New case book series: males, vol 3

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1887-1890

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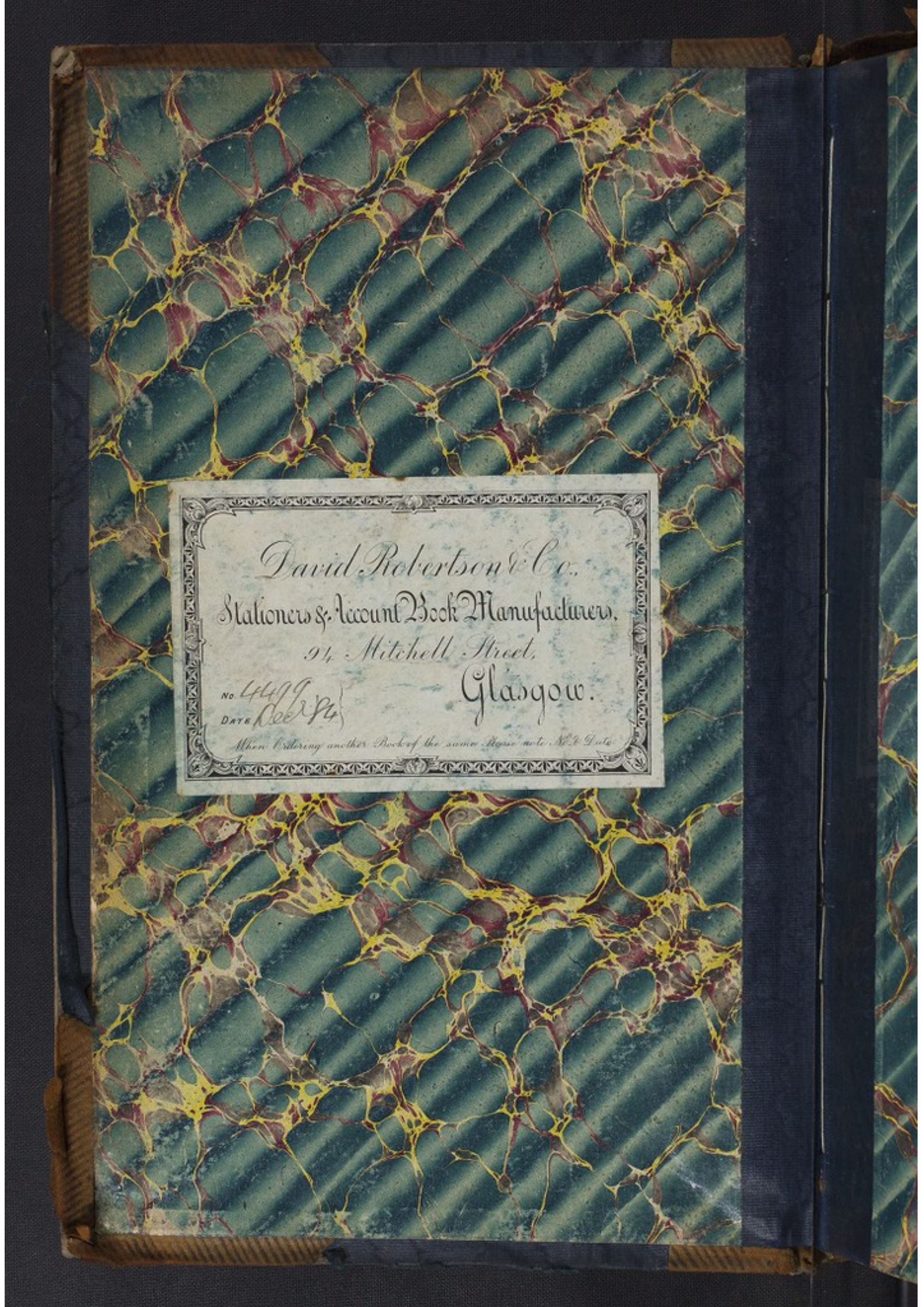
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No M.E. cases in this Vol.

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James Thomas. Spence
admitted. 3rd January 1885.
forward from Vol II p. 3rd

27th Sept 87. Has frequent periods of excitement, at other times he is quiet and pleasant. His general health is favourable

1888
14th March. Patient has frequently of late had epileptic seizures some of which have been of a severe character. He is at times very insolent in manner, using very abusive language.
During last night he had a troublesome cough, & to day he does not seem well. On examining the lungs the only abnormal fact made out is the presence of some consolidation at right base posteriorly, in which area some wheezing is heard, but no tubularity of R.L.
Stimulant & expectorant ordered.

15th March. No improvement. Breathing more laboured. Numerous râles in lungs (both back & front).

16th March. During last night patient became much worse, at times the lividity of face & hands was intense & then would pass off. Respiratory disturbance became great. Lungs filled with moist rales. No distinct evidence of consolidation. Patient gradually sank & died to-day at 4.30 p.m.

Died - 16th March 1888.
Aet. 60.

27.9.87.

1888.
14th March

1889.
4th March.

1889.
8th October.

1890
October 4.

1889.
July 18th

John Anderson æt. 25
admitted. 18th February 1885.
forwards from Vol 17 p. 45.

27.9.87. Mostly quiet and orderly, & out at work regularly and seems to indulge in foolish antics when unobserved.

1888.

30th March. Patient is demented. Works in the grounds with other patients. He is active & usually quiet in his manner. When indoors, he will frequently walk up & down the gallery at a quick pace, & beating his left breast all the time: as a result of this, his coat, in that place, is worn & glazed. He is in good bodily health.

1889.

4th March. No change in mental condition. Still carries on the same antics both out & indoors. He is weak minded & childish. He is in good general health. Works in the grounds.

1889.

21st October. A demented patient working in the grounds. Enjoys good health and there is no change to report in his mental condition.

1890

October 4. Unchanged In good bodily health —.

1889.

July 12th. Discharged
Relieved

Peter McIlhenny aet 32.
admitted. 28th Feb. 1885
forward from vol II p 51.

27. 9. 87. Labouring under chronic mania. has delusions. that he is annoyed at night by people playing bagpipes. His General health. fair.

1888.

4th Feb. There seems to be some degree of dementia in this case. He is very industrious & cleanly in habits. & a capital worker in the wards. Always complains of being annoyed at nights, when asked how he sleeps, although he is reported to sleep well.

10th July. No change to report in this Patients Condition. During the winter he greatly enjoyed the Concerts & dances, & he enters with as much spirit, this summer, into out-door games, such as cricket.

4th Dec. Patient is discharged to-day by authority of Board of Lunacy, & removed to Ireland. His mental condition has remained practically unchanged for the past year, hallucinations as before. He is well-behaved, tidy & obliging in his manner. Bodily health & condition are good.

Relieved.

27. 9. 87.

1888
30th March.

1889
4th March.

1889
1st October

1st Dec.

1890
April 16th

Philip McLachlan aet. 20.
admitted. 2nd March. 1885.
forwards from Vol 17 p. 53.

27. 9. 87. Patient demented and his health poor.

1888

30th March. Deeply demented. will hardly speak to any one. Bodily health poor. Usually assists a little in the wards.

1889.

4th March. No change in mental condition. Is sulky & rarely converses with any one. Bodily health indifferent. Condition poor. Takes food fairly well. Still does a little work in the wards

1889.

1st October Moves about one side of the airing court and speaks none. Is in indifferent bodily health and is very listless & depressed. Mentally unchanged.

1st Dec. Obviously falling into Phthisis. Setting Hunnis in spite of all remedies, with a high evening temperature and with numerous rhonchi

1890

April 14th Died 4. days P.M.
Ulcerous Phthisis

Richard Docherty aet: 50.
admitted. 26th March 1885.
forward from Vol IV p. 61.

29-9-87. a Melancholic. with numerous. delusions of hearing.. Patient is much- The Same. Bodily. health. fair-

1886.
30th March. Is now apparently suffering from mild dementia. Is usually very quiet in his demeanour. Does not often give expression to delusions but they still exist. Bodily condition good.

1889
4th March. Mental condition much the same as at last note. Is quiet & well behaved. Works regularly in the grounds & wards. Is in good bodily health and condition.

1889
30th August. Becoming more deeply demented. Otherwise no change to note.

1st October a good working patient in good bodily health & with nothing new to report in his mental condition.

1890.
October 4. Works regularly in the Garden but micturition is very troublesome & there is some suspicion of vesical calculus. His bodily health is very in-different & he is not very robust.

1891
3 March. Unchanged. For some time he has refused to work longer unless paid for his work. Delusions of being interfered with are very fixed and he is at times irritable.

August 26th Unchanged. B.H.T.C. indifferent.

I.P. Vol. IV p 529

29.9.87
1888.
30th March.
1889
4th March.
1st October
1890
4th Oct.
1891
3 March.
Aug. 26.
Dec. 26
April 12
Aug. 18

Thomas Scobie Jelfkins.

admitted. 13th March. 1885.

Forward from Vol. II p 57.

29. Oct. 87 Patient has Dementia.

1888.

30th March. Patient is considerably demented. He is weak & childish in his manner. Still holds to his old delusions about persecution & about being deprived of his property, although he does not often now refer to them. He is in good bodily health. Does not do any work.

1889.

4th March. No change in mental condition. Rather sulky in his demeanour. Does not do any work. Takes exercise in airing court & grounds with other patients. In good general condition.

12th October a silly demented patient who does little to assist the attendants but does not give much trouble. In good general health.

1890

4th Oct. In statu quo. Slightly irritable & weak minded but practically unchanged

1891

3 March. Just the same weak minded irritable old man. He is in good health & bodily condition.

Aug. 26. Unchanged. B. A. & C. good

Dec. 26th Rather insistent & irritable - Fond of gossiping & "grumbles & grabbers" - a tally of his environment here.

1892

April 12th Just the same.

Aug. 18th An irritable insistent man - best left alone. As nothing can be done for him.

J. Vol. IV. 578

Edward. Mc Gouckin Aet: 23.
admitted 2nd June. 1885.
forward from Vol II p. 93.

28. 9. 87. Patient fairly well meantime. but takes fits frequently which leave very him very excited. – General health very good: and. patient stout and. well nourished.

1888.
30th Jan: Has had 9 fits during past month & he is always very cross & irritable both before & after the seizures. He is fairly well at present & in good general health.

10th Nov: He had a number of fits in March, 2 in August, & 3 in October. Sometimes he becomes greatly excited & threatening. On one occasion he struck the head attendant a severe blow on the face. At present he is quiet & well behaved.

1889.
10th Feby: Has had some fits recently & he became so violent & dangerous both towards attendants & other patients that it became necessary to put him in seclusion from 24th Jan: to 4th Feb: (see Seclusion register). At present he is quiet & well behaved. & in good general health. At present is having 3ij Potass: Brom: night & morning.

June 4th Found dead in bed this morning. Death had evidently occured in the middle of a fit. P.M. revealed nothing but cerebral congestion.

28. 9. 87.
1888.
10th March.
1889
30th March.
1st October.
1890
4th October
1891
3 March
Aug. 27.
Dec. 26.
April 12th
1892
Aug. 1892

James. M Dunn aet 70.
admitted 5th June. 1885
forward from Vol 4 p. 97.

28. 9. 87. A case of Senile Dementia. Patient is - Troublesome - Health v Good

1888.

10th March. A troublesome old man. Follows one through the airing-court & attempts to get hold of your dress. He is, however, very frail. Much demented.

1889

30th March. Still tottering about the court on fine days. Troublesome & Rattling at times. In feeble health. A week ago hæmatoma auris (left) was observed & blistered.

2d October. I. S. 2 —

1890

4th October. Noisy & troublesome sometimes and distinctly vicious. B. H. & C. good considering his age.

1891

3 March. Patient is as noisy & troublesome as ever. Ready to strike with hands or kick with feet & even bite. In fairly good health.

Aug. 27. Unchanged. Bodily very frail, mentally unstable & troublesome.

Dec. 26. So frail now that he is seldom noisy - He sits in his chair all day - with his head bent & often fully asleep. If roused or talked to he is still shaky in his mind & wants to "cut the head off" from anyone near him.

April 12th 1892 Just the same.

Aug. 18th Maintains fairly what strength he has.

To. Vol. IV. p. 577.

John Sommerville aet 70.

admitted 8th June. 1885.

forwarded from vol 4 p 101.

28. 9. 87. Senile dementia, at times restless and stormy and abusive. Patient is in excellent health otherwise.

1888.

10th March. Often noisy & talkative. Uses very abusive language when he speaks of his brother, whom he calls a "minister a liar, & a thief." General health fair.

1889.

4th March. There has not been much change in this patient, either bodily or mentally, during the past year. He is still sometimes very talkative & abusive. Bodily health good.

1st October. an extremely talkative and abusive patient but a man with a lot of shrewd character. Dwells very much on the loss of the "seventeen hundred pound" and asks why he is here since he has neither debt nor enmity. In good bodily health. Talks very rationally when he is not off his delusions.

1890

October 4. Delusional & weak minded and anxious to know why a sane man is kept here while his "brither Jam" is at large.
B. H. & C. good

1891

3 March. Patient occasionally very abusive his language being more plain than polite. Otherwise well behaved & facile. He is in fairly good bodily health & condition.

Jop 386

William Hamilton Aet: 22
admitted. 29th July 1885.
forward from Vol. I p. 141.

27. 9. 87. An Imbecile, epileptic and also has had Infantile paralyses. He is noisy Troublesome and excitable. General health fair.

1888.

4th July. The following is the record of fits during the last 6 months:—

	day	night		day	night
Jan:	5	—	April	5.	1.
Feb:	7	—	May	1	—
March	4	—	June	—	—

He is irritable & troublesome after the fits, but he is becoming more demented. General health fair.

1889.

1st April. Number of fits in:—

	day.		day.		day.
July	2	Oct:	1	Jan.	4
Aug:	4	Nov.	3	Feb.	3
Sept:	3	Dec:	2	March	2.

He has had no fits during the night. He is still irritable & complaining after the seizures, but he is also more mindless. General health & condition fair.

30th Aug. Fits in number much as before. Complains a good deal after them and is somewhat aphasic B. H. fair.

1890

October 4 a rather troublesome epileptic, often making complaints against the attendants of the silliest nature. B. H. & C. indifferent.

to vol. IV p. 265.

James. Broad act. 28.
admitted 8 August. 1885.
forward from vol ii p 157.

28. 9. 87. Patient up and. down, he is often noisy at nights, and at times he. is. out at work but at others he is. unable to do so.—

1888.
30th March. Suffering from dementia. He is simple & childish usually, but sometimes exhibits cunning & steals things from Attendants or other patients. General health good.

1889
4th. March. No change in mental condition. Conducts himself in a foolish manner at times. ~~Often~~ occasionally sleepless & talkative at nights. General health & condition good.

1st October. a simple - silly demeant with occasional attempts at cunning. G.H. fair

2nd October. Discharged

Relieves

Removed to Lunatic Wards of Oct Monkland Poorhouse

James. Hughes. æt. 42.
admitted. 22nd August 1885.
forward from Vol II p. 159.

29. 9. 87. A restless. noisy weak minded. fellow. with a good. deal of Cunning. But his. health is Good. at Times he is Very noisy.

1888.
30th. March. Demented, but sometimes noisy & troublesome. He is in good bodily health.

1889
4th. March. Is becoming more demented. Often refuses to speak to any one for some days. At times he is irritable & noisy. Often walks about, talking aloud to himself. Does not do any work. General health good.

1st Oct. Deeply demented. Unchanged.

1890.

1st Janry. Foolish and silly with occasional intervals of irritability and interference with others. In indifferent bodily health.

7th July. Been in bed for some weeks, with cough. shut and high evening temperatures. Evidences of Pulmonary wasting.

23rd July Dies to-day.

P. M.

Pericarditis & Phthisis Pulmonalis

James. Miller aet. 30.
admitted. 25th August. 1885.
forward from Vol 4 p. 163.

28. 9. 87. Patient seems demented and very untidy in his dress., and. takes no interest in any work. But otherwise healthy and strong - Patient has a sister also in East House.

1888.

30th March. Patient is demented, but constantly restless & excited. Untidy in dress. Bodily health fair.

1889.

4th March. No change in mental condition. Always moving about - will hardly settle anywhere. Frequently throws his cap away & is generally untidy in dress. Does not do any work. Bodily health fair.

1st October. Stands in the airing court and handles his cap in a curious fashion passing it from one hand to the other and accompanying the movements by attitudinising. B. H. fairly good.

1890

October 4. Just the same. B. H. & C. good

1891

3 March. No Change to note in this case. He is in fair bodily health & condition.

Aug. 28 No change in patients condition. B. H. & C. fair

Dec. 26th. Unchanged - well marked dementia. B. H. & C. pretty good.

1892

April. 12th. No change to record.

Aug. 18th. The same quiet reticent man. Not to be unguardedly interfered with - but harmless if left alone

J. Vol. IV - f. 576.

27. 9. 87.

Seems 8

Seems 10

Thomas. Griffin Aet. 43.
admitted. 31st August 1888.
forward from Vol 4 p. 167.

27. 9. 88. Patient is a General Paralytic, with his general health rather poor.—
Has disease of the heart. The aortic valves being affected.— He is now in a state of Dementia. lately he has had an epileptic attack. which left a Temporary Paresis of the left side which has quite passed off now.

8 October 8 At times he suffers from pretty severe dyspnoea almost amounting to orthopnoea and there is some oedema of the feet and legs but the urine is non-albuminous.—
The signs raise the suspicion of aneurism of the arch of the Aorta, there is a double Aortic murmur with great hypertrophy of the heart and manifest heave and in the supra-sternal notch pulsation can be felt but no thrill and there is a large area of dulness to percussion running up from the base of the heart to the right but not beyond is heard in this area and no thrill: The pulses are both irregular but are not manifestly unequal to the finger.—

10 December 10 Two or three days ago he became suddenly worse very breathless and with a sudden increase in the oedema and the urine now became scanty and contained a considerable quantity of albumen and it was observed that the left side had become again deeply paralysed: He died at 9.15 p.m. today

Death.

15

James. Grant. Davidson. aet 22.
admitted. 21st August. 1885.
forward from Vol I p. 169.

27. 9 87. Uranny and Self-Centred and avoids observations. and has proved himself quite imporacticable.

Novemr 18th He was removed by his fathers authority today: he is practically unchanged.

Relieved

Re-admitted on 13th November 1894.

Thomas. Morris. Aet. 31.
admitted. 3rd Sept. 1885.
forward from Vol 4th p 173.

1888.
He is an Imbecile.
9th March. Suffering from deep dementia & childish & well pleased with his surroundings. He is very short sighted & deaf. Is a good worker & assists the attendants in the wards.

1889.
4th March. Mental condition the same. Still works away in the wards. Often makes some complaint about indigestion or some such ~~thing~~ thing & a little laxative medicine seems to suit him all right. Gneral health is fair.

1st October. Complains of a sore back occasionally. Unchanged. Works away in the Wards but does not now go to the grounds. B.H.C. fairly good.

1890
October 1st. In no 1. N.E. Works well and is in state quo.

1891
3 March. Patient is becoming very blind but still does a great deal of work in the galley. He also has the liberty of the grounds. He is in very indifferent bodily health every thing.

Aug. 28. His liberty of the grounds has been cancelled owing to his indecent behaviour to the females. B.H.C. fair.

Dec. 26th. In much the same state. Had a large boil on his right thigh. He is irritable & peevish. It is best left alone. His speech is very defective - his body & head badly developed.

To Vol. IV. Page. 5-57.

William Milne Harry aet 20.
admitted 3rd Sept. 1888.
forward from Vol 4th p. 175.

29. 9. 88...	Patient somewhat feeble, has delusions.
	Do. much in the same condition as formerly
	General health very good.
Octob 31	He was removed today on trial. It is
	thought that he might do for boarding
	out and he is sent to the country on trial.
Novemb 29	Discharged today

Relieved

29. 9. 88.

1888.
7th March.

1889.
4th March.

1st October 1890.

October 1891

3rd March.

Aug. 31st 1892

Dec. 26th 1892

April 12th

Aug 18th

Dec 27th 1893

June 27th

Michael Hughes. aet: 23.
admitted. 12th Sept. 1885.
forward from Vol II p. 183.

