct. 29. Perhaps a little better mentally & on the whole much better physically. Very anxious to get home, as she is convinced nothing can be done for her. She is difficult to manage & will not do anything nor take an interest in what goes on. At the concert she brightened up somewhat & even smiled, but next morning she seemed more miserable & full of her own pains than ever.

Nov. 8. Rather better & actually working a little, knitting sewing &c. She says that on some days she can do that well enough, but at other times when the pain & "burning" is so bad she can't do anything. Complains much about the amount of food she is made to take, and is often very peevish & trying to the temper of those around her.

Nov. 18. Not making any satisfactory progress & convinced she will never get better here. Those pains & burning heats of which she complains never leave her & she is usually found pressing her handkerchief to her eyes &c & by so doing she says the pain is made more bearable. Altogether condn improves & she sleeps well. —

Mr Mc Vicar

Decr. 10. Considerably improved. much less dolefue & now works a good deal & is cheerier, laughing & joking often. She still insists on the reality of the heat & pain but is evidently able to forget them easier & glad to do so. She takes her food well, shows a really improved bodily condn & sleeps well.

1893.

January 17. She was very loath to stay after her first quarter here had expired, but her continued residence is certainly justified by the improvement there is in her condition. For about 10 days now she has been wonderfully well, has said nothing about the noises in her head, or about the heat in her body. During these days she has been helpful, & kind, industrious and pleasant and in place of being dolefue & woebegone in appearance she has been often smiling & bright. She speaks now of what she has suffered. Her appetite is only fair and she is not very strong.

Feby. 6. Relapsed about a week ago and has been very miserable since complaining of the pain in her limbs and the noises & heat generally. Also she has been irritable & complaining, not wishing to take her food & refusing to take exercise. She has also been sleeping badly. The question of peripheral neuritis was entertained, but there are no definite symptoms to support the view. She is very anxious to get away from the asylum, has no faith in anything that is done for her here & is practically back where she was condn

To f. 231

Z 120.

# Jane Knox or Macdougall

admitted Sept. 27th 1892.

Z 120. Society Her Husband. Alexander Macdougall. Merchant. 71 West Nile St Glasgow.

This patient is 40 years of age, married, a Protestant and has been insane for about ten days. She has been Admitted to the West House. This is her first attack; the supposed cause being uncertain. She is not suicidal, nor subject to epilepsy and it is doubtful whether she is dangerous to others. No H. P. known.

Medical Certificate I "She says there is such a smell of burning sulphur coming out of the fire and all through the room. She has the window thrown up on account of it; that something she has been getting has caused her legs to stretch out and has made her weak. She thinks it was strychnine ~~and~~ some person; supposes one of the maids has been giving it to her."

"Told Maggie Coutts - nurse to go out to the garden to look after a man on a ladder looking in at the window. Janet Dyer - housemaid says she threatened to knock her head with coal hammer; wanted her to take a bath to get rid of smell of burning sulphur. Blames her for attempting to poison her. Says she told children to look under bed, sofa, chairs etc for some one."

II "A belief that attempts are being made to poison her through her food; that there is a smell of sulphur in the house."

"From maid-servants in house - Mrs Macdougall asserts that she was cruelly ill-treated by her mother and sister, both of whom died several years ago. She frightens her children by telling them things men are under the beds &c";

This patient is a short fairly healthy looking woman. She answers questions but not very readily, in fact is rather reticent. Since admission she has given expression to no delusions; when questioned about the attempts to poison her which is mentioned in her warrant, she was denied that there were ever any such attempts. She is nearly blind; this she attributes to a paralytic stroke on the left side seven years ago. Her arm and leg have quite recovered.

29th - Dr. Tindal who has seen her professionally now & then gives the following information. — She has had 4 or 5 miscarriages & there is a distinct history of Syphilis contracted from her husband. About 4 or 5 yrs ago the defect of sight began and Syphilis then was proved. It began with

# Jane Knox or Macdougall

1892

optic neuritis going on to optic atrophy & at that time she underwent very prolonged & severe anti-syphilitic treatment There was soon after that some spinal affection evidenced by tottering gait & general difficulty in walking Consciousness there was very troublesome The mental illness dates back 2 years when the 2nd last baby was born at that time she ran away from her friends and became very suspicious of her husband — . ——

Oct. 3rd — There is no change since admission. Patient is in the same almost apathetic condition, doesn't speak unless spoken to

Nov. 19th — There has been a marked improvement in this patients' condition for the last week or two. She has been much more cheerful and much more ready to enter into conversation in which she has given no expression to any delusions. She also busies herself by dusting the furniture in the Gallery. Her husband has visited her twice and she was evidently very glad to see him.

Dec. 19th — A few days ago she was a little excited but soon quieted down. This was rather unusual for her as generally she is very quiet and reserved and difficult to engage in conversation. Her husband visited her about a week ago and that evening she showed some emotion when reference was made to him.

Dec. 23rd — Last night she was very excited and got out of her bed in the open gallery where she sleeps and crawled about the floor frightening the other patients. She is this morning still excited; is constantly muttering to herself and there is a ~~more~~ nervous tremor about her ~~had~~ hands. She sometimes goes down on her knees and crawls about the floor.

" 24th — She was sent to the padded room last night and Sulphonal gr XV given with the result that she passed a much better night and this morning has distinctly improved. She is more cheerful and

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|---|---|
| 1892 | more sensible. She complains of a soreness about her back. Examination of her urine a few days ago detected nothing abnormal. |
| 1893 | |
| Jan 5th | Since last note has been very quiet though withal very stupid. She still sleeps downstairs though her condition scarcely now requires it. She takes a long time to answer even the simplest questions and her manner is very confused. Her general health remains fair. She has given no expression to delusions. |
| " 18th | Continues quiet though if suddenly addressed gets confused and is unable to answer for a minute or two. R She sits most of the day doing nothing though sometimes she knits a row. It is exceedingly difficult to get her to enter into conversation. She is a woman of few words. |
| Feb. 18th | Is in much the same condition: as a rule quiet, well behaved but if spoken to suddenly gets confused and moves her lips in a peculiar way before answering. Now and then she seemed as if she were going to have an outbreak of excitement but it passed off. |
| March 2nd | Had an outbreak of excitement lately which only really lasted a day. In it she was gay and continually talking of what she could do and also proceeded to wash her clothes. There was ~~neither~~ not violence attempted in her attack and she soon quieted down. |
| " 31st | Has been quiet and comparatively well for some little time so she was taken home to-day by her husband on a month's probation |
| April 28th | Was to-day taken off the Books. |

Discharged Relieved

on

April 28th 1893

Readmitted July 18th 1893 vide p 434 of this volume.

Jessie Cameron
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Jessie Cameron. 72.
Admitted 3rd Oct. 1892.

Private patient, admitted to-day to the East House. She is 72 yrs of age, & a widow, residing at 19 Lansdowne Cres. Glasgow. She has been insane for 3 years, & this is her first attack, the supposed cause being old age & perhaps a stroke. She is not epileptic, suicidal or dangerous to others. Sts M.P.

Medical Certificates I. She does not know her own daughter but considers she is a niece. Speaks of her own father being alive & seeing him, when he is known to have been dead many years. Said her father owned property & pointed to her bed as if it were part of her estate. Her manner was decidedly childish. Her daughter states that she is occasionally obstreperous without any provocation & one one occasion might have pushed her nurse thro a window. The other daughter says she is addressed by her mother as if she were a man.

II. She relates imaginary conversations with friends now deceased, is unable to fix her attention for any time on one subject, makes mistakes in the identity of persons around her, does not know the month or day of the week.
Her daughter states her memory has failed for some years & that at times she talks incoherently & speaks of conversing with friends who have long been dead. —.

October 21. This is an old lady in feeble bodily condition & suffering from organic or senile dementia. She needs to have everything done for her, has almost no memory, mistakes those she sees around her for relations of her own & is facile & silly to a degree. She has been in this condition for about 18 mos, but has got worse of late & her daughters have had her brought here for care & nursing

Mr Jessie Cameron
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She is not in any way violent, but cannot give an intelligent answer to a simple question. Does not know the name of a simple thing when it is shown to her but is able to confirm the name when it is mentioned & correct it, if the wrong name is given. She cannot feed herself. Does not know her own name. The bowels require to be managed by enemata.

October 29. Very feeble & frail. No memory, and confuses those with whom she daily comes in contact. Her bodily health is very indifferent. Her pulse being small & weak. Requires to be fed with all her food & to have all her wants attended to —

Nov. 8. It is thought she has some sort of shock recently. For some days she could only swallow with difficulty & the tongue could not be protruded. She does not seem to understand what is said to her & she can do nothing for herself. She is very feeble & needs constant care & nursing. —

Nov. 18. Confined to bed & very feeble. No change.

Decr. 12. No change. Very feeble & confined to bed.

1853.

Feby. 6. No change. Shows an almost complete loss of memory. B. condition very poor —.

May 3rd Very incoherent & suffering from organic Dementia Mostly confined to bed, but up for a day now & then. Frail & thin —

August 9. No change. Bedridden & feeble —.

Octr. 25 No change ——.

Death

Mrs. Jessie Cameron

Decr. 15th. This patient became very ill yesterday, and her temperature rose in the evening to 103.6°. There were no marked lung symptoms & beyond slight moaning at evidently pain little was to be made out. She sank & died to-day

Death. P.M.

See Path Records.

Senile Decay & Influenza

Margaret Irwin Mitchell

Margaret Irvine Mitchell, 17.
Admitted 5th Oct. 1892.

Private patient. East. House. Single, formerly employed in a shop, and residing at 40 Kelvinsdale St. Glasgow. She has been ill ave for 5 days & this is her first attack. Supposed cause is "Elocution & The Bible". Not epileptic, suicidal, or dangerous to others. H.P. Her mother's cousin was insane

see History

Medical Certificates I. She is much excited & talks incoherently is disposed to violence & requires constant attention on account of her mental state. In a word she is maniacal

II. That she is very much excited, quite incoherent mixing up the Bible with Macbeth. That she is violent & dangerous to others. For the last 3 days she has not ceased talking; striking the floor & kissing the pictures.

On admission patient is rather excited, talking incoherently & gesticulating a good deal. She is a thin girl, with good features & of average height. Palate is not abnormally arched.

6th - Slept very little & was so excited that she was placed in a single room. To-day a diff physical exam^n of her chest is made and nothing abnormal is discovered. She is well developed for her age, but her muscular development is poor. She is very restless as she lies in bed, confuses the identity of those around her, & grimaces, contorting her features to represent what she says are the likenesses of those around her. Now & then she poses & recites pieces of poetry, but she soon becomes quite incoherent & rambles away to something else. Her tongue is fairly clean, her pulse 88 & of medium strength & her bowels have been well opened with laxative medicine. She is ordered to be up & out of doors.

# Margaret Irvine Mitchell

7th Oct. On a restless & continually excited day followed a restless night. 2 hours restless slumber being got. To-day she is rather quieter & it is possible to fix her attention for a short time. She confuses the persons around her with others she has seen outside. To-day her speech is quite husk & hoarse. She is taking nourishment fairly well.

11th Excitement has now subsided very much & she is fairly well. at times she is foolish, and affected but she has much more control over herself. For 2 nights she has had a bitter Bromide & slept well. Her appetite is good & the cough that troubled her so too much is less frequent. She is put on Tartars Syrup & extra nourishment.

18th Continued well up till to-night, when in the afternoon she relapsed & became very excited, shouting, continually walking about, making incoherent remarks & having the 'facies' of a maniacal patient. She is ordered Chloral & Bromide 20 gr of the former 35 of the latter

19th Excitement continues. Menstruation began this morning but is scanty. Medicines have been stopped in the meantime & weather permitting she is out as much as possible Bromide & Chloral ordered to-night. Last night it acted well

20th Rather less excited & capable of sitting quiet when attention is not directed to her. Visit of the doctor excites & upsets her. Full of all sort of questions, delivered in an excited manner but more composed & with a less excited appearance. Bromide & Chloral (30 & 15) to-night. Menstruation continues but very scanty.

21st Slept well last night, & excitement is passing away. She knows

that something is wrong with her brain & very piteously asks what it is that is wrong & whether she will get better. Her appetite is fairly good & her bowels are being regulated.

October 29. There is to-day some evidence that the excitement is really subsiding. She is much quieter, hardly ever declines to talk & looking very tired. Up till now, since last note she has been noisy at times, sleeping badly at night even with a draught, and taking her food only with much coaxing. She has had extras in the way of eggs &c. &c. There was a strong quasi-hysterical element in her excitement in her case from the beginning.

Nov. 8. Subsided & remained calm & quiet for 2 days but is off again, excited & talkative, sleeping badly and behaving foolishly. The Nurses state that she hears voices & that in obedience to them she does things, and she carries on conversations with imaginary persons.

Nov 18. Been excited pretty continuously since last note & has complied with a vastly improved bodily condition. Is not of good omen. Yesterday she had her necks beetles & she was put on Bromide & Valerian in moderate doses. She is not violently excited but is foolish, laughing, throwing her arms about & behaving in a silly fashion. She has been sleeping fairly well at night, usually being a little noisy at first but sleeping 6 or 8 hours. She takes her food well, has as much exercise as the weather will permit & her alimentary canal is in good order.

Decr. 12. Shows no satisfactory signs of improvement. Has had several periods of well-being, but ones of short duration & followed by period of excitement

Dep. 190.

Annie Skinner McCathee
Adm. 7th Oct. 1892.

Annie Skinner McCathie. 27.
Admitted 7th Oct. 1892.

Private patient. East House. Single & protestant residing at 42 Greenhill St. Glasgow. This is her 2nd attack & she has been ill for 18 days. Cause is not known. She is not epileptic or dangerous to others but is suicidal. Distinct H.P. on both maternal & paternal sides

Medical Certificates I. Depression of mind. Says she is lost. She is running the whole house. The best thing she cd do is to take away her own life or the lives of all the others. She is restless by night & day. about 17 days ago she took Laudanum to take away her life. but she vomited it & no ill effects followed. She goes to the windows & tries them Complains they cannot trust her

II. Her mind is depressed & cannot get over the delusion that she has done some dreadful crime. Says she has a feeling that the sooner she puts herself out of the world the better. ——

October 11. The depression in this case is not very extreme, and the patient acknowledges she was foolish before coming here. She felt knew she should not be here. She has given expression to no delusions since coming here & is a capital worker, taking an interest in what goes on. Her manner is very nervous & she is often agitated but that may be explained by the keenness with which she feels her position here. There is every reason to hope for a speedy lessening in the depth of her depression.

Oct. 21. From an ordinary & short conversation with this girl one would not think there was much wrong

about indifferent matters she talks cheerfully enough, and as she is of a pleasant helpful disposition, she does not excite so much suspicion as to her mental condition. The other morning however she saw her sister & afterwards, when talking to the visitor she gave expression to a great many miserable delusions & indicated that she considered she was no good in the world now. She said that of late it had been borne in upon her that her life was all a mistake, that she had done nothing worthy of praise & that God had entirely & for ever forsaken her. She said she had been told that she was too bad to live & that her living gave her parents pain & grief as they saw how bad she had been. These are of course delusions as she always has been a good living woman & a dutiful daughter. At no other time than she has often been times has she uttered such statements. actively occupied as she is & with an improving bodily condition it is hoped that these delusions & the despondency will become fainter. She is very anxious to get home, does not think she should ever have been brought here &, although she says her appetite is so good that she has to eat, grudges the price of the food she eats as her father has to pay it..

October 29. Improving a great deal. much more cheery & lively and with an improved bodily condition. She says nothing about her own sins & faults & they have not been referred to. She is most willing & useful & very pleasant to all who come in contact with her.

Nov. 8. While outwardly she is fairly bright & cheerful it would seem that she still believes in her old delusions eg.

Annie Skinner McCathie.

that she has been a bad daughter, that her life has been a mistake and that she can do no good to anyone & that therefore she would be better dead. She continues to sleep & eat well & shows an improved bodily condition. There are times, especially when she thinks no one is observing her, when her face takes on a very depressed appearance.

Nov 18. Very reticent, but improving. The improvement being most marked in her bodily cond$^{n}$ & less so in her mental state. She does not talk freely to any one here & it is only to her friends that she gives expression freely to her depression. From them the doctor hears it. She sleeps, eats & works well —

Decr. 12. Last night she secreted a knife (table) about her person & took it to bed with her. It was missed & found in her bed. She would give no explanation of it then but to-day she said she was sure death was the only thing for her & that she was even too unwatthy to die among other people. The above incident indicates her state of mind. She will not be frank. Up till now she has been engaged in laundry work and has worked well her bodily cond$^{n}$ is good & her appetite fair. The delusions of unworthiness, of the need for self-destruction are very difficult to get out of her but she hopes them very strongly.

1893.

January 17. Very much better and without doubt not so full of the ideas she formerly had about her unworthiness &c.

Feb$^{y}$ 2$^{d}$ Discharged to-day

Recovered

Re-admitted July 9$^{th}$ 1898.
vide Vol X p 45

Grace M'Callum or Gordon

Grace M'Callum or Gordon
admitted 18th Oct. 1877

Private patient, East House, married and a Protestant. She is 72 years of age, a housewife and resides at 415 Cathcart Road Glasgow. In 1871 she was brought to Gartnavel but discharged the same year relieved.
For previous history see Case Book IV pages 1444-1446
She is not suicidal, homicidal or epileptic
No N.P.
Medical Certificates. – I Has a vacant expression, is restless, and says she can't prevent herself at times from shouting and roaring aloud'. Other facts – Her daughter Mrs Paterson says that she has been peculiar for about 2 months that she is restless and sleepless, runs about the house without any object, laughs & claps her hands at nothing and has an idea that all her friends are against her.
II Has vacant and contented expression, hesitating remarks, slowness of comprehension, she says she is nervous, restless and goes about shouting and calling for no reason or cause. Other facts – by the attendant Isabella Ross, there is nervous excitability during night, shouting frequently for 10 minutes or so at a time for no obvious cause.
October 21. Patient has settled down considerably since admission and is now in No 4 Gallery. She was restless after

Grace Mc Callum or Gordon

admission & kept busy the first two nights. During the night on several occasions she sat up in bed & screamed loudly for a few minutes. Said she could not help doing this. Now however she is more composed and is in fact as a whole rather depressed & certainly not in such good general health as when she left here. She is rather care-worn looking & her conjunctivae are slightly bile-tinged Beyond some remedies directed to the liver she has no medicinal treatment

Oct. 29. Gone back to Heroes Gallery (No 4) and settled down. Beyond a certain amount of depression she does not show many indications of mental disturbance Says that when she is here she feels that she has more control over herself.

Nov. 8. Just the same. Rather stronger than she was & feeling better. B.H.T.C. good.

Nov 18. Better. Complained of not sleeping well. A placebo is found useful. Gets a little to get home & thinks she should never have been brought here.

Dec. 12. A much more contented "baby". Sleeping well now & less fearful of evil than she was.

Dec. 29th Taken home to-day by her son on probation.

1893

Jan. 27 Discharged

Recovered.

Readmitted as a voluntary

see f. 572

Grace McCallum or Gordon

Jane R. Abbiller or Haigh / From p.6.

complaints, some of them of a very trivial character & some of them actuated by malice. She bears an intimate hatred to the charge nurse in her Gallery, says she has often been cruel to her & that she tempts persecutes her to drive her mad. As for herself, she has never allowed anything to drive her from the path of duty. She has never done a dishonourable action nor told a lie. When talking to her many of her remarks are observed witnessed for the nurse standing alongside. Some of her letters to the writer are appended. She has the privilege of going out & in when she likes & the nurses say that she visits or goes, when she knows they are busiest, & have least time to open the door. She does not speak about her brain now, nor about suffering agony, and her general health is fairly good.

Dec. 12. Just the same. Pays compliments to the writer telling him that he was been so kind to her, that he has been the one who has most distinctly lightened the load of her misery here, &c &c. She goes out every possible day & seems to do with cold weather, as she sleeps with the window of her room open. She has her glass of wine daily & in fair bodily health considering her years & infirmities

1893.

February. 6. No change in her condn either of body or mind

May 3rd. Very anxious that she should get away. Says that the place does not suit her, that she does not get food suited to her weak condition, and that the rules about visiting &c irritate her, and are making her brain disease worse instead of better.

Jane R. Miller or Haigh

/

been of late very anxious to get away
where she says she can get no
body. In reporting her condn.
first about her physical &
al condition
well. She now gets food in
moderately well, nor does
ublesome symptom now
ause save the Rheumatic
wrists, feet & knees, but
y chronic. Being on parole
ide in the open air alone,
sitting on damp seats in the
eps with her windows open. She
bear heat preferring cold.
Her pulse is in fair order. A little Rhubarb &
Soda is given now & then with advantage. Her
colour is good & her bodily condn as regards
fatness fair. She has now no complaints
about the material comforts or accommodation of the
asylum.

II. Mentally she may still be described as a Del-
-usional - hypochondriac - melancholic. She
says that the disease in her brain is advancing &
that night & day she feels it eating in deeper &
deeper. That her brain is a seething cauldron &
that she never sleeps. She may, she says, close
her eyes, but anything like sleep never comes to her.
Moving her fingers round in a circle she illustrates
the never ending turmoil that goes on in her brain.

Sop. 309.

Jane R. Miller or Haigh / From p.6.

complaints, some of them of
some of them actuates by
-tance hatred to the char
has often been cruel to
her to have her mar
allowed anything to
She has never done
lie. When talking
-rously, witness
Some of her letter
privilege of going o
nurses say that she
they are cursed, I have
She does not speak abou
suffering agony, and her
good.

Mrs Maybrick's letters
Oct. 1892

Nov

Dec. 12. Just the same. Says compliments to the writer telling him that he has been so kind to her, that he has been the one who has most distinctly lightened the load of her misery here, &c &c. She goes out every possible day I seem to do with cold weather, as she sleeps with the window of her room open. She has her glass of wine daily I is in ~~poor~~ fair bodily health considering her years & infirmities

1893.

February. 6. No change in her condn either of body or mind
May 3rd Very anxious that she should get away. Says that the place does not suit her, that she does not get food suited to her weak condition, and that the rules about visiting &c irritate her, and are making her brain disease worse in place of better.

Jane R. Mellor or Haigh

Nov. 21. Mrs Haigh has been of late very anxious to get away from the asylum, where she says she can get no rest either for soul or body. In reporting her cond^n a word may be said first about her physical & second about her mental condition

I. Physically she is fairly well. She now gets food in her own room, and eats moderately well. Nor does diarhoea formerly a troublesome symptom now annoy her. There is of course still the Rheumatic condition of the hands, wrists, feet & knees, but their cond^n is essentially chronic. Being on parole she takes regular exercise in the open air alone, insists on & persists in sitting on damp seats in the cold weather & sleeps with her windows open. She seems unable to bear heat, preferring cold. Her pupils are in fair order. A little Rhubarb & Soda is given now & then with advantage. Her colour is good & her bodily cond^n as regards fatness fair. She has now no complaints about the material comforts or accom^n odation of the asylum.

II. Mentally she may still be described as a delusional - hypochondriac - melancholic. She says that the disease in her brain is advancing & that night & day she feels it eating in deeper & deeper. That her brain is a seething cauldron & that she never sleeps. She may, she says, close her eyes, but anything like sleep never comes to her. Moving her fingers round in a circle she illustrates the never ending turmoil that goes on in her brain.

Jof. 309.

Annie Kears
Tromp. 42.

Nov 18. Very weak now, bodily & mentally. Very anxious to get away & convinced that she would keep well. Her illness having been so severe it is considered best that she should stay a little longer under supervision

Nov. 30. Left to day. Clothes to be taken off the books for a week.

Dec. 10th Discharged

Recovered

Annie Kean

1892.
Decr. 10 Discharged
Recovered.

# Euphemia Watson More

From p. 46

Oct. 22 (cont.) Yet it would appear that she is very desirous to be well & away from here. Who she maintains there never was need for her being here. She dislikes very much going to the Concerts, as they put evil thoughts in her mind. She told her father the other day that she was put next a patient who was very ill in order that she also might become very ill, also that as she was a good worker there was no chance of her getting home soon.

Nov. 8th Considerably improved. It appears that she is more anxious to do well, that she has more control over her feelings & that she looks at her own condition & illness in a truer light. She has been sent to the Laundry to work regularly there & her father has been promised that she will be retired at home soon. With this arrangement she is satisfied

Nov 18. Foolish & flighty at times but on the whole better Does not know what she would like. Thinks one day she would like to be a nurse here & the next that she ought to go abroad & the next, that her true place is at home. Her bodily condition is very good and she works regularly & well.

Dec. 12th Has been working up till a few days ago in the Laundry regularly. At present she is in bed with a sore throat of a simple but acute character. She makes a bad patient, refusing cooling drinks, insisting on having the opposite of what she is offered &c. Generally her mental condition is somewhat better than it was She is not by any means balanced. is flighty & foolish, but she says she knows that she must conduct herself

Miss E. W. More

properly & that she will not get home unless she does so.
Her bodily condition is excellent, tending slightly to obesity
Decr. 23. Got quite over her cold, but not at all well mentally.
Wrote a foolish letter home, in which she said that dur-
ing her illness she was starved, that she got nothing to eat
and that she was badly used. When she was spoken to
about this she got slightly hysterical, but did not become
very ill. She says she is quite well & should be at home.
Decr. 30. Taken home by her father to stay on 28 days Parole.
She is not very well, but her friends think she
might improve faster at home.

1893
Jan. 27th Discharged.

Relieved.

Readmitted 4th March 1893.
vide p 296 of this volume.

Eliza Draper
Room p. 78.

often smiles when giving expression to delusions of a
miscellaneous character. She has been more talkative of
late, less resistive & less uncertain in her general
conduct & behaviour. Her bodily condition is very
much improved, and she has been sleeping well

Oct. 24. She is to-day transferred to the West House
her rate of board having been raised. —

Nov. 9th She improvement in her mental and bodily condition continues. She is
getting quite stout and her face has a healthy colour. Mentally she
gives expression to no delusions but talks quite rationally. She is
very anxious to go home. Her manner is quiet and refined though
apt to become prim and old-maidish. She greatly appreciates her transfer
to the West House.

Dec. 2nd This patient is now quite well. Her bodily and general con-
dition is very good and she looks strong and healthy. Mentally
she is well and is at all times very pleasant and agreeable.
She goes to the Concerts and is very fond of dancing which
she hasn't practised for the last two years.

" 30th She has continued well and was to-day

Discharged Recovered

Dec. 30. 1892

Eliza Napier

From —.

Discharged

Recovered

149

Mrs Isabella Kilgour Rose Paul
Admitted Oct 25th 92.

Mrs Isabella Kilgour Rose Paull

Admitted to West House. Patient is 30 years of age, married, a housekeeper - by religion a Protestant and resides in 1 Rose Terrace, Govan. She has been insane for 3 months this being the first attack. The cause of attack being puerperal. Is melancholic, sometimes violent No H.P.

Medical Certificates I She states that the devil is constantly tempting her to say something wrong - Refuses to take food.

Other facts. Has repeatedly struck at those in charge of her. Has refused food & medicine. Speaks constantly of what the devil is tempting her.

II Patient is melancholic, declared that she had been in the 'bad place'. Refuses to take food & medicine & is at times violent, requiring to be personally restrained.

Oct. 27th This patient is a small made, fairly nourished woman. She had her first child three months ago, which however died a few hours after birth. Her progress was satisfactory till the seventh or eighth day when she was noticed to be restless and refusing her food. This got worse and she became excited and suspicious of all around. An attendant had to be got as her friends were unable to manage her. After some weeks she got better but the improvement didn't last and she got so unmanageable that she was sent here.

On admission she was fairly quiet but the first night she was very restless and noisy, necessitating $\overline{m}$ xxx of paraldehyde. She refused to allow herself to be undressed: in fact resisted everything.

# Mrs Ida K. K. Paul

cont:

1892.

The second night she slept without a draught. No examination has been made of her lungs as she struggled so when an attempt was made that it had to be given up. Her mental state is difficult to make out as she refuses to answer any questions and keeps repeating "So sorry". She regards everybody and everything with great suspicion. Her bowels were open yesterday.

Oct. 31st She has been sleeping fairly well for the last four nights and has taken her food well. Porter has been ordered which she takes. Yet she is still very reticent when enquiry is made into her mental and bodily condition. It is with difficulty that she can be induced to show her tongue. She evidently doesn't know where she is but nevertheless confesses that those around her are friends. Her left hand eyelid shows signs of a tremor.

Nov. 9th This patient has not improved since admission. Mentally she seems full of delusions but does not give clear expression to them. She talks to imaginary people and in a tone as of remonstrance. She does not yet know where she is and her mental faculties seem dulled. She is suspicious of those around her and is still in that pensive mood, though not so bad as on admission. When she speaks it is in a very dignified manner as if she was quite superior to those around her. She still requires to be fed with the spoon and yets as much as she can take. Her bodily condition is not however satisfactory. She is thin especially about the face.

" 19th There is no improvement to record here and the patient's condition is therefore unsatisfactory. She doesn't seem to realise where she is but ~~simply~~ seems entirely to be occupied with her own thoughts. She is constantly singing to herself. She has a habit of scratching her head which is objectionable.

Dec. 2nd There is not much change to record in regard to her mental condition. She is very stupid and won't answer questions but is constantly singing or rather humming tunes in a low voice. She still continues to scratch her head and has made a large bald patch

Mrs Sarah A. P. Paul

cont.

1892.

from this practice. Bodily she has got stouter and eats and sleeps well.

Dec. 14th — There has been some improvement in this patients condition for the last week or two though it is not so much as was expected. She has been taking more notice of both persons and things and she talks more insisted of humming to herself all day. Her face is brighter. Bodily she has improved and continues to eat and sleep well.

1893

Jan. 10th — The improvement noted above continues though very slowly. When spoken to she is often very obstinate in answering but nevertheless she understands what is said to her more than she seems to. She has gained 3 lbs in a fortnight and both her sleep and appetite are satisfactory.

" 24th — Brighter looking and more talkative and inquisitive. Sometimes asks to see one's watch and can tell the time correctly. Continually repeats aloud anything she hears or else makes comments on it. When she does speak it is in a conceited voice and with a dainty air as if she were altogether somebody superior. Her general health is good.

Feb. 3rd — The improvement noted above has not continued. For the last few days she has been very talkative; chattering to herself and making remarks about her surroundings during the whole day. If asked says anything she will at once repeat what is said. At night also she has been restless and almost sleepless. Yesterday and to-day she is tearing her clothes and is more restless than she has been.

" 18th — The condition of this patient has been variable of late. Some days she is comparatively quiet and occupies herself with knitting and will with a little persuasion answer a few simple questions: other days she chatters incessantly and is restless. P.H. & C. good

So p 267

153 Janet Murdoch or Tullis
admitted Nov. 2nd '97

# Janet Murdoch or Tullis

Admitted to Mat House, Nov. 2nd 1893.
Patient is 42 years of age, married, a housewife and a Protestant. Her place of abode before admission was Inchcape House, Dennistoun.
This is her first attack of insanity, she having been insane now for 3 months.
She is melancholic, doubtfully suicidal, but not dangerous to others. H.P. known.
Medical Certificates I She is very excited in her manner, says that she has done very wrong things and asked me to take her to the police office. She says she has not slept for a month. — Other facts She is quite changed in her manner & disposition and quite unable to conduct her household affairs. She is melancholy.
II Patient states that she is intensely miserable, says that she wd be better dead than alive and that there is no hope for her. Patient has no control over herself & wd take poison to destroy her life. — Other facts. — Patients sister who watches her says that she is never any better but at times is much more excited. That she is quite beyond any influence from her friends.

Nov. 4th Patient on admission was in a state of acute depression. She was wringing hands and looked the picture of misery. asking what she should do and saying she had done many wicked things. On being spoken to she didn't pay much attention but went on moaning to herself. She answered however one or two questions.

# Janet Murdoch or Tullis

cont.

1912

Her general condition seems good and there are no marks of violence on her person.

The first night she didn't sleep well but she had a much better night the next one. An attendant sleeps in the same room as she is thought to be suicidal.

To-day she is more calm and employing herself with knitting. She looks miserable and has cried two or three times this morning. Some difficulty has been experienced in getting her to take food.

Nov. 5th She slept little last night and was very restless and excited. She is not quite so excited this morning.

" 7th Last night about seven o'clock when visitors made his evening round she was quiet and collected in manner. Her conversation was a little incoherent but she did not talk very much. By 10 o'clock that same night she had become very excited; her excitement taking the form of continually turning and tossing her body about so much so that it was impossible to keep her in bed and quite impossible to leave her in charge of one attendant. She was not shouting or screaming, only in continual movement. Her bowels had been opened by an enema in the morning. She was accordingly removed to one of the padded rooms in No 3 and 30 mins. after Sol: Hyosc. 5j + Tinct Valer. Am. mxxx given. It had some effect and she slept some part of the night. In the morning she allowed herself to be dressed and taken back to No 4 where she remained quiet. She takes her food well and her bowels have been opened by Black draught. In conversation she is quite incoherent and is evidently full of delusions. Upon being questioned to-day she evidently gives her the notion that she has been in the bottomless pit. She describes with some amount of unconscious humour the kind of men who are keeping in the fire in that there have pajamas. She recognises some of them as her acquaintances.

" 9th Yesterday in the morning she was in a very excited state, after having had a bad night. She entreated those around her not to leave her, She said she had

# Janet Murdoch or Tullis

cont.

1892

been in the bottomless pit the night before. She remained in this condition till the afternoon when she fell asleep, no draught having been given her. She slept 14 hours without awaking. This morning she seems none the better for her prolonged sleep. She is in an exceedingly nervous state. If anybody comes near her she starts up as if she were going to be struck and keeps a tight hold of one of the attendants. Her mouth seems sore, there being some slight ulceration on the hard palate. The upper lip is also excoriated. Her tongue is furred. She has been ordered to be kept in bed.

Nov. 12th Patient has begun to menstruate which settles the question of pregnancy about which there was a doubt at first. She has been sleeping pretty well the last few nights but in the daytime she is in a state of nervous depression. She often shrinks when she is not even touched and is unable to settle her mind to anything. She is evidently full of delusions: thinks the trains that pass past the asylum are not real ones at all but are simply there to frighten her. She is full of all the great and manifold sins that she has committed; thinks she hasn't done her duty since marriage and that she ought never to have come here; that she has no money to pay for being here. She looks miserable and her mental attitude is one full of self-reproach. She is taking Bromide of Potass gr XL with ½ drachm doses of Tinct. Hyosc. & Tinct. Valerian. Ammon.

" 19th Still in the same peevish discontented state though on the whole there is some improvement. Her bodily condition is a little better and there is not now so much difficulty in getting her to take food. Her complexion is of a better hue. Still taking the same medicine. Her delusions vary. Anything that is spoken about or anything that she reads, she thinks points to her. She is continually saying things are not real as for example a letter she got from her husband.

So p. 141.

157

Elizabeth McShaul
Admitted Nov. 3rd 97

Eliz. M'Phail. 42

Admitted 3rd. Nov. 1892.

Admitted to the East House on Nov. 3rd
Patient who is single. resides at 1 Kelvin-
side Terrace West. She keeps house and
is a Protestant. She is 42 years of age.
She has been insane for some months,
acutely so for only 10 days. This is her
first attack of insanity. She is not
epileptic doubtfully suicidal but is
not dangerous to others. District M.P. present
Medical Certificates I 'Incoherent statements
with intervals of brooding, refusing to speak'
— Other facts — 'Believes she has ruined
her family — Has threatened to destroy herself.
II 'Sitting the whole day beating the floor
with one foot & her cap with one hand &
refusing absolutely to answer any questions
believes she has ruined her brothers credit
thinks she is seeing the Universe' —
— Other facts — 'Performs meaningless
gesticulations.

Patient is admitted to the East House to-
night. She is melancholic & has been sleepless & re-
-fusing food. At times she has had attacks of ex-
-citement when friends have been quite unable to manage
her. She walked into the waiting room quietly enough
but resisted leaving her friends. Had a bath and was
put to bed. She lay there quietly enough but would
not speak lying with her eyes shut.

Nov 4. Slept a few hours last night and to-day is more rest-
-less. Considerable difficulty is being experienced

Elizabeth M Shail

in giving her a proper amount of food. She reacts a good deal. To-day she has spoken more. While she usually lies quiet enough she has had periods of excitement to-day when she rhythmically moves her arms about or rubs one foot against the other. She has been getting in & out of bed a good deal & has a linen dress put on. Her skin is very greasy & her bowels very constipated

5th. - Had 25 gr chl. & 35 Bromide last night and slept well. To-day she is more excited & the continual friction of one foot against the other has produced an ulcer on one heel. Dressed suitably dressed. In her quiet intervals she is getting a good amount of food but when restless it is impossible to get her to take anything. She will not then show her tongue or do anything that she is asked.

Nov. 8th Remains in much the same state as has been described. She has been kept in bed & her time wandering her hands about, keeping her eyes shut, & refusing to pay any attention to what is said to her She has intervals of quietness & then she sometimes answers questions & then she takes nourishment. She has been sleeping fairly well, & her bowels were well opened by Black Draught yesterday.

Nov. 18. There is little improvement to note yet. Patient has been very restless, but at the same time resistive, rubbing her hands & feet against one another, refusing to speak, or to put out her tongue or to do anything she is asked She has been having a prolonged warm bath

every night & is thought with some food evacuation. Her bowels are extremely constipated & she requires to be fed with all her food. In consequence of her great weakness she has on a thick woollen dress & that being lined keeps her warm. At night she has Chloral (25) & Bromide (35) and her nights have been very good

Decr. 12. The excitive element in this case persists & the reason speaks She is not violent, but is destructive to her clothes and has to wear a strong canvas dress & canvas boots. Her nights have not been at all good recently. She is more restless than by day & sleeps very indifferently. Often she has a draught of Chloral & Bromide. Some days she is very restless, continually moving about the room, following the nurses & touching but not destroying things. She takes food extremely well & has her bowels regulated — She speaks seldom, once or twice in a week to the nurses. She would not speak to her brother when he saw her, but he believes from the expression of her face that she understood what he said to her —

Decr. 23. She has had Paraldehyde at night for about a week & it has given her good nights. Up till the day before yesterday she had spoken very little but she then talked a great deal, wanted to know where she was, why she was not at home beside her friends &c. She also wrote a short note to her brother, asking him to come & see her & enquiring after her sisters' health. This has not however, continued and today she can hardly be got to speak. She is taking her food on the whole well, but is very restless, wandering about the ward. She has now on her own clothing.

Dep. 192

Mrs Benson

Prompt. 8th.

Nov 8th Down in ch 3 just now. She was so violent & so nasty in her conduct in the Infirmary ward that her change became necessary. She remains de-cumbent, confuses the identity of those around her says her name is not Benson &c. at present she is having Chlorae & Bromide in moderate doses with good effect. Her appearance is becoming very depraved & her language coarse - -

Nov 18. Improving a little generally. much quieter & working regularly. Speaks very slowly and seems to have no anxiety to get well. She has to be fed with a good deal of her food, but she gets & takes a good amount & her bodily cond$^{n}$. is rather better Mental action is still very sluggish, but it is hardly so perverted as it was -

Decr. 12. Perhaps a little better, but still full of delusions. Cannot believe any other fate is in store for her than that of being burnt alive. Retains her saliva & when spits it out as she believes it hurts her to swallow it. She works away unconsciously enough, but without much zeal. Taking her food much better. Moved not see her frequently. Believes she has no friends.

Decr. 23. Distinctly better & much pleased to see her husband when he was here some days ago. She is dazed in her cond$^{n}$. at times, and says foolish things, but she is much more intelligent & is now taking more interest in her own personal appearance.

1893.
Jany 9. At a standstill and not so well as she was some weeks ago. She is not so much interested in her work & after knitting a little she

Mrs Benson

often destroys what she has just done. She is very uncertain in her conduct, but seems to have lost many of the unusual feelings that she had. She takes her food much better & her bodily condn is fairly good —

Feby. 3. Somewhat better, but not mending rapidly. Looks with suspicion on what is done for her. Believes that letters she writes are not forwarded. Her bodily condition is fairly good & she has no active delusions. She works fairly well, but spasmodically & acts a great deal on impulse. Sometimes she will throw down her work in a pet, at other times she does it wrongly. She talks coherently, but at times there is a want of consequence in her remarks. —

Feby. 6. Worse during the last few days. For two nights she has not slept well and to-day her conversation is very rambling & she cant settle to do any work. —

March 20. Removed by her husband to-day. She was to be put into Bothwell asylum as a Parish Patient.

Relieved

Elizabeth Allan or Watt-
Admitted 11th Nov. 1892

Elizabeth Allan or Watt
Admitted Nov. 11th 1892

Admitted to East House on Nov. 11th 1892.
Patient is 50 years of age, married, a Protestant,
& resided at 32 McFarlane St. Glasgow.
This is her second attack of insanity, she
having had her first attack at the age of
40 years. During the first attack patient
was confined in Bothwell Asylum. The
existing attack has lasted ten days. Cause of
attack is unknown. She is not epileptic,
suicidal or homicidal — No 4 to.

Medical Certificate

I. Refused to converse because we were all lost,
became incoherent, rambling from one subject to
another, wished me to renew her youth by
removing the skin of my wife's face & putting
on hers — Her husband says at times she
is excitable, constantly talking & singing, at
other times depressed. Sometimes she says she
is living with Lord Cumberland and will give
him (the husband) a farm which she is to get from
the Duke of Argyll.

II. Extremely irrational in conversation. Says some
great mystery hangs over her & asks me to unravel
it. Takes me for Marquis of Bute and states
she also has turned Catholic. Thinks she has
some specific by means of which her soul will be
saved but declines to divulge it. — Her
husband informs me that she considers herself at
times related to Duke of Argyll & Duke of Cumberland,
that she talks for hours at a time incoherently.

Elizabeth Allan or Watt

Nov. 18. Patient labours under delusional mania & is at times very violent in her conduct & very nasty in her language. For a day or two after admission she was fairly quiet though free of delusions of an aggressive character. Then she became more excited, noisy at night, violent in a foolish way and now she is down in the 3 Gallery. Her delusions are very numerous mostly of a grand character tending many of them to ridiculous. She is a big fat woman & when excited she is most obscene in her language. She has been sleeping badly & is especially excited in the early morning, calming down often somewhat as the day goes on. She occupies herself willingly enough & is then quiet but she is not to be trusted & in a moment of delusional excitement she will smash the dishes she has been washing.

Dec. 12. Given a large escape valve of hard work this woman is not so bad. She works well & is not at all careful of what she does, venting her wrath on dishes &c. yet she is much quieter & has been sleeping much better of late. She is very silly & one seldom gets a rational answer to a question. She is in very good bodily health

1893.

Jany. 9. Little change to report. She is noisy often at night, and now & then she gets hypnotics (30 grs of Sulphonal) at times her language is very bad, but on the whole she is better than she was. She works well & is then quieter, though the quietness

Elizabeth Allan or Watt

is blamed at the expense of broken crockery &c. Her B.C. is excellent.

Feb. 3. Her husband thought her much better when he saw her recently, but as a matter of fact the improvement is very slight. She has periods of excitement especially in the morning when she swears & is terribly abusive. Her nights are frequently bad & she has Veronal now & then -

March 20. Sleeping much better and not requiring Veronal By day she is also much quieter and not nearly so abusive or coarse in her language. She works well & is rather disinclined to speak in answer to questions, avoiding observation if she can.

April 15. Improvement was steadily progressive in her case & she is to-day discharged

Recovered.

Isabella Burns White
Admitted Nov. 4th '93.

# Isabella Burns White

Admitted 14th Nov. 1893.

Admitted to East House on 14th Nov. 1893.
Patient is 31 years of age, married, a Presbyterian and resides at 1 Whitehaugh Terrace, Paisley.
This is her first attack of insanity and she has been 11 months insane altogether.
The supposed cause of insanity is Influenza.
She is not epileptic, suicidal or dangerous to others. There is distinct H.T. Patients brother is confined to Woodilee Asylum.

Medical Certificate: —

I Her mind is dominated by the delusion that she is the constant victim of plots — Other facts — Her husband states that for many months his wife has been unfitted for conducting her household in consequence of delusions.

II She is labouring under an idea that some persons are plotting against her and calls at the house in different disguises and uses different names each time. — Other facts — Her mother informs me that she mistakes her husband for other persons and threatens him with unpleasant and various other penalties.

Patient has 3 children the youngest of whom is 3½ years. She had an attack of Influenza in Nov. & Dec. '91. Thereafter she became depressed restless & sleepless. Under home treatment & also removal to the seaside she gradually improved. Since then, however, she has fallen back again and has had to be brought to this Asylum.

Nov 18. The illness of this patient came on after an attack of

Isabella Burns White

influenza & while she has improved, she has never been well since that time. On admission to the Asylum she was quiet, below the level of health in mental activity, and not inclined to talk much. She is a pleasant featured, well-nourished woman, with a sound constitution of body so far as can be made out. She has slept well since admission, has taken her food fairly well & only on one or two points has she shown evidence of mental disease. She is emotional, the least reference to her children sending her off with a torrent of tears. She says that she would be quite willing to remain here for a time but she does not see how her children can get along without her at home. It is the thought of them that makes her so dull. She is convinced that she is the victim of plots & conspiracies, and she says she does not think she has any true friends. The history of how these plots began she will not state, nor why she thinks she is plotted against. It is too long an affair to go into —.

December 12. Her husband thought her better when he saw her a few days ago. She asked him to tell her all that happened before she was brought here & why she came here. When he told her she said she did not remember many of the things, & could not believe that she had either said or done them. If she had been she must have been ill she confessed. She works very well here, is cheerful in manner & well-disposed. She is less emotional than on admission, looks on her stay here in a less morbid way & generally shows an improved mental state.

Isabella Burns White

1893.

Feb. 6th Very much better mentally & with a greatly improved bodily condition. She is cheerful and chatty & a good and regular worker. She does not seem to have quite recovered her mental balance so far as some things that took place during her illness are concerned, but she thinks that now she would do all right and she confesses that she has been mentally ill and that she did many wrong things before she came here. It is probable that she will go away soon on trial

Feb. 9. Away to day on trial.

~~Feb 28~~. Discharged to day
March 7th

Recovered.

# Janet Murdoch or Sullis

cont. from p 156.

1892.

Nov. 26th There has been some improvement for the last few days though this is variable. Three days ago her sister came to see her and this seemed to brighten her up. That evening she was quite cheerful and said she was perfectly aware that her former complaints about things were delusions. She still however considered some things to be unreal as for example the daily prayers. Next morning she was again depressed and giving expression to the same delusions. She said she should not be here but that she should be in the police office to answer for all her crimes. This state remained comparatively unchanged till this morning when she is much more cheerful, the cause evidently being a letter from her father. She had some doubts however whether this letter was really written by her father. Her general health has improved and her complexion is much better. She is sleeping pretty well and is taking her food without requiring to be fed.

Dec. 2nd Her manner which is like that of a whining peevish child has remained stationary for the last four or five days. She is very peevish and discontented always saying that she should not be here, but that she should give herself up to the police or else should be wandering about doing nothing. In fact as she herself sometimes confesses she does not know what she would like to do. She does a little knitting during the day but only at intervals. Her constant exclamation is "What am I to do!" She has got stouter lately and takes her food pretty well.

" 9th In much the same condition. She always puts on a specially miserable face when the visitor comes through. She is constantly whining.

" 19th Her manner is very variable. Yesterday she was somewhat excited and her face was flushed and she was walking about the gallery most of the day. This morning she was dull and depressed and had to be fed.

Janet Murdoch a Sullis
cont:

1892
Dec. 24th For the last two a three days she has been in a very resistive mood, refusing for a whole day her food and then after much persuasion taking it. She has been restless at night so much so that she has had to sleep in N°2 for the last four nights. This morning she is somewhat better but still very peevish and aching what she should do. Her general health is good.

" 28th After improving slightly she has gone back again and is very difficult to manage. She is with difficulty fed but if she is allowed to miss one a two meals hunger compells her to take more at the next one.

1893
Jan. 2nd There is no improvement. She resists everything and when anybody comes near her she motions them to go away and tries to get under the bedclothes. She has been in bed for the last day or two as she refuses to allow herself to be dressed and if attempts are made she tears her clothes. She also sometimes tears her night dress. She still sleeps in N°2.

" 4th A very troublesome patient to manage and one requiring a good deal of patience and perseverance to make anything of. She seems to notice all that is going on so she often opens her eyes to see who is there and when any person comes into the room it makes her more excited and she waves them away. She gets a draught of Bromide & Chloral at night and this makes her sleep better though the effect of it does not diminish her excitement and restlessness in the daytime.

" 6th She is better this morning. Sulphonal gr xx was given last night and she had a fairly quiet night though she didn't sleep much. She is up and dressed this morning though looking very miserable.

" 10th The variableness in this patients condition is still very marked and there is no real progress. Yesterday forenoon she allowed herself to

So p. 223

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Jessie Bain

Admitted Nov. 19th '92

Synopsis of Previous admission.

Patient was admitted Aug. 31st 1884. First attack
of 9 days duration - No known M.P. On admission
was startled looking & incoherent - On one occasion
attempted to leap out a window.
Bodily health and condition very poor - Anaemic,
pupils wide, tongue dry - chest badly formed,
left side flattened, whole front dull, respiration
hared
On several occasions had to be fed by stomach tube
Habits filthy - Very restless, noisy & have imaginary
voices. Became quieter before being
discharged but no note kept as to whether she
completely recovered or not.

Jessie Baer
Admitted Nov. 19 '92.

Private patient - readmitted to East House
For previous admission See Vol. XXXII p 473.
Patient is 46 years of age, single, housekeeper,
a Protestant & resides at 85 Sinclair St.
Helenaburgh. This attack of insanity has
lasted for some months. Her first attack
of insanity occurred nine years ago - 1884 -
She is not suicidal, epileptic or dangerous
to others - The cause of existing attack is
unknown.
Medical Certificate
I Has delusions - fancies people are in the
church next door annoying her - unsettled
and different from her former condition. —
Other facts — She wanders about the streets
at night and wants to go on imaginary journeys
and is violent.
II. She talks of herself as persecuted, in unheard
of and unreasonable ways by deep soundings
which pierce and cut her; of people coming
to her up by secret passages from below.
Other facts: — Her brothers inform me
that she is frequently angry and violent
without cause, beating & making noises
in the night.
Nov. 28th On admission & since then she has been very
free of delusions. mostly of persecution & these have
led to her being at times rather excited, but as
a rule she is pleasant & remembers well
having been here before.

Jessie Bain

1883.

May 22nd Her case has escaped being noted. It is one of delusional insanity, now tending somewhat to dementia, and since admission, a weakness of the right lung has prope[ared] very distinct evidence of of the upper part of that Her delusions are often o seldom is she miserable from dear that she is excited. As a rule w says that she is very a away home to Helensbu go on to say that hus is all & that the people that they are not real, make them real & the like being contradicted & give proofs from the B She reads the Bible a great deal & is a good worker, taking charge when she is well enough of a small dormitory & sleeping there. For a long time she did not sleep well & said that it was owing to the bed she was in & that if she got the same bed as she had when she was here before she would sleep all right. She got the bed, it pleased her & she has been much quieter. Her bodily condition is poor in spite of nourishing diet with extras. at present she has a tonic of Quinine & Iron with C. L. Oil, but she will not always take her medicine.

Jessie Bain

June 26. Just the same. She is not strong physically & there are evidences of lung disease probably of a tubercular character. Her mental moods are of 2 kinds, one pleasant & nice, smiling & having complements, the other angry & aggressive & repellant. She is a good worker & gets a good deal of her own way.

August 10. Has put on flesh wonderfully during the summer and at present there is no active lung mischief. She is extremely delusional as the annexed letters show & the delusions are of a grand character, she believing herself to be a Duchess &c. For that reason she dislikes eating at the same table with other patients & likes to keep herself by herself. She does a good deal of work & left alone is fairly quiet. At times she is abusive, says this house is for all manner of evil doing & that she was brought here to be basely used &c.

Septr 14. Free of delusions, mostly of a pleasant character except now & then when she becomes rather excited, says she is kept here for immoral purposes &c. B.M.C. fairly good.

Novr. 22. Very much the same. Usually pleasant, smiling & affable, but occasionally rude & saying this house is a house of whores &c. Her lung condn. is at present quiescent.

1894 January 4. An extremely delusional self-willed woman. Full of fancies such as that men come into her room at night that she is of noble birth &c. Sometimes she writes letters & they are usually very coarse in their contents.

Dft. 531

1

175 Jessie Dunn

1893.

May 22nd Her case has escaped being noted. It is one of delusional insanity, now tending somewhat to dementia, and since admission, a weakness of the right lung has progressed & there is now very distinct evidence of tubercular disease of the upper part of that lung.

Her delusions are often of a great character & seldom is she miserable, though sometimes from a fear that she is persecuted she becomes excited. As a rule when spoken to she says that she is very well & that she wishes away home to Helensburgh. Then she may go on to say that she is not surprised at all & that the people here are all shadows that they are not real, but that she cannot make them real if she tried. She does not like being contradicted & says that she can give proofs from the Bible for all that she says She reads the Bible a great deal & is a good worker, taking charge when she is well enough of a small dormitory & sleeping there. For a long time she did not sleep well & said that it was owing to the bed she was in & that if she got the same bed as she had when she was here before she would sleep all right. She got the bed, it pleased her & she has been much quieter. Her bodily condition is poor in spite of nourishing diet with extras. At present she has a tonic of Ammon. & Iron with C. L. Oil, but she will not always take her medicine.

June

1894 January

June 26. Just the same. She is not strong physically & there are evidences of lung disease probably of a tubercular character. Her mental moods are of pleasant & nice, smiling & having ... the other angry & aggressive & ... is a good worker & gets a good ... way.

... been wonderfully during the summer & there is no active lung mischief. ... delusional as the annexed letters ... show are of a grand character, she ... to be a Duchess &c. For that reason ... being at the same table with other ... to keep herself by herself. She ... fond of work & left alone is fairly ... times she is abusive, says this house ... owner of evil doing & that she was ... to be taken used &c.

... of characters, mostly of a pleasant character except now & then when she becomes rather excited, says she is kept here for immoral purposes &c. B.M.T.C. fairly good.

Nov. 22. Very much the same. Usually pleasant, smiling & affable, but occasionally rude & saying this house is a house of whores &c. Her lung condn. is ab. previous quiescent.

1894 January. an extremely delusional self-willed woman. Full of fancies such as that men come into her room at night that she is of noble birth &c. Sometimes she writes letters & they are usually very coarse in their contents.

Dft. 531

Letters of Ellen Bain

Jessie Bain

1893.

May 22nd Your case has escaped being noted. It is one of delusional insanity, now tending somewhat to dementia, and since admission, a weakness of the right lung has progre... very distinct evidence of ... of the upper part of that ... Her delusions are often ... seldom is she miserable ... from which that she is ... excited. As a rule ... says that she is very ... away home to Helensburgh ... go on to say that ... all & that the people ... that they are not real, ... make them real of the ... the being contradicted & ... give proofs from the B... She reads the Bible a great deal & is a good worker. Taking charge when she is well enough of a small dormitory & sleeping there. For a long time she did not sleep well & said that it was owing to the bed she was in & that if she got the same bed as she had when she was here before she would sleep all right. She got the bed, it pleased her & she has been much quieter. Her bodily condition is poor in spite of nourishing diet with extras. at present she has a tonic of Quinine & Iron with C. L. Oil, but she will not always take her medicine.

June

August

Septr

Nov

1894 January

June 26. Just the same. She is not strong physically & there are evidences of lung disease probably of a tubercular character. Her mental moods are of 2 kinds, one pleasant & nice, smiling & paying compliments, the other angry & aggressive & repellant. She is a good worker & gets a good deal of her own way.

August 10. Has put on flesh wonderfully during the summer and at present there is no active lung mischief. She is extremely delusional as the annexed letters show & the delusions are of a grand character, she believing herself to be a Duchess &c. For that reason she dislikes eating at the same table with other patients & likes to keep herself by herself. She does a good deal of work & left alone is fairly quiet. at times she is abusive, says this house is for all manner of evil doing & that she was brought here to be basely used &c.

Sept. 14. Full of delusions, mostly of a pleasant character except now & then when she becomes rather excited, says she is kept here for immoral purposes &c. B.M.T.C. fairly good.

Nov. 22. Very much the same. Usually pleasant, smiling & affable, but occasionally rude & saying this house is a house of whores &c. Her lung condn. is at present quiescent.

1894
January 9. an extremely delusional self-willed woman. Full of fancies such as that men come into her room at night that she is of noble birth &c. Sometimes she writes letters & they are usually very coarse in their contents.

Dof. 581

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Agnes Black

Admitted Nov. 22nd 93

For previous admission see Vol IV P. 454.

Agnes Black
Admitted Nov. 22nd '97.

Readmitted to East House, Nov. 23rd.
For previous admission see Vol. IV fo. 454.
Patient is 75 years of age, single, a Protestant, and keeps house, at Hawthornpark, Argyle St. Kotesay. The present attack of insanity has lasted from two - to three weeks - The cause of this attack is unknown; she is not epileptic not dangerous to others & is doubtfully suicidal. No A.P. known.
Medical Certificates: ——
I. She constantly wanders about the house, gesticulating and bemoaning her fate. States that she cannot work, that she is possessed of the devil, that she is killing her sister, but she cannot help it and that she would take in some way or other to do away with herself. — Her sister tells me that the conduct I have witnessed is almost unceasing by night and by day, and that the patient hardly ever sleeps.
II. She is constantly restless wringing her hands & stroking her forehead, saying "I am lost, possessed of the devil; no relief for death; people coming in at the window and talking all sorts and ordering me to go and work; I am killing my sister." — Other facts — Restless, night and day constantly crying out "What am I to do, I am lost, work going behind"

This old lady was discharged Recovered some months ago. For a time she kept well then she relapsed, showing the old delusions & became so difficult to manage that she is brought here.

# Agnes Black

On admission she is very depressed, wringing her hands, asking what is she to do, she can never be better, she is sure it is an evil conscience that is troubling her &c. Her bodily condition is pretty fair and she is not so far down as she was on her first admission. She is not averse to coming here, but does not think we will can do her any good.

Nov 29. Since admission she has been pretty restless, but now is beginning to settle & do some work. She has been sleeping well, having had for some nights a little Chloral & Bromide. She is still very miserable, - wailing over her bad conduct, her evil conscience &c. Thinks there is positively no hope for her & that her sister will through her receive great bodily harm —. She is eating well.

Decr. 12. Rather less miserable, but not by any means well yet. Believes she has ruined her friends, that she has killed her sister & that all here are too good for her to associate with. She shows an improved bodily condition, but is still miserable & fearful. Now she begins to interest herself in things & is working at a little sewing &c.

Decr. 23rd Better, but not very much more settled. Always asking anxiously whether she has not ruined her sister, whether she has not been the means of her friends being disgraced & she at the same time says, that the peace she is in is too good for her & that she should be in the worst place of all. She gains in strength and sleeps well without draught. Her self control is rather better and she can apply herself to tasks of every day life.

Agnes Black.

1893.

Mar 22. Her patient is now & has been for some time wonderfully well considering her advanced years, and might be quite well discharged from asylum control. But it would seem that social circumstances do not allow her being done about. She is certainly rather fretful, but that is natural. Certainly she has lost much of the miserable feeling she had when she came here, and what there is would be - - -

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Margaret Paterson Home ~~or~~ White
Admitted Nov: 30th '92

Margaret Paterson Home or Whit
Admitted Nov 30th '92

Transferred from Merryflats Asylum and admitted to the East House Nov. 30th '92
She is 38 years old, married & a Presbyterian.
This is her first attack of insanity and it has lasted about eleven months. The cause of attack is unknown. She is not epileptic, is doubtfully suicidal, but is not dangerous to others. There is distinct N.P. present - e.g. a paternal cousin was insane.
Medical Certificate
She is the subject of melancholia; She is depressed and does not take an active interest in her surroundings.

Decr. 5th Patient since admission has been depressed She does not appear to have any delusions but is sunken & depressed, refusing to speak unless in a whisper & declined to do any work. She has been sleeping fairly well since admission and is not regarded as being actively suicidal. She is well-nourished & takes her food well. —

Decr. 12. Much the same. Can hardly be got to speak above a whisper. moves about in a dreamy way. Listless & dull. She sleeps & eats well & works a little. Expression of her face is very dull & she shows no activity of mind or body.

Decr 27. She cannot be enlightened as to take interest in anything and is very dull & sluggish in all her movements. Her bodily condn is good.

183 Marg.t P. Hore or White

1853

Mar 22nd after a residence in the asylum of nearly six months it cannot be said that there is any real improvement in his patient's condition she is a case of apathetic melancholia, without obvious delusions, and sluggish and slow in all her movements. She has been tried to be roused in all ways that could be thought of but without obvious effect. She works in the kitchen but does not do much & unless watched she will sit without doing anything all day. All her functions are torpid. her bowels especially. & she has a pasty skin. that no number of baths seem capable of doing any good to. She replies slowly to questions, but is not incoherent. The battery has been tried but without any good effect. at present she is in the Infirmary

June 26. Nothing has done this woman any good She has been energised, tried in different Wards, & at different occupations, but all without result. Her husband having made arrangements for some one to stay with her no objections are raised to his taking her away.

July 1st Taken home to-day by her husband

Discharged Relieved.

Marg.t P. Howe or White.

1853.
July 15th Discharged Relieved

Janet Russell
Admitted Dec 8th '92

# Janet Russell

Admitted Dec^r 8^th '92.

Was admitted to the East House on 9th Dec^r
Patient is nineteen years of age, unmarried,
a Protestant by religion, has no occupation.
She resides in Glanquin, County Clare,
Ireland but when examined was residing
at 71 Kelvingrove St. Glasgow.
This is her first attack of insanity and she
has only been 7 days insane. She supposed
cause of attack is measles. She is neither
epileptic, suicidal nor dangerous to others.
No N.P. known. Her maternal uncle died here. Distinct neurotic history on her mother's side.

Medical Certificate

I She is in a state of maniacal excitement
being very restless and excited, noisy, violent,
incoherent in her talk, and delusive in her
ideas

II Talks incessantly and incoherently; says she
has been married to the devil; sings, curses,
prays all in one breath.

December 12. Since admission patient has been in a state
of mania, not very acute, and with short, but frequent
intervals of comparative calmness. She is a well-
-nourished girl with good features. Dentition is especially
good. Her palate is low & broad & shallow.
The cause of present illness is not quite known, but recently
she has had several severe illnesses - measles & scarlet-
fever & she has sustained 2 severe nervous shocks, one
being the death of a beloved sister & the other the loss
of a trunk from the sinking of the ship on which
he was engineer. It would appear that this illness

Janet Russell

has been coming on for some time. For about 6 mos she has complained of intense headaches, has been sleeping badly & has been changed in her disposition. Her aunt states that she has noticed that her pupils were very large.

Since admission too now she has shown a pretty well marked condition of excitement with a strong hysterical element. She will at times answer questions coherently enough, then she will burst into silly laughter, throw herself from her chair on to the floor or rush across the room. She has been sleeping badly. For two days she had small doses of Sulphonal. That has now been stopped & Paraldehyde given at night. As it is doubtful if it will prove of great efficacy. Her bowels are regulated & she takes a good amount of nourishment. Her pupils are widely dilated, and her tongue moist though coated. She is not specially destructive to her clothing but will not keep it on. So that she has on a linen dress & canvas boots. Her manner is one of aimless, silly excitement, with an element of suspicion & mischief.

December 23. She has settled down considerably but is still very foolish in her manner & at times impulsive & excited. She has had good nights under the exhibition of Bromide & Chloral in moderate doses. When out walking she behaves well when there are plenty of nurses but if she sees that the nurses' hands are free she behaves badly, gesticulating, shouting & attracting attention. She takes her food well & her tongue is now clean.

March 20. Now in cl 0 3 Sallees on account of her mischievous habits. For some time she had a seton in her neck and the irritation was kept up for some time but without any good effect. She is very impulsive & at times violent, her expression being often one of wickedness. She cannot be trusted much alone and in the grounds she needs some one always with her to exercise some control over her. Her bodily cond$^{n}$ is good & she eats well. Chloryhydrate is at present being given & she sleeps well. When her friends saw her recently she struck one of them and in the Ward she often attacks feeble patients.

May 22. Continues excited, foolish & silly & without any sort of self control. She is in cl 0 3 & is often unkind to other patients striking them &c. She laughs in a silly way when spoken to, but her conversation is usually fairly coherent. B.O.T.C. good.

June 20. Unchanged.

August 10. There is little change. In some points she is fairly sane, but she is very impulsive, tricky & wicked & very destructive. She cannot be trusted, but apparently has no delusions & often answers sensibly, saying that she will try to do better &c. The next minute she will seize a flower pot, or whatever comes to her hand & smash it. Her bodily cond$^{n}$ is good enough. She often sleeps badly & requires to be in a single room & to have hypnotics usually Sulphonal. That also lessens her impulsiveness. There is at times an erotic strain in her conduct & menstruation is not regular

Joh. 449.

Mary Jane Peskett

cont. from p 94.

1894

October 1st. During the past few months she has continued pretty well. She dislikes talking about herself and is rather reserved. Her mental state however is not that of sanity. She is under the impression that her manner of life should be a living protest against being kept here and it is by many little ways that she gives effect to such protestations. For example she will refuse to sing certain hymns, thinking they would inculpate her. As a rule she is quiet, civil and agreeable.

December 28th During the past week or two she has shown distinct signs of becoming 'high' again. She is more energetic - talks more and walks more. The garments she makes have a distinct character of their own. In addition her moral perversion is shown in many little ways.

1895

May 21st. Her general health and bodily condition continue excellent: She has been rather excited the last month or so and when in that state she likes to associate with the more discontented patients and run down everybody and everything connected with the Asylum. This she calls speaking the truth for which she has great reverence but which in her mouth generally consists of inaccurate statements.

To p 412.

Margaret J. Mitchell

From p. 132.

1892.

Decr. 12 (cont.d) She is at present taking her food very badly and she has Bromide & Chloral every night. Usually she has fairly good nights. Even at her best & quietest she is very easily excited & becomes very demonstrative & foolish. —

Decr. 23rd. at present she is very well and generally in a more stable condition. The nurses say that she is very vain & would spend half the day dressing herself, were she allowed. She is very easily acted on by external influences. a slight scolding makes her cry & a word of praise makes her blush.

1893.

Jan.y 17. Well again after a short period of excitement these periods of illness seem to be of shorter duration & lesser intensity than they were.

Her B. O. P.C. is very good —.

Feby. 6th Relapsed again & that very seriously. She has now been ill again for about a week and during this attack she has been using very coarse language. She swears and uses filthy language and cannot be spoken to. She is then defiant in her manner, does not believe she should be here — "D— it, Oswald, there's nothing wrong with my mind. Let me out you b— r". "Oh d— it all. So to Hell, and not speak to me &c." Her bodily condition is very good & there is not the amount of physical disturbance that one would expect with the excited cond.n She has Chloral & Bromide at night —.

March 4. after having been very well for about 3 weeks she has relapsed again and is very excited having to be in a linen dress. She is not so abusive

Margaret J. Mitchell
cont.

in her language, as at the last attack, but she laughs in a silly way and has evidently hallucinations of hearing. Her bodily condn is good.

March 21. This attack has lasted longer than any other and she is still excited with no evidence of subsidence.

May 22nd At present she is excited again, but the attack is not so severe. She has been ill a week & is thought to be emerging from it to-night. The attack was co-incident with menstruation as almost all have been. When she is well she is very well, has the habits of the ground &c. The dates of attacks their duration &c are here appended.

June 26. Better to-day from an illness lasting a week. Before that she was 3 weeks well & the illness before that was also of a weeks duration The attacks are both shorter & less severe than they were. —.

August 10. Remained well up till August 1st. Then she relapsed & that very suddenly & with a fit of crying. In about ½ hour she was quite excited. The previous week she had menstruated & got safely over the period. Better after 5 days & illness not very acute — Looking anaemic & complains of headache.

August 23 Very well at present. Benefitting in flesh & strength — Headache away & stronger —

September 14. Kept well up till now.

September 28th Relapsed to-day. quite suddenly. a fit of crying being first observed

Jog. 491

Miss Mac Phail

From p. 160.

1893.

Feb. 6th — During the last six weeks patient's condition has changed for the worse. She speaks very seldom, but has become very voracious and very stout. She eats anything in the shape of food and for her some time her habits were very degraded, and in the morning she would be found smeared with filth. Her face has become very expressionless and she takes no interest in anything. The progress of the case so far points to dementia & the outlook is very grave.

May 3rd. — Perhaps there is a little improvement here. She is now down in the Gallery and has a rather more intelligent look on her face. She speaks only very seldom but her habits are better and she is less resistive. She has little spontaneous movement & when pushed about the shows no resentment. Her bodily condition is good & she sleeps well.

June 27. — She is not getting any better. Does & spatchelts & very stout. Her habits are fairly good when she is looked after –

August 10. — No change. Seldom speaks & cannot be interested in anything. ——.

Sept. 14. — No change – Stout & eats heartily, but becoming more careless about her appearance & requiring much to be done for her.

Oct. 25 — No change.

1894

January 9. — Really she has become a little brighter. Shakes hands now & says Good-morning. Slightly less stupid looking than she was & rather more intelligent looking. Her bodily cond. is excellent.

Dop. 573

Ann Boyd Imrie or Cochran
Admitted Dec 1st '93

Ann Boyd Smee or Cochran
Admitted Dec^r 19th '92.

Admitted to East Sussex on Dec 1892 She is a widow, Presbyterian & Protestant & resides at 29 Belgrave Strat. She has been nearly three years insane this being her first attack. Supposed cause of mental condition was 'rose in the head'. She is not epileptic, but threatens to commit suicide and is dangerous to others so it is.

Medical Certificates.

I 'Imagines she is not in her own house and will force herself out causing a disturbance, has loss of memory, rambling in speech — at times does not know those around her, getting very violent and beyond control of the family' Other Drs 'At times is very violent both night & day coming to them at work causing great disturbance, ranting protection from some imaginary foes.

II 'She is rambling and incoherent in her statements forgetful of the past, imagines she is in other peoples houses' Her daughter says 'she is sometimes violent and strikes those around her & that she requires to be watched at night'

On admission patient is very excitable in a weak state of bodily health. Her skin is very dirty and on the knees & elbows there is a distinct eruption of psoriasis. Beside that there is an eczematous cond^n of parts of the head and her general condition shows a great want of care. Mentally, she is excited and incoherent, rambling in her state.

Mr Cochrane

ments & very restless. Her pulse is very unsatis-factory, numbering about 50 and her breathing is hurried. A satisfactory examination is impossible owing to her weak condn., but beyond numerous râles widely distributed there seems nothing abnormal in her lungs.

Decr. 19. In a very critical condition. Requires a nurse constantly with her on account of her great restlessness. Her strength is not being main-tained very well & just now she has 2 glasses whisky daily and is taking a fair amount of fluid nourishment. Her bowels have been freely opened. Last night she had 3ij Paraldehyde and slept about 4-5 hours. She wears at present a tied dress on account of her restless habits

Decr. 28. She has got over the worst of it, it is now hoped and is gaining a little in bodily strength. The mental excitement still con-tinues in the form of great restlessness & great mental confusion. She constantly mis-takes the identity of those around her. Thinks she is in her own house &c &c, and needs great care on account of her age & shakiness. She is now able to be up, but she will not sit still & rest but moves about the ward, addresses other patients in the name of friends of past days & at times annoys them. Chides those who are responsible for being lazy, and believes that she gets no food here; while in reality

Mrs Cochrane

/.

She eats very heartily · Sleeping better at night and getting a hypnotic when required. Her bodily condn and appearance has improved very much and the erupt.n of Psoriasis is disappearing

1893.

Febr. 6th She is giving a great deal of trouble owing to her interfering ways. Her condn is one of senile dementia without complete dementia, but with loss of memory incoherence of ideas and delusions regarding herself and others. She is extremely restless and never rests till she is completely tired out. Then she rests to gain strength to begin again. Her conversatn is at times witty in a way and at one time she must have been a shrewd woman. At the morning visit she will tell the Doctor that she has been up since five o'clock cleaning the house and working like a wee enjoy. That she has not had a bite of meat all day, and that she is just never in from buying tea & sugar. She is at times rough with other patients thinking they are people coming to her and she strikes occasionally, and seems the next minute to have no recollection of it. She has gained very considerably in strength and her appetite is enormous, but her speech is slightly slurring and there is a droop of the left cheek - both being pendulous - that points to organic brain mischief. It is impossible to get her to do what one wishes in order to test the nervous system so that an accurate diagnosis is not possible. When exhausted by the days restless moving about she sleeps well

# Isabella Catherine Hall

cont. from p 26

1893

Jan. 10th — This patient has been having abt 40 grs of Bromide of Pot. with ½ drachm doses of Tinct Cannabis Ind. & Valer. Aramon. ~~three~~ abt four times a day and the effect is very slight. She still remains exceedingly noisy and very destructive; tearing up her bedclothes and pillows. She has got rather thinner lately but not so much as would be expected from her continuous excitement.

" 18th — For the last five days Sulphonal has been given, beginning with gr X twice and rising up to gr XV three times a day. She is more stupid but still ~~she~~ is noisy though not of such a continuous, troublesome form. Her complexion gets more dark red in colour when under its influence and altogether she doesn't look so well.

Feb. 13th — Sulphonal has now been left off: at first it diminished her excitement but lately has had very little effect. She gets Chlor. gr XX & Bprom. gr XXX at night and has in consequence slept well for the last three nights. Her destructiveness and noisiness during the daytime remains unabated. Her general health is very poor.

March 11th — Continues as before - foolish, noisy and destructive. Bprom. & Chlor. is given her every night with some effect. She takes her food satisfactorily.

" 17th — A haematoma on the right ear, at lower part has developed. There is no history of a blow. It has been thrashed. She is very thin and looks very ill.

" 20th — Yesterday morning was in a state of prostration. She has been perfectly sleepless for the last three nights in spite of ~~two~~ full doses of Chl. & Bprom. To-night paraldehyde is to be tried. She was given whisky every two hours and towards the evening revived shown by her excitement and restlessness

1893

re-appearing. This morning her pulse is stronger and she is not so ~~feeble~~ prostrate.

April 11th In the last two weeks she has had Paraldehyde ʒi-iʒ every night with a beneficial effect. She is still very thin and weak and gets stimulants regularly. She is kept in the padded room which is the only safe place for her but she loves her mattress and blankets about all day. There is a very marked look of insanity on her face.

" 25th Paraldehyde is given regularly and in consequence she generally sleeps pretty well. In the daytime she is very restless and looking at her general condition she is evidently slowly but surely going down the hill!

May 5th She has been much worse lately and has now no strength to toss about her bedclothes. She however with her remaining strength sometimes manages to tear them.

" 12th Very ill. Her eyes are sunken and her cheeks hollow; more like that of a corpse than of a living person. Yet she eats everything given her. Stimulants are given freely. Even still when in extremis she shows her insanity by her foolish and unmeaning gestures.

" 14th Died this ~~evening~~ morning.

## Death on May 14th 1893

Cause of Death. Exhaustion from prolonged cerebral excitement.

No p m.

199 Elizabeth Stewart Dalgleish Berwick
Admitted Dec^r 21^st 1893

Elizabeth Stewart Dalgleish Berwick
Admitted Dec 21st 1893

The patient was admitted to the East House on the 21st Dec '93. She is 30 years of age married - the wife of an engine fitter & a Derby woman. She resided at 24 Balmano Street - This is her first attack of insanity and she has been about 3 months insane altogether - What was the means of bringing on this attack was a miscarriage she had - She is suicidal not epileptic however - nor dangerous to others. No known H.P.

Medical Certificates

I States that life is not worth living because she has been shut out for ever from God's love & Christ & that she will be dead in four days. Has sometimes meditated making an end to her life. When she tries to do her household work she gets confused & feels unfit to do anything. Her present illness has been sent by God because she did not walk up to her religious principles. Has sinned an unpardonable sin. Has told her husband & friends that she wd buy laudanum & do away with herself. Wd set crying in the house & when asked why she did so said she didn't know.

II She gives a confused & contradictory account of the miscarriage she says the beginning of her present illness. At present she is very depressed in spirits suffering from religious melancholia and is evidently suicidally inclined.

Admitted 22. Sat in a very depressed condn., wringing her hands, moaning & being acutely melancholic -

Elizabeth Stewart Dalgleish Berwick

1853.

January 31. Has is a case of acute suicidal melancholia since admission she has been very ill, & has watched for opportunities to do herself harm. One night she was found with a piece of coal in her possession & she said that she was going to strangle herself with it whenever she got the chance. She gives great trouble with her food & has to be spoon fed. Paraldehyde is being given at night and acts well.

Her delusions are of the greatest misery & she imagines that she is entirely lost, & that there is no hope for her. She has done every-thing that was wrong, & her whole life has been a tissue of falsehoods.

April 2nd The melancholia still continues though it is not now so acute as it was, and she is gaining a little in flesh. She has how-ever become very destructive in an aimless way, destroying her clothes, and picking at her skin. The delusions of misery & unworthiness persist and she cannot be got to interest her-self in any work or amusement. Her nights are still very bad & without draughts she only gets little sleep.

May 22nd Some little time ago it was decided to try her down in 6 to 2 and she is there now. Probably she is not so suicidal as she was, and her melancholia has now taken more the moist form and she wrings her hands, moves about the ward, & moans. She still requires to wear

a strong dress on account of her habit of destroying clothing, but she is not so bad in that way as she was, and now does a little work, such as knitting or rubbing the floor. She has been tried in the Laundry but not very successfully. She is sleeping well at night now without hypnotic, and is fatter than she was. Looking back over two months, there is some improvement in her condition, but it is not very marked as yet.

June 27. Perhaps a little less acutely depressed but not really much better. She now works & when doing so is at her best. But when she has no work she destroys her clothes, wrings her hands & looks a very miserable woman. She is sleeping fairly well & her bodily condn. is wonderfully good. She talks very little & can hardly be got to answer questns.

August 8. Not improving. Works a little & sleeps & eats well, but with a look of continual anxiety & considerable destructive tendencies —

Sept. 14. A very unsatisfactory case. Now & then she seems brighter & better, but always without delusions, she seems to labour under a load of misery. She works a good deal, but when not working she picks at her hands &c. Eating & sleeping well & always a case that one expects should be making more progress than she really is.

October 5th Wrote a letter to her brother the other day, & reads a little now. A good worker & best when fully employed. Speaks little & very depressed in appearance.

Sp. 239

Catherine Small Kinloch

# Catherine Small Kinloch

admitted Dec. 25th /92

£90

This patient has been admitted to the West House.
She is 41 years of age, single and a United Presbyterian.
This is her first attack and she has been about seven weeks insane, the supposed cause being her period of life. She is not subject to epilepsy but has threatened suicide and is dangerous to others. A maternal uncle was insane.
Medical Certificates I "She is absent-minded, perplexing to questions incoherently. She cannot remember where she was yesterday. She thinks that people are following her about; she also states that she has an inclination that she cannot resist to rise out of bed at night and go out and she cannot explain for what purpose."
II "She imagines that men and women come into her bedroom at night and frighten her: says she is constrained to run out of the house in the middle of the night; fancies she is watched and followed in the streets: is much excited."
This patient is pallid anaemic and unhealthy looking. She is menstruating just now. She is restless and there is an anxious expression on her face. She is quite unaware of where she is and thinks she has come to the wrong place. She is anxious to get away and when questioned about getting out of bed in the night and wandering about she denies ever doing it. She is a little reserved and won't speak about her delusions as she evidently thinks if she does so she will not get away at all.

Dec. 27th She is brighter this morning and her manner is very ladylike. She declines however to enter into a conversation about herself. She sleeps and takes her food pretty well.

" 30th For the last four nights she has required Bromide and Chloral as she did was restless at night and didn't sleep well. She is much more willing now to talk about herself and it

# Catherine Small Kinloch

is soon seen that she is full of delusions and has hallucinations. She looks troubled and anxious and when asked the reason she says she thinks her brother is dead. She also declares she hears people talking about her in the gallery and outside the walls of the grounds.

1893

Jan 4th Her general health has improved and she is not now so depressed looking but on the contrary she has several times got excited and sometimes at night she is very restless. She takes her food fairly and does a little sewing & knitting. She is anxious to get away. She still has hallucinations and refers sometimes to seeing people going about ~~she is~~ quietly, girls different from the other patients and attendants in the gallery.

" 6th She is continually hearing voices, sometimes outside, sometimes up in the ceiling and at other times in the wall. The voices, she says, often repeat Scripture as 'Heaven and earth shall pass away". There is sometimes difficulty in getting her to take her porter of which she gets a pint daily.

" 10th Has been more cheerful lately and is looking better. The hallucinations of hearing still remain in full force.

" 18th She is bright and cheerful to talk to and speaks quite readily and freely about the voices she is continually hearing. She sleeps pretty well but requires the aid of Brom. & Pot. gr 60 grs

" 24th Not very much improvement here as yet, ~~been~~ as she is greatly and constantly troubled with hearing of voices which disturb her sleep. She often gets up to listen at the keyhole. Her manner & is restless; she is continually turning her head now to one side now to the other as if she saw or heard something which attracted her attention.

1893

Feb. 15th Her manner and appearance is now more like that of a demented patient. It is with difficulty that she can be got to converse and she as a rule answers questions in monosyllables. She is evidently still under the influence of hallucinations. Her bowels are very obstinate and ordinary purgatives have no effect on her.

March 2nd For the past few days there has been some difficulty in getting her to take her food. Her bowels are kept open by regular doses of Castor oil. She has got thinner lately and does not show any mental improvement: she has delusions about the writer taking away bank books.

" 20th Some days she is brighter and more talkative than on others but on the whole there is no material improvement: she does not seem to be quite so much under the influence of hallucinations. She is unable to keep up a connected conversation.

April. 17th There is no improvement here. A visit from her brother who has returned from a voyage didn't arouse her in the slightest. B H & C. fair.

May 12th Great difficulty is experienced in getting her to take her food: in fact she resists anything that is done for her as for example putting on her clothes. She is very thin and her condition is unsatisfactory both mentally and bodily. She never speaks above a whisper. Her manner is timid and suspicious.

June 1st She has got very thin lately and has given more trouble as regards her food so much so that she has had to be fed twice with the tube which she resisted violently. There is no improvement mentally.

So p 282.

Elsie Adams or Shreff
Re Admitted 30th Decr. 1892.

1932
1942
40

53
40
45

Elsie Adam or Shieff
Re-Admitted 30th Dec. 92

This patient is 43 2nd attack readmitted to the East House
For previous admission see Vol. IV p 466.

She was discharged
Recovered from the asylum earlier in the year and went home. There she got on fairly well for a time but then began to have delusions about people following her and about her own mental & bodily condition. She said that she was unable to be up and working and that she should be nursed & taken great care of. She would not believe that her mother, who was an invalid & quite deaf had anything wrong with her and wished her to get up & work. She spread lies among the friends and would remain out late at night &c. In these circumstances she was in the late autumn removed to Montrose asylum & from there transferred here on her own wish.

On admission.
She is seen to be in better bodily health than on previous admission, but she is very reticent and will not say why she thinks she has had to be brought back to an asylum nor will she say why she wished to come to Sauchmarel. She gives expression to no delusions and when told what she had been doing when at home she smiles evidently believing that her friends have been deceiving the Doctor about her. She is sent to No 1 Gallery —

Elsie Adam or Shreff

1893.

Jany. 10. Was much chagrined at being sent to Colonial Gallery. She expected to be sent to a better one for which she does not pay, & where she does not need to be, but where she was on her former residence. She is very quiet & reticent & has given expression to no delusions since admission. She will not do any work, but sits with her hands wrapped in a shawl and with an open volumn of Sermons on her lap. Smiles when spoken to, in a superior way and answers some questions very briefly. She eats poorly and complains of the quality of the food she gets. Sleeps well, having a bedroom to herself.

Feby. 6. Just the same. She cannot be got to interest herself in anything, but sits as above described doing nothing & not reading simply gazing at the printed page. She gives expression to no delusions, but it is believed she has delusions and certainly her conduct & general manner is not that of a sane woman.

May 21. It is not easy to make much out of this woman but there is little doubt that she is insane & that she has delusions though she will not give expression to them at all readily. She takes no interest in anything that goes on, very seldom will she do any work of any kind, and she usually sits, vacantly smiling with her hands folded on her lap or wrapped in the folds of a shawl. It is certain that she has delus

relating to the sexual organs, and she complains at times of vague feelings in these parts and asks for a private interview + for an examn. When an interview is granted in the presence of a nurse she is not pleased + will make no statements again the complaints of her liver, but physical examination reveals no abdominal disease. She denies that anything is wrong with her mental condition, and says there was never any need for her being in an asylum, and that she has never been mentally deranged. Her bodily health is fairly good, but she is rather anaemic. She eats + sleeps fairly well. The night nurse states that she believes she is addicted to vicious practices, but of this there is no actual proof.

June 27. Just the same. Some time ago it was found that she was lacing her corset so tightly + wearing it so constantly night + day, that the skin round her waist had become bruised + sore. Her bowels were also very constipated. This has been put right. Mentally she is the same. Uncertain + peculiar + believed to cherish delusions to which she does not give free expression.

August 8. Rather better both mentally + bodily. Takes more + is more pleasant generally.

Septr. 21. Does not give expression to any delusions, but her manner is not that of a sane woman, nor does she behave as such. She is self-willed + obstinate, and refuses to interest herself in anything

Joh. 306

Margaret Nicol or Cameron
Admitted 6th Jany '93

Margaret Neal or Cameron
Admitted 6th Jany: '93.

Mrca Patient was admitted to the East House on 6th Jany: '93. She is 35 years of age, married & a Protestant. Her home address is Seaview, Battery Road Oban.
Her mental condition has been deranged for over 2 years. This is the first attack of insanity & the cause of the attack is supposed to be domestic trouble. She is not epileptic, suicidal or dangerous to others. No H.P.
Medical Certificates
I. Is dull & listless, sits with folded arms, can only with difficulty be got to answer questions & says she can give no reason for conduct which is stated below & which she admits. A few days ago she suddenly & without cause, half clad & barefoot, went up the street before daylight. This is her mother's statement. She also refused to go to bed two nights ago when undressed & sat down on the floor.
II. On questioning patient I find her memory is perfectly oblivious to acts performed by herself so recently as a few days ago. Patient also cannot be induced to enter into a rational conversation. She got out of bed & although not dressed went out of doors. She also refuses to go to bed at the proper time.

Jany 9. Patient is a fairly well nourished woman in a depressed condition. She has not since admission given expression to any delusions and is now in ward 4 Gallery. She sleeps well. She does not seem to feel at all acutely, and does not realise that she is in an asylum, though she

Margt Nicol or Cameron

says she know what sort of people are confined here.

Feby. 13. Since last note patient has come through various phases of mental disorder. She was first sent through to cl. 4 and for a day or two did fairly well, not doing much work, but being amenable to the nurses and fairly quiet. Then one Sunday morning she became excited and in church the excitement increased and she had to be carried out. She was sent down to cl. 3. and remained there for some weeks. Her conduct there at first was very peculiar. The excitement passed off in 24 hours and she became quieter. On speaking to her she would rise from her chair and her face & neck she threw into a series of movements. She twisted her head from side to side, arched her neck, swayed her body and unnecessarily rubbed the one hand against the other. Her speech was most affected & her air in imitation of a great lady. Without her answers to questions were quite coherent & she gave expression to no delusions. A favourite position was sitting with her sleeves rolled up above her elbows & her arms akimbo.

She became more sensible in some time & is now back in cl. 4 and working in the laundry. It is reported that there she works fairly well, but at night in the galleries she will not interest herself in anything. She will not read or knit nor will she give any reason for not engaging in any of the amusements.

Margt Nicol or Cameron

Admitted to the East I

March 20. Since last note there has been little change in her condition She is foolish & silly, but is rather better since she began working in the Laundry. Her bodily health is fair, and she has been sleeping better of late. Her calmness has delusions, but they are probably not of a fixed character, but taken up one moment & changed the next.

May 10th. at present she is very much more excited than she has been since admission & has had to be kept in from the Laundry. She is full of fleeting delusions & her behaviour at the moment depends on the delusion she has at the time. She imagines now that she is a Princess, and goes about the Ward in a correspondingly haughty manner, now that she is Jesus & then she kneels in Prayer or walks about with slow step & humble aspect &c. She is always more excited when the Doctor enters the Ward & at other times is even now fairly quiet. At present she has Chloral & Bromide in moderate doses at night

May 27. Excitement is now passing off & she is coming back to her old cond$^{n}$. She is quieter, though when spoken to, she often has peculiar almost choreic like twitchings of the muscles of the lips & face, & these are apparently beyond her control, at least she says so. Her nights are better and the sedatives are discontinued in the meantime. She is still in close gallery.

Dop. 371

Mary Wyston or Robertson
Admitted Jany 5th 93

Mary Wigston or Robertson
Admitted 5th Jany 93

Admitted to the East House on Jany '93
She is 55 years of age, married & Presbyterian
Resides at Braidwood Cottage, Carluke.
This is her first attack of insanity. It has
lasted only a few months. The cause of attack
is said to be stimulants & repeated. Not Suicidal
epileptic nor dangerous to others. No H.P.

Medical Certificates

I 'She has delusions. Imagines there are shellfish growing
on her fingers & that her fingers are branches of trees
or rh. insects are growing. Imagines there is a
child in bed with her & that she has rented a cottage
where she intends to keep horses.'

II 'She has delusions. Thinks that grass grows on
her fingers & the grass is deposited by birds & that
her son, aged 9 years also has grass upon his
fingers (She has no son of that age) She thinks
that this is Autumn & that she had been
clearing last year at this time.'

The history of this patient's
illness is briefly as follows. For years she
has been addicted to stimulants, taking princi-
-pally brandy & whisky & taking it almost
constantly but not often being absolutely drunk
The exact time during which she has been
taking stimulants is uncertain but her son
thinks about 8 or 10 years. More recently i.e. with-
-in a year she has been taking Laudanum &
morphia. About 9 mos ago she began to
complain of "Rheumatic pains" in her legs & arms

Mary Weyston or Robertson

and looking back over it now her son thinks that these pains existed though in less severity for 2 years before they became so bad. The pains were especially bad in the legs, and were not in the joints but in the calves of the legs. They began first about the toes & then extended up the limbs There was great sensitiveness of the legs especially the calves and this developed about 3 mos ago. She moves about with pain when her legs were rubbed. The pains in her arms were less se- -vere & her son does not remember that there was much sensitiveness to touch in them.

About 3 mos ago her son was awakened through the night by her crying. She was found lying on the floor of her room complaining of great pain in her abdomen, passing down into her legs. Two months ago she complained that she was unable to stand steadily. When she rose from a chair she swayed from side to side and has to hold to something for support This increased rapidly till about 5 weeks ago she could no longer walk nor put her feet to the ground. Her son says that her hair has become very grey of late, and that the ex- -pression - & he thinks the colour - of her eyes has changed. At variable intervals for some years she has complained of swelling of her legs.

The mental state of the patient precludes much importance being placed on her statements &

the information has been obtained from one of her sons. He states that she never complained of any tingling or scratch of pins & needles

20 July. This is a case of mental disease defendant on or complicated with Peripheral disorder of alcoholic origin. The symptoms in the hands & legs are typical of neuritis & need not be detailed. The mental state is one of delusions & hallucinations and the delusions are often of a most miserable character such as that our sons are being murdered, that all the patients she sees around her are Dead &c. Hallucinations of both sight & hearing have been & are still in a less degree present. She has had periods usually at night of acute excitement, when labouring under delusions, that e.g. her family were being tortured in the next room she has endeavoured to leave her bed & being unable to walk at all well, she has shouted & screamed. Her memory is very deficient & at times she has no idea where she is. Seeing her friends in the morning, she denies having been visited when seen in the evening. Her condition is a very unhappy one, but of late it has seemed that there was slight diminution in the general symptoms & in the intensity of the delusions. Dose of Potassium was pushed at first without effect. Now she has a Chloral & Bromide draught at night & antipyrin powders to relieve the skin sensitiveness & pain generally. Jo. A. 451

219

Helen Shankland
Admitted Jany. 7th '93

Helen Shankland.
Admitted Jany: 7th '93.

The patient was admitted to the East House on Jany 7th 1893.
She is 27 years of age, single, a blackbordercer by trade, & a Protestant. Her place of abode is 58 Weaver St: Glasgow -
She has been ill mentally for 2 years. This is the first attack. The cause of attack is unknown. She is not suicidal, nor epileptic but is occasionally dangerous to others.
No H.P.
Medical Certificates.
I 'Forgetful, irritable, excitable, sleepless. Has delusions. Supposes people on the street watch her & some attempt to do her injury. She is unable to take care of herself.' Her mother & sister corroborate the above. They also say that at times she becomes violent. They are becoming afraid of her.
II 'Talks about people under her bed & passers by making a fool of her & some mysterious loss of money. Is incapable of taking care of herself.'
Her mother says she is at times very facetious & excitable & at times very violent. That she has been mentally deranged more or less for the last two years.'

This is a case of chronic delusional insanity, the delusions being very numerous, having reference to her food, to the identity of those around her, and to her special senses. She is a well made, well nourished woman, with sound thoracic & abdominal viscera and no abnormality

Helen Shankland

of organs. There is no abnormal condition of any of the reflexes to be discovered. She is not inclined to talk much, but answers questions quickly & sensibly enough. She does not know for what reason she has been brought here and asks for paper to write to her friends to come and take her away.

Jany. 14. Has given many evidences of her insanity since admission and is proving a rather intractable patient. She has delusions about her food, believing that it is not good food, and she has often to be forcibly fed with the spoon. She has not been sleeping well and is the subject of hallucinations, hearing voices at night and rising from her bed to speak back to the imaginary persons or to see where they were. She said last night that a carriage & pair was coming for her. Someone had told her that, she said, but she did not know who it was. She is of a stubborn disposition and is not as yet doing much work, nor taking any interest in her surroundings.

Feby. 10. Working now and on the whole better in some respects, but not in respect of her delusions. These are as numerous as ever, and her conduct is very much influenced by them. She takes food badly, requiring to be spoon fed every now & then, but she is sleeping better, and is more easily induced to knit, sew or do other household work. The nurses say that she has some delusions relating to the sexual organs.

Helen Shankland

Feby. 20. She has also some delusions about marriage & believes she is kept here because some man is very fond of her & her friends dont like that. She is lazy & difficult to get to do any work. Her bodily condition is better than it was and she takes her food well —

May 8. A very resistive, obstinate woman free of delusions and assures that nothing is wrong with her. & that she should be away. She sits at the window at night waiting for a carriage & than that is to come and take her away. She says that she sees her brother every day in the grounds, & that we wont allow him in to see her —.
Her bodily health & condition are very good & she works a part of the day - rather unwillingly in the Laundry —.

June 27. Believes in the same delusions & is no better mentally Bodily in good health & stout —.

August 9. No change. Becoming very resistive & disinclined to talk, except simply to say. "When will I get home".
She is stout & sleeps & eats well —

September 14. Above delusions of late. Believes for example that she is matron of the laundry. Also hallucinations, such as that she sees her mother standing at her bedside at night. Says that a man in the dining hall is a friend of hers &c. Tends to incoherency in her talk. Her bodily condition is very good. But, as may be gathered, her mental condn shows no improvement.

Oct. 25 No change. Delusional. Getting fatter & in good health

Jof. 517

# Janet Murdoch a Sullis

cont: from p 172

1893

to be dressed, took her breakfast herself and spent most of the forenoon walking about the airing-court with an attendant. This morning she had to be fed and has refused to allow herself to be dressed. She has been getting Sulphonal gr x twice a day and this has now been increased to gr xv.

Jan. 18th She continues in much the same condition and therefore for the last two or three days she has been kept down in No 3. Sulphonal was stopped two days ago as it was found that while it made her stupid and impaired her walk it didn't really do her any good. She continues to walk up and down the gallery, often trying to get into the bedrooms but when in coming out again in a few minutes. She mutters indistinctly and if anybody approaches her she waves them off with a swimming motion of her hands saying 'Go away'. She takes her food as a rule by herself if left to take it her own away which consists in having a walk up and down the Gallery in the middle of her meal.

" 24th She continued in the same condition up till two days ago when for one day she sat most of the day instead of walking up and down. Yesterday she was greatly improved. She looked composed, kept her eyes open and conversed in a fairly rational manner. She addressed the writer by name, recognised that she had been shifted down to a different Gallery and acknowledged that it was on account of her bad behaviour.

The improvement was too sudden to last and this morning she is back again to her old penitent state.

" 30th She has not been so excited of late and instead of walking about all day she sits still with her eyes closed, her hands joined as if to protect herself and a look of misery on her face. Her attitude becomes intensified if approached. This

Janet Murdoch v Tullis

1893

morning she is a little more sensible and will answer if spoken to. She voices of the other patients, she says, are there to torment her.

Sept. 15th Remains in much the same condition and generally has a look of misery on her face. She is full of delusions with regard to herself; thinks she is dead, that she can't speak or walk etc. She is thinner than on admission and her figure has undergone a change. It is bent. She takes her food well and as a rule has good nights.

March 2nd Has now been removed back to No. 4, not because her condition has really improved but because she does not disturb the others. She walks about nearly bent double with a look of abject misery on her face which is intensified if anyone comes near her or attempts to speak to her. She is full of delusions as that she can't speak or is dead etc.

" 20th There is some slight improvement in her condition. Her misery is not so intense nor profound as formerly. She still wanders about & whining and complaining but in a half hearted sort of manner. ~~Her~~ She is not so bent in figure and her face is fuller and more natural in expression.

April 17th There has been no permanent change for the last month. Some days she is better; others she is worse. She goes about the Ward whining and if spoken to she says 'Leave me alone' or 'I am not Mrs Tullis'.

May 12th Her melancholia has not been so intense lately nor so excited. Her behaviour gives one the idea of a spoilt child. There is no real improvement.

So p 232

# Robina Reid. 32

admitted January 18th 1893

This patient has been admitted to the West House.
She is about 32 years of age, single and a Protestant. She has been about three years insane and this is her first attack. The cause is uncertain. She is not subject to epilepsy, but has threatened suicide and is dangerous to others. No H. P known

Medical Certificates. I " She is irritable and sulky: sits with pursed eyes; refuses to enter into general conversation but talks volubly and excitedly about people trying to poison her for the last two and a half years"

II " She is surly and rude when addressed. Is reticent but not unwilling to talk about fancied troubles. Has delusions that people want to poison her and that she is a victim of general bad treatment. Says she dislikes work and would prefer to sit all day and do absolutely nothing."

This lady has been residing for some time at a Home. She has been insane for 3½ years but lately has been so troublesome that she has had to be certified and brought here.
She is slightly made and but seems in good health.
On admission she was quiet but sulky, would hardly speak. She was very indignant that two attendants should have been sent to bring her here.

Jan. 20th She eats and sleeps well. She is very sulky and talks in a peevish manner. She has not recovered from the shock of being brought to an Asylum.

" 24th There is not much to note about this patient. She is quiet and generally tries to escape observation. Her manner is peevish and sulky and she sometimes refuses to speak. She sometimes works a reads but chiefly sits idle most of the day.

Feb. 3rd She has lately been in a very bad temper and has torn to pieces three of her dresses in succession. Her reason for doing

# Robina Reid

1893

so is that she thinks for this she will be sent away from the Asylum and so regain her liberty. She now and then bursts into a querulous complaint about being poisoned and ill-treated both here and at the place where she previously resided.

Sept. 15th An unbearable canvas dress has been given this patient. Instead of resenting having to wear such a dress she seems rather to like it especially the checked pattern. She has been more amenable lately. Her general health is excellent.

March 2nd Had an outburst of temper yesterday in which she stormed and raged and used regular 'Billingsgate'. She was sent down to No: 3 for the day but it does not seem to have had much effect as her bad temper still continues.

" 17th Is now quieter and more amenable. She works a little and with some persuasion can be got to read. Her general health remains good.

" 28th The unbearable dress has been taken off and she has now an ordinary one on. She is pleasanter and more inclined to talk.

April 10th Had an outburst of passion two nights ago in which she tore open her box and destroyed some work she had begun and also tore her blankets and cut her hair. She raved about the bad treatment she had been subjected to and swore vigorously.

May 12th Has been quieter lately but at most times she has on a sulky expression though now and then she smiles to herself especially after being spoken to. She does fancy work but has to be looked after pretty sharply as she would do nothing at all.

# Robina Reid

1893

May 31st — Her sisters came to see her yesterday and were met by a storm of abuse. The atmosphere has not yet cleared up. She was raging this morning at apparently imaginary persons and she seems to have hallucinations.

July 24th — There has practically been no change during the last two months. Her condition varies. As a rule she sits doing nothing with her head hanging down and her eyes closed. She is fairly tractable and can be got for a time to read a book or a paper. Now and then her sullenness comes to a point and she storms and rages, fighting with the attendants and trying to break windows.

Sept. 13th — On the whole there is some improvement manifesting itself in various little ways as for example she will now eat some kinds of food which she wouldn't before as she thought it contained poison. She has now been quiet for some time although the sulky expression of her face has not relaxed.

November 4th — She is practically unchanged. Her moods vary and any little thing upsets her as for example a new patient was brought into the Gallery to which Miss Reid greatly objected. She refused to sit at the same table with her, called her a 'thrasher' and evidently had many delusions. In her excitement and rage she broke several pains of glass and a flower pot, for which she was sent down to No 3 where she spent a week or two. She has a number of delusions: thinks that men come up to see her but that they are intercepted by the attendants.

To p 233.

Mc ip Hazelton

From p. 22.

1893.

Feby. 3. (Cont.) become somewhat more dreamy & abstracted & though she works well she is found at times standing gazing vacantly before her. Says she is thinking of "nothing". Her mental condition is unchanged.

March 22. This is not an easy case to make a note about Practically she has changed more since last note. She is rather better bodily but mentally she is the same, still with the same mental anaesthesia. She cannot be worse than she is, she says & she laughs to scorn the idea that if she were able to be elsewhere she would stay here.

June 27. Gone to Stirling for a change of air. mentally the same.

August 10. Back some time ago from Stirling. But no improvement. Working again in the Laundry. Thinks she is as insane as she possibly could be & that no one in the house is as bad as she is. —

September 14. Her menstruation has been very profuse recently though she has been regular enough. just now she is rather pulled down by it & is resting for a week. not doing any Laundry work. Her mental condition shows no change.

October 9th Looking much better. — No change mentally —

Nov. 22. many of her finer feelings seem blunted & her attention to little personal details is deficient. She is more untidy, less womanly & at times perhaps less modest. —

Miss Hazelton

1894

February 23. Miss H. has changed little during the past 3 months. She still declares that mentally she is about as bad as she could be, that all her mind is gone, that she cannot think, that her brain is gone &c. She is in fair physical health and has altered a good deal during the past few months. She is rather indifferent in manner & little influence it has over her.

April 16. There is no change. She is apathetic & nothing seems to influence her. Bodily she is fairly well.

May 24. For some weeks Eliz. H. has been staying at the Cottage coming up daily to work in the Laundry. She shows much more deterioration of mind than before & it is doubtful whether she is quite suitable for such liberty as she gets. She was observed when in the grounds recently to micturate in a very public place & in an immodest way & without any sense of decency. Again when in the Laundry during recess at tea she stooped down & exposing her legs pulled up her hose evidently without any idea that she was doing anything in the least out of the way. She is very distracted, cannot be got to back much, sits for hours silent & only works in a routine way & without spirit or zest. She menstruates regularly & does not so far as is known masturbate.

June 29. In consequence of the little incidents mentioned above she has been brought back to the House. She shows a great blunting of the finer faculties, and is very careless & apathetic. Yet in some respects she is sensitive for she blushes often when she gets the least surprise or fright. Her bodily condn. is good

Jof. 663

Mrs. McVicar

From p. 120.

March 24 Shortly after last note she began to improve & did not in a gradual but satisfactory way and for about a month she has been very well. She is discharged from the asylum to-day & her condition distinctly justifies her being discharged as

Recovered.

Janet Murdoch or Sullis
cont. from p 224

1893
July 24th She wanders up and down the Gallery and is hardly ever at rest, with a face the picture of woe which is made worse if she is taken notice of. Her general condition is good.

Sept 13th Now and then there is a slight improvement but she soon relapses and her condition has been practically the same for some months.

Oct. 3rd Her husband has determined to give her a trial outside in the country so she was taken away to-day.

Discharged Relieved
on
October 3rd 1893.

# Robina Reid

cont: from p 228.

1893.

Decmbr 30th She has been quiet and fairly civil for some weeks; one reason for this being that another patient who has been admitted lately is also an adept at using abusive language and Miss Reid dislikes any rival in this accomplishment.

1894

March 21st There is no change. She refuses to do any kind of work but can be made to read etc. She lately cut part of her hair off for pure spite.

June 28th She has been rather more amenable lately and has gone to Church and gone outside more. Now and then she has her usual outbursts.

October 1st She remains in much the same condition. She is very delusional but generally keeps them to herself.

Decmbr 28th Yesterday she got nine teeth pulled out under gas in order to make room for an artificial set. Consequently she is in bed this morning.

1895

March 29th About a month ago she got the rest of her teeth removed. Chloroform was given and she was very excited both before and after the operation. She thinks that by when the artificial set of teeth are put in she will be made new altogether and will consequently be able to leave the Asylum.

To p 409.

Mr Cochrane

From p. 196.

1853.

March 11th This old woman remains pretty much excited & there are signs that her strength may give way under the prolonged excitement. She bears hypnotics very badly, and any amount of apparent restraint increases her irritability. It has been found necessary simply to humour her as much as possible. Her pulse has shown signs of failing in the shape of irregularity & weakness and she becomes tired out now after a shorter period of excitement. Cough troubles her a good deal, and one lung behind is slightly congested

March 30. after being worse mentally & bodily for two days she sank & died A. Dan from pure exhaustion following long continued senile excitement & pulmonary congestion

Death

No P.M.

235

Margaret Crawford Duncan 40

" : Admitted 6th Feby 1893

Margaret Crawford Duncan 40
Admitted 6th Feby 1893

Admitted to the East House on 6th Feby 1893
She is 40 years of age, single and a Presbyterian.
She is a Sewer or Cutter out of Boots and resides
at 90 Great Hamilton St. Glasgow. This is
her first Attack of Insanity and it has lasted
about 4 months. The supposed Cause is
Overwork in nursing her Mother. She is
Suicidal, but is not epileptic or dangerous
to others. No. H. P. known.

Medical Certificates

1. "She says she is the Devil, that her soul is lost
and that there is no hope for her, as she has
committed the unpardonable Sin; is profoundly
melancholy; is suicidal."
2. "Seems very depressed and melancholic. Thinks
that God has judged and condemned her and
that her case is hopeless & that no one can
do her any good."

admitted to day in a very
depressed condition She is a little woman with
well formed features and pleasant expression.
Her expression is one of considerable anxiety
and she talks about her own case freely. Her
whole life she says has been one of selfishness
she has never had a thought for any one except
herself & though she allows that she loves her mother
yet the love is a very selfish one. She says that when
her mother was ill she did not give her the attention
she needed, that she neglected her & often slept when
she ought to have been awake nursing her

She moans & wrings her hands, and says that there was no use of her coming here for no one can do anything for her. She is past all help. She does not express any wish to die

Feby. 7th Slept none last night but was quiet. To-day a physical exam. shows her to be fairly well nourished. She shrinks from being examined, evidently believing that some harm is to be done to her. "Oh don't inject anything into me" she says Her tongue is clean & her abdominal & thoracic organs sound to ordinary examination —

Feby. 11. Beginning to improve. She talks very frankly about herself & about her belief that she is the devil and she is quite sure that as there is only one devil no one else can be that individual as she is it. She wears a look of resignation & considerable depression and thinks it a pity that she should be here occupying a bed & so keeping out some one else who might derive benefit from being here. She is certain that nothing can be done for her. Speaks much about the unkind way she treated her mother. It may here be said that she has always been a dutiful & unselfish daughter, working hard in a factory & nursing her mother faithfully. She has a symptom once observed once before by the writer & that in a very similar case. It consists in the emission of a sound caused maybe by a spasmodic action of the glottis. The mouth remains shut and this short sound something like a clearing of the throat is quite beyond her control. On the day after

admission it was very marked, not being present when she was speaking but coming about every 20 seconds when she was silent & lasting for about an hour at a time. She says it has been present for about 6 weeks.

She is now beginning to interest & occupy herself and is a little brighter. She is sleeping & eating fairly well. Quinine & Iron tonic is being given.

Feby. 13. Has taken to keeping herself away in corners whenever she gets a chance. Does this because she is so unworthy, and because being the devil she should not be in the company of decent people. She shows little change, but takes her food well and sleeps well:

Feby. 27 Regarding some of the patients recently admitted Miss Duncan has had peculiar delusions. She believes that they are Divine and that they have been sent here in order that she may make her peace with God by worshipping them. She has therefore fallen at their feet, and cried. "Have mercy" &c. telling them that she has done much that is wrong, but that they have power to forgive her if they will only use it. She will not leave them alone, but beseechingly follows them, imploring with bended knee & folded hands & supplicant aspect that they will have mercy upon her. The effect of this on the other patients has been varied & sometimes almost ludicrous (see case of Miss King p. 271). Miss Duncan's bodily condn. is improving & she is sleeping well. Her look of wanderment & wretchedness is not now so marked

Jph. 279

Mrs Berwick

From p. 202.

1894.

January 9. Now working in the Kitchen, but doubtfully any better. She is extremely depressed & difficult to get to interest herself in anything. Her bodily health is good.

Febry 23. Not much change. Works regularly in the Kitchen but is still depressed & fearful. Her bodily health is fairly good, but she has never menstruated since admission.

April 16. A very little better, but not much. She is dull & with very little spirit or life about her. She works in the Kitchen, does not give expression to delusions & she sleeps well. But she seldom speaks, has an anxious expression of countenance, & left alone will take no interest in anything.

May 24. Very much the same. Wears an aspect of continual depression, and is never without a pained look on her face. She works regularly in the Kitchen & does well.

June 27. Is rather brighter and is working better. Wears a less doleful aspect, and talks more readily. Does not give expression to any delusions, and the cloud of depression seems to be gradually leaving her.

August 20th Up to a certain point she improved, but at present the improvement is very slow. She is no longer de-pressed, but is pleasant, & smiles. She is very quiet & avoids observation. She was sent down to live in the Cottage about 3 weeks ago and it has done her some good. Probably now she would do quite well at home and her brother is willing to take her to live with him.

Mr Berwick

1894.

Oct. 16. Discharged today by minute of the Parochial Board. She goes to Edinburgh to live with some friends.

—Relieved—

241

Mary Clark
admitted 7th. February.

Mary Clark. 65.

Admitted 7th February '93

Mrs Admitted to the East House on the 7th February 1893
She is 65 years of age, single, and a Protestant.
She is a domestic Servant and resided at Kinloch,
Dunkeld, Perthshire. This is her first attack
of Insanity and it has lasted about 14
months. No cause is known. She is not
epileptic, suicidal, or dangerous to others.
Her mother was insane during the last few
months of her life (She died at 64.)

Medical Certificates

1. "Intense mental depression, with a fixed
idea that she had committed some unpardon-
-able sin, and was unfit to pray or go to
church. On the morning of the 2nd
inst. at 2 A.M. she exposed herself before the nurse
attending her & stood like a statue staring at the
jet of gas until ordered into bed. During the afternoon
of the 4th and morning of the 5th inst. She kept
whispering constantly & shouting that she was
going to be murdered & insisted on being dressed
saying her clothes packed to go to London"

2 "She is depressed and believes herself to be subject
of persecution on part of her fellow servants.
She gives details of some of the acts of persecution
sufficiently indicating their imaginary
nature. She speaks of distinctly hearing
voices & sniffing which no one is present"

Patient is a well-nourished woman
brought to the asylum under the belief that she
was to consult a doctor regarding her eyes. On being told

Mary Clark

1.

that she was to stay she became very much distressed. assured she that there was nothing wrong with her, but in the end went quietly enough to the Ward. She is a pleasantly spoken well-mannered woman and has been nurse in a lady's house for over 20 years.

Spoken to some time after admission about her mental health she was not at all communicative. She said that she had been very much troubled of late by petty annoyances and said that these may have lowered her bodily condition. It cannot be said that she has "intense mental depression". On the contrary she talks away fluently enough on many subjects and her expression of face is not at all characteristic of depression.

The nurse who came to the asylum with her has been with her for a week and she stated that she has been sleeping badly. that she has often noticed her talking to herself and listening to hear some imaginary person reply to her. Trivial things disturbed her very much? the arrival of a new bonnet so upset her that the nurse had to sit up with her for some hours.

Patient's bodily condition is good. She hears badly with the right ear. The right eye was operated on successfully some time ago for cataract, and there is now a commencing cataract in the left eye. Her tongue is clean? To an ordinary examⁿ her various organs are sound.

Mary Clark

Feby. 10th Sent through yesterday to the 4 Ward where she is doing very well. She sleeps & eats well and replies well to any question. She repeats however that there is nothing wrong with her and that she should not be here, and she has not given expression to any delusions either to the Doctors or to the nurses. She works well, does what she is asked and she is not evidently at present under the influence of any delusions nor does she appear to have any hallucinations.

13th Remains the same. A quiet lady-like patient who has not given many evidences of mental disorder except great unwillingness to speak about herself or her thoughts. She is taking her food & sleeping well.

27th Since last note she has shown herself to be very much under the influence of hallucinations especially those of hearing. She says that some one just outside the window annoys her very much at night by shouting out bad names at her, and last night she said that some one was under her bed & when no one was found there she had to examine all the other beds in the dormitory. She said one evening that a rabbit came under her window & annoyed her very much. She is often noticed to be talking to herself in a whisper and it is thought that she then hears voices. Apart from these incidents she is quiet & reserved, usually sleeping well & conducting herself well. She is a willing worker and at all times polite, and neat in her dress. She eats fairly well.

Jofs. 277

245 Christina McGavish or Cameron
Admitted 10th February 1893

Christina McTavish or Cameron
Admitted 10th February 1893 47.

Mica

Admitted to the East House 10th February 1893.
Patient is 47 years of age, married, & a Protestant.
She is the wife of a Publican and resides at
127 Greenhead St. This is her first attack
of Insanity. She has been peculiar for 13 years,
worse for four years, & much worse for 3 months.
The supposed cause is Childbirth as it was
after that she became peculiar. She is
not Epileptic, has threatened to commit
suicide and at times is dangerous to others.
She has a sister who is peculiar and
a cousin in Lochgilphead Asylum.

Medical Certificates

1. "She is unable to be trusted to have proper
control over her actions at home and abroad;
might readily become suicidal & homicidal.
(b) She has aimlessly turned household belongings
topsy-turvy & been almost unmanageable at
times. Within late years the nerves changed
disposition, is unwarrantably jealous, talks
obscenely and searches for some unseen thing
believed of poisoning."
2. "Takes no thought about her home and almost
daily in all kinds of weather wanders about
the city. She told me recently that her husband
had poisoned mine me. She is jealous of her husband;
without cause. Her husband says that recently
she told him not to live in the house alone with
her or he might find her some day in the Clyde
or over the windows"

## Christina McGavin or Cameron

Brought to-day from her house to the asylum by two nurses. When she knew they had come for her she made an attempt to get over the window. On admission she was quiet enough, but she had to be carried from her house to the cab, and resisted all she could, shouting & making much noise

She is a weak, built fair woman of good appearance, with considerable growth of hair on lips & chin. On her right ankle there is the scar of an old varicose ulcer, and her cheeks are marked by capillary haemorrhages. Otherwise her thoracic & abdominal organs & general system seem healthy.

Feb. 13. She is very talkative, saying that her husband has put her into the asylum to gain his own ends, that he is a vicious man & for some time has been of dissipated habits. She denies that she was in the habit of wandering about the streets at night, but says it was women who said that about her. There is in her conversation no incoherency, but an amount of irrelevancy, she passing from one subject to another without there being any evident connection between them. She has a hesitancy in her speech, not amounting to a stutter, and not the same as a drawl. After talking this morning for some time about herself & about the great injustice she suffered in being brought here she became very emotional and wrung her hands.

Feby. 21. Very reticent about her mental condition only repeating that she is very well & need not be here. She is in ward now & behaving very well there. She knits sews &c, & is quiet & pleasant. She has not yet to the nurses there given expression to any delusions or other symptoms of mental derangement. She eats & sleeps well, but troublesome diarrhoea annoys her. —

Feby. 27. Her husband had a long conversation with her recently and thought her much better. He said, that to him she gave expressions to delusions, much the same in character as those noted in the Certificates, but not to the same extent. So in here she has not in spite of many conversations said anything that could be called a delusion. She said that she never went to the Hotels where her husband says he heard of her having been, but that a cousin of hers a fast woman took her name & so brought disgrace on it as she went to those places and said she was Mrs Cameron. She is certainly very facile in her manner, and now does not display great anxiety to get away. She reads the Bible a great deal, but does not do much work. The diarrhoea has now ceased to trouble her & she sleeps well.

March 30. She is certainly insane enough now & gives expression to a very great number of delusions mostly of a grand character. among them may be mentioned that she is not Mrs Cameron but Lady [illegible], & that she is possessed of great wealth which

Mr Cameron

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came with her to the asylum, and is now hidden in some of the Bellaw. She promises the writer a lot of this money if he will give her her first rights &c. At other times she is Lady C. Campbell and again a daughter of the Duke of Argyll. One question she often asks is whether some one has not been calling for her as she expected a colonel in the Indian army to come for her. She says that this gentleman is very fond of her, & that she has seen him often walking in the grounds & she is quite sure that he is in the West House. She is very persevering in her remarks & inquiries, usually beginning whenever the Ward is entered & she moves con-tinue till it is left. After talking for a few minutes she becomes involved in her statements & then incoherent wandering in the most aimless way from one subject to another. She is not at all anxious in her demands to get away & moves like her more first

She eats & sleeps well, but it is thought that she is thinner than on admission. The diarrhoea does not trouble her now. At times her conversation & manner & delusions are very suggestive of G.P. and her speech is not perfectly free from blurring. But it cannot be said that the symptoms are such as even to make a provisional diagnosis. Her friends (against her husband's wish) think of trying her in the country —

Mr Cameron

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May 12th Continues to give expression to numerous delusions and is very facile in her manner & at times stupid. The delusions are as mentioned in previous notes. There is no practical change in her mental or bodily condn. calling for note

May 10. Removed to day by her friends

Discharged

Relieved.

Rachel S. Chinkscales

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Rachel Stobie Clinkscales. 54.
Admitted 11th Feb. '93

Dia Patient was admitted to the East House on the above date. She is 54 years of age, Single, and a Protestant. She is a Retired Teacher and resided at 8 Mentone Avenue, Portobello. This is her First Attack of Insanity and it has lasted 2 years and a half. She has previously been under Examination and Treatment at Morningside, Midlothian, and also in Midlothian and Peebles Asylums from April 1892 to November 1892. The Supposed Cause of her Mental Disease is "Mental Worry".
She is not epileptic, or dangerous to others, or is not thought to be suicidal. There is no H.P.

Medical Certificates

1. "Slightly of an excited Aspect, Suspicious disposition. Has delusions, namely:- that she is the Object of some Conspiracy outside, that there is a Magnetism about by which she is affected."
2. "Her memory is defective and attempts to recall events easily tire her. She imagines that people have been plotting against her and repeating untrue stories, about which she is quite confused and unable to give an intelligible account."

13th This is a pleasant little woman. not at all excited but quiet and apparently weak minded Her memory is fairly good and she can tell in what asylums she has been. She says that the cause of her illness was mental strain & that she

Rachel Stobie Clinkscales

got a severe mental shock about 3 years ago. She is seigully tedious in her conversation but sensible enough. talking very slowly & not being at all energetic in her movements. She sleeps well & her bodily condition is good. as yet she has not given expression to any of the delusions mentioned in the certificates —

3 clg. 20. Is down in ch 1. asks that she be protected as she thinks that something evil is going to happen to her. Thinks she kept some money that belonged to some friends of hers, and that these friends now are in poverty & distress through her wickedness. She is very quiet & does not feel at all acutely the misery she describes herself as having, for she smiles when telling of it & is easily persuaded to talk of something else.

May 11.th a partially weak-minded, little woman, very foolish in her conduct, but without many obvious delusions She gives some trouble, as she is very slow in her movements (except when she likes) and will not go to the Dining Hall with the others, but rushes away into a corner, from which she has to be dragged up to the Dining Hall. When spoken to about such reprehensible conduct, she 'scales' up close, & in a pleading voice & beseeching manner she says that she cannot help it. She will not work, nor interest herself in anything, and when talked strongly to, she begins to weep & says that she is very badly used. Her general bodily health is good & her condition plump.