29. 9. 87. Patient demented and senile. Is getting worse. Health. Is to rather anaemic. and a little puffy under the eyes —

1888.
10th March. Stupid & demented. Apparently not in good health. He is one of the workers in the West House.

1889.
4th March. No change in mental condition. Although he always is pale & ill-looking, yet he has never been "off work". Still works in West House. General condition fair.

1st October. No change to report.

1890.
October 4th. Works in M.W. and is unchanged. B. A. & C. much the same.

1891
3 March. A thin, pale, demented man who is still working in West House.

Aug. 31st 1891. Is in mind the same state & a worker in the West House.

Dec. 26th. Still working in west house - quiet & industrious looks far from strong.

1892
April 12th. Unchanged.

Aug. 15th No change - Rather frail.

Dec. 27th Works as usual in West House. No change.

1893
June 27th No change mentally or bodily nor in his occupation which is that of one of the drudges in the West House.

To Vol. IV p 35-7

Robert Barr. aet. 43.

admitted 8th October 1888.

forward from vol II p. 197.

29.9.87 Patient foolish in his Conduct. and restless. He is Effusive & Smiling and has ridiculous Ideas — Health. fair.

1888.

28th March. There has been some suspicion of General Paralysis in this case, but at present there are no very evident signs of such. There is no stuttering of the speech & no tremulousness of the tongue. His walking is a little stiff, but not unsteady. He is noisy & foolish at times & does not converse in a rational way with any one. Bodily health fair.

1889.

4th March. He is in much the same condition as at last note. Is able to take exercise in the airing-court or grounds. Frequently stands in the airing-court, puts his fingers in his ears & shouts in some incoherent fashion. Is in good general health.

1889

August 30. Peculiar in his conduct sometimes. Sometimes impulsive. Is in good health but no improvement in his mental condition. attitudinises frequently in the airing court. Sleeping fairly well.

1890

October 4. Often very excited at the morning visit and at these times with some exophthalmos. Usually quiet but easily roused and dislikes being talked to. B. & T. C. good.

to vol. II p 266.

29.9.87. A
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1888.
8th Jan: He
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20th Feb: Son
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2nd April. Co
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26th May. wo
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20th July. Is
28th Sept: Tal
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27th Sept. mu
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John Pollock. aet. 38.
admitted. 8th January 1886:
forward from Vol II p. 249.

9. 9 87. A case of Chronic Mania. at present he is somewhat better. Though he is often restless and foolish. He is Sleeping well at present & fairly tidy in his dress —

1888.

6th Jan: For past few weeks his general condition has been fair. Some nights he sleeps well & on others he is more restless & talkative. Frequently chatters away to himself. General behaviour foolish. He is not reported to be destructive at present.

24th Feb: Some improvement since last note, but still restless & talkative. Bodily condition & health ordinary.

2nd April. Condition much the same during past month, but assists a little more in the wards than formerly.

26th May. Works about the garden & grounds. Sleeps well at night.

20th July. Is quiet & orderly.

4th Sept: Talks in a sensible way when spoken to, but does not seem inclined for conversation. Is apparently pleased & contented & does not ask to get away. Rarely speaks about his friends. Does not seem to be very strong minded.

27th Sept: Has been much the same since last note. Very quiet & unobtrusive.
To day he is discharged at his Brother's request & taken home.

Relieved.

Alexander. Graham aet 30.
admitted 9th January 1886.
forward from Vol 1 p. 255.

29. 9. 87. Melancholic with a tendency to Dementia and also Suicidal. having put his head into the fire. Health fair - Patient seems to be getting worse

1888.
20th March. This patient seems considerably demented & is in feeble health. He is very stupid & frequently gets hurt by falling on the floor or coming in contact with articles of furniture, apparently intentionally.

1889.
10th Feb: Has of late been decidedly failing in health. Cough troublesome. Right side of chest in front is dull to percussion. Rales of a moist nature are detected. He is considerably emaciated. Usually restless at nights. Has been confined to bed during past 6 weeks.

13th March. Patient has been gradually sinking since last note & died to-day at 9 p.m. The physical signs in right lung became more apparent. Mental condition has been that of dementia.

Died - 13th March 1889.
Aet: 33.

29.9.87.
1888.
28th Feb:
1889
20th March.
1890
1891
3 March.

Thomas. Truesdale. aet 23.
admitted. 15 January 1886.
forward from Vol II p. 263.

28. 9. 87. Patient a chronic mania restless and foolish and utterly incoherent & noisy — both day and night.

1888.

28th Feby. There is a distinct periodicity in this case. Sometimes he is noisy, troublesome, & stupid, & then there is an interval of comparative quiet, during which he is more reasonable & more cleanly in his habits.

1889.

20th March. Intervals between the attacks of excitement are not so long as formerly. He is more demented. The attacks of excitement are also longer. Bodily health & condition good.

1st October. Of late the morning reports have shown that this man has not been sleeping well and he has been often very abusive and nasty in his talk thro the day B.N.F.C. good.

1890

October 4. During the past year he has been quieter probably getting more demented. Works pretty regularly about the Farm or in the Grounds and is in good bodily health..

1891

3 March. Patient still works about the farm. His mental condition shows little change. Though usually quiet he is never to be trusted. He is in robust health & bodily condition is good.

To Vol IV. p. 481

Alexander Smith aet 40.

admitted 11th February 86.

forward from Vol 4 p. 273.

29. 9. 87. a case of Chronic Mania at Times very stupid at others more alert and able to work about the houses. Health is good.

1888.

28th Feby. Becoming demented. Often noisy & troublesome. Frequently uses coarse & foul language. Bodily health good.

1889.

20th March. Still noisy at times. At one time he is a "millionaire", at another "God," & at another a simple "man." Still uses oaths freely. Always assists the attendants in the wards. & in good general health.

1st October. Demented with markes but not very persistent de-lusions. Coarse & abusive in his talk. In good bodily health.

1890.

4th October. Just the same. In good bodily health.

1891

8 March. This patient has failed considerably during the winter. In early part of winter he had an attack of bronchitis which pulled him down considerably. He is now picking up a little but still is in poor bodily condition. Mentally he is unchanged.

Aug. 27. Bodily he is not at all strong. Mentally weak & demented.

c/o. Vol. IV. p. 528

29.9.87. S... de... ha... wo...

1888. 28th March. ... Keeps to h...

1889. 20th March. S... other in th...

1st Oct. Stat... B. H...

1890 October 4. ... Sam... stat...

1891 3 March ... g... Aug. 28. ... Dec 26th. ... Ap... 1892 Aug. 18th. ... Dec...

Colin Campbell Junr. aet 29.
admitted. 13th February. 1886.
forward from vol 4. p. 275.

29. 9. 87. Seems. weak and. facile and rather. demented. He. also has. hallucinations of hearing - at present he is out regularly at work. his Health. is good.

1888.
30th March. Suffering from mild dementia & has delusions. frequently talks about "little fellows" speaking to him by day & night. is in good bodily health.

1889.
20th March. Still the same delusions. No improvement otherwise. is in good bodily health & works in the grounds when wanted.

1st Oct. Stlee troubled by little demons. Practically unchanged B.H.P.C. good.

1890
October 4. In No 4. M.E. Works regularly in the Garden and is demented. The old delusions still cling to him.

1891
3 March. Mentally unchanged. He is in good health & works regularly in the garden.

Aug. 28. Unchanged. a good worker. B.H.P.C. good.

Dec. 26th. Had a bad boil on his neck some time ago. Quite better now & the same & somewhat returning Mania - often taken up with his delusions.

April 12th 1892. Just the same.

Aug. 18th. Fairly good bodily health -
Mentally unchanged.

p. Vol. IV. 575.

Duncan MacMillan æt 23.
admitted 12th march. 1886.
forward from p 297 Vol 4.

29. 9. 87. A case apparently drifting into Dementia and. now and. again becomes. very foolish. at. present he wants "to go to Texas as a missionary". General health. very fair.

1888.
30th March. Melancholic, becoming demented. Always drops on his knees & prays, whenever he can get an opportunity.

1889.
20th March. No improvement. When not working, constantly sings hymns or prays aloud. Is becoming more deeply demented. Bodily condition good.

1st October. Works in the wards. Still given to much prayer and praise. B. N. & C. good.

1890
October 4. Just the same. an invaluable wicket-keeper at cricket but queer at these time & somewhat erratic conduct turning heads over heels at the most critical part of the game. B. N & C. good. Demented.

1891
3 March. Mentally unchanged. In very healthy & excellent bodily condition. He works very well in the Gallery.

Aug. 28. Unchanged. B. N. & C. good. Getting too stupid to play at cricket.

Dec. 26th. A fairly useful cheerful demented. B. N. good.

To Vol V page 556.

29. 9. 87.
1888
30th March.
1889.
20th March.
15th Sept.
1890
October 4.
1891
3 March.
Aug. 28.
Dec. 26th.
1892
Feb. 22nd.

Hugh. Kerr. aet. 51.
admitted 22nd March. 1886.
forward from Vol I. p. 303.

29. 9. 87. A chronic Mania. is Restless, and irritable. Not at all improved - General Health Good -

1888

30th March. Suffering from General mania. Sometimes says he is God. Restless & noisy at times. General health good.

1889.

27th March. No improvement to record. Still noisy & troublesome at times.

15th Sept. In much the same condition. Goes down on his knees in a theatrical way to the writer. Is not so noisy as he was.

1890

October 4. A chronic maniac with the edge off and a deepening dementia. B. H. & C. good.

1891

3 March. An ill tempered irritable old man who is constantly trying to pick quarrels. He is in fair bodily health & works a little in the house.

Aug. 28. Unchanged. B. H & C. good.

Dec. 26th. An idle slovenly man - impotent & querulous in disposition - Dementia is deepening & he now shows mixed mental & bodily apathy.

1892

Feb. 22nd. Suffering from a large gum. bil on right upper side just now - which was lanced twice in all. but also bursts internally - much pus escaping. Irritable & impudent.

To Vol. IV. Page. 555.

Bernard. Smith aet 48.
admitted. 24th March 1886.
forward from Vol 4 p. 307.

28. 9. 87. a far advanced Melancholia. Patient very ill and in very feeble health still very depressed. and miserable

30th Jan: 1888. Patient suffers from severe melancholia, & is also considerably demented as a result. Bodily health & condition poor.

26th April. No change in condition. Constantly grumbling about his food. At times he says he gets too much & is constantly asking changes. Confined to bed.

30th July. Practically in same condition. Now & again he gets up for a little, but frequently lies on the floor whenever he gets a chance. Always repeats, when asked how is his health, "the longer the worse". Is very much emaciated & very weak.

10th Oct. Seems to be getting thinner & weaker. Now constantly in bed.

24th Oct. Patient died to-night at 10.50. For past few days it has been observed that he has been rapidly sinking, death being apparently due to simple exhaustion from prolonged melancholia.

Died.

28. 9. 87.

1888
30th March.

1887
20th July.

1st October

1890
24th March.

Robert Downie aet 24.
admitted 3rd May 1886.
Broadly from Vol II p. 323.

28. 9. 87. Patient at present in a lethargic state lying in bed. and never opening his eyes or speaking. – Has to be fed always with a spoon. Nutrition faithly preserved and his skin in a healthy state.

1888.
20th March. Still confined to bed. Takes little food & refuses to speak to any one. Bodily Condition fair.

1889.
20th Feby. Has been out of bed during past 9 months. He is much more cheerful. Always answers when spoken to. Takes his food fairly well. Is apparently suffering from melancholia, deepening into simple dementia. Rather childish in manner & speech. Assists the attendants in the ward.

1st October His mental condition has been exchemely variable of late. Sometimes he is fairly cheerful working well, at other times he is very despondent. Takes his food well and is if anything improving.

1890
21st March. This afternoon he escaped. how is not exactly known as he declines to say. Probably when putting out the left food after dinner he did not return to the dining room & so was locked out. He went home after getting over the wall and was brought back in the evening by an attendant having been absent 7 hours. There is nothing new to note in his mental condition

To p. 602.

Alexander Mackenzie aet 40.
admitted May 7th 1886.
forwards from vol II p. 329.

29. 9. 87.	a. quiet rather. weak. muddled man he. seems. very much. better.
November 7	Discharged today

Recovered.

29.9.87.

1888
29th Feby.

1889
20th March.

30th August.

Duncan Miller act. 54.
admitted 8th May 1886.
forwards from vol 1 p. 331.

29. 9. 87. A chronic maniac with numerous delusions in fr. current health. and out at work daily —

1888.

28th July: Has numerous delusions. Thinks he is God at times, & that he has all the power. At other times it is "the ladies who have got all the power". Says there is a class of individuals between man & woman, & he calls them "woo-men". In good bodily health.

1889.

30th March. Still the same delusions. Last summer for some time he drove the donkey & cart about the grounds; but one day he ran after a gentleman patient with a spade, saying he had been told to kill him as he was a shadow & had mal-treated several women. Since then he has not been allowed to go about the grounds himself, & ~~since then~~, although he works with other patients, he has never shown any dangerous tendency. Bodily health and condition good.

30th August. a patient who is not to be trusted very full of delusions which he talks about very freely Has been driving the donkey roller. and goes with the ploughmen. B.H. & C. good. He has manifested no homicidal tendencies since the under came.

To p. 586

31

James. Victory Hughes. aet. 31.
admitted 18th May 1886.
forward from Vol II p. 341.

1888
28th Feby: Restless & excited. Constantly talking in a senseless unintelligible manner. Bodily health & condition improved.

1889.
20th March. Still talkative & restless during the day. Usually quiet by night. Often cross-tempered & troublesome. Bodily health fair.

30th August. Still restless especially during the day but also at night. B.H. good. Otherwise no change.

1890
October 4. Full of ideas of his own importance and talks a lot of incoherent nonsense. B. H & C. good.

1891
3 March. Still the same exalted but very mindless being. Works with the coal-porters & enjoys good health.

Aug. 28. Excitable at times, but not usually. Works with the coal porters and very self important. B. H. & C. good

Dec: 24th Quite affable & polite - and evidently much self-satisfied - Fairly tidy about his person.

1892
April 12th A steady worker with the coal porters. Talks a great deal outside - but is not troublesome.

Aug. An orator with a really fine voice - which he can use fairly well - haranguing nobody in particular.

Dec. 20th In good health. Works pretty well. Is continually haranguing. Thinks Freemasonry is intimately connected with Freemasonry.

To Vol IV p 220

1888
29.9.87.

1888
20th March.

1889
20th March.

1st October.

1890.
October 4.

1891
3 March.

Aug. 28.
Dec: 24th

1892
April 12th
Aug. 17th

William Cowan Buchanan. æt 27.
admitted 19th May 1886.
forwards from vol 4 p. 343.

9. 9. 87. A case of ~~Chronic~~ Dementia. Very slow and lethargic. His health is poor but able to do some work. He is gradually getting more demented.

1888.
31st March. Quite demented. Nothing can be got out of him. When spoken to usually simply stares at you. Bodily health fair.

1889.
28th March. Always able to do a little work in the grounds with the attendants. Is deeply demented. Bodily health improved of late.

1st October. a deeply demented patient all the faculties being in a very sluggish condition. B. H. fair.

1890.
October 4. Works regularly in the Grounds and is mentally weak giving expression to no delusions.

1891
3 March. Very weak minded has a rule very retiring. Occasionally very talkative & incoherent. In indifferent bodily health & condition.

Aug. 28. Unchanged. B. H. & C. fairly good

Dec: 23rd Continues in the same state, a mild harmless demented, childish in manner. Pleased with any attention. Looks after himself & is not troublesome.

1892
April. 12th Unchanged.

Aug. 17th The same in every way.

2. Vict. IV. 574

George Meikle aet 76.

admitted 10th June. 1886.

forwards from vol II p. 361.

29. 9. 87. A. Senile Melancholic apparently no delusions. Patient much the Same condition.

1888.

30th March. Deeply melancholic. Is quiet & manageable will sit for hours in same seat. Bodily health fair.

1889.

20th March. No improvement in Mental Condition. Bodily health not so good of late. Rarely speaks to any one, & then only when spoken to.

1st October. Sunk in senile dementia. B. H. very indifferent. Speaks none and works none.

1890

26th Jany. after a very slight & short aggravation of his previous condition this patient dies this morning at 1.40 A. M.

For some days previously he had been obviously not so well but made no compeaint He took no food was very stupid and his tongue became very dry. He had been having stimulants but they were increased and as nourishing diet given as he would take

Shile of these and without any very obvious symptoms he got worse & c

Died

No P. M.

29. 7. 87. a

1888.

2nd Jan: M

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John Scott Henderson Aet. 40.
admitted 14th June. 1886.
forwards from Vol 4 p. 368.

28. 7. 87. a general Paralytic. seems. To be breaking down, is often noisy and restless at night and often wets himself.

1888.

2nd Jan: This Patient seems to be labouring under dementia. He is not inclined to converse with the writer. He is slovenly in his habits & dress, & frequently wets his trousers & bed. It would seem he suffered from retention of urine & overflow, but when catheter is passed a large quantity of urine is not obtained. At present the signs of G.P. are not striking.

3rd April. General condition unchanged. During last few days he has had diarrhoea. He is weaker & not inclined for food. Still wetting himself very much. Is confined to bed.

14th April. There is a marked change in this patients condition to night, for the worse. During afternoon breathing became a little rapid & he seemed much weaker. To night (10 pm.) it has become quite stertorous & patient is Comatose. Nothing special to note about pupils, except that they react slowly to light. Nothing found in chest to account for his general condition.

122

George. Russell Alexander aet 65:
admitted 16th June. 1886.
forwards from vol II p 369.

27. 9. 87. A. melancholic., Restless and. noisy at night. and. at Times refuses. his food and sometimes very difficult. to manage

1888.

30th March. Depressed & miserable. Goes about the gallery in a restless manner, grumbling about everything & everybody. Bodily health fair.

1889.

20th March. Still in the same miserable, depressed condition. Has frequent complaints against the attendants, many of which, when investigated, are totally groundless. Bodily condition good.

1st October Nothing new to report about this patients condition either bodily or mentally.

Dec. 10th Still miserable depressed about the three fortunes he has lost. At times wrings his hands weeps over his losses. Is troubled with lumbago now & then. Fancies this pain due to Kidney disease. Urine lately examined & found normal

May 5th Mental condition still the same. Moves about the gallery wringing his hands & moaning in miserable fashion. Bodily health fairly good though patient always complains about something. Is troubled a good deal with Chronic Conjunctivitis.

to vol. IV p. 154.

29. 9. 87. a
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1889.
2nd Jan:
2nd March.
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Duncan M^c Callum aet. 45.
admitted. 17^th July 1886.
forwards from Vol 17 p. 389.

29. 9. 87. Chronic mania. Restless. and foolish and quite incoherent. He seems to be getting worse. Health rather poor.

1888.
2^nd Jan: Conducts himself in a foolish manner. Walks about the airing court in a restless fashion making gestures with his hands & body. Is not inclined to converse with strangers. Bodily health indifferent.

31^st March. To-day he is ~~discharged~~ transferred to Ayr District Asylum, being in Galston Parish.

Relieved - 31^st March 1888.

James. Wyllie æt. 43.
admitted 22nd July 1886
forward from vol ii p. 395.

28. 9. 87. Patient weak. minded - and childlike & has many delusions - General health fair.

1888.
2nd Feb: Patient suffers from mild dementia. Speaks in a weak, childish way. Amuses himself by painting, & likes to get his pictures praised - always very willing to show them off. Bodily health fair.

1889
20th March No change to record in mental condition. Still the same delusions about the man in Irvine who can cause his (W. Wyllie's) bowels to become constipated, & at will give him pains in various parts of his body, by, as patient says, a process in photography. Has the liberty of the grounds & is in good general health.

3rd June. On parole in the grounds. Delusions very manifest but apart from them he talks intelligently & shows an amount of information on many subjects.

13th August. Discharged
Relieved

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1888
2nd Jan: D
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2nd March. An
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2nd October.