June 27. Mentally the same. Has to go to do it for her food often to be fed with it as she would take it herself. She gives no reason for refusing to take it, and does not seem to have any delusions. She has become thinner of late. —

August 10. At times very resistive & still requiring to be fed with a good deal of her food. She follows one about the gallery & implores to be taken with one. At times she is very amorous. Her bodily condition is better than it was. Mentally her condn is one of partial weak-mindedness —.

Sept. 14. No change to note. Got a black eye recently by being pushed against a corner of the staircase. Has the patience & temper of all a good deal by her resistive habits —.

Oct. 25. Practically unchanged —

Dec. 8th. Very resistive. Often requires to be spoon fed with her food & resists almost everything. Gets sometimes beaten when getting knocks from other patients -

1894

Feb. 23. In consequence of her resistance to taking food she was being spoon fed but only with great difficulty. She was sent up a fortnight ago to the Infirmary Ward & there is doing a little better. Her mental health is as it was. She does not give expression to many delusions, but is silly & foolish in conduct. —

April 16. Is really a little better & has been doing house-work of her own accord. She is rather more settled & does not follow one about in a silly way.

Joh. 555

Mary Andrew or Johnston

Mary Andrew or Johnstone 32 256
Admitted 13th February 1893

This patient has just been admitted to the East House. She is 32 years of age, a widow and a Protestant. Her late husband was a Spirit Merchant. Her address is 4 Kelvingrove St., Glasgow. This is her first Attack of Insanity and she has been ill six months. The supposed Cause is Mental depression owing to Bereavement. She is not Epileptic or dangerous to others but is Suicidal. There is no H. P.

Medical Certificates

1. "Dull & morose expression; complains of headache; Sometimes she will reply to Questions, and at other times she will not" Her mother says she has frequently threatened to cut her throat also to jump over the window. Sometimes she gets greatly excited.
2. "She says again & again that she wishes she were dead; that she wishes she were in her grave; that she wishes to cut her throat &c. and seems to be very melancholic"

Feb. 14th This is a rather nice looking fair-complexioned woman of medium height. She has been quite quiet since admission and seems quite contented & pleased. She thinks this morning she is in the Infirmary and wonders why she came here. She says that at home she has been ill for some time and confined to bed & was greatly annoyed with

people playing the piano in the flat above her and also out in the back yard, and also says there was a public-house at the back of her house in which rows were always going on & her great annoyance. She is very childish in her manner and speaks in a childish tone of voice. When speaking her articulation is sometimes tremulous & very likely that seen in General Paralysis of the Insane and when she endeavours to say "round about the ragged rocks, three ragged rascals ran" the latter part is slurred over & quite indistinct. There is no tremulousness of the lips.

On physical examination her thoracic & abdominal organs are found to be normal. Her plantar reflexes is exaggerated on both sides, and so is the Knee Jerk, & ankle clonus can with ease be elicited on both sides. Her pupils are equal & react to light & accomodation naturally.

Feb. 15th Today patient says she has the finest bonnet in Glasgow & that it is trimmed with all sorts of fine ribbons & adorned with diamonds. She says she has an end of fine dresses & jewellery.

Feb. 20th Today when the patient was talking distinct fibrillary tremors were noticed in her lips and also in some of her other facial muscles especially in the lower eyelid. On being asked to walk along a straight line she does so fairly well though slightly unsteady. She turns without losing her balance and also stands perfectly steady with her heels close together and her eyes shut. She seems quite happy and

laughs & talks in a childish fashion. She is much troubled at not having anything to do but when tried with house work she gets quite confused after a little and has to stop and when knitting drops stitches & soon has to give it up.

March 3rd. This patient has been steadily getting worse of late. She is getting pale & pinched in the face & there is no expression in her countenance. For the last week she has been in very low spirits always thinking & saying she is doing something wrong & acting differently from other people and says she has been making a fool of herself. Her pupils are dilated but equal and react to light very sluggishly. Her plantar reflexes & knee jerks are still markedly exaggerated & ankle clonus can be elicited with ease. Her walking is also getting worse & more unsteady. She requires to be fed with a spoon & has some difficulty in swallowing frequently spluttering & semi-choking. This is especially seen when she takes semi-solid substances such as mince. She has been sleeping well of late. She has twice been wet at night within the last week. The tremor lack of coordination of the facial muscles is getting more marked. On testing the skin of her legs today her sense of touch seemed to be impaired but the sense of pain as tested by pricking & pricking with a pin fairly acute.

Dop. 311

Jessie Watson

# Jessie Watson 28 260

Admitted 14th Febry 1893

Mid This patient has been admitted to the East House. She is 28 years of age, single, and a Protestant. She has up till now resided with her people at Auldhouse Cottage, Pollokshaws and has no particular occupation beyond her household duties. This is her second attack of insanity and it has lasted six months. Her previous attack occurred at the age of 24. She was then treated at home.

The cause of this attack is uncertain. She is not epileptic, or dangerous to others, but is suicidal having attempted hanging and strangulation and been found with a knife concealed. There is no H. P. known.

Medical Certificates

1. "For some months she has been in an excited and restless condition, wandering about without the knowledge of her parents - Recently she has become melancholy and sits wringing her hands and declaring that something terrible is about to happen her. Her father states that twice recently she has made attempts at suicide."

2. "Her statements and answers to my questions are incoherent and inconsistent; there seems to be a tendency to melancholia; her statements about her incapacity to do her work without apparent reason. Her mother has seen her with a string round her neck & under a mattress with intention of suicide.

# Jessie Watson

Febr. 27. Patient who labours under acute melancholia has improved somewhat since admission. For 3 or 4 days she was kept in bed, because there was a slight evening rise of temperature, not accounted for by any pulmonary condition

She is a tall, well-developed girl, with a rather arched ↑ v shaped palate. There was a well marked venous murmur in the neck, but no indication of organic disease in thorax or abdomen. The spine in the dorso-lumbar region shows a lateral curvature ↑ There are in this region several old scars, as if the cautery had been applied there. Her condition was one of deep depression, not accompanied by motor symptoms, nor by voluble expression of her own misery.

She has not given expression to any delusions, but simply says that she wishes to die, why she does not know. Die she must ↑ now, that is her determination She sleeps under observation, and so far has made no attempt to do herself an injury. Rather she is brighter and to-day, the ghost of a smile flickered about her face. She now interests herself in work that goes on, and her bodily condition is improving. She has for the anaemia Iron and arsenic. She has slept fairly well since she came, and her very quietness rather puts the nurses on their guard, for she made a determined attempt at suicide before admission —

Jessie Watson



May 11.th after having been conservatively depressed for some months. this girl is now emerging from the fit of depression & getting better. She never was very communicative, but was always quiet, sometimes saying that she was not fit to live, that everything she had done was wrong and that she should die. Now she is much brighter, dances, laughs, and is almost convinced that there may be some enjoyment in life yet for her. Her bodily condition has greatly improved, but the slightly enlarged condition of the thyroid, ~~cont~~ continues, and she has not menstruated since admission. Blaud's Capsules have been administered for some time & have done good.

In the meantime her condition is one of satisfactory progressive improvement —.

May 15. Discharged

Recovered

Jane McCall or Graham

Jane McCall or Graham 42 264
Admitted 15th Febr 1893

Wel This patient has been admitted to the East House. She is 42 years of age, married, & a Protestant. She is a Shop Keeper and resides at Margaret Place, Uddingston. Her husband is a Spirit merchant. This is her second Attack of Insanity and it has lasted two days. Her First Attack occurred when she was 32 years of age and at that time she was treated in Glasgow Royal Asylum, Gartnavel. The Supposed Cause of this Attack is Mental Worry. She is not epileptic, suicidal, or dangerous to others. No H.P. known.

Medical Certificates

1. She is in a state of great mental distress and muscular agitation, Cries with a loud voice "I want to cling to the Cross" &c. Says it is her sin that excites her - but she is incoherent, looks fixedly as if at some object, says she sees the Cross and Christ on it - then says he is not there - She is in a condition of raving & irrelevant excitement, jumbling all sorts of ideas together, and often shouting at the pitch of her voice. Shrieked when I tried to feel her pulse and hid under bedclothes" Nurse in charge of her states that she has been refusing food, thinking it was poisoned, that she is very excited and throws herself about the bed."
2. "In a state of great mental derangement, shouting at the top of her voice - walking up and down her bed gesticulating and talking incoherently

# Jane McCall or Graham

opening her night-dress and attempting to remove same to prevent which she had to be forcibly held down, refuses to take any food and to every enquiry persistently answers No.
Her brothers state that she was confined for 4 months ten years ago in Gartnavel Asylum.

3 Feby. 20. Since admission she has been in a very excited condition, not uniformly so, but with periods of great excitement & restlessness alternating with periods of comparative quietness. She has had to have a strong dress put on in consequence of her destructive propensities and on 2 nights she has had to be put in a single room.

She is a stout, strong, fine blooded woman, with rather coarse features. She answers questions coherently enough at times. Said last night that she would try & lie quiet & get some sleep, while she was afterwards noisy, refused her draught & had to go into a single room. She is not homicidal, but when sitting fairly quietly she may suddenly rise up, run across the floor & strike her head against the wall, or else she may throw herself on the floor, scream & throw herself about, biting & kicking those who attempt to control her. In other ways she is very unpleasant. She takes her food fairly well, but needs to be watched for a favourable time to get it given to her. She has at times a very fixed & set look staring straight before her, and then seeming not to hear anything that is said to her.

Feby. 21. Had a bad night last night, sleeping little and refusing to remain in bed. She was both dirty & wet. To. day she is a little quieter, less impulsive, and is not tearing her clothes. She answered questions rationally, said that she had not slept much, & said that she had no control over herself, but had to scream & jump about —

Feby. 27. after a week of considerable excitement & restlessness she has settled down a great deal, so much so that the canvas dress is taken off to. day. For 2 nights she has slept very well and there is not so much impulsive fury about her condition For two days she was very bad, rushing without a moment's warning against a wall, or throwing herself on the floor. She developed a habit of banging on her head & striking it on the floor.

To. day she is much quieter, says she feels much better, and she had none of these impulsive attacks yesterday. She has lost much of the fixed expression that she had & generally is much better

March 14. a pretty uniform & continuous improvement since last note. She is now in cls 4 & doing well.

April 13 After having been away on probation, she is to. day discharged, having done well

Recovered

Isabella Wilgour Ross Paul
cont. from p 152

1843

March 2nd Her condition has been worse for the last week. She seems to hear voices as she is continually talking as if she were answering questions or defending herself from unpleasant remarks or accusations made against herself. Anything said in her hearing she takes as referring to herself. She is constantly scratching her head so that her hair has had all to be cut off. There is an unhealthy looking eruption on her face. An aloes and iron pill is given twice a day. She takes her food well but is unable to sleep without Chlor. & Morph.

" 11th Last week she had a wet pack for an hour and also one during the last two days but the effect was only temporary. only lasted for an hour or so immediately afterwards. She is very excited by day, the excitement taking a melancholic form. She is often in tears declaring that she didn't do ~~that~~ this or didn't do that and that she shouldn't be blamed for these things. She also constantly tries to take off her clothes.

" 17th has had six wet packs altogether, the last two for an hour and a half but the effect has only been temporary. In them she was quiet and talked comparatively sensibly but after she was taken out she reverted back to her old condition

" 28th A blister was put on the back of her neck a week ago. For the first four days it kept her quieter but the effects soon wore off even though the blister is still kept open and she is now as talkative as ever.

May 1st There has been no change for the last month. She is still restless, constantly scratching and picking at her head and thus diminishing the amount of hair on it. She hears voices accusing her of things. Another blister has been put on.

To p 341

1843
Feb.
Mar.
April
May
June

Marianne Ewing a McNeil Hamilton or Claremont-
cont. from p 76.

1893

Feb. 18th She is not now so much under the influence of hallucinations and is more cheerful and quiet. Her habit of picking her nails continues as do also her delusions about her sons being in trouble. She is however still not to be trusted as she might attack the other patients or attendants at any moment. B H & C fair.

March 2nd Has become again more excited and more under the influence of hallucinations. She is continually talking and as she says she has lost her identity. Her manner is public and pleasant.

" 11th Quieter again and troubled with edema of both feet. the exciting cause being that she stands most of the day. Her urine contains no albumen but is pale and of low specific gravity 1012.

" 28th Has got more excited and is talking chiefly of her late husband and also of another military man who committed suicide. When in this state her mind is chiefly taken up with morbid ideas.

April 17th She is a good deal better just now and talks pleasantly and sensibly, chiefly about people she has known. Constantly complaining of pains about her arms and legs for which she herself wishes to prescribe.

May 1st Her condition varies greatly. This morning she is under the influence of hallucinations and is constantly talking, accusing those around her of speaking against herself and her late husband. If contradicted or reproved she is apt to get dangerous and strike the other patients or attendants.

June 1st She is much better just now. She talks pleasantly and sensibly as long as she keeps off her own immediate affairs. Her general health has improved. Her mental condition however is unstable as the slightest thing makes her revert to her old delusions.

So p 281.

269 Sarah King

# Sarah King 33 270

Admitted 17th February 1873

Dia Chr Mic

This patient has been admitted to the East House. She is 33 years of age, Single, and a Protestant. She is a Shopwoman and resided at 468 New City Road, Glasgow. This is her first attack of Insanity and it has lasted about 4 years. She has never before been in an Asylum. The supposed Cause of her Insanity is disappointed affection. She is not Epileptic, Suicidal, or dangerous to others. There is no H. P. in the fact that her paternal Grandmother was disordered in mind.

Medical Certificates

1. "She believes that there are people on the roof of the houses where she stays. She thinks these people put tubes through the roof, and shine down views on her eyelids, She believes them to be very wicked people & that they are intent on injuring her and her relations. When she sees them she shouts "Murder" & believes they are on the house roof night and day." "Her brother says that she blames a young man for putting people on the roof. She sees people on the roof from whatever room she is in & speaks to them, swears to them, She calls in neighbours to help her to attack the people on the roof & says they are going to murder herself & relations."

2. "Rapid succession of Inculated Ideas, evanescent & unconnected emotions, abolition of the faculty of judgement &c. &c." "Her mother & sister state she is restless, sleepless, and declines her food, shouts loudly and says that there are some ones coming to kill them &c. &c."

This patient is an undersized woman with sharp features & a rather precocious cast of

# Sarah King

countenance. She is extremely talkative & very full of delusions & hallucinations. Her bodily condition is fairly good —.

February 20. This woman is very insane. She is full of delusions and hallucinations. At times her conversation becomes almost incoherent. She says that there are people on the roofs of all houses & that they send down spirits through the roof & that these spirits make the people on whom they descend as good or evil. The people on the roof she calls "healers"

Thinks that she is perfectly well & that the cause of her being here is a young man who is a baker by trade. He bought loaves into her shop & laid them down on the counter always in a peculiar way, and that meant, she thinks that she was to marry him. She enters into a very long-winded statement about herself, not sticking to the point, but leaving the story every now & then to speak of something else in an almost incoherent way. To-day she is very frightened at being here, and especially because another patient has got the delusion that she (S. King) is Jesus herself. She deplores him very much & in an almost comic way says that it is an awful thing when the mind is wrong. She is thankful that hers is all right, but she never saw, she says, so many mad people in her life before & she asks quite seriously of the Doctor. "Do you think that your minds are quite right. She is not at all depressed, but rather excited. She

# Sarah King.

has slept fairly well since admission, and is taking her food well. Having regard to the character & to the duration of her illness the prognosis is not very good.

27th Conversation slow & quiet, but sleeping in Infirmary at night. Free of the hallucinations & delusions mentioned, and very bitter against the man who came into her shop delivering loaves and began his persecution by head taken. She says that people on the roof here annoy her, but it is really thought that she believes that this cannot be and if that is so it is taken a hopeful sign. She works in the Kitchen, and is not angry or troubled about being here —

Mar 11. The first delusion continues in this case & she is mentally worse than on admission. She is more excited, more difficult to manage, and often most interfering & annoying to the other patients whom she accuses of aiding in putting people on the roof to annoy her. She is also inclined to make false or exaggerated complaints against the nurses, and is apt to take advantage when walking in the grounds & endeavours to make her escape. She has been sleeping badly at night, and has had Chloral & Bromide on several occasions. Even when not much excited she is extremely talkative, and wishful to attract attention, and at times her remarks are very comical. She has rubbed the skin off her brow once or twice, saying that that left the reason back again into her brain. She is not gaining in bodily weight or condition, but takes her food fairly well.

Joh. 964

273 Ann Erskine or Murray

# Ann Erskine or Murray. 57.

## Admitted 23rd February 1893

Med. This patient has just been admitted to the East House. She is 57 years of age, married, her husband being a Joiner, and a Protestant. Her residence is Townhead, Kilmaleolm. This is her second Attack of Insanity and it has lasted six Weeks. She was previously insane when about 44 years of age and at that time was treated at home. There is no Cause known. She is not Epileptic, suicidal, or dangerous to others. There is H.P. her sister having been six months in Smithston.

Medical Certificates

1. "She is very restless, keeps constantly repeating the same words, & avers she cannot draw a breath. She cannot converse rationally, has lost all interest in domestic affairs." Her husband says, that she imagines she is naked and that while she is a living soul she cannot live and she cannot die either"

2. "She is in a continual state of unrest and takes no interest in household affairs. Considers everything done for her as of no avail. And have seen her in a state of frenzy wishing to go out & been naked and had to be held in bed"

On admission patient is very restless, moving her body about from side to side moaning & lamenting. She is a fair-complexioned woman, with very fine (in texture) sandy coloured hair, and rather sunken cheeks. Her facial expression is one of great misery.

Ann Erskine or Murray

Feby. 27. No improvement as yet in her mental condition, though she is no worse than on admission. She is very restless, though not violently so. During the day she sits rocking herself to & fro, talking a great deal, repeating the same words over & over again. 'This is Hell' "Devil", "Lost", &c being a few of the expressions she repeats in a quiet tone; Considerable difficulty is experienced in getting her to take food and she will not even go to the table without urging. Her nights have been bad, and she has not had more than 2 or 3 hours sleep on any night. Last night she had 25 ms. of Chloral without much effect, and to-day she is put on Chloral in 15 m. doses given 3ce daily. It is hoped that this will allay the restlessness, and alleviate her misery.

March 22. About 10 days ago sweeling & redness of the right leg above the ankle was observed. In spite of treatment this became worse and she is at present suffering from a severe attack of erysipelas of the leg. Temperature has been as high as 104°7. and there is considerable constitutional disturbance. Her tongue is dry & she is being freely stimulated. The leg is being treated with fomentations & Lead & Opium, and there are indications of it localising itself in the ankle & calf. She has been much quieter since she became bodily ill & has taken nourishment well & freely.

Ann Erskine or Murray

April 15. Two pretty free incisions have been made in her leg & the drainage is now free & the wounds looking well. She has been very ill, but is now beginning to pick up. Temperature three hours an evening rise of about a degree & a half, but she is feeding & sleeping well & there is a great improvement in her mental condition. She is much less miserable, laughs and talks and thinks she will soon like to get home. Her bodily condn. is also much better.

May 22. Is now thought in cloth, and her leg now about well. Though weak & inclined to swell, after she has been walking. Mentally she is not so well as she was, but the relapse is not serious and on the whole she does well, interests herself in what is going on, and is comparatively bright & cheerful ——.

May 24. Removed to-day by her husband, although he was advised that she was not by any means quite recovered.

Discharged

Relieved

Mary Clark

From p. 2744

May 22. Fuss of delusions and hallucinations somewhat similar to those mentioned in foregoing notes. She is in cho 4 Gallery and sleeps in Infirmary Ward as she is always worst at night in spite of sedatives. At present she has nearly every night 25 gr of Chloral & 30 of Brom but even then her nights are often bad. Her delusions are often of a distressing character. She says that vitriol pours down from a hole in the roof and that it falls on her face & gives her great pain also that people at night stick pins & needles into her, and they do this in order that she be kept from sleeping and so her health be injured. She complains much by day of people jeering at her, & making false accusations, and she at the same time wishes that she is well, that she should be away from here &c. She said yesterday that she was heard in the dining hall that she was to leave the asylum on Monday (2 days) but she could not say who said the words but she was quite certain that she heard the words. Her bowels are very constipated, and she gets aperient medicine often. but she has delusions about them being tied with cords to prevent their moving With all these delusions she is often very pleasant & nice, but she resents any medical examination & the administration of medicine, believing that the medicine she gets here is bad, that it is given her to do her harm & she has sometimes said that her food tasted as if it had been tampered with

Mary Clark

1853.

June 27. In the Infirmary Ward at present. She has numerous delusions & hallucinations referring to her food, believing that it is poisoned &c. She had been taking it badly & now in the Inf. she is more under observation and is doing better. She sleeps badly & usually has a Chloral & Bromide draught –

August 12. Been quieter of late & now has a little room of her own. She extremely delusional, her delusions being very widespread in her nature & having reference to her food, to her bowels, to the identity of those around her &c. She has been sleeping better of late & is not so unhappy in her delusions but there is no real improvement.

Septr. 11th Cleanly & occupies so much of her delusions, and on the whole better. She works a Cob, knitting, sewing &c. . Taking more nourishment & sleeping much better without draught.

October 8th Some days ago she had what may be called an acute delusional attack. She was abusive, full of wrath against every one. calling them scoundrels &c. & saying that were they knew the wickedness they were about &c. Now she is better, but still mistaking the identity of those around her &c.

Octr. 26. Very delusional still, and at times abusive in her excitement. Her bodily health is fairly good & concerning the delusions she has about her food she talks it fairly well.

Novr. 22. Has hallucinations of all the senses. To-day at dinner she called the waiter out & asked him what he wanted, maintaining that he had spoken to her when in reality he had not

Vol. 525

Margaret C. Duncan

Roup. 238.

May 16th. Has contracted Scarlet fever and been isolated in the Cottage Hospital.
It is hoped that this may benefit her mental condition, which is much as is described at last note. Bodily she has improved a great deal, but her delusions continue. She believes that she is the Devil, that she has neither human shape nor form, & that the Spirit of Wicked-ness dwells within her. Her appearance is woeful in its expression, and she has a very hesitating way in speaking. When she can she escapes from the Doctors visit, and is sometimes found, with her face pressed against the wall, in a dark corner. She is a willing worker, most obliging & helpful and considerate to others.

The attack of Scarlet fever is not proving an acute one, and now the 6th day, the temperature is only slightly above the normal & there are no complications.

May 22nd. Convalescence has begun. Mental condn unchanged. No complications —

June 27. Convalescing well. Mentally no improvement.

August 10. Back in the wards. No improvement mentally but rather the reverse as she practises self abuse to a considerable degree. She is still very depressed & with a very frightened look, as if expecting to be scolded or struck. Her bodily condn is fairly good. She will not do much work & escapes into a corner to avoid observation wherever she can.

Margaret C. Duncan

/.

1893.

Sept. 14. Her belief in the delusion that she is the Devil remains fixed & she annoys other patients a good deal by going to them & insisting on their believing that she is really the Devil. She does not seem to have other delusions or else she keeps them to herself. Her expression is one of despondency & she cannot be got to talk about ordinary matters without a strong inclination on her part to harp on her delusion. She also practises self abuse.

Octr. 8th Brought to Coll. in the hope that a change of ward may bring about improvement. But as yet there is none. She is pale & anaemic, but eats & sleeps well.

Nov. 23. She lives in a corner on the least opportunity. She is a persistent masturbator and is no better.

1894.

Febry 13 She remains in the same dull depressed condn. avoiding observation as far as possible, and not taking interest in anything. She believes that she is the evil one & that her touch is contamination. Her bodily condn is fair.

April 16. Not improving any. She masturbates at times almost openly. Bodily condn is fairly good. She is depressed & lacks interest.

June 30. Removed today by her brother

Relieved

Marianne Ewing a Mc Neil Hamilton a Claremont

cont: from p 268.

1893

July 24th — She has kept very well for the past two months. and has had no attacks of melancholic excitement; She is bright and cheerful and very pleasant but nevertheless she is somewhat foolish in behaviour and is very facile. Her general health is fair.

Sept. 12th — There is nothing special to note about this lady. She is free from hallucinations; seems to have no definite delusions; is contented and happy in a sort of way; suffers now and then from various aches and pains for which nothing gives her more relief than her own prescriptions.

November 4th — Continues fairly well both bodily and mentally. If however any of her relations or friends come to see her it generally upsets her and she is apt to be restless afterwards and to talk nonsense.

December 30th — There is not much change to note. She is partially demented but enjoys life fairly well. Her general health is poor.

1894

March 21st — She has been fairly well for some months with the exception of fleeting rheumatism. She is very facile and seems quite content to remain here. She never asks to get away.

June 16th — Her mental and bodily condition have improved. She left to-day on 28 days leave.

July 14th — Taken off the Books to-day.

Discharged Relieved

on

July 14th 1894.

Catharine Small Kinloch

cont. from p 206.

1893

June 12th She takes her food better especially if it is put into a room and she is left alone. She is brighter and more inclined to talk.

" 22nd She tried to escape one Sunday by bolting from one of the attendants and getting over the wall near the piggeries. One of the railway porters brought her back.

July 24th She is in much the same condition - if anything a little brighter. Her general condition is poor and she seems to be making no headway. Her manner is shy and frightened and she will scarcely speak above a whisper.

Sept. 12th There is no improvement in her condition. She is thin and her habits are bad: she is constantly chewing rubbish. A few days ago she tried to hide by getting up an unused chimney.

November 4th During the past month and a half there has been some improvement especially in her bodily condition. She has got stouter but has not got any more colour in her face and is still flabby looking. She is sometimes more inclined to talk. Her manner is still shy and she often has a look of bewilderment.

December 12th There is no real change. She is constantly picking the leaves off the plants and chewing them. She takes her food well but now and then is restless at night, requiring a draught of Chl. & Brom. She answers questions in a half frightened whisper and seems unable to realise her present surroundings.

To p 363

283

Margaret J. Nairne, Volumbäy
Admitted 1st March.

Margaret J. Nairne. 36.
Admitted 1st March, Voluntary
1893

March This is a voluntary patient admitted to day to the East House. It is understood that she has been addicted to drink for some time and in coming here she promises to stay for 6 months. She is the wife of a Reporter on the staff of the Daily mail and has a family of young children. There is a distinct history of brain disease in her family, her mother, her mother's mother and her mother's brother having died of cerebral disease but without mental symptoms, none of them were intemperate

Patient is a well-nourished comely-enough looking woman, talking very quietly & sensibly. She acknowledges that she has been taking alcohol in excess for some time, and that she has come here for a rest. She says - but whether truthfully or not is not known, that her husband is also a drunkard, that he is addicted to fast living and that it was that that made her unhappy & drove her to drink. She is sent to No 2 Ward and is to work regularly in the Kitchen -

May 16. There is little to note about this woman's condition. Since coming here she has shown herself very amenable to the rules of the House, has been a good worker, and has been at all times sensible & pleasant. She has had one or two minor hysterical attacks, but these have passed off soon. She makes no complaints, takes her food well, sleeps well & is in excellent bodily condition. She says that she feels better since coming here.

Margaret J. Marrie

June 27. Complains of headache sometimes. Otherwise very well & sensible. Has the parole of the grounds & works part of the day in the Kitchen.

August 14. Continues very well, being of great use & working in the Kitchen. Her bodily condn is very good, but she is somewhat emotional due it may be in part to domestic troubles & worries. —.

September 14. Her habits has now been much reduced & she is practically a paid worker in the Kitchen. Her mental condition does not call for notice.

Nov. 23. Her mental condn does not call for note except that she is not reliable & seems morally not to be at all upright. She says that she is now pregnant to her husband who visited her some time ago & saw her alone. She works in the Kitchen & works well.

1894
January 9. Varicose veins trouble her a little & she wears an elastic bandage. Her mental condn is the same.

March 6th Left to day to go into the Maternity Hospital her confinement being expected in about a month

Recovered.

Margaret J. Narrie
/

Emily Campbell.

Emily Campbell. 46 288
Admitted 26th Feb'y '93

AM This patient has been admitted to the East House. She is 46 years of age, married, her husband being a packing-box-maker. She is a Protestant and resides at Denbridge, Bearsden. This is her first attack of insanity and it has lasted about two months. The supposed cause is the "Change of Life" She is not epileptic, suicidal, nor at present dangerous to others. There is distinct H.P. a sister having had several attacks of Insanity

Medical Certificates

1. "She talks incoherently, fancies that a daughter who is dead will come into the room soon; is much excited and caught me by the arm; might soon become dangerous through violence"
2. "told me she had seen visions who had informed her that unless all our time was directed to studying the Bible we would be destroyed: talked incoherently about my friends then own, much excited, struck me on the hands & seemed inclined to be violent. Mr. Campbell tells me that for some time past she has been talking incoherently at intervals & in many ways has been different from what she formerly was."

admitted this afternoon in a state of acute excitement, shouting & screaming & being maniacal. It is found almost impossible to control her in the ward on account of her violence. She talks incoherently many of her words having a religious significance.

but her ideas are quite disconnected. She bed is taken out of the single room, and she is put to sleep there on a matteas on the floor.

March 20. She has been continuously & acutely excited since admission & even now there is no evidence of the excitement subsiding, but it is rather becoming more impulsive in its character and she requires much care and attention

All sorts of sedatives & hypnotics have been tried but without much permanent benefit On March 15th & 16th she was packed for 2 hours on each day, but the condn. of her heart - as roughly determined by imperfect physical examn - is not satisfactory & she was not much calmed by them. Paraesthyde does not do well with her, and now she is put on Sulphonal to be pushed tho its full effect is got. She is most depraved in her habits, and abuses herself so much that the parts are excoriated & bleeding by the friction. Hip baths have been tried but her great excitement has hampered many of the means that would otherwise have been of service

She does not now talk much, but is extremely resistive, and has been 2ce tube fed. She has on canvas clothes & drawers, and gloves were tried on her but her excitement was so furious that she soon rubbed the skin from her wrists where the gloves were fastened. She has been & is, about as bad as bad can be, and her bodily condn. has become very poor & her mucous

# Emily Campbell

membranes anaemic. The skin of her hands has also acquired a peculiar shrivelled up & almost washer-woman hand appearance, to the writer's mind characteristic in those who practice self-abuse.

April 11th A clear understanding of this case has not been got at & in some ways she is quite peculiar. Soon after last note after having been under Sulphonal for about a week it was discontinued, as it was not doing well, & she became very excited again, destructive & degraded & resistive, lying on a sofa & pulling her dress over her head, refusing to speak & having to be fed by force. On the evening of a bad day, she suddenly sat up, asked the nurse for her own dress, washed & clothed herself, sat at table & took her tea &c & to the writer at the evening visit was extremely pleasant, saying she knew she had been very ill but she was now better, that she had little recollection of her illness, that she would like to see her husband & so on. She asked to sleep in the ward and that was done. She remained well till 11 o.c. then in a moment she became very much excited, jumped out of bed & dashed herself on the floor, yelling & shouting. It took 5 nurses to remove her to a room, which was ready for her. There she somewhat quietened down, but in the morning she was quite off, resistive, destructive & refusing to speak, rushing into a corner & crouching into a heap there. Since then she has had one or 2 similar, but less marked intervals of comparative sanity, & perhaps on the whole she is less excited

Tofs. 331.

Jeanie Campbell

# Jeanie Campbell
admitted March 2nd 1893.

This patient has been admitted to the West-House. She is 35 years of age, single, of no occupation and a Protestant. She comes from Benrue Caldside, Paisley. She has been insane at intervals for 7 years and has been treated at Mavisbank Private Asylum & Allanton House. The duration of the existing attack is said to be two weeks; the cause is unknown. She is not subject to epilepsy and it is doubtful whether she is suicidal but she is not dangerous to others. No. H.P. known.

Medical Certificates. I "She is and has been for a fortnight in a state of mental excitement - speaking excitedly and incoherently to those about her. She informs me that she wishes to be sent to penal servitude and to be executed for her mis-deeds: talks of people accusing her of being a spae wife: tells me that the people about her are changed in appearance so that she does not know who they are."

II "She is excited and occasionally incoherent; labours under the delusion that she has committed some heinous crime and is to be executed in consequence"

This patient is a tall, well-made woman, looking fully her age and in fairly good general health.

She has been insane for seven years at intervals and was at Mavisbank Asylum for a year when she was transferred to Allanton House where she remained three and a half years. She then went home for a year and has now been brought here. On admission she was quite quiet and though knowing where she was, her mind seemed confused bewildered by her appearance and answer to questions.

Jeanie Campbell

Jeanie Campbell
admitted March 2nd 1893.

Mrs

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# Jeanie Campbell

1893

She slept fairly well the first night and the next morning readily entered into conversation which however on her part was one of despair. She said that she knew she was ill mentally and that she had been so for some time and that she would far rather be worse than she was and thus be without that knowledge. She further said that though she had tried often she was quite unable to keep her self-control and that now she had lost hope. Her manner and expression were also that of despair. She also acknowledged that she continually heard voices telling her to do things or telling her what was right and what was wrong.

March 5th She has not been so well as on the day after admission. She has been wakeful and restless at night and in the daytime has given way to several attacks of excitement in which she fought with the attendants. She seems to be greatly under the influence of the voices she hears and is very obstinate. She likes to do the very opposite of what is wanted. She takes her food well.

" 8th For the last two nights has had m 40 ℈ of paraldehyde with a beneficial result. Her condition in the daytime is variable. This morning she is in a very obstinate mood and utterly refuses to go outside saying she has been told not to do so.

" 17th Sleeping now without the aid of paraldehyde. In the daytime she generally sits in an armchair in a dreamy condition and her usual answer to any question is 'I don't know'. Her obstinate mood has for the present passed off.

" 20th A couple of days ago got very excited and obstinate and struck some of the attendants. She sometimes without the slightest

# Jeanie Campbell

1893

provocation strikes them and her reason is that she can't help it.

March 28th — She is more sensible just now and has been quieter. When in this state she talks calmly of herself and declares that her case is an utterly hopeless one.

April 17th — She is greatly under the influence of hallucinations and often complains that the other patients both at her and talk about her. She has not however given way lately to any acts of violence.

May 12th — She is fairly well just now: talks pleasantly and occupies herself with knitting. She has a great desire to go home, and often asks when she is to be allowed to do so.

" 31st — Very well just now. bodily and mentally. She is bright and cheerful and talks sensibly, and takes an interest in those around. She has parole of the grounds.

June 23rd — Continues well and is desirous to get home. She makes a pleasant companion for some of the other ladies.

July 24th — Now and then complains of aches and pains. Her feet have a tendency to swell necessitating a few days rest. Mentally she is well.

Aug. 29th — Continues quite well and is discharged to day.

Discharged Recovered

on

August 29th 1893.

Re-admitted on March 21st 1894.

vide Vol. VI p 146.

Euphemia Watson Nov

# Euphemia Watson Moore 23
## Admitted 4th March 1893

See also page 44.

Kirin

This patient has just been admitted to the East House. She is 23 years 5 months old, single, & a Baptist, and was Qualifying as a missionary nurse. She resides at Schoolhouse, Kirin. She has been nine months insane and this is her first attack. She was previously admitted to Gartnavel on June 25th 1892 and discharged Relieved on Jan. 27th 1893. The supposed cause is going to Exciting Religious meetings. She is not Suicidal, epileptic or dangerous to others. There is no H.P. stated. Her present attack is simply a continuation of the one for which she was previously under treatment here & when admitted then she was said to have been ill about two years

Medical Certificates

1. "Delusions under the influence of which she fancies that she has a heavenly mission to work out that a certain party wanted to marry her. Declines for the most part to answer questions & comports herself in a very odd & unnatural way. Her mother states that she is of opinion that she is to be carried to heaven & again is to be sent to Hell. Refuses food. Manner & ways all changed. Imagines that her mother is wanting to kill her."

2. "Her general manner is strange, she is unnaturally taciturn, suddenly changing to an emotional turn in which she shows great religious excitement. The nurse informs me she refuses food & medicine, &

# Euphemia Watson More

that she was under treatment in Gartnavel for some months for mental derangement and left two months ago much improved

April 14th She is much worse than on admission. On admission she was quiet, and fairly rational in her conversation, only giving expression to delusions when much pressed. These delusions have a strong religious element running through them She believes that she is pregnant to the Holy Ghost and shortly before coming here she told her friends that the Holy Ghost had visited her the previous evening and that she was to bear a child. Shortly after admission she began to have periods of excitement when she would endeavour to remove all her clothes, under a frantic order. She would fall on her face, beat the floor with her head & scream. Then at these periods she would take no food, requiring to be fed with it all & a week ago she had to be fed 2ly with the tube. This had a good effect & since then she has taken food herself at times. She has also been hearing birds & has had various hypnotics. At present she is in rather a dull state, following a week of pretty acute excitement & destructiveness. She hears voices especially during the night and now she says these voices tell her that she must pray to God all day, and that soon she will go away from here. Also that God has a great work for her to do, and that she is this daughter of

# Euphemia Watson more

May 22. Shortly after last note she became very dirty in her habits, and more destructive to her clothing. She was therefore sent down to c/o 3. There she became stuporose and has showed itself in a torpid mental condition and a much disturbed condition of the alimentary canal, together with slow circulation & diminished assimilation. She also became suicidal at times endeavouring to put her head into the pan of the Water Closet, trying to tear out her tongue with her hands &c. She took no food herself, but had to be spoon fed. About a fortnight ago no improvement having taken place she was taken again to the Infirmary Ward and she is perhaps now a little better. Resistiveness has characterised her case all through, and it is now taken less marked though even now had enough. She will crouch in a corner all day unless watched and she is suicidally inclined so far as water is concerned but apparently in no other way. She is getting more nourishment. her pulmonary is in better order, and she is sleeping well. Her mother saw her yesterday & she talked freely with her, telling her that if she were at home she would be all right, that she destroyed her clothes here because they were not her own &c. She is still much under the influence of delusions at times & hears voices. When she thinks she is not observed she is sometimes seen to lie down flat on the floor. Erotic thoughts occupy her mind a good deal the nurses think, and her pale & anaemic look are not yet satisfactory

Jof. 329

Jane McHaffie or O'Neil

# Jane McHaffie or O'Neil 49

## Admitted 4th March 1893

Wm This patient has been admitted to the East House. She is 49 years of age, married, and a Roman Catholic. She is a fruiterer and her address is 10 [illegible] George St, Glasgow. This is her first attack of Insanity. The supposed cause is the Climacteric. She is not epileptic or suicidal but is dangerous to others. No H. P. stated.

Medical Certificates

1. "Fancies she is in a strange house and wishes to be brought home. Cries out every now & then that some person is trying to steal & kill her. Occasionally thinks she is being poisoned, and thinks there are beasts walking over her. Fancies she has had twins and has to have pillows in her bed which she tends the same as if they were babies, – speaking to imaginary persons long ago dead"

2. "Constant busy delirium, labouring under the delusions that there are persons & animals concealed about her dress & she keeps moving about the room & from place to place trying to avoid them – Fits of screaming violently. Has repeatedly asked for knife and has threatened to do bodily injury to herself & some imaginary person. Has to be constantly watched for fear of doing herself any violence"

5th Mch. As yet a history of this patient's illness has not been obtained. She is a tall, very dark-complexioned woman, fairly well nourished, but with her muscles very soft & flabby. She was unable

Jane McHaffie or O'Neil

# Jane McHaffie or O'Neil 49
## Admitted 4th March 1893

Jane H. — patient has been admitted to the East House.
...le, married, and a Roman
...fruiterer and her address is
...agow. This is her first
...He supposed cause is the
...ast epileptic or suicidal but
...ers. Dr H. P. stated.

— strange house and wishes to
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...ing Estat & Kill her. Occasion-
...being poisoned, and thinks
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...she tends the same as if
... speaking to imaginary
...s dead"

... delirium, labouring under the
...there are persons & animals con-
..., dress & she keeps moving
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Has repeatedly asked for knife and has
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1

Dr H. P. [illegible]

[illegible]

[illegible]

Extract of Mrs O'Neil's
handwriting

# Jane McHaffie or O'Neil

by reason of Rheumatism her friends said, to walk into the House and had to be carried from the cab to the Ward. She was not at all sorry to stay here said goodbye to her friends quite cheerfully & in a few minutes seemed to have forgotten them.

For some hours she was very quiet seemingly interested in her new surroundings but after being in bed for some time she became rather excited thought some one was lying beside her, thought the bed was full of fleas, & animals of all kind and that they were creeping over her and biting her. These sensations were not confined to the hands but involved the body as well. Through the night she slept little and to. Day is rather quieter but evidently hearing voices as many of the remarks are answers to questions evidently put to her. She believes that she has 3 children in bed with her & hands out a bundled up blanket as one of them. She makes mistakes in the identity of those around her and though she knows where she is (answering Parliament Asylum when asked) she believes at times that she is at home and that those around her are her relations.

March 6. Slept none all night and walked the greater part of it. A physical examination is made to. Day in more detail. Thoracic & abdominal organs are healthy. On her breast & arms are several raised pigmented areas of skin & the skin of her breast & arms generally is darker than that on other parts of her body. Tongue is protruded readily & does not deviate to one side.

# Jane McHaffie or O'Neil.

It is rather redder than normal & slightly glazed. Teeth are fairly good & palatal arch normal. There is distinct foot drop as she lies in bed the toes pointing outwards & forming an angle of about 45° with the bed. Knee jerk is quite abolished on both sides. Common sensation is generally good. No ankle clonus. There is no hyperaesthesia of the lower limbs. Firm pressure or grasping the limb produces no abnormal pain. On asking her to get up & walk she manifested great reluctance, said that she was ill & a little vc. With assistance she comes about on her own feet once she was fairly balanced on them, but an attempt to walk alone was followed by collapse, her knees simply bending up under her. When supported and told to try to walk she threw out one foot with a jerk

The History of her case is briefly as follows Four months ago she complained of weakness in her legs. Previously always on her feet she complained of being easily tired, wanted to rest often. Complained of the great weight of her clothes and her legs became painful to touch

For about 7 years she has taken stimulants freely especially in the morning. She is in the fruit trade & has an orchard at Dumbarton and had necessitated early rising in the morning during the fruit season. On rising she usually began the day with a glass of whisky. The mental symptoms are only of 2 mos duration, but feebleness has troubled her for years. about six

Dft. 307

Mich

March

..

April

Margaret Dalziel Melross
admitted March 8th 1893.

Voluntary.

Neil

This patient has been admitted to the West House as a Voluntary.
She has been in this Asylum before in 1890 but then as a certified case. For notes vide Vol. III p 401
For about a week she has been feeling dull and depressed and she says that she is frightened she may lose her self-control and perhaps even do herself harm.
On admission she didn't look dull & depressed but was rather cheery and evidently pleased at coming back to the Gallery she was in before. She didn't sleep well the first night. Her general health seems good.

March 11th Now and then gets somewhat dull but as a rule is bright and cheery. She talks sensibly and seems to have no hallucinations or delusions.

" 28th Her dull periods are diminishing both in frequency and intensity. She occupies herself with something either work or amusement the whole day and never sits brooding. Her general health continues good.

April 14th She is now much better and is bright and cheerful and not troubled with depression of spirits. She accordingly thinks she could manage all right at home so leaves today.

Discharged Recovered
on
April 14th 1893

~~Margot - Daniel Molinos~~.

Mr Shirreff.

Room f. 210.

1893.

Nov. 23. Very quiet, but not depressed. Does not now ask to get away. But does not give expression to any delusion. Sits smiling to herself in rather a superior way. Has improved in so far that she now does some work.

Febry 22. In a talkative mood the other morning she gave expression to many delusions regarding the cause of her being here, regarding her friends and re-garding the Establishment. After talking a little she became incoherent, excited & abusive. There is no change to note

April 16. There is no change here. B. C. fairly good, but she is anaemic. She will not do any work & is lazy & silly

June 27. No change. Repellant & vile. —.

Augt 21. Was sent to No 2, on account of her sullen disposition & her refusal to speak. She is just the same

Nov. 15. She displays the most complete indifference to all that goes on, keeping herself aloof from all. She does very little except read & she often declines to answer questions. She does not openly give expression to delusions, but her manner & conduct are those of an insane person.

1894.

January 8th. She remains in the same repellant cond.n & in neither her bodily nor mental cond.n is there any appreciable change.

April 10. She has been more conversational recently, and it is difficult to make out delusions in her. But her conduct & behaviour are those of an insane woman.

Pop. 479

Mr O'Neil

from p. 302.

1894
May

weeks ago perverted feelings in the skin were complained of consisting principally of feelings as if her skin was being tickled and she continually rubbed to rub one hand against the other, feelings there not as usual. Hallucinations of sight were noted also 6 weeks ago. Constipation has also troubled her. Her daughter states that her mother's skin has been becoming darker for some time, and that she has noticed a brown mottling of it. Pain in the nails was complained of 6 wks ago, and she at that time said her feet felt as heavy as if they were made of lead. She asked that her legs be rubbed, they were so painful. During these last 2 mos she has fallen off very much in flesh.

June

April 8th I transferred to West Home.

" 26th This patient has improved greatly during the last month or two. She now walks fairly well and goes out regularly. The only difficulty she has is getting up stairs when she requires some aid. On level ground she can walk without any support but not for long distances. She herself says she feels much stronger and has no pain or other sensation in her legs. She sleeps well at night and takes her food well. Mentally she has also improved. Her memory is better. A few weeks ago she used to think that she had been at the market that day or was going to it but now she is more conscious of where she is and that she has been mentally ill. Her manner is very pleasant and unassuming. She has got a good deal stouter lately and looks much better.

Mr O'Neil
cont'd.

1893
May 9th She now never refers to having been at the market- as she often thought she was during the first part of her stay here, and if questioned about it she says she knew it was all nonsense. Her general health is excellent and she both eats and sleeps well.
Her husband has determined to take her away as he thinks her quite well and though mentally she may not be so ~~red~~ robust as she once was before her illness yet her progress has been so steady and her present condition so satisfactory that she may be ~~regarded~~ regarded as practically recovered. She left with her husband to-day on probation.

June 5th Taken off the Books to-day.

Discharged Recovered
on
June 5th 1893

Mr ~~Ward~~ Haigh

cont'd from p. 1142.

1894.

January 9. Some time before Xmas the patient took, became feverish & lost all appetite. She was removed to Infirmary Ward & there remains. Her room was found in a terribly dirty state when she left it. She appears to have hoarded up many things & her manner of life was none too cleanly. Once before going up she wet her bed. Considerable bodily improvement has taken place since she went up stairs. Her cough is better. She is fatter & her appetite has improved. She has a very irregular action of the bowels, but these have been regulated by Rhubarb & Soda. But she is far from being contented & wishes back to her old room in No I. She says she cannot get enough fresh air in the Infirmary Ward, that the noise is incessant & that these make the disease of her brain worse, they irritate her & make her ill & they will she says ultimately drive her mad. She is very anxious to leave the Asylum & does not believe her trustees wish her to do so else they could long ere now have got a suitable place for her to board at. She rails at them a good deal, and is somewhat fond of self-praise. On the whole at present her mental condition is one of considerable irritation. & it is hoped that liberal diet, regulation of her alimentary canal may by improving her bodily health, subdue this & render her happier to herself & pleasanter to others.

January 19. Better now mentally than at last note. Confesses that she is happier in Infy. than in No 1. Her bodily condition is fairly good & though she does not allow it her nights are better than they were.

Mr McHaugh

cont'd.

1894

April 16th Her physical condition has not changed much since last note. She is troubled by indigestion now & then & her bowels require regulating. Mentally she is also much about the same. She has been less fretful of late, cheerful & has had fewer complaints. She still says that she never sleeps any, qualifying that however by saying that what she gets is not really sleep. She may shut her eyes, but her brain is never at rest & the gradual invasion of her brain by the disease is steadily going on. She knits a little & writes a great deal. It is difficult to say what her delusions are apart from those having reference to her own bodily comfort & to her sleep. Outside these she does not evidently have any delusions. but she distorts facts sometimes & gives them a very local & personal colouring.

March 24. Of late she has been rather more irritable than been in less a good deal with a bad cold. She has been more fretful, more bitter against her trustees but this has probably been caused in great measure by some factious disturbances. From this she has now recovered. having received benefit from Rhubarb & Soda & and she is rather better mentally. Her delusions are the same. Says she feels sometimes as if the roof of her head were being lifted off. that the disease in her cerebellum is making more rapid progress & that it is like a 'canker' eating into her very heart. She denies that she ever sleeps any, and her often complaints of the most trivial kind against the nurses & officials

Vol. 559

Mrs Johnston

Rowp. 258.

1893.

March 27. As regards to her history it would seem that she was 10 years married & that her married life was of anything but a happy character. Her husband was avowedly unfaithful to her and a fortnight after her marriage she was attended by a Doctor for some venereal trouble. She had one miscarriage at least and after 7 years married life she had a child. The labour was natural enough, but the baby died when 6 mos old of some head trouble. It was a small baby developed child. Recovery from her confinement was slow & shortly after it she has some 'funny notions' about people & things. Her mother states that the trouble her illness began at that confinement which was 3 years & 8 mos ago, and about 4 mos after that when she was in Oban & writing to her mother, the writing was much altered, words were missed out & sentences left unfinished. She was treated then for Hysteria & the true nature of her illness never seems to have been recognised. About 2½ years ago she left her husband, who practically drank himself to death, dying of consumption, and since then she has lived with her mother. Her friends at home noticed that she was very much altered but they put it down to the great amount of worry she has had. At no time does she seem to have had marked ideas of grandeur, but was often depressed, weeping very much & very often, and wishing to die in bed. For some time they observed her memory & general intellect failing. She could not be trusted to go out

Mrs Johnston

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a message, nor did she seem to know she was about her own house.

April 7. Her patient rapidly got worse and to. day she died. For the past weeks all power of swallowing has been abolished & intractable diarrhoea has given much trouble. There were no signs of disease in any organ except the brain & death seemed to be from exhaustn.

## Death.

### General Paralysis

a Partial P. M. was allowed & there were found distinct changes in the brain, adhesn decortication &c and those typical of G. P.

Mary MacLean Macdonald,

Mary Maclean Macdonald. (28
Admitted 29th. Mch. '93

Mrs East. House. She is 28yrs of age, single & a Protestant and has no occupation. Resides at 419 Victoria Rd Broomhill. Has been insane about 8 mos & this is her first attack and the cause is put down as ill-health She is not epileptic, suicidal or dangerous to others. No H.P. known.

Medical Certificates bear I. Occasional fits - such as take away this man, he is staring at me, rather more unpleasant than usual to her own family.

II. Standing alone with her fingers pushed into her ears staring wildly at anyone near her and shrinking from her own friends. Says she goes to the devil's church that she was born in Palestine and is going there now. Speaks at times in a silly babyish fashion and then in a wild furious way. Shuts herself up for periods in the bath room, or stands staring at the roof and wont speak to anyone.

April 19. For some days after admission this patient kept very quiet and did not give expression to many delusions. She was reserved especially in regard to her food, and was much inclined to stand alone in a corner, and talk to herself. Still she talked fairly rationally, now & then bursting out into silly laughter. Her appetite was fair and she slept well. Last night however while sleeping in the dormitory she became much excited would not keep her bed, but got up and danced on it. Then she got below it insisting that the devil was chasing her &c. To-day she is still excited, rushing about the ward & laughing in a silly way

## Mary Maclean Macdonald

1853.

May 16. This is a delusional case, the delusions being numerous, and mostly of a sexual character and many of them very expressive. She is subject to periods of greater excitement, when she is very destructive, especially to knitting, plants &c. Usually however she is smiling, looking out the window & carrying on conversations with someone outside - she will not say whom it is. Some of her delusions are distinctly of a grand character, such as that she is Christ, that she is a Queen &c. again she believes that she is a man, not a woman & her gestures are indecent. Her bodily health is very fair and as a rule she sleeps well.

May 22. Full of delusions which vary very much from day to day. Said yesterday that she was a Princess and that the Peace was hers. again that she has had a heavenly vision from Christ & that the writer was to be changed. again that he frowns in the ward hears every word that was said &c. No change in her mental or physical condition.

June 27. Now in No 1. Perhaps a little better especially at times. much more amenable & behaving better But full of delusions especially of a great character. B.H.C. good.

July 3rd Changed to No 1 Gallery & realy a good deal better. She is much more settled & has not given expression to any delusions for some time. B.H. improving

M. M. Macdonald

August 1st Left h-day having made a most satisfactory re-covery. The improvement has been continuous & without anything approaching a relapse

Discharged

Recovered

Joan Walker Dunlop.

Joan Walker Dunlop. 20.
Admitted 31st March 93

Weh admitted to-day to the East House. She is 20 years of age single & a pupil-teacher residing at 6 Garlunk St, Govanhill. She has been ill over 6 mos, this is her first attack, and the cause is bodily weakness. She is not epileptic, but may be suicidal and dangerous to others. Clo H.P. known.

Medical certificate bear I that she is at times very outrageous and excitable, at other times she is very depressed and refuses to answer any questions put to her, talks of destroying her own life, as she thinks the people look at her when she is out walking. She is very cunning and requires to be closely watched. Her mother states that yesterday afternoon when she supposed the patient was asleep, she lay down to rest. When she got up she found the patient had torn to pieces some of her best clothes and set fire to them & to her bed.

II. That she is somewhat stupid & foolish in manner and conversation says she cannot sleep at night because of thinking how she may do better and gives foolish reasons for her destructive conduct, imagines that her friends interfere with her & keep her from working. On admission this girl is found to be in a very weak state. She evidently suffers from Lymph-adenoma. The cervical glands are very much enlarged, being hard & matted together. So also are the glands along the border of the trapezius & the axillary glands are also affected. The mesenteric glands can be distinctly felt to be affected and the groin glands are involved on one side. In addition she is very thin, the pupils widely dilated.

Joan Walker Dunlop.

She talks sensibly, but does not appear to have recollection of things she is said to have done.

April 14. After having been a fortnight in the asylum this patient is discharged to-day. Her mental condition since admission has not been such as to justify her being kept in an asylum. Bodily she is becoming weaker. Diarrhoea has been troublesome, and she has either little control over her bowels or she wilfully neglects them for she usually passes her motions in bed. When chided for doing this she usually says nothing. She has given expression to no delusions since admission and beyond the above habit, a certain facility of manner & a false belief that she is much stronger than she really is, there are no other mental symptoms.

She is accordingly discharged

Relieved.

Joan Walker Dunlop.

Discharged

Relieved

Jessie Watson Aitchison
—.

Jessie Watson Aitchison, 29.
Admitted 2nd April
·93

Am Private Patient. East House. She is 29 years of age single & a protestant. Resides at 83 Oxford Drive. She has been insane about a week & this is her first attack. The cause is over Religious work. She is not epileptic or suicidal, but may be dangerous to others. Distinct H.P. her mother having been in Gartnavel for 6 weeks about 12 years ago & having been discharged Recovered (See Case )

Medical Certificate states I That she is very excited and talks incessantly, in a most incoherent manner. Talked of living in the Spirit World and that the Millennium had come. Of her brother John being Christ & the God II appears wrapped up with some mission work & talks incessantly about it, and some scheme she has in connection with it. Goes off incoherently to speak of religious matters. Very restless & excited Thinks everyone is deceiving her. Has written to the newspapers saying that she is kept a prisoner in the house and will not be allowed to do her mission work. —.

14th Ap. admitted in a rather excited condition which has gone on becoming more marked & she is now acutely maniacal. She is excited, incoherent & sleepless, with a full bounding pulse and a temperature that has on 2 occasions been as high as 100° F in the evening. She has taken as yet 4 oz milk and has got a fair amount of sleep by the aid of Paraldehyde given in doses varying from 3ii to 3iii She has not shown much resistiveness & her tongue has kept moist. at present she is about as excited as possible

# Jessie Aitchesoni

April 16. Is evidently suffering to-day from a sore mouth and throat as she swallows with difficulty, but an examination is impossible. Her temperature last night was 100 6°7. For 2 nights in spite of large doses of Paraldehyde she has slept badly & been more excited, but to-day she is very quiet & evidently suffering pain.

April 24. Since last note she has had a most severe & acute attack of Erysipelas of the face & head & for some days her life was despaired of, but she has now got round the corner, and the temperature which was as high as 105.6°7. is subsiding. Great difficulty was experienced in nursing her as she was very restless, refusing to allow any dressings to remain on her face, and tossing all clothing from her. The temperature is now down to 100° & the bronchi has gone, but considerable scaling of the face & head is in progress and there is a large ulcer on the left side of the soft palate. She is up to-day as being then more easily managed. as yet it will seem that her mental condn has been little influenced by her illness.

May 15th To-day 2 collections of pus under the scalp are opened into & drained. Bodily she continues to improve, but mentally she is still very excited requiring hypnotics at night & continual care & watching by day. much of her excitement gets an exit by continuous rambling talk & she is not violent, except in the way of destruction to clothing

Jessie Aitchison

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May 16. Pretty profuse discharge of pus from the head yet & considerable boggy feeling over part of the scalp. Temperature is still raised about 1° in the evening but otherwise there is great improvement in her bodily condition. She is gaining in strength & condition, and takes food very well. Mentally also she is somewhat calmer, being a little less excited & more foolish, repeating phrases over and over again, but now & then giving sensible answers. She sleeps still badly & at present has with benefit Sulfonal in 2 x 20gr doses. She is kindly even in her excitement & foolishness, not interfering with other patients, but running up & down the ward, laughing & talking. She knows who are about her, where she is & what cases are in such a place as this, and at times she has intervals of comparative quietness, one of them being when her head is being dressed, the pain evidently quietening her.

May 22. Perhaps a little quieter, but no evident change. Still a good deal of discharge from one of the scalp incisions. mentally foolish & talkative. She is a great favourite with the nurses on account of her likeable ways. Before admission she was much interested in work among the indigent poor in connection with Schools for Boys & girls and now her mind runs much in that groove, and she speaks incoherently about the lower parts of the city where she visited & worked

Jo/p. 369.

Jane Laurie or Rowe. 77.
Admitted 9th April 93

Jane Laurie or Rowe. 77.
Admitted 9th Apl. 1893.

Sun M Private Patient East House. She is 77 years of age married and the wife of a publican, residing at 227 Cornwall St. Glasgow. She has been insane about 6 mos. This is her first attack. and the cause is put down as Domestic Trouble. She is not suicidal or epileptic. but may be dangerous to others and is destructive. Four of her children have been at various times patients in this Asylum - -

Medical Certificates bear I. that she is rambling & incoherent in her talk, suspicious of her neighbours who she says have stolen rings & watches from her

II. She is unable to carry on connected conversation confuses the identity of those around her, rambles in her talk & laughs often without cause. Has delusions that she has recently given birth to a child.

16th April. This is a typical case of senile mania. She is considerably excited, feverish, destructive & talkative with an amorous strain running through her conversation. not wilfully violent, she is yet a great trial to other patients as she interferes with them. For her years she is strong. Her heart & lungs are fairly sound, the cardiac beats numbering about 56 to 60, and the vessels not being excessively atheromatous, but there is well marked arcus senilis. She is of small stature & has considerable development of hair on her chin & lips. She has been sleeping badly, but better last night when she had Tr. Paraldehyde & was in a single Room

# Jane Lawrie or Rowe.

It is stated that she has taken stimulants freely at home and looking at her age & excitement these are continued here & she has a glass of whisky daily. She feeds well.

April 28. Free out of bed last night & sustained a contusion under the left eye. Continues excited & very destructive especially to flowers, plants &c. She has on a strong dress. Paraldehyde continued & her nights have been good. The presence of the Doctor in the Ward always renders her more excited & she is very lavish with her caresses to him & to other patients. She needs constant attention

May 16. Practically no change, maybe less excited as a whole & now sleeps without a draught. Has been out of doors a great deal & is stronger bodily. There is considerable cunning in her disposition & she is tricky. She has a very sing-song way of speaking & 'snidding' close up to one with honeyed words she will make a dash at watch chain or handkerchief, laughing if successful in doing mischief -

May 22. For some days she has had 10 grs of Sulphonal at night and just now she is slightly under the influence of the drug. For 3 nights she has been sleeping in the Ward, and yesterday morning on raising her the night nurse observed that she seemed to have pain in the right arm at the elbow. It was swollen there & painful to touch, but nothing could be made out. It was

# Jane Laurie or Rowe

fomented and k. dar is regilly better, but s bit swollen. Jaere is no other change —.

June 29. Continues mostly excited but very destructive & tricky. She needs great care & watchfulness, both on account of her age & because of her excitement & habits. She has been sleeping well for a long time without draught & takes her food greedily She laughs a great deal & while laughing & smiling she will make a grab at ones chain or flowers &c. laughing stea more when she succeeds in doing any damage —

August 9. No practical change. Continues excited & foolish, and just as described at above note.

Septr. 11. Just the same. Excited, but not so destructive & more easily managed. —

October 8th. Takes ill-will to some of the nurses & uses very strong language to them. Believes they are her servants & thinks £12 a year is too much salary for the best of them — a curious suggestion is a marked feature in her case.

Nov. 9. Just the same. —.

Nov. 23. Some days ago she had a slight brain seizure, & has now left her left arm & both legs weaker. There was no loss of consciousness & her mental condn. has now gone back to its old state, one of excitement, incessant talking & restless movement. —.

Decr. 8. Paresis of legs persists, that of arm has passed off. Very destructive at times & noisy. Takes food well. On water bed & dislikes it very much No change

Joh. 437

Euphemia W. Moore

From p. 298.

August 19th This patient is much worse and there are distinct symptoms of tubercular disease of the right lung. This change for the worse has been going on for about 2 mos, when she had an attack of right side pleurisy. It was with the greatest difficulty that she was nursed as she objected to everything that was done for her stripped off the poultices, lay as much undressed as she possibly could & simply negatived any value of a physical exam^n. by her continual movements & struggles. This unfortunate restlessness continues, as to what it depends is not known. She wants to die, and tells her friends that. She has many delusions, but does not give free expression to them. She needs constant watching as whenever she gets the chance she steps out of bed & goes to the closet & plunges her head into the water basin. Then throws the water all over her & struggles when dry underclothes is being put on. Her case is a very unfortunate one & nothing seems to do her any good & now that the pulmonary tubercular disease has become established & that she resists so strongly the application of any remedy, & looking to the condition of mind as one of determination not to benefit by anything, nor to get better, her state may be regarded as hopeless & a fatal issue only a question of time.

Euphemia W. Moore.

August 23. Not any better. She has a most determined idea to get to water whenever she can & does go to the Closet & dip her head into the basins. She is resistive & repellant as before, doing nothing that she is asked & struggling against all assistance & being guilty of dirty habits &c. Her bodily condn is better than it was & she has been sleeping well. Temperature is still raised in the evening usually 1½°. but is normal in the mornings.

Septr. 14. There is little change. Physically she is somewhat better & the tubercular mischief is not now active. She is still resistive & delusional, often refusing to answer the most simple questions. Spends much of her time reading the bible. Now she is up for a part of the day & an improved appetite & digestion is leading to an improved bodily condition —.

Septr. 21st. No change. She will not allowed her lungs to be examined, but struggles. A detailed examination is therefore impossible.

October 8th. Is now up most of the day, but requires watching as she undressed herself in the day-room. Appears to be very careless of decencies. No practical change.

Octr. 25. Resistive & self willed. Getting thinner & looking ill. Up a part of the day, but refuses to keep herself covered & is very obstinate —.

Novr. 23. Bodily a little better. Feeding well & on extras of all kinds. But mentally the same. Resistive & unwilling to speak.

Decr. 8. Up the greater part of the day now, but looking very miserable & thin.

Dop. 398

Emily Campbell

From p. 290.

May 22nd. During the last month there has been perhaps a slight improvement looking at her condition as a whole. She has been less depraved in her habits, more easily managed and has had more better days. when she has talked sensibly has taken food herself & has been able to have on her own clothes. More especially is there a little improvement in her bodily condn. Her appearance was very haggard, now that has somewhat left her & she is a little fresher & fatter looking. But the great change for the worse in her appearance since admission is still marked. She is also at times very impulsive & sometimes even when fairly well, she will say "Dont speak to me, Doctor". I am the Devil. I am dirt, or I am unclean". She gives that sometimes also as a reason for crouching in a corner & for pulling her dress over her head. At present she is having no hypnotic and her nights are fairly good. All treatment is being directed to getting her bodily condition into as good order as possible. ——

June 29. A very marked & wonderful improvement has taken place here. This dates back to about 3 weeks ago & has been progressive, so that now she is very well & in clothes. She does not express a desire to get away, but rather the contrary wishing to remain here till she is quite balanced & a relapse not likely to occur. She is a very pleasant woman, somewhat distant in her manner

Emily Campbell

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but very amenable & useful. Her bodily health is very much improved. —.

July. 14 Continues well & is leaving soon. Nothing special to report

July 21 Discharged

Recovered

Re-admitted Oct. 14th 1900

vide Vol XI p 357.

Susan Lindsay Glass or Ferguson.

Susan Lindsay Glass or Ferguson. aet. 46.
admitted April 24th 1893.

A Vrel

Was married, & occupation was that of a domestic.
Is a protestant, residing, at 27 Kelvindale Street Glasgow, where she was found & examined.
This is not her first attack, the first occurring when she was twenty-eight years of age, the duration being ten days. She was then treated at home.
The present attack shows a suicidal tendency, but no tendency to injure others, the supposed cause being "climacteric with predisposition by previous attacks." Its duration being ten days.
She is not subject to Epilepsy.
No H.P. known.
Medical Certificates.
No I. bears Loss of memory, continual talking of nonsense, sighing, & sobbing, generally with regard to the state of her soul.
She is reported by her husband & sisters, to be noisy restless, sleepless, to have a tendency to crying & otherwise behave strangely.
No II, bears, Mental depression, restlessness, distressed in conduct, constant uttering of exclamations of anguish, & incoherence as to her state of mind.
Her husband states she is restless & sleepless at night, requiring constant attention.

Mar 9th

Since admission there has not been much improvement in this patients mental condition. She suffers from Delusional Melancholia, the delusions being principles of unworthiness & of fear. She thinks that she has never done any good in the World, that she has cheated

Susan L. S. or Ferguson

many people. and that she has not conducted her house properly. Then she believes that some one is coming just in a minute to hang her, and she will sit, starting at every footstep, wringing her hands, and with anxious expression await the executioner. She is thin & anaemic, and has a slightly congenital - weak-minded look about her. Her palatal arch is high, her speech indistinct, and her hands are badly formed. She is taking food fairly well. sleeping well. and has gained a little in weight since admission —.

March 11. Full of miserable delusions, and convinced that some awful doom is just about to overtake her nothing can convince her that she is safe here & she is very miserable —.

March 16. No improvement. makes mountains out of trifles. Some days ago she broke a cup & her state of misery about the accident was extreme. She cannot be convinced that she is not to be hanged, or to be thrown into a pit &c. She is working well & eating & sleeping well —.

March 26. Perhaps a little brighter. and talking food better but still with very miserable delusions and very anxious expression.

June 12. Considerable improved & very much less miserable. She has a gumboil some days ago and the pain of it, has a considerable effect on her. She allows that she has been ill, & says it was because she had so much work to do at home.

Susan L. Ferguson

S.

June 30th Gone rather to the other extreme & become boisterously talkative & even a little silly in her talk. Laughs sings & jumps about. Her husband wishes to have her home & he is not strongly urged to the contrary

June 31st Discharged to. day

Recovered

Margaret White Watson

Margaret White Watson
admitted April 25th 1893

a mica

Private Patient. Admitted to the West House.
She is single, 25 years of age, a housewife and a Presbyterian residing at Fulwood, Inchinnan. She has been insane a few days and this is her second attack, the supposed cause being overwork. She is not subject to epilepsy, nor is she dangerous to others and it is doubtful whether she is suicidal. No H.P. known.

Medical Certificates I "Has depressed views of her own condition, declares herself unfit to live: is restless and alternately cries and laughs apparently without cause."
"Her incoherent method of relating any incident, losing altogether the thread of her story: laughing without occasion and speaking in a rambling way to herself".

25/3/93

Attack of 19.

For account of case vide Vol. II p331

She was in Gartnavel for 4½ months in 1887, for an attack of melancholia the supposed cause being the death of her mother. She got quite well. She melancholia seems to have been of a mild type with some delusions of a religious character.

On admission she seemed ~~&~~ weak and exhausted. Her face was pale and worn looking and her expression was heavy. She was restless, constantly moving and sometimes sighing and crying. She was put to bed but didn't sleep much that night. Next morning her lungs and heart were examined but nothing abnormal was discovered. She is a fairly tall girl with light complexion and light hair. ~~She is~~ When she walks about she swings her arms and takes long strides and gives one the impression of being pretty strongly made. She is a good deal excited walking up and down and talking

Margaret White Watson

1893

to herself. If spoken to she will stop and shake hands and then immediately walk away. She will not wait to enter into any conversation. When asked she will put out her tongue which is dry and covered with a brown fur. She mistakes the identities of people and thinks that ~~some~~ one of them about her is her mother who however has been dead for some years. She is quite unconscious of where she is and her speech is incoherent. She however recognised one of the patients who comes from the same district as herself. She is not destructive though she accidentally broke a pane of glass. A black draught has been given her which acted well and she is ordered to have as much nourishing food as she can be got to take. She requires to be sponged. Exercise in the open air is also prescribed.

April 28th Last night she was given m xx of Paraldehyde. After she had been asleep about ten minutes she was unfortunately wakened by the banging of a door and she became quite maniacal. She only slept an hour during the night and this morning she is drowsy and rather prostrate, refusing to put out her tongue.

" 29th In the middle of the day yesterday she became very maniacal but quieted down towards the afternoon. Hyd. & Chlor. were given her at night and she slept well.

May 1st Slept fairly last night after Paraldehyde ℥ss m 40. She is not taking her food well and she also refuses to speak. She is not so restless but does now and then waves her arms about.

# Margaret White Watson

1893

May 4th She still requires the aid of Paraldehyde at night to make her sleep. She has quieted down somewhat during the day so but she refuses to speak or to answer any questions and also to take her food unless it is put into her mouth. When spoken to she looks at one with a suspicious glance and she seems to be under the influence of delusions.

" 8th Continues silent with the exception of answering yes or no after a good deal of persuasion. She sleeps better at night and doesn't always require Paraldehyde. Her general condition is keeps satisfactory.

" 12th For the last two or three days she has shown signs of improvement. Instead of doing nothing all day she has been occupying herself either with sewing or in the kitchen and is also more ready to answer questions though in a low tone of voice. Last night however under the influence as she says of fear she climbed up her window and cracked a pane of glass. This morning she is quite quiet and is rather ashamed of her excited attack last night.

" 17th Her state has not been so satisfactory the last day or two. She is rather under the influence of hallucinations and she thinks she hears her brother calling to her and sees him walking about the grounds. She is excited and restless especially at night so that paraldehyde has to be given.

" 31st She sleeps well without any draught but her mental state is not yet satisfactory. She often refuses to speak and looks with suspicion at any one who addresses her. She requires sometimes to be spoonfed.

So p 342

# Isabella Kilgour Ross Paul

cont. from p 267.

| | |
|---|---|
| 1893 June 1st | Her condition varies: sometimes she talks pleasantly and almost sensibly: at other times she is chattering nonsense all day. When spoken to she can generally manage to pull herself up and answer any question at but immediately afterwards she begins again her foolish chatter. Her general health remains pretty good. |
| July 24th | She has been much quieter for the last few weeks and has also got stouter and more healthy looking. But unfortunately the condition of her mind has not kept pace with her general condition. She has no anxiety about herself, no active wish to get home: in fact her volitional power seems in abeyance. She sometimes but rarely knits or sews and never reads. |
| Sept. 12th | She remains in much the same condition. Her general health is good but mentally she is somewhat stupid and dull and does not make any effort to rouse herself. She is contented with her surroundings. |
| October 26th | She is still greatly afflicted with mental and bodily inertia for which the battery is being used at present. |
| November 29th | No improvement. She will do nothing, not even put on her own clothes. Her general health is good. |
| December 1st | Taken away to-day by her husband, on probation. |
| " 29th | Taken off the Books to-day. |

Discharged Relieved

on

December 29th 1893.

# Margaret White Watson

cont: from p 340.

1893

June 14th — She is still in much the same condition, often very restless upsetting chairs and moving things on the table. Her appetite is very good. Sulphonal in varying doses is given every evening instead of Paraldehyde.

July 15th — The excitement and restlessness is not so marked now but there is nevertheless no real mental improvement. She still evidently hears voices and is unable to enter into conversation. Her general condition is not good. She is thin and pale looking in spite of extra food and hair oil etc.

August 21st — Her restlessness has now greatly diminished but she is foolish in her behaviour and when spoken to laughs in a foolish unmeaning way. She still seems to be under the influence of hallucinations both from what she says and from her gestures.

Sept 28th — She is constantly laughing in a silly way whether she is taken notice of or not. She is unable to carry on a conversation. Her general health is pretty good.

October 26th — She has got very stout lately but her mental condition has not kept pace with her bodily. She is silly and foolish both in manner and conversation but she is very obedient and will do almost anything she is told.

November 27th — She works well every afternoon in the kitchen and in the forenoon is out walking. She is still foolish - laughs or rather giggles without cause.

to p 358.

Margaret Dickie v Johnson

Margaret Dickie or Johnson
admitted May 1st 1893.

p m

Private Patient. Admitted to West House.
She is 28 years of age, the wife of a wine and spirit merchant and belonging to the Established Church. Her residence is Excelsior Villa, Cambuslang. She has been insane about five weeks and this is her first attack, the supposed cause being childbirth. She is not subject to epilepsy, has spoken of suicide and is dangerous to others No H P known.

Medical Certificates I "Incoherent rambling talk. At times very wild and excited."

II "Her conversation is rambling. She is suspicious of those around, violent at times; regards herself to be the Head of the Church and in power to relieve some noted criminal (Mrs Maybrick) at noon to-day &c."

Her nurse states that she imagines her to be a living corpse and wanting her to swallow a curling stone; she disowns her children at times and is jealous of her husband.

The history of this patient is that she became ~~ill~~ ill ten days after her fourth confinement which was on the 13th of March /93. She seems to have got excited at times but as a rule only pesters and frolics.

She is above the average height, sparely made and with a clear pink complexion. Though thin she does not seem to be emaciated. Her lungs give no evidence of organic disease.

Her manner and conversation are both very frolicsh. She will converse freely with strangers on any subject and more particularly about herself. She doesn't realise where she has been brought to but thinks it is

# Margaret Dickie or Johnson

1893

on the South side of Glasgow. Her speech is incoherent so that she is quite unable to keep up a sustained conversation. Some words which she hears uttered or which she utters herself bring up other ideas either connected with the sound of these words or with their sense. She thus in conversation rambles away, her sentences having some connection & with one another either as regards sound of words or association of ideas. She seems to have no fixed delusions. She sometimes refers to her husband as one who has nothing more to do with her and she also seems to have lost her affection for her children. She is quite quiet and not at all excited. Her memory is somewhat impaired.

May 5th Since admission she has been sleeping well and has not required the aid of any drugs. She has also taken her food well and has been put on P porter. She is out as much as possible in the open air. Her mood varies. Some days she is bright and cheerful; other days she is depressed and on being spoken to bursts into a fit of weeping declaring that she will never see her husband and children again. She soon however recovers from this state. She now knows that she is in an asylum but is not much affected by it though once or twice she seems to regard it in the light of a prison and to herself being shut up here for some misdemeanour.

# Margaret Dickie a Johnson

1893

May 12th Her general health continues satisfactory but there is as yet no mental improvement. She mistakes the identities of people and asks the writer sometimes if he is not Mr. so and so. As a rule when she is first spoken to she is fairly sensible and answers simple questions rationally and connectedly but after a short conversation her mind seems unable to concentrate itself on the subject in hand and now begins to wander to other subjects. Her manner is pleasant, open and frank.

" 31st She has considerably improved during the last week or two. ~~Her~~ She is able now to keep her attention fixed on one subject when required to do so and does not make foolish and unmeaning remarks. She also does not now mistake the identities of the different people about her. She is bright and cheerful and seems to enjoy to a certain extent being here. She says she is anxious to get home to look after her children but she seems somewhat displeased at her husband for putting her here.

June 14th Her improvement is not uniform. After a visit from her father she was quite upset: & weeping and talking incoherently and demanding the reason of her being here. This shows that her mental equilibrium is not yet established.

July 5th She has been much better lately and has not had any outbursts of excitement. She is quiet and oftentimes too much so as she is inclined to mope. She talks sensibly and realizes that she has been ill.

J. o p 357.

Elizabeth Lennox or Robertson
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Elizabeth Lennox or Robertson, 48.
Admitted 6th May 1893.

Private patient. East House. She is 48 years of age. married and the wife of an artizan residing at 11 Ferry Road Renfrew. She was brought to the asylum from the West. Infirmary where she has been under treatment for so called Rheumatic fever. She has been insane for about 2 months, & this is her first attack. Cause is put down as Rheumatic fever. She is not ep. -ileptic or suicidal but may be dangerous to others. c/o H.P.

Medical Certificates bear I. She will not answer questions, she cries out that she is being burnt and has to be held down by force. The Ward Nurse says that she is very violent at times, ^ the Bible that this is the last day and that everything is being burnt up.

II. She is quite stupid & confused, not knowing her surroundings. She mutters incoherently about her husband, but cannot explain what she means.

Brought this afternoon in an amb. -ulance waggon from the West. Infirmary. She is much excited, shouting incoherent remarks, throwing herself about, & struggling against any form of restraint or control. She is distinctly very ill. her pulse being very small & rapid, 120 per minute her lips & face generally pale & anxious looking & her whole expression being one of exalted exhaustion. There seems to be no swelling of her joints, and her temperature is only slightly above the normal (99.6°) She is ordered stimulants freely, and put in a quiet room as little restraint being used as is possible.

## Elizabeth Lennox or Robertson

7th Late last night she became somewhat calmer, her pulse reacted well to the stimulation, and it was accordingly decreased in quantity & frequency. She had later 30 grs of Bromide of Potass. and had a fair night, sleeping about 4 hours. To-day she is rather more excited, shouting out that Renfrew is on fire, that all sorts of beasts are crawling over her that they are biting her, that people outside are wishful to murder her, that God knows how evil a life she has led &c. She struggles to get out of the room, rushing or half crawling to the door, and knocking against it &c. A chief examn: in a quieter interval reveals no cardiac lesion and her temperature is this morning normal. She is taking nourishment fairly well.

Later. Has had several very excited periods during the day separated by considerable intervals of wonderful calmness, when she has been easily persuaded to take food &c. Her pulse is to-night stronger, her appearance less exhausted looking & her general condn rather more favourable. She is to-night ordered 3iss Paraldehyde.

8th Has a good night after the draught and is to-day in the ward, out of the single room. Her pulse is still very unsatisfactory being 96 and feeble, but she is much better mentally, having had to-day only one minor excited attack of an hour's duration & having taken nourishment freely.

9th Slept well last night without a draught, and continues to gain in bodily strength. Stimulants

# Elizabeth Lennox or Robertson

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have now been reduced to one glass of water in 24 hours. She is not so well mentally to night. She sleeps in the ward and is disinclined to answer questions, looking fixedly before her & talking to herself. Her bowels have been freely opened with Oil, and her urine is free from albumen. at present she is menstruating very profusely.

It would seem that 20 years ago she had an attack of R. fever, & 10 years ago another. From both of these she recovered well. Previous to that she had been very healthy, but since she has had inflammation of the lungs and some disease between her liver & kidneys. She has had 6 of a family, one died very young, the others are healthy. Eleven weeks ago she had the 3rd attack of Rheumatic fever, and at first there was considerable brain disturbance. She was delirious, needed to be held in bed &c. after about 5 weeks she got much better, but a week ago she became worse, the Rheumatism returned accompanied by delusions mostly of a religious or despondent character, and she was taken to the Infirmary, where she was only for 24 hours. She has always been sober, and

11th May. Remains very well mentally. Still menstruating Quiet & reasonable & with no evident mental symptoms.

16th May Is now in ch 4 Gallery & well mentally. Complains of pains in her wrists & knees occasionally, but her temperature has been normal for a week, & the joints are not swollen. She is cheerful & pleasant, but has no recollection of being brought here, nor of what happened for some days after that. She is somewhat anaemic —.

Elizabeth Lennox or Robertson

Mar 26. She has relapsed & is back in Infirmary. Ward. The change for the worse took place 3 days ago. She slept badly one night & the following morning was very resistive, would not go to the bath for her food & fought & struck when urged to do so. In the evening she was sent to Infr. She had seen her friends the previous day & that had unbalanced her it is thought. Since then she has been quieter, but more amenable & says that she does not remember giving trouble. She fears that she cannot pay for her board here, and is very anxious & distressed about her family. She remarks they will never be able to get on without her. In this way she worries & frets a good deal. Her bodily condn. is far from satisfactory

August 8. For about 2 months her condition has been one of more or less resistiveness & destructiveness with depression & with delusions such as that she had no right to be here, that she was here under false pretences &c. She fell off very considerably in weight and her nights were often bad. Now however, for about a fortnight there has been a slow improvement & she is regaining strength & improving in appearance. She is now sleeping better & without draught & while still depressed, yet she is much less so than she was & is capable of being roused & interested. She saw her husband some days ago & the visit had no ill effect.

# Elizabeth Lennox or Robertson

1853.

Augt 23. Improving but very slowly. Very dull & thinks that some thing very terrible must be going to happen, though she does not know what it can be. Free of apprehension but rather cheerier after she saw her husband some days ago. B. M. indifferent but improving.

Septr. 14. Become very dull & difficult to rouse. She does a good deal of work, but in a very hasty hearty way & she always seems to be in a state of mental cloudiness & confusion. She is eating & sleeping well. Ashamed to look one in the face, she gets into a quiet corner whenever she can. Still thinks that she is living on charity here & that she has no right to such food or such accomodation. Her condition just now is stationary.

Septr. 21. Her husband states that when he is with her she is very bright, and only becomes dull when she goes away from him. She is certainly not improving much here, is very dull & apathetic, and while she does a good deal of work, she does it without interest & seldom speaks. ——

Octr. 9th Not much better. She thinks that all she has ever done has been wrong, that she has been a bad wife & mother & that everything done for her here is simply to make her feel her own unworthiness. Bodily condn. fair. Mentally much the same.

Octr. 26. Getting the battery daily to rouse her a bit & just a shade better generally. Very useful & helpful & only despondent as regards herself.

Novr. 23. Was duly once or twice recently a rather unfavourable symptom. Now she seems bright again. Jof. 526

Agnes Wallace. act. 20.

Admitted 9th May 1893.

Ann. Admitted to-day to the East House. She is a single female act. 20 years. She is a united presbyterian & resides at home, address being 165 Onslow Drive Dennistoun. This is her first attack, & occurred when she was 19. years of age, the cause being "supposed ovarian disease." The duration is over one month & under three. She is not subject to Epilepsy. No H. P. known. She is not a pauper, has never been examined before, her nearest relative being her father.

Medical Certificates.

I "Bears incoherence of conversation, with peculiar hallucinations. Threatens to jump out of the window. Conduct as a whole outrageous, & reported as by Father Mother & Sister."

II "Bears a condition of acute mania, wild talking with incoherence. She mistakes the identity of those around. She says she will be killed by poison or violence."

admitted in a very excited condition, having to be carried into the House. Kicking & biting & shouting. When put to bed she remained excited, shouted that the writer was the Devil, that he was going to cut her throat & that the lady in the next bed to her was her aunt who had been murdered here. She was ordered 3ij Paraldehyde and if necessary was to be placed in a single Room.

10th Mar. Slept 3 hours and was noisy & excited the rest of the night. Much excited to-day, singing, shouting & laughing mistaking the identity of those around her, & evidently being under the influence of hallucinations. She is a medium sized girl, with good features, but to

Agnes Wallace

anaemic & poorly nourished. Both sides of the abdomen have been recently blistered for enlargement of the ovaries. Pupils are moderately dilated but react well. Tongue is moist but somewhat coated & proloupses or minute physical examn. is at present not possible.

11th May. Had 3ii Paraldehyde last night and slept 4 hours. Restless & noisy after. Yesterday she remained pretty much in a state of acute excitement but took meals & nourishment freely. To-day there is no change to note. She sits more to-day & is easily managed. Her temperature last night was 100°. This morning it is 99°. F.

She began to menstruate at the age of 13, & contd. to do so regularly till about 17 mos ago. Then it became more frequent & profuse, every 14 or 16 days & lasted 7 days. It also became accompanied by pain. About one month ago mental symptoms appeared, She became very uncertain, took fits of weeping, following by periods of excitement especially at night when she would shriek & alarm all around her. Seen then by a Doctor who diagnosed - (without p.v. exam) enlargement of the ovaries. & blistered over them. Became worse, excitement increased, home management impossible, brought here, The family history appears pure so far as Insanity is concerned. —

16th May Has quietened down considerably, and slept well for two nights without a draught. At present she

Agnes Wallace

is menstruating & pretty profusely. Wails still somewhat excitable, she is much less so, is taking food well & freely and on the whole much better —

22nd Quieter but still somewhat excited & giving trouble with her food & clothes. She is destructive to the latter refusing to keep them on, and continually opening the bosom of her dress &c. She has been sleeping much better, and that without draught. She is also much quieter and is now more given to knowing herself into foolish attitudes & grimaces. Menstruation has in the meantime ceased & she is gaining in bodily condition. She is capable of pulling herself together & of talking sensibly for a time, only to go off into incoherent conversation & silly laughter.

25th sleeping better, and her room has been dirtied & wet on 2 successive nights and to night she sleeps in the ward. She is quiet & fairly coherent, but silly in her talk & inclined to make mischief among the nurses when walking with them. She is still anaemic, but takes her food well —.

August 10. Improved very much both mentally & physically but still not well. It is thought that she suffers from hallucns of hearing as at times she appears to be carrying on a conversation with some unseen person. She lacks attention and cannot apply herself to work. Sensibly silly at times in her talk & rambles. Does her mother that she saw her brother here in the Cricket field that is not true. Menstruation more regular

Top. 447.

Margaret Dickie or Johnson

cont. from p 346

1893
July 24th — Her youngest child of a few months died a week or two ago. She was greatly upset at first but soon recovered and is now fairly cheerful. Her general health is good and she has gained in weight.

August 21st — She may now be considered well. Her views on her illness and confinement to an Asylum are on the whole natural. She quite realises that she has been ill but she sometimes thinks that her treatment might have been continued at home. Even when ill she seems not to be a woman of much mental power or force of character. She left to-day.

Discharged Recovered

on

August 21st 1893.

# Margaret White Watson

cont: from p 342.

1893

December 12th She has not been so well lately but has been more excited, talking, laughing, gesticulating and swearing. She has required once or twice Chl. & Br. at night. She has got very stout.

" 19th Transferred to East House in order that she may get the benefit of regular work in the Laundry.

1894.

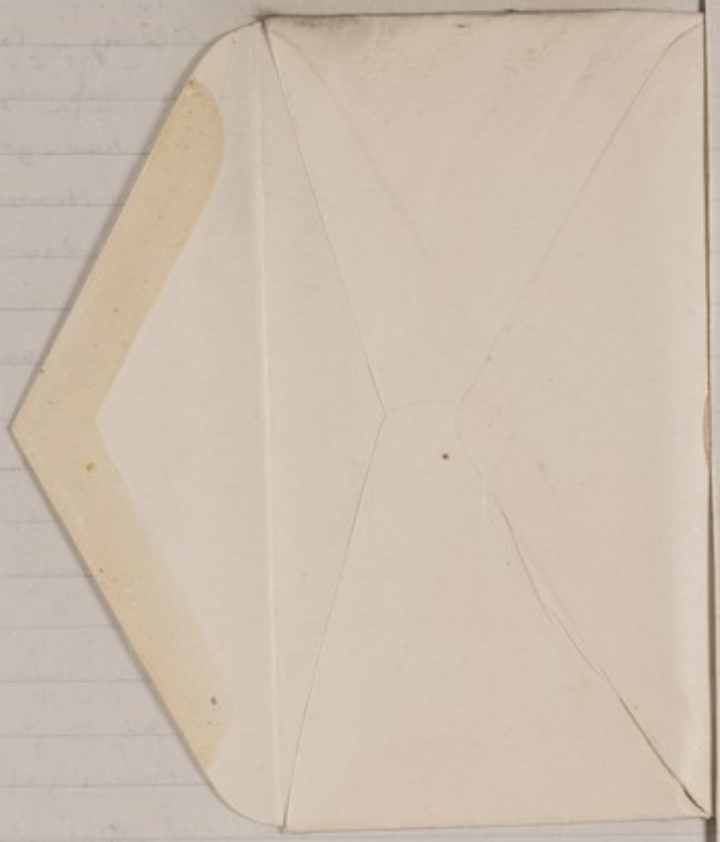
January 9. Working regularly in the Kitchen and sewing &c in the Ward. It cannot be said that there is much improvement mentally as yet. She is foolish, laughs a great deal & does silly things. She is not incoherent and gives perfectly rational answers to questions. She is in No 4 & has been sleeping well.

Jan. 19. Has been pretty much excited since last note & is now in 3rd Ward. She was impulsive, excited & destructive and very sleepless at night. The acuteness of this attack has now somewhat subsided, and she is much quieter, but still quite incoherent, rambling in her talk, mistaking the identity of those around her & getting more excited if interfered with in any way. She has just now 20 gr C. & 30 B. at night with benefit —

Febr. 8th Transferred back to D. W. again. She has not gained any benefit in the East House & mentally seems rather worse than when she came over

March 20th She is still in a very unsatisfactory mental condition. At present she is more dull than excited. If spoken to she often answers sharply and roughly and resents being interfered with in any way. Her general health is good.

To p 404.



Miss Janet Meikle

From p. 108.

1853

May 3rd Desquamation is almost complete, and she will soon be coming back to the House. For the first month she gave some trouble with her food, but now & for some time she has been mentally much better, eating well and heartily & expressing regret at the trouble she has given. It would not be wise just yet to put too much importance on this improvement, but the improvement is there. She has gained greatly in weight and is most useful at the Hospital keeping the nurse, working, reading &c.

May 22. Not back to the Wards yet, but better quite now of the Fever. The mental improvement continues. She says that she cannot understand why she did not take her food. Thinks her bodily strength must have been very bad & that it reacted on her mind. Does not like to talk much about it. Thinks that her friends might have kept her at home for a time & not sent her to the Asylum. Bodily & mentally she continues to improve.

June 12. After a fairly satisfactory convalescence she is discharged to-day.

Recovered

Miss Janet Meikle

From p. 108.

1853

May 2nd Desquamation is almost complete, and she will
[illegible] back to the House. For the first
[illegible] some trouble with her food, but
[illegible] she has been mentally much
[illegible] and healthy & expressing
[illegible] she has given. It would
[illegible] to put too much importance
[illegible], but the improvement
[illegible] seemed greater in weight
[illegible] the Hospital keeping
[illegible] reading to.

[illegible] as yet, but better quite now
[illegible] mental improvement con-
[illegible] that she cannot understand
[illegible] not take her food. Thinks her
[illegible] must have been very bad
[illegible] on her mind. Does not like to
talk much about it. Thinks that her friends
might have kept her at home for a time
not sent her to the Asylum. Bodily & mentally
She continues to improve.

June 12. after a fairly satisfactory convalescence
she is discharged to-day.

Recovered

Letters of Miss Meikle

Miss Janet Merkle
cont.

Mr Annie Lindsay
From p. 112.

1853.

May 22. It is feared that this woman will derive no more benefit from asylum treatment and yet her condn is such that she cannot be put up with at home For some time she may be very well. but she soon relapses. and becomes very abusive, her language being coarse, and nasty. She insinuates that she is kept here for gain, or worse, that her husband wishes her to be here all her life. that he does not care for her & that he loves an evil life. She simply has no control over herself. and in a torrent of rage she makes accusations against all. There is at these times great tremor of the lips & hands and sometimes some ocular squinting —.
In the intervals she is quiet, respectful, pleasant and a good worker. Her bodily health is good.

August. 10 For some time she has been fairly well & is back in No 4. She has not been so pressing in her demands to get home & works well in the Laundry. But it is unlikely that more improvement will take place here & probably she will always be subject to outbursts of ill-temper & abuse such as she has here at uncertain intervals & such as, more prolonged & more marked, were the features of her insanity before admission — Her bodily condn is good.

August 23. Continues well & has had no outburst for a long time. but her husband fears that her re- moval would bring on an attack. She works in the Laundry & occupies the evening knitting sewing &c

To p. 463.

# Catharine Small Kinloch

cont. from p 282

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|---|---|
| 1894 Jan. 11th | She is soft and flabby. looking and wants energy both bodily and mentally. If allowed she would readily escape and often looks about for a corner to hide herself in. |
| March 20th | She is still in a very unsatisfactory condition. Her habits are degraded. She eats leaves of plants &c. and seems to be incapable of being roused to anything like a sense of decency or propriety. |
| June 28th | There is no change. Her mental condition is that of one apparently demented. Her bodily health and condition are poor. |
| October 1st | Sometimes it seems as if she were making an effort to improve but it ends in nothing. She is shy and reserved and only speaks in a whisper. |
| December 28th 1895 | Unchanged. B.H & C. fair. |
| May 21st | She has got fairly stout and strong though rather pale and anaemic. There is no corresponding mental change however. |
| Aug. 19. 95 | No Change mentally. Speaks little and tends her hair Menstruated a few days ago for the first time for long. B H + C (poor). |
| Dec. 24. 96 | There is no change here. She is very demented & eats rubbish. Her general health is good. |
| Decr 8th. 98 | The same in all respects B H fair. |
| 1899. Oct. | Quite demented. B H & C. fair. |
| 1900. Oct 15. | The same in all respects. |

Sarah Reig
from p. 272.

May 16. This patient is 2. days removed by her mother against the expres advice of the Doctor. Her condition is just the same.

Discharged
Relieved

Readmitted, on June 8th 1893.
See page 390. of this Volume.

Feb 7/1901. Mrs Kulock is just the same. Quite demented. B & C. fairly good.

4 August During the past 5 months Mrs Mrs Kulock has been going slowly down hill. She has got terribly thin. No signs of phthisis can be made out. At times there is a rise of temp to 101. in the evening 99°7 in the morning.

1902.

20 Jan Transferred to East House on account of board being reduced.

March 27d The change to the East House has had no effect. She will do no work at all but sits most of the day either twisting her hair or undoing her bodice and has an abstracted dreamy expression. When spoken to she looks at one with a vacant expression and will not answer. Her depression is apparently now chronic with a considerable amount of dementia superadded.

To Vol VIII p 447.

Elizabeth Snowdon Preston
/.

Elizabeth Snowdon Preston. 30

Admitted May 17th '93

Mia Priv. Patient. East House. She is 30 years of age single, and of no occupation. Her residence is at Shettleston. She has been insane more or less for 3 years, but much worse of late, and has been boarded out at Jedburgh & Prestonpans. The cause is unknown. She is not epileptic or suicidal, but may be dangerous to others. There is an N.P. and her mother is weak-minded from a fall.

Medical Certificates bear I That she shows perverted natural feelings towards the other members of the family admits having had fits of uncontrollable temper towards them.

Her sister states that she was naturally of an affectionate disposition, but after nursing a sister & her father a change came over her. She has shown a very violent temper, has threatened violence & been almost impossible to live with

II Subject to periodic outbursts of temper & gross cruelty. Labours under the delusion that she is rich while actually poor. also that strange men occupy the rooms of her sisters & she believes that her sisters lead immoral lives.

2nd Very little can be made out of this case. She is a little, fairly well nourished woman, with a mia appearance, somewhat marred by a growth of hair on the upper lip. She cannot understand why she has been brought here, but confesses that she could not get on at home, owing to the violent temper of her sisters & to the ill usage they treated her. She says that she has no objection to

Elizabeth D. Preston

being here. but it is quite absurd to think that she is insane. Regarding the delusions mentioned in the 2nd certificate she denies them though she says that her sisters are rather fast goers and that she has occasion to remonstrate with them on that account. She certainly knows she is better off than she actually is & in talking with her she evidences great facility does not look on coming to an asylum as a serious thing, regrets that she did not come in the winter, for then she hears there were dances &c & she would have had a jolly time. She is rather vain of her personal appearance. — .

26th In clo 2 Gallery. Quiet & well behaved, smiling & pleasant. During expression to no very actual delusions. But says that this is a very nice place, that she will make arrangements for a long stay here &c. Certain however that there is nothing wrong with her mind — .

June 29. Mentally she seems fairly well. but the nurses report that she is rather irritable, and free of complaints. She now works half the day in the laundry & does well — .

August 10. Gives some trouble now & then by untruthful statements, but does not seem to have any delusions. Now thinks that she should be at home & that she could get on with her sisters now. But she will not allow that she ever was to blame.

# Elizabeth S. Preston

1893.

Sept. 14. To the doctor she gives expression to no delusions, & is rational and well behaved. But the charge nurse says that she has many delusions, some of them of a sexual character. She says that she knows that one of the attendants took employment here because he was in love with her, & that he has a code of signals, by which they understand each other. The nurse also states that Miss P. has delusions of a very distressing character about her. ——

Oct. 9th. Keeps well, in spite of extras. Refuses C. L. Oil. Eats taken her food well. Mentally unchanged —

Dec. 8. Difficult to make much of her. The symptoms of her mental illness are negative rather than positive. She was in bed for a couple of days recently with pain in her side, not referred to any cause. —

1894

Jany. 30. There is no change to note. She does not express much anxiety to get away from the asylum. She is more weak minded than wicked & is facile in conversation & manner. Her bodily condn. is fair

Febry. 22. Has been more under the influence of delusions again recently & these are mostly of a sexual nature. She shows little change.

April 16. It is undoubted that she has many delusions, many of them of a sexual character & some having reference to herself & some to the nurse. She does not often give expression of these to the Doctor, but she says that men in the Dining Hall make signals to her, that these signals are indecent &c. She is thin but healthy & she works half the day in the Laundry

Pt. 554

Jessie Aitchison

From p. 324.

1893.

June 28th a very great change since last note. She is now well & has been so for some time The improvement has been gradual & very satisfactory & she is leaving in some days for Islay for a change. —. The wounds in her head are now quite closed & her hair is growing well. —.

June 29. Discharged to. day

Recovered.

July 8th Reports from her brother are extremely satisfactory.

Jessie Aitchison

June 29. Discharged Recovered.

Re-admitted October 1st 1898 — 30/3/99
vide Vol X p 167.

Third admission June 27th 1916 —
vide Vol XXIII 278.

Mr Nicol or Cameron

From p. 214. —

August 10. In consequence of her getting summer & of a continuance of excitement she was sent some time ago to the Infirmary Ward. She has improves a good deal there, is quieter & has put on flesh. She has still periods of sub-acute excitement, but they are shorter & less acute & she is more easily managed in them. In them she assumes a very high & haughty manner & dramatises to a great extent.

September 14. There is little improvement in her mental condition. Bodily she is somewhat stronger than she was. She is still very unstable in her general conduct & now & then has a noisy night.

October 9. No change to note.

Nov. 23. A condition of subacute excitement prevails along with much foolishness & general want of control. Her bodily condition is good & she is a good worker.

1894.

January 9. Had an influenzal cold some time ago & is still troubled by a cough. Her mental condition is unchanged. She has many delusions mostly with a religious element in them. She has sometimes to be put into a single room at night on account of her noisy habits. Her bodily cond^n is fairly good. —

February 10. Had an excited attack some days ago when she became very abusive, struck other patients &c &c. She is not any better mentally, and her physical health is also below par.

Mrs Creed or Cameron

April 16th Is not any better. as a rule she is excited, but at times is more so than usual. Has then bursts of excitement when she is impulsive, destructive & incoherent. She is in fair bodily health, and in No 3 Gallery. She sleeps indifferently & has a noisy night now & then.

May 24. Has been sent to No 4. but is not any better. Subject to fits & periods of excitement, but as a rule she is quieter than she was.

Aug. 21st There is little change to note. She is an impulsive woman, with periods of considerable excitement. She is then incoherent & destructive & requires to sleep in a single room. At present she is about the best and is working in the Laundry.

Nov. 16. At present she is quiet, but not any better mentally. She does not speak much & all she does is done in an automatic manner & without much interest. She is in good bodily health & condition.

1895.

January 8th She has a noisy night now & then, but as a rule she has now fewer periods of excitement. Her general mental condition is not however any more favourable. Physically she is fairly fit. She works in the Laundry. —

April 10th She is now in No 2 H. and works in the Laundry. She has more mental power than might be believed, and at times talks sensibly. Usually she is silent & rather repellant, and very careless of her appearance. She sleeps better at nights now. Her bodily condition is fairly good

Joh. 411

Martha Young.

Martha Young. aet. 43.
admitted ~~April~~ May 24th 1893.

Dia

East House. The above patient is a spinster, 43. years of age in October 1893. She is a presbyterian & resided at 5 Castle Terrace Bathcart, in the vicinity of Glasgow. The certifying as to her mental condition was executed at 5 Langside Terrace, Shawlands ~~also in the vicinity of Glasgow.~~ This is not her first attack, as she resided in this institution from April to November of the year 1891. The cause ~~of the~~ present attack, as of the former is unknown. She is not suicidal, not subject to Epilepsy but is dangerous to others. N.O.H.P. Medical Certificates. bear,

I. subject to Delusions & Hallucinations, from her general demeanour, conversation, manners, conversation, & excitable actions. That her actions are characterised by cunning & perversion She has taken violent dislikes, where formerly she had quite the reverse feelings, according to her sister's statements. On one occasion she seized a knife, & threatened to use it against imaginary opponents.

II. She complains that people whom she does not know, torment her by whistling, & so prevent her from sleeping. On this account, she has to take powders. She is restless in an insane manner. Mrs Smith her sister says, "She on one occasion took up a knife intending to do for those unknown persons, when no one was at hand, also that

# Martha Young.
contd.

she intended, buying a pistol to shoot them."
She also says "Her behaviour at table is that of an insane person. viz. staring, twitching, & making faces."

26th May. Been very quiet since admission & has slept well during the two nights she has been here. She is thinner than when here last, but is not nearly so ill mentally. She says that she does not suffer from hallucinations, and denies most of the statements made in the Med. Certificates She is sent to 4 Fs.

June 1st She shows more evidence of weakness than she did when last here. She insists that there is nothing wrong with her, that she has no hallucinations, but she is easily led from one subject to another, and is very facile. Her bodily health is fairly good, but she is anaemic. Is having 2 minims Iron & Strychnine in small dose. Sleeps fairly well, but has at times an expression of anxiety. Cannot explain her feelings & becomes rather incoherent after a time —.

August 9. At present she is more excited than on any previous occasion & is under 3. She is very incoherent, her excitement taking the form of incessant talking, about money, about her sister, but there being no sense in her remarks. It is not likely that this excitement will be of long duration, and as she is taking her food & sleeping well & as her strength is well maintained it is not regarded as serious.

Martha Young.

1893.

Augst 12. Excitement continues, and she is very incoherent But with a little sedative she sleeps well at night and her bodily condn is not appreciably suffering.

Augst 23. Continues talkatively excited, but capable of quieting herself together, and talking quietly for a time.

Septr. 13. Settling down somewhat, but still talkative & still requiring a sedative draught at night.

Septr. 20. Quieter a little still & now doing knitting &c. Slightly incoherent & irrelevant in her conversation this morning.

Octr. 9th. Quieter, but still voluble, talking to herself, but sleeps better without draught. —

Octr. 25th. Settling down, but talking still a good deal to herself & much calmer than she was some weeks ago. B. & C. fairly good. —

Novr. 23. Back again in no 4, but still very talkative & very incoherent in her talk. Works in the laundry for a part of the day. —

1894

Jany 9. Little change to report. Noisy & incoherent, but perhaps more subdued in her noisiness than she was. She has some very peculiar delusions about her navel. —

February 9th. Rather quieter & working well in the laundry Still very incoherent at times in her statements & silly in her conduct.

April 16. Extremely talkative still & had to be sent in from the laundry her chatter was so incessant. She now works in the kitchen in the forenoons, and does well enough. But she is not any better & at times she is very incoherent

Dft. 553

Margaret- the Henderson

Margaret Ure Henderson
admitted May 23rd 1893

Voluntary

Voluntary Patient. Admitted to West House.
She is 49 years of age & married. There is no known H.P.
For account of case vide Vol. II p 437. She was in this Asylum for four months about six years ago but as a certified patient. She was depressed and suicidal and had delusions about herself. She was discharged recovered. Recognising the same symptoms now as formerly she on the advice of her husband resolved to come back again to the Asylum. She is very depressed and in a state of acute misery. She hangs her head down and looks as if she would have a fit of weeping every moment and also is very restless saying she does not know what to do or what is to become of her. Her depression and misery has rendered her quite unfit for household duties. She is a small made woman and in fair general health.

May 31st She is still very depressed and miserable which she herself confesses and which her expression confirms. She talks of having an evil spirit in her which she would do anything to get rid of. She is sleeping well and takes sufficient food.

June 14th There is some improvement in her condition. She is not looking very much better and her expression is still dull and & anxious but her subjective feelings of depression are less intense. She does not complain so much of 'that dreadful feeling in her head.'

" 23rd Much more cheerful of late. She smiles and laughs when she speaks and has not now her lugubrious expression which she had when admitted. She is evidently more hopeful of herself and is doing all she can to get better.

So p 397.

Martha b. Atkinson, Voe
Admitted 31st May

Martha C. Atkinson, Vol.
Admitted 31st May 1853.

June 3rd. Her lady was brought from Ireland on the 30th by her daughter. She believed she was coming to an "House of Rest", and was much distressed when she found herself in an Asylum. There were no certificates with her, but she consented to remain as a voluntary patient. She was nervous & rather excitable, but hardly insane & was sent here principally thro' the interference of some ladies connected with her Church. Rel. - most against the desire of her friends.

Communication was established with her friends, but as no agreement could be come to. Her daughter came over again & to-day she takes her mother home with her. Consequently she is discharged

Relieved

Christina McGregor or McOmish.

Christina McGregor or McOmish. aet. 43.
Admitted 7th June 1893.

Neba

This patient is married, a house-wife & protestant. She formerly resided in Crieff, but afterwards at 8 Gardner Street, New City Road, where she was found & examined. This is her first attack, its duration being five days. She is both suicidal & homicidal, but not subject to Epilepsy. There is no H. P. Her nearest relative is her husband, Daniel McOmish, residing at 8 Gardner St. New City Rd.

Medical Certificates. I. "She suffers from delusions & melancholia, thinks her relatives & friends are in league against her, that they have stolen her money. She attempted to commit suicide on the 3rd of June by cutting her throat." II. "In a state of great mental depression, & melancholy. Wont speak, & cut her throat on the 3rd of June, inflicting a severe wound. Mrs Mac Master a neighbour who has been nursing her states, "The patient informed her, that she had gone to her sisters grave & dug out the earth till she reached the coffin, & from it she recovered certain documents." She also states, "It was not her sisters body, she found in the coffin". I." Patient thinks her mother unkind to her & in fact is not her mother, as she wishes to rob her. She has delusions about a lodger, who resides in her house."

June. 10th Since admission she has been quiet, & sleeping a good deal. The wound in throat has closed & looks healthy.

Mr McOmish.

/.

June 12th much better in every way, has got up & gone out with the others to the Terraces, to enjoy fresh air & sunshine.

July 7th a good deal better at times, but very variable She seemed so well that she was sent Home to Crow H. but there she became worse & was brought back to Infirmary. She still sleeps under observation & is not looked upon as being so well as she at times appears to be.

August 9. Very well indeed now & a very kind, unselfish helpful woman. She is of great service in the Infirmary ward where she still is & where she has asked to be allowed to remain till she goes away. Her bodily condition is very good & she sleeps & eats well. —

August 23. Continues very well, but says that she feels she has not so much self control as she would like & asks to stay here a little longer. B.P. & C. excellent.

September 13. Well, but still with a want of self-reliance & with doubts as to whether she could manage outside. An excellent worker & very tender with other patients.

October 25. Still well. & requiring no note —

Decr. 8th Has not been so well for some days either mentally or bodily. She had an influenza cold & for 3 days her temperature was over the normal (as high one evening as 103°). When in bed she gave expression to remarkable ideas, such as that Victor

## Mr. McC Omish.

was being formed on her face. that Carbolic Lotion had been put into her bath & that consequently her skin was destroyed. Since then she has been peculiar, refusing to work, saying she had worked enough &c. as the time for her proposed going away is near at hand & as she is not anxious to leave it is difficult to say how many of these symptoms are assumed or how many real. Having in view her previous antecedents her being watched ——.

1894.

January 9. Better again both mentally & bodily & back to her usual. It is suspected that part of her mental illness was assumed in order that she should not be sent away. Her bodily condn. is good & if anything she is rather stout & florid.

Febr. 22nd. She keeps fairly well mentally, but is very anxious lest she should be sent away from here. She does not want to live with her husband again and she acknowledges she has no affection for him. Much of her illness seems to have been caused by the marriage of a man who lodged with her for many years and she seems to have had more affection for him than for her husband. She is still reticent & at times flighty, misconstrues much that is said to her, and is subject to outbursts of temper.

April 16. It is difficult to say whether this woman is insane or not. She is peculiar in her manner & at times repellant & distant. Thinks things are said to annoy her that are not really so meant. She works all day in the Kitchen & is in good bodily health.

Do L. 537

Maggie Steel.

Maggie Steel. act. 25.
Admitted June. 10th 1893.

Mel

This patient is an inmate of the Infirmary F. C. She was a dressmaker, single & protestant, residing at 25 Commonside Street Airdrie. She was found & examined at 19 Sandyford Place Glasgow. This is her first attack, duration being 5 months, & supposed cause seduction. She is suicidal, but not homicidal & is not subject to Epilepsy. There is H.P. her grandmother, having had "puerperal mania".
She is not a pauper. Her nearest relative is her mother, residing at 25 Commonside St. Airdrie.
Medical Certificates. I. "States she has no rest on this earth, & wishes to take poison. Wishes to drown herself, as she is only a curse & torment to herself & others. The mother & two nurses state, that she is in perpetual excitement tears herself, & tries to choke herself."
II. "States, she is emotial, excitable, & believes she is under some special curse. She states that she is mad, can get no rest night or day & wants to take poison. Her nurse says, she is quite unmanageable, knocks herself about is restless & sleepless.

June 13th On admission, she was restless & quite sleepless for the first two nights. When approached she broke into tears, bemoaning her wretched state & asked for poison. Last night however, she slept about six hours, & to-day is quite calm resigned to her surroundings & has gone out with the others on to the terraces.

# Maggie Steel

June 15. Judging her condition on admission from the medical certificates & looking at it now, there is a very great improvement. She is now in cloth Gallery, and is pleasant & bright, working about the Ward & talking rationally. There is now no trace of the excitement mentioned - She eats & sleeps well & is very pleasant - -

July 2nd Some days after the last note she relapsed & became very emotionally depressed, much concerned about the life she had led, and anxious to be assured that she would yet get better. She began to pick her finger nails & to scratch her her skin, producing in that way small sores over her face. Her sleep became much disturbed and she failed in appetite. Hysterical times of sobbing took possession of her, some of these during the night when she had to be removed under observation She said that she wished to die, that her life was ruined &c ——.

August 12. A very great improvement to record & one that has now been progressive for some weeks She is now very well, bright, cheerful, active and looking on things generally, from a healthy point of view. She has derived much benefit from the Bromides with ammoniated Valerian & her strength & appetite have both greatly improved. Should the present condition be maintained it is probable that she will be leaving soon.

Maggie Steel

1893.

Sept 23. Very weak & going away soon. Cho note to make

Aug. 24 Discharged

Recovered.

Re-admitted May 30th 1905

vide Vol XIV p 207.

Sarah Young King.

Sarah Young King. aet. 32.
Re-Admitted June. 8th 1893.

Continued from See p. 364 of this Vol.

a patient in the East House, single & member of the establish church. This is a continuation of her first attack, as it is only three weeks since she was taken away from here, contrary to the advise of physicians. The duration is from 4-5 months. & the cause is not known. She is not suicidal, homicidal, or subject to Epilepsy. She resided with her mother, the petitioner, & kept a baker's shop at 468 New City Road Glasgow.

Medical Certificates. I. "Restless, incoherent, in continual movement, with unconnected motions, & nervous appearance. The mother says, "the patient thinks there are people on the roof of the house." She throws things out of the windows, shouts, & talks in a foolish way, all the time wanting to get out of the house."

II. "She complains bitterly about the people on the roof, & that they are dangerous. On her doctor suggesting to her, that he had better clear out she told him, "He was quite safe as long as the window was open & fresh allowed to enter" She makes incoherent statements about music. She attempts to throw things out of the window. Shouts & is very excited at times, & if contradicted, threatens to strike."

June 10th Very much excited, & had to be removed from infirmary to No 3. On speaking to her this morning, she was very abusive in her language both to myself & attendants.

June 13th much quieter during the day, but noisy & restless at nights.

## Sarah King.

Her condition as a whole is very much worse than before she was taken away. She still maintains, that there are people on the roof & warns me regularly, to take care, in case they damage my reason, as they have done hers. She is resistant & slightly aggressive.

June 19. She is a good deal quieter than when previously in the asylum, but still has her old delusions, tho not giving so frequent or so vehement an expression to them. She is also rather thinner, but is taking her food fairly well & sleeping better –

August 10. Pretty much the same. On the whole quiet & easily managed, but at times very incoherent & foolish. She sleeps well & is gaining a little in flesh. But her delusions are still firmly believed in, and one day she threatened to stab a woman in the Kitchen, because she believed that that woman was the cause of the people on the roof annoying her. At times she says very quaint & outré things, but as a rule she is good natured & pleasant –

September 13. Very much the same. As a whole quiet & well-behaved. Quaintly incoherent at times in her remarks. B.C. fairly good –

October 6th At times troublesome in her ways. Talking about other patients in an unpleasant way. But usually amusingly frank in her expressions. Her bodily condn. is poor, & she keeps thin.

Sarah Ring.

Nov. 23rd Has been in dor 3 for some time, owing to her being very noisy in No 1. She is stee very talkative & her remarks are quite irrelevant. She is quiet, but takes her food fairly well & for some time has been getting Chemical food. Her continual excitement keeps her thin, but she has no actual or active disease.

Decr. 8. Keeps very thin, much to her mothers sorrow. Continually excited, more or less, talkative, foolish & wayward.

1894

Jany. 9. Continues sub-acutely excited. No change in either her mental or her bodily cond.

Jan 17. Removed to Day by her Mother against the express advice of the Medical Officer. She got a Slight black eye from another patient some time ago and the mother believes she was struck by a nurse. She is advised against removing her but persists in doing so

Released

Readmitted see vol VI p 40.

Jessie Henderson Gilchrist

# Jessie Henderson Gilchrist
admitted June 14th 1893.

Mel

Private Patient. Admitted to West-House.
This lady is about fifty years of age, single and a United Presbyterian residing at 353 Bath St., Glasgow. She has been insane about two months and this is her second attack; her first attack occurring about three years ago when she was treated at home. The supposed cause is "climacteric". She is not subject to epilepsy but is suicidal and might be dangerous to others. No H. P. known.
Medical Certificates I "Incoherence, illusions etc."
Her brother and sister states that she has attempted to swallow hairpins etc. in order to destroy herself.
II "Childish repitition of words and phrases".
She is a fairly healthy looking woman with reddish complexion and looks fully her age. When she speaks it is in a low voice so that sometimes she can hardly be heard at all. Her expression is dull and somewhat stupid. She says that she has been very depressed lately but will give no reason for it. She does not quite seem to realise where she is & and asks for her brother and sister. Her sleep has been bad for some time and her appetite very poor. She is sometimes incoherent when she speaks and not very intelligible. She keeps her eyes fixed on the ground and will hardly look up. Her opinion of herself seems to be morbidly low.

June 19th

The first night or two after admission she did not sleep well so that Paraldehyde ℥ss to ℥ss has had to be given with the desired result. She seems even more stupid and more depressed. She will hardly talk at all but

# Margaret Ure Henderson

cont. from 378.

| | |
|---|---|
| 1893 July 1st | She still continues on pretty well and thinks she would do all right at home especially as ~~he~~ she would be able to go with her family to the west. Her friends also being anxious she left to. day on probation. |
| " 28th | Taken off the Books to. day. |

Discharged Recovered

on

July 28th 1893.

Alcis Moore.

Ward. 330

1894.

Janry. 9. Her habits are far from being correct & she is sometimes dirty. But she is much less resistive than she was is pleasanter, talks & answers questions quite rationally. She does not give expression to delusions at all readily but reads her Bible a great deal. Her bodily health is better, she is stouter & eating fairly heartily.

Feby 10. In much the same condition as at last note She takes her food fairly well & at present there is no extensive active lung disease. Mentally there is no improvement, but she is less resistive than she was some months ago

Feby 21st Cough is noted as more troublesome again and she is taking her food less readily.

April 16th On the whole she is better but is very stubborn & resistive with her food, and often requires to be spoon fed. Her habits are not so bad as they were & she takes a little more interest in things sewing knitting &c. —

March 24. Her lung condition is again worse. She has had several attacks of petty profuse haemoptysis & her temperature is considerably raised. The cough is very troublesome, and she is less restful than might be wished. She has dilute Sulphuric acid & Ammon & all her food cold. Her digestive system is out of order & mentally she is no better wandering a good deal in her talk, & being full of fleeting delusions

June 27. For about a week her temperature has been normal and she is allowed up ½ day. There is no change in her mental condn. It is one of silliness.

Jos. 561

Margaret Kay

Margaret Kay
admitted June 21st 1893

Private Patient. Admitted to West House.
She is 51 years of age, single, of no occupation and belonging to the Establish church. She resides at 2 Spirit Terrace, Kelvinside. This is her second attack and she has been insane about eight days. Her first attack was 14 years ago and lasted only a short time. The supposed cause is shock due to the death of a relation. She is not subject to epilepsy and is doubtfully suicidal but is dangerous to others.
No H.P.
Medical Certificates I "(1) imagining that she is Mrs Gladstone (2) inability to recognise her nearest relations and best friends (3) the use of unseemly language altogether unusual to her."
II "Has a very excited appearance: constantly talks but incoherently and her replies to questions have no relevance: repeats the same expressions time after time without any meaning: sleepless and violent."
This lady on admission was in a state of acute excitement. She was constantly moving, swinging her arms, legs and head about in an aimless fashion; though if anybody came near her she often lashed out. She was also destructive, tearing her clothes and anything else she could get. Her eyeballs were constantly moving and she was continually talking but incoherently. She was quite unable to answer a single question or concentrate her mind voluntarily on anything for a single moment. She had no idea of either place or time and seemed entirely taken

# Margaret Kay

1893

up with the morbid energising of her own brain. She was put in untearable clothing and sent to the padded room for the night.

It seems that she had gradually been getting worse since she was first attached about eight days ago and now was so bad that she was unable to be treated in a private home. She had had plenty of sedatives before admission but none seemed to have any effect. Her first attack of insanity about 14 years ago and lasted a little over a week. She was treated at home and seen by Dr. Yellowlees. On this attack she was depressed and refused food but whenever she began to take the latter she made a rapid recovery.

June 22nd She slept none the first night but was restless and excited the whole time. She was fed several times through the night with milk and took it well. This morning she is in much the same condition. She was however managed to be kept comparatively quiet while her heart and lungs were examined. The latter seem normal but her heart is irregular. No murmur was made out. There are a great number of bruises all over her body especially the right arm and leg. Her right eye is also blackened. She is a woman above the average height and she looks as if she had lately lost a good deal of flesh. She is anaemic and her face is very thin and worn looking. Her pulse is fair but irregular. Her tongue is slightly furred but according to her friends account her bowels were well moved before admission.

Margaret Kay

1893

June 24th The second night Paraldehyde Zij̄s was given with the result that she slept well all night and the next morning was not so excited. She had not such a good ~~night~~ sleep last night as ½ glass of whisky was substituted for the paraldehyde. She is not so excited now but quite incoherent. Whenever anything is said to her it brings up to her mind many ideas either connected with the sense of what has been said or with the sound of some of the words used. She takes her food well and gets milk, eggs, beef tea etc every two or three hours as much as she will take.

" 26th For the last two days there has been considerable improvement. She is not now excited, only restless and she is much more coherent and sensible in her speech. She knows her own name and her address etc. and answers sensibly simple questions about herself. She was up yesterday afternoon and had on her own clothes as she is not now destructive. The bruises about her are disappearing and she is looking better.