Rec
25th June

Walter Rule aet 47.
admitted 30th July 1886—
forwarded from Vol 4 p. 401.—

8. 2. 87.	a Melancholia patient seems to be improving gradually. His general health has greatly improved and he is putting on flesh.
1888.	
30th Jan:	Depressed mentally. Does not seem, at present, to be in very robust health
1889	
4th March.	An unsatisfactory patient. Still very melancholic. Frequently complains. Sure that any food he take cannot be doing him any good as it always lies in the stomach for a certain time & then passes on undigested. Makes a great fuss about trifling ailments. Bowels constipated. Bodily health fair.
3rd June	an hypochondriacal patient who is always complaining and who is very depressed. Previous to his becoming insane he moved in good society & was noted for his cheerful disposition and genial manner. Now he is somewhat moody and very depressed. Constantly asking for laxative medicine. His bowels are undoubtedly constipated but he is very sluggish in his habits and this seems to extend to the peristaltic action of the bowels. Cascara does well with him
2nd October.	Unchanged. Requires medicine having complaining man. Broods over his ailments and cannot be got to think of anything else.
1890	
28th June	Taken home to-day by his sons.

Discharged Relieved

James. Galloway. aet. 57.
admitted 21st aug. 1886.
forward from Vol II p. 415.

28. 9. 87. a General Paralytic — Has just passed through a period of extreme excitement with Sleeplessness, and restless. and shouting out: while usually he is quiet and Sedate.

1888.
28th Feb. The affection of speech & the gait are very characteristic of G.P. Sometimes restless & troublesome & then becomes quiet & manageable for a period. ~~Health~~ General condition good.

1889.
4th March. Sometimes he has been very noisy and troublesome & requiring gloves on at night. During those excited turns, he is usually very destructive. Of late, on the whole, he has been much quieter & more manageable, & during the day is removed from the refractory gallery. General health fair.

24th Sept. Has had several fits of excitement lately but the process of brain-movement does not appear to be going on very rapidly. He has many of the symptoms of G.P. very well marked. B. H. good.

Nov. 23rd Pat. has not had any "excitement" fits lately. Is very happy & contented: plays with attendants & laughs & the remark "Mad is it." B. H. good. Articulation is not as good as formerly.

to p. 591

28. 9. 87. [illegible]

1888.
28th Feb: [illegible]

1889.
4th March [illegible]

24th Sept. [illegible]

[illegible]

1890
October 4. [illegible]

James. Legate Reid. ad. 37.
admitted. 23rd august. 1886.
forwards from Vol I p. 417.

28. 9. 87. Weak minded and chronically excited. Restless and noisy and continually making absurd gestures.

1888.

16th Feb: Is much demented. Rarely speaks to any one. Constantly gesticulating both by limbs & by facial contortions. Bodily health & condition fair.

1889.

1st March. No change to record during past year. Still goes on with the same antics. General health fair.

24th Sept. The same gesturing, posturing & really individual unchanged. B. H. & C. fairly good.

~~Dec 2nd~~ ~~Exchange in mental condition. Remains~~

1890

October 4. Just the same.
B. H. & C. good.

to vol. IV p. 267

Patrick Jorman aet 45.
admitted. 23rd Sept. 1886.
Forwards from Vol II p. 437.

29. 9. 87 Chronic Mania. Has. hallucinations of hearing. Gnural health. seems Good Condition unchanged.

1888.

20th Feb: Is now somewhat demented. It is difficult to understand what he means, as when he speaks to you he always uses various gestures which confuse one: He is very deaf. Complains of voices troubling him at night.

1889.

4th March. Practically in the same mental condition for the past year. Still assists the Coal-porter. Is in good health.

24th Sept. Unchanged.

1890

October 4. Just the same. Salutes the writer as often as he can possibly manage. B. H. & C. fair.

1891

3 March. Still salutes the known officials with great regularity. Frequently gives a long account of his wrongs commencing "There never was a man in this or any other world" & as a rule becoming almost incoherent after a few sentences. He works with the coal-porter & enjoys good health.

aug. 28. Unchanged. B. H & C. good

Dec. 24th. Just the same - Health good.

To Vol IV. p. 554.

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Henry Marshall aet 57.
admitted 24th September 86.
forward from Vol II p. 439.

18. 9. 87. A case of Chronic Mania. absolutely incoherent. and noisy and restless = Patient has been very low in health at times but at present is in fair Condition.

1888.
30th March. Has been in the same restless noisy condition for past few months. Sleepless at nights. Bodily health fair at present.

1889.
15th Feb: was to-day transferred from private to pauper rate (Govan Parish). Has been of late fast breaking down in general health. Is considerably emaciated. Very dirty & untidy in his habits. Noisy & restless. Different hypnotics have been tried but with unsatisfactory results:- amongst them Bromide of Potass,, Chloral: Hyd: Bromide & Chloral, Paraldehyde, & latterly Sulphonal.

17th March. About noon yesterday patient became suddenly unwell & would have fallen from his chair had he not been caught by an attendant. On being put to bed the symptoms were not unlike those of Apoplexy, but not at all marked. Towards night, however, unconsciousness deepened & the symptoms were unequivocal. He died at 1.45 this morning.

Died - 19th March 1889.
Aet: 60.

P.M. exam:- Head only examined. Under the Dura mater, over whole convexity of Brain, there was considerable Hæmorrhage - some fluid & some clotted. The source of the bleeding could not be detected. The Brain was very much shrunken, only weighing (cerebrum & cerebellum) 32 ℥.

Stewart McKenzie Graham. aet. 28
admitted 20th Sept. 1886.
forwards from vol 1 p. 441.

29. 9. 87. a case of Dementia. seems stationary. Health rather feeble.

1888.

12th March. Has scarcely spoken once to the writer during past two months. Goes about the airing court with his head bent towards the ground. Looks very miserable & demented. He is pale & flabby. Genral health poor.

28th June. No change in mental condition since last note. Health still very indifferent. To day he is discharged & taken home by his wife.

Relieved.

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Colin MacDonald. aet 55
admitted 7th October 1886.
forwards from Vol 4 p. 447.

29.9.87. Restless. Melancholic, Tears his Clothes and. Tends to strike other Patients. Condition unchanged.

1888.

28th Feby: Suffers from melancholia. He is an ill-natured patient. Every now & again gets into trouble by striking other patients, & then denies his guilt. Bodily health good.

1889.

1st March. Still the same ill-conditioned man. Always grumbling. Thinks he is ill used. Of late he has been so destructive, tearing & eating his clothes in a secret manner, that he now wears a Canvass jacket, which he does not at all relish. He is in good bodily health.

2nd Oct. Has got cataract of the right eye nearly ripe for removal. Still surly and nasty. Complains a great deal and still has canvass jacket B. H.T.C. good.

1890

October 4. Has had on his own clothes of late but has been very destructive and is no better. Has been anxious to have a trial but circumstances do not justify that. B. H. T C. good.

1891

7 March. His appetite for Cloth still as voracious as ever. Lately the edges of his coat were soaked with a solution of quinine but with no good effect. He is in good health.

To Vol IV p. 482

John Burns aet 39.
admitted 21st Oct. 1886.
Forward from Vol 4 p. 451.

28. 9. 87. A. general paralytic. Has lately had epileptiform attacks. which left him very low. but he has somewhat recovered again.

1888.
22nd March. Seems to be far advanced in General Paralysis of the insane. Quite helpless. would pass both mine & faces in bed if he were not strictly watched. Occasionally has epileptiform attacks. Confined to bed.

1889.
2nd Feb: This patient has been more decidedly failing of late. He is usually restless at nights & sleeps little. He is very much emaciated & has bed sores have formed, in spite of very careful watching on the part of the attendants.

2nd March. Since last note patient has had frequent epileptiform attacks, & there has been great difficulty in getting him to take food.
He sank gradually & died to day at 6.20 a.m.

Died - 2nd March 1889.
aet: 42.

29.9.87. a
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30th Jan: Sym
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2nd Oct.
October 1
1891
3 March.

Francis. Lominey aet 30.
admitted. 2nd November 1886.
forwards from Vol II p. 457.

29. 9. 87. a general Paralytic but meantime there seems to be some remission in the symptoms.

1888.

20th Jan: Symptoms characteristic of G.P. At present, he is quiet, tidy, & generally well behaved. In good bodily condition.

1889.

9th March. During past year the disease has been very slowly advancing. He is, however, much less steady in walking. Does not speak so freely. Is able to take exercise in airing-court. Quite contented & happy. In good bodily health & condition.

2nd Oct. Steer in pretty fair health and the disease but slowly progressing. Has many of the typical signs of G.P. Very happy and with feeling of bien être. B. H.C good.

1890

October 4. a very evident case of G.P. but the disease is not at present active and he is not getting much worse.

1891

3 March. There has been very little advance in this patient's case during the past six months. His bodily condition is still very good. He has become much more stupid of late & talks very little.

To Vol IV p. 483.

David. Torrance. Handyside aet 30.
admitted. 6 November 1886.
forwards from Vol II p. 468.

28. 9. 87. Patient in a state of Stupor following an acute attack of mania, and is restless but seems to take no notice of anything going on around him. Has been rather going down lately and has to be urged to take his food.

1888.
12th Feb: Is in feeble health. Will not take notice of anything going on around him. Still the same difficulty in getting him to take food. Rarely speaks to any one.

1889.
4th March. During past 6 months he has been in better health & has been taking his food better. He speaks quite freely to his attendant, but absolutely refuses to do so to the writer. During last summer he played at tennis & cricket & seemed to improve very much mentally, but it was only temporary. He plays billiards with his attendant, but hardly with any one else. He sometimes stands for some time in one attitude in the gallery & can hardly be got to move.

2nd Oct. Has improved a good deal during the last summer, taking an interest in ward work & playing cricket in the evenings. Speaks freely to his attendant but little to any others. B. H & G are fairly good. Takes his food fairly well but has had to be threatened with the tube.

to p. 472

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Thomas. Wotherspoon aet 46.
admitted 19th November 86 –
forwards from Vol II p. 465 –

8.9.87	Patient has recurrent Mania. at times quite well. at present he is in an excited restless condition – General health fair.
1888.	
9th Jan:	During the period of excitement he is very troublesome, always interfering with other patients or attendants. Very Restless ~~at~~ talkative at nights during these periods.
1889.	
1st March.	The intervals between the attacks are becoming much shorter, rarely now more than 10 days or a fortnight, & even during such intervals there is evidence of slight dementia. He is in good bodily health and condition.
13th July.	Has improved somewhat ofllate. Sleeps well at night and on the whole shows a healthier mental tone
14th August.	His friends being very desirous he is allowed on leave.
13th Sept.	Discharged

Relieved

Re-admitted on September 24th 1893.
Vide Vol VI p 214.

Alexander Jack. aet 27.
admitted 7th Jan. 1867.
forwarded from Vol II p. 495.

29. 9. 87. a case of Dementia: Listless and.
stupid without employment or any
interest in anything.

Novemb 28. He is unimproved, still the same idle
irritable mindless man.

He was removed by authority of his mother
today

Relieved.

28. 9. 87.

7th Jan: 1868.

30th April.

4th Aug.

14th Nov.

12th Dec.

2nd Dec.

James. Forrest. Sevr. aet 60.
admitted 8th Jan. 1887 -
forwarded from vol 4 p. 500.

28. 9. 87. Chronic mania. rather better on the whole. General health fair.

1888
6th Jan: Suffering from Chronic Mania. At present is tolerably quiet & manageable. Bodily health & Condition good.

30th April. No change in mental condition. Walks in the garden.

4th Aug: Has been more restless & talkative of late. Recently, one evening when the men were returning from work, Patient was amissing, & after a good deal of searching was found concealed amongst the Rhubarb. Has not been allowed out to work since then.

5th Nov: During last 2 months Patient has become considerably reduced, physically. He is more restless & talkative, & more difficult to manage. He is also anemic. On physical examination nothing is found except that on pressing upper part of abdomen he complains of pain — no tumour is felt. Confined to bed.

24th Dec: Has become much worse. Is rapidly emaciating. At times says he has great pain in abdomen, but cannot further localise it. Is very talkative.

25th Dec: Patient gradually sank & died to day at 3.15 pm. For some hours before death there was great pallor of face & lips.

P.M. Exam:- Malignant disease of Pyloric end of stomach. A considerable amount of blood found in bowels.

John Scott. aet 28.

admitted 11. January 1887—

forwards from vol II p. 501.

28. 9. 87. Chronic. Maniac very uncertain often violent and noisy nearly always at night.

1888.

20th Jan: Patient is often troublesome, & of very uncertain temperament. He delights in performing gymnastic feats, standing on his head, &c

8th July. On the whole, he is quieter; He works a good deal in the grounds.

1889

10th March. Much quieter than formerly, but still frolicsome Works fairly well in the grounds. Sometimes a little fantastic in dress. In good bodily condition.

28th August. Been working regularly in the grounds. Still peculiar in his dress and indulges in foolish performances. B. M. good.

4th October. Has had a bad whitlow recently. An improvement noticed in his mental condition may be due to this. He has been quieter and more sensible.

1890

October 4 Just the same. always wears his stockings outside his trousers and is very horsey in his attire. B. M. & C. good.

1891

3 March. A hard working Chronic maniac who at times becomes noisy & troublesome In excellent health & bodily condition.

Do Vol IV p. 484.

28.9.87 - From

1888
20th Jan: Ho

1st Aug: 1889

10th March. & A

4th October 1890 Sec

October 4 - Sec

1891
3 March

Aug. 28. He

Dec: 26th 1892

April 12th

Aug. 13th

Dennis. Gallocher aet 56.
admitted. 14 January 1887.
forwarded from Vol 4 p. 503.

28.9.87. Senile Dementia at times restless & Troublesome.

1888

30th Jan: Patient is deeply demented, & is occasionally noisy & restless. Assists a little in the wards.

1st Aug: 1889 In practically the same condition.

9th March. He is in good bodily health & condition & assists the attendants in light ward work. No change in mental state.

4th October. Unchanged.

1890

October 4. Getting frail and not able to be much out now but always ready to talk & sometimes abusive Mentally the same.

1891

? March Still very frail & has been out very little during the winter. Mentally he is unchanged.

Aug. 28. Just the same frail man. Has a fixed place in a corner of the Gallery from which he seeds our willingly badges.

Dec: 24th. Much the same - occupies his usual seat nearly

1892 all day. Nothing new to record about him.

April 12th. Not able to work - Troubled with an eczematous condition about his eyelids. Makes a curious 'clicking' sound with his lips. Greatly demented. B. & C. indifferent.

Aug. 17th No change here.

Jo. Vol. IV. p. 573

John Walldee aet 49-
admitted 25th January 1887
forwards from Vol 4th P. 509.

29-9-87 an Imbecile of low Type - much the same as Previously -

1888.

20th Feb: A deeply demented patient. Is cleanly & orderly in his habits. Bodily health & condition fair.

6th July. Nothing new to record.

1889

20th March. In precisely the same condition during last 6 months. Deeply demented. Clean & tidy in habits. Bodily health good.

2nd Oct. a deeply demented patient regarding whom there is nothing new to report.

1890

October 4 In No 4 Gallery. Works a little in the house but does not go much out. B. & C. indifferent

1891

3 March. No change to note: is in fairly good health & bodily condition.

Aug. 28. Just the same. Works none but in fairly good health.

Dec. 24th A remarkable picture of deep dementia - with stagnation of all bodily & mental activity. Requires looking after & feeding - is now quite idle - & in indifferent health.

1892

April 12th Undanged.

Aug. 17th Just the same. In fair health.

To. Vol IV. 572.

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April 10th

David. Boyd. aet 43.
admitted 27 January 1887.
forwarded from vol II p. 515.

28. 9. 87. A. melancholic. and. seems. rather. better at present.

1888.

5th Jan. Deeply depressed melancholic. Says that he should be in hell fire, & that he has disgraced his whole family connection. Wishes to get some poison. Bodily health fair.

5th July. Distinctly improved in mental condition during past week. Is cheerful & wonders why he has been so long dull & stupid.

1889.

21st March. The improvement mentioned in last note only continued about a week, & since then he has been as dull & depressed as ever. Bodily health good.

4th October. A distinctly amendable patient if he had sufficient courage. During the past 3 mos he has varied greatly. Sometimes he is fairly cheerful, at other times he is sunk in the veriest slough of despond. Complains very often of pain in the side. Repeated examinations fail to make out any cause. Would lie in bed all day were he allowed. Walks about the airing court with bowed head & would avoid everyone. Still talks about his fitness for hell-fire. Not a very hopeful case.

Dec. 6th Pat. very much as at last note. Was troubled last night with severe headache. Purge given.

" 10th Headache now gone.

1890

April 10th Early this morning patient was discovered with two small cuts in the front of his throat.

to p. 569

55

John. Forrest. aet 42
admitted 28th February 1887
forward from Vol II p. 517.

1887

29. 9. 87. Chronic mania. often - very restless & noisy especially at night. but meanwhile he seems rather more settled. Health only fair.

10th Nov: Discharged to-day.
Recovered.

Readmitted
March 1st 1890.
Vol. III p. 536.

29.9.87. 1888. 2nd Oct.

Alexander. Littlejohn aet 63.
admitted. 24 February 1887.
forwards from vol 4 p. 519.

29. 9. 87. Patient has. passed. through an attack of Subacute mania which seems to have left. him somewhat weak. minded.

1888.
2nd Feb. During past two months patient has been fairly well, although still somewhat weak mentally. General health good. To day he is discharged by minute of Cambusnethan Parochial Board & taken home by his sons.

Relieved.

Marinus Scott Ross aet 19.

admitted 16 march. 1887.
forwards from vol II p. 534.

28. 9. 87. A case of chronic mania. but seems rather weak minded. and grotesque in ~~dress~~ dress. and manner. - much the same condition

1888
10th Feb: Condition unchanged since last note. To-day is transferred to Montrose Asylum.

Relieved.

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8th Jan: Rest
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June 12th.

Patrick McGuire. adt.

admitted 18th March 1887.

forwarded from Vol II p. 533.

28.9.87 Case of typical Chronic Mania – Patient restless and tricky and very noisy both night and day – condition not improved.

1888.

1st Jan: Restless & noisy. Often gets into trouble by interfering with other patients. Is fantastic in dress – decorates his hat with feathers &c In good bodily health.

2nd June. A little quieter, but still occasionally noisy & troublesome. Works in the grounds.

1889.

30th March Much quieter during past 6 months. Dresses like the other patients. Works regularly in the ground. Is mildly demented. In good bodily condition.

June 12th Transferred to an Irish asylum

James. Davis. aet 34.
admitted 4th april. 1887
forwards from vol II. p. 541.

28. 9. 87 a. general paralytic. he is noisy and restless. and has been failing very rapidly lately

1888.
30th Jan: the symptoms in this case are quite characteristic. he is happy & contented, & is in ~~good~~ fair bodily condition. sometimes restless & irritable.

10th July. no change in mental condition, but he is becoming more obese.

1889.
20th March. still able to take exercise in airing court or grounds, & sometimes assists the attendants in the wards. & in excellent bodily condition.

4th October. Betrays some instability at times; otherwise able to be up and do light work with the attendants in good bodily health.

12th Nov.

	A.M.	P.M.
Oct. 31.	101.6	102.2
Nov 1	99.	100.6
2	99.6	99.8
3	99.6	99.2
4	98.6	99.4
5	100.	99.6
6	98.8	99.8
7	98.4	98.6
8	99.	98.6
9	99.4	99.2
10	99.6	101.6
11	101.4	102.
12	103.	

These temperatures indicate some long consecutive attack in the middle of which this man is at present. The signs of G. P. are very unequivocal

1890. Oct. 4.
now quite bedridden & very far gone in the 3rd stage but wonderfully happy & without bedsores. —

Dec. 15th A small perineal abscess has developed within the past few days. After poulticing was opened & small quantity of pus removed. The wound is now healing quickly.

to vol. IV p. 268.

John Hannah aet. 55
admitted. 10 april. 1887
forwarded from vol 4 p. 545.

29. 9. 87. A general paralytic. speech. slow and hesitating. and. tongue and lips show. fibrillary Tremor. He has. none of the characteristic delusions. but is in a state of General Content.

1888.

1st Jan: Patient presents the appearance of a typical G.P. He is happy & contented & generally well pleased with himself. His walking & speech are characteristic of such patients. He says he is many hundreds of years old & that he has been for a long time in heaven. He is in good bodily health & condition.

1st April. No change in mental condition.

10th July. Disease seems rather stationary. Not much change during past 6 month, except, perhaps, that he is more feeble in walking. Is becoming quite stout.

20th Nov: All the symptoms are apparently becoming more marked, but only slowly. He is usually in the airing court every good day. In very good bodily condition & health.