" 30th The improvement noted above continues steadily. She is quite sensible now and bright and cheerful, realising that she has been ill and very grateful for what has been done for her. She is looking better but complains of being very weak.

July 7th Mentally she is now well and her bodily condition is rapidly improving. She is not so anaemic and is gaining in weight. Her facial expression is very different now to what it was on admission.

Margaret Kay

1893

July 22nd She is now quite well and goes about the grounds as she pleases. She ~~de~~ has a very pleas-ant manner but there is a certain mannerism about it which is peculiar but which her friends say she has had all her life.

August 2nd Discharged R. Oar

Recovered.

# Margaret White Watson

cont. from p 358.

1894

June 28th — Her general health is not quite so good as formerly; she has got thinner. Mentally there is no change, being foolish, excitable and sometimes abnormally dull.

October 1st — During the past three months there has been no change and no sign of improvement.

December 28th — She is now often dull and apathetic than in an excited condition. Some days she is better than on others when she will work a little. Her health is good.

1895

May 21st — There is no change to record. Her chief symptoms are those of dementia. Her bodily health continues fairly good.

1895 Aug. 19. — Patient is dull and depressed looking and refuses to answer as a rule when spoken to. She does not like to be interfered with & when examined recently submitted in an impatient way. She sits in corners but does a lot of knitting. and though at times restless it does not last long. When interfered with she will speak sharply and roughly. She has been sick at regular times recently a not unusual thing with her when menstruating. but small doses of opium have checked this completely.

1896 Jany. 7 — There is no change to note here. save an increasing dementia. Remains dull & depressed & refuses to mix with others. She does less work than she used to. B H fair

Dec. 24 — There is a great change here. She is brighter & takes a certain amount of interest in what

Cfp. Vol VI page 523.

Janet Brownlie.

Janet Brownlie. aet. 32.
Admitted 24th June 1893.

ord. a private patient in the East House, unmarried & a housekeeper, being a protestant. Her previous place of abode was Colinhill Cottage Strathaven, where she was found & examined. This is her first attack duration being 6 weeks, assigned cause being "pecuniary reverses". Not subject to epilepsy, neither suicidal or homicidal. Here is S.P.

Medical Certificates. I. "She is morose & taciturn, raggedly refuses to answer simple questions. Attempted in presence of the Doctor to forcibly leave the house after 10. p.m. refusing to give any reason for so doing. Her sister Agnes states, "that she caught her abstracting a table knife, from a drawer, which the patient held to her throat." She also reports that on one occasion, the patient remarked, "It was hard to take her life." She hears noises & voices when such dont exist. She feels as if she was in a dream". II. "She is very melancholy, averse to speaking & answering questions. Her mother states "That patient without cause refused to go to bed one night, & sat up instead with her clothes on". The sister, states, Patient does not sleep at night & often gets up, then to do some work.

July 15. Since admission she has been in a more or less resistive condition and has required to be spoon fed & to have many of her wants attended to. She has been very silent refusing to answer the most simple questions, and usually standing stubbornly in the one position. She has not been sleeping well & has had injections pretty often.

# Janet Brownlie

August 11. The resistive condition has to some extent passed off & there is now more or less excitement with delusions. She 'wanders' a great deal, saying she has been accused of doing things she never did, that she has been pointed at as one not to be trusted. Then again she will say, that nothing she does is any good, that it all comes back on her &c. She is on the whole better than she was & has been sleeping sounder, for some nights without hypnotic of any kind. Her appetite is better, and she now takes her food herself. But for some hours every day she is restless, moves about the ward in an aimless fashion, hanging on to the arms of other patients & talking almost incoherently -.

August 23. Rather better, & has good days now & then when she talks fairly rationally & once she wrote a sensible letter to her friends. Just at present she is not so well again, is more stupid & resistive & seems confused. She has not been sleeping so well. But her bodily condn is fairly good.

September 13. Extremely variable. Some days she is found working, replying to questions fairly sensibly & generally showing great improvement. But at other times again she is resistive, sullen refuses to work, to speak, or to do anything. On the whole she is better but the betterness is of doubtful constancy.

Septr. 20. To-day she is better. Brighter, less resistive, & helpful more than usual.

# Janet Brownlie

Octr. 9th Beyond a certain point she is not improving much less resistive than she was, she yet shows little tendency to spontaneous healthy mental action & is now more passively ill. At times she does a little work, but it is difficult to keep her always occupied and her face has little look of intelligence —

25th Picks her nails a great deal & is terribly difficult to make anything of. Speaks little & is duller than she was. Will not be interested. Sleeping better & in fair bodily health.

Nov. 24. Varies very much. Has days of resistiveness when she needs to be fed, requires to be dressed & undressed, when she stands in one position for a long time without moving. Refuses to speak & will not do anything that is asked of her. Again she is much better, adr better & walks more surely & the other day when her friends saw her she behaved very well & they could not see much wrong with her, except that she wandered a little in her talk, & insisted that nothing was wrong with her —. She sleeps well & her bodily condn is good.

Dec. 8. Has been tried in the Laundry, in the Kitchen &c. and does with no good results. She picks her fingers, scratches her head but will not do anything useful —

1894.

January 19. There is no improvement in her mental condition & bodily she has fallen away a little in flesh. All sorts of devices have been tried to prevent her picking her fingernails, but without effect. Her pupils are in bad order in spite of medicines & dieting. She is doing no good

To p. 540.

Robina Reid

cont. from p 233.

1895.

July. 26. No change to note. Is irritable & excitable as ever. & continues in good bodily health.

Nov. 20. Smashed her teeth in a fit of temper. Is unhappy & looks still for relief thro her friend Dan Miller who was to marry when she was renewed & getting her teeth but who is now the person who behest she obeys.

1896

Jany. 7 Is just now down in No. 3. owing to a very violent outbreak. She continues very irritable & refused to leave the single room in which she was placed. Her bodily health appears good.

Dec. 24 Is as usual flighty & irritable and full of delusions but she is manageable in IV just now. Her bodily health is good and [illegible] mentally she is as crotchety as ever.

1897.

Nov. 11. mentally she remains in much the same condition. as a rule she is to be found reclining on an easy chair doing absolutely nothing. If addressed as miss Reid, she says I am Mrs Dan. Miller, the Queen of France. She has many other somewhat high delusions.

1898.

May 17. Still has frequent outbreaks, probably caused by her belief that someone is preventing her from assuming the high social status, which her delusions would entitle her to. eg. to marry Mr Dan Miller. be the Queen of France & have dresses & entertainments in proportion to her dignity. Her B.M.C. is fair.

Annie Watson,

From p. 90.

1893.

August 23. Sent back to the Infirmary L. Oay. She has been getting Hummer & has been restless at night & not nearly so well generally for some time.

Septr. 13. Better since going to Infirmary. Fatter & more constant in her well-being.

October 9. Much better mentally & also personally. Takes much interest in other patients & is helpful. —.

Nov. 24. Continues fairly well. now in cloth & working in the kitchen —.

Decr. 14. Hysterical at times, and with little balance —

1894

Jany. 9. Has been put on the Pauper Roll. Just the same. Fairly well at present & a good worker when not mentally unfit.

Febr. 21st Is rather hysterical at present, and is kept in from the kitchen. no other change.

April 16. Is in Infirmary ward just now as she has been taking her food badly, and is very foolish & generally mentally ill. —.

May 14. Transferred L. Oay to Greenock asylum by authority of the Board of Lunacy

Relieved

Mr Nicol or Cameron
Houp. 372.

1895
September 28th Her health is good and she works regularly in the Laundry. She does not encourage conversation.

1896
March 31st Her attitude and demeanour is one of sullenness combined with suspicion. Though pale she seems in fair health.

April 29th She has not been so well of late but her temperature has been rising at night. She is pale and ill-looking but does not complain. Her legs are swollen and there is a trace of albumen in her urine. She is only passing about 20 Oz. during the 24 hours. At the base of the right lung there are signs of effusion - there being dulness with diminished respiratory sounds.

May 13th Her temperature still keeps up generally between 99° & 100° in the morning and between 101° & 102° at night. She perspires a good deal. Every day she says she is better. The physical signs are much the same.

" 27th The effusion is clearing up but there are distinct signs of tubercular disease in the right lung;- diminished resonance and râles. Mentally she is much better and talks pleasantly.

J. p 586.

Leigh House
March 5th 1897.

Dr Yellowlees

I am calm altho' at times troubled, and am very much puzzled at my long detention here this time. I feel to be a drag on Mr Cruickshank and my family also on the Country at large and desire humbly to request that as I have a feeling that there

and incoherent notes to
sheets of paper. She has
sciatica and last night she
in this beginning with a cry
convulsions the movements
violent & patient turned at
patient cannot support
my having been called
does not seem to be aware of
She is in bed today.
but mentally there is no

ere. There has been nothing
abroad since. and her
ion continues unchanged.

excitement in which she danced and sang & talked & wrote numbers of most ~~fabl~~ foolish letters. She easily becomes amorous & is as easily put off from any request she may make. Her facile condition is very marked & her weakness of judgment is notable especially in the readiness with which the most flimsy excuse is received.

1897. mentally, she is at present somewhat
Nov 11. exalted, very talkative, laying forth her opinion with great precision on very trivial matters. Some days ago she complained of a fullness in the head, apparently real, at least she felt better after a severe dose of Calomel & Jalap.

page 5 & 6

Mr C

1895

September 28th Her health
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1896

March 31st Her attitude
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the 24 hours. At the base of the
right lung there are signs of
effusion - there being dulness with
diminished respiratory sounds.

May 13th Her temperature still keeps up generally
between 99° & 100° in the morning and
between 101° & 102° at night. She perspires
a good deal. Every day she says she
is better. The physical signs are much
the same.

" 27th The effusion is clearing up but there
are distinct signs of tubercular disease
in the right lung :- diminished resonance
and râles. Mentally she is much better
and talks pleasantly.

To p 586.

Mrs C

Mrs C was admitted into the Infirmary on the 28th September 1895 suffering from Phthisis. She had also a Bronchial Cough which had been troublesome for some time. She had a Badly filled Breast which had been discharging for some time. She was also very ill nourished and had a Sallow appearance. She was recommended Cod Liver Oil & Malt Extract. Ordered Poultices to the Breast.

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is some kind of war going on at present, And had remarked to my late Father that I thought there was need of me - I am the who has given up the idea of a future world called Heaven - Therefore am willing that my life - which must go ere long - should be taken

...shutt
p 189.

...and incoherent notes to ...eafs of paper. She has ...iatica and last night she ...m knife beginning with a cry ... convulsions the movements ... violent & patient turned into ... patient cannot support ... my having been called ...es not seem to be aware of ... She is in bed today. ... but mentally there is no ...

...re. There has been nothing ... abroe since. and her ...ion continues unchanged.

...mary is slowly emerging from a period of excitement in which she danced and sang & talked & wrote numbers of most ~~odd~~ foolish letters. She easily becomes amorous & is as easily put off from any request she may make. Her facile condition is very marked & her weakness of judgment is notable especially in the readiness with which the most fluvious excuse is received.

1897. Nov 11. Mentally, she is at present somewhat elated, very talkative, laying forth her opinion with great precision on very trivial matters. Some days ago she complained of a fullness in the head, apparently real, at least she felt better after a severe dose of Calomel & Jalap.

page 5 of 94

Mr A

1895

September 28th Her health
regularly in
not encourag

1896

March 31st Her attitude
one of suble
suspicion.
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April 29th She has
but her lim
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" 27th The effusion is clearing up but there are distinct signs of tubercular disease in the right lung; - diminished resonance and râles. Mentally she is much better and talks pleasantly.

J. p 586.

May Jane Probett
cont. from p 189.

1895
Aug. 19. Continues to write foolish and incoherent notes to various people on dirty scraps of paper. She has lately been troubled with sciatica and last night she had a fit of an epileptiform kind beginning with a cry and then followed by general convulsions the movements of the right side being most violent & patient turned onto left side. This morning patient cannot suggest any particular reason for my having been called to see her at 4. am & does not seem to be aware of having had a fit at all. She is in bed today.

Nov. 20. Is well and about again but mentally there is no change to note.

1896 There is little change here. There has been nothing
Aug. 7. resembling the fit reported above since. and her mental & bodily ~~two~~ condition continues unchanged.

Dec. 24 Mentally is slowly emerging from a period of excitement in which she danced and sang & talked & wrote numbers of most ~~foolish~~ foolish letters She easily becomes amorous & is as easily put off from any request she may make. Her facile condition is very marked & her weakness of judgment is notable especially in the readiness with which the most fluent success is received.

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page 5 1896

413 Margt. McTish or Watt.

# Margaret McNish or Watt. act. 49.
Admitted June 28th. 1893.

Med

This patient is married & admitted to the East House. She is a protestant & formerly a domestic. She was residing with her husband a shoemaker, at Stonefield Blantyre, where found & escamined. This is her first attack, beginning when she was 47 years of age, & for which up till now she has been treated at home. Its duration has been about 1 year & 8 months. The present stage, has lasted 5 weeks. She is both homicidal & suicidal, but not subject to Epilepsy. There is H.P. as her maternal aunt in america is insane & her paternal aunt was insane for a few months prior to death. Nearest relative, is her husband John Watt, Stonefield Blantyre.

Medical Certificates. I. "Delusional, believing both her body & soul are lost, also that her food does not go down the proper way, but on the outside of her body, which is being sawn in two. Her husband states, "She constantly talks nonsense, at times very violent, breaking dishes & flower-pots." II. "She maintains that her food does her no good, that her body is gone, & is torn in two." The husband states, she is very outrageous at times, using violence to him & breaks the furniture etc."

28th Slept little last night but was quiet. A Physical examin. to-day shows her bodily condn. to be fairly good. She is delusional & at times incoherent. Says that her hair is alive, that it leaves her sometimes & comes back, that she

Margaret McNish or Watt

cannot walk, there being something wrong with her legs, while that is not true. She wanders a good deal in her conversation, leaving sentences unfinished &c. —

August 9. She is now in cloth, and somewhat better physically, but not any better mentally. She is quite free of delusions & false ideas, such as that she has no nerves, that she cannot feel anything, that her flesh is made of old clothes &c. She is not so unhappy as the nature of her delusions would lead one to expect, but only asks to get home as she will do no good here. She sleeps well her appetite is fairly good & she is putting on a little flesh, under poor eggs &c —.

August 23. Not any better. Delusive & depressed. Wearies much to get home, and while slightly improved in bodily condition, just the same mentally.

Septr. 20. Improving in bodily condition, but little changed mentally, & with a good deal of silliness in her conversation & manner. —.

October 9. Very anxious to get home. Better mentally, but still far from well. She does not now seem to have the delusions she had at first, and gives more evidence of weak-mindedness —.

Nov. 14. No very evident change. Thinks there is no need for her being here, that she ought to be at home &c. Says if she does not go home now, her husband will get another wife. Her bodily condn. is somewhat better, and she both sleeps & eats well.

Margaret Mc Nish or Watt.

1893.

Dec. 8. at times rough to other patients & often nasty in her talk. Very little improvement. Asks to get home, but refuses to believe that she ever needed to be here. Her bodily health is fairly good. She struck an old inoffensive patient yesterday & she has been warned that if she does it again she will be sent to Clo 3 —

1894 January 9. Little change fresh to be noted in this case. She does not give expression to many delusions, but is at times incoherent in her talk & silly in her manner. There is little to note about her.

Feb 21st Her delusions persist though not freely expressed to the Doctor. She believes that there is something wrong with her navel & that her womb has been taken from her. She has other delusions of a sexual character. There is no change in her general condn.

April 16. Sent down to Clo 2 where she now is. She is not any better mentally, has the delusion that she has no bowels, that everything is wasted away inside her & that all her food is burnt up & does her no good. She works fairly well for a part of the day in the kitchen. Her bowels are really constipated, but move easily enough when medicine is given which she has regularly. She is thin, but in fairly good health.

May 23rd Her delusions remain much as they were & at times she is very peevish and fretful. She asks if she is never to get home, believes her husband has for reasons of his own no desire to have her at home &c. Her bodily health is only fair. Jo. of.

Margaret Mc Nish or Watt.

1894.

June 27. Just at present she seems a good deal better, is talking sensibly, and quite expression is no de-lusions. This has not been of long continuance and has come on comparatively suddenly. In other respects she is about the same. While better in many ways her general expression & manner is silly & lacks stability —.

August 21. The improvement was not long maintained & she is again delusional. Most of the delusions have re-ference to her bowels. She is silly. Her bodily condition is fairly good and she works a little at sewing knitting &c. —

1895.

January 10th. It cannot be said that there is any im-provement in her mental condition. It is one of mixed dementia with delusions. These de-lusions she does not seem to feel acutely as she sometimes gives expression to the most miserable of them with a smiling face. She has been in the Infr. for some time & there is reason to believe that the right pneumonary apex is the seat of tubercular disease. The mor-bid condition is localised & the amount of constitutional disturbance slight. She is being fed up & the region affected counter-irritants are being applied. There was a distinct rise of temperature at first, but none now & she is perhaps a little more cheerful, but very anxious to get home to her husband. Her ex-pression is perhaps one of greater vacancy than it was, but as a whole there is little change

Mauch. Mc Neil or Watt

1895.

April 10th The last note expresses her condition at the present time. She is delusional still & far from well bodily, but the disease in her lungs is not actively progressive. She has extra deal & sleeps well —.

September 28th There is no change in her condition. She is very thin and her health is poor but the lung disease shows no sign of activity. Her mind is weakened and her manner and conduct confirm this.

December 31st She has not been so well of late but has been more foolish and slightly agitated. She asks very foolish questions and her manner is stupid and silly. Her health is poor.

1896

April 13th Her mental condition remains as before: she has many delusions about herself of the same character, as formerly. For five or six weeks her bodily condition has been becoming worse: she has got thin and wasted and can only with difficulty be got to take sufficient food. Two days ago she was attacked with vomiting which has continued more or less up till to-day. Her bowels were pretty well opened yesterday. She is not looking at all well and her pulse is feeble.

Too p 542

Euphemia Black.

# Euphemia Black. aet. 37.
Admitted 7th July 1893.

Dem
Ch III

This patient is in the East House, she is an Episcopalian, unmarried & a student. She resided at the Stewart Institution. Co. Dublin, where she was found & examined. She was also examined in the Royal asylum. Dartmouth, This is her first attack, duration being about 8 years, & for which up till now, she has been treated at the above address. The supposed cause is "overstrain & mental stress". Not subject to Epilepsy, not suicidal & doubtfully homicidal. No H. P.
Petitioner, is, The Rev. C. M. Black 19 Grenville Gardens Edinburgh, her brother. Note New Address Ephraim Lodge The Common, Tunbridge Wells.

Medical Certificates. I. "Eccentricity of language & conduct, the latter evidenced by violence, (libidity)" destructiveness & uncleanliness. Periodic excita
II. "Excitability of manner with volubility, at times amounting to foolishness. Failure to recognise, the fact of her previous attacks, & reason for detention in an asylum. Remembers frequent outbursts on her part, in which she was destructive & violent, but thinks her conduct was quite justifiable."
"She was four years in the Stewart Institution Co. Dublin suffering from "recurrent mania", & from which she still suffers. In those attacks she was violent and destructive, as communicated by Dr L. R. Reveal of Dartmouth."

21st July. This lady was said to suffer from Recurrent Insanity, but since admission she has been more or less excited, & the excitement is not acute.

Euphemia Black
/.

She is extremely talkative & her conversation verges at times into incoherence, but on the whole she is fairly easily managed & does fancy work - sewing &c. It is difficult to say much about her delusions. She confesses that she is insane but says that we are all mad, that everyone in the world is daft &c. She says these days laughing heartily now & then at her own wit. She has been sleeping well since admission, her appetite is good & she is in Ward Gallery -.

August 11. It is not easy to describe her condition accurately it is one of excitement, almost constant excitement but not passing beyond a certain power of self control She is lively - perhaps accounted for by her nationality - and makes many jokes. She is not quite so careful about her personal appearance as might be desired & is even slovenly. She is on the whole amenable to advice and her condition has changed little since admission -

August 23. Has to be in dro 3 for a few days recently on account of being noisy, & abusive. Better now & back to H. Her brother saw her recently & thought her much better.

September 13. She shows deficient self control, but is not very difficult to manage. She talks a great deal & there is little sequence in her remarks though they are not incoherent. She works part of the day in the Laundry & Kitchen, & knits when in the Gallery. She is very Irish in many of her ways, & is usually good-natured.

# Euphemia Black

1893.

Oct. 12. Her general condition is one of much excitement. She has a certain amount of self control, but not very much, and what little she has is apt to desert her when she talks a little while. She makes ridiculous statements & may be said to have delusions inasmuch as she believes that she is not insane. that her father & other relatives are still alive, whereas they are dead &c. She is extremely outspoken, but on the whole easily managed with a little tact —

Nov. 14. an extremely talkative and incoherent demented woman. saying at times most foolish & inappropriate remarks. She is on the whole excited but has no apparent delusions. Her bodily health is fairly good.

Dec. 8. Working in the Laundry now part of the day. almost always above the level of health in regard to mental condition, but not dangerous or destructive —

1894.

January 19. A little pleasanter, but almost continually talking and as a rule a little excited. Works away fairly well in the kitchen & sleeps in the west House. While not incoherent in her language, her ideas are incoherent & her conversation irrelevant.

Febr. 6th. Was so abusive some days ago that she was sent to clo 3. Her language to the other patients was very nasty. and she struck some of them. a good saline purge keeped her & she is now better & back again in No 4.

Febr 21st. Back again in No 3. She was too abusive & stormy to be put up with in No 4. In 3 she is fairly quiet but unrepentant.

Joh. 5746

Bethea White

Cf. Vol. VII page 266.

Bethia White
admitted July 4th 1893

Private Patient. Admitted to West House.
She is 42 years of age, single, of no occupation, a Presbyterian and residing at 22 Westminster Terrace, Glasgow. She has been insane for two days and this is her fourth attack; her age on her first attack being about 37. She has been under treatment in Morningside and Rosewell Asylums. The supposed cause is uncertain, probably previous attacks. She is not subject to epilepsy, nor is she suicidal or dangerous to others. Her sister died in Gartnavel Asylum.

Medical Certificates I "Flight from her brother-in-law's house, and afterwards denying all knowledge of him (2) swearing (3) singing in church when other people were not singing.
She locked herself in her bedroom and threw things out of the window, calling out to people in the back to bring a ladder and let her out.
II "Flight; denied knowledge of her brother-in-law in whose house she had been staying."

This lady was brought here on Sunday evening. It seems that she had been making a disturbance in church, getting up and changing her seat and singing when other people were not singing. She had been insane for two days and during that time her conduct had been very foolish. She locked herself one day into her bedroom and then flung several things out of the window and shouted out to various people below. She also ran away from her brother-in-law's house where she stays.

# Bethea White

1893

She is a tall, well made woman but pallid pale face. There seems to be no organic disease present though she has a cough and also a family history of phthisis as her father died of that disease. Her manner is that of exaggerated politeness with which there is mixed up a good deal of foolish behaviour. In spite of this last however it can be easily seen that she is a person of good breeding. She is restless and somewhat excited shown by her constant movement. She can only sit still for a moment and then gets up and walks about, talking or laughing either to herself or to those about. She will bow and shake hands with great politeness but then almost immediately afterwards she will turn her back and walk away. Mentally she is foolish, with slightly different memory and incoherent to some extent. She is unable to maintain a conversation on any subject for any length of time but soon wanders off to something else. She is quite aware where she is and from some of her observations and habits seems to be quite accustomed to asylum life. She is not a bit ashamed of her behaviour in church but rather delights to give an account of it. She seems to hear voices as she sometimes answers when nobody has spoken to her.

July 14th She is still foolish both in manner and conversation. She broke a ~~window~~ pane of glass in her room and tossed everything out of it that would

1893

go including her soap. toothbrush &c. She made no attempt to excuse herself but acknowledged that it was foolish and promised not to do it again. She takes her food well and generally sleeps well up till the early morning when she awakes and is restless and excited.

July 21st. There is not much improvement in her condition though on the whole her manner is quieter. Her behaviour is very foolish and in conversation she is often incoherent. She is looking thinner and has been ordered codliver oil. She has also a cough which troubles her.

August 21st. Some days she is better than others and on the whole there is distinct improvement. She is not so restless nor excited though sometimes very foolish; nor is she so incoherent in her talk. Her general health is pretty good.

Sept. 8th Her general health is still improving and she is gaining in weight. She is more settled and can remain longer at one thing than formerly. Her manner is not so dramatic as it used to be and she can talk longer on one subject without being foolish.

October 11th She is very well just now and has not been indulging in any eccentricities lately. She is a well read woman and a good talker though now and then when she is discussing an abstruse subject her language is apt to merge into the ridiculous. Her manner is pleasant and agreeable and her general health is excellent.

# Bethea White

1893

November 4th She caught a slight chill a short time ago and had to keep her bed a few days. To a certain degree it affected her mentally as she became dull and a little irritable. She is still troubled a good deal with a cough.

" 7th She has become ill again from the effects of the chill. Her cough is very troublesome and comes on in paroxysms after which she is greatly exhausted. Nothing definite can be discovered in her lungs.

" 11th She is a good deal worse, being weak and exhausted. Her temp. is high, sometimes 102° or more in the evening. There is inflammation of the nasal mucous membrane accompanied by a good deal of discharge some of which she is apt to swallow which causes violent sickness. There is also a very offensive odour present. The nostrils are being syringed out with weak Condy's fluid. There are also mental symptoms present. She is confused, stupid and inclined to be irritable. She is often obstinate and won't do what she is asked - which is quite unlike her usual self. A satisfactory examination of her chest is thus rendered almost impossible.

" 17th Still continues very ill. Her temp. is high, her pulse rapid and weak. Nothing definite can be discovered in her lungs with the exception of a change in voice sounds at the angle of left scapula. Her expectoration is purulent and nummular in character. She is get getting several glasses of port wine with nourishing food every two hours.

Bethea White

1893

November 22nd The sputa was stained and examined microscopically for the tubercle bacillus but none could be discovered. The smell is very offensive on but she herself is quite unconscious of it. For the sickness she has been getting Bismuth and Opium powders with beneficial result. Her cough is still one of the most troublesome of her symptoms to treat. It is hard and barking. Inhalation of Condy. Tinct. Benz. has done good. She is pale and has lost flesh.

" 28th For the last day or two she has shown signs of improvement. The symptoms noted above have all been lessened and the anaemia is not so marked. Her temp. is now normal and remains so and she sleeps well at night.

December 5th The improvement continues. Her cough is now slight, there is no expectoration and the anaemia has disappeared. She is better mentally and is now comparatively cheerful.

" 12th Has been up for the last few days and with the exception of an occasional cough is now quite well. She is bright and cheerful and is renewing with vigour and ardour her literary studies.

" 30 Very well just now and has been gaining strength and weight. At times she is almost too lively and talkative.

1894

February 2nd Continues well, mentally and bodily, and is discharged today.

Discharged Recovered

on

February 2nd 1894.

Cf Vol VII page 266

June Wylie

# Jane Wylie
admitted July 12th 1893.

Nrel

Private Patient. Admitted to West-House.
She is 38 years of age, single, of no occupation and residing at 8 Mount Pleasant, Belfast. She has been insane for about one week and this is her third attack. She was treated on her two previous attacks which were about 15 and 12 years ago at 'The Retreat' Armagh. The supposed cause is nervousness. She is not subject to epilepsy, nor is she suicidal or dangerous to others. Her mother and a maternal uncle were insane.
Medical Certificates I "Delusions as to getting poison, as to imaginary complaints, sleeplessness; silent, mental condition becoming daily worse."
II "Extremely depressed manner and appearance: morbid self-concentration upon herself. She says that she is dying: that she has destroyed herself; that her throat is closed up and that all her body internally is closing up; all of which statements are delusions."
This lady came from Belfast to-day where she resides with her brother. She has twice before had similar attacks.
She is above the average height and well made. Her features are clear cut. Her general health is fair though she looks rather anaemic. There is nothing special to note about her physical condition. It can be seen at once that this patient is suffering from melancholia. Her expression and attitude denote this. The former is one of deep misery and her attitude is rather crouching. When

# Jane Wylie

1893

spoken to she will not look up and she speaks in a low voice. What she says is all about herself and her feelings. She says she knows she is dying and that her throat is closed up. She seems also to have a good many other delusions about herself. When speaking and detailing her woes she rubs her hands

July 19th She has not been sleeping given Paraldehyde with

She is not any more restless and agitated.

quinine and iron ha

her food fairly well

requires a good dea

also sent outside a

" 25th There is no material

was noisy and restless a

patients. This morning s

and declaring that she is

brain is wasting away.

August 21st There has been some improvement during the last few weeks though she is still concerned about herself, chiefly about her health and often asks the writer to feel her pulse. She sleeps now without the aid of paraldehyde and takes her food very well. A brother of hers has lately been admitted to the West House also suffering from melancholia. Her anxiety about him has done her some good as it has made her forget her own imaginary troubles to some extent.

Symptoms of Miss Wylie, written by herself.

1893

Sept. 8

October

"

November

December

"

# Jane Wylie

1893

Sept. 8th She is not so self concentrated and her conversation is not always about herself. She is looking better and takes her food well.

October 11th She is now up in No 4 but does not appreciate to any extent the change. She is rather solitary in her habits and does not associate with the other patients. Her general health is fair but her mental condition has not much improved. She is still ~~and~~ depressed but her delusions have not now such an influence over her.

" 26th There is no improvement since last note. Her delusions seem at present to be fixed and to have over her a complete control. She has not been sleeping well at night.

November 16th She is no better and always herself affirms with all seriousness and earnestness that she is dying. Annexed is a paper written by herself mentioning the different symptoms and complaints she labours under. It will be seen that they are of all sorts and very many in number.

December 2nd Her face is pale and pinched and she seems to feel the cold a good deal. Her depression is still very great but not so bad as to prevent her attending to the ordinary wants and decencies of life. She likes to be taken notice of and to find a sympathetic ear into which she can pour all her woes.

" 30th Worse instead of better. So prominent ~~are~~ and powerful are her delusions about herself that she troubles everyone she meets with them. Her general health is about the same.

So p 438.

# Jane Wylie

1893

spoken to she will not look up and she speaks in a low voice. What she says is all about herself and her feelings. She says she knows she is dying and that her throat is closed up. She seems also to have a good many other delusions about herself. When speaking and detailing her woes she rubs her hands together.

July 19th She has not been sleeping well and has been given Paraldehyde with fairly beneficial results. She is not any more cheerful and is sometimes restless and agitated. A tonic consisting of quinine and iron has been ordered. She takes her food fairly well though sometimes she requires a good deal of persuasion. She is also sent outside as much as possible.

" 25th There is no material improvement: Last night she was noisy and restless and disturbing the other patients. This morning she is still agitated and declaring that she is dying and that her brain is wasting away.

August 21st There has been some improvement during the last few weeks though she is still concerned about herself, chiefly about her health and often asks the writer to feel her pulse. She sleeps now without the aid of paraldehyde and takes her food very well. A brother of hers has lately been admitted to the West House also suffering from melancholia. Her anxiety about him has done her some good as it has made her forget her own imaginary troubles to some extent.

1893 Sept. October

" December

# Jane Wylie

1893

Sept. 8th — She is not so self concentrated and her conversation is not always about herself. She is looking better and takes her food well.

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... movement since last note. Her ... present to be fixed and to ... mplete control. She has not ... at night.

... and always herself affirms ... s and earnestness that she is ... is a paper written by herself ... e different symptoms and complaints ... under. It will be seen that they are of all sorts and very many in number.

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So p 438.

Jane Knox or Macdougall

1st Admission V. (this volume) pg 122.

# Jane Knox a Macdougall
admitted July 18th 1893.

Mel

Private Patient. Re Admitted to West House.
She is 41 years of age, married, ~~of no of~~ a housewife, a Protestant and residing at Birchbank, Lennie. She has been insane for about a year and this is her first attack. She was in Gartnavel for a few months last year. The cause is uncertain. She is not subject to epilepsy, nor is she suicidal or dangerous to others. No H. P. known.
Medical Certificates I "She talks in a rambling way and very wubbly, laughing frequently without cause: is the subject of delusions as of her husband and friends conspiring to rob her: Her memory is very defective."
II "She is gloomy and suspicious of her relations: says her husband does his best to ruin her & her children: says her husband has tried to poison her and her children: says he is constantly making signs to people in order to irritate her and to make a fool of her - that he always steals her money".
This patient was discharged relieved on the 28th of last April. She had been in for seven months but had shown no real improvement. As regards her family history there were some important notes made on her previous admission.
She is not so stout as formerly, has a florid complexion and is nearly blind, due to optic atrophy. She is in fair general health.
On admission she was somewhat excited, talking incoherently, laughing and clapping her hands. She

For account of case v. p 122 of this volume.

1893.

next morning she was dull and said that she was quite well and wished to go home. She has many delusions chiefly of a fleeting character and depending on whether she is dull or joyous. When in the latter state she has a well-marked sense of her identity as shown by her conversation and expression. She says she knows intimately the Prince of Wales, Mr Gladstone and many other important persons. In fact she will admit almost anything that is suggested to her thus showing great facility. When in the other mood she is dull and gloomy and has suspicions about her husband and delusions of persecution.

July 26th Her condition still has been variable since admission as described in above note. She has been sleeping fairly well and has been taking her food well.

August 21st Amongst her many delusions is the one about being persecuted by her husband and this seems to be fixed as whenever reference is made to him she expresses it in one way or another. She threatens to fight him whenever he comes and accuses him of stealing her money. Her manner is excitable and foolish.

Sept. 22nd Her condition varies greatly: one day she will be dull and refuse to talk while the next day she will be happy and jovial and putting her feet in a sparring attitude whenever her husband's name is mentioned and vowing that she will do for him.

# Jane Knox n Macdougall

1893

Oct. 26th — There is nothing fresh to note about her condition. She varies from day to day but there is a similarity in the different sets of days. Her general health is fair.

November 20th — Her likes and dislikes vary. Sometimes she is very bitter against her husband but this bitterness is exceeded when she refers to her mother-in-law. Even in her anger she is very foolish and ridiculous. She also sometimes says unpleasant things about former medical men who have treated her.

December 30th — Her variations are nearly always the same: one day she will be depressed: the next she will be elevated and the characteristics of the depression and elevation are the same on their respective days.

1894

February 1st — Her chief delusion at present is that she has been dead but has now risen from the dead. She is however very dull so her resurrection seems not to be of a very joyful character.

March 20th — She has been dull for some time and has had no periods of exaltation. Her general health is fair.

June 28th — She is rather thin but nevertheless in fair health. Her condition varies greatly: sometimes she is very dull and will hardly speak at other times she is joyous and lively.

To p 450

Jane Laurie or Rowe

From p. 328.

1894.

January 9. Has a touch of influenza, her temperature rising to 103°6'. Better again, but a cough left. Very feeble & frail. Dirty in her habits & requiring much careful nursing.

January 30. Has become stronger again. but with greatly diminished power in her lower limbs. Is entirely bedridden but more talkative than she was, and her appetite is good. —

February 9th Failing a good deal & much troubled by a cough which she has much difficulty in uttering. But she has still some spirit in her.

February 18th Became gradually weaker and sank & died to-day at 5.40 pm.

Death.

Chronic Cerebral Atrophy Old Age

# Jane Wylie

cont. from p 432.

1894

February 1st. Her chief pleasure in life is to nurse her own misery and for anybody to tell her she is better is to offer her a grievous insult. She can recognise when some of the others get better but not for a moment will she admit the possibility or fact of herself improving.

March 20th Still unhappy and miserable and refusing to be comforted. She is evolving better and her delusions do not agitate her as they used to do. She talks more calmly about them but also with the same assurance.

June 28th She is in fair health and goes out a good deal with some of the other ladies. There is no change mentally.

October 1st. There is no change. Mentally and bodily she is as before.

December 28th Her bodily health and condition are fairly good but she dislikes exceedingly being told so. She is industrious in a way but always has a glowering expression of countenance.

1895

May 21st. During the past few months she has shown signs of improvement. She is evolving better and is not quite so dull and depressed nor so ready to give expression to her delusions.

Aug. 6. Continues a little dull but is quite rational & free from delusions.

August. 15. 1895. Discharged today

Recovered.

Elizabeth McLaren or Beith.

Elizabeth McLaren or Beith act 56.
Admitted July 25th 1893.

Acted. at present in the East House, a protestant F.C. & married. Formerly resided at 63 Kent Road, where found & examined. This is her first attack & has lasted between eight & nine months, for which up till now she has been treated at home. The cause is uncertain, she has been subject to Epilepsy, is suicidal but not homicidal. Her sister is Isabella McLaren or Lang, resides at Rowanlea. Hill. There is no H.P. & she is not a pauper.

Medical Certificates. I. "Excited, restless, melancholic state. Wrings her hands, weeps & maintains, that she & her husband are to be executed. That her friends & neighbours point at her as a condemned woman. She is subject to delusions." The husband says, "She often maintains, that it is useless to live, & that he should join her in death, suggesting drowning as suitable. She is neglectful of her duties, & sits bent over the table. is getting worse.

II." thinks she & her husband, are to be executed on the 30th of Sept, as they have been condemned entitled, for something which came out in the church. If she had not been condemned to, she says "She would have to commit suicide."

August 1st This poor lady is very depressed & has delusions. The nature of which are stated pretty correctly in the certificates. These delusions are pretty fixed & do not vary & she sticks pretty closely to the same story. viz that her husband & she have been tried & condemned and are to be executed. For herself she says she does not care, but her husband is about to suffer for

Mr Beith

her crime, the innocent for the guilty

She is a woman of about med-
-ium height, but is very thin & badly nourished
with a look of great anxiety on her face. She
has previously to admission been taking opium
pretty freely to procure sleep. Since admission
she has had Paraldehyde in 3T to 3ij doses &
has usually got 5 or 6 hours sleep. She takes food
fairly well, but without much relish. She is of an
uncomplaining nature, and thinks that the place
is too good for her. When assured that she will
get better, she feebly shakes her head & says that she
knows that she will surely be kept here till
the day of execution

August 4. Gaining a little in weight (2½#) and now in
No 4. Ward but still sleeping under observation.
She still has Paraldehyde & with a fair measure
of success. But her delusions remain the same.
To night she is in great distress. She saw a
policeman come to the door (he came with a
man from the Pol. Office) and she says that he
came for her, that she is to be taken away to-
-night & that the end has now come. She is
being carefully watched. She saw her husband
a few days ago, but cares little of meeting to him
except their impending doom & her trouble is
not that she should have to die but that he should
suffer for her. She has some idea that if she were
to die first then his life might be saved. She has
nourishing food, eggs, stout, &c

11th Aug. Perhaps a little better. Inclined to deny some statements she made the other evening & doing a little work —.

23rd Aug. Much the same. Sleeping indifferently. Gets a little Paraldehyde with good effect. Still believes that she is soon to be executed, and that she has been condemned. But working a little, taking nourishment more freely & occasionally talks on ordinary topics. Asks to be allowed to spend a few days at home with her husband before the Assizes, soon after which she is to be executed.

Septr. 13. Has been sent back to Infirmary Ward. She is not any better & is still possessed of the same false ideas. For some days she has been excited in her manner. Says in tones of horror that it is just a year since the devil entered into her, & she has had no peace since. She is certain that her execution is only postponed and believes that policemen are in the building watching for her & waiting till they can take her away. She is sleeping about 5 hours a night with the aid of a Draught. On the whole she takes food fairly well. and though not gaining more she is a little heavier than on admission —

Septr. 20. No change. as day after day passes & she finds herself still safe. She changes the day of her believed execution to one a few days distant. Her physical condn is slowly improving, and at times she does seem a little brighter —.

October 9. Not any better. Maintains that her beliefs are not delusions, and that she is sure to suffer sooner or later. Her bodily health & condition are far from satisfactory

Depn. 490

Jeannie Jamieson or Brypow

Jeannie Jamieson or Bryson 444
Admitted August 5th 1893.

Private Patient, Earl House. She is 32 years of age, married & a Protestant, residing at 12 Campbell St. Bonhill. She has been insane over a few days. This is her first attack, and the cause is unknown. She is not epileptic, suicidal or dangerous to others. Ho H.P. stated.

Wrong. Her mother was insane

Medical Certificates bear I. That she cannot be made to speak, but screams at the top of her voice and becomes very excited. She is always catching hold of her tongue & spits at the attendants II. vacant stare. Not answering questions by words but making faces. Calling out at the top of her voice, single words or fragments of sentences. She has been so violent that she has her hands bound & laid up in bed —

Admitted in a condition of pretty acute excitement. She is a tall well built stout woman. Quite incoherent.

6th Aug. An examn. of her body to day shows it to be very much bruised especially the wrists & fore-arms & the knees. The face is also much bruised & on both cheeks are scratches of some size. Both hands are excoriated & black, the result of their being tied before admission. On the left elbow there is a large bruised surface, but the bones are evidently intact. Her 'face' is typical of excitement, the eyes glistening & slightly protruding & the cheeks flushed, while the lips are dry & there is froth about the mouth the result of continual talking & shouting.

Jeannie Jamieson or Bryson.

She spent last night in the padded room, had 3ii Paraeclyde & slept 4 hours.

To. Day she is very excited was not kept her bed, shouts & yells & carries on continual gesticulation with her hands & rhymes much in her back. Bowels were well opened with Bl. Draught. She is not homicidal, but is very impulsive

7th Five hours sleep with 3ii Paraeclyde. Took nourishment well yesterday with permanion & her general cond^n. To. day is favourable, tho the excitement is not abated.

9th Acute excitement continues. Sleep variable & Paraeclyde increased to 3iii to. night. Being treated by isolation, with as little interference as possible abundant nourishment, free action of skin increased by baths & bowels kept open. Works off her excitement a good deal in dancing jumping, flinging her arms about &c. Not mischievous, and not very nasty in her language, but at times erotically inclined. Her tongue is moister & her strength generally is being well maintained.

10th Not nearly so well this morning. Had 3iiss of Paraeclyde & slept 4½ hours. Partly noisy & partly quiet the remainder of the night. To-day she is quiet, but there is an exhausted look about her. Her tongue is very dry, tho not black, & there is a nasty discharge from the nostrils, and a foetid spit. Her skin is hot & dry. Her hands are still sore.

Jeannie Jamieson or Bryson.

what moisten & the sweeling feels boggy. Forces nourish-ment is cont^d, beef-tea, eggs. milk & whisky. Her nostrils are syringed out with Boracic Lot^n & her mouth washed with Condy. — .

11.th Aug. Temperature which yesterday morning was 101.4 fell in the evening to 100 & this morning is normal. She is, all round a little better this morning. Slept 4½ hrs last night with 3ijss Paraeldehyde, & is feeding well. Her nose & mouth are cleaner but the tongue is still dry & brown. Excitement harder to quiet & more easily managed — .

12. Aug. Has become both dangerous & obscene & destructive She has a bad day yesterday, being difficult to manage tearing her clothes, exposing her person, rolling about in bed, shouting & singing. Her bowels were moved 3 times. 3ijss Paraeldehyde at night & 4 hours sleep. Room daily. Physically looking better to-day. Mentally the same. Striking out at every one & impulsive to a degree -

23rd Continues more or less continuously excited & shows no signs of improvement. She still occupies the padded room & gets about 4-6 hours sleep under the administration of Sedatives. Much of her excitement finds exit in speech & singing & she shows a tendency to rhyming in her incoherent conversation. In spite of the excitement her bodily condition continues good & she takes nourishment freely though requiring to be fed. at times she is very impulsive & destructive & at present she has on a Canvas dress. —

Jo f. 461

Agnes Wallace
Rom p. 356.

1893.

August 23. Still unsettled in manner & conduct. Thought much better than she was. Gives at times incoherent answers, & does foolish & aimless things not giving any reason for them afterwards. She is sleeping pretty well & on the whole is better.

Sept. 20. On the whole a little better than she was. More uniform & less impulsive. In very good bodily condition

Sept. 26. There is great lack of stability in her general conduct at times she is fairly well. talking sensibly, sewing & working. but this lasting perhaps for a day is followed by a period of foolishness when she goes aimlessly from one thing to another, when she cannot settle, talks to herself, and answers incoherently. Her bodily condition has improved very considerably —

October 9th She made some extraordinary statements to her friends recently. Said that she was badly used aimless treated, struck, &c. These statements were investigated & found without foundation. She then said that the writer struck her a blow on the face with his clenched fist, also that her hair had been pulled out &c. She speaks a good deal to herself and is not nearly so well as her conduct & manner at times would lead one to imagine —

October 25. No more uniformity in her conduct. She has days of mental health, but they are not increasing in number. At other times she is foolish, talks to herself, does aimless things, plays the piano badly &c.

Agnes Wallace.

1893

Nov. 14. shows, but to a less degree, the same uncertainty being more one day, working steadily, & talking sensibly & then on another day she will be unreliable making faces, moving about the room, and being entirely incapable of continued attention. These conditions are now less marked, and on the whole she is better. —

Nov. 23. Has had a slight relapse. But is better & more settled again. There is no change to note -

Dec. 4. Has gone home for 28 days trial —.

Dec. 31. Good reports have always been got about her & to-day she is discharged

Relieved.

Re-admitted June 26th 1903
vide Vol XIV p 235.

Janet Russell
From p. 188.

1893.

| | |
|---|---|
| August 23. | Has a couple of threads put into her neck some time ago, but without any good result as yet. Impulsively violent & deceptive. Was in seclusion for 1½ hour or 20th inst for an outburst of violent excitement. |
| Septr. 20. | Little better Extremely untrustworthy & no change in her general condn. |
| October 3rd | So long as she has some sedative, such as a Sulphonal powder daily, she is fairly quiet but without it she is not easily managed. is excitable & foolish, impulsive & dangerous. She looks very mischievous. & is in good bodily health. |
| Novr. 14. | No change Extremely tricky & uncertain. In good bodily health. |
| Decr. 8th | Impulsively destructive & dangerous. a bad prognosis has been formed. |
| Decr. 19. | Transferred to Larbert Asylum. |

Relieved.

Jane Kinnear Macdougall
cont. from p 436.

1894
October 1st — Her health is fair. She is still thin. Her mental condition vibrates between exaltation with excitement and depression with weeping.

December 28th — There is no real or permanent change in her condition. She is often noisy, especially at night when she disturbs the others. Being blind she is very helpless and requires a great deal of care and attention.

1895
February 27th — Sometimes she is in the height of happiness: at other times in the depth of despair. Her health is fair.

May 7th — There has been no permanent or real change in her condition during the past few months. Her health continues fair. Her husband is going to board her out in the country so she was removed to-day.

Discharged Relieved
on
May 7th 1895.

For next admission and continuation cf VII. pg 202.
19th June. 1895.

Mary Wigston or Robertson
Zone p-218.

1893.

Sept. 20. There is no change. The mentality is not lessening in intensity & the delusions persist, being at times more acutely expressed than at others, and having the same miserable tendency. Her memory is obviously very much impaired, and she is very facile. Her bodily condn is good & her appetite rather ravenous.

October 25. Up for a little while every day but complains much of her limbs being sore & of the pains in her hands. She does not now perseverate her sensations so much, and has fewer attacks of depression, when she enquires her friends are being kindly treated.

Nov. 24. The increased sensibility in the hands is still well marked, but her mental symptoms are less obtrusive. Her memory is less defective than it was & she is on the whole more rational.

Decr. 8. Suffering from Influenza at present, but recovering. The mentality persists, but she is quieter & the delusions about her family are less intense —

1894.

January 24. Has improved very considerably of late & is now able to straighten her limbs & walk fairly well. There is still considerable affection of the hands, the fingers being bent & a firm grasp causing considerable pain. Tactile sensation is still impaired, and she cannot grasp a pencil or other small article between her forefinger & thumb. Her mental condition has been one of depression rather than of

Mary Wigston or Robertson

excitement for some time past, and she has been very quiet hardly caring to say anything, or to answer questions. Her bodily condn is good & her memory seems better than it was.

February 21. To-day she is in rather a peculiar mood. Last night she was restless, insisted on rising, saying she could surely get a peace somewhere to put her head, that this was not the place for her. In her excitement she comes walk fairly well without assistance. To-day she is in a reproachful & recriminative mood accusing me of having been very cruel to her since she came here, saying that only great self-control has enabled her to bear with the cruelties practised on her &c.

April 16. Her bodily condition has improved very considerably of late, more in fact than her mental, which is apt to be one of suspicion & unbelief. She is now able to walk a considerable distance alone & to make much more use of her hands at times she is apt to resent being spoken to & she is under the belief that enough attention is not paid to her. On the whole however the progress she is making is very satisfactory —

Octr 11th During the past fortnight improvement has been rapid and she has regained in great measure the use of her limbs. Her friends are advised now to remove her for a change.

Discharged Relieved

Jane ann Nevin
admitted 11th augst. 93.

Jane Ann Owen. 58.
Admitted 11. augst '93

Mel Private patient. Ward House. She is 58 years of age. married. and a Protestant residing at 14 Kensland St. Kelliead with her mother. She has been insane about 4 weeks. This is her first attack? the cause is Financial trouble due to failure of the Australian Banks. She is not epileptic or dangerous to others, but is suicidal. Clo H.P. stated

Medical Certificates bear I. that she has an excited look and talks about extreme poverty without cause. Her mother states that she saw her endeavouring to strangle herself on one occasion

II She states that she & her family are totally ruined financially which is not a fact. that nothing is left to her but to be turned out into the streets that she would rather throw herself out of a window than face her difficulties. Her Daughter states that she has used violence to those in the house & has been sleepless for some months & has attempted to do away with herself.

This lady is stated by her friends to have been peculiar for many years. but of late she has become much worse. This has been hastened by a loss of money in the Australian Banks. She is depressed & has been so since admission, says that she is utterly ruined that she cannot now begin to earn her living and that she will not go into the streets but rather would die. She tries in a half hearted way to strangle herself with her hair after admission. She has many delusions some

Jane Ann Clueis

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having reference to the state of her body, such as that there is a knot on her bowels & she should take no food, that her skin is coming out in an eruption, that there is something wrong with her ankle that prevents her from walking &c. Other delusions have reference to other people, whom she accuses of speaking evil of her & of influencing her mother against her. She has been sleeping well since admission.

August 23. Been giving some trouble with her food on account of her delusions. Has has to be fed. Bowels have been freely moved by purgatives. & there seems to be no organic disease. She is stout & well-nourished. She takes no interest in anything, does no work. & has not improved since admission her delusions being as above noted, but the suicidal impulse being less marked.

August 26. Bob with a cloth ties round her neck yesterday kept under strict observation. Delusions about her bowels were marked & obtrusive.

September 11. It seems that she is no better. Full of delusions about her bowels, that there is some obstruction to their free movement, that nothing she eats can be of good to her &c. also that her head has changes in shape recently, that her brain is getting larger, & that her head will soon burst. She is nevertheless in good bodily condition & does not look nearly so unhappy as her delusions would lead one to expect.

Jane Ann Owen.

Sept. 20. A little better. taking more interest in her surroundings and not dwelling so much on her delusions. They still however persist, and have reference to her bowels & to the pecuniary position of her friends —

Oct. 3. Complains very much of indigestion, a complaint that has doubtless some foundation. much better mentally —

Oct. 12. Now in no 4 & much better. asking to work & going to the kitchen to assist there. Still talks rather a despondent view of her social conditions but much better on the whole. —

Oct. 25. Improvement maintained. much better in every way.

Nov. 9. Discharged to day

Recovered.

Re-admitted May 22nd 1895.
vide Vol. VII p 166.

Elizabeth Walker (vol.)

Elizabeth Walker (Voe.), 18.
Admitted 21st Augst. 93.

Ep. Hn — This is a voluntary patient, a young girl. She suffered of right sided infantile paralysis, associated with Epileptic seizures. She is markedly facile & silly, & though there is no hesitn. or stuttering in her speech, her voice is high pitched & tense. The right hand is much wasted as is the arm & to a less degree the right ~~arm~~ leg & foot. It being shorter than the left. The hand has the characteristic appearance. She is very talkative & easily pleased, saying that she likes to be here that it's a nice place &c.

25th Augst. — Sleeps well & is quiet, though very silly. She has had 3 well marked fits since admission, each being ushered in by a well marked sensory aura. She has considerable intelligence & is possessed of a bright happy looking face. Considering the contr. of the right hand she knits well, & writes fairly well with the left.

Septr. 11. — Takes on an average about one fit a day. Also vertiginous attacks of petit mal. Put on 10 grs of Bromide 2ce daily. Just the same —.

Septr. 20. — The Bromide is controlling the fits to a great extent, but when she does have them they are very severe. There is no practical change.

Novr. 14 — Has been in ch 3 for some time. She, once or twice was very free of temper in No 1 & refused to give a pair of scissors her friends had brought her. She bit & kicked & was very nasty generally. In No 3 she is much about the same. Since has Bromide & Chloral & the fits are likely controlled to a great extent. Her ways are very childish, but like many imbeciles she cannot be trusted.

Elizabeth Walker (Vol.)

1894.

February 21. Fits continue and are at times very severe. She has also small fits - of the petit mal. in which she becomes unconscious for a moment but is not paralysed or convulsed. Her mental condn. is one of weakness, but when refused anything she often becomes very angry & passionate & bites & kicks &c. She speaks in a very cheerful tone of voice. —

April 16 - very treacherous & vicious at times, but repentant afterwards, & free of promises to be good. There is no change in her general condn.

June 27. Fits continue at uncertain intervals & her general condn. is unchanged.

August 21. Has had fewer fits of late, but has been worse mentally & in many respects shows the irritability, the wickedness & the malice of the Epileptic. She spits at other patients without provocation, scratches them, bites them, and needs a great deal of forbearance & guiding ——

1895.

January 10th She has many of the "mental qualities" of an imbecile & to these are allied the irritability & unfairness of the epileptic. She is at times quite savage in her conduct & at others she is quiet & nice, with a slow speech & a rather suffocating expression. Her general bodily condn. remains unaltered.

April 10th There is no change in her condn. Fits occur at uncertain intervals & she is then very tricky & malicious, biting, &c. —

Elizabeth Walker (Vol.)

1895

September 28th About a month ago she twice in one day during fits dislocated her lower jaw. It was easily reduced. There is no change in her condition.

1896

March 31st Though she has had many fits and some of them severe since last note her jaw has not been again dislocated. Mentally she seems to be getting more demented.

September 30th The fits continue as before, sometimes severe and sometimes slight.

1897

March 31st She lately dislocated her jaw in a fit but it was easily put back.

Sept. 30th There is nothing new to report. The number and severity of the fits remain the same.

1898

March 29th She was lately in bed with acute bronchitis and seemed to like the extra attention she got. She is now back to her work.

Sept. 30th Unchanged. B M & C. fair.

1899

March 31st She is often very vicious and strikes readily the other patients. There is no change.

Sept. 29th Unchanged. B M & C. fair.

To Vol VIII p 209.

Mr Bryson

From p. 446.

1893.

September 11. Considerably quieter than she was. She is now able to have on her own clothes, and has periods of comparative quietness. when she speaks to the nurses. These are not of long duration as yet. She now takes nourishment more freely and of her own accord. She is not sleeping at all well yet, and is still at nights destructive to clothing. at present she has a Chloral & Bromide draught, in the morning & at night —

Septr. – 14. Very depressed in her mood both yesterday & to-day crying, moaning & bewailing, a great contrast to her condn a week ago, when she sang whistled & seemed happy in her excitement. —.

Septr. 20. Has slept without draught these last two nights till far on in the forenoon. But she is very depressed, wise hardly speak, sobs & cries a great deal & has a look of anguish. a cough troubles her a good deal, & there is profuse expectoration. —.

Septr. 23. Relapsed somewhat yesterday. It took 4 nurses to feed her & last night she was noisy. To-day she is less depressed, but quite silly & foolish —.

October 3. Somewhat better again, and able to have on her own clothes. Sleeping less better, and less secretive.

October 9th Quieter, but showing no evidence of spontaneous mental effort. Quieter, but very variable. Careless of her personal appearance & needs nursing like a child.

October 25 At present better again, after a period of excitement. Just now she is quiet. but is taking her food well & sleeping better. Her condn is generally far from satisfactory —.

Mr Boyson

1893.

Nov. 9. Her condition is so variable that it is difficult to describe it. This morning she is restless, walking incessantly, moving about from chair to chair and remaining settled for no length of time. Yesterday she was dull & apathetic, refusing to attend to her ordinary wants, and sitting staring straight before her. Her cond.n of body is good, but she usually requires to be fed with part of her food. Sleep is fairly good.

Nov. 23. Her habits are very depraved & her face is losing much of its intelligent expression. She is very voracious in her appetite, eating ravenously. She also pays little attention to decencies. Her mental cond.n varies from excitement to depression. In her excited mood she is difficult to manage being violent & dangerous. In her depressed mood, she is sullen, silent & resistive. Her condition as a whole is unfavourable & it is feared that she is becoming demented.

Dec.r 8. She is not any better. Excited at times & impulsive, never showing any tendency to healthy thinking. Bodily condition good, skin acting badly, appetite ravenous. –

1894

January 9. The prognosis in this case is becoming very grave. The cond.n of excitement with depraved habits, continues and she has been sent down to Clo 3. She has a most voracious appetite, and her bodily condition is good. She sleeps well usually at night, but has a mild hypnotic. In her personal habits she is very untidy & her expression is becoming very demented.

Dop. 533

Mrs Annie Lindsay
Group. 362.

1893.

Septr. 20. Been not so well again. Fretful, and complaining Raising against her husband, & suggesting that he keeps her here to meet his own purposes.

October 25 No change. B.O.K. good.

Nov. 23. No change.

1894.

February 10th She is not now so importunate in her demands to get away, nor is she so nasty. But she still has times of excitement which take the form of abuse of all she knows. Her husband is unwilling to try her at home & her mental condn is such that one is hardly warranted in urging him to do so.

March 14. Is just much the same. At times she seems so well that she might be at home, but again she has periods of great irritability & abuse —. These are not of long duration & she is a fairly good worker in the Laundry —.

April 16. The above note expresses her condn now. There is no change.

August 21. She is still subject at regular intervals to periods of great display of temper & loss of control. She then becomes most abusive & foul in her language, making the most unfounded & unjustifiable accusations against all in authority, & seriously injuring other patients by her remarks to them. These periods of excitement last for about 3 days. She is sorry afterwards for them & they seem quite beyond her control. In the intervals she is fairly well, works in the Laundry the greater part of the day, and is in good bodily health

Ellen Annie Lindsay

1894.

Decr. 24. Shows much the same condition of periods of comparative well-being with times of seeding, abusive excitement & vituperation. She then has little control of herself. & her hands & lips tremble. So that she can hardly speak. She works in the Laundry & is very useful. When she is quiet she could easily be at home. When she is bad she certainly requires some control —.

1895.

April 10. Her condition has undergone very little change during the past four months. Just now she is in one of her fits of temper & could not be lived with. These are not very long lived & at times she is pleasant & a good worker in the Kitchen Her bodily condition is good

September 28th Her mental condition and with it her manner and behaviour vary as above described. Her bodily health and condition remain good.

December 31st At present she is fairly well and works industriously in the Laundry. Her constant demand is to get home.

1896

March 31st Her outbursts of temper combined with abuse occur at irregular intervals but in them she would be unfit to live outside. Her health is good.

September 30th Sometimes she seems very well but her condition varies and she becomes morbidly irritable and suspicious.

To p 601

Jessie Oswald Motion

Dia

# Jessie Oswald Motion
Admitted August 31st 1893.

Dia

Private Patient. Admitted to East House.
She is 49 years of age, married, her husband being a retired innkeeper whom she used to help. She is a Protestant and resides at present with her stepson at 16 Craigpark St. Dennistoun. Her own home is at St. Andrews. She has been insane about one year and this is her first attack, the supposed cause being alcohol. She is not subject to epilepsy nor dangerous to others but is suicidal. No H P.

Medical Certificates. I " She is in a state of mental weakness; she has no memory for recent events being unable to recollect the most ordinary events in her daily life: she is fatuous in manner and in conduct; and she is delusive in her ideas, such as that she has been residing at her present address for a fortnight whereas she has only been there two days"

Her husband states that for several weeks she has been in above condition, that she utterly neglects her home duties and her personal comforts; that she is given to wandering from home aimlessly and only partially dressed and that she is sometimes filthy in her habits.

II. " She exhibits great mental weakness, talking incoherently and moaning and weeping in a senseless fashion; has no memory for what is happening immediately about her; neither knows

Jessie Opwald Motion

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states that for several weeks she
has been in above condition, that she utterly neglects her home duties and her personal comforts; that she is given to wandering from home aimlessly and only partially dressed and that she is sometimes filthy in her habits.

II. " She exhibits great mental weakness, talking incoherently and mourning and weeping in a senseless fashion; has no memory for what is happening immediately about her; neither knows

History of clinical
Case
Sept. 93.

# Jessie Oswald Motion

time of day nor days of week; is labouring under delusions as to where she had been last residing; imagines her husband is living in Asylum with her and that he has just gone out for a short walk but will be back directly; is utterly incapable of taking care of herself"

September 11. This woman is somewhat demented. She has been since admission fairly quiet, but has had several noisy turns, when she has believed herself to be at home, when she has mistaken the identity of those around her & when she has been very difficult to manage. She has often shown symptoms of Collapse and on that account she has not been deprived of stimulants entirely, but has a glass of whisky daily. a history of her case from her stepson is appended & it will be seen that much of her illness is attributed to over-indulgence in alcohol. Even in her quiet moments, she is facile & silly, wandering in conversation, rather happy in manner & putting aside statements that do not meet with her approval in a careless, indifferent fashion She is in body somewhat stout & flabby & her skin is peculiarly moist & ill smelling & on her abdomen there is a fading eruption of a pruriginous character. She takes nourishment fairly well & for some nights has been sleeping better than on Admission. ——

Septr. 14. Longer observation shows that many of her faculties are very much weakened. She is very facile, her memory much impaired & her mental condn as a whole weak. She has had one or two tearfully excited periods during the past few days, when she has accused the nurses of stealing her wine & whisky, has believed that she was at home with Mr. Andrews, and has mistaken the identity of those around her. She has however slept well, and is more uniform in her general behaviour than on admission ——

Septr. 30. at times she has a great craving for stimulants. Says that if she were at home she would just get a gallon of whisky & a dozen of beer & have a good drink. Her bodily condition continues to improve and she has had no outburst of excitement for some time She is sleeping well, but shows great facility. —

Septr. 26. a good deal better, but shows great loss of memory and is easily led. Craving for stimulants not so marked. B. condn good & sleep sound ——

Octr. 3. Great want of tone about her general condition She perspires very profusely when asleep. Mentally she is very quiet & well-behaved. The craving for stimults. is less marked & less frequent —

Octr. 12. Becoming very anxious to get away. Asks at every visit, whether she is not improving fast. But extremely facile & easily put off. —

October 25th No change. Asks the same question at every visit & beseeches the writer as being from the same County to do what he can to get her away

Dosp. 575

Hannah Stinge

cont. from Vol IV p 530

1895

March 12th Since the massage treatment was tried the nurses report that the circulation has continued better but that she is more limp and cannot for example sit up so long but is inclined to fall forward. Her health continues good.

June 6th There is no change to report. Her bodily health and condition are good but there is no sign of her coming out of the stuporose condition she is in.

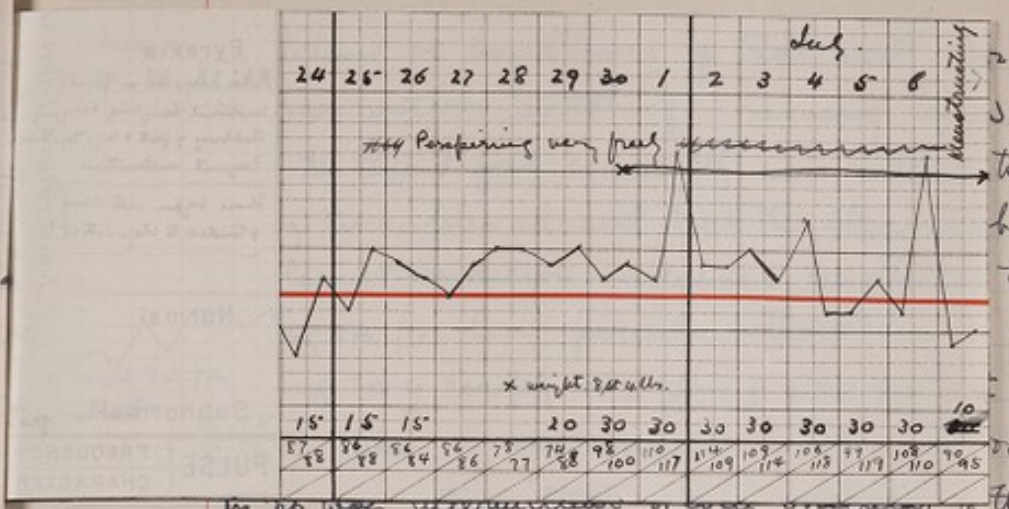
June. 22 Patient was today put on 15 grs of Thyroid Extract. Her urine has been normal & temperature subnormal since the 18th of this month and her weight is 8 st. 7 lb. Pulse rate is generally between 70 & 80 and is pretty regular in speed though not in force.

June. 30. Dose has been increased up to 30 grs. Both pulse and temperature show reaction to drug though not very marked. but perspiration is very profuse today, and patient is very much more emotional than formerly. Micturition also is very frequent. Weight 8 st. 4 lbs.
Patient still keeps her eyes shut and poses in whatever attitude she is given though soon altering the pose especially if left alone.

July. 7 Patient is menstruating today and instructions have been given to stop the drug. Since last note the reaction has been more marked both as to temperature (4 hourly) and pulse. temperature running above the normal line with occasional rises up to 100°7. Perspiration too has been very profuse and there has been some hyperaesthesia about body & limbs or sense

Hannah Sturge.

continues on pg 501.




patient
+ arms
together until
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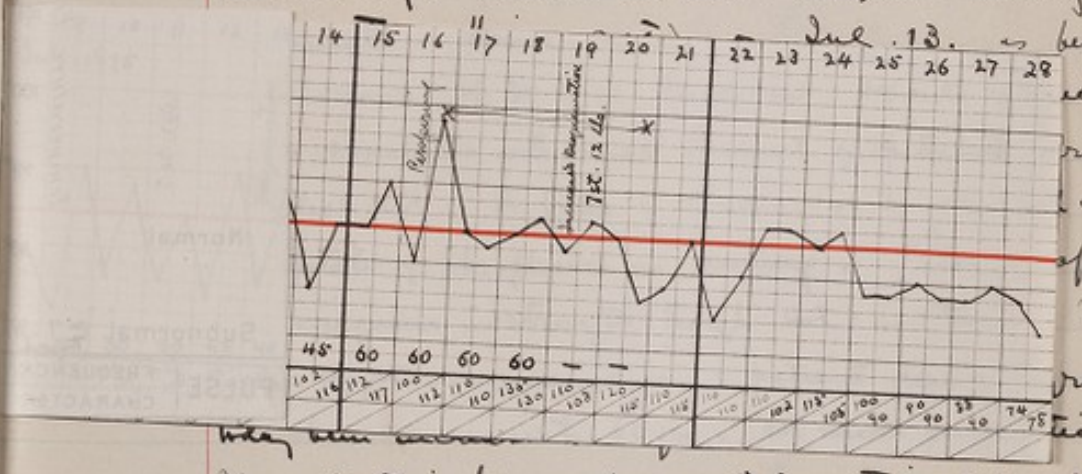
varying from 120 to 130 to 100.
Urine contains no albumen or other abnormal constituent. (July 5:)

July. 15 Thyroid stopped between the 7th + 10th as patient was then menstruating. Bowels continue to require moving by oil

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Moves about in bed much more. + is emotional + responsive to a greater degree.

August. 10. Patient had the thyroid stopped on the 19th of July as the pulse was becoming very irregular. Desquamation (chaffy), + perspiration were marked latterly. There was sometimes a great deal of restlessness + movement on patients part + she was seen to move her head + on one occasion to move the sheet with her hand when it covered part of her face. A week ago also she spoke a few words "I will speak" or something like that

c/o page 501.

Hannah Stinge

cont. from Vol IV p 530

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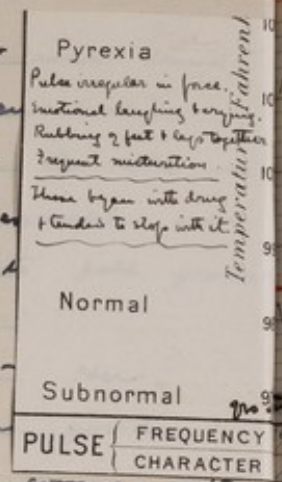


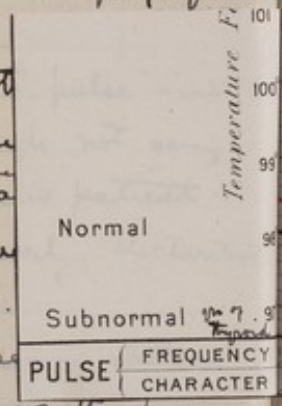

Hannah Sturge.

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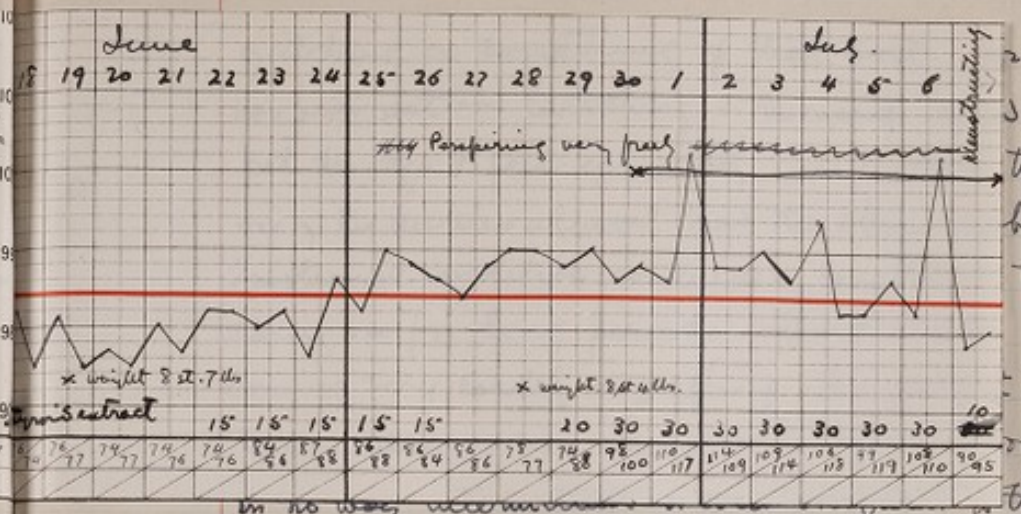


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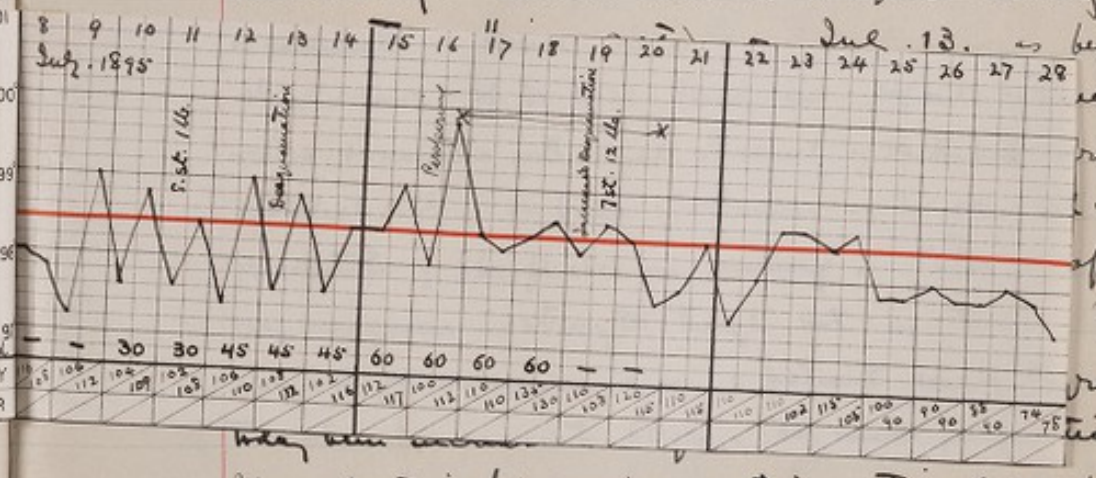


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Hannah Sturge

cont. from Vol IV p 530

1895

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June 6th [illegible] condition she is in.

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continues on pg 501.

of itching or something of that sort: for patient has been restless twitching + moving hands + arms but the legs + feet especially were rubbed together until one of the ankles almost has the skin rubbed off. Emotional condition continues, laughter or tears of them going on for long periods without cause and tears coming very readily on getting when patient is spoken to. Pulse is very irregular in speed + force though in no way intermittent or even irregular to the finger varying from 120 or 130 to 100.
Urine contains no albumen or other abnormal constituent. (July 5:)

July. 15 Thyroid stopped between the 7th + 10th as patient was then menstruating. Bowels continue to require moving by oil or enemata. Urine noted on July. 13. as before. Straw colour. Sp Gr 1030. Faintly acid. Deposits of amorphous urates + oxalates with small amount of epithelial debris + squamous epithelial cells. No trace of albumen or sugar but a small precipitate of phosphates on heating. Pulse is rapid and very irregular in strength though not in time. There is some slight desquamation + patient dose of thyroid has today been increased to 60 grs. Not much perspiration. Moves about in bed much more. + is emotional + responsive to a greater degree.

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Elizabeth Porteous or Cranstoun

Elizabeth Porteous a Gansturn
admitted September 9th 1893

Ann

Private Patient. Admitted to West House.
She is 40 years of age, married and a Protestant, residing at Murchiston Kyle Park, Uddingston. She has been insane about 10 days, and this is her first attack, the supposed cause being grief. She is not subject to epilepsy but is suicidal but not dangerous to others. No H. P.

Medical Certificate I "states that she has killed her sister and that she has been executed three times and says that she is dead at present." Her husband states that she made frequent attempts to get out of a window on the second story and would not allow the nurses to put her clothes on. One of her nurses states that she tried to hang herself ten days ago with a cord.

II "She has a wild look and is very emotional she talks a great deal of nonsense. She thinks she is going to be executed."

This patient is at present suffering from excited (motor) melancholia. She is hardly ever still but is constantly walking about in a restless way. Her expression is that of misery and if spoken to she begins to weep. Hence any conversation with her is interrupted and what she says is generally a rambling statement about herself and her misdeeds and also her punishment which is to be that of execution. Her lamentations generally become worse when she is spoken to

Elizabeth Potions a Cranstoun

1893

or taken notice of.
There is nothing particular to note about her bodily condition. Her general health is middling. She is about the average hight, of fair complexion and rather sharp features. For the last week she has had two nurses to attend to her but she has been almost unmanageable.

Sept 13th She is still restless and her mental state of depression shows itself in outward manifestations. She walks up and down wringing her hands and asking what she is to do or what is going to become of her. At night she gets more restless and excited and almost sleepless. Paraldehyde ʒiiss has been given several times with beneficial results.

" 18th On the whole she is quieter though as yet she is quite unable to settle down to anything. She is best left alone as any notice that is taken of her seems to heighten her misery rather than diminish it. She is taking her food fairly well and has been put upon extra diet.

Oct. 6th There is not much improvement. She is still restless and depressed, lamenting over the iniquities she imagines she has committed. Her expression is one of misery. Opium was tried lately but it had not much effect and now she is getting again Paraldehyde. She slept 4 hours last night.

" 26th She is still restless and miserable, weeping and wringing her hands. Her condition is far from satisfactory and she has been losing weight. Sulphonal 3ss is being given just now with temporary benefit.

1893
Novemb

Decemb

# Elizabeth Portions a Translorum

1893

November 4th — She has lost weight to the extent of 1¾ lbs during the last fortnight. Mentally there is also no improvement. She is restless, always on the move and full of delusions about what is being done & what has been done to her. She is a miserable object and is not making any progress.

" 20th — When weighed last week it is found that she has again lost weight about 2 lbs. Mentally there is still no improvement and no sign of improvement. Her delusions are many, chiefly about herself. She thinks she has been divorced and that she has done great injury both to herself and her relations. At present Morphia is being tried.

December 2nd — No improvement. She is in a restless and excited state, constantly wringing her hands and lamenting her fate. She accuses those around of causing this misery. She is getting Nepenthe just now 7ʃ in the dy.

" 7th — The Nepenthe has been increased up to m 70 in the day but has had hardly any effect so it is now to be stopped and hypodermic injections of morphia given instead. ⅓ gr. is to be given to night.

" 8th — She had no sleep last night on but the same dose ⅓ gr. this morning made her a little calmer.

" 10th — The night before last she slept none but last night after 1 gr. administered in two injections she slept well.

" 12th — For the last two days has had each day two injections of ½ gr. each but the effect is slight. She is getting used to it and it is to be stopped and Cannabis Indica & Pot. Brom. given instead.

J. O. P. 5·29.

Theresa Speirs or Webster
admitted 18th Sept.r. –

Theresa Speirs or Webster, 24. 476 78
Admitted 18th Septr. 1893

Mia Private Patient. East House. She is 24 years of age married, & resides at 18 Rotherar Gardens Partick. She has been insane about one month & this is her first attack of actual insanity; but a few years ago she had what her mother called a "Hysteria illness". The cause of present illness is not known, but she is four months married & is pregnant. She is neither epileptic suicidal nor dangerous to others.
There is a very distinct H.D. a sister having been in Morningside, an uncle having been insane & an aunt having been peculiar

Medical Certificates Vide I. That she is wild & violent, kicking & screaming violently, and requiring to be restrained by force.

II. That she is very excited, has to be restrained by force talks incoherently & declares her husband to be her enemy, and rambles on about her marriage certificate. Her husband states that she has been in a nervous excitable condition for the past four weeks and thinks people are lying in wait to kill her. — & admitted to night in a state of considerable excitement. She had been brought from Edinburgh & on the way had required considerable restraint. For some times she has been very impressive throwing herself about, and talking incoherently. Her body is very extensively bruised the arms & legs especially being much marked. Her tongue is dry & her mouth sore. She has slept little for some nights & for 24 hours has taken no food beyond a glass of milk. She does not keep her bed.

473

475

Theresa Speirs or Webster
admitted 18th Sept.r. -

189

Sept

Oct. 6

20

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Ellen Webster's
Handwriting

Mr Webster

/.

1893.

Septr. 19. Slept none last night, but took 2 glasses of milk. Excited this morning, refusing to keep herself covered or to lie quietly in bed. She is very thin & anaemic. Her eyes are rather prominent, her pupils widely dilated but active enough & her palate is high & narrow. Hands small & not fully developed. There is a considerable hysterical element about her excitement and she is spasmodically incoherent. Complains in her calmer moments of being sore all over. Ordered to be kept in bed to-day. To be freely nourished & given to-day a little stimulant —

Septr. 23. Has become quieter, but not in a satisfactory way. She is foolish, at times impulsive & with a sexual element in her actions and a sensual look in her glances. She has to be watched to prevent her exposing herself. & she talks about private husband & wife matters in a rather indecent way. She is not yet sleeping well & has a little Chloral & Bromide with benefit. But she is now up & asked to get out a little to-day, and she is taking nourishment freely.

26th Not much better & had a bad night last night, being restless, jumping in and out of bed, and getting only 2 hours sleep. To-day she is also restless & her movements are almost choreic like, especially those of the eyes which are constantly in movement, usually from side to side. She strikes one as being affected, & hysterical. She answers fairly coherently, but wanders now & then. She is taking nourishment fairly well & has been out.

Mr Webster

1853.

Oct. 3. Remains in much the same condition of instability having periods of excitement when she tosses herself about, rolls her eyes, grimaces, & is incoherent in her talk. She is however sleeping better & her general health shows a considerable improvement Her husband saw her recently, but the visit did not affect her.

Oct. 9. Shows little improvement as a whole. Subject to fits of impulsiveness, when she must lie on the ground refuse to walk & knock herself about. She has been sleeping better, but gets a sedative now & then. She takes food well, but mentally is far from being well balanced & her conversation is often incoherent and her answers irrelevant.

12th Put to 3 day on Bromide of Potash & Ammoniated Valerian in moderate doses. —

25th Having in view the choreic like movements of the arms, hands & facial muscles, she was put some time ago on arsenic & the dose is being increased. It really seems to be doing her good & she has become a little more sensible. There is some exophthalmos, but not much & the general expression of staring is less marked. She asked to get her food in a basin so that less of it would be spilled. The periods of coherency & rationality are not of long duration but this morning she was wonderfully sensible for a short time, asked after her husband, called the writer by name & showed less muscular movements of an uncontrollable character.

Top. 519.

Mr Threlfall

Form p. 306.

1895

September 28th If spoken to she will often not take the slightest not notice or else merely incline her head. She is very lazy and refuses to do any work.

1896

March 31st Her chief attitude is standing, looking out of a window. Her health is good.

December 31st Unchanged. B H & C. good.

1897

Dec. 31st During the past year she has spent a lazy and useless existence: she has done no work but has simply lounged about with an air of absolute indifference to everything. Her bodily health is good.

1898

Dec. 29th Last year's note describes her present condition accurately and there is little probability of change.

1899

Dec. 27th She is still very lazy and will do no work and hardly speak, although she dresses herself and is neat and tidy. Her bodily health is good.

1900

Dec. 31st Occasionally she does work for herself e.g. darns her stockings but this she often does badly. Her bodily health is good but her expression is one of utter vacuity both mentally & bodily.

1901

Dec. 2

1902

March

Elsie Adams or Shirreff

1901

Dec. 28th Her lariness is still very marked and no amount of expostulation has any effect; she simply smiles vacantly to anything that is said to her although occasionally she looks somewhat ashamed. She still darns her own stockings but even then shows no energy and does it in a listless manner. She was told plainly that unless she did some work she would get no tea at breakfast and this was actually put in force but it had no effect on her and she seemed to prefer lariness to the refreshing effects of tea. Her health keeps good.

1902

March 27th About two months ago she had an attack of subacute rheumatic fever involving both knee-joints. Her temperature varied from 99°-101° for a few days but soon yielded to the sodium salicylate treatment. There was fluid in both knee-joints but this disappeared in about a fortnight and now she is quite well and going about as usual. She rather enjoyed the few weeks in bed as it accorded with her well-marked lariness. There is no mental change.

To Vol VIII p 267.

Mary Stew-art

# Mary Stewart
admitted October 3rd 1893.

Dra

Private Patient. Admitted to West House.
She is 50 years of age, single, of no occupation, a Protestant and residing at 9 Inverman Terrace, Rothesay. She has been insane for an indefinite length of time, probably about 11 years and this is her first attack. She left this Asylum about 5 weeks ago. The supposed cause is unknown. She is not subject to epilepsy, nor is she suicidal or dangerous to others. No H.P.
Medical Certificates I "Her conversation is completely incoherent and irrational. Her manner is foolish and her face expressionless"
II "She is excitable and foolish. She talks a great deal in a rambling manner and expresses many foolish and deluded ideas. She is evidently unfit to control herself."

For account of case vide Vol II p383.

This patient left the Asylum about five weeks ago on 28 days probation and her name was only taken off the Books a week ago. She is demented but has excited attacks. In the former state she is easily managed but when there supervenes on this an attack of excitement an Asylum is the only proper place for her. Her friends were able to manage her when quiet but had to send her back whenever she got excited. Her general condition is good: she is stouter than when she left. Mentally she is the same as on previous attacks of excitement. She is unable to converse rationally and is incoherent. She is constantly talking about the Wemyss Bay Steamers.

# Mary Stewart

| | | |
|---|---|---|
| | She is somewhat excited and restless, constantly getting up and walking about in an aimless fashion. She laughs foolishly and there is not much expression in her face. Her remarks are childish and she takes petty dislikes to some of those about her. | |
| Oct. 6th | She is taking her food well but at night she is often noisy and requires Bromide and Chloral. She is still excited and foolish. | |
| " 11th | She has quieted down and is fr back to her old condition. She is weakminded but enjoys life fairly well. As a rule she sits idle. | |
| November 20th | Very foolish both in her sayings and doings and sometimes inclined to be quarrelsome. Her general health is good. | |
| December 22nd | In good health and as a rule in good temper. She laughs loudly and heartily at trifles. | |
| 1894 | | |
| February 1st | Just now she is excited and sometimes is very noisy. Constantly talking and laughing and waving her arms about etc. B H & C. good. | |
| May 15th | Transferred to East House. | |
| June 27. | In ward 1 Dr. cannot be induced to work & is of no service. She is in fairly good bodily condn. and does not seem to have felt the change from the leisure of the West to the plain living of the East, in any marked way. | |
| August 21. | No change in her condn. Refuses herself as too fine a lady to work, and is in good bodily health, but very incoherent | |

Mary Stewart.

1895.

April 10. Just the same. In good bodily condition. A rather incoherent lady, but at times quite sensible in her remarks.

September 28th There is no change in her condition. Her health is good but she is lazy and idle and refuses to work.

1896

March 31st She is always cheerful in manner and expression except when excited but is quite incoherent and irrational in conversation.

September 30th Still talkative and incoherent and presenting no change.

1897

March 31st Her excitement has not been so pronounced or noticeable of late but there is no mental improvement.

Sept. 30th Unchanged. B.H.&C. good.

1898

Sept. 30th She has kept in good health during the past year and has had as usual attacks of excitement. She is very lazy and does little work.

1899

Sept. 29th She is still in N. 1 and if anything is hardly as noisy or excited ~~as~~ in her usual periodic attacks as she used to be. She is still very lazy and her health has kept good during the past year.

To Vol VIII p 199.

485

Flora Campbell Liddell

Flora Campbell Liddell, 30.
Admitted 6th October 1893

Adm. Private Patient. East House. She is 30 years of age single & a teacher, residing at 40 Bus Lane St. Greenock. She has been insane about a week. This is not her first attack, and she was previously in Gartnavel (see Vol III p. 9.). The cause is put down as family reminiscences. She is not epileptic, suicidal, or dangerous to others.

Medical Certificates state I. That she is in a state of great excitement, calling loudly upon Jesus saying she has seen Jesus, praying impulsively & going on her knees before strangers & attempting to run out in deshabille. Has been already an inmate of Gartnavel asylum.

II Talks in a rapid excited manner, & incoherently about praying to Jesus before paying a visit to any house, or undertaking any work & that Jesus has appeared to & spoken to her. Her sister says that for several days she has not slept, & has been very excited, that she attempted to run out of the house &c ——.

Was admitted in a pretty excited condition, but capable of understanding what was said to her & of giving a correct answer, recognised the writer & asked for some patients who were here when she was in the asylum 4 yrs ago. A strong Religious element ran thro her conversation. Kept repeating that she was in the arms of Jesus, and that she was his daughter. Sank on her knees & assumed prayerful & suppliant attitudes

# Flora. b. Liddell

was given 3ijs of Paraselhyde at night
7th Slept about 3 hours. Passed the rest of the night singing hymns, talking & was very restless & required keeping in bed. Bowels freely opened to-day. Taking nourishment well. Ordered milk in abundance, with eggs &c. Her mental cond.n to-day is the same. Says she is perfectly, supremely happy, sings over hands & kisses it, lies for a little with folded hands & a look of great happiness on her face. She is thin. Ordered a prolonged tepid bath in the evening, & sent into the open air. Paraselhyde repeated
8th about 3 hours sleep. In bath for 2 hours. Kept quiet in it. Unchanged to-day
9th Last night was so noisy that she had to be placed in a single Room. She is to-day worse being very interfering, saying nasty things to other patients accusing them of being pampered & when spoken to assuming an attitude of prayer & saying that she is Jesus' child. She is taking nourishment well, and is out a good deal.
12th Been very noisy & excited since last note. She is a very bad patient & is most difficult to manage & bear with. She is extremely unsettling in her remarks and at times erotic & coarse. She had 3ii Paraselhyde last night, but slept none. To-day she is put on Sulphonal getting 50 grs to-day in two doses. She is very thin, but is being well supported. She requires to be fed with a good deal of her food.

Flora G. Liddell

25th Oct. No improvement. Has been sent down to No 3. to see how she works on there. She is in a continual state of excitement, talking, making unwelcome remarks about other patients, and striking them. When remonstrated with she kicks the nurses, bites them & is very wicked. Along with the most objectionable expressions she uses religious expressions, folds her hands, saying that she is Jesus' own child. When she will seize the hand of the doctor kiss it & implore him to kiss hers. On account of her chattering ways she takes food badly, and her strength is not very great. She has been sleeping very badly. Suppositories made her sick & had to be given up. Paraldehyde unless in very large doses is no good. At present she has Chloral & Bromide in 20 & 30 gn doses - .

Octr. 30. A shade quieter & showing improvement in taking her food. Sleeping also a little better Been getting Chloral & Bromide. She is not so abusive & nasty to others downstairs as she was in the Infirmary & on the whole is more easily managed. She is being fed as well as possible, has eggs, custards, soups &c and is much in the open air.

Nov. 14. The past fortnight has not brought about much change. She remains excited, but is capable of considerable self-control, and now reads & works a little. Attention increases her excitement & she often becomes foolish then in her actions & conversation She is sleeping better & gains in bodily condn

Joh. 521

Mary Barr

cont. from Vol III p 279.

1896

March 31st Her health keeps good and as regards her mental state it being one of deep dementia admits of little or no change.

December 31st Continues the same. No change.

1897

Sept. 30th She requires to be sponged but a short time ago she resisted so much that the tube had to be used. One or two attings was quite sufficient to make her prefer the former way, demented though she is.

1898

Sept. 30th She has not again required the stomach tube. She sits like a [illegible] statue most of the day except when out in the grounds with the rest. B H & C. good.

Dec. 29th She has not been so well bodily of late, having got thinner and was kept in bed for some weeks. She is now better.

1899

March 31st Since last note she got worse and is now in bed suffering from Phthisis Pulmonalis. The disease is advancing slowly. Her mental condition has of late become clearer.

Sept. 29th She is still kept in bed in a single room. Occasionally she has attacks of haemoptysis and her temperature is nearly always up in the evening.

To Vol VIII p 32.

Mr Beith.

From p. 442.

October 25th. Her bodily condition shows considerable improvement and she looks better. But mentally it cannot be said that there is much change in her delusions persists. She sees her husband and he says that to him she seems a little better than she was. She works more & sleeps better ——.

Nov. 13. There is no improvement in her mental condn: and she still believes that her punishment is to come, but that it is delayed. Bodily she is fairly well & she is sleeping better.

Nov. 24. Back again in ward 4, and certainly working better. But mentally unchanged. Her delusions persisting. Eating fairly well & keeping on the whole well without sedatives.

1894

Jany. 10. It cannot be said that there is any improvement in patient's condition. Her delusions persist and at times she is filled with the utmost apprehensions. She believes that she & her husband are to be hanged. That she has committed some terrible crime & that her husband is to suffer with her for her sins. She mentions a date as the time when the execution is to take place & any stranger she sees she believes to be a spy on her or a policeman come to take her to prison. She asks whether what she says is not true & when re-assured she won't believe she is safe. When the date she has fixed on passes & finds her still safe here she fixes on a time a week or two on as the date of her execution. She sleeps fairly well & her physical condn: is if anything better than it was

Folio 535

Margaret J. Mitchell
From p. 191

1853.

October 8th. Continues ill. but not acutely so, nor is the attack characterised by the use of so much bad language nor by such an utter loss of self control. after about 7 days illness she seemed better, but is worse again. There are no special features in this attack calling for notice. —

October 12th Better this morning, but fooolish & silly. Thinks that she is quite well, that she ought to go away from here at once &c. - Put on Iron & 2 ounces -

October 14 Better now quite & in ch 4 again

October 17. allowed away to day on 28 days trial —.

Nov. 9. Her Brother called to-day & stated that she kept well & that they wished her discharged from the asylum Register

Discharged

Recovered

Margaret Hart
cont: from Vol III p 269.

1895

September 30th Her health seems good. There is no change. She sits silent but seems industrious and also works in the kitchen.

1896

March 31st She is still in ct: 1 and has passed through the winter without anything eventful. A brother of hers was recently re-admitted into this Asylum.

September 30th Unchanged. B H & C. good.

1897

Sept: 30th There has been no change in her condition during the past year. She refuses to speak and her expression is one of unutterable sadness.

1898

Sept: 30th Her silence and gloom show no sign of lifting nor does she speak at all. B H & C. good.

1899

Sept: 29th Her bodily health and condition have been good during the past year. She has not been ill at all and as she is very retiring and dislikes being noticed she has not come much under observation. She is still in ct: 1 and works well at sewing but sits silent and depressed without uttering a word.

To Vol VIII p 187.

Elizabeth Logan or Struthers, 74.
Admitted 13th Octr. 1893.

Elisabeth Logan or Stubbers
Admitted 13th Oct. 1893.

S.D Private patient · East House. She is 74 years of age a widow & was brought from Banchrie Poorhouse to the Asylum. She is said to have been insane for some days only, & this is her first attack. The cause is unknown. She is not epileptic or suicidal but may be dangerous to others. no A.P.

Medical Certificates bear I "That her ideas are much confused, her memory being very defective - She has no recollection of what she has done recently & states that she was in town yesterday visiting her mother. She is very irrational"

II She is very restless & inclined to wander about the wards at night & if not prevented tries to undress with only a bed mat on for her clothing She is much confused in her ideas & states the ward Door was broken last night & her chest of Drawers being brought into her —.

25th This is a case of senile dementia. with periods of sub-acute excitement. Her memory is markedly deficient, she mistakes those she sees around her. does not know where she is, believes her father & mother to be alive &, she to be a young woman &c. She is far from being robust, and is not a good walker, but she is fairly well nourished and as a rule sleeps well.

Oct. 30. No change. A weak-minded old woman requiring care & nursing.

Nov 3rd Free of quaint fancies & makes many mistakes of identity. She enjoys only fair health, but makes no complaints.

# Elisabeth Logan or Struthers

1893.

Nov. 24. Restless at times wanting to go home 'to her, Mother'. But easily managed. B. Cond$^{n}$. fair.

Decr. 8th. In bed at present, suffering from an Influenzal Cold, her temperature having been as high as 103°. Now she is much better, but weak. Mental condition unchanged. She says that what has done her most good during her illness has been the beef. Thermometer every time the nurse places it in her armpit, she beams on her & afterwards says she feels much better of it.

1894

January 10. There is no change in her cond$^{n}$. She suffers from Senile Dementia, and is a quaint pleasant old woman. She usually addresses the Med. Clerks as the sons of the Serv. attendant and says that they are "nice lads" — like their father.

Feb$^{y}$ 21st. She is just the same. Pleasant & believes herself to be comparatively youthful. Believes her mother is still alive & usually smiles that she has only been here a few hours &c. She often says that she is going away, but does not remember her wish 5 minutes after she has given it expression. She does not know where she is but says she knows God's word & is very sorry for those who are confined in it. Her bodily health is — for her years — good. She is restless at night now & then.

March 24. Continues in fairly good bodily health. Mentally she is facile & weak. Memory very deficient? She dwells much on her past youth. She has that increased imaginative facility that is somewhat characteristic of her class of cases —

# Elsabeth Logan or Struthers

1894.

June 27. She has gone down to live in the cottage and is very happy there. She wanders about herself and enjoys a large amount of liberty.

Augst. 21st. Keeps wonderfully active for her years. Not so much disposed to wander, and contented & happy —.

Decr. 24. Very happy & for her age active & useful. Very anxious to get a pass & get away. Scolds the writer in a pleasant way because he keeps her here. —

1895.

April 10th. Keeps in very good bodily health for her years. She is a typical case of senile dementia —

September 28th Unchanged. B & C. good.

December 31st She was allowed sometime ago to go away with a friend for a couple of days and was taken to church but proved rather troublesome and difficult to manage. Her health keeps good.

1896

June 30th Her bodily health & keeps good for her years. Her memory is quite gone but she is quiet, fairly cheerful and apparently contented.

December 31st Unchanged. B & C. good.

1897

Dec. 31st She keeps in good bodily health & condition. She is quiet and content, full of delusions and in fact living in a world created by her own fancies.

To Vol VII p 91.

Mary Campbell
—.

Mary Campbell. 42
Admitted 15th Oct 1853.

Mrs Private patient. East House. She is 42 years of age, single and a Protestant ~~and~~ residing at 2 Woodlands Terrace, Langside. She has been insane an indefinite time, probably under three months. This is her first attack. The supposed cause is not stated. She has pseudo-Cataleptic unconscious periods but is neither suicidal nor dangerous to others. No H. P.

Medical certificates bear: I "Constantly moving, always talking, addressing pillows, blankets, chairs &c as individuals, no memory, unable to converse sensibly, laughing one moment, crying the next."

~~Dr~~ Her sister says she is constantly accusing them of conspiring against her. Sees many different people in the room, is very noisy at times, never at rest, afraid of people coming to injure her.

II "Wanders very much in her mind, sees people who are dead or absent; on the occasion when I saw her she saw someone painting at her from the curtain pole."

a very incoherent, but not acutely excited patient admitted 15th day. Makes mistakes in the identity of those around her & is very confused.

20th Became rather excited through the night, refused to keep her bed & was removed to a single Room. There she slept some hours. It is believed that at home she was getting Sulphonal regularly to keep her quiet & get her sleep. In the

## Mary Campbell

afternoon she slipped when rising from a chair in the day-room & sustained an injury to her right hip. There is no dislocation and the principal signs are a slight shortening, a very considerable eversion of the limb & crepitus only indistinctly heard & not actively sought for. Whatever be the nature of the injury it is treated as a fracture & a long splint applied. The accident has somewhat quietened her.

October 25. The apparatus was not kept on & the patient & her continual restlessness has led to it's being taken off & a simple extension force by a weight & pulley applied. She has not been much excited, but has been very restless, talking to herself, conversing with imaginary people &c. Paraldehyde is being given at night. For some days her temperature has been about 1½° over the normal and no cause has been found for this. Also after her accident the urine was retained & the catheter passed 2ce daily for 2 days. She is taking nourishment fairly well.

October 30. The simple extension was doing no good & for some days all apparatus has been quite discontinued. Her mental condition is one of extreme restlessness, with delusions & hallucinations, and much incoherent muttering & talking. Her tongue is very tremulous & inclined to dryness, but her pupils are equal & react normally. They show considerable variation in size varying from a very small aperture to a fully dilated

Mary Campbell

condition within a short space of time. She seems to have no power over her rectum & bladder & passes both faeces & urine in bed. For about 10 days in fact since 2 days after admission her temperature has shown a distinct rise, averaging in the evening 99.4° & in the morning 99°. This is not explained by any lung or other ascertainable disease.

Her brother states that she was confined to bed with what he calls Housemaid's knee for 5 years. But he cannot give particulars. The knee affected was the right one, the same side as is at present functionally useless.

Nov. 3. Put on Sulphonal – 20 grs 2ce daily –. Extreme restlessness continues, with muttering & aimless picking & movements of the hands. The idea that she may be a S.P. is gaining ground.

Nov. 13. There is at present a very slight interval of mental well being. She is calm & reasonable, says that she feels much better, that the pain in her head has gone & only the powerlessness of her leg now troubles her. There is marked affection of her speech. & it is thick & indistinct. She cannot say 'Truly Rural' at all distinctly and laughs at herself for not saying it better. She has been sleeping well & this condition of mental clearing up has now lasted about a week. But her appetite is very poor & she keeps very thin.

Nov. 27. There can be little doubt she has sustained a fracture at the hip, and also that she suffers from S.P. but her symptoms show remarkable remissions

Hannah Sturge

Continued from page 470.

195

Aug. 10 Patient was left in bed until her temperature & pulse had steadied down to their previous rate. to assist which she got some Tr. Nuc. Vom. as a tonic. She has just ceased to menstruate today again. Her chest to auscultation & percussion is normal. On the night of August 2nd it should have been noted she had a curious trembling fit with constant movements of the hands as though rubbing the abdomen & seems distressed. The pulse was rapid & irregular. Her bowels were freely moved and she fell back into her normal condition.

Aug. 18. Yesterday patient ~~is~~ on several occasions seen and & entirely different observers opened her eyes and looked about her. Her general condition is keeping satisfactory. She has a quiet regular pulse now & her skin is cool & moist. The almost scarlatinal like desquamation on her hands & feet is not yet quite complete.

Weight.

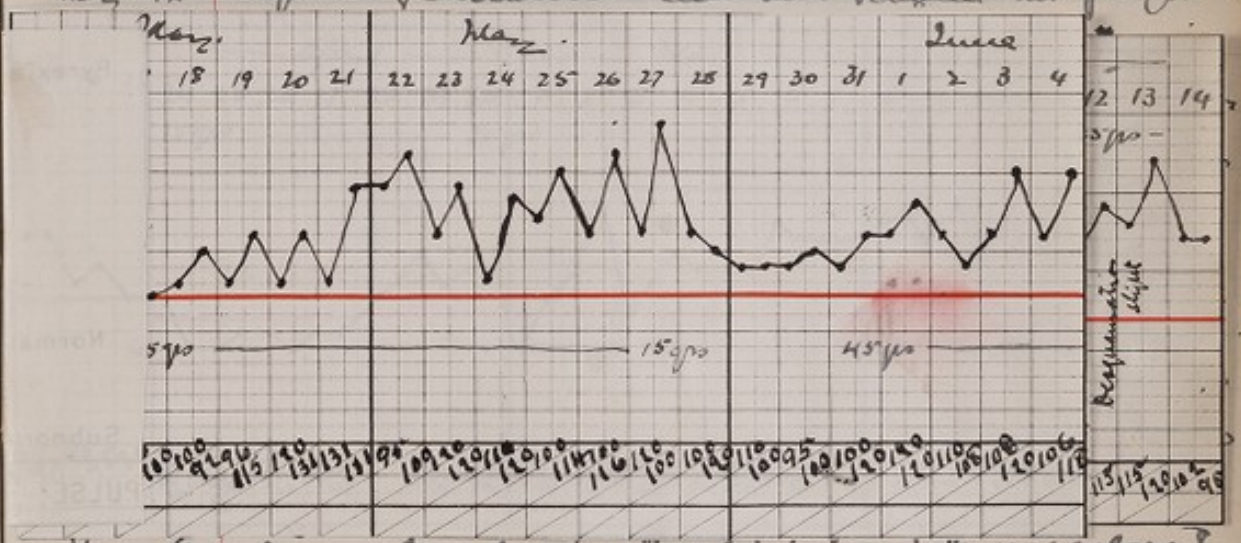
Sept. 15. Seems to have quite regained her normal as known here. Desquamation ~~and~~ complete & pulse quiet.

" Nov. 20 Has now quite got to her normal and seems quite stationary. She keeps her eyes open & looks about her ~~as~~ more than she did but there is little real change. She has periods of restlessness when she is in discomfort seeming of and which are supposed to be due to colicy pains. She is at times troubled with much tenderness & rawness between the thighs but this has passed off just now. She is still quite cognisant of what is said in her hearing.

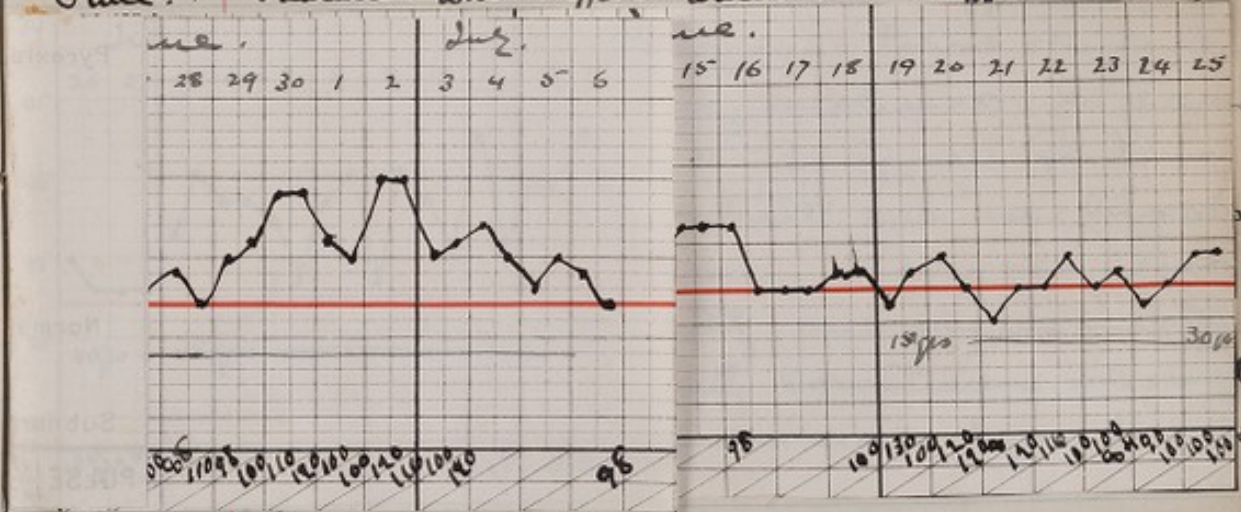
# Hannah Sturge.

1896
Jany. 7. There is no change to note here. Her bodily health continues good, and she is menstruating fairly regularly. It is very noticeable how her expression changes according to what she hears said of her.

April. 24 Thyroid Treatment was begun again today. Cf Chart
May. 12. Slight desquamation seen best between the fingers.




May. 16. Owing to rapid breathing & pulse & the irregularity of the pulse Treatment has been intermitted for a few days.

June. 4 Treatment with thyroid which was stopped on May the



June. 13. Treatment interrupted as she is menstruating rather profusely.

Cf page 5-97.

Hannah Sturge

continued from page 470.

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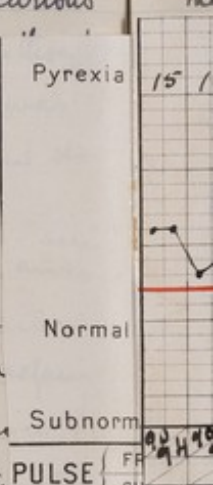


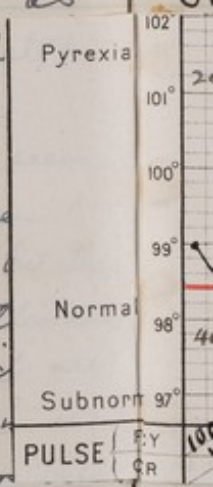

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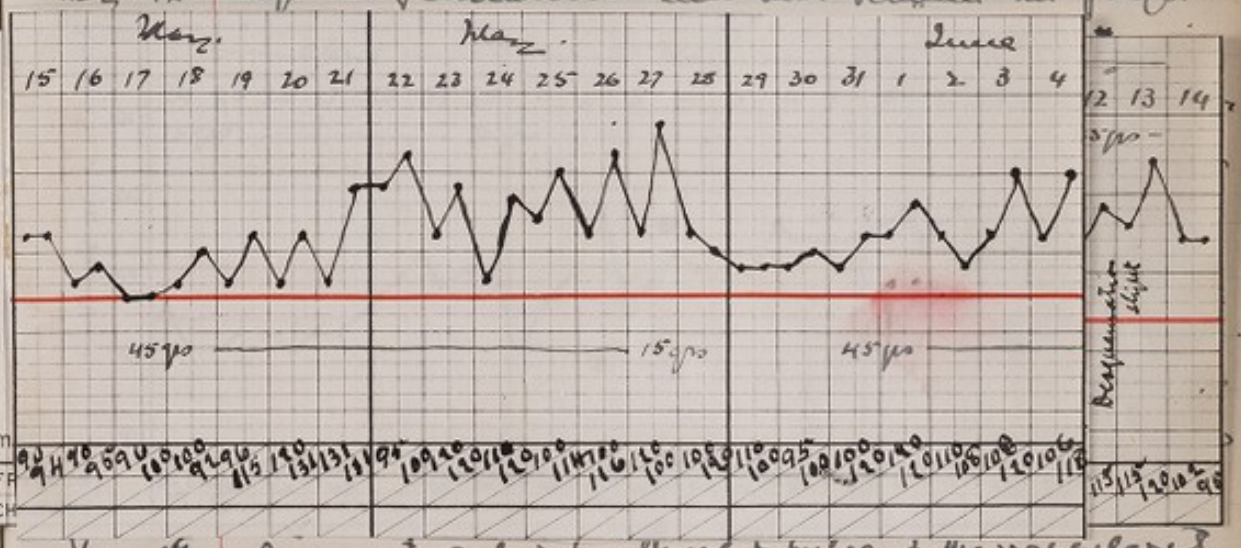


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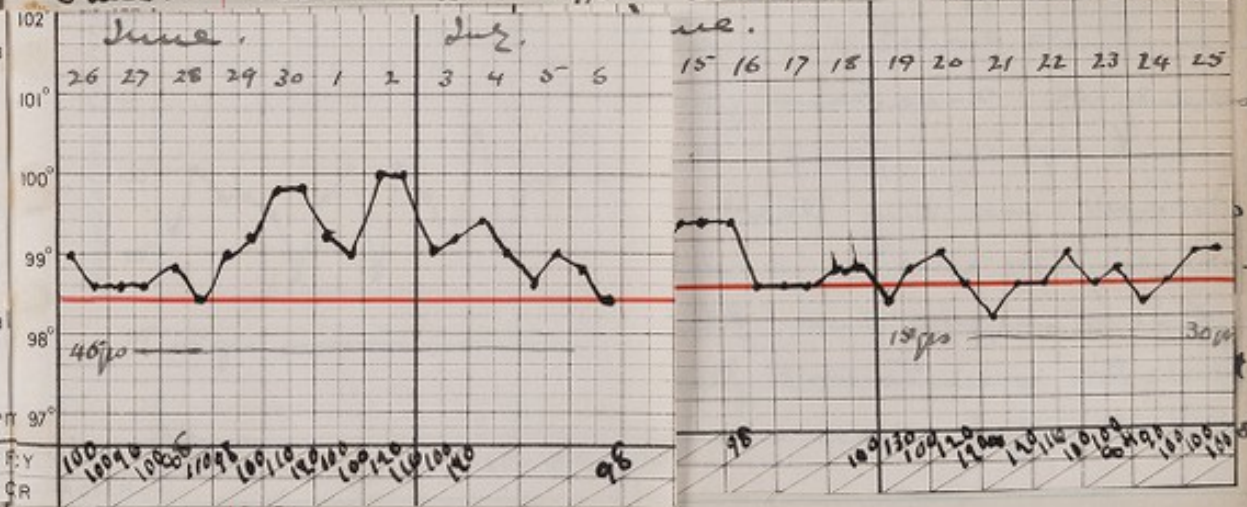


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Hannah Sturge

Continued from page 470.

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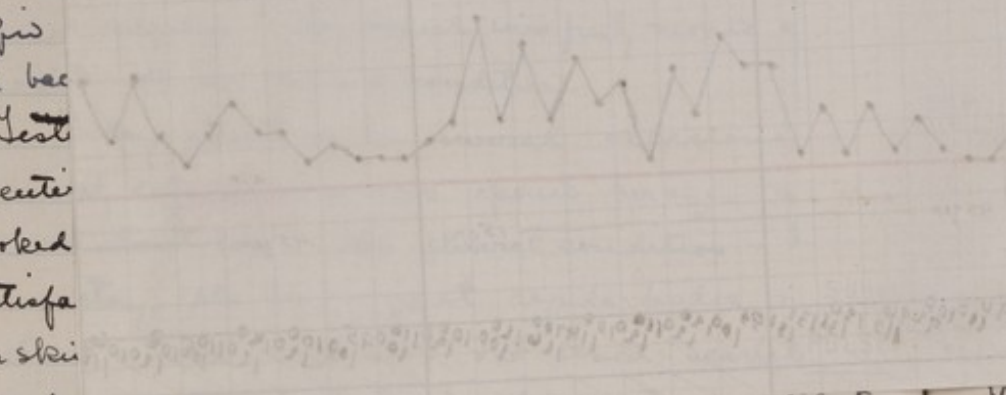
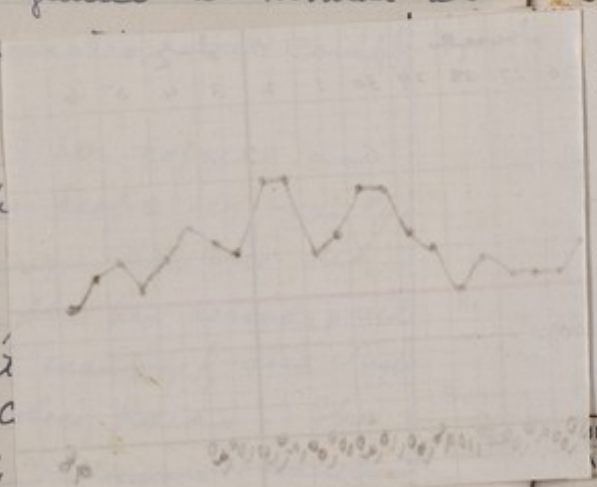


per is not yet



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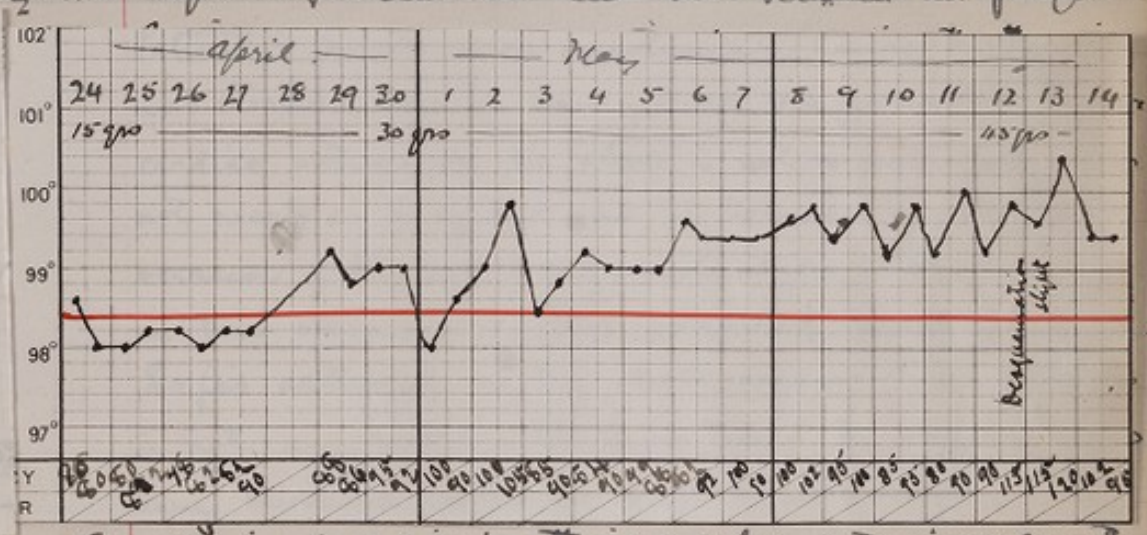


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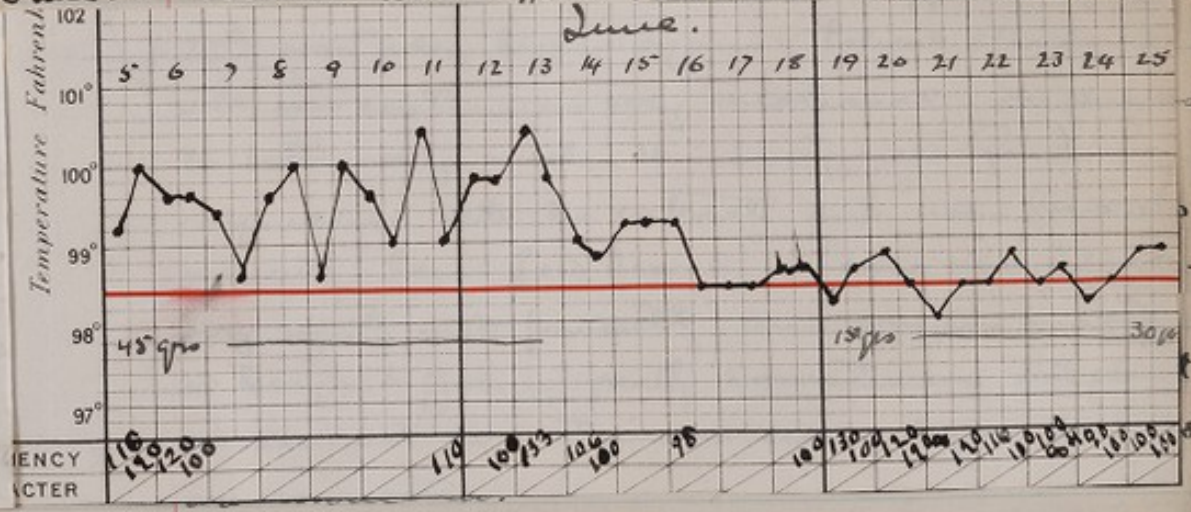


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Cf page 597.

Hannah Sturge

Continued from page 470.

195

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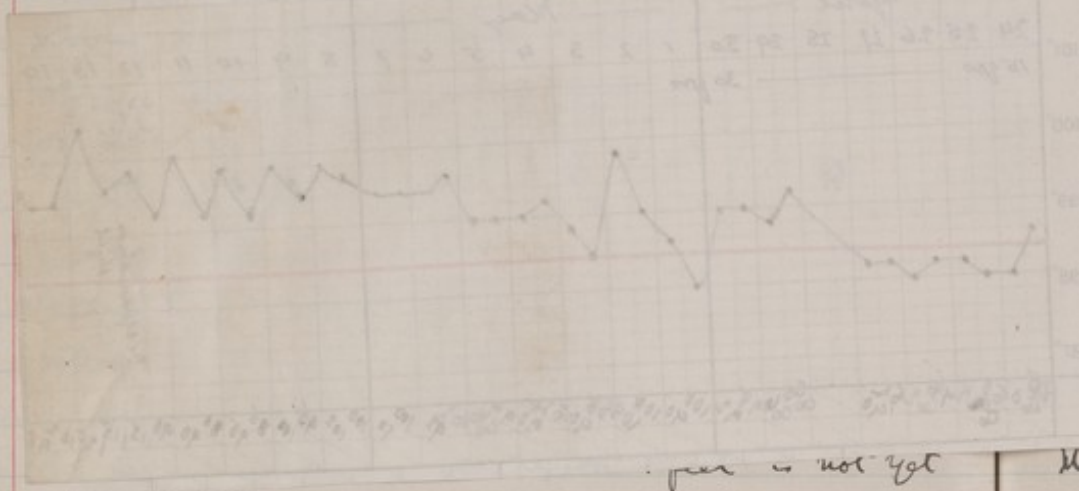

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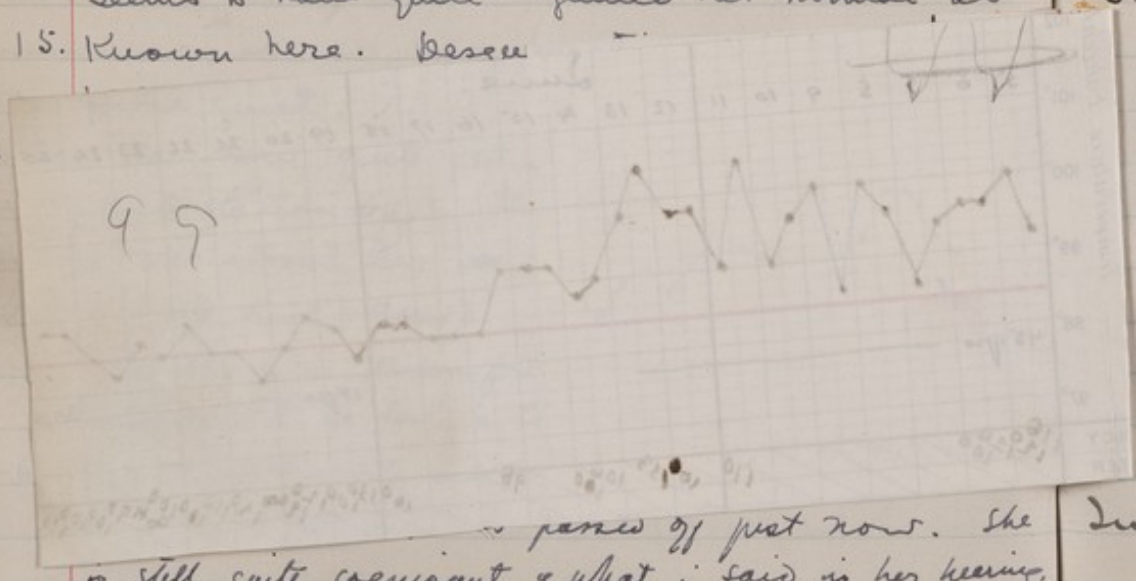
Weight.