1889.

12th April. Breaking down. Confined to bed for past week. Very feeble mentally. Still, however, in fair bodily condition.

4th October. Entirely confined to bed. Happy and contented. Gums his teeth a good deal.

1890. May 5th. Died to-day. P. M.

General Paralysis

John Shields Junr. aet 26.

admitted 25th May 1887.

forwards from vol 1st p. 549.

27.9.87. Since admission seems much the same but seem to indulge in absurd conduct and writes foolish letters. He is very reserved and shuns companionship and unwilling to talks. He is looking rather anaemic and thin lately.

Octob. 25 Last night in church he became excited declaring that another patient was abusing himself and he had to be removed. He is not looking very well meantime.

Novem 8 Yesterday he was in great mental distress constantly crying and rocking himself to and fro but would give no explanation of his conduct, today he is greatly depressed and in deep misery and begging to have his right eye taken out as he is distressed by visions. He is in a very dangerous mood and requires constant watching.

1888.

30th Jan: Still deeply depressed frequently asks to have his eye enucleated. He requires Constant observation.

10th June. Has of late given up talking about his eye, but he has refused his food & has been fed by the stomach tube, sometimes for 2 or 3 weeks at a time. Bodily condition reduced.

1st Dec: During past 8 days he has been much better in mental condition. Has taken his food well & is much more communicative.

28.9.87. Se... ma... an... He... an... He...

Novem 8

Geo. Galloway Thompson æt. 21
admitted. June 15th 1887.
forward from vol 4 p. 553.

28. 9. 87. Seems to be labouring from subacute mania from which he is emerging and gradually improving.

October 11 He seems to be now fairly well mentally and his health is good: He left today on trial.

November 7 He was discharged today.

Recovered

William McNicol. aet 41.
admitted. 27th June. 1887
forward from Vol II p. 557.

29. 9 87. A Case of Simple Dementia. much in the Same Condition. occasionally restless. at nights.

1888.
20th Feb. Mildly demented. Quiet & harmless. is in good bodily health & quite active in his manner.

8th June. No change to record.

1889.
20th March Practically no change in mental condition during past year. He is still able to take active exercise & is in good bodily health.

1st October. Unchanged.

1890
October 4. a rather peculiar case. In No 1 Gallery. Seldom speaks and is anxious to avoid anyone. He takes part in summer amusements playing a very good game at cricket &c. B. M & C. good.

1891
3 March. No change to note in this silent & unsocial man. He is in fair bodily health & Condition

July. 3. Little change to note. He is not easy to converse with but takes some interest in outdoor amusements. and plays a fair game at cricket. His B M & C is good.

Dec. 24th A weak minded patient, with some delusions which prompt him always to get out of the way, and to refuse anxiously to shake hands. while preserving a nearly uniform silence. He is unsocial & depressed. Clean & not troublesome. B.B. fairly good

J. Vol. IV. p. 5. 27.

Robert. Waddell. aet 45.

admitted 7th July 1887
forwards from Vol II p. 561.

29. 9 87. A General. Paralytic - far. advanced. Is getting quite demented. Health. Seems fair at present.

Octob. 25 Quite demented & undirnidfes & often noisy: his general health is good.

1888.

3rd Jan: A typical General paralytic, & is quite demented. Still able to take exercise in airing court & grounds. Bodily health good.

7th July. Seems to be more mindless & helpless of late. Bodily health fair.

1889.

8th Jan: Has gradually become more feeble since last note & is now confined to bed. He is quite helpless. Not quite so noisy as he has been.

2nd July. A bed-ridden G.P. with all the typical signs Happy and with the bien être feeling. Noisy at night carrying on conversation with imaginary people in the ceiling. Smashes his teeth a great deal. Has some urinary troubles and it is with great difficulty that the formation of bed-sores is prevented. Has on gloves - unlocked as he is destructive. He never offers to take off the gloves. B. & C are good.

8th Oct. Not much change to note. Disease not rapidly advancing -.

Nov. 23rd B. H. & still good. Happy & contented laughing when visit is made. Still gnashing his teeth. Has on gloves. Occasionally noisy at nights.

to Vol IV p. 77.

William Lyle. Barbour aet 31.
admitted 2nd July 1887.
Forwarded from Vol II p. 563.

29. 9. 87. Acute mania. goes. up ~~and down~~. He has gained flesh a little. He is ~~is~~ sneaky and dirty in his habits.

October 12 He is cunning and stupid at present but at times he is quite alert and brisk. His health is fairly good.

October 15 He was taken home today against the advice of the Asylum authorities

Relieved.

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Hugh. McShane aet 54
admitted 21st July 1887
forwards from Vol II p 571

29. 9. 87.	Emerging from an attack of Mania. and. is Gradually improving.
October 12	Not so well again: he is very confused and stupid and somewhat restless. He is gaining flesh and improving steadily in health.
1888	
4th Jan:	Since last note patient has improved both mentally & physically. He sleeps well at night & takes his food fairly well.
5th March.	Improvement has continued, although his general health is still somewhat feeble. His mind is apparently quite clear. He is discharged to-day.

Recovered.

William Wright. aet 56
admitted. 15 August 1887
Forwards from Vol 7 p. 583.

28. 9. 87. Lately had an attack of "mania transitoria" – He was very violent & tore down gas brackets in his Gallery – Remained naked & put in the padded room. Canvas. His attack resulted in acute Bronchitis due to exposure from which he has quite recovered.–

October 12th. He is very changeable, at times he is fairly well, quiet and orderly and tidy in his dress; at other times he is foolish and dirty in his habits by day and at nights he is restless and inclined to indulge in filthy practices.

Octob 25th. He has settled down again: he is now quiet and orderly and fairly coherent and sleeping well.

Novemb 29th. Now very well in every way and he is today discharged

Recovered.

Re-admitted on July 4th 1895
vide Vol VII p 476.

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Gavin Crawford. aet 41.
admitted 2nd Sept. 1887 -
forwards from Vol II p. 584.

28-9-87. Had been labouring under acute Mania He has been sent home today apparently quite well. He has made a good recovery and gained in weight and colour -

October 5 He was taken home on trial on the 28th ultimo and brought back today having proved himself obstinate and impracticable -

October 25 At times he has been restless and foolish and rather sleepless, at others his quiet and orderly and seemingly quite rational -

1888.

9th Jan: Since last note he has been quiet & orderly when spoken to, he is apparently quite rational. He has of late, been sleeping well. He wishes to go home, but objects to the Proposal made by his wife, viz- that his brother should live with them for a time - He cannot, or will not, give any reason for this objection. He is taken home by his wife & brother, to-day

Discharged - Relieved -

John Stevenson aet 36.

admitted 9th September 1887.

forwards from vol II p. 688.

28. 9. 87. Still under suspicion of General Paralysis at times rather troublesome sometimes away at others quite happy & Contented His Mem. is now well. He still shows exaltation in his ideas & resources.

October 12th. He has become somewhat troublesome of late always wanting away and when his wish is not complied with he is apt to be stormy and he writes letters to his wife and mother demanding his liberation. He has still the same delusions about the prosperous state of his affairs and his speech is at times indistinct and hesitating.

October 25th. Often somewhat irritable and complains bitterly of being detained needlessly and, to the ruin of his business. He has still the same notions as to the prosperous state of his affairs and general state of well being.

31st Dec. His speech is deliberate & hesitating: at times stutters a good deal; but if he takes time he is able to carry on a conversation fairly well & he does so in a quite coherent manner. He speaks of the confidence with which his late employers regarded him, also of his success generally before admission here. He is quiet in his manner & works outside daily.

1888
10th Feb: Affection of speech still present, but, if anything, less marked. Nothing to note about gait or general Conduct. He is taken home to-day by his mother.

Relieved.

28. 9. 87.

October 12

October 25th.

1888.
3rd Jan:

2nd March.

4th June.

10th Sept:

24th Dec: 1888.

30th March.

4th Oct.

Robert. Neil. aet. 53.

Adm. 9th September 1887.

forwards from vol II p. 587.

28. 9. 87. Melancholia with delusions that people are speaking ill of him. & protests he is innocent: He. to much. The same as on admission.

October 12 Since admission he has remained very wretched and miserable, sitting indoors with his eyes shut and manifesting no interest in anything, and when spoken to he says that the people are still speaking ill of him and he protests that it is untrue. He seems to be gaining flesh a little.

October 25th. Still very depressed and miserable but his general health seems to be improving slowly.

1888.

3rd Jan: Melancholic. Refuses to speak to any one. General health fair.

2nd March. No improvement in mental condition

4th June. Still very depressed. Goes about muttering to himself. Does not care to speak to any one.

1st Sept: Practically in the same condition as at last note.

4th Dec: I. S. 2.

1889.

5th March. Is becoming more demented. Rarely speaks to any one. Bodily health & Condition has been good of late.

4th Oct. In much the same condition bodily & mentally. Has not been sleeping well at night. To p. 118

Thomas. Wilson Richmond aet. 37
admitted 13th. sept. 1887 –
forward from Vol II p. 589.

28. 9. 87. an Epileptic Imbecile. Has got more troublesome since admission. and tends to quarrel with other patients. He has had no fits since admission –

October 12 Quite mindless and silly and he has many of the ways of an imbecile. fond of trinkets and trifles which he values greatly and although his muscular and well formed, his walk is peculiar. He is very obstinate and irritable and at times dangerous.

October 25th. At times he is very obstinate and irritable, and he frequently displays dangerous tendencies

Novemb 29 Very obstinate and stupid and he readily becomes dangerously excited.

1888.

10th Jan: Usually takes fits only by night. Still irritable & dangerous at times, & consequently gets into trouble with other patients. He is, however, silly & childish in his manner & speech at other times. Bodily health good.

1st May. The following is a record of the fits during the last 4 months:-

	day.	night
Jan:	-	3
Feb:	-	1
March	2.	1.
April	1.	1.

3rd Sept: Number of fits in:-

	day.	night.
May	2	6.
June	1.	3.
July	2.	3.
Aug:	—	5.

1889
1st Jan. Imp
1st April. Imp
He is at the trouble of oth to fo walks
3rd July. His mon a grea
4th Oct. Recov alway becom the sa he pas with allowa occas comes
1890
October 4. Recov Jacks R. H.

Thomas W. Richmond.

1889.

1st Jan: Number of fits in:-

	day	night		day	night
Sept:	—	3.	Nov:	1.	2.
Oct:	—	11.	Dec:	1.	4.

8th April. Number of fits in:-

	day	night		day	night
Jan:	—	4.	March	1.	6.
Feb:	—	4.			

He is becoming more demented, but is still at times unmanageable & frequently gets into trouble. Often makes Complaints about attendants & other patients, which, when investigated, have no foundation. Bodily health good. He also walks with a peculiar uncertain Gait.

2nd July. Fits have been very frequent of late. During the month of June he had 10 and he also displays a greater instability of temper. B. & C. very good.

4th Oct. Becoming demented. Daily in the questions he asks always wanting to re-commence his medical studies beginning with Midwifery. Fits occurring with about the same frequency. B & C. excellent. During the past month his urine has been repeatedly examined with the view of ascertaining whether it ever contained albumen before, during, or after the fits. On one occasion only was a distinct trace found, and no conclusion could be drawn from its occurrence.

1890

October 4. Becoming very stupid & having little intellect left. Facile & easy but very irritable when having fits. B. & C. are good.

to. vol IV p. 289.

Alexander Hogarth aet 74.
admitted. September 21st 1887.

a private patient, single a Draper. by Trade. Resides. at Dalry, Ayrshire. This is the patients second attack. having been an inmate of this. asylum in 1861. at which time he remained. two Years.
He. admission patient. of a tall spare man. in rather. feeble health. with no obvious physical disease.
He. or Labouring under Melancholia and is very miserable and. restless. and. Fakes fits of Shouting out. which he says comes on. him and. he Cant help. His bowels. are. usually Constipated requiring medicine. often to move them.

23. Sept. 87. During the last few. days. he has been restless and Excitable. and shouty out. He. takes his food well and. sleeps. fairly well.

October 12 At times he gets very excited and restless shouting and shaking his head and declaring that he is in great misery and that he cannot control himself. at other times he is quiet and pleasant. He sleeps well.

October 25th Lately he has been more settled and he is gaining flesh.

November Gaining a little flesh and on the whole he has improved a little.

1888.
12th Jan: Do. good. clo. Sp. bet. hea. can. Con. "tho.
10th March. "
12th May. Do. ulce. The.
15th May. We. inf. diff. leg.
16th May. Do. leg. ab. me. die. as. Do.

Alexander Hogarth - (Cont'd)

1888.

21st Jan: Patient is very thin & does not seem in good health. All his movements are slowly performed. Bowels very constipated. He is very melancholic. At times he becomes excited & shouts aloud, his head shaking meanwhile. He says he cannot control himself when these "turns" come on, & says they are due to his "thoughts & feelings".

10th March. Mental condition much the same, but he is apparently weaker bodily.

2nd May. On outside of right ankle is a small ulcer, the beginning of which was a blister. There is slight swelling of foot. Put to bed.

15th May. Ulcer has extended, as has also the inflammatory affection. There is now diffuse cellulitis of foot & lower part of leg. Patient is very much weaker within past 2 days. Swelling of foot increased.

16th May. The affection spread higher up the leg, which latter became discoloured as high as groin. Patient became much weaker during the night & died this morning at 9.30. It seemed as though he had no recuperative power in himself.

Died - 16th May 1888.

George Kerr æt. 34.
admitted October 1st 1887

5th Oct. 87. Epileptic and demented. But since Admission has had no fits. On admission he was confused.
Patient was an irondresser by trade. residing at 11 Caithness St. He has been insane since the age of twenty six and This is his second admission to this asylum.

October 12th. Since leaving the asylum he has got pale and thin and his general health has run down. On admission he was quite bewildered and stupid and had evidently passed through a series of fits: he is now less stupid and confused and seems to be emerging.

October 25th. Seems on the whole more sensible and less stupid than when he left the asylum.

1888.

4th April. The following are the number of fits recorded during the last 2 months:-

January 8
February 3
March 8.

He has had no fits during any night. He is always more stupid & irritable after taking fits. He is in good bodily health.

1st October. The following is the record of fits:-

April 3 June 7 - 1 Aug: 5
May 7 July 3 Sept: 6

In June he had one fit by night.
Between the attacks he is quiet & well

1887
4th April.

13th July.

4th Oct.

1890
October

1891
5 March.

July 4.

Geo. Kerr

1889 behaved. Bodily condition good.
4th April. Number of fits in:-

Oct:	7	Jan:	5
Nov:	2	Feb.	16
Dec:	9	March	2.

None during the night.
He is becoming more demented. Still distinctly more stupid & irritable immediately after the fits. Bodily health is good.

5th July. Becoming very querulous and stupid. Fits during June numbered 8. are by day offering in this point a remarkable contrast to Richmond in whose case they occur always at night. B. H & C. Good.

4th Oct. The same complaining man. Wants away again convinced that this time he will do better. Says the Doctors could make him better if they wished. In good bodily health.

1890
October 4 Just the same. always wanting away. There is a very distinct neurotic family history.

1891
4 March. An irritable querulous man who is becoming very weakminded. Still anxious to get away home but is not quite easily persuaded to stay. He is in fair bodily health.

July. 4. This man speaks pleasantly but his one question is when he is to get away. He is rather weak minded. His fits are much as usual in number. They don't seem to give any warning before onset and when past he soon recovers. B. H. & C is fair.

Thomas. Lamb aet 65.
admitted. 2nd October 1887.

5th oct. 87. Patient is confused stupid and somewhat mildly demented and sometimes exhibits delusions. saying that part of his Brain has gone. &c.
He is pale has coat. condition, his tongue is flabby and his bowels are constipated
He is married and. a tailor by trade.
Patient was already confined here in February 1874.

October 12th. Continues confusedly and stupidly and at times rather depressed and miserable and complaining of general loneness of health. He is pale and thin and his health far from vigorous.

October 25th. Still rather confused and stupid, but he is evidently gaining in flesh.

Novemb 29th. At times he is very miserable and complains of his brain being gone; at other times he is fairly well. He seems to be gaining a little flesh but he is still anaemic despite the use of aperients and haematics.

1888.

26th Jan: At present he is pale, but apparently gaining flesh. Usually dull & depressed.

8th April. Bodily health & condition somewhat improved.

30th July. At work in tailor's shop. No improvement in mental condition.

12th Oct: Has not been able for work recently.

1888

20th Dec:

26th Dec:

Thos Lamb.

1888

Has become much thinner. Is very anemic & does not take his food well.

24th Dec: Has been confined to bed for past 6 or 7 weeks on account of increasing weakness & emaciation. Does not take much food, as it is frequently ejected by vomiting, & is fed, therefore, by small meals, chiefly milk, & given frequently. Says he has no pain. Urine free from albumen. Nothing abnormal found on examination of abdomen (palpation & percussion). Nothing abnormal detected in chest. Mental condition has been always the same: Sometimes says his legs are lost, at other times it is his belly, & sometimes his brains which are amissing.

26th Dec: Patient lingered on, gradually sank, & died this morning at 8.5 a.m., without any new feature developing.

At the P.M. examination, ulceration & thickening of the stomach at its Cardiac end, were found, & evidently of a malignant nature. The point of the little finger could not be passed from the oesophagus into the stomach. Pancreas, stomach, duodenum, & transverse colon, were adherent to one another. The stomach itself was much contracted.

Died - 26th Dec: 1888.

James. Sharp aet 56
admitted. 4th. October 1887.

5th. oct. 87. Patient is a pauper. On. examination. patient was. found. to have a severe scalp. wound. right side which has. healed over but not quite healed. said. by him to have. been received by falling down stairs. Hip. right. shoulder. and arm. show. also. marks of injury. with. considerable. discolouration. He cant. raise his. arm. or. move. the shoulder. although he has not. lost any power of grasping firmly. His left. pupil dilates. responds well. Patient has. apparently great difficulty expressing himself. although. he seems. quite clear. as to what he wants. to. indicate. His trouble is chiefly in. finding words. to denote. things or qualities such as "a Tobacco. pipe. a hankerchief. or. the Colour of. flowers. for. instance although. he. is a designer. by trade. not. from his failure to identify them as he. assents when. the. proper name is. suggested to him.

There. is. also a degree of ataxia in the speech. he has. some difficulty with certain test words.

as. far. as. it. is possible to ascertain his present Condition he seems. to be. quite alert. manifesting no delusions. and his Conduct. has. been quite. correct.

October 12 Since admission he has been quiet and

October 25

Decemb 14

1888
16th Jan:

21st Jan:

orderly in conduct and as far as can be judged in his aphasic state he has neither delusions of hallucinations and no evidences of insanity has been noted. The aphasia is slowly passing off.

October 25 He is improving steadily but there is still some aphasia.

December 14 The aphasia has mostly passed away but he seems to be a little weak and inclined to be irritable. The arm is stiff.

1888

Jan: 6th He has apparently improved since last note, & he now speaks with freedom. Has been very anxious to get home & begin work.

He is dismissed to-day on trial, & taken home by his wife.

Jan: 21st Nothing more has been heard of patient since his dismissal.

Discharged to-day

Recovered.

John Paterson aet. 76
admitted 5th october 1887.

10th oct. 86. Private patient. Married. Labouring under Melancholia and apparently was violent before admission. But here he seems quiet and exhibits no delusions although he admits that he may have had some Lapses mem. and seems contented.
His General Health Seems Good.

October 12 Since admission he has been quiet and orderly sleeping well and seemingly quite contented and happy and he has never shown any signs of depression.

October 26 Continues happy and contented and sleeping well: he is out regularly and seems to enjoy his life here.

November 30 He left today on trial.

1888.

6th February. Patient was brought back here to-day. Shortly after leaving the asylum he went to the highlands & while there he continued to keep well, but on going back to his home (Tillicoultry, near Stirling) he again became restless & apparently somewhat violent.

20th Feb: Since admission he has been very troublesom & difficult to manage. He has usually a quiet & a noisy night alternately. On the latter occasions it is quite impossible to keep him in bed & requires to be put in padded room. He is usually very restless & con-

3rd March:

23rd March.

2nd April.

4th April.

John Paterson

-stantly refers to some meeting which he has been ordered to attend, & absence from which means punishment by "hell fire". Altogether he is much depressed & the writer understands, quite changed from his previous residence here.