Seems to have quite regained her normal as

Sept. 15. Known here. Desire

" Nov



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April. 24 Thyroid treatment was begun again today. Cf Chart

May. 12. Slight desquamation seen best between the fingers. Patient is much more emotional since the thyroid was started. She is now getting 45 grs daily and her cardiac action on the whole is not so so rapid and not nearly so irregular as it became on the last occasion of thyroid administration. She has not on this occasion either perspired nearly so much. So far although on the whole easier to handle she is not any better. She has taken to sniffing and very hurried breathing save when asleep.

May. 16. Owing to rapid breathing & pulse & the irregularity of the pulse treatment has been intermitted for a few days.

June. 4 Treatment with thyroid which was stopped on May the 27th was today begun again. Patient stands it well but continues very emotional. She dislikes the battery very much. It is being used now in conjunction with the extract and uses the words frequently "Come Lord Jesus" Come now Lord Jesus". very rapidly and fervently and wriggles and turns as though suffering greatly sometimes with almost no current sometimes even before the poles are connected.

June. 13. Treatment interrupted as she is menstruating rather profusely.

Cf page 597.

503

Wilhelmina Jane Wilson

# Wilhelmina Jane Wilson
admitted October 19th 1893.

Mel

Private Patient. Admitted to West House.
She is 27 years of age, single, of no occupation, belonging to the Free Church and residing at 47 York Pl, Perth. She has been three months insane and this is her first attack. She has been treated at home and by travelling. The supposed cause is worry. She is not subject to epilepsy nor is she dangerous to others but she is suicidal.
No H. P.

Medical Certificates I "She says that she has failed in her duty to parents to such an extent that she is vile and unworthy so that she cannot face the world. That owing to such delusions she is so wretched that her life is not safe in her own hands."
Her father says she has been depressed for some months and the nurse in charge says that she has attempted suicide by strangulation.
II "She ~~is~~ says that she is tired of life, that she is too evil to live and asks for chloroform that she may die."
This young lady comes from Perth being the daughter of the present Lord Provost of that city.
Appended is a note about her condition and history which does not need repetition.
She is fairly well developed, about the average height, not stout made of rather dark complexion and dark hair. She seems in pretty good health.
On admission she was sleepy and tired. The nurse in whose charge she was said she had been getting

Wilhelmina Jane Wilson

1893

Sulphonal to keep her quiet and at present she is evidently under the influence of it. She slept well the first night and the next morning was at times fairly cheerful and helped the attendants to dust the furniture. Now and then she would throw herself down on a sofa a
that she was utterly miser
done her duty, that there
that she wished to die.
are generally sudden o
come on with irresis
have no power to
at all times rather
intensified when th
can talk rationally
and her power of atten
memory is good and
any subject apart from h
is normal. She ✱ still ✱
her parents and her relation
increased than diminished by the thoughts of her own unworthiness.

Letter from Dr Blaghard describing Miss Wilson's case.

October 26th Since admission a week ago her condition has not varied much though on the whole she may be said to be a little better. She has been taking her food well and also sleeping pretty well. One or twice she has made unconcealed and spasmodic attempts to strangulate herself by tightening her handkerchief round her throat but it is exceedingly doubtful whether any were real and determined efforts to destroy

Wilhelmina Jane Wilson

1893.

herself. She is more restless and miserable in the morning than at any other time but towards the evening gets more cheerful. She sometimes asks why she is kept here and says she wishes to go home. She is taking a mixture of iron and aloes.

October 30th — She is in much the same condition as mentioned in last note. Her great preservative against these feelings of misery which now and then push over her is to have plenty to do. She is constantly occupied when not out walking with knitting or dusting the furniture etc and this she does with energy as if to exorcise these feelings of depression.

November 3rd — She is not so well again this morning and for about the first time since admission slept little last night. On her face is a look of despair and she frequently asks in a passionate tone why she is kept here and demands to get home. She refuses to do any work but sits picking her nails till they bleed.

" 9th — She is better again and seems to look upon her affairs in a more hopeful light. Her complexion is more healthy looking and altogether her general health is improved.

" 18th — It seems more than probable that she has not yet broken off the habit of self-abuse. She is in consequence put more under observation especially at night and has been ordered hot hip baths. Her father came to see her lately but she did not receive him cordially which distressed her a good deal afterwards.

So p 523.

Wilhelmina Jane Wilson

1893

Sulphonal to keep her quiet and at present she is evidently under the influence of it. She slept well the first night and the next morning was at times fairly cheerful and helped the attendants to dust the furniture. Now and then she would throw herself down on a sofa or on the floor and say that she was utterly miserable, that she hadn't done her duty, that there was no hope for her and that she wished to die. These fits of depression are generally sudden and short; they seem to come on with irresistible force and she seems to have no power to resist them. Her expression is at all times rather dull and heavy and this is intensified when these paroxysms come on. She can talk rationally on other subjects except about herself and her power of attention seems unimpaired. Her memory is good and her power of reasoning on any subject apart from herself and her delusions is normal. She still has a natural affection for her parents and her relations and this seems rather increased than diminished by the thoughts of her own unworthiness.

October 26th Since admission a week ago her condition has not varied much though on the whole she may be said to be a little better. She has been taking her food well and also sleeping pretty well. One or twice she has made unconcealed and spasmodic attempts to strangulate herself by tightening her handkerchief round her throat but it is exceedingly doubtful whether any were real and determined efforts to destroy

1893.

herself. She is more restless and miserable in the morning than at any other time but towards the evening gets more cheerful. She sometimes asks why she is kept here and says she wishes to go home. She is taking a mixture of iron and

the same condition as mentioned
a great preservative against there
which now and then push over her
do. she is constantly occupied
with knitting or dusting the
he does with energy as if
depression.
gain this morning and for
ince admission slept little
ce is a look of despair and
in a passionate tone why she is
nands to get home. She refuses
but sits picking her nails till

" 4th She is better again and seems to look upon her affairs in a more hopeful light. Her complexion is more healthy looking and altogether her general health is improved.

" 18th It seems more than probable that she has not yet broken off the habit of self-abuse. She is in consequence put more under observation especially at night and has been ordered hot hip baths. Her father came to see her lately but she did not receive him cordially which distressed her a good deal afterwards.

So p 523.

Elizabeth Wink or Scott

Elizabeth Wink or Scott. 49.
Admitted 21st October 1853.

Private patient. Earl House. She is 49 years of age, married & resides at 28 Brisbane St, Greenock She has been insane over a few days. This is her first attack and the cause is put down as Religion. She is not epileptic, suicidal or dangerous to others. No H.P. a distinct H.P. undoubtedly exists on the maternal side

Medical Certificates bear I "at one time under the belief that her soul is lost, and at another that she is saved, this being followed by extreme taciturnity & determination not to take food" Her husband states that she at times becomes violent & is not easily controlled.

II "Will not speak to me, but lies muttering to herself." Her husband states that for some days she has been in a state of religious melancholy, saying that her soul is lost & that she has been unable for her domestic duties.

The illness only dates back a few days. On Sunday the 15th it was noticed that she was longer in answering questions than usual But she was practically in her usual health till Tuesday when she did her usual work on Wednesday morning she broke out sobbing that she was lost and would not be pacified. She cried out all day on Wednesday; her whole theme being the love of Jesus for her. On Thursday she was quieter & on Friday more restless again & on Saturday she was brought to the asylum She seemed to take an interest in all she saw on the road Her husband states he cannot account for the illness as they were always on the happiest terms together.

Elizabeth Nuik or Scott

1853.

October 25. Since admission her condition has varied a good deal. She has had several excited & very restless periods when she has been difficult to control & manage. These are now passing off & to-day she is quieter but very delusional. Said that she saw her brother in the ward in the early morning, that she is in Heaven &c. She laughs & cries out that Jesus is her Saviour. She is very thin & badly nourished, and requires to be fed with her food but does not resist being fed. As a hypnotic she has been having Paraldehyde & it has acted fairly well.

October 30. Her condition as yet shows no improvement. She gives expression to many delusions such as that she is Jesus Christ, that she is his mother &c. Outbreaks of excitement render her at these times quite maniacal, and she is then very restless, throwing herself about & smashing things. Paraldehyde is still given & acts fairly well. She requires to be fed with her food, but does not resist.

Nov. 3rd. Has very marked excited periods when she is beyond control. Such a one she had this afternoon. When in these states is put in the padded room, as she is distinctly dangerous to others. She kept shouting, "Christ is my Shield." "Christ is my Shield", continuously. They last usually a few hours. This morning again she was excited but at the morning visit was quiet.

1893

Nov. 9. Showing a slightly improved bodily cond.n with rather fewer excited periods, but really little change. She is out a great deal, is having abundance of nutritious food & at night hypnotics in moderate doses —

Nov. 13. Has had 2 good nights in succession without draught but several times she has seemed on the point of going off. She improves in bodily condition & less so in mental health, but still there is a slight improvement.

Nov. 28. During the past fortnight the general condition of this patient has not changed much. She is very unsettled and full of delusions, such as that she is Christ & again that she is the Devil. Talking to her when she is in that condition excites her more & she shouts her delusions knowing herself about, screaming, &c. She has been sleeping fairly well, and her appetite is good showing an improved bodily condition. At times she is silent & repellant, sitting with shut-eyes, refusing to answer questions. —

Dec. 8. Improving considerably in body & also slightly mentally. Yesterday was the best day she has had. She was quiet & had times of sensible conduct & conversation. To-day again she is hardly so well, rather excited, talking a lot, moving about the room touching things, and giving expression to delusions, about God, the Holy Ghost &c. She is sleeping well & her nights are pretty good. —

January 10 She is not making much progress. Her religious emotional periods, & she is very incoherent in her talk

Joh. 537.

Grace McCallum or Gordon

Grace McCallum or Gordon 73.

Voluntary

Readmitted 21st Oct. 1893.

Mel — For Previous admission see p. 138.

This lady is readmitted to the East House to stay as a voluntary patient. For some few weeks she has not been sleeping well & has become afraid that some evil was about to happen to her. She has no delusions & is very sensible & in good health for her years.

25th — Has had small doses of Chloralhyd at night with benefit. Says that she feels better and that she has a feeling of protection when here.

Oct. 30. — Much about the same. Grumbles a good deal & wishes she had never come here. Sleeping better & still has Chloralhyd, but in very small doses.

Nov. 3. — Complains of sleeping badly & is not taking her food well, requiring considerable persuasion & coaxing. Rather depressed.

Nov. 9. — Better a bit. Less restless & sleeping sounder.

Nov. 14 — Now fairly well. Eats better & sleeping better. Works well & is fairly cheerful.

Decr. 8. — Pretty well now & less fretful. Sleeping well & confessing that she is better.

Decr. 10 — Gone home on trial

Decr 30. — Discharged

Recovered

Miss McPhail
Group. 1/2

1894.

March 8th — Not changed in any respect since last note —

May 2nd — Seemed a little brighter some time ago. Talked freely, saying she had millions of pounds. That she was very happy & well &c. Shook hands & was almost active. Relapsed again and as dull as ever. —.

August 21st — She has been very dull & apathetic, and taller no interest in her surroundings. She seldom speaks and her habits are careless & she has several times dirty & wet —.

1895.

January 10th — The dull apathetic condition continues & as her movements are sluggish & her functions slow. She is stout. Rousing has little effect on her. She wakes up a little for a moment, only to sink back into torpidity —

April 10th — She is at present in the Infirmary ward & there are evidences of pulmonary mischief probably of a tubercular character. She is in bed, & taking her food fairly well. Mentally she is very dull & lethargic, seldom speaking. Her bodily cond.n is fair.

May 1st — She is still in bed and there is distinct evidence of pulmonary disease in the right lung. Over the right side the percussion note is not so resonant as on the left and there are heard medium-sized crepitations. Her temperature shows an evening rise and she sweats at night. Mentally she is very dull and apathetic.

Miss Mc Phail

1895.

May 30th The disease makes steady progress and she has got very thin and weak. At nights she is often troubled with a severe cough.

June 18th Sometimes she talks very sensibly to her relations when they come to see her but at other times she is stupid and hardly recognises them. At nights she is sometimes noisy. She is gradually sinking and is very weak. She sweats a great deal and her cough is troublesome.

July 1st No new symptoms developed but she gradually sank and died to-day.

Death on July 1st. 1895.

Cause of Death. Phthisis Pulmonalis.

Jessie Oswald Motion
From p. 468.

1893.

Nov. 24. Has remained fairly well during the past month. Her memory is deficient, but she is conscious of it & gives no trouble, beyond what a woman at her years would naturally give. She is cheerful & pleasant, but becoming anxious to get away.

Nov. 27. Removed to-day by her husband

Discharged

Relieved

Re-admitted on September 26th 1894.
vide Vol VI p 400.

# Annie Paterson

cont. from Vol. IV p 560.

1896

March 31st During the past six months there has been no change from her former condition. She still gets excited when she proves a most dangerous patient as she is strong and vigorous. She is quite incoherent in conversation.

September 30th A month or so ago she got thinner but is now regaining weight; otherwise there is no change.

1897

March 31st Her condition is that of demential with violent and dangerous outbursts of passion. B.H.& C. good.

Aug. ~~June~~ 14th About a fortnight she was noticed to be looking ill. Previous to this however she had been gradually losing flesh. Her temp. was found to be 102° and over the apex of the left lung almost complete dulness, with diminished breath sounds. Since then she has been getting worse and is suffering from acute phthisis. Her temperature varies between 99° & 103°, generally nearer the latter. There are abundant moist sounds over the left ~~dull~~ lung with dulness. She is suffering from dyspnoea and her pulse is quick and feeble.

To Vol VI p 238.

Helen Shankland
From p. 282.

1893.

Nov. 14. Resistive & delusional & not doing any good. Mentally & bodily about the same.

Decr. 8th Has had to be brought in from the Laundry as she would not work. Stout & strong, but mentally no better.

January 10. Just the same —

March 22nd Also change a fairly good worker in the Kitchen. Delusions many & her delusions have a sexual element.

August 21st There is no change in her condn. She is becoming demented. Sullen & suspicious at times & refuses to work believing that she does not need to, & that honours belonging to her are withheld.

Novr. 15. Of late she has been a little less suspicious and more cheerful. She has been working pretty regularly in the Kitchen and the work seems to have done her good. Bodily she is very well, being stout & well nourished.

1895.

January 8th It is difficult to know how far to trust her. She seems at times pretty well, but there is an element of cunning & deceit in her character. It is feared she is becoming demented. She has refused for some time to go to the Kitchen & work there —

April 10th No Change. B. condn is good. Mentally same.

September 28th " Her bodily health and condition are excellent. She has an expression of suspicion and is sometimes sullen and rude, and apt to give impertinent replies.

# Helen Shankland

1895.

December 31st Her bodily health and condition are excellent but there is no mental improvement whatever. She often says that she sees her sister here among the other patients which is not the case.

1896

March 31st She has been more abusive during the past week or two and often makes bitter complaints about the ill-usage she is subjected to but which has no foundation in fact. She is very suspicious and has many delusions.

September 30th She has been working pretty well of late in the kitchen. She has many delusions of suspicion and thinks that the nurses appropriate her clothes and tools. Sometimes she gets excited and abusive.

1897

Nov. 12th Her bodily health is excellent but her delusions of suspicion and her irritable manner remain unchanged. She was today transferred to the Glasgow City Asylum, Gartloch.

Discharged Relieved

on

November 12th 1897.

Mr Webster

From p. 478.

Nov. 13. There is some improvement here. The choreic like movements are less marked, and she has been more collected. Previously any attention to her caused an increase of the movements. Now she has more control, says that she feels better & inquires after home at home. Arsenic has been discontinued, and at present she has a Sulphonal powder at night.

Nov. 24. Still keeps a little better.

Decr. 8th Very much better. The irritability of her muscles has now quite gone, & she is very well mentally. She is becoming very stout, her pregnancy advancing & it is proposed that she leaves soon —.

Decr. 16 Discharged

Recovered

Grace Weir

cont' from Vol IV p 554.

1896

March 31st Her health is better and she is rarely ever now troubled with sickness. There is no mental change.

September 30th She still keeps down her food but nevertheless looks thin and feeble although better than formerly.

1897

March 31st Her condition remains stationary. Bismuth & Sod. Bicarb. are given regularly and seem to do her good.

Sept. 30th She still often vomits after dinner and her bodily condition is poor. Examination of both abdominal & thoracic viscera shows no sign of organic disease.

1898

March 29th She sickness is not so frequent now but she is a poor miserable looking creature.

Dec. 29th Unchanged. B & C. poor.

1899

Dec. 27th Her bodily health is better: she is not so thin nor is she so often sick. Mentally she seems almost to be more demented: at least her father thinks so.

1900

Dec. 31st She has got stouter and is now only occasionally sick. Her habits have improved but not her mental condition.

To Vol VIII p 339.

Miss Flora C. Liddell

From p. 488.

1893.

Nov. 27. Remains very talkative, excited & foolish. Her mental condition is one of little control, and attention to her makes her worse. She becomes at times erotic, wishes to kiss one's hand & embrace one. Bodily she gains in condition. Eating well & doing a little work without stopping every now & then. At present she is having 25 grs Trional at night & is sleeping very soundly. She talks rationally & coherently, only now & then mixing her sentences somewhat —
Seen in No 3 Gallery.

December 8. Quieter by day, but often noisy at night unless kept pretty much under Hypnotics. She asks perfectly rational questions, and seemingly can control herself to some degree. Attention makes her more talkative. She takes her food fairly well, but keeps thin in spite of abundant nourishment —

1894
January 10. For some time she has been sleeping in the Wards at night & has been quieter. But in almost every respect she is as she was at last note. She exercises little control over herself, whether or not she could exercise more is a moot point. At times she is very quiet & well-behaved, reading & doing a little work, but when attention is directed towards her she becomes excited & impulsive. Her remarks are usually coherent; but in their substance they are often foolish. Her bodily condition is slowly improving & she has extras in the shape of egg milk. &c. At present she has 30 grs of Sulphonal at night & is sleeping fairly well. She is still in No 3, a trial in No 4, having been unsuccessful.

Miss Flora S. Liddell

1894

January 14. Perhaps with a little more self control. Behaves fairly well with her friends when they call to see her. But at the Concert she was one evening very rude, spitting on other dancers & using bad language. She is not getting much fatter in spite of abundant nourishment. She has Sulphonal 15 grs at night & sleeps fairly well. She is less modest than she ought to be & attracts attention by foolish antics —.

January 30. No change during the past week. Sleep has been fairly good with Sulphonal. Often mischievous and fond of attracting notice to herself —.

February 27th Little change has taken place in her condn. during the past 3 weeks. She is sleeping better but still has Sulphonal 15 grs in a reduced dose 20 grs at night. She is excitable, but capable of considerably more self-control than appears at first sight. Bodily she is also a little stouter.

March 8th Difficult to know what to say about her. At times she seems more composed & she has written several very sensible letters to her friends. But she is very unbalanced, and erratic. She does not give expression to delusions, but is irrelevant in her remarks at times. She is eating fairly well, but is not yet sleeping much better. At present she has 15 grs of Sulphonal. —.

March 14. In a good many ways she is a little better. She works with more energy & application & is less frivolous &c. But her self-control is still very limited. She is sleeping better, and is less flighty & foolish in the way she conducts herself when the Doctor is in the Ward

Dft. 549

# Wilhelmina Jane Wilson

cont: from p 506.

1893.

December 1st For the last week or two she has been more than usually miserable and has been often expressing a desire to take away her own life. Once she managed to get hold of a cord and twisted it round her neck. As a rule she is worse on Sundays than on other days.

" 12th Yesterday morning she made a sudden rush for the kitchen, seized a kettle of water which fortunately wasn't boiling and poured it on her head. It produced a superficial scald on her forehead. This morning she is in a repentant mood and regrets having done it.

" 22nd The wound produced by the scald is now all healed up. She has made no more attempts to do herself injury. For the last week she has been better. Instead of Iron and Aloes she has been getting a diaphoretic mixture. Her skin is clearer and mentally she is more cheerful and been expressing a wish to get home.

" 29th Her cheerfulness continues and she expresses herself as almost well but nevertheless she does not realise sufficiently that she has been mentally ill. Yesterday she saw her mother for the first time and it did her no harm, but rather the opposite.

1894

Jan. 11th She still continues comparatively well and is very anxious to get home, which anxiety however is rather of a morbid character as she thinks she is here & more as a punishment for having spurned her relations at home.

Wilhelmina Jane Wilson

1844

February 1st Her general health continues pretty good but mentally she is not quite so well again. She has still many morbid ideas about herself, chiefly as regards her conduct towards her parents. ✠ She has lately resumed her painting of which she was fond of when at home. Sometimes she gets very dull and dispirited and declares in an impetuous tone of voice that she is no better.

" 27th Her condition is very variable. Some days she is much better than others. Last week she had some very bad turns especially in the morning. She refused to allow herself to be dressed and lay on the floor resisting every effort to make her get up. She is generally better towards the evening. Her father and mother visited her a few days ago and she evinced great self-control in their presence which made her seem much better than she really was. She has been more composed and outwardly less miserable since their visit.

March 20th She is better again but not nearly well. Her menstruation has not been re-established. She is dull and as a rule disinclined for exertion. Her thoughts seem always to be about herself and some of her letters home are foolish and impulsively written.

So p 547.

Mary Clark

From p. 278.

1893.

Decr 8th. do change — . Full of delusions & hallucins such as have been described.

1894

January 10. This patient believes that a language is spoken to her by the nurses & doctor that no one else can understand. & it can be spoken she says without the lips being moved. She is extremely delusional, will not believe the names of the nurses nor of the doctors, and is under the belief, that her food is tampered with, that voices whisper to her all night, that noxious substances are put in her food &c. She has a little private room for her own use for a time but that has had to be discontinued, as she was continually turning it upside down, re-washing her clothes, re-making her bed &c. At present she sleeps in the Inf. Ward, and has a Sedative of Chloral & Bromide at night —.

January 24. Believes she is interfered with at night & that we wish to make her a bad woman. That for this purpose noxious substances are put into her food in order to stupify her. after being induced to take food she often tries to vomit, saying that she feels the poison beginning to work.

February 10. a little less acutely delusional at present, but not taking her food well, & looking thin. She takes her meals only under compulsion, believing that her food is tampered with.

February 21. She has not been at all well for some time. She is both mentally & bodily worse, more delusional, more suspicious of all that is done for her, and with more

Fol. 543

Elizabeth Lennox or Robertson
From P. 352

Decr. 8th Not becoming much brighter & stee adheres to the belief that she can bear a most unique woman. laughing at the idea that she ever did any good thing. Slow in all her movements, but interesting herself in things to a limited extent

Decr. 21. This patient is to day removed by her husband and discharged

Relieved

Re-admitted March 21st 1895.
vide Vol VII p 66.

Mar Campbell
Town $. 500

1893.

Nov 27 (cont.) at present for example she is wonderfully well & cannot be said to have delusions. She talks sensibly about herself, but shows considerable defect of memory. The pupils are persistently unequal, and there is marked speech impairment, "truly rural" being very indistinctly pronounced & more so when rapidly repeated. There is considerable tremor also of her hands, and in her knitting she makes mistakes.

At other times her mental condition is not nearly so good as it is just now & she is irritable fretful, believing that she is married, that she had the ring but that someone stole it from her &c. Says she has seen people at her bedside, whom she could not possibly have seen and is evidently under the influence of delusions & hallucinations. At these times also she sleeps badly & is restless, getting out of bed in obedience to voices &c. ——.

December 8. The condition of comparative well-being has been maintained, and she has had no marked mental disturbance since last note. At times it would seem that some of her speech trouble is caused by her lack of teeth, but at the same time she is facile & does not take a very serious view of her state, though anxious on the other hand to get home.

A considerable amount of callus has been thrown out around the seat of fracture, but there are evidences that some sort of union is taking place. She can move the limbs a little & there is at times a good deal of pain at the joint. She is sleeping fairly well & takes her food well. ——.

Mary Campbell

1894.

January 10. The provisional diagnosis formed at the earlier period of her residence requires to be modified. She has kept so well mentally since last note, that at present little abnormal can be detected. Her mental condition is now & has been for some time one of cheerfulness, and buoyancy, but not over much so. She wishes to get home, but realises that something has been wrong with her brain. She does not remember coming here nor much that happened for some time after she came, but she says that for long when at home she has been feeling far from well & that now she feels very well. Her memory is good, and her power of attention unimpaired. Pupils are still slightly unequal and the knee jerks are apparently absent, but owing to the rigidity in one leg they cannot be accurately tested. Her speech is still indistinct but is more in character like the speech of one with a large cavity in the mouth & the tongue too small for the mouth. She sleeps well.

Bodily she is much better & fatter than she was & her appetite is good. The fractured thigh is uniting & gaining strength slowly. It gives her a good deal of pain, both at the seat of fracture & at the knee, and she rests a good deal in bed. She feels herself to be gaining in power of the limb. —

January 19. Left h. has Recovered. A slight knee jerk was found on both sides when she was examined some 3 days ago. A critical examination of her various special senses

Dft. 539

Elizabeth Polkinhorn a Cranstown

cont. from p 474

1893

Decembr 18th A reducible double ~~inguinal~~ femoral hernia has made its appearance, due a good deal to her constantly standing or walking about and hardly ever sitting down. She is very restless and miserable. She is to be kept in bed by an attendant constantly sitting beside her.

" 29th Keeping her in bed has the effect of keeping the hernia reduced but has no effect in quieting her. If left for a moment she is out.

1894

Jan. 11th She is now in a bed shaped like a large box, the lid of which is open except for webbing placed across it. She has been getting sulphonal gr $\overline{xxx}$ - $\overline{l}$ regularly for the last week and this has partly kept down the motor excitement. There is not however any real improvement. The expression of her face has changed for the worse and she is still constantly talking. Nevertheless she has been sleeping well and is getting nourishment every two or three hours.

" 19th Yesterday she began to vomit, not continuously but more in paroxysms. She also looked ill. It was noticed that the hernia on the right side had also come down and was unable to be reduced. Chloroform was given but it did not help in reducing it. Dr Hector Cameron was sent for and he operated without attempting to reduce it by manipulation. The operation was simple and presented no complications. There was a good deal of fluid in the sac and the knuckle of intestine was deeply congested and tightly strangulated. After it

1894

was returned to the abdomen the sac was twisted round to form a plug for the canal. An antiseptic dressing was put on and the whole firmly bandaged. Patient took the chloroform very well. ¼ gr. of Morphia was given hypodermically but she only slept three hours and when awake was rather restless. This morning she is very restless and excited and trying to take off the bandages. She is troubled with flatulence and a little milk is given at short intervals.

Jan. 20th Sulphonal gr xx was given yesterday but she only slept a few hours. Her temp. is 99°. and pulse varying from 100. 120. Her urine has had to be drawn off and the bandages renewed on account of her loosening them. She is restless and constantly talking, asking for various things in a sort of rhyming way.

" 23rd She is recovering from the effects of the operation but her mental condition could hardly be worse. The wound has nearly healed: her bowels have been opened by two enemas. ℞. She is getting small quantities of beef tea, milk and soda water at regular ℏ hours. When awake she often becomes very excited and very restless. Sulphonal gr x is at present being given. This morning she is troubled with diarrhoea.

" 24th Last night she had 35 min. of Liq. Extr. Opii but did not sleep at all. The sulphonal was not given. Her bowels were moved. She is very restless and is constantly moving and tossing about.

To p 541.

Jessie Bain

From p. 176

1874.

March 8th. Cough is still troublesome, she is very self-willed & difficult to influence. Will not keep her bed at night, & wanders about the Ward. Very delusions many of her delusions having in them a sexual element. —

April 16. Very resistive & will not take medicine ordered for her. Her cough is troublesome & she is not looking at all well. Has been spitting blood, but a physical examination of her chest is almost impossible. When excited she is very coarse & abusive.

June 27. Has been recently very resentful at being even spoken to. She will not take her food at the table with the others but must sit apart. She has many delusions mostly of self importance & others having regard to her being kept here. in a place that she regards as bad & unclean. Her physical cond^n. is fair, and at present her lung symptoms are in abeyance.

August 21. Very cross & irritable, but a good walker. She is still in Infirmary Ward. Her lung cond^n. is at present dormant, but she has a bad cough. She is thin, but takes her food fairly well. - Her delusions remain much the same & she believes that there is a bad peace & that she is the only righteous woman in it. —

December 24. She has many delusions such as, that she is a Lady of title (she signs herself 'Countess'), that she is kept here for bad purposes, &c. She is in poor health & has Phthisis, but the disease has not been actively progressing for some time.

Jessie Bain

1895.

April 10th. Her lung disease is evidently not at present progressive, and though thin her bodily condition is fair. She is still in No 3, and is mildly demented, having many delusions especially of grandeur &c.

September 30th There are distinct signs of consolidation of the apex of the left lung. but the disease is not active. She is very delusional and has hallucinations of hearing.

1896

March 31st Her health has remained stationary throughout the winter. She does not obtrude herself on one's notice but if spoken to she shows that she is mildly demented and has many delusions of grandeur.

September 30th Unchanged. B H & C. poor.

1897

Sept. 30th Her delusions of grandeur remain as before. She is facile and weak-minded and her health is fair.

1898

Sept. 30th She still thinks she is a 'Princess' but is gracious notwithstanding. There is nothing special to report about her.

Sept. 29th Her bodily health and condition keep fairly good although she is abnormally pale. Mentally she is quiet and pleasant but almost entirely wrapped up in her own ideas.

To Vol VIII p 153.

Mr Bryson
Room 462.

1894.

Mar January 24. Has been more excited for some days. Removing her clothes, tearing them & being impulsive, breaking things & generally being difficult to manage. Her appearance is becoming very depraved, and she is far from being in a hopeful condition

Ap February 9th The excitement continues and at present she is almost acutely excited. She is not actively homicidal, but is impulsive & destructive to her clothing & very careless of her appearance & dirty in her habits. The excitement is not accompanied by bodily loss of power. She is stout, & her appetite is good & she requires to be kept from gorging herself.

Jun February 21st Excited again, but not any more sensible. She is very kept in the open air as much as possible. Her bodily health remains very good, and her appetite is voracious.

March 5th Excitement is acute just now & there is the tendency to rhyming & singing previous notes.

Aug She is not homicidal, but annoys in her excitement, and is out a great deal in the open air. She is ravenous in her appetite, and is looking so well as she did.

March 14. She is becoming more mindless & depraved in facial appearance. Hair is beginning to grow on her face, & she begins to look repulsive, Shaves on

Dece her whole less excited & can be fairly managed by having her out a great deal in the open air. She has no sedative at present —.

April 16. There is no improvement. Has 2 x 15 Sulphonal daily to quieten her. She is very noisy at times

case of Mrs Bryson

see p. 534

[illegible] Dr Morlem Death

531 533

Mr Bupow
Room f. 462.

1894.

| | | |
|---|---|---|
| Mar | January 24. | Has been more excited for some days. Removing her clothes, tearing them & being impudent, breaking things & generally being difficult to manage. Her |

## Detailed Report of the urine

| Date | Quantity (ounces) | Density | Reaction | albumen | Sugar. | Blood Pigment (Guaiac) Supernatant fluid | Blood Pigment (Guaiac) Sediment | Characters | Microscope |
|---|---|---|---|---|---|---|---|---|---|
| August 26. | 16 | 1034 | acid | trace | none | no react. | no react. | deep clear claret colour with copious pale sediment | — |
| - 27 | 18 | 1026 | acid | distinct trace | none | no react | faint blueing | do. | albumen and blood discs with irregular outlines & pale in appearance. Epithelial cells & debris no casts. |
| - 28 | 15 | - | acid | very faint | none | none | faint reaction | deeper in colour & rather muddy sediment darker | do. |
| - 29 | 17 | 1021 | ac. | distinct | none | faint tge | do. | very dark claret colour & abund[t] flocc[t] sediment clearing somewhat with heat | Blood discs shrivelled outline & colourless. very broken in appearance no casts, but considerable debris |
| - 30 | 23 | - | ac. | do. | none | distinct react[n] | distinct react[n] | rather lighter in colour & muddy sediment less abundant. | Discs varying in appearance not so numerous. |
| - 31 | - | - | ac. | faint | none | none | none | amber in colour slight sediment | very few blood discs, epithelial cells & some debris. |

She has no sedative at present —.

April 16. There is no improvement. Has 2 x 15 Sulphonal daily to quieten her. She is very noisy at times

Case of Mrs Bryson
see p. 534

HÆMATOPORPHYRINURIA FOLLOWING THE ADMINISTRATION OF SULPHONAL—NOTES OF A CASE, WITH REMARKS.

By L. R. OSWALD, M.B.,
Assistant Physician, Glasgow Royal Asylum.

(Reprinted from the "Glasgow Medical Journal" for January, 1895.)

Sulphonal. Her urine became claret red in colour due to haematoporphyrin & there was abdominal pain & tenderness & sickness. For 3 or 4 days she retained nothing. After the symptoms are now passing off & she retains now small quantities of milk beef tea, bland &c. The further history of her case is contained in the appended printed article from the Glasgow Medical Journal.

Not included

P.M. Post Mortem Death

1894.

January 24. Has been
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She has no sedative at present —

April 16. There is no improvement. Has 2 x 15 Sulphon
daily to quieten her. She is very noisy at times

*Reprinted from the "Glasgow Medical Journal" for January, 1895.*]

# HÆMATOPORPHYRINURIA FOLLOWING THE ADMINISTRATION OF SULPHONAL—NOTES OF A CASE, WITH REMARKS.[1]

By L. R. OSWALD, M.B.,
Assistant Physician, Glasgow Royal Asylum.

RECENT medical literature both of this and other countries has contained a considerable number of references to the presence of hæmatoporphyrin in the urine, to its presence in the course of diverse diseases, and to its presence during the administration of drugs. More especially has it been found in the urine of patients taking sulphonal, and while it has been said that its presence as such does not necessarily seriously influence the health of the patient, there are cases where its occurrence in considerable quantity is accompanied by rapidly developing exhaustion, and often a fatal termination.

In this note it is proposed to describe a case that proceeded to a fatal termination, and from it and from other reported cases to draw some conclusions that seem to be warranted by observed facts.

J. R. or B. was admitted to the Glasgow Royal Asylum in August, 1893, suffering from acute mania of about a fortnight's duration. She had had no previous mental illness, and there was no history of previous severe bodily illness. There was a distinct hereditary predisposition to insanity, and also the presence of marked allied neurosis in her family history. Her bodily condition on admission was good, and there was no evident diseases of thoracic or abdominal organs. Her hands were œdematous and her wrists much bruised in consequence of their having been bound prior to admission. There were a considerable number of bruises on her upper and lower limbs, and it was stated by her friends that she was very easily marked, the firm pressure of the hand being at times sufficient to leave a bruised appearance.

The excitement continued pretty acute during August and September, and at times her condition gave rise to some anxiety lest it should wear her out. She was treated by baths, free nourishment, and abundant open air exercise. To

[1] Read before the Scottish Branch of the Medico-Psychological Association at Edinburgh, on 8th November.

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due to haematoporphyrin & there was abdominal
pain & tenderness & sickness. For 3 or 4 days she re
-tained nothing. All the symptoms are now passing
off & she retains now small quantities of milk beef
tea, bland &c. The further history of her case is
contained in the appended printed article from the
Glasgow Medical Journal.

Post Mortem Death

1894.

January 24. Has been ... her clothes ... having ... appearance ... far from ...

February 6th. She is excit... is abus... homicidal ... cooking ... her hair ... bodily co... good ...

February 21st. Excited ... very ... Her bodily ... is varia...

March 5th. Excited ... tenseness ... She is ... ment ... She is ... ing so we...

March 14. She is becom... facies appe... her face ... Remove... by having ... She has no sedative at present —.

April 16. There is no improvement. Has 2 × 15 Sulphonal daily to quieten her. She is very noisy at times



induce sleep she had paraldehyde in doses of from 2 to 3 drs. It acted well, and usually obtained for her five or six hours' sleep. Her excitement took rather a joyous turn, and in her shouting and talking there was often a rhyming incoherency. She had hallucinations of sight, and there was often a strong erotic tendency in her conduct.

Towards the beginning of October, it seemed as if recovery was beginning. She became much quieter, her habits improved, she slept better, and she had days of comparative well being. She was less resistive and impulsive, but extremely variable. About this time it is noted that her urine contained a trace of albumen, but no casts or other abnormal ingredients. When a hypnotic was required she got chloral and bromide.

In November she relapsed. Her habits became depraved and her expression lost intelligence. She was destructive. Hair is noted as having begun to grow on her chin, and with this there was considerable falling out of hair from her head. Albumen again noted as being present in small quantities in her urine, but no other symptom of kidney disease.

Her bodily condition was very good, and she had rather a full-blooded look. Her appetite was ravenous.

In January, 1894, came a burst of great excitement, subsiding somewhat towards the end of February. This was not accompanied by any loss of body weight, and for the sleeplessness she had chloral and bromide. They did not seem to act so well, and on 16th April she had sulphonal for the first time. She was then chronically and pretty continuously excited, rather difficult to manage, and sleeping little. She had also developed aggressive tendencies, and was apt to be impulsively dangerous to others. The dose of sulphonal given was 15 grains twice daily. This was continued pretty regularly till about the middle of July, but in varying doses. Sometimes she got 15 grains, sometimes 30 grains, depending on her mental condition at the morning visit. About the middle of July she was quieter, and sulphonal was only given rarely, but in the beginning of August it was resumed in 10 grain doses given twice daily, and this was continued till 23rd August, the date of the onset of the fatal illness. It may here be said that during the months of April, May, and June she had 1,800 grains, that there then came a period of three weeks when she had none, and that from 2nd August till 21st August she had 420 grains. In all, she had 2,200 grains of sulphonal. The doses given were not large, and the drug was believed to be acting well and to be suiting her well. It procured sleep, lessened excitement, and calmed the patient, without evident injurious effect.

On the morning of the 24th August she was sick, vomited her breakfast, and complained of abdominal pain, not localised to any area. There was some tenderness round the umbilicus on pressure. No physical sign of any course lesion in the abdomen could be made out. The urine could not be examined, none having been voided since the previous night. Fomentations were applied, and symptomatic treatment ordered. The urine passed on the following morning was found to be scanty and of dark colour. It gave no reaction with guaiac, and contained no bile. It deposited a copious sediment which cleared somewhat on heating, and microscopically was found to contain many altered blood discs.

She retained nothing given to her, but rejected it usually in about half an hour after taking it. The vomited matters were dark in colour, but, unfortunately, the vomit was not further examined either by the microscope or spectroscope. Her temperature in the evening was slightly raised, 99·4° F. She had a restless night, rejecting all food given her, and in the morning her condition had not materially changed. The urine had much the same characters, and the following report of its spectrum was obtained:—

"The colour is evidently due to the presence of hæmatoporphyrin, or of a body closely allied to it. The spectrum is not quite similar to that said to be given by acid solutions, there being no certain band observed at D. Probably other pigments are present. There is no blood as such in the urine, and no bile pigment. In other respects, on the addition of alkalies, the substance behaves like hæmatoporphyrin."

From the 26th till the 31st she continued in much the same state, the stomach refusing to retain nourishment, and the abdominal pain continuing. She was fed by nutrient suppositories. Her bowels were earlier in the case constipated, but the motions never contained blood. Her mental condition was one of considerable restlessness and incoherency, but she did not apparently suffer much pain. Headache was complained of now and again.

On the morning of the 31st she seemed better, her stomach was less irritable, and she retained a little peptonised milk. Her pulse was fuller, and her urine was amber in colour, there being an entire absence of the claret colour that previously had been so markedly present. There was also a slight increase in the number of blood corpuscles. She retained some nourishment during the day, but had a restless night, and on the following morning she complained of a numb feeling in her hands and feet, and before evening she was unable to move them. Her mental condition was much

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pain & tenderness & sickness. For 3 or 4 days she re-
tained nothing. Now the symptoms are now passing
off & she retains now small quantities of milk beef
tea, hands &c. .. The further history of her case is
contained in the appended [illegible] articles from the
Glasgow Medical Journal.

Not Concluded

P. Mortem Death

1894.

January 24. Has been ... her clothes ... having ... appears ... far from ...

February 6th He exhibits ... is almost ... announced ... clothing ... her hab... body lo... good ...

February 21st Excited ... very k... Her bodily ... is varia...

March 6th Excited ... tenure... She is ... -ment ... She is ... -ing so we...

March 14. She is becom... facial appe... her face, ... has whole ... by having had one ... She has no sedative at present —

April 16. There is no improvement. Has 2 × 15 Sulphonal daily to quieten her. She is very noisy at times

4 MR. OSWALD—*Case of Hæmatoporphyrinuria*

clearer, and she localised impressions and their character correctly. Common sensation was good, and she distinguished between heat and cold. Late the same evening her breathing became rapid and slightly laboured. The paralysis had increased, the knee jerks were quite gone, and she passed urine and fæces in bed. Complained of no pain. Temperature 99·6° F. Respirations 36. Pulse 84. There was no interference with swallowing or speech.

The following morning she was much the same, but looked anxious. Took and retained nourishment, and was freely stimulated. The abdomen was somewhat distended, and there was little abdominal respiratory movement. She could not move her body or limbs in bed. Breathing became more rapid, and there was again involuntary passage of urine to fæces. Through the day she got gradually weaker, and died shortly after midnight. Temperature before death reached 100° F.

During her illness the blood was examined three times by the hæmocytometer. The first examination showed it to contain 3,520,000 corpuscles; the second, 3,150,000; and the third, 3,250,000. It will be observed that there was a very great decrease in the number of corpuscles, but that some days before death they increased, and apparently the destructive process had stopped.

Taking six days, it was found that the quantities of urine passed were 14, 16, 18, 15, 17, and 23 ounces. The specific gravity varied from 1021 to 1036. The reaction was always acid, and on every occasion it was examined there was a trace of albumen present. Its colour was usually a very deep claret, sometimes clear, sometimes muddy, and there was a copious dark sediment till two days before death, when the colour of the voided urine was amber, and the sediment was slight. This sediment always gave the blood reaction with guaiac, but not at all in proportion to the amount of disintegrated blood the urine contained, and only on one occasion did the supernatant fluid give the blood reaction, and then it was probably due to an admixture of menstrual blood, a slight flow taking place for a day towards the end of the illness.

Microscopical examination showed, on every occasion except the last, abundant blood discs, much altered in shape, of shrivelled appearance and irregular outline, and not readily forming rouleux. No tube-casts were ever found, but there was much granular-looking *débris*.

The temperature was only slightly affected, the mean of six morning readings being 98·6° F., and of six evening readings, 99·2° F. Just before death it reached 100° F.

The *post-mortem* examination was made thirty-two hours after death, permission having been obtained with difficulty. It was done by Dr. R. M. Buchanan, who also made a microscopical examination of the liver and kidneys.

The body was well nourished, and there was no extravasation of blood in the tissues, and no bed sores. The heart muscle was soft. Valvular structures normal. Both lungs were adherent at their base. There was old cicatricial puckering of both apices, and in the substance of both upper lobes a caseous focus of tubercular disease was found.

The liver and kidneys were of normal size and consistence, but of a dark red and fleshy appearance. They were much congested, and the blood that exuded from the liver was of a dark colour, almost black. The adrenals were rather larger than usual. The spleen was slightly enlarged, dark coloured, and soft. The stomach and intestines presented nothing of special note, excepting some congestion of the latter in the first part of the duodenum, and at intervals corresponding with the coils. The uterus and appendages presented nothing worthy of special note. There was some blood in the cavity of the former.

The calvarium showed distinct thickening of the internal table, principally at the expense of the diploe. The soft membranes were highly œdematous, and there was a general milky opacity of the arachnoid, more especially along the superior surface of the hemispheres and of the cerebellum.

A careful dissection of the brain failed to reveal any naked eye lesion, and the results of the microscopic examination do not bear on this part of the case.

Dr. Buchanan reports as follows in reference to the microscopical examination of the liver and kidneys:—

"The liver in the fresh state showed a generalised fatty degeneration, the fat being mostly in finely divided form. There is nothing further to be noted from examination made after hardening.

"The kidneys in the fresh state presented a very notable departure from the normal. The renal epithelium was homogeneously granular, and the outlines of the cells and of the nuclei were almost entirely lost. In sections hardened in Müller's fluid, and stained with alum-carmine, the granular appearance of the epithelium is retained; but there is no nuclear staining in the cells of the convoluted tubules (with the exception of a coil here and there), nor in many of the straight tubules. The Malpighian tufts appear normal, excepting a slightly granular condition of their epithelial cells. The connective tissue nuclei have also in great part

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Sulphonal. Her urine became claret red in colour
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tea, bland &c. The further history of her case is
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Glasgow Medical Journal.

Not Concluded

P. Mortem Death

1894.

January 24. Has been
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She has no sedative at present —.

April 16. There is no improvement. Has 2×15 Sulphonal
daily & quieten her. She is very noisy at times

6 MR. OSWALD—*Case of Hæmatoporphyrinuria*

disappeared, and the same is to be said of those in the vessel walls."

Prior to the beginning of the fatal illness albumen had been noted as present in the urine, and probably the microscopic appearances found in the kidney were due, in part at all events, to previous renal disease. This would undoubtedly be aggravated by the irritative action of the excretion of the hæmatoporphyrin and allied substances, and it has been determined that the injections of the serum of blood containing hæmatoporphyrin produces considerable irritation of the kidneys and changes in the urine.

The peripheral nerves and the spinal cord were not examined.

As has been said, the literature of this subject is already considerable; but, limiting the cases to those in which the occurrence of hæmatoporphyrin in the urine followed, and seemed to be due to the administration of sulphonal, about 40 cases have been reported, and of these over one-half terminated fatally.

Most of the cases had many clinical features in common. They were all women, and the symptoms were vomiting, abdominal pain and pelvic uneasiness, usually constipation, and a marked diminution in the quantity of urine secreted. There was also a great tendency to collapse. The results of examination of the blood were not uniform. In Dr. Percy Smith's[1] cases the corpuscles were not markedly reduced in number, but in a case reported by Schæfer[2] it is stated that the corpuscles were much reduced both in number and in amount of contained hæmoglobin. In most of the cases the results of the examination of the blood are not recorded.

Torup[3] states that the limbs of one of his cases were weak, but not absolutely paralysed. Hammersten[4] describes in detail that in one case both legs were paralysed, sensibility was diminished, and tendon reflex absent; and in one of the cases described by Folles[5] the patient was unable to move her limbs on the day of her death.

In the Gartnavel case the paralysis was the most prominent clinical symptom for two days before death. The urine was improving in appearance and quantity, and the blood corpuscles were increasing in number; but the paralysis was

[1] *St. Thomas's Hosp. Reports*, vol. xxi.
[2] *Therapeut. Monatschefte*, February, 1893.
[3] Reported by Vaughan Harley, *British Medical Journal*, 1890, p. 1169.
[4] *Upsala Läkareforen Forhandl*, Bd. 26.
[5] *Internat. Klin. Rundschau*, 1891.

increasing. It is to be regretted that in most of the published cases no mention of the condition of the reflexes is made.

There seems to have been no relation between the severity of the symptoms and the amount of sulphonal taken, and in several cases hæmatoporphyrin did not appear in the urine till the drug had been stopped for some days. In the case just described, 2,200 grains were given in about 90 days. In other reported cases 8,000 grains were given in 120 days, 800 grains in 40 days, and 400 grains in 25 days.

In many of the cases the urine was carefully examined, but in very few instances was hæmatoporphyrin found alone, there being usually also present urobilin, chromogens, and other pigments whose nature could not be determined.

*Post-mortem* examinations do not seem to have been made in a great number of the reported cases, and the lesions found throw little light on the subject. Fatty liver was found in two cases and cardiac disease in one. The kidneys in many cases are said to have been normal.

In one of two cases that occurred at the Royal Edinburgh Asylum, marked bronzing of the skin was observed, and at the *post-mortem* the supra-renal capsules were found to be extensively diseased, the change being mainly of a caseous nature.

Another point is, that till serious symptoms such as vomiting, altered urine, &c., appeared, the drug seemed to be suiting very well. The usual symptoms following repeated doses were absent, so much so that the patients seemed to be very tolerant of the drug. The case just described, Dr. Percy Smith's and many others, showed after repeated doses no inco-ordination of gait, no speech involvement, and none of the symptoms that indicate that the drug is being pushed to physiological effect.

From the cases published, it must be admitted that the presence of hæmatoporphyrin in the urine in such quantities is directly due to the sulphonal. The *modus operandi* by which sulphonal produces its hypnotic effect is but little understood, but it is known that moderate doses powerfully influence motor nerves, especially at their terminations in muscles. That being so, it is interesting that in several of the reported fatal cases motor paralysis was the most prominent symptom before death, and that in the Gartnavel case death seemed to take place by a progressive paralysis of the muscles of respiration.

Garrod[1] found hæmatoporphyrin present in the urine of every one of ten patients at Bethlem Hospital who were

[1] *Journal of Pathology and Bacteriology*, vol. i, No. 2.

Sulphonal. Her urine became claret red in colour due to haematoporphyrin & there was abdominal pain & tenderness & sickness. For 3 or 4 days she retained nothing. All the symptoms are now passing off & she retains now small quantities of milk beef tea, brandy &c. The further history of her case is contained in the appended printed article from the Glasgow Medical Journal.

Post Mortem Death

1894.

January 24. Has been
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She has no sedative at present —.

April 16. There is no improvement. Has 2 x 15 Sulphonal daily to quieten her. She is very noisy at times

8 MR. OSWALD—*Case of Hæmatoporphyrinuria.*

taking sulphonal, and it may be that its hypnotic action is due to a destructive power it exercises over the blood, setting free in the circulation hæmatoporphyrin and other allied substances which act as hypnotics.

In this connection, it is unfortunate that in most cases the adrenals were not examined. M'Munn states that they are concerned with the downward metabolism of hæmoglobin and with its decomposition products. When they are diseased these products circulate in the blood, and appear in the urine as hæmatoporphyrin and substances allied to it. It seems probable that an explanation of the fatal issue in many of these cases may be found in a cumulative action of the sulphonal affecting the adrenals, leading to a rapid destruction of blood and to such an accumulation of the decomposition products of hæmoglobin, as to give rise to serious effects on the nervous system, and to death.

It is not the intention in this note to enter into the vexed question of the value of sulphonal as a hypnotic, nor to prefer an indictment against it. Like all other hypnotics, the cases for its administration require to be carefully chosen, and that being done, its value cannot be called in question.

In many cases of mental disease the bodily condition is poor and the patients are anæmic. In these it is difficult to see the value of a drug that has been shown to lead to the appearance in variable quantity in the urine of the decomposition products of hæmoglobin. In cases also of *folie circulaire* its administration, while lessening the intensity of the excitement, has seemed to render the stage of well-being less bright and clear intellectually.

As a temporary hypnotic for acute cases in private practice, and as a sedative for chronic and incurable cases of excitement, it is of great service, but its administration requires to be carefully watched, as with little warning symptoms of great severity may arise, and the life of the patient be endangered.

In writing this paper acknowledgment is due to the excellent and exhaustive paper by Priestley in recent numbers of the *Medical Chronicle*, and thanks are due to Dr. R. M. Buchanan for his assistance in the *post-mortem* examination of organs.

GLASGOW: PRINTED BY ALEX. MACDOUGALL.

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April 16. There is no improvement. Has 2 x 15 Sulphonal daily to quieten her. She is very noisy at times

Mr Bryson

1884

but the attacks are not of long duration. She is in a plaid dress as to her own clothing she is very destructive. Her bodily condn is good, her appetite being voracious, but she is becoming very degraded looking & has little sense of decency.

May 22. There is no improvement here. She is noisy destructive & dirty in her habits. Sleeps at present due to Sulphonal 4 which she has 30 grs daily. She is undoubtedly becoming demented. —

June 27. She remains in the meantime pretty stationary. She is not worse, but cannot be said to be better. She takes her Sulphonal (2 + 15 grs) daily. By this means she sleeps well & is quiet. She is in very good bodily condn but there is no more sanenes about her.

Augt 21. Sulphonal is continued, but in smaller doses. Otherwise there is no change. There is no sign of returning mental health. She is stout & well nourished.

August 31st At present she is slowly recovering from an illness that seems to have been the direct result of taking Sulphonal. Her urine became claret red in colour due to haematoporphyrin & there was abdominal pain & tenderness & sickness. For 3 or 4 days she retained nothing. All the symptoms are now passing off & she retains now small quantities of milk beef tea, bread &c. The further history of her case is contained in the appended printed article from the Glasgow Medical Journal.

P. Mortem Death

Mr Beith

From p. 490.

1894

January 30th There is no change. Believes that she is to die a miserable death soon, & that her life is simply prolonged to add to her agony. She says that she would not do herself any bodily injury altho she is so unhappy. At present her bodily condition is better than it was. and she is sleeping fairly well. But her cond.n as a whole is unchanged.

February 10th Practically unchanged since last note.

March 9th No change. Her belief in her delusions remains unshaken. Her expression is one of considerable depression, and her physical health is not better than might be desired —.

March 24. There is no change to note. She is rather troubled by small boils forming on her face. but her blood is in fairly good cond.n and she has her stout & nourishing diet. Mentally she is still the subject of the old delusions —

April 16. Worse both bodily & mentally. Is becoming almost degraded looking. She pays no attention to herself or to her appearance & if allowed would sit with her head bent on her knees. She has the same delusion about impending execution. —

May 23rd In every way there is a change for the worse. She has the same delusion & is becoming careless of her personal appearance & more difficult to get to do anything She crouches on creeping into corners & burying her head on her breast. Or she will cover her head with her dress believing she is unworthy to be seen

Mrs Beith

or spoken to. She resents interference & is coarse in language. She sometimes molests other patients & lacks control.

June 27. She is unchanged except it may be that she is a little worse than she was. She believes that every day is to be her last & in this respect is almost a moral maniac. Her habits are becoming degraded, but as yet she has been kept in 1904. She resents being reasoned with & is becoming vicious in habit & conduct. —

August 21. Remains the same delusional woman. Her mental condn. is worse than it was & her general mental state is deteriorating. She is violent at times & very careless of her appearance & neglected in her dress. She takes her food well & sleeps well —.

Nov. 16. She has become very degraded in appearance and has lost all interest in her personal appearance. There is no improvement in her mental condn which is an extremely delusional one. She, at times resents being even spoken to & is aggressive & violent

Decr. 24 She says that she is not Mrs Beith but a beast. She still keeps to her delusion & cannot be induced to be better. She is very degraded in her appearance & the change that has taken place in the last few months is very marked —.

1895.

April 10th She is not any better, but is still very delusional & sits with her head buried on her arm She refuses sometimes to speak & says at other times that she should be shunned by all

B. C. Jan Jof. 570

Elizabeth Wink or Scott
Iron p. 570.

1894

Jan. 10 (cont.) She takes food well, and sleeps well, and her bodily condition is improving. But there are no evidences of more mental stability, and she is at times excited & impulsive. She does not have much care of her person and requires to be dressed & undressed, but she is not dirty & her language is not coarse —.

January 24. Quieter and sleeping better, but very silly. Follows one about the ward, talking to herself & smiling in a silly way. Much of her conversation has a religious element in it. She is pale, but is taking her food well, and is not at all violent.

February 9th Her delusions are very persistent now & she has fewer interviews of comparative reason. The delusions have mostly reference to spiritual matters. Believes that the Virgin is Jesus & follows him about trying to kiss his garments, also that she is the Virgin Mary & that many of the other patients are Saints. She kneels to them & prays to them & implores their love &c. at some times her facial expression is one of intense religious fervour, & in times of greater excitement she looks a picture of emotionalism with her hands folded on her body in a suppliant position & tears streaming from her eyes.

She is somewhat pale, but takes her food well. and is having good nights. Hitherto she has had 15 grs Chloral nightly. To-day it is reduced to 10 grs.

February 21st She remains as above described and is not any better. Extremely emotional, and with the same delusions that are noted above.

Elizabeth Ann Scott.

March 24th In spite of all that can be done she is not improving. She is depressed rather than excited & her religious exaltation displays itself in delusions of her unworthiness, of her relation to God &c. She recognises around her persons whom she believes to be devils and she worships them. Her bodily condition is not improving & she cries a great deal, talking to herself and assuming a fervent religious posture. She has been sleeping better, but takes her food only indifferently

April 16. Her general condition is one of no improvement. Mentally she varies. Yesterday she had a very excited day, while to-day again she is quieter but very interfering & talkative. She is very incoherent & rambling wandering about the ward unable to settle to anything, and refusing to do any work. She is sleeping fairly well and has no draught at present. at times she seems better & her condition then is one of great apprehension & fear. She then weeps and cries. Her delusions are pretty fixed in character & She believes that the writer is 'Jesus', that many around her are angels &c.

May 23rd In spite of all remedies she is not improving. The cont^n of excited melancholia continues, and She retains delusions about Christ &c, worshipping other patients, kneeling to them &c. Her bodily cond^n is only fair and her nights are bad in spite of a draught given when she is very restless. Her is a pitiful condition & when at her worst her state of mental distress is very great

To f. 539.

Mary Campbell

1884

January 19 (cont'd) showed no abnormal condition. Her pupils are b. day equal, of good reacting power. and her speech is not markedly impaired. Yet the writer is not convinced that this is not simply a remission. She is just rather too wise, laughs at times without much reason & expresses herself as feeling much better than she really is. At present however she is wise & is therefore discharged

Recovered

Janet Brownlie
From p. 408.

1854.

January 30. This patient is to day removed home by her friends
It is doubtful if the change will do her any good
or if they will be able to manage her, but they
desired to make the trial

Discharged Relieved

Readmitted. p. Case-Book. Vol. VI. p. 356.
22. 8. 94.

Elizabeth Porteous or Cranstoun

cont. from p 5.30

Jan. 24th (cont.) This morning she is very ill; her temperature being 102°; her pulse rapid and small. She is exceedingly restless, hardly ever still but tossing about on her bed and sending the bedclothes off. She is always talking or muttering and it is evident she is getting exhausted. Her abdomen though slightly distended is not hard.
Towards the evening she got rapidly worse and her temperature rose to 103°. She died at 8 p m.

Death on January 24th 1844.

Cause of death Exhaustion from acute melancholic excitement.

Post. Mortem.

The abdomen only was allowed to be examined when it was found that no peritonitis existed; that the part of the bowel which had been strangulated was slightly discoloured but otherwise healthy
The wound had healed by first intention and the femoral canal was completely blocked by the sac which had been twisted into it.

Margaret Mc Nish or Watt
cont from p 418

| | |
|---|---|
| 1896 April 14th | The vomiting still continues and the matters vomited has an unpleasant odour. Her abdomen is somewhat swollen and the coils of the large intestine can be made out. It is resonant all over and the abdominal wall is not tense. An enema was given which acted slightly. |
| " 15th | This morning she seemed much better. The vomiting having ceased last night but in the afternoon she got much worse and became collapsed. Dr Dalziel came in the evening and passed a tube up the rectum but it would not go further than the sigmoid flexure. Faecal vomiting was present and also suppression of urine. Owing to her collapsed condition no operation was deemed advisable and she died about half past nine. |

Death on April 15th 1896.

Cause of Death. Internal Strangulation of bowel.

For P M vide Pathological Register p 263.

Mary Clark

Town p. 525

1884

January 21st hallucinations. She takes food only under compulsion, and her alimentary canal is much out of order. This is, she thinks, due to the poison that is put into her food. She has not been sleeping at all well and has a chloral & Bromide draught at night

March 8th Not much better yet. Says her name is not Mary Clark. Full of delusions & suspicions. Still has draught at night. Bodily cond.n poor & pale & anaemic

March 24 Taking her food rather better these last few days and not giving expression to many delusions. but she still believes in them & is great influenced by them. Chloral & Bromide draught at night but in reduced doses.

April 16. At present rather better. Less demonstrative & prearanter. Taking her food herself, and sleeping better.

May 22nd Continues to be a little better taking her food fairly well & sleeping well. At present she is in ch 4. Her delusions are less openly expressed, but are nevertheless still there.

June 27. Still in ch 4 & practically unchanged. Still subject of very many hallucinations & delusions.

July 27. Remains much the same. Manages to be kept in ch 4, altho at times she is so demonstrative that she strikes others. She is taking her food fairly well & has extras in the shape of milk & eggs.