5th March. Still restless & depressed. During past 2 days he has had an erysipelatous attack of face & ears, but apparently this is now abating.

23rd March. Has not been quite so restless since last note, up till now. Attendants had some difficulty in giving him food yesterday. Very excited again last night. Ate well.

2nd April. During past few weeks it has been evident that this patient is failing. Has not been taking his food so well. Pulse is weak & a little rapid.

4th April. Has become rapidly weaker during past 2 days & since yesterday afternoon has been in a moribund condition. During last night breathing was stertorous & patient was apparently quite unconscious. Death took place at 8.20 this evening.

Died — 4th April 1888.

Frederick Alsop. æt. 57.
admitted october 14th 1887.

æt. 17. 87. a private patient: a manufacturer in England formerly, & married.
His health is rather feeble at present.
He was said to be excitable and foolish in his Conduct before admission.
On admission he is very talkative and gushing. his Speach being almost unintelligible on account of his slurring his words. and also incoherent.
He has also expansive notions as regards his ability and powers. In all probability seems to be a General paralytic.

oct 21. 87. Since admission he has been restless and foolish, but on the whole he is manageable & cleanly in his habits.

October 25 For the last two days he has been more cross and irritable and denouncing the conduct of the attendants and his fellow patients as being rude, and ungentlemanly.

8 & 9 mb 29 He has occasional attacks of severe palpitation but on the whole his health has improved a little: at times he is excited and complains of the rudeness of the attendants and patients and wants them all dismissed. He is very voluble but quite unintelligible in his speech.

1888.
January 4th Patient is foolish in his conduct. Talk-ative & incoherent. It is with considerable difficulty one follows his words owing

Frederick Alsop. (Contd.)

to the affection of his Speech; one would think there was some Paralysis of the tongue: On protrusion of latter no deviation is observed. At present is happy & contented. Genl. health good.

7th April. Quieter in his manner. Not the same foolishness as formerly noted. Occupies much of his time in drawing. There is still the same marked affection of his Speech: he has difficulty in pronouncing some letters & some combinations of letters: he also frequently misapplies words.

5th July. Continuing doing well but no change in his speech. Still comparatively happy & Contented. If anything there is slight dementia. Diagnosis of General Paralysis doubtful. Bodily health & Condition fair - occasionally troubled with "Palpitation". He is quite cleanly in his habits & quite manageable in every way. There is not much improvement in his letter-writing, some what is seen in the one attached to this page.

He is to-day discharged on leave & taken home by his son.

28th July. Discharged to-day.

Relieved.

James. Donald aet. 27 (Physician).
admitted: october 18th 1887

oct. 21st 87 A private patient. In Practice as a Physician in Glasgow, Montcastle Road. — Married. He is said to have been four or five days ill at the present time and is his first attack — He admits having indulged in alcohol and had a brother who evidently caused his death by it also — On admission he was accitable declaring that his Sister had become insane and that he had come here to Consult about her. The attendants who accompanied him stated that he had wandered about the whole night before admission.

October 25

Since admission he has been restless and somewhat foolish in Conduct and has manifested numerous delusions. mostly as to being watched and followed and his professional Conduct was put in the question and he mistakes Dr. Walker of Barrhead & Dr. Mathews of Glasgow as two of the persons raising the question of his professional ability

Nov. 9

His health is fair but seems somewhat soft and flabby — The Patellar Tendon on right side seems greatly exaggerated. But walking and balancing are all performed perfectly and neither complaint of pain or abnormal sensation in the leg but pain is complained of in the head.

Nov. 29

1888 Jan: 2nd

there are occasional twitching about the
muscles of face and lips — But there
is no fibrillary tremour of the tongue — speech
is distinct. pupils are equal and react. to
light — He has during day been rather
quiet and orderly, although at times a
little boisterous and happy. But at
night, he has been sleepless and at times
noisy.

October 25 He has been sleeping fairly well during
the last few nights and he seems to be more
settled generally he is however still somewhat
unconcerned and happy and his memory is
rather weak: he has still the same notions
about a conspiracy existing against him.

Nov^r 9 For the most part he is quiet and on the
whole unconcerned and happy and his manner
raises the suspicion of General Paralysis as well
as his flabby rather expressionless face: he has
still however the same notions as to the conspiracy
to damage him professionally and he has still
at times twitchings about the face and mouth:
occasionally he has a restless night.

Nemb. 29 Lately he has improved considerably
he is less confused and stupid and his whole
manner and expression of face show more
mindedness.

1888
Jan: 26th Present has been apparently improving since last note, although at times one might say he is careless in his

Allan Hislop ætt. 23
admitted. october 31st 1887.

Nov. 3rd 87. Patient a pauper, by trade an iron worker. - was brought here from the Infirmary where, he had been under treatment for. Gonorrhœa. and Sore. - While there he suddenly developed acute mania. which his brother ascribes to carrying a dead body from the ward there. does not seem to be any family tendency to insanity. as far as can be learned. Patient resides. at. 318. Parliamentary Rd. On. admission patient was acutely maniacal gesticulating and. quite incoherent. and. talking loudly. struggling
His General Health. seems poor. he is very thin and worn out looking - on the prepuce & penis a Soft. Chancre. & part Considerably Swollen.
Since admission he has. been very excited and noisy and sleeping very little & seems. a good deal exhausted by his excitement.

Nov. 9th Continues very restless and noisy shouting and gesticulating wildly at times and very troublesome to manage but on the whole the excitement is less severe. He is getting some sleep and is taking his food well.

Nov. 19th He is greatly improved: his manner quiet and orderly and he is coherent in conversation and seems convalescing.

Decemb 8th Discharged today

Recovered.

9th Feb:

James Donald ✠

(Cont'd from page 86).

manner - Occasionally he has been observed laughing by himself, & at times he will play on the piano in a more vigorous manner than one would expect from a perfectly sane man. &

7th Feb: He now seems fairly well, & is able to enter into conversation in a sensible manner. To-day he is discharged & taken home by his wife. He is going to the South of England for a holiday.

Relieved.

Thomas Forrester Aet
Admitted 5th November 1887.

This man has been admitted at the instance of the Fiscal and is chargeable pro tem. to the Barony parish.

He had been apprehended charged with having wilfully broken Windows in Sir William Thomson's house at the College and while in the police station was found to be insane.

He says he has been employed on the "Herald" and "Daily Mail" staff but for some years he seems to have been without any employment and according to him on account this has been because he has been unable to obtain any employment: On admission to the asylum he was talkative and communicative spoke freely about himself and while not admitting that he had broken the windows he did not deny it and quite frankly said that he had a grudge against Sir William Thomson as he had for long been annoyed by persons at his instigation who persecuted him by Electricity and that he was constantly annoyed by voices in some mysterious electrical way which he was incapable of explaining but he was quite sure that Sir William was the cause of this annoyance and that even at the time he was in conversation with the writer that he was being annoyed by the electrical voices and he also declared that he was then being watched by Sir William thro' a telescope. He does not seem to know Sir William in the

Novem^r 8

Novem^r 10

Thomas Forrester Continued.

least but he says he is satisfied that he is the man at the bottom of the whole affair.

Novem^r 8 Since admission he has been quiet and orderly and his conduct in every way correct he however seems to be morbidly suspicious and irritable and now declines to speak on the subject of his delusions and readily becomes angry and threatening.

Novem^r 10 He has been taken over by the parish today and removed from the asylum

Relieved

James Haldane Calder Macleod Aet 32.
Admitted 5th November 1887.

The patient is single, aged 32, a Merchant and resides at 10 Regent Park Square, Strathbungo. This is his third illness within the last six months and is under one weeks duration, no cause is certainly known but he had a fit about ten years ago. A maternal uncle was insane, and a cousin also on the mothers side is Epileptic and a patient in the Asylum.

Fit 10 yrs ago: 1877
H.P. + mal. much
Cousin (male)

He is a well nourished athletic looking man who seems to be in good general health but nothing is known of him by the writer as he was admitted in his absence.

On admission he seems to have been in a state of great excitement and very dangerous assaulting those about him and requiring to be put in canvas and into the seclusion room, two days later when first seen by the writer he was still excited, and sitting curled up in the seclusion room but he had the look of a man emerging from an attack of acute Mania, dishevelled looking and his eyes bloody shot.

Novemb 5th Today he has emerged in great measure quiet and orderly and fit to be out in the grounds but he is still uncertain.

Novemb 9th ?as There is a suspicion that today he may have had an Epileptic fit as he was found dull and stupidy but his bed was dry and his tongue had not been bitten.

Novemb 29 He was restless and foolish for some time

Decemb 9

Decemb 14

1888. 1st Jan:

25th Jan:

29th Jan:

25th Feb:

25th April

30th May

Re-admitted

J. H. C. MacLeod Continued

inclined to meddle with the other patients and he was rambling in conversation and not sleeping well, now however he has settled down and is sleeping well.

Decemb 9 For some days he has been uncertain and irritable and this has culminated in an wild explosion of mania: he is extremely restless and excited wandering about the padded room and requiring strong clothes and dirty in his habits: he is sleepless.

Decemb 14 Continues extremely excited, noisy both by day and night and very dirty in his habits.

21st Dec: During past 10 days he has been emerging from a state of excitement, & for the past 3 days has been quiet, apparently quite sensible & sleeps well at night.

1888.

6th Jan: Patient has been a little strange in his conduct during past 2 days. He has been found talking to himself & is restless at night. At times language was a little obscene. When spoken to, he answers intelligently.

16th Jan: Is much quieter now, but does not sleep well yet.

20th Jan: Is now apparently quite well again & behaves well. Sleeps better at night.

28th Feb: Has been doing well since last note. Behaves in a quiet gentlemanly way.

25th April - Doing well - Nothing to note. On pass for 28 days.

1st May - Has been very well during past month.

Discharged to-day - 18th May 1888.

Recovered.

Readmitted see p. 417.

Mase Seligmann aet 19 6/12.
Admitted 7th November 1887.

The patient is single, a clerk and resides at 9 Derby Crescent Kelvinside.

He is Epileptic and was found in the Streets at Pollokshaws in a fit and taken in charge by the police and then removed to his home: He has had repeated attacks of transient mania associated with the fits and he has been in an asylum in Toronto. The Epilepsy is said to date from an assault on him in Canada in which he sustained a scalp wound, but now there is merely a faint linear scar to be seen and certainly no depression and besides he had been insane two years ago and before going to Canada. There is no heredity acknowledged.

Novemb 9th None of his fits have been seen by the writer but as far as has been ascertained from the patient the aura, which is here present, is of a vague indescribable kind, something of a sense of oppression about the chest and he says he has this for a day or 2 before he is struck down and besides he usually knows when a fit is imminent but he does not seem to be able to tell what it is that guides him still he says he is usually able to get out of dangerous situations and he has no scars about his face.

Novemb 21st Some days ago he had a fit while in the grounds and afterwards was greatly excited. According to the attendants account the fit

Novemb 29

Decemb 4

26th Dec.

25th Jan. 1888

3rd Feb.

14th Feb.

22nd Feb.

Max Deligmann Continued

commenced in both arms simultaneously and that he was able to walk for some paces before losing consciousness and falling.

Nov. 29 His neck was blistered and the blistering has been followed by a crop of boils: he is very peevish and childish and does not seem of robust mind.

Dec. 14 Still continues to have small boils about the face and neck but he is otherwise pretty well meantime.

Dec. 26 Had a fit last night while at church. Has been much excited all night.

Jan. 3 1889 Is now quite well again. The effects of the fit lasted 3 days.

Feb. 2 Patient was visited to-day by his mother & brother, & after leaving them in the grounds, escaped.

Feb. 8 Was brought back to-day from Cubral Police Office by two attendants. He had remained over night in an hotel, & had gone to his father's lawyer to-day, from which place he was taken to the Police Office. He had no fit, so far as known, while away.

Feb. 9 Had three well marked Epileptic fits to-day, after each of which he was violent. The effect soon passed off & he is now (7 p.m.) quite sensible & says he ~~feels~~ is well except that he has a tired feeling in his limbs. During past 2 days he has not been quite so well — somewhat emotional.

Hugh Robertson Aet 28.
Admitted 11th November '57

This man is a pauper chargeable to the City Parish.

He is single, aged 28 a Sailor and has just arrived from New York: he has been on a voyage to India and thence to New York and his said wife have been insane for some months

He is a fairly nourished man but rather pale and with regard to his mental state he seems to be in a condition suggestive Acute Dementia. he is quite lethargic and passive and seems to have neither memory of time or place.

Novemb 14 He was removed by minute of the Poor law board of the parish and was taken in charge by his father.

Relieved.

24th April.

Max Seligmann
Cont. from P. 94.

24th April. Has been entirely free from fits since last note, & during past 6 weeks his general health has been very good. During past 3 weeks he has had the liberty of the grounds.

Discharged to-day & taken home by his father.

Relieved — 24th April 1888.

Michael Shay Aet 40.
Admitted 17th November 1887.

This man is a pauper chargeable to the City parish.

He is aged 40 a Labourer and he is said to have been insane only a few days and so far as known this is his first illness and no cause is ascertained nor is any hereditary tendency admitted.

Novemb 19th He is a poorly nourished man and he has talipes Equinus of both feet: On examination there is found to be evidence of phthisical disease at the right apex, there is some flattening & diminished expansion there and the percussion tone is dull while the R.M. is harsh and expiration prolonged equalling or exceeding the inspiratory in duration; the V.F. and V.V. are also increased and at times a râle is heard: he complains of pain over this area and he has a little cough and spit: On one observation the evening temp: was found normal and no sweating has yet been reported at night.

Mentally he is dull and very stupid unable to give any satisfactory account of himself, indeed he seems hardly able to comprehend a simple question relating to his own history and he has all the appearance meantime of a demented person.
He is quiet and orderly sleeps fairly and takes his food well.

Novemb 29 His mind has cleared up wonderfully

Michael Shay Continued

he now seems to be very well, alert and active
and quite coherent: he says he had been drinking.
Decemb 8 He is now very well and is today discharged

Recovered

William Easton Young aet 25.
admitted 19th Novemb. 1887.

Comp Emb

The patient is aged 25. Single, without occupation and resides at 2 Teviot Terrace Kelvinside. He is said to have been insane for about a year but as far as can be judged he seems to be congenitally of weak mind, albeit not of a low type either physically or mentally; he is however stunted in stature and is said to suffer from asthma and his chest is badly shapen while he coughs in a staggery uncertain way: he is very anaemic and is said to suffer at times from piles. There is said to be no? family tendency to insanity but his father died from paralysis.

At home he is said to have been restless and wandering at nights and to have more than once attempted to get free to the house, he is also said to have attempted to jump over the window and again to have made more than one attempt to drown himself.

Novemb 21 Since admission he has been rather obstinate and very stupid either unable or unwilling to answer questions and he has been fed with some difficulty: he seems to be very fatuous and silly.

1888.

3rd Jan: Patient is considerably demented. He refuses to answer any questions. Takes his food fairly well.

10th April. Is very silly & stupid in manner. Only

1888

30th June.

28th Sept.

1889

10th Jan:

30th Jan:

4th April.

13th June.

16th Sept.

pages 100 & 101 absent
They were not removed
21.7.37. HS

Wm Easton Young.

1888.

occasionally answers questions, & then he attempts to use long words.

30th June. Is very slow in action & speech. Never does anything unless he is told.

26th Sept: Nothing new to record in this case. Is in good bodily condition at present.

1889

8th Jan: Within past 10 days patient has been very noisy & troublesome. On one occasion he lay on the floor & attempted to take his clothes off. He has been put in the refractory gallery. He has been talkative at nights. This condition is in marked contrast to his previous quiet & retiring disposition.

24th Jan: He has again settled down into his former way, & has been removed from the refractory gallery.

4th April. Nothing new to add in this case. He is still childish in manner. Is, at present, in good bodily health and condition.

12th July. Has been very noisy during the last week and abusive in his talks. Walks about in a stiff manner with a shuffling gait. Very slow in his remarks but believes himself to be the possessor of much wit and smiles after making a remark in a silly way. Takes his food fairly well but sleeps badly.

16th Sept. Has calmed down considerably and is more retiring in his disposn. talking less and not interfering with the others or making complaints about the attendants. Is also sleeping better and has not been for some time in the Refractory Gallery.

Jr. 4.40

Thomas Moore aet 28.
Admitted 20th Novemb. '87

This man is a pauper chargeable to the City parish.

He is single, aged 28, a Tailor and he is said by his brother to have been manifestly insane for eighteen months but he has been able for some work till two weeks ago when his conduct had become so bad that he had to remove him from Alexandria and take him to his own home.

Since then he has been very restless & foolish in conduct and sleepless and noisy by nights and behaving generally in a very insane way. His mother died insane in the Bothwell Asylum.

On admission he was boisterous and foolish in conduct indulging in all kinds of gestures and when spoken to only responded by some facial contortion or a yell nothing could be got out of him.

Novemb 21 Still foolish and restless and inclined to get into mischief by meddling with the other patients.

Novemb. 26 Continues very excitable and foolish and requires constant looking after.

Decemb 10 Although still very restless and foolish he is more manageable and less apt to strike and get into mischief and is at times out at work. He is very scatterbrained and foolish.

1888.

2nd Feb: During past month he has been restless &

2nd June.

2nd Oct.

1889

2nd Jan:

28th Feb.

3rd August

4th October 1890

October 4

1891

5 March.

Thomas More.

foolish in conduct, & frequently gets into trouble with the other patients.

3rd June. A little more manageable & sometimes is able to assist the attendants in the grounds.

3rd Oct. Is becoming demented, but still at times very troublesome.

1889

2nd Jan. Of late he has been more restless & foolish. He is very untidy in his dress. Often gets into trouble by interfering with other patients. Bodily health good

28th Feb. Hæmatoma Auris (left) observed. Is now confined to airing court, on account of his having become so troublesome. He is also very dirty in his habits. Bodily health fair.

3th August. Still very dirty in his habits, mischievous & violent. Noisy occasionally. B.H. T.C. good. Does no work but is not confined to the airing court.

4th October. Unchanged.

1890

October 4 Very noisy sometimes & treacherous & bad at all times. Requires great care & watching & is not worth much in the way of work. B. H & C. fair.

1891

5th March. During the past six months he has not been so troublesome. He can never however be trusted. He is in good bodily health & condition.

To Vol IV p. 485

105

Robert Stewart Govane aet 33?
Admitted 21st Novemr 1887.

Novemb 10 He was admitted today as a voluntary patient.

He is a man about 40 in good general health and allegs he admits both alcoholic and sexual excesses at times he denies having any reason to believe that he has ever had Syphilis and no evidence is discovered.

3rd Dec: He seems to be very insane being much annoyed by voices which speaks to him both by day and night and prevent him sleeping: the voices comes from the walls and also from his belly and they urge him to do all sorts of things such as to gouge out his eyes and to kill himself and to make away with his property and he says they threaten him with tortures if he fails to do as they tell him and he says he is afraid that he will be impelled to do as they tells him altho he is half persuaded that the voices are unreals. He seems to be very much distressed and miserable.

1888. Feb 6: On an examination of a hurried kind no evidences of any organic disease is found anywhere, his hearing is good on both sides he has no urinary troubles nor does he suffer from headache or vomiting and the urine is as in health: heart sounds feeble but free from murmur and bowels said to be regular.

Novemb 26 Still complaining bitterly of the voices.

R. S. Sprague Continued

Decemb 10 Very wretched and miserable and greatly annoyed by the voices which tell him at times to put out his eyes, at other times they tell him to give away his money: he seems to be gaining a little flesh and he is sleeping well.
He is taking 5 gr. Ferri Phos. Co and Pil. Phosph gr 1/30 three times a day.

31st Dec: Constantly reiterating that something must be done to dispel the voices. Takes no interest in anything. So miserable & depressed.

1888.

6th Feb: During past 2 weeks there has been a marked improvement in his condition. The "voices" have quite gone & he laughs at the idea of having been troubled by imaginary "voices". The change in his condition may be due to some extent to the fact that it is now the end of his quarter's residence, & he has been of late very anxious to get away. At all events he seems now quite well, & he is discharged to-day.

Recovered.

Samuel Brown Aet 29.
Admitted 22nd November 1887.

This man is a pauper chargeable to the City Parish.

He is aged 29. single. a Chair maker and is said to have been insane for two weeks and no cause is known he was however a patient both at Lenzie and at Bothwell asylum and was discharged sometime this year from the latter.

He is fairly nourished and with the exception of a little excited action of the heart no evidence of visceral disease is found.

He complains of being annoyed by his mother and sister and his food poisoned but he cannot understand, he says, from what motive: he also declares that all his blood has become water and that he cannot live in that state and that he has come here to get well. He is said to have been dangerous at home and to have threatened his mothers life in the presence of the officers who brought him here.

Novemb 29 Quiet and orderly since admission: he seems somewhat silly and demented.

Decemb. 10 He is perhaps a little improved since admission, he does not now speak of his food being poisoned but he seems silly and rather mindless.

1888.
2nd Feb: Seems to be somewhat demented. He i

1888

5th May. Stup pre Pati dis a th injur

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30th Dec. 1889 both

30th April. Pati He o with good

30th Aug. Stu Gloom of m

1890 Bothwell. no Stu gen C. a

1891 5 March. Pa Com Fran bet goo

Samuel Brown.

1888.

stupid & dull in manner. Does not comprehend some simple questions.

5th May. Patient is still of the same slow, dull, disposition. However, he sometimes assumes a threatening attitude, but has not, as yet, injured any one.

1st Sept. No improvement in mental condition. Assists the attendants regularly in the wards. B. in good bodily condition.

3rd Dec. Nothing new to record in this case.

1889.

1st April. Patient is sulky & uncertain at times. He occasionally gets into trouble by interfering with attendants & other patients. Gneral health good.

30th Aug. Still of very uncertain temper and untrustworthy. Gloomy & sullen at times. Is still suspicious of his relations. Eats & sleeps well. B. H. good.

1890

October 11. No real change in this man's condition. Still suspicious & not at all frank, not giving free expression to his delusions. B. H. & C. are good.

1891

4th March. Patient has lately been more talkative & complains of being annoyed by ladies in France & America. He is very weak minded but does a little talking work. He is in good bodily health & condition.

From To vol IV p. 486.

William de Jague aet 35.
Admitted 25th Novemb. 1887.

This man is a pauper chargeable to the City parish.

He is aged 35. married, a Spirit Sales-man and he is said to have been insane for one week the alleged cause being intemperance. This is his first illness and there is said to be no family tendency.

He is a fat but rather flabby waxy-looking man and he has all the appearance of a man who has been drinking: he is apprehensive and nervous and extremely tremulous and his tongue is coated and sodden and his breath foul.

Novemb. 26 He seems to be labouring under Mania a Potu, restless and suspicious and facile and somewhat maudlin. he seems to have visual hallucinations and at times he is in search of some money he has lost among the bed linen. He slept fairly but at times was restless a little.

Decemb 10 He is emerging but is still rather shaky: he is pale and flabby and the urine contains a trace of albumen but no renal casts. He is put on Iron and Arsenic.

1888.
16th Jan: Has been doing well since last note. Takes food well.

Discharged to. day.
Recovered.

1887
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October 14th Vana
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Nov. 2nd
Dec. 9th

John Shields

(from p. 61)

1889

2nd March. Did not remain long well, & for the past 3 months has been as depressed as ever. Every now & again he refuses to take his food & requires to be fed by stomach tube. Says he "must not live by bread alone", & that he wishes to die. Is considerably emaciated.

June 3rd. During the last month this patients state has varied considerably. For a week he requires to be fed with the tube 3ce daily saying that he has meat "we know not of". He has been rather better of late but is very thin and goes about - or sits - with head on breast and hands in his pockets.

August 8th In much the same condition. Quiet as a rule, but sometimes despondent unbidden when he is fed. Sleeps well and talks with the attendants but not much with the Doctors.

Sept. 10. Has gained 3½" during the past month and has not required to be fed by tube during that time. Put on Easton's Syrup with benefit. Still very depressed but perhaps not so much as he was. Wrote out a scheme for the purification of the Clyde and takes an interest in current topics

October 4th Variable. Has had to be fed recently for some days. With the old ideas. "Except ye forgive men their trespasses &c" Nothing new in his condition.

Nov. 23rd Little change to be noted. Still requires occasional feeding with the tube. Still quotes scriptural passages to justify his refusal to take food & answers "Yes" & "nay." Expression. Is gaining in weight.

Dec. 9th Since last note tube has been used thrice daily.

to p. 5-93.

James Maitland Meikle aet 31.
Admitted 25th November 1887.

This man is a pauper chargeable to the City parish.

He is married, a mechanic, aged 31 and this is said to be his first illness and of only a few days duration the alleged cause being religious: no H.P. is ascertained.

He is a spare man, neglected looking and reduced in condition: he is sallow and says that when in America he suffered from Malaria and was in hospital but it cannot be made out that there is any enlargement of the Spleen.

He has much the look of a man who has been insane for some considerable time and as far as can be made out from him he has been without employment since returning from America two years ago: he is excitable and talkative and has many delusions mostly of a religious cast, such as that he is a prophet and has a special mission and has audible communications from God and Christ and that he has been sent to testify for Christ & he says he has delivered his message in the Jail Square. He also says he divorced his wife in September last according to Gods will.

Novemb 09 He has still the same fancies as to being Gods messenger and a prophet: he has been quiet and orderly since admission and well pleased. He has Scabies.

Decemb 10 Continues to show the same elevation: he is still Gods prophet and receives His Commands.

James Maitland Meikle (Cont.)

1888.

15th January. This patient seems fairly well, although at times he still speaks of his powers as a prophet. Bodily health good.

29th February. He rarely speaks in any way which might indicate brain disturbance.

31st March. As far as can be seen this patient now seems fairly well, mentally; but he is ill-natured & objects to being much interfered with. He frequently asks when he is to be dismissed & seems much displeased when no satisfactory & definite answer is given. Has been unwilling to do any work since admission.

17th May. Practically no change since last note. Bodily health & condition good.

Discharged to-day.

Recovered - 17th May 1888.

William Coulter Aet 33.
Admitted 28th November 1887.

This man is a pauper chargeable to the City parish.

He is a Brushmaker, aged 33, married and he is blinds and says he has been so as long as he can remember.

He is anaemic and soft and seems to have lost condition as he has all the look of a man who has come down in bulk: he walks rather badly and says he has noticed this for some weeks and that he has even fallen on one or two occasions lately but he makes no complaint of pain or any unusual sensations anywhere nor can pain be elicited on percussing the spine in its whole length: sensation seems to be unimpaired in the legs but the patellar-tendon reflex is extremely active on both sides and there is an attempt at ankle clonus on forcibly flexing the ankle: the patellar-tendon reflex can be induced on tapping both the front of the Tibia and over the extensor muscles of the thigh and there is an approach to the tendon reflex in the arms.

This is said to be his first illness and to be of a few days duration only and no cause can be ascertained and there is no family tendency.

Novem 30 Since admission he has been quiet and orderly and sleeping well but while at home he is said to have been restless sleepless and irritable and inclined to wander out without clothing.

He has exhibited many delusions such as that

William Outer Continued

he is going to marry the Princess Alice, at other times he says he is governor of a prison, he is also annoyed by voices and by the telephone: He seems to be weak and feeble and rather defective in memory.

December 10 Restless and sleepless at times and he is very foolish: he says he is going to marry the Empress of Norway and is very happy at other times he is greatly distressed as he says his wife has been brutally murdered.

1888.

9th Jan: He is unable to walk well, & while sitting in the gallery, he frequently suddenly gives a shout, & complains that some one makes him do it. He is in fair bodily health.

4th April. Still the same restless, foolish man. In fair condition.

2nd Aug: No change to record in mental condition.

31st Nov: Often foolish in conduct & answers many questions in an irrelevant manner.

1889

2nd March. Still restless & foolish. Is becoming more deeply demented. Bodily health fair.

August 15th a deeply demented patient in indifferent health. Eats well but sleeps indifferently. Becoming more deeply sunk into a vegetative existence.

October 4th Unchanged.

1890

October 4. Sometimes a little excited but otherwise no change mentally or bodily.

to vol. II p. 270.

John Grier aet 37.
Admitted 8th December 1887.

This man is a pauper chargeable to the City parish.

He is married, aged 37 a Blacksmith and resides at 15 Kennedy St. This is said to be his first illness and to be of a few weeks duration but really nothing seems to be known of him as he has not been living with his wife.

He is a fairly nourished man and his general health seems to be average; he is however very much depressed and miserable and very whimsical; he seems to have been ill for some time and going to medical men and he is now in great distress as he says he has been poisoned by some pills he got from a Dr Carmichael: he complains too of his "member" having been destroyed, and of some vague "beating" about his belly but no pulsation can be found on palpation nor is there any reason to suspect an aneurism. He presents some suspicious signs of General paralysis: he is flabby and his face rather expressionless while there is an quite distinct fibrillary tremor in the tongue and at times about the lips and his articulation is at times bad, he trips badly with test words and the pupils are perhaps unequal but react to light: he walks and balances well: the Knee jerks is diminished on both sides. There is a strong suspicion that he masturbates.

December 14 Restless at night, by day he is very silly and foolish, often complaining of the medicine he gets and at times he is very emotional.

John Grier

1888.

8th Feb: Still restless & foolish in conduct. Bodily health fair.

9th May. Practically no change in condition. The suspicious signs of general paralysis are still as marked. Often sleepless & talkative at night.

3rd Aug: No change to record.

2nd Nov: Seems to be becoming more mindless & foolish; often very emotional.

1889.

5th March. Hæmatoma Auris (right) observed a week ago. General mental condition not at all improved. Of late has been very restless & noisy during the night.

20th August. Been quieter since visites came. Evidently getting into a deeper state of dementia. Evidences of G.P. rather confirmed but not at all decisive

1890.

October 14th. This patient died today at 2.15 when at dinner in the dining Hall. Choking was thought possible but though he was seen within a few minutes & a bougie passed there seemed to be no obstruction. He has no distinct symptoms of obstruction & dies in a few minutes.

On the following Monday a P.M. was made and the following found. Distinct organic B.P. changes in the brain & these advanced. Valvular disease of the left side of the heart & hypertrophy of the left ventricle and in the larynx a piece of meat partially but not entirely obstructing the passage. The matter was reported to the Commissioners of Lunacy & the P.F. but they saw no reason to interfere.

Died

Death was caused by 1. Valvular disease of the heart. 2. General Paralysis 3. Choking & pharynx of glottis

Andrew Rowan Aet 34.
Admitted 9th December 1887.

This man is a pauper chargeable to the City parish.

He is single, aged 34, and a Weaver by trade. He has been drinking and attempted suicide by cutting his throat but he has made the merest scratch over the front of his neck not more than cutting the skin.

He is labouring under Delirium Tremens, extremely apprehensive and tremulous, shaking in every limb and starting when anyone comes near him: he has hallucinations of both sight and hearing declaring that he sees the gallows being erected on which he is to be hanged along with two fishmen and he says he is also be put into boiling lead. He admits having made an attempt to cut his throat to escape being hanged and says he is to be hanged on account of being in debt.

Decemb 14 Seems to be emerging he is less tremulous and seems to have lost his delusions and the ocular hallucinations but he is still a little suspicious and distrustful. He is sleeping well.

23rd Jan: 1888 Has been doing well since last note To-day he is discharged.

Recovered.

1890
October 11. Pat... brea... a lo... (B. M...
1891 5 March. ...
Aug. 28. Scen... (B. M...
Dec. 25th ... shut ...
1892 April 12th ... Retu... sing... Contai... settle...
Aug. 17th ... not ... Rem... up ... Keeps ... rather ...
Dec. 16th ...
1893 June 29th ... Thos ... comm... He ... and ... a ...
Dec. 27th ...

Robert Neil

from p. 70.

1890

October 11. Patient is melancholic occasion speaking above his breath and does not work any. He has been ill a long time and his condition presents no change. B. N & C. fairly good —

1891

March. Can with difficulty be got to speak. Evidently very depressed.
He is in fair bodily health & condition

Aug. 28. Seems to have no delusions but is very depressed. B. N & C. indifferent.

Dec. 25th Walks about & stands against the wall with his eyes shut & face wrinkled up & hands in his pockets: sometimes he sits, but rarely. He is very depressed.

1892

April 12th Reticent & shunning intercourse. There is more than simple depression. Some delusions must influence his continued taciturnity. his curious habits of walking about restlessly with eyes shut. as forth.

Aug. 17th Not much to be made of this patient. Never speaks & does nothing but pace up & down, whether in doors or out of doors. Keeps his eyes ~~and~~ shut and won't speak. Greatly depressed. He is pathetic and does no work.

Dec. 16th

1893

June 29th There is no change in his condition. He refuses to enter into conversation. N H & C. poor.

Dec. 27th Her is thin, pale and anaemic. He shuns observation and takes no notice if spoken to. He & still has a depressed look on his face.

To Vol. V p 336

Andrew Paterson, aet 66.

Admitted 13th December 1887.

The patient is single aged 66 a Tanner and resides at Dullibody near Stirling. He is said to have been insane for about three weeks and although no cause is alleged he has had business losses it is known and his brother was recently a patient in this asylum.

He is a spare man and seems to have lost a little flesh lately but his general health seems to be fair.

On admission he is labouring under Melancholia he is very depressed and miserable, and has the looks of settled gloom; he says he is poor and has no money to pay for food, yet since he came here he has taken his food fairly. While at home he was restless and refused his food and caused all the fires in the house to be put out because he was unable to pay for fires and had no means.

1888.

31st Jan: Is very melancholic. Thinks he is going to die. Says there is no use taking any more food & refuses to take it: At other times says his stomach will burst if any more food is put in.

22nd Feb: Since last note he has on several occasions refused to take food, & has had to be fed with the stomach tube, although great difficulty was experienced in doing this. Sometimes the mere showing of the stomach tube to him is beneficial, at other times this is of no avail. He is

1888

12th March. Doc
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1889

20th March. Noth
he does
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Dole

June 13th

July 25.

Andrew Paterson.

1888

still very depressed.

16th March. Does not now require to be fed with stomach tube. Much depressed. Thinks that people are dying so quickly that they will all be gone before him.

4th May. Some improvement since last note. Not quite so melancholic. ~~No~~ No delusions detected recently. Sleeps well at night.

2nd July. Improvement has continued. Bodily health also good.

8th Sept. Has been very well during past summer. He has a very quiet manner & does not enter freely into Conversation with any one.

5th Dec. Nothing special to note in this case, except that he seems to be of a quiet retiring disposition. He behaves as a gentleman, & is tidy & cleanly in habits. Bodily condition good.

1889

26th March. Nothing new to record. Bodily health fair, but he does not seem to be so good at walking as formerly. Is quiet & retiring in nature. Does not speak unless spoken to.

June 13th. a man of a reliing disposition and very depressed & possibly suicidal tho he has not attempted it. Quiet & unassuming but very nice to speak to. Does not talk about his delusions and seems on the whole to be improving. Has given some trouble on account of a bad habit he has of picking his head causing it to bleed.

July 25. Stationary. Cannot be said to be becoming worse but no improvement mentally tho' physically he is in fairly

To 441

James Porteus, Aet: 33 years.
Admitted 17th Dec: 1887.

Patient is a pauper, sent by the City Parish.

He is married, aged 33, & is a Spirit-salesman to trade. He resides at 48 London Street Glasgow. He is said to have been insane for one week, this being his first attack. Supposed cause, intemperance. No H. D. ascertained. He is certified as "talking incoherently" complains of "beasts coming to him at night & preventing him from sleeping." Also "very excited & furious".

On admission it was seen that he was evidently labouring under delirium tremens. He has been drinking for some time. Last night, while attempting to enter a shop "to take stock", he was apprehended by the police. He was very shaky & suspicious. Thought that beasts were crawling about the bed clothes; he also picked the latter, thinking he was lifting money. The right ear is cut, & there is a slight wound on right side of forehead. There is also evidence of bruises on the body & limbs. General bodily condition is indifferent.

1888
5th Jan: 1888. Patient was only confined to bed about a week. Improvement has been rapid. He now feels quite strong & takes his food well. Mental condition apparently now normal.

16th Jan: Is now apparently quite well. Discharged to-day

- Recovered -

1887.
15th April.

John Scott Henderson.
(Contd from D. 34)

1888.
15th April. Patient never regained consciousness & died at 2.40 this morning.

At the P.M. Examination General cerebral meningitis was discovered, apparently recent. Granulations were observed in 4th Ventricle of brain. Under the dura mater between it & the arachnoid, a distinct fibrous membrane existed; it was greyish in colour & minute haemorrhages had occurred in it. Nothing abnormal observed in heart or lungs. Urinary bladder was inflamed (chronic cystitis), ureters were dilated, & in each Kidney the Calyces were enlarged & contained pus: also small abscesses were found in Kidney substance itself.

Died — 15th April 1888.
Aet: 42

John Gentleman, Aet: 30
Admitted 23rd December 1887.

Patient is single, a watch-maker & resides at 3 Albert Drive, Crosshill, Glasgow. His sister is a patient here, suffering from puerperal mania, & was admitted on 31st Oct: 1887. The present attack is said to be of five days duration, although for some months he has not been, as his brother says, "quite right". The supposed cause of his illness is stated as "retired life" & the fact of his sister becoming insane.

On admission patient was maniacal, & some force had to be used in taking him to the ward. He is constantly talking, but in a very incoherent manner. He has not shown any violence towards others since admission although his brother says at home he threatened to cut his throat with a razor, believing he could do this without drawing blood. He says he is "God" & is able to work miracles.

Patient is rather thin & seems a little exhausted. There is marked deformity of both legs (genu valgum), & he requires a crutch in walking. On examination of heart & lungs, nothing abnormal is detected. Tongue is slightly furred but is moist.

31st Dec: Since admission he has not taken much food, always requiring to be coaxed

1888
17th Jan:
23rd Jan:
2nd Feb:
28th March
8th May
15th June
30th July
10th Sept:
31st Oct:

John Gentleman — cont:

During past two days he has practically taken nothing, & yesterday he was fed by the stomach tube. To-day, however, he has taken a little without such aid. He still talks incoherently, & does not sleep much

1888
17th Jan: During past week he has been very quiet, sensible, sleeping & eating well & able to be up. Last night however, after going to bed, he became rather talkative. To-day he is more so & quite incoherent; but he is, as yet, quite manageable.

30th Jan: Since last note has been constantly talking. At times is quite hoarse.

21st Feb: Quiet at intervals during past 4 weeks, but general condition not much changed.

2nd March Quieter during past month. Not so talkative & he is sleeping better at nights.

8th May. Practically unchanged in mental condition. Seems to be settling down into a condition of chronic mania.

1st June. Apparently becoming more demented. Frequently talks in a quiet but incoherent manner. ~~Slept~~ Sleeps well at nights. Is in good bodily health.

30th July. No change to record.

10th Sept: Constantly laughing & talking to himself. Sometimes he is mischievous.

7th Oct: Reckless & foolish in conduct. Recently he tied a piece of thread firmly round his penis, & which produced some ulceration & sloughing before it was observed.

323.

Alexander Walker Aet: 25.
Admitted 28th Dec: 1884.

Patient is single, a clerk, & resides at 36 St: Vincent Crescent, Glasgow.

He is said to have been ill about six months, this being his first attack. The cause is uncertain & there is no known hereditary predisposition.

The first abnormal feature in patients manner was observed in June last when his memory became defective. This, altho' trifling at first, gradually became more serious, & the general lack of interest in business affairs contrasted strongly with his previous active & intelligent conduct. He also became very reticent, even to his nearest relations. Patient was abroad about 3 years ago, for his health, & while off some coast had "fever". His brother thinks he "has not been quite the same man since."

Patient is about 5 ft: 11 ins in height, of erect attitude & fairly good physique. His appearance is that of stolid indifference to all that is going on around him. If he is sitting it is with difficulty one can make him rise, & if he is standing, he will remain so, till he is pushed down. He can walk, but only if some one takes him by the arm & pulls him along. When asked a question he stares at you & will make no attempt to answer it,

11th Jan: 85.

Alexander Walker - Cont^d

unless it be repeated frequently, & in some instances, even then will not attempt to speak. Tongue is protruded slowly & hesitatingly, but does not show any marked tremor; it is slightly furred, but moist. Eyes normal - pupils mobile, & practically equal. Lungs & heart apparently normal. Bowels costive.