August 2nd Says this morning that there was asafoetida in her milk. Has many delusions of that nature. But is on

# Mary Clark

the whole fairly easily managed, and at present is about as least delusional as she has been.

October 15th She is very free & delusion & believes that the Doctors have designs against her. Also that her food is interfered with &c. She hears voices to a very marked degree. Bodily she is fairly well nourished.

Nov. 15th There is no change in her condition. She remains delusional and occasionally she does not take her food at all well. She looks anaemic, and has the most miserable look about those around her. —

Decr. 24. Recently her delusions influenced her conduct so much that she was not taking much food and what she did take she afterwards endeavoured to reject. She was sent to Inf. It is possible to exercise more supervision over her there. Otherwise there is no change.

1895.

Jany. 8th She is taking her food pretty well & is less openly delusional. But there is no real change in her condition —.

April 10th At present back in Infr. Still very delusional. Rather pale & not taking her food so well. In most respects not changed from date of last note.

September 28th She is subject to many delusions and takes strong dislikes to people. She is rather pale and not in good health.

December 31st She calls people by other names than their own ones and is constantly demanding to get and sometimes packs up all her belongings ready to go.

To p 550.

Euphemia Black
Rowp. 422.

1894.

March 8th. Is worse mentally at present than she has been since admission. She has has to be sent in from the kitchen, as she threatened to brain the cook. She will not allow her hair to be put up, but sits in a prayerful attitude with it streaming down her back. Her hands are folded, her eyes closed & her face turned heavenwards. In conversation she is not incoherent but irrelevant. and at times distinctly rational. She is taking her food well & sleeping well —.

March 24th Still in No 3 & not any better mentally. She is incoherent at times, complains of having been very badly used, and of not been nursed &c. She will not do any work, but is not violent, though she has bursts of temper —

April 16. Was sent back to No 4, but she is not any better. Will not do any work, and is foolish in manner & conduct. Laughs in a silly way, and sits much with her hands folded & eyes shut.

May 22. Back again in No 3. One day excited, talkative, gesticulating & incoherent, the next quieter, but never really well & often rough & interfering to other patients —.

June 27. Was put on extra diet, as she seemed thinner & has gained about 5" in weight. It cannot be said that there is any improvement in her mental condition. She is very silly at times, but has not been making any complaints for some time

July 27. She is again very much worse mentally & cannot be got to reason about anything. She believes that

Euphemia Black

—

she is most cruelly treated here and makes many accusations against the nurses. but in them there seems to be little or no grounds of truth. She will not do anything & on talking to her she gets excited. makes bitter complaints about all the officials, and uses very bad language. on several occasions she has been sent to bed for a few days and it is found she becomes quieter sooner there. Her physical condition in spite of extras is poor, and her circulation is languid.

August 21. at present she is very much better than at last note. She is civil and, for her, pleasant. She is improving in bodily condition & has extras, milk, eggs &c. She insists that she is perfectly well, never was better in her life. &c.

October 16. She is a most undependable woman. Sometimes she is very pleasant & again she is in such a condn. that an accidental touch makes her frenzied retaliate. She believes that she has had nothing but abuse here, & that it is a place for liars & criminals. She is fairly well nourished, and has extras in the way of eggs &c.

Nov. 15th For about a fortnight she was so much quieter that she was able to be in No. 2. Her conduct in No 3 exasperated some of the other patients & one especially had a very bitter dislike to her. But 3 days ago she became abusive & foul mouthed & had to be removed from No 2 to No 3, and from the hall where she was getting her meals. A free purge has somewhat quietened her & she is better again. She does no work of any kind & sits with her hands folded.

Top. 568

# Wilhelmina Jane Wilson

cont. from p 524.

1894

May 1st — There is not much change in her condition. She is very variable, being some days pretty well and on others miserable and restless when she asks passionately why she is not allowed home and begs for one chance.

June 18th — She has continued pretty well for the last few weeks and just now she is menstruating; the first time for about 15 months. She is stronger looking and more cheerful and composed in her mind. She is taking a more healthy view of her own case and is more willing to be guided by others.

July 21st — She has menstruated again and continues to keep well. She is quiet but sensible and often cheerful. She has been on parole for about a month. Her general condition is good.

August 21st — For the last week or two she has not been so well. She accidently read in the Papers an account of the drowning of a young lady near Crieff. This upset her as she herself stayed there with a nurse before coming here and meditated drowning herself in the same pool. She had also a visit lately from her father and mother which did not do her much good. The same diaphoretic and diuretic mixture which she had before has been prescribed at her own request. The last couple of days she has been better. Her complexion is looking clearer.

1894

September

# Wilhelmina Jane Wilson

1894
September 22nd

Two days ago, on a Saturday she went with Mrs Murray for the day to Rothesay. She was fairly cheerful in the morning. All went well till the return journey. As they were nearing Gourock in the Columba Miss Wilson suddenly and without giving any warning leaped overboard, fortunately it was behind the paddle wheels. She had been walking up and down the promenade deck with Mrs Murray who had hold of her cloak, but Miss Wilson before leaping loosened it at the neck and left it behind her. The steamer was stopped, a boat lowered which soon rescued her. She did not when in the water either struggle or make any fuss but simply lay floating on her back with hands extended. She never lost consciousness and was attended by a Doctor and two nurses when brought on board. She got a change of clothing from one of the latter and was taken back to the Asylum in a cab from Partick. The explanation she gives is that it was a

So p 565.

**EXCITING SCENE ON THE RIVER.**

**GALLANT RESCUE BY THE COLUMBA.**

An exciting scene occurred on the river on Saturday afternoon, when the steamer Columba was on her homeward run. While the vessel was crossing the channel between Kirn and Gourock, a lady, apparently about 30 years of age, and who had boarded the steamer at Rothesay, was observed to jump into the sea. This was witnessed by many of the passengers on the crowded decks. Captain Campbell had his attention instantly drawn to the occurrence, and he gave the signal to stop and reverse the engines. But as the vessel had been going at full speed, a distance of several hundred yards separated the drowning woman from the steamer before anything could be done to effect a rescue. Meanwhile a boat was rapidly lowered, manned, and pulled towards the lady, who was seen in the distance floating on her back. A small yacht also made towards her, but the Columba boat got up first, and to the great relief of the crowd on board the Columba the crew caught the lady and dragged her into the boat. The utmost excitement prevailed on board the steamer, especially among the lady passengers. On being taken on board the steamer, the lady was removed to the ladies' cabin, where kind hands attended to all her wants. A Sister of Mercy and a doctor, who happened to be on board, rendered effective assistance, and the patient was brought back to consciousness and placed out of danger.

Miss Flora G. Liddell
Rom p. 522

1894.

April 16th On the whole she is a good deal better & is turning out a good worker, being half the day in the Laundry. She is still somewhat unbalanced & when much attention is directed towards her she does foolish things. But she is sleeping very well without draught, is taking more interest in her own appearance and her bodily condition is also better

May 22. a very great improvement since last note. So marked has it been that she is allowed leave to-day to go to app for a change of scene & discharged

Recovered.

Readmitted as a Voluntary

See Vol VI p. 286

# Mary Clark

cont from p 544

1896

March 31st She is at present giving a good deal of trouble by reason of her persistent delusions about the charge nurse in the Infirmary. She thinks she is there to murder her and that she is a man in women's clothes. She is pale but in fair health.

September 30th For some months she has been in W. 4 and is behaving fairly well. Occasionally she packs up all her belongings and says she is going to leave.

1897.

March 31st Her delusions are many and wonderful e.g. that she has not got her own eyes, that her own are taken out and used by other people, that there are machines in her body etc. She also mistakes the identities of those about her.

Sept. 30th Her mental condition is still very unchanged. She is very delusional.

1898

March 29th She has got worse lately and will not sleep in her bed on account of her delusions. Her legs become much swollen in consequence. She was sent to W. 1 for the change & this has done her good.

To Vol VII p 223.

Mr McCormish
From p. 384

1894.

Decr 22. Has gone to the Cottage where she is most useful. She is pleasant but reticent & cannot be got to talk about herself. She is in good bodily health.

June 27. Since going to the Cottage she has had one or 2 slight turns when she kept her bed for a day or two. But as a rule she has been very well & is a capital worker. She is reticent and avoids as much as possible speaking about herself.

October 16th She is peculiar, but it is difficult to describe in how much her mental condn. departs from the normal. She has periods - usually a couple of days in 6 weeks - when she takes to her bed & will neither take food nor speak. She will not at any time speak of her husband or of her own friends, and she is suspicious of many remarks made to her believing that they have a double meaning. She is still at the Cottage where she is very useful. —

1895.

January 8th The above note still represents her condn. As a rule she is bright & cheery & a good worker.

April 10th She got her arm scalded rather severely some time ago and objected very much to having it dressed. She is very suspicious, and recently flung said in the most innocent manner. Her bodily condition is good & she is a most excellent cook and of great service at the Cottage.

September 28th There is no change in either her mental or bodily condition. Her manner is sometimes rather silly but often suspicious.

Mrs McOmish

1895.

December 31st She is still the mainstay as regards cooking at the Cottage and is always very civil and obliging. Her health is excellent.

1896

March 30th She kept in good health up to last night when she had a slight shock and this morning is suffering from right sided paralysis with aphasia. Her face is flushed, her breathing heavy and she cannot swallow. Her pulse is slow but not strong. She sometimes seems to understand what is said to her. She was carried up to the Infirmary on a stretcher.

April 16th She has improved slightly but is still paralysed on the right side. Occasionally she can say a few words. There is a slight trace of albumen in her urine.

May 13th Her right arm and leg are still paralysed and often trouble her a good deal by swelling. She can now talk fairly well and is more cheerful than she was. She gets up every day.

July 10th She is looking stronger and healthier but the paralysis of the right arm & leg remain. If anything she is more incoherent than before.

To p 595.

553

Martha Young
Group 376

1894.

June 26. There is little subsidence of her excited katatonic condition. She is incoherent to a degree. Her bodily condn. is fairly good —.

July 27. A little quieter of late. No other change.

August 31. Been noisier again & sent down to No 2. She gets out more easily than & get a vest for her excitement

Nov. 16. There is no change in her general condn. She is still noisy at times & is to No 2 and stays a great deal on her conduct during illness of her sister —.

1895.

April 10th There is no change in her condn. Mentally she is much demented. Her bodily condn. is good.

September 28th Her health continues good. She is often & subacutely excited, consisting chiefly of constant incoherent talking whether people are present or not. She works fairly well.

December 31st Unchanged. B H & C. good.

1896

March 31st Of late she has if anything been not quite so talkative but when so there is no abatement of its incoherency.

September 30th Her usual work is attending to the Calender in the Laundry and she work well and can be trusted in spite of her continual chattering and apparent inattention.

Jo p 599.

Elizabeth S. Preston
Kongf. 368.

1894.

June 26. She has been very much under the influence of delusions recently, delusions mostly of a sexual character & only given expression to, at rare intervals such as that the nurse is grossly immoral & practises vile habits with other patients; that the Doctor visit the patients beds at night and that the men in the grounds endeavour to entice her to them by signals &c. She has to be brought in from the Cottage in consequence & are always aggravated at the She insists that nursing is e condition, that she ought to ite many letters to her friends in fairly good cond.n of body practising self-abuse —. She has written many asking her to bring thing - marshalls, brandy, whip & some of her friends have come that they may see her & aware of this & encourage She is very forward in manner foolish questions, always wishing might be at home.

Nov. 16 She is much the same. Does not give free expression to insane ideas, but as the attendants tell us shows they are present. She sometimes refuses to speak to the writer who has she believes some sexual influence over her. Her general bodily cond.n is good

Pop. 558

Martha Young
Rough. 376

1894.

June 26. There is little subsidence of her excited talkative condition. She is incoherent to a degree. Her bodily condn. is fairly good —.

July 27. A little quieter of late. No other change.

August 31. Been noisier again & sent down to Ward 2. She gets out more easily than & gets a visit for her excitement.

Nov. 16. There is no change in her general condn. She is still noisy at times & at times she laughs a great deal during boisterous fits.

1895.

April 10th. There is no change. She is usually good.

September 28th Her health often is subject chiefly of constipation whether people who fairly well

December 31st Unchanged. 13 19

1896

March 31st Of late she has quite so talkative [illegible] no abatement of its incoherency.

September 30th Her usual work is attending to the Calender in the Laundry and she works well and can be trusted in spite of her continual chattering and apparent inattention.

Jo p 599.

Letters of Admission Register
Sept. 54

Elizabeth S. Preston
From f. 368.

1894.

June 26. She has been very much under the influence of delusions recently, delusions mostly of a sexual character & only given expression to, at rare intervals. Such as that the nurse is grossly immoral & practises vile habits with other patients, that the Doctor visit the patients beds at night and that the men in the grounds endeavour to entice her to them by signals &c. She has to be brought back to the asylum from the Cottage in consequence of these beliefs that are always aggravated at the menstrual period. She insists that nothing is wrong with her mental condition, that she ought to be at home & She writes many letters to her friends to that effect. She is in fairly good cond.n of body & has not been detected practising self-abuse —.

August 21st She has been worse of late. She has written many foolish letters to her mother asking her to bring things to her here that are quite unsuitable, brandy, whips &c She has told her that some of her friends have come here especially in order that they may see her & that the Doctor are aware of this & encourage their visits to her. She is very forward in manner and asks many foolish questions, always insisting that she is well & might be at home.

Nov. 16 She is much the same. Does not give free expression to insane ideas, but as the attendant letter shows they are present. She sometimes refuses to speak to the writer who has she believes some sexual influence over her. Her general bodily cond.n is good

Pop. 558

555

Rachel S. Clutterscales
Fromp. 254

1894.

June 16. There is no change in her cond.n. a mildly demented woman in good bodily cond.n and with a positive element in her mental condition

August 21. Keeps a good deal, especially with her food. Has to be fed with a good deal of it. No change —

October 16. She fainted one day some weeks ago & since then she has been in the Infy. She has had a rather severe attack of Diarrhoea, and is not in a satisfactory cond.n She turns pale on the least exertion & faints very easily. She is still stubborn with regard to her food & not any better mentally.

Nov. 16th. About a fortnight ago albumen was found in her urine and there is no doubt that she is suffering from Chronic Kidney Disease. Her skin is very dry & the amount of urine varies. She has been put on milk diet, diuretics &c & is pretty well kept in bed. Since treatment was begun her mental condition has improved a good deal, and she is less restless, is sleeping better & is less foolish generally. She is thinner however and though the heart is not perceptibly affected the prognosis is not very good.

December 5th. The quantity of urine passed is very low & there is always albumen present, acetic usually in very small quantities, never a trace. Physically she is no worse. Mentally

1895.

January 8th. albumen is still present in her urine, but in small quantities. Her cond.n is unchanged.

Rachel S. Blinkrcales

1895.

April 10th She is still in the Infirmary Ward 7 in much the same condition. albumen was not present in her urine when last examined. Mentally she is somewhat silly, but is quieter & less re-sistive than she was –

September 28th During the past four months there has been no change in her condition. She is thin and in poor health. Her urine is acid, contains no albumen & sugar.

December 31st She is very dull but not nearly so resistive as she used to be. On the whole she can be considered slightly better.

1896

March 31st She is still depressed but mildly so and in manner and conduct is meek and gentle, a fact which is apt to be taken advantage of by some of the rougher patients.

September 30th Unchanged. B H & C. fairly good.

1897

March 31st She is still in the Infirmary as she requires care and attention, especially as regards her food. Her bodily health has improved somewhat but mentally there is no change. Her urine is acid - 1020 - and contains a faint trace of albumen but no sugar.

Sept. 30th Unchanged. B H & C. fairly good.

To Vol VII p 57.

557

Mrs Wink or Scott

Group. 538.

1894.

June 26. The cond^n of excited melancholia continues. She is as yet no better. Now & then she has a good day when she sews, works &c, but as a rule she is very restless, and her nights are vocalises. She has delusions & hallucinations, the latter especially of hearing.

July 27. She has been sent down to No 3, her mental condition showing no improvement. She is restless & incoherent, wandering a great deal in her dress & interfering with other patients. Many of her delusions are of a religious character, and at times she is very emotional & weeps & cries a great deal.

August 21st. There is no change in her cond^n. She is highly emotional, weeping a great deal & bemoaning her wickedness. A kind of ecstacy mingles with her tears and she seems at times to see angels, whom she worships. She is in indifferent bodily health and takes her food fairly well.

October 16th. She looked so much thinner some time ago that she was put to bed & her chest carefully examined. But no evidence of decay was detected. She is being kept in bed & fed up. She is not any better mentally being restless & incoherent, many tears often mingling with her outpoured words.

October 23rd. Transferred to Smithston asylum by authority of the Board of Lunacy

Relieved

Elizabeth S. Preston
from p. 554

1895.

April 10th She is a most insane woman though in a short conversation this might not be believed She believes that men in the Dining hall make improper advances to her, that by signals they induce her to do improper things that some one has come here as attendant to be near her & annoy her whose she previously knew &c. Her moral feelings are very much blunted and she is not to be trusted.

September 28th She often asks to get home and says that she is quite well but it is exceedingly doubtful if she could be trusted. Though she hardly ever speaks about the subjects mentioned in the previous note it is more than probable that her delusions are still present. In manner she is rather silly. Though thin her health is fair.

December 31st Her manner is quiet and as a rule she is reserved. She still has many delusions and though she generally conceals them they sometimes assume such intensity that she either speaks about or refers to them in her letters. They are chiefly connected with sexual subjects and have reference to those whom she sees in the Dining Hall. She still thinks that men there make improper advances to her.

To p 583.

Mr Haigh
Ward 318.

1894.

June 26th. At present she is rather better again, but is much disappointed that arrangements for her being boarded have fallen through. She has the same ideas about her brain, describing the sensation sometimes as if the roof of her head were being lifted off, as if the interior of her brain was a boiling mass. Her appetite is good & her bodily condn. certainly better now than it was some time ago. She seems to sleep well, but she herself believes she never sleeps. She believes that many remarks made by the nurses are made just to annoy her & that no good feeling towards her is entertained by any official here. At times she is very trying, but again she is very pleasant and is quick & smart in many of her sayings. —

July 27. Of late she has been keeping rather better bodily & her mental condn: has not been one of so much irritation. Her delusions remain the same & she is most anxious to be removed from here, to a place where she will not be worried, but where she may live & die in peace. —

August 21st. Her physical condition is fairly good & in consequence her mental condition is one of less irritation. She is not complaining so much, not insisting so much that she is well, nor making so many complaints against the nurses. She still has the delusion about the condn. of her brain, but no attempt is now made to reason her out of it.

October 16th. At present again she is not so well, irritable & discontented & with her delusions more active. She

Mr Haigh

Oct. 16. is not so well bodily, has not been taking her food so well, and has had a touch of diarrhoea.

Nov. 15. Is pretty well just now both mentally & bodily. Her condition is one of less irritation, and she has fewer complaints to make about the nurses. She is usually bright conversational & very quick with her answers. She is taking her food fairly well & has good nights, altho she says she never sleeps any.

Dec. 24. She has been rather depressed mentally for some days. & has appeared to suffer a good deal from Rheumatism. She fears that she cannot live long in the agony she suffers & would like to die. She is somewhat cheered at the thought of eating her dinner to-morrow in the West House.

1895.

April 10. Has kept fairly well for some time. mentally she still talks about the disease of her brain eating in deeper & deeper. Her bodily condn. is only fair. She lives she says only because of her unconquerable spirit.

September 28th According to her own statement the disease under which she suffers is eating deeper and deeper into her brain and she is a living marvel. She often is troublesome both to the nurses and patients from her selfishness and morbid egotism. She says she has not slept for months but in reality sleeps every night and snores.

To p 567

Mrs Moore

From p. 398

1894.

July 27. She is up & out a good deal in the pleasant weather. For a few days she was tricky & vicious striking other patients, destroying plants, &c. She is very thin, but is taking her food better than she did. —

August 21st Shows at times a great deal of mischief. She strikes at other patients & confesses it afterwards, saying that she knows it is wrong, that she is a wicked girl &c. She is utterly unreliable, and makes false statements about many of those around her. The lung disease is not at present active, and she is eating & sleeping well —

October 16. Lung mischief is not actively progressing but every now & then her evening temperature takes a jump up some degrees. She is mischievous at times, striking other patients without cause & she is impulsive in other ways. Her bodily condition is being fairly well maintained —

Nov. 15. Her mental condition has been very satisfactory for some weeks. She has been restless, talkative & at times destructive & impulsive. Incoherent in her remarks & showing no sense of decency. Her bodily condition is fairly good & the lung condition is not actively progressive.

December 5th She is at present a good deal better & and is less tricky than usual. She is fattening a little and is taking her food well. She spoke very sensibly to her father some days ago, and he was quite impressed by the great improvement in her condition. While there is an improvement it is not so very marked & she has times of impulsive & silly conduct —

Miss Moore

1894.

Decr. 24. Temperature raised to 100.4°F. last night. She is kept in bed today. but nothing definite is found in her lungs. Probably she got a little cold -

1895:
Jany. 8th Has had some haemoptysis since last note & been in bed for a week. Is better again & up.

April 10. She is subject to impulsive turns of homicidal excitement in a mild form. She then assaults other patients & as a punishment (3) she has been sent down to No 3. The lung disease is at present not actively progressive & her bodily condn. is fairly good. Mentally she is silly & says that she cannot keep doing certain things such as striking other patients &c.

September 28th She is still kept in ward 3 as she often attacks other patients more particularly one old woman against whom she has taken a great dislike. She is very silly and will often when anybody passes through the gallery fall on her knees and touch the floor with her forehead. The lung disease does not seem to be making much progress.

December 31st Her health is much the same as before and there is nothing new to note about her mental condition.

1896

March 31st She is often foolish in conduct and very obstinate. She refused lately to read some letters to herself from her relations, an unusual thing for her.

To p 591

Maria Hazelton

From p. 230.

1894.

July 27. There is no appreciable change in her condⁿ. She talks in the same way & is if anything more apathetic & less caring about her own welfare.

October 16. She shows no improvement. Her bodily condⁿ is good & she menstruates regularly, but her finer feelings are much blunted & she puts food in her pockets & is not so tidy in her personal appearance as she should be. —

December 8th There is no change in her mental condition. It is feared that it is one of increasing bluntness & apathy. Bodily she is well nourished —

1895.

January 8th avoids observation if she can, and is repellant & rude when spoken to. She is not any better but rather worse —

April 10th There is no change in her condition. She shows no sign of returning mental health. Her bodily condⁿ is fairly good.

June 6th Some days ago there was discovered what had been a large abscess in the right groin. It had burst and there is an irregular opening from which there is an abundant discharge. She never said anything about it till it was discovered but went about her work as usual.

" 20th The abscess cavity shows no sign of healing up but there is abundant discharge from it and sometimes the pus is thicker than usually. A probe can be passed deep down but nothing is felt at the bottom of the cavity.

Miss Hanellon

1895.

July 1st The long continued suppuration and the confinement in bed is telling on her health. She is pale and losing weight. Her right leg is kept drawn up to relieve tension. Mentally this illness seems to have done her some good as she is brighter and not so restless.

" 5th She left to-day for her home in Ireland.

Discharged Relieved

on

July 5th 1895.

Wilhelmina Jane Wilson
cont. from p 548.

1894

sudden impulse that made her leap overboard; that she had no intention of it before but that just as she was at the railings the thought came into her mind that here was a grand chance to end her life. After the accident she was very frightened in case she should get into the hands of the Police and on arrival at Partick she was anxious that there should not be a crowd waiting to see her. She slept a little the night after and was quiet. This morning she is complaining of soreness about her legs and a general feeling of stiffness. She is being kept in bed. She is very depressed and morbidly anxious that nobody should know about her attempt.

September 26th She is feeling a little stiff and bruised from her jump into the water. Otherwise there are no evil consequences. Mentally she is very depressed and her face looks the picture of despair. Her menstruation still continues to be regular.

" 29th She is still kept in bed and is being fed up. She is getting little meat but plenty of other food. Her complexion looks a little clearer and on the whole she is somewhat brighter though at times her depression is deep.

# Wilhelmina Jane Wilson

1894

October 17th — After being kept three weeks in bed she has been allowed to get up as she has not derived much benefit from it. Her mental condition at present is much about the same.

November 22nd — During the past week or ten days she has again got very well. When in this satisfactory state her complexion is clearer and her expression more natural in appearance. She is bright and cheerful and does not plead to get home.

December 28th — She still continues fairly well. Now and then during the past month she has had dull turns but she soon got over them. It is more than probable, however, that her vicious habits have not yet been completely given up.

1895

February 27th — For the past two or three weeks she has been very well - in fact much better than she has ever been since admission. She has got quite stout and is bright and cheerful. Parole of the grounds has been given her and she goes about with another lady. She still sleeps in a small dormitory and the nurse who sleeps there also reports that occasionally she has a restless night.

Jo. p 569.

Jane Russell Miller or Haigh
cont. from p 560

1895

December 31st She used to occupy a single room off the Infirmary but a couple of months ago she was turned out of it for another patient and sent upstairs to sleep. This is a great grievance and her complaints are many. She still describes the progress of her supposed brain disease and she fails entirely to see the significance of there being no objective signs. Her whole being and existence is wrapped up in herself.

1896

March 31st She is perhaps looking better but any hint to that effect rouses her and she pours forth her complaints. She has the same delusions about herself and is so wrapped up in her own ailments that she has no outward sympathy for others.

May 13th About a week ago another patient made a noise at night and disturbed her so that she threatened to take a chair to this patient. The latter immediately attacked Mrs Haigh giving her a black eye. She is in a terrible state of agitation about this and gives a most garbled and untruthful account of it, ascribing all the blame to the other patient.

To p 593.

Euphemia Black
From f. 546.

1894.

Decr. 5th She is much quieter again & the excitement has not been so bad this time, nor has she been so abusive. When mentally worse she refuses to have her hair done & insists on its hanging down her back —

- 24th Has been in bed for some days. She was so irritable that she was far better in bed. She resents the slightest touch. Rather better to day. Taking her food & sleeping pretty well.

1895.
January 8th She is in a very touchy condn. & requires very tactful management. She talks incoherently & has numerous delusions. —

April 10th She has been pleasant & free from abusive excitement almost since last note. She says that she has everything she wishes & will not leave the Refractory Ward. Her bodily condition is fairly good & she sleeps well.

September 28th She has been annoyed of late by another patient who in passing will touch her. This is quite sufficient to put her in the most furious and violent rage and so dangerous does she become that she has to be put in the dormitory by herself.

December 31st She preaches the gospel of cleanliness and tidiness but does not practice it. Her clothes are generally untidy and her hair hanging down. She is silly and foolish in manner and is still liable to great outbursts of temper in which she is very dangerous.

To p 581.

Wilhelmina Jane Wilson

cont. from p 566.

1895

April 2nd — The improvement noted a month ago has continued and she is now quite well. She realizes her past mental illness and is grateful for everything that has been done for her. Her physical condition is good.

May 17th — She has continued perfectly well and went home to-day.

Discharged Recovered

on

May 17th 1895.

Mr Beith

From p. 536

1895

June 28th She is still depressed and miserable and has many delusions about herself. Her general health is poor. Her husband has decided to give her a trial at home so she left to-day.

July 23rd Her husband reports that she is doing fairly well at home and better than was expected. Her name is accordingly taken off the Books to-day.

Discharged Relieved

on

July 23rd 1895.

Re-admitted Nov. 20th 1897

vide Vol IX p 150.

Margaret Hardie

From Vol III p. 572

1895

December 31st She is completely demented and won't speak. Her habits are bad as she sometimes wets herself. Her health is fair but sometimes she requires to be fed. Occasionally she works in the Laundry.

1896

December 31st There has been practically no change in her condition during the past year. She requires a good deal of care and attention on account of her deep dementia.

1897

Dec. 31st Her extremities often look blue and she suffers somewhat from cold. She is still in the same condition of deep dementia and there is no change.

1898

Dec. 29th Her Health has been very poor during the past year and she has suffered from a impetiginous eruption on the back of her neck. There is no mental change.

1899.

Dec. 27th Her circulation is feeble and she often has eruptions on her face. Mentally she is deeply demented.

1900

Dec. 31st She occasionally rubs her face or chest so hard with a towel that a raw surface is left. There is no mental change.

To Dor VIII p 321.

Rachel Jane Canning
From Vol III p. 394.

1895

December 31st There has been no change in her condition since last note. Occasionally she gets excited but soon quiets down. Her health keeps fair.

1896

December 31st During the past year she has worked steadily in the Laundry and is in good health. She has a pleasant expression and her one cry is 'When am I to get out to Linlithgow'. This she reiterates many times during the day.

1897

Dec. 31st She is subject to slight periods of excitement but this does not prevent her from doing her usual work in the Laundry.

1898

Dec. 31st In manner she is quiet as a rule and pleasant except on different occasions when she becomes excited. Her health has kept good and she works as usual.

1899

Dec. 27th She does not ask quite so often to go to Linlithgow. A delusion of recent origin is that she will not acknowledge her mother as the latter is not grand enough for her. Otherwise there is no change.

To Vol VIII p 166.

573

# Lizzie Frost.

From Vol VII p. 310

1895.

September 28th Her health is good and there is no mental change.

1896

March 31st She is deeply demented and during the past six months has shown no change.

September 30th Unchanged. B H & C. good.

1897

March 31st Of late she has been amusing herself with drawing pictures of animals and birds. They are very primitive in design and look like the work of a little child.

Sept. 30th Unchanged. B H & C. good.

1898

Sept. 30th There has been no change in her condition during the past year. She talks incoherently but as a rule is pleasant. Her health continues good.

1899

Sept. 28th Her health still keeps good. Occasionally she gets into a bad temper when she becomes noisy and excited and storms and rages. What she says is quite incoherent.

1900

Sept. 29th There has been no change in her condition during the past year. Her sister visits her often & this pleases her. She is talkative and incoherent.

To Vol VIII p 261

Elizabeth Johnstone.
From Volume 7th p. 284

1895

September 28th She still has periods of excitement which last a few days and in which she stamps and scolds. Her health is good.

1896

March 31st The outbursts of excitement still continue at irregular intervals and from no apparent cause. B H & C. good.

September 30th Her health continues good and as usual she is periodically noisy and excited.

1897

March 31st The excitement continues at intervals and there has been nothing throughout the winter to call for special notice.

Sept. 30th She has been fairly quiet of late but she is still liable to outbursts of excitement.

1898

Sept. 30th She chatters incessantly at times and suffers much from hallucinations. She is quite incapable of rational conversation.

1899

Sept. 28th During the past year she has kept in good health and has had her usual outbursts of excitement when she storms and rages at ~~~~ imaginary persons.

To Vol VIII p 135.

Margaret Anderson a Miller

from Vol. IV. page 162.

1896.
Jany. 6. Do not much different from last note but is rather less cheerful and more aggrieveting to those around her. Her bodily health is good.

Dec. 24 There is nothing new to note here. She is in fair health and has taken to writing great numbers of letters again lately to all sorts of prominent Wexford men. Once or twice she has sung in the last few months and she still sings well and with taste.

1897. She is still writing many letters, which
Nov 11 are sent to her agents in the city. From them she is still thinking that she should not have been brought here from the Central Station by the attendants. She will not promise to go a Convent because she must go home at once. Very Vain, & does very little work.

1898
May 17. There is no change here to note. B.H.L good
Oct. 13 Still writing voluminous letters to prominent Officials, chiefly of the police force. Unchanged mentally or bodily.

1899.
Oct 1. There is no change to note in this case: Is constantly writing to the Police force.

1900.
Oct 15. The same in all respects: Idle, foolish, quite unable to sustain a Conversation.

1901.
Feb 7 Mrs Miller does not show any change since

Margaret Anderson or Miller.

1901.

passes without her
tities. Her letters are
x irrelevant.
ng might be; She spits
uchly in her dress.
her answer is "Th: bit
i'we no right to speak
ed by her lawyers
olly of abuse indeed

Mrs Millers Letters

1902

29 Jan?. There is nothing new to note about Mrs Miller. B H & C Good, but she suffers very much from chilblains during the cold weather.

29 July Mrs Miller is down in the Lasch It was noted. She does not help much in the house work and her habits are at times objectionable e.g. spitting about her room. Mentally there is no change. "I ought not to be here & her one cry". B H & C Good.

24 Nov. The same in all respects. B H & C fair. She was at Pitlochry for a change & got as much the better of it from a bodily point of view.

1903.

14 May Demented, incoherent childish & affected in manner. Writes lengthy letters to her agents & to the Police authorities. Bodily health Good. not very cleanly in her habits.

1904

14 May. The same in all respects. She is in No 4 permanently.

20 Vol VI p 568

Margaret Anderson or Miller

from Vol. IV. page 168

1896.

Jany. 6. Do not much different pro
less cheerful and more ag
Her bodily health is good

Dec. 24 There is nothing new
in fair health and has
numbers of letters a qui
prominent Glasgow men
has sung in the last few
still sings well and writ

1897. She is still writing
Nov 11 are sent to her agen
then she is still th
should not have been
from the Central Station by the attendants.
She will not promise to go a Convent
because she must go home at once.
Very Vain, & does very little work

1898

May 17. There is no change here to note. B.H.L good

Oct. 13 Still writing voluminous letters to
prominent officials, chiefly of the police
force. Unchanged mentally or bodily.

1899.

Oct 1. There is no change to note in this case:
Is constantly writing to the Police force.

1900.

Oct 15. The same in all respects: Idle, foolish,
quite unable to sustain a conversation.

1901.

Feb^y Mrs Miller does not show any change since

Margaret Anderson or Miller.

1901.

last entry. Seldom a day passes without her writing to the police authorities. Her letters are usually most incoherent & irrelevant.
Her habits are not what they might be; she spits about her room & is very untidy in her dress. When remonstrated with her answer is "Oh - but I should not be here" & "you've no right to speak to me." Lately when visited by her lawyers she greeted them with a volley of abuse ordered them out of the house.

1902

27 Jan?. There is nothing new to note about Mrs Miller. B H & C Good, but she suffers very much from chilblains during the cold weather.

29 July Mrs Miller is down in the Laundry most days. She does not help much in the house work and her habits are at times objectionable e.g. spitting about her room. Mentally there is no change. "I ought not to be here - her are cry". B H & C Good.

24 Nov. The same in all respects. B H & C fair. She was at Ilkley for a change & got so much the better of it from a bodily point of view.

1903.

14 May Demented, incoherent childish & affected in manner. Writes lengthy letters to her agents & to the police authorities. Bodily health good. not very cleanly in her habits.

1904

14 May. The same in all respects. She is in No 4 permanently.

26 Vol VI p 568

Christina McLaren

from Vol. IV. page 597.

1895.
Nov. 30 Lost weight & did not improve in any way, while taking the nitrate of Uranium. The amount of sugar is still very large but varies greatly. She has been kept in bed for a good time now.

1896. Is up and about her usual. having recovered
Jany. 7. her lost ground. Her hands trouble her very greatly from dryness and hacking and there is the very greatest difficulty in keeping her out of water from her mania for cleanliness. Mentally she is demented & She has a most confused method of speech. She is a courteous & obliging & cheerful patient but will overstrain her strength if not carefully watched.

Dec. 24. Requires much restraining to prevent her from constantly washing & moving about but she really tries to keep her word when she gives it. She is very feeble now and when allowed up for a day her ankles swell. She sits up in the afternoons only now. Her urine still contains much sugar. and to look at her there is little alteration to be seen. Her skin is keeping rather less dry and cracked than it was under the use of constant emollients. The quantity of sugar in the urine is still very large. and her appetite continues great.

1897.
January. 26. Has suddenly become worse and is taking very little nourishment looking pale and slightly cyanosed with rapid pulse and feeble, and tendency to an evening rise of Temperature tonight & last night it was 101·2. She has large amounts of sugar

Christina McLaren

in the urine today and there is no albumen. The Febling is easily reduced ¾ one quarter is quantity of the urine. Sp. Gr. 1036. reaction acid.

January. 27th 1897

at 3.30 am this morning, after slowly sinking thro the night, Miss McLaren died.

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Died. Cause. Diabetes.

Jane Hastings or Brown.
from Vol. IV. page 523.

195
Nov. 19 — No change to note. Is residing in the Laigh House and keeping very well. She wants the power of deciding but when assisted in her decisions can be trusted to form rational ones. Enjoys good health.

1896
March. 1 — Has been very irritable and troublesome abusing her parole and showing great want of self control and judgement. and ~~did~~ accordingly has been removed to Gallery. VI.

Sept. 11 — Six months trial granted her & sanction of the Board of Lunacy to expire on March 11. 1897.

March. 11
1897. — This lady having been reported by her trustees as well, and the annexed copy of medical certificate having been forwarded has been

Discharged.
Recovered.

Copy Certificate referred to.

11 Victoria Crescent,
Dowanhill,
8th March 1897.

I hereby certify that I have this day seen and examined Mrs Jane Hanning Hastings or Brown, residing at 10 Hillside Gardens, Partickhill, and that, as a result of my examination, I am of opinion that she is sound in mind and in good bodily health.

(Signed) Wm. Snodgrass, M.B.C.M.

John Fleming Esq.,
241 St Vincent Street.

581 Euphemia Black

cont. from p 568

1896

March 31st She is foolish and obstinate in manner and conduct and there is no sign of mental improvement.

September 30th She has generally some foolish plans to propose and the latest is that she should become a prison warder.

1897

March 31st Her panacea for all the ills of the world and especially for insanity is cleanliness and this practice she endeavours to put in force to an insane extent.

Sept. 30th Unchanged. B.H. & C. fair.

1898

March 29th In appearance she is untidy and neglected looking. She is full of absurd and strained ideas and her letters to her brother are very incoherent and foolish.

Sept. 30th Occasionally she gets into insane rages when she is violent and dangerous. Her bodily health is fair.

1899

March 31st She has got worse of late; is more violent in conduct and more degraded in appearance. Her bodily health is also not so good.

Sept. 28th She is very excitable and abusive. There is no sign of improvement.

Euphemia Black

1900

March 31st She dislikes being called 'miss Black' but says she is married and her name is 'Eve'. Her manner is strange and her appearance rather degraded.

Sept. 29th Unchanged. B H & C. poor.

1901

March 30th She takes no interest in anything; often sits with her eyes shut; is irritable and dangerous if touched and presents a slovenly and degraded appearance.

Sept. 30th Unchanged. B H & C. poor.

1902

March 26th As a rule she sits doing nothing and often assumes queer attitudes. Her answers to questions are always frolick and unmeaning and she often laughs immoderately. She is lazy and untidy and will make no effort to better herself. She is perhaps not quite so irritable as formerly and has got a little steadier.

Sept. 30th Unchanged. B H & C. poor.

1903

March 31st There has been no real change in her condition during the past six months. She is always in No. 3 and she contributes her share to the noise and uproar which takes place in that ward. She is best left alone. Her bodily health continues fair.

To Vol VIII p 252.

Elizabeth Snowdon Preston

cont. from 5.5.8.

1896

March 31st Of late she has been freer in expressing her delusions as they have assumed more influence over her. She still complains bitterly of the dining hall and the filthiness and immoral communications which go on there. She also says that at night she hears the screaming and laughing of women in the rooms below hers. Her letters express the same ideas even more forcibly.

June 30th She is constantly affirming that she hears the voice of a nurse that left a long time ago and complains that this woman should be kept here. Her health is fair.

September 30th Her hallucinations of hearing are still present and seem to be more marked at night. She works regularly in the kitchen.

December 31st Unchanged. B H & C. fair.

1897

June 30th She seems to be getting more delusional and her delusions have nearly always a sexual element in them. She sometimes assaults some of the working male patients.

Dec. 31st Her delusions & hallucinations are increasing instead of diminishing.

Elizabeth Snowdon Preston

1898

June 28th She looks pale and sallow - very anaemic but refuses to take Bland's capsules. Occasionally she keeps her bed especially at the menstrual periods. She is still full of delusions, chiefly of a sexual character.

Dec. 29th Unchanged. B H & C. poor.

1899

June 27th Her bodily health is better. She is not so talkative about her supposed wrongs and insults but her conduct is silly and foolish.

Dec. 27th Unchanged. B H & C. poor.

1900

June 29th Sometimes she is civil and pleasant, especially if she has any request to make, but generally is silent and repellant or else abusive when she expresses many delusions of suspicion.

Dec. 31st Unchanged. B H & C. poor.

1901

June 28th She has been more civil of late and works well and her health has improved. At times her manner and appearance are rather silly.

Dec. 28th Her chief delusion at present is that her mother and sister are patients in the Work House and she wishes them released. Otherwise she is the same.

To Vol VIII p 441.

585

Jemima Donald

cont. from ✱ Vol IV f° 582.

1896
March 2nd she is at present in an excited state and is often very noisy. Her manner is erotic. Her bodily health and condition is fairly good. As she belongs to Govan Parish she was to-day removed to Hawkhead Asylum, Paisley.

Discharged Relieved

on

March 2nd 1896.

Margaret Nicol or Cameron

~~district~~ cont. from p 411

1896

June 3rd The febrile symptoms, sweating and physical signs found in the lungs all point to phthisis. Mentally she is quite bright and every day says she is better. She was to-day removed home by her mother.

Discharged Relieved

on

June 3rd 1896.

Mary Minnie a Davidson

contd from Vol. III. page 4.

| | |
|---|---|
| 1896 | Demented but though thin in fair health |
| Oct. 27 | She tends to be resistive and is at times dirty in her habits. |
| Dec. 23. | A demented patient who is resistive and at times dirty. Her most troublesome and annoying tendency is the repetition of a phrase in an alternately loud and low |
| 1897. | voice sometimes all day incessantly. |
| Nov. 12. | Seems to be little or no change to note in this case. She still continues her habit of repetition. B.M.H.C. good. |
| 1898 | |
| May 17. | No change in this demented patient, still occasionally dirty in her habits, and verbigeration continues. B.M.H.C good. |
| Oct. 13. | As demented and noisy as formerly Her bodily health is good. |
| 1899. | |
| Oct. | Has had two fainting fits lately. Her heart is rather feeble and she requires watching when a laxative is administered. |
| 1900. | |
| May. | Mrs Davidson has a foul, bloody discharge from her vagina pointing to a cancerous condition of the Cervix Uteri: a p.v. exam confirmed this diagnosis. |
| June. | Her bodily health is failing and she is now always in bed & is douched daily with creolin. |
| August. | She is slowly getting weaker. |
| Oct 15th. | The end cannot be far off now. |

Died

17th October 1900

Agnes Tulloch
from Vol III. page 280.

1896 Oct. 27 — Has just passed thro a period of great excitement from which she has not yet fully emerged. Has language on more than one occasion has been both powerful and obscene. She is not sleeping very well at night and has been getting a sleeping draught. Bodily health is fair and she is still subject to headaches.

Dec. 23. — Is very well mentally just now the result of a prolonged confinement to bed. Her bodily health continues fair.

1897
Nov. 12. — Has continued fairly well since last note.

1898
May 17. — She has been fairly well all winter, but for a short outbreak, which passed with a few days in bed. Just now she is probably at her best.

Oct. 13. — With the exception of an occasional bilious attack she has remained fairly well since last note.

Dec 23rd — Is in bed with bilious attack. Has occasional fits (petit mal)

1899. — Every now & then has attacks of petit mal

Dec 20th. — and remains in bed for a few days.

1900.

Oct 15 — Mrs Tulloch has given trouble lately. Nothing will satisfy her & She is full of complaints. She has not been sleeping well & requires a draught (Paraldehyde)

Nov — Mrs Tulloch had a severe fit today & bit her tongue. She was unconscious for ½ hr. Her bedroom door is to remain unlocked.

Vol VI p 534.

Sophia Margaret Wallace
from Vol. III. page 312.

Oct. 27 1896. There is no change to note here. Patient is demented with periods of excitement and irritability She is stout and rosy and in excellent health.

Dec. 23. 1897. There is nothing fresh to note here.

Nov. 12. Remains evidently in much the same condition - happy & pleased with herself, as a rule quiet, but at times can make herself very troublesome indeed

1897.

May 17. Has been fairly well all winter, but for occasional short-lived outbreaks of temper when she makes herself heard with some vigour.

Oct. 13. She is demented with only occasional outbreaks, but nothing very serious recently. She is very stout but in good health.

1898.

Dec 7. a stout, fairly healthy demented woman.

1899.

Dec The same in all respects. Has outbursts of scolding.

1900.

Oct 15th No change to note in this fat demented.

1901.

Feb 7. The same in all respects. Fat demented. She has outbursts of raging & scolding when the promise of a glass of sherry will often act like a charm.

1902. 27 Jan The same in all respects. B & C fair

to Vol VI p 550.

Mary Ann Moir

from Vol III . page 414

1896 Oct. 27 — Restless and excitable she is often noisy and troublesome rushing up and down her ward at times and acting in a very impulsive manner. Her bodily condition is only fair and she is a very small eater.

Dec. 23 — Is getting malt + Cod oil + likes it. Her bodily condition is rather better. Mentally she is unchanged.

1897.

Nov. 12. — Is at present excited, speaks + acts in a most impulsive manner. At present is sleepless + noisy at night + requires a draught of Chloral + Bromide.

1898

May 17. — Since last note she has been excited + noisy frequently; these being usually followed by periods of comparative quiet. B.H.C. fair.

Oct. 13. — a weakminded noisy patient in good bodily health.

1898

Dec — Demented. B.H.& C. fair.

1899

Dec. — No change.

1900.

Oct 15 — The same in all respects.

1901.

Oct — Just the same. Quite demented. Noisy at times.

1902

27 Jan[y] — Just the same. Demented. B.H.& C. fair.

24 Nov[r] — No change to note in this dement. She has a black eye which is self inflicted.

VII p 55[7]

Euphemia Watson More

cont: from p 562.

1896

June 30th She had lately a slight exacerbation of her lung trouble and was kept in bed for a few weeks. She is now better though still in the Infirmary.

September 30th There is no improvement. She still retains her old habit of putting her head under the cold water tap which is not good for her lung desease. It however is quiescent at present.

1897

March 31st Her paranoiac habit just now is tending forward so that her forehead touches the ground. She says she can't help doing it. She did it one day lately when another patient was passing and who kicked her on the eye, producing a severe bruise. It has not cured the habit.

Sept. 30th Her father who is a schoolmaster thinks that lunacy might be benefitted or cured by the substitution of milk instead of tea as a beverage. This has been tried with her but there is no change. Her father has taken her out on one or two occasions but she did not behave at all well e.g. in the tramcar she would smile and gape at strangers especially at men.

Euphemia Watson More

1898

March 29th She has kept pretty well throughout the winter but her manner & conduct are the same. She refuses to write to her relations.

Sept. 30th Her bodily health keeps good but mentally she is treacherous and shows some loss of self respect.

1899

March 31st She looks healthy and strong but she shows loss of affection for her near relations and in manner is silly and foolish.

Sept. 28th She still keeps in excellent health but there is no sign of mental improvement.

1900

March 31st She is very untruthful and shows much moral deterioration. She is demented.

Sept. 29th Her father died lately but it did not affect her in the least. Her mental condition is very unsatisfactory.

1901

June 28th She is getting more lazy and demented and takes no interest in anything. If interfered with she readily strikes. Her bodily health and condition are fairly good.

Dec. 28th There is no change to report. Her bodily health and condition keep fairly good.

To Vol VIII p 435.

Jane Russell Miller or Haigh
cont. from p 567.

1896

June 30th Her general health is pretty good but her delusions about herself continue as before. She is now down in ct/ and has a room to herself.

September 30th She is much afflicted with rheumatism but this she considers a minor evil compared to her supposed brain disease.

December 31st At present she is agitating to leave the Asylum and be boarded out in some Cottage where she can have peace and quietness. Her delusions about her brain disease are as prominent as ever.

1897

March 31st She thinks that her brain disease has made terrible ravages of late and that she is the greatest living miracle. She is entirely self-centred both in thought and action.

April 16th Her mental condition remains unchanged. She is to be boarded out as left to-day.

Discharged Relieved
on
April 16th 1897.

Mary Jane Peskett

from page 412.

1898. Husband's address 8 Oxford Street, Southampton. Frederick Peskett Esq

May 17. There is no change to note in this patients condition either mental or physical.

1898

Oct. 13. Recently she has been out several times with her husband, but last time she gave so much trouble when she was out that such liberty must be stopped for some time. She is weak minded and gives a good deal of trouble in the gallery, rather by her manner, than anything active. B.H.C only fair.

1899.

March 16th. No change B.H.C Cudrhin fair.

Oct 1. Is rather high at present: Is very desirous of attention from the male sex & is fanciful, if neglected at the weekly dance.

1900.

Oct 15. Much the same: always tending towards the Emotional & excited side. Is on parole.

1901.

Feb^y Mrs P has been, for her, really pretty well since last note. She is on parole. Her mental state is a rule one of mild exaltation. The most common place remark & the feeblest display of wit on the part of a fellow patient will make her cackle with laughter & highly amuse her. She is short & her B.H.C are good.

1902.

27th Jan^y Mrs P is rather "high" at present but is able to be out on parole in the grounds.

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# Christina McGregor or McOmish

cont. from 5.52

1896

September 30th Her right leg has regained some power and she can walk a little with assistance, but her right arm is still paralysed. Her general health is fairly good but mentally she is weakminded, touchy and morbidly suspicious of her relations.

December 31st Her general health has improved and she can walk better and sometimes gets to the convents. Her right arm is still paralysed completely.

1897

March 31st She kept much about the same till this evening when she had several apoplectic fits. She is unconscious and her breathing is stertorous.

April 5th She has recovered partially from her recent attack but her speech is affected. Yesterday erysipelas broke out on her face and it is spreading.

" 13th The erysipelas has almost disappeared but she is in a very low state. She will hardly speak at all but lies dozing most of the day. She is more silly than formerly and childish in her behaviour.

" 23rd She is gradually getting weaker and takes no interest in anything. Her face is always very flushed and she often breathes heavily.

Christina Mc Gregor or Mc Aninch

1897

April 30th Her condition is steadily becoming worse and she is very ill. There are no new signs.

May 1st For the past few days she has been in a hopeless condition. Her temperature has risen and there is evidence of oedema of the lungs. She died early this morning.

Death on May 1st 1897.

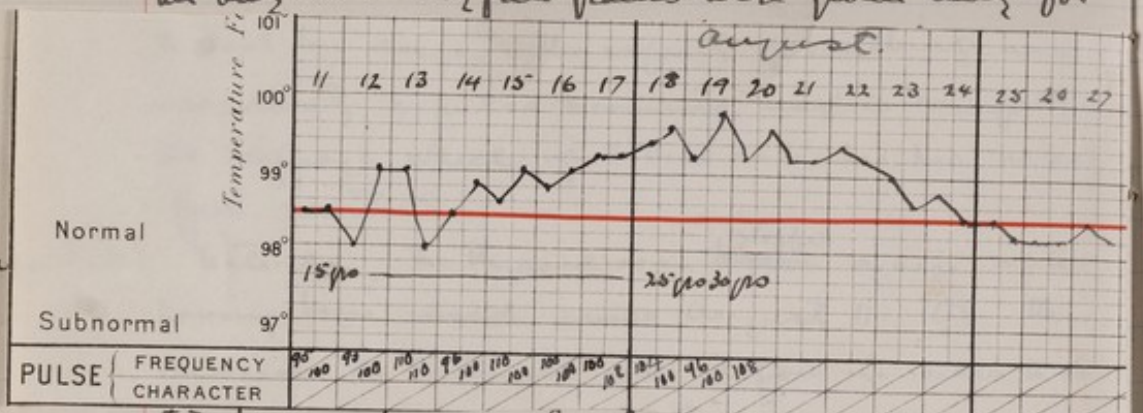
Post. Mortem

The head alone was examined and there was found in the R region of the left corpus striatum softening to the extent of a small walnut, due to haemorrhage. The ventricles were not involved. There was some thickening of the membranes of the brain and the arteries were distinctly atheromatous.

Charles Standish Struthers.

from page 502

July. 6. Thyroid began again on June. 19 and continued till July 5th. Tabloids were given daily for




Au

it & pony drives about the premises.

There is really no change to note here. Miss

Sept. 26. Sturgis continues to lie a helpless log. She is absorbed in her own inner life though she appears to be quite aware of all that is going on around her or is said in her hearing. She opens her eyes and makes her position more comfortable when she thinks she is not seen but she will risk a severe fall rather than make any larger movement

Dec. 23. There is really no change here. She continues to enjoy excellent nutrition. She eats herself and is as helpless as a child. But knows well all that is going on around her. A threatening blow or piece of paper thrown into make her wince if she does not know it's coming but neither from any person standing beside her will have not the slightest effect. She still continues to retain any pose given her as long as she knows she is seen if fatigue will permit her. but drops the hands at once if left alone.

1897

Nov. 11. She is apparently in much the same condition. Eating & sleeping seem to be her sole occupation. At present she is having no special treatment.

1898

May 17. She has recently shown a little more activity, if it may be called so: viz: sitting up in bed & saying 'Jesus', after she has been roused by being shaken. This may be merely a new habit as she only sits up after the visit & only very occasionally done so to order. Her B&H.C is good. About six weeks ago. (1.4.98) she began a course of treatment with Cerebrimin Tabloids (Armours) one three times daily & gradually increased. So far there is no evident result, as the above notes on her condition were noticed before the treatment was begun.

Oct. 13. She remains much the same as on date of above note, although the attendants think that she is easier to manage. Two months ago the Cerebrimin treatment was changed to Spleen Extract, but without noticeable benefit so far.

Jan 7th No change to note in this case.

Feb 20th Is suffering from a slight attack of influenza: temp 101·7; pulse 90.

VR XI p 500

Charlotte Stroebe.

from page 502

July. 6. Thyroid began again on June. 19 and continued till July 5th. Tab five grains were given daily for the last ten days. The rapidity of breathing and irregularity & pulse becoming marked compelled the stoppage which up to this date has had no real effect mentally.

August. 20 Yesterday the thyroid was ~~begun~~ stopped again after having been used since August 11. On this occasion the treatment was stopped in order to vary it & pony drives about the grounds.

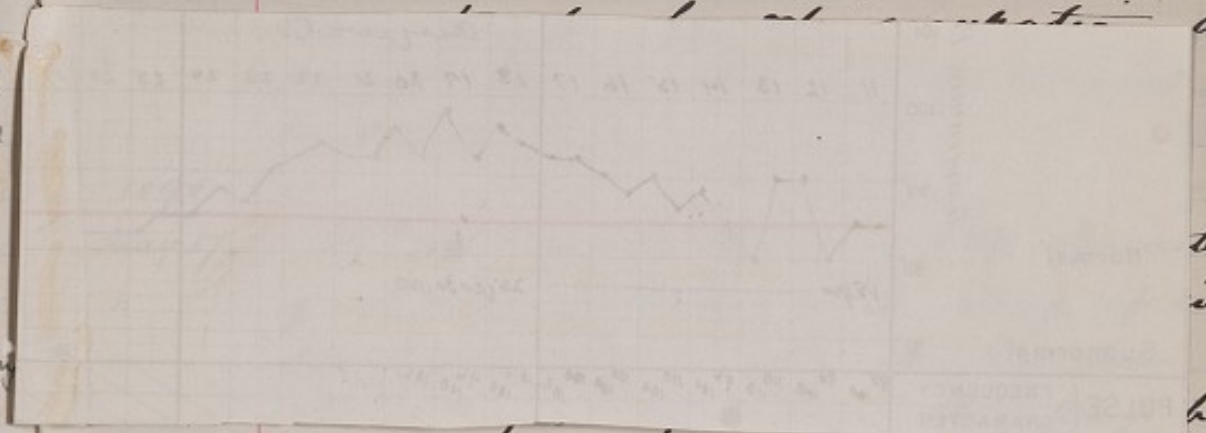
There is really no change to note here. Miss
Sept. 26. Sturge continues to lie a helpless log. She is absorbed in her own inner life though she appears to be quite aware & all that is going on around her or is said in her hearing. She opens her eyes and makes her position more comfortable when she thinks she is not seen but she will risk a severe fall rather than make any larger movement

Dec. 23. There is really no change here. She continues to enjoy excellent nutrition. She wets herself and is as helpless as a child. But knows well all that is going on around her. A threatening blow or piece & paper thrown into make her wince if she does not know & its coming but either from any person standing beside her will have not the slightest effect. She still continues to retain any pose given her as long as she knows she is seen if fatigue will permit her. But drops the hands at once if left alone.

Hannah Sturge.

1897.

Nov. 11. She is apparently in much the same condition. Eating & sleeping [illegible] at



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Dec. 13. She remains much the same as on date of above note, although the attendants think that she is easier to manage. Two months ago the Cerebrimin treatment was changed to Splen Extract, but without noticeable benefit so far.

Jan 7th No change to note in this case.

Feb 20th Is suffering from a slight attack of influenza: temp 101·7; pulse 90.

VOL XI p 500

# Martha Young

cont. from p 5.5.3.

1897

March 31st She has complained of ill-health lately and of the work being too hard for her but it is not so in reality. She chatters as much as usual.

Sept. 30th Unchanged. B H & C. fairly good.

1898

March 29th She was lately in bed with acute bronchitis but is now practically well. She has an exaggerated idea of her own ill. health.

Sept. 30th Unchanged. B H & C. fairly good.

1899

March 31st She works well and is in fair health although she does not think so. She also talks as much as ever.

Sept. 28th Unchanged. B H & C. fairly good.

1900

March 31st She has been rather more excited of late and certainly more abusive. She has many delusions of suspicion and expresses them freely.

Sept. 29th Unchanged. B H & C. good.

1901

March 30th She has been much more talkative and noisy during the past few months and has been sent to No 3. She has got stouter and is in good health although she denies this and says that this place is injuring her.

Sept. 30th Unchanged. B H & C. good.

Martha Young

1902

March 27th A few months ago she was kept in bed for some weeks to allow a varicose ulcer to heal. The rest in bed pleased her greatly and she has got much stouter and more gross looking. Mentally she is still talkative and full of delusions.

? Pan thyroid

Began Lugol Stout.

Sept. 30th Unchanged. B H & C. good.

1903

March 31st She has got enormously stout but is still capable of working regularly in the vegetable room. Her delusions are many and are chiefly of suspicion e.g. she thinks the other patients do her injury and make insulting remarks about her; also that they make signs with their mouths and noses. She is in No 2 ward.

Sept. 28th Unchanged. B H. & C. good.

1904

March 28th On the whole she has become rather quieter and the cause perhaps is physical as she has become so stout that energy of any kind is to her difficult. She is rather untidy in appearance but she still does some work and also has the same delusions and makes the same complaints about her neighbours.

Sept. 27th Unchanged. B H & C. excellent.

To Vol VIII p 478.

# Annie Lindsay

cont. from p 464

| | |
|---|---|
| 1897 | |
| March 31st | She was home lately for a few days and only did fairly well. She seems to have kept her self-control only when there were too many to combat but on other occasions she gave her tongue free vent. There is nothing new in her mental condition to record. |
| Sept. 30th | As a rule she is quiet and industrious, working in the Laundry but occasionally she is bitter with her tongue. Her bodily health is good. |
| 1898 | |
| March 29th | She is very bitter against her husband and her letters to him are few and by no means affectionate. She gives little trouble here and then only when in an abusive mood. |
| Sept. 30th | Unchanged. B H & C. good. |
| 1899 | |
| March 31st | As a rule she works in silence but is still inclined to be abusive and to take the worst view of people and things in general. There is no change. |
| Sept. 28th | Unchanged. B H & C. good. |
| 1900 | |
| March 31st | Her frame of mind is one of morbid suspicion and she lacks self-control to a considerable extent. |
| Sept. 29th | Unchanged. B H & C. good. |

Annie Lindsay

1901

March 30th She still works in the Laundry and at times can be pleasant. She is often however irritable and abusive and is quite unfit to be at large.

Sept. 30th Unchanged. B H & C. good.

1902

March 27th A few weeks ago she had a visit from some of her relations and this upset her considerably. She is often very indignant at being kept here and thinks that she should be allowed home and that some of her relatives should be sent here instead to have a turn of this place and thus see whether it would improve their tempers which she says are quite as bad as hers. Her bodily health and condition are good.

Sept. 30th Unchanged. B H & C. good.

1903

March 31st There has been practically no change in her condition during the past six months. She has kept in good bodily health and she is very seldom idle. As a rule she is rather silent and somewhat sullen but sometimes she is in a very bad temper when she becomes abusive and would quarrel with her own shadow. She does not think she will be derive any more benefit from being here.

To Vol VIII p 246.