He is said to have had Syphilis some years ago, but how it manifested itself is not, at present, known.

11th Jan: /88. On the whole, there is practically no change in Patient's mental condition. He is still of the same expressionless appearance. The writer has only seen him smile once since admission. There is still the same difficulty in getting him to answer questions. Once he came to the ward door & exclaimed in a stammering fashion "I must have grown less - I used to be 10 ft 10 high"! When asked about this statement he at once lapsed into his usual condition, not giving any explanation. He always takes his food in an exceedingly deliberate, slow manner. Bowels require laxatives. He sleeps fairly well at night. would sit motionless in a chair all day, if the attendants or other Patients did not move him about. Patellar tendon reflex apparently normal.

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James Alexander Dalziel Aet. 21,
Admitted 2nd January 1888.

Patient is single, a clerk, & resides at Prospect Hill, Cambuslang.

He is said to have been ill only six days, this being his first attack. Lately he has been "studying" a great deal, but beyond this, his friends do not know of any cause for his present condition. An uncle of patient was an inmate of this asylum some years ago, but suffered only from delirium tremens, & has been quite well since his dismissal. There is no other hereditary predisposition.

Present illness has apparently been of sudden onset. Patient went to bed at night, complaining of some headache, & next morning at breakfast, asked many absurd questions & talked incoherently.

On admission he was seen to be labouring under acute mania, constantly talking in a very incoherent manner. but one prevailing topic being that he had been sent from God & that he could "do all things", "cast out devils" &c.

He is of medium height & his bodily condition is fair. At the proximal end of the right middle finger there is a wound, said to have been the seat of an abscess which had been lanced — it is now healing. Bowels are slightly loose. Tongue is furred & rather dry.

5th January — Still very talkative. Sleeps very little

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at night – Some difficulty in getting him to take food. He is weaker than on admission.

5th Jan: Mental Condition not much changed. Slept none last night, & was very noisy & talkative – Bowels now more regular. Tongue cleaning.

6th Jan: Patient is quieter & more reasonable, but still incoherent in his talk. He sleeps better, & takes his food without trouble. Tongue much cleaner & is moist – Bowels more regular, requiring a purgative occasionally. During past week he has been able to walk about the airing-Court with an attendant. Sore on finger quite healed.

15th Jan: If anything is a little quieter, & sleeps a little better at nights. Occasionally passes water in bed. He is still very foolish in his talk.

1st Feby: Still unsettled. Some nights sleeps fairly well while during others he is restless & talkative.

23rd Feby: Condition, on the whole, does not show much. Has been getting sedatives at night when required. Conversation still foolish. Has been occasionally caught in the act of masturbation.

27th March. During the past 16 or 17 days he has been quiet & sleeping well at night. Quite rational in conversation, & altogether seemed as if going to get well. Last night, however, he became again restless & talkative, & broke a ewer in his bedroom. This, in

p. 194

George Murdoch, Aet: 34.
Admitted 3rd January 1888.

Patient is single, a miner, resides at Post office Row, Muirkirk, Ayrshire, & was admitted to-day as a voluntary Patient.

He acknowledges to having begun the habit of masturbation when 13 years of age, & continued it regularly for about 10 years. When about 23 years of age he consulted medical practitioners & quacks & since then he says he has never once practised self abuse. During past 7 years he has been very depressed & often threatened to commit suicide, having had pistols loaded to shoot himself, & ropes prepared for hanging. Thinking he might improve his condition he went to Australia in end of 1886, Returned in March 1887, in good bodily condition, but still depressed in mind. On returning to this country he was accused of being father of a child, which had been born since he left Scotland. This he stoutly denies but notwithstanding, ever since then, he has been much worse, & frequently tried to kill himself.

So far as known there is no H. P.

Patient is less than the average height & is firmly built. He says he is reduced in bodily condition, & he has this appearance. His weight at present (on admission) is 10 St. He has a depressed miserable appearance frankly acknowledges the cause of his

Geo: Murdock (Contd)

illness, & although wishing to get well, thinks he has been too long ill for this to take place. He frequently bursts into tears, & mourns over his condition.

On examination of heart & lungs, nothing abnormal is detected.

To get Fr Easton's syrup 3 times a day: also good diet & 1 bottle porter daily.

17th Jan: Decidedly more cheerful. Not talking so much about himself. Takes his food better & sleeps fairly well, although some nights is a little restless. Has been employed out door, digging &c. Rather inclined to be lazy.

2d Feby: Practically no improvement since last note. Does not talk much with other patients. Works daily in the grounds.

2nd April. Still depressed. His first quarter being now finished, he says he must go home as his money is done & he does not think he will be any better here. Has never been a very active worker; & when indoors he frequently lounged about the couches, & often found sleeping. To day he is discharged & taken home by his brother.

Relieved — 2nd April 1888.

Daniel Ferguson, Aet: 50.
Admitted 3rd January 1888.

Patient is married, a warehouseman, & resides at 1 Carlyle Terrace, Rutherglen. Present illness is said to be of three months duration, the cause not being distinctly known. He is said to have had, about six years ago, a melancholic attack. Although ill for 3 months, yet his present excited state has only lasted for the past month, more or less. There is no known H.P.

His friends state that his illness has been coming on gradually during the past three months. During the past month he has frequently been excited & boasted of his capabilities & influence. At times he would "lose his temper" & the morning, is said to have thrown a 'hatchet' at his wife: His previous health has been good & he has been of temperate habits.

Patient is about 5ft: 10ins. in height, of average physique & appears to be in good bodily health.

He at once enters into conversation with a stranger & takes him into his confidence. He talks incessantly, in a loud manner, about his business affairs, mixing these up with religion. He says he will punish severely those who brought him here, & specially

3rd Jan:

5th Jan:

8th Jan:

15th Feby:

his wife. He Complains of the Cruelty & inattention of the latter, who, he says, threw a hammer at him this morning, (the truth being as previously stated). He believes that he has wealth while he practically has nothing. He talks about his strength & his ability to fight any one. There is no evidence of Paralysis – no affection of speech. (The character of his delusions would indicate G.P.).

Lungs & heart examined, but no abnormality detected.

10th Jan: Patient conducts himself in a foolish way. He frequently gets into "scrapes" by interfering with other patients. He reproves the latter when he thinks they act or speak in an offensive manner; he frequently is heard to swear himself.

20th Jan: Conduct much the same, even more foolish. Always walks quickly, sometimes runs, in the airing Court. Has been tearing his underclothing & blames the attendants, who he says, use him roughly. He is rather reduced in bodily Condition since admission.

29th Jan: Has become very destructive with his clothing. Is rough in his manner. Uses very foul language. At times talks with exceeding politeness. Bodily condition reduced.

15th Feby: During last fortnight he has gone "down

John Whiteland, Aet: 32 years.
Admitted 3rd January 1888.

Patient is a Pauper, chargeable to the City Parish, Glasgow.

He is married, a "holder-on", & resides at #3 Market Lane. He is said to have been insane only for a few days & the alleged cause is intemperance. This is his 2nd attack. He was treated in Bothwell Asylum in 1886 – the cause of this 1st attack is also said to have been intemperance).

He has been drinking freely during past few days. He is certified as "maniacal, talking incoherently, & dangerous to himself & others".

He now seems to have got over the height of the attack. He is talkative, & does so rather incoherently, but he is not violent or unmanageable. Tongue furred. Eyes congested. On his scalp are some abrasions, & there are a number of discolourations on his limbs.

5th Jan: To-day he is quiet & sensible. Able to get out of bed & is not very shaky. Bowels freely moved since admission. Takes his food well.

23rd Jan: Has done well since last note. Discharged to-day.

Recovered.

Re-admitted – 26th April 1888
see p. 207.

Alexander Walker
(from page 126)

4th Jan: Transferred from East to West House to-day.
2nd Feb: Still listless & dreamy. Will not speak to any one.
26th Feb: During some nights he is talkative & restless. Sometimes passes water in bed.
2nd March. More restless & talkative during past few days. This morning between 12.25 & 1.30 a.m. he had 4 distinct epileptic fits. 8 hours afterwards he was still unconscious.
4th March. Slept a little last night. Still restless. Passes water in bed.
25th March. Able to be out of bed again. Seems weaker bodily. Dementia apparently deeper.
3rd April. Very talkative during past few days — quite incoherent & childish. Does not sleep well at nights.
7th June. No change to record. Has had sedatives at night recently, but without apparent benefit.
2nd July. Is still in the same dazed stupid condition. Can do nothing for himself. Room frequently soiled with urine at night.
3rd Sept. So dull & stupid during past few days that he has had to be put to bed. Has a slight cough & a few moist râles are heard in front of chest. Yesterday afternoon he had one fit, & during last night he had another.
8th Sept: Sometimes noisy & restless at nights, but is able to be out of bed during the day.
5th Nov: Has been confined to bed on account of bodily weakness during past month. Had another fit to-day.

309.

Peter Allan Smith, Aet: 37
Admitted, 11th January 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a paper ruler, & resides at 123 London St:, Glasgow.

He has been insane for 2 weeks, & this is said to be his 4th time in an Asylum — twice in Gartnavel, in Jan: 1884 & May 1884, (see pp. 321, 322, & 328 of Journal XXXIV) & once in Bothwell Asylum (1887); each attack being due to intemperance. He has been drinking freely during past few days. He is certified as hearing voices which advise him "to drown himself & throw himself over the window".

Patient is under the average height & is of ordinary physique. He has all the appearance of a man under the influence of alcohol. He is very shaky. Eyes suffused. Very talkative, but not unmanageable. Excitement seems in some degree, to have passed off. There are some abrasions on the face, & a few bruises on the body. He is also suffering from bronchitis, numerous wheezing râles being heard in both lungs.

15th Jan: Is now quiet & rational. Shaky condition has passed off. Is now able to be out of bed. Cough is less, & expectoration free. Is getting a stimulating expectorant mixture

Peter Allan Smith.
(Cont.)

23rd January. Cough improved. Seems now quite well mentally.

3rd March. Doing well. Cough gone.

17th May. Discharged to day. Bodily health & condition good. & quite well mentally, but much displeased at being kept so long here.

Recovered — 17th day 1888.

Have since heard that on the day of his dismissal from here, he went home intoxicated. JD

Bowman Fleming Miller Aet: 73.
Admitted 12th January 1888.

Patient is a widower, a baker to trade, & resides at 169 Great Hamilton St, Glasgow. He is said to have been insane during past 9 months, more or less, & the supposed cause is a "paralytic stroke" which occurred about 18 months ago. The paralytic stroke was very slight & there was no decided loss of consciousness, but ever since then his friends have observed a slight "dragging" of the right leg, when walking.

There is no known hereditary predisposition.

During past 9 months his daughter states that his memory has been failing, & that he has become much more irritable in temper. Lately he has accused his daughter of robbing him, & has also thought that a "band of roughs" came to his house & molested him. He has sometimes been "outrageous" & wished that he was "out of existence".

Patient is a feeble old man, & when he walks, it is quite evident that he has some difficulty in using the right leg. The right arm is only slightly, if at all, more feeble than the left. There is practically no difference in the two sides of the face. Pupils are equal & respond. There is no squinting. Nothing abnormal detected in lungs. Heart sounds are weak, but no murmur detected. A faint trace of albumen is present.

2nd Jan:

2nd Jan:

2nd Jan:

in the urine. Over the ~~right~~ external malleolus of right foot there is a callous ulcer, about size of a florin: the skin around this is indurated & immovable.

There is nothing special to note in regard to his mental condition, except that he is demented. He will talk with a stranger, but in a childish manner. He is apparently quite pleased to come here, expressing no regret at leaving his friends.

21st Jan: Since admission patient has been restless & sometimes a little troublesome to manage. This morning, however, he is quiet & not inclined to talk - does not seem quite so sensible. There is no distinct evidence of further paralysis.

24th Jan: Patient appears to be quite unconscious. Right leg, above ulcer, has become reddened & very tender. Small ulcers are breaking out round the ankle joint, & the skin of heel has a dark appearance.

25th Jan: Condition much the same since yesterday. This afternoon breathing became more rapid & noisy, & patient died at 6 p.m.

Died - 25th January 1888.

Francis Breen Aet: 40
Admitted 16th January 1886.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single, a pensioner & resides with his brother-in-law, at 10 Campbellfield St: Glasgow. He is said to have been insane for three days, this being his first attack. Alleged cause is **religion**, but it is indefinite. No known hereditary predisposition.

He left the army 5 years ago, & since then he has had no definite occupation. He has lived with a married sister for the past two years & during that time she says he has been quiet & well behaved; at times rather "dull", but never addicted to "drink". He has been a "close" reader of religious books, & his sister thinks this has had something to do with his present illness. Since he was a child he is said to have been ~~a~~ subject to slight "epileptic" fits; in the great majority of instances these were very momentary, only amounting to giddiness & loss of consciousness for a second or two. However, in one instance, about 3 years ago, the "fit" was more severe, he fell on the street & was taken to the police office. During the past year or two his sister does not think these attacks are becoming any more frequent. For the past few months his memory has not been quite so good as formerly.

Patient's illness apparently has been of

comparatively sudden onset. On 11th inst: he was very dull, disinclined to speak, & answered questions rather sharply. Early on morning of 16th he got out of bed & went outside, returning some hours afterwards & gave no explanation of his action. ~~Last day~~ To-day he has shut himself in a room & refused to eat anything.

Patient is of fair bodily health & condition. He would not walk from the reception room to the ward. He will not make the slightest attempt to answer questions. (constantly groans) Refuses to put out his tongue when asked. The muscles of his limbs are quite rigid. Nothing special about eyes. Reflexes normal. Lungs & heart examined, but no abnormality detected.

7th Jan: To-day he addressed the writer as "Christ", & asked pardon for all his sins. Took some food when asked & do so. Would not speak to the attendants. Did not sleep any last night.

21st Jan: Patient had a slight fit to-day & was unconscious for a few minutes (the first observed since admission). He now converses with those who talk to him but usually in a childish manner.

5th March. Since last note he has had 5 "fits", which were all of a slight character. He has had none since 11th Feb:, & mentally, he now seems quite well. Bodily health good.

Discharged — Recovered.
5th March 1888.

Peter McCurrie, Aet: 38.
Admitted 19th January 1888.

Patient is a pauper, sent by the City Parish, Glasgow. Residence – 333 North Bedlay St:
He is married & is an Iron Grinder. He is said to have been insane for three weeks, this being his first attack. Alleged Cause is religion. No Known H.T.
His illness ~~began~~ dates from the commencement of the "New Year" holidays. He is a Roman Catholic; & in connection with the Pope's recent jubilee celebration, he attended a great many religious meetings, in fact devoted his whole time to such. He became very dull – would not answer questions. When he did speak, which was seldom, it was only on religious subjects. He took no interest in his home & became careless of his personal appearance. He then began to spend money recklessly, & when asked to resume work at the end of the holidays he would not, saying "God will provide for the family". If undisturbed, he would pray for an hour at a time (stated in certificate). It is also certified that he was one night found praying in the centre of a field.
Patient is below the average height. He is apparently somewhat reduced in condition. He has a dull melancholic depression. Will not make the slightest attempt to answer the simplest question. Feeding apparently normal.

24th Jan:
29th Jan:
26th Feb:
14th March.
31st March.
10th May.
3rd July.
9th Aug:
30th Sept:

Tongue is a little furred. Reflexes apparently normal. Heart & lungs examined, but nothing abnormal detected.

14th Jan: Patient now answers questions quite freely, & he seems rational. When asked why he did not speak on his admission, he says that, although he knew what was said to him & he was willing to answer, yet he was unable to do so. He is evidently of a quiet disposition. Slight amount of albumen in urine.

27th Jan: Early this morning he got out of bed & accused a patient, who lay near to him, of being the man who stole his watch 13 years ago. "A vision" he says "came from God" & told him so. In the airing court, to-day, he said he was guided in his movements by the birds.

21st Feb: Still conducts himself in the same foolish manner, but at times is very quiet.

14th March. Has not been sleeping so well at nights recently & is more restless. He is also considerably demented.

3rd March. On last visiting day (a week ago) he told his wife that God had told him not to speak or eat any more. He has not spoken since, & he has had to be fed by stomach tube during past 2 days.

6th May. Fed continuously by tube since last note. Lies like a log in bed. Reflexes respond but feebly.

3rd July. No Change. Still being fed by tube.

7th Aug: Fed to day by spoon for first time since last March.

6th Sept: Spoon feeding still being adopted, but considerable

James MacKay Aet: 56.
Admitted 23rd January 1888.

Patient is married a tea-merchant, & resides at 445 St: George's Road, Glasgow.
He is said to have been insane 10 days. Supposed cause is ill health. A sister is said to have become insane, when about 50 years old. Patient was insane 26 years ago & confined in Parliamentary Road asylum for 3 months. At that time he is said to have been maniacal & the alleged cause was business reverses & intemperance.
Patient suffers from chronic bronchitis of 8 years standing. He is emaciated & feeble. During past month his friends have observed slight alteration in his manner — he has been more irritable. During past 10 days he has been very ill tempered & his whole nature has been changed. At times he has refused to take food, & has thought his friends were conspiring against him. He is certified as insisting upon going out & walking about in the open air, notwithstanding his weak chest; he is also destructive.
When spoken to he answers questions in a slow & hesitating manner, going into minute details, but, so far, in quite a rational way. Although he speaks sufficiently about his bodily health he will say nothing about his mental condition & the reason the friends had

23rd Jan:
29th Feb:
29th March
23rd April.
28th April.

James MacKay.

in bringing him here. He does not show any evidence of delusions. No evidence of Paralysis made out. In front both lungs, front & back, are wheezing râles. Percussion note
The ~~###~~ ^ is more resonant than usual. Heart sounds weak, but no murmur detected. The urine contains a faint trace of albumen.

25th Jan: After being dressed this morning he insisted on taking off his clothes again, but gave no reason for doing so. Refused to take breakfast & will not speak to any one.

13th ~~Jan~~ Feb: Has been confined to bed since last note. Is now looking rather better. Is more cheerful. Takes his food fairly well. Cough almost gone. Is getting 4 oz whisky daily. Also stimulating expectorant mixture.

2nd March. Has not been confined to bed since last note. Improvement in bodily health & condition has been marked. Still suffers slightly from bronchitis. Takes food well & sleeps well at night. He is very cheerful. Talks quite coherently.

2nd April. Improvement has continued. Mentally he is somewhat childish. He is orderly in dress & habits. Occasionally there has been some swelling of both feet & legs observed, & a trace of albumen has been detected in the urine of late.

He is discharged to-day & taken home by his son.

Relieved — 23rd April 1888.

28th April — Died somewhat suddenly at home to-day.

John Reid, Junr., Aet: 25.
Admitted 23rd January 1888.

Patient is single, a minister, & resides at 28 Abbotsford Place, Glasgow.

He is said to have been insane 20 weeks, this being his first attack. Supposed cause is overwork. A maternal uncle is said to have been insane.

Patient got his first "Charge" in May of last year. He continued in good health during the earlier part of summer, but in August & September he was first troubled with sleeplessness & occasional headaches. In September the headaches were frequently very severe. On beginning of October he was granted "leave of absence", & came home to Glasgow. He was then advised to spend his holiday in various places in the country. While away, he was at times ill & confined to bed. During the past 5 weeks he has been at home (Abbotsford Place) & confined to bed. His friends state that during this latter period he has taken a large amount of sedatives by medical advice. During the last few weeks they also state that he has been very excited, shouting at the top of his voice, & has threatened violence.

Patient admits voluntarily that, while a boy at school, he practised masturbation for a year, but not since.

On admission he was very talkative, irritable, & would argue about anything with anybody. He is

somewhat incoherent. He was not 2 hours here, till he complained of the attendants inattention, incivility &c, & quarrelled with the other for disturbing his sleep.

He is very much reduced in bodily condition & his muscles are exceedingly soft & flabby. Eyes are suffused & filled with tears. Hands are shaky when held out. There is tremor of the tongue; latter is also furred but moist. He says the pain in head is less severe than it was.

Lungs & heart examined, but nothing abnormal detected. Pulse is weak.

2nd Jan: Patient has been allowed up. He is quieter, but still a little restless at night. He is very shaky & occasionally throws his arms about. He talks incoherently. Says that one of his eyes shakes & that a bolt has been put in to steady it.

5th Feb: Still very miserable looking. Tears often seen in his eyes. Sometimes will not move from his seat, at other times walks up & down the gallery throwing his arms about. Would not take his breakfast this morning, & had to be fed with the spoon.

26th Feb: Quieter within past few days & sleeping at nights a little better.

3rd March. Has been more restless for past 2 days. Still disinclined for Conversation. Nape of neck blistered in 2 places with

John Philips Aet: 40.
6 Brown St., Anderston.
Admitted 24th January 1888.

Patient is a pauper, sent by the City Parish, Glasgow.

He is single, a Labourer, & a protestant. He is said to have been insane for a few days, this being his first attack. Cause is unknown. No known H.D.

He is certified as having a "wandered & lost" manner, & that he has been subject to "fits" during past 6 months.

Nothing is known of his past-history, except the above fact, as he has apparently no friends.

Patient is dull & stupid in answering questions & has a somewhat vacant expression. He says he feels well. Is not inclined to converse. No delusions detected.

Lungs & heart examined, but nothing abnormal found. There are some old cicatrices on legs, but no marks of recent injury. Bodily health & Condition good.

4th Feb: His landlady, with whom he has lived for the past five years, called to-day & the following facts are obtained from her:- Since she knew him he has been "given to drink", always accustomed to take "3 or 4 glasses whisky" daily & more on pay-days, but never, she says, intoxicated, except on the latter

John Phillips.

occasions. Otherwise he has been quiet & well behaved. About 18 months ago, while intoxicated, he fell down a stair, received some injury to his head & was more or less unconscious for a week. Since then he has not been "the same man". He has been much quieter & sometimes apparently quite confused. He continued the use of alcohol to the same extent as before. About last Christmas time he had the first "fit" of which his landlady is aware; & since then, up till admission, he has had a few in her house & two or three at his work. She cannot describe the exact character of the fits. On the day before admission he refused to take any food & talked in an incoherent manner. He also threatened to injure his landlady.

Since admission he has been very quiet & is very slow in answering questions. He always seems confused, apparently not comprehending, at first, the simplest questions. When asked who visited him to-day, he replied, after some hesitation, "my two sisters", giving their Christian names, & when asked their surnames, he could not tell. "Phillips" was suggested to him, & he replied "I suppose it must be". (His visitors were really his landlady Mrs Cairns, & a friend). Has had no fits since admission.

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John McKim, Aet: 55.
Admitted 28th January 1886.

Patient is married, a spirit merchant, & resides at 32 Argyle Street, Rothesay.

He is said to have been insane for a few weeks, this being his first attack - Supposed Cause is business complications. Patient's mother is said to have been insane for a time (melancholia).

Up till 2½ years ago Patient was a strictly temperate man, but since then he has given way to drink, but not to any great extent, according to his Son's statement. He has always been a man of a firm determined character & had been fairly successful in business. During past few months he has had several business troubles & complications, & on examination of his books he unexpectedly found a pecuniary deficiency. This seemed to prey upon his mind & he became very despondent, & sometimes remarking that "this" would require to "end soon". It is stated that he has recently bought some Laudanum & threatened to drink it, but did not do so. He has thought others wished to kill him. His son says that on morning of 26th inst: he inflicted a wound in his neck, with a razor, cutting into the trachea. The wound was stitched by a doctor shortly afterwards.

On admission Patient is quiet & in

John McKim.

apparently quite rational. He says that it was business affairs that made him "do this". He is reduced in bodily health & condition & is somewhat anæmic. In front of neck is a transverse wound about 4 ins. in length & apparently inflicted with some sharp instrument: its edges are held together by four catgut stitches. There does not appear to be any collection of pus or inflammatory action going on in neighbourhood of wound. There is apparent irritation about trachea, as he is constantly spitting frothy expectoration, but unmingled with blood. No air coming from wound.

Nothing abnormal detected in lungs or heart. In both sides he says he has a tendency to hernia (inguinal), & he wears a truss.

31st Jan: Somewhat restless last night. There is some inflammatory redness of skin, extending from wound down to upper part of sternum. There is also a little more discharge from wound.

7th Feb: Wound healing rapidly. Gets a little sleep at night. Still very despondent.

9th Feb: Yesterday complained of pain in front of left tibia. A soft swelling was observed on examination, apparently of a sub periosteal nature. Opium & lead fomentations applied.

11th Feb: Leg has been very painful, but is now

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John Mair Junr. Aet: 25
Admitted 8th February 1888.

Patient is single, & resides with his father at 58 Kenmure St., Pollokshields. He has no definite occupation.

He is said to have been ill for a week, this being his second attack, according to the warrant. His last attack occurred about 6 years ago, being ~~was~~ confined in this asylum from Aug: 81 to February 82. On the report of the latter (Journal, Vol: XXXIV f.f. 54 & 58), a first illness is mentioned as having occurred 3 years previously, making this, therefore, his third attack.

His father states that during the past 6 years he has been fairly well & able to a great extent to take care of himself. During past 10 days he has been restless & unmanageable, talkative & destructive. Thought that he heard voices laughing & mocking at him. One morning he attempted to leave the house when only half dressed.

On admission he is indifferent & stupid, but quiet. When spoken to he sometimes merely laughs. Does not seem inclined to enter into conversation.

He is of small stature & his bodily condition is indifferent. Nothing abnormal detected in lungs. There is a well marked V.S. murmur heard all over cardiac ~~region~~ region, loudest

28th Feb:
23rd March
3rd May.
9th May.
9th June.

John Blair, Junr

at the base, especially over the pulmonic area.

25th Feb: Since Admission he has been quiet & manageable. Sleeping fairly well at night, but during last 2 nights has been sleepless & talkative.

6th March. General conduct much the same as on admission. Is listless & indifferent to his surroundings. Often found lying on the couches in the gallery, & when outside, on the benches.

2nd May. Has again been more restless & sleepless at night, especially during last week.

1st May. Since last note he has been much quieter & has slept well at nights. Is quite manageable & is much cleaner in his habits. He has still, however the same dull stupid appearance.

To day he is discharged "on leave" for 4 weeks. taken home by his father.

6th June. Discharged to-day.

Relieved.

John Barr, Aet: 76.
Admitted, 8th February 1888.

Patient is married, a Cowfeeder, & resides at Greenend Cottage, Johnstone.

He is said to have been insane for the past 5 weeks, this being his first attack. Cause is unknown, & there is no known N.P.

He is certified as having a suicidal tendency, having attempted to hang himself & to throw himself on the railway. One rainy day he was found in a field & would not return to his house.

On admission he was quiet & reasonable, but apparently somewhat stupid.

After being put to bed he became very excited, shouting out that people were robbing his house & that he would be ruined. It was with difficulty he was kept in bed. After a short time he became quiet.

He has all the appearance of having been a healthy man, but signs of decay are now manifesting themselves. Conjunctiva of eyes is congested; & the arcus senilis is marked. Nothing abnormal detected in heart or lungs. Urine contains phosphates, but is free from albumen.

20th Feb: His case is one of dementia. He is quiet & manageable. Sleeps well at night. Takes food well.

10th March. Last night was restless & passed water in

John Barr.

1888.

bed. Usually he sleeps well at night.

6th April. Has not been sleeping so well of late. Constantly talking about his cows, says they are "ben the house" & must attend to them. He looks in good Condition bodily, but he cannot walk well, partly owing to a deformity of one foot, the result of an injury, & partly to feebleness.

21st April. To-day he complained of some pain in left side, & on examination, one of the lower ribs of that side was found to be fractured. He sleeps in a "box-bed" & he frequently tries to get out of it: in attempting this he may have injured his side — at least this is the only way it can be accounted for.
Strapping applied to injured side of Chest.

30th April. Doing well. Pain gone. Breathing freely. No inflammatory affection of lung detected.

23rd May. Side now apparently quite well. Able to get up. Sleeping rather better at night.

5th July. Happy & Contented usually, but sometimes cries because he is not allowed to attend to his cows. Bodily health Good.

23 30th Aug: No change in mental condition — Sometimes restless.

24th Nov: Still thinks this is a farm & that cows are kept in the house. Bodily health & Condition fair, but he is very bad at walking. Usually is contented & happy.

1889.

6th March. Is becoming more childish & helpless. Hardly able to walk about the room. Bodily health fair.

To p. 590

Thomas McMurray Aet. 32.
Admitted 13th February 1888.

Patient is a pauper, sent by the City Parish, Glasgow.

He is single, a baker, address is unknown. He was found by the police this morning, in a nude condition, preparing to jump into the Clyde, & stated that a man had told him to do so. Beyond this, nothing is known of him.

He presents almost unequivocal signs of general paralysis. Of all the symptoms, his speech is the most characteristic; he has great difficulty with many words, & in general conversation there is a marked slowness & hesitancy. There is not as yet much affection of the gait, except that it is apparently more slovenly than usual. In performing the equilibrium test with his eyes closed, there is only a little shakiness observed. He generally has a happy genial expression & is quite pleased with everything. He has not exhibited any especially lofty delusions. Knee reflexes apparently normal. Some tremor of the tongue observed on protrusion. Nothing abnormal observed about the eye.

Nothing abnormal detected in lungs or heart. Urine free from albumen.

1st March. Condition unchanged since

Thomas McMurray

admission. Gait not more visibly affected. Speech characteristic of G.P. He is quite happy, & in regard to his surroundings is quite indifferent.

25th April. There has been practically no change in this Patients condition, either mentally or physically, since admission. He belongs to the Parish of Montrose & in consequence is removed to the Royal Asylum, Montrose.

Relieved – 25th April 1888.

David Robertson Aet: 23.
Admitted 11th February 1888.

Patient is single, an Engineer & resides at 3 Ruthven St, Byre's Road, Glasgow.

He is said to have been insane for three months & the supposed cause is self-abuse & want of work. This is his first attack. A maternal uncle Com-mitted suicide.

He is certified as being indifferent & apathetic — has used his mother roughly — says he is annoyed by ~~imaginary~~ voices at night.

Patient when spoken to will not answer any questions — occasionally he simply smiles. He seems to understand what is being said to him — he has not a vacant meaningless stare. He will sit or stand as put by the attendants, but will not move about of his own accord. He Confessed to one of the doctors who certified him that he practised masturbation.

He is tall & of dark complexion He is rather thin & his general health seems indifferent. Nothing abnormal found on examining heart & lungs.

1st March. There has not been much improvement since admission. He has spoken very little, occasionally replying to questions, in the simplest manner possible. A blister was

David Robertson

applied to nape of neck a few days ago & the surface is not yet quite healed. This seemed to waken him up a little, but only a little. He is still very indifferent to his surroundings.

27th March. Still sullen & morose. Sleeps well at night. Bodily health fair.

2nd April. Has been more restless & excited during past 3 days. Yesterday morning put his hand through a pane of glass. Says that God told him to do this.

2nd May. Conducts himself in a foolish way. Often restless at night.

4th June. Still foolish & reckless. Goes about airing coat & frequently pulls at plants &c. Very careless of his appearance.

1st Aug. No change in behaviour. Says that he is Christ. Takes food fairly well. Bodily health good.

30th Sept. During past few nights he has been restless & talkative. Practically no change in mental condition. Very untidy in dress.

24th Nov. Still restless & often destructive. Does not sleep well at nights.

Had blister applied to back of neck Yesterday & is put on 3 grs. Potass: Iodid: 3 times a day.

1889.

22nd Jan. No improvement. Restless & destructive.

20th March. Still restless & foolish in conduct. He is, perhaps, not quite so destructive as formerly. Still untidy in his habits. Nape of neck blistered occasionally, but does not seem to have any permanent good effect. Bodily health fair.

Jos. 442.

John McKinlay Aet: 28
Admitted 14th February 1878.

Patient is a pauper, Chargeable to the City Parish, Glasgow.

He is single, a wire worker, & resides at 12 East Rose Street Glasgow.

His illness is said to be of a few days duration, this being his first attack. Cause is unknown.

He is subject to "Epilepsy". He is certified as being violent before the onset of a fit, & that he attempted to drown himself this morning.

His father states that he has been subject to fits during past 12 or 14 years. They have increased in severity during past 2 years, during which time also the affection of the mind has become more apparent & more permanent. He has always, during this latter period, been childlike in manner & at times apparently unable to understand what was said to him. On account of his illness he has had no employment during past 2 years. Not D.

Patient is of a very dark complexion, of spare build, & of medium height.

His mind is weak & when spoken to he replies in a slow fashion, but without hesitating. He is able to walk, no staggering being visible. No evidence of paralysis elsewhere. Does not ex-

John McKinlay.

-hibit any delusions.

Nothing abnormal detected in examination of lungs & heart. Urine normal.

1st Feb: Has had one fit during each of the past three nights - He showed no signs of violence either before or after the occurrence. Patient is considerably demented.

5th May. The following is a monthly record of the number of fits since admission: —

	day	night.
February	3	2
March	6	25
April	6	16.

Has never shown any violence towards other Patients or attendants. Bodily condition Good.

2nd Oct: Number of fits in

	day.	night
May	2	17
June	0	16
July	3	11
August	5	20
September	11	0

The last month is the only one when more fits are recorded as having occurred during the day than the night.

1889

2nd April. Number of fits in

	day.	night.
Oct.	3	21
Nov:	1	17
Dec:	9	21
1889 Jan:	7	10
Feb:	8	27
March.	9	24.

Dop. 600

Is becoming more demented. Bodily health fair.

Robert Johnston, Aet: 44.
Admitted, 15th February 1888.

Patient is single, a Steam-ship officer & resides at 54 Buccleuch Street, Glasgow.

He is said to have been ill about 2 years, it being his first attack. The supposed cause is "Sunstroke in India some years ago". He has not been subject to Epilepsy. A sister is said to have been insane for a time, 30 years ago.

He is certified as being of "variable temper sometimes despondent, at other times much excited - has peculiar religious delusions."

On admission he constantly talks in a loud manner, & is utterly incoherent. Says he is "God Almighty", but does not sustain any conversation. He is very restless, tossing about in bed, frequently covering his head with the bedclothes.

Bodily health & Condition ordinary.

18th Feb: He is now a little quieter, but when spoken to, he still replies in an incoherent manner. Sleeps a little at night.

7th March - Still talkative & incoherent. Sleeps only a little.
30th " Is quieter & sleeps fairly well at night.

28th April. Sleeps well at night. Still answers in an incoherent manner when spoken to.

1st June. Nothing new to record in this Case. Bodily health good.

26th July. Patient goes about in a quiet way. Frequently

Daniel Ferguson.
Cont^d from B. 132.

the hill" very rapidly. He has become much weaker, & is less talkative. He was put to bed to-day & on lungs being examined numerous wheezing rales were detected, also some of a moist nature.

19th Feb: Since last note there has been a marked & rapid change in this patient's condition. During past few days he refused to take anything, even stimulants. During yesterday & this morning it was evident he was sinking, & he died this afternoon at 2 [illegible] Up till almost the very end he continued to be destructive, tearing the blankets & other bedclothes, as his strength permitted. The signs of bronchitis continued, but there no evidence of inflammatory condensation of the lungs. He was able to swallow, & use his limbs a little before death.

Died - 19th February 1888.

Robert Gladstone Somerville Aet: 4-2.
Admitted 18th February 1888.

He was admitted to-day as a Voluntary Patient.

He is single, an insurance agent, & resides at Ardenlee, Queen's Park, Glasgow.

His father & brothers say that he has always been "queer", "different from the rest of the family". Lately they were never sure of his movements — would sometimes stay away from home all night & not give any explanation. Has indulged in alcohol. The immediate cause of his coming here [redacted] is that during the past month he has stolen, on 2 separate occasions, a small sum of money from the Christian Institute Buildings. On being accused of this theft he at once returned the amount, but was apprehended & received a short term of imprisonment.

His apparently was an insane act, as he had no need to steal, having always sufficient money. He admits the above & says in explanation that he has had recent disappointments & that he must have been "mad with drink".

Patient is a man in good bodily health & condition & of average height.

He is quiet & somewhat circumspondent. When spoken to about his past conduct he begins to cry & promises to lead a better life. He has no delusions

4

Robert Gladstone Somerville.

at present, nor indeed does he show any very distinct evidence of insanity.

Lungs & heart examined, but nothing abnormal detected. Urine normal.

25th Feb: Seems rather more cheerful. Speaks to other Patients. Sleeps fairly well at night.

3rd March. Usually of a cheerful disposition, but occasionally refers to his past misdeeds. He seems somewhat excitable. Sleeps well.

2nd April. Doing well. Enjoys the liberty of the grounds.

1st May. Much the same since last note. Manner at times peculiar, but difficult to describe. General health good. Was out on "Pass" yesterday afternoon in order to get some things in town previous to going away, & came back about 10 p.m. intoxicated. This morning he expresses great sorrow for his conduct last night, but only offers the excuse that he "met some friends". His intention is to go direct from here to Canada.

Discharged - to-day.

Relieved - 17th May, 1888.

James Dunn Aet: 42
Admitted 23rd February 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is a widower, a joiner & resides at 1 Bentinck St, Galston.

He is said to have been only a few days insane, this being his first attack. Cause is unknown.

In consequence of conducting himself in a disorderly manner in the street Yesterday, he was taken to the Police Office. He is certified as being "excited at times & would attack any one near him". "Thinks that boys followed him & threw Chlorform at him." When arrested by the Police he was "striking at all & sundry who came near him". He is said to be "Epileptic"

Patient is a healthy looking man, & of less than the average Stature. He is quiet & tells his story in a coherent manner. He says that, after leaving the Cattle market Yesterday, a number of children followed him & threw "stuff" at him. They continued doing this for some time & when requesting them to stop he says he was arrested. There is an incised scalp wound just above left ear — this he says was due to a knock he received with a can by some of the "boys".

2nd Feby: Re
March. Re
Re
12th March. Re
one
quie
15
the
19th May. Re
quie
then
& re

James Dunn.

Physical examination of the lungs & heart reveals nothing abnormal. Urine normal.

2nd Feby: Had an epileptic fit in the airing Court to-day. Was not violent either before or after it.

31st March. Since last note he has had two fits, the last one occurring to-day & was rather severe. He accused some one of kicking him after he recovered, which accusation was groundless.

12th March. Has had 3 fits since last note the last one occurring on 7th inst: He now seems quite well mentally. Has been having 15 grs Potass: Bromid: 3 times a day since the occurrence of the first fit.

7th May. No fits since last note. He has seemed quite well, both mentally & bodily since then. Has been working about the grounds & is quiet & well behaved.

Discharged to-day 17th May 1888.

Recovered.

Alexander Stuart Robertson Aet: 62.
Admitted, 5th March 1888.

Patient is married, a retired clergyman, resides at Free Church Manse, Woodside, Coupar Angus.

He is said to have been insane for 2½ years, this being his first attack. The supposed cause is a paralytic ~~shock~~. There is no known N. D.

He is certified as being depressed & at times irritable. It is also stated that he has been on several occasions, violent towards his wife & others, striking them with the poker, walking-stick or his fist.

It appears that he had a paralytic stroke 2½ years, affecting the left side, & since then his friends have observed more or less general mental weakness & defective memory. He is a man a little under the average height & weight. Bodily health & condition indifferent. He walks slowly & somewhat unsteadily. He seems very frail. As regards power, no abnormal difference is at present detected between the legs & arms of either side, except that in using the dynamometer with the left hand, the indicator only registers about half what it does with the right. Reflexes apparently normal. His voice is very weak, & there is

considerable indistinctness of speech, so that one has difficulty in carrying on a conversation. He speaks coherently & so far as can be made out, with intelligence. He says he did not know he was coming here, & is much displeased with his friends for bringing him to such a place. He is inclined to talk & enter into many details.

Nothing abnormal detected in lungs. Heart sounds weak, but no murmur.

6th March. Patient still unsettled & frequently expresses a wish to get away. Since admission he has been quite manageable. Bodily health has improved somewhat. He has some old affection of the urethra (probably stricture) requiring the passage of an instrument about once a week; he says he has consulted both Edinburgh & London Surgeons about it.

23rd April. He is much more reconciled to his surroundings, & says he now likes both the place & the people who are connected with it. He is ~~quite~~ somewhat weak mentally. Bodily health distinctly improved. Although always pleasant & manageable in the presence of attendants, he, one day recently, while being visited by his wife threatened to strike her with a stick which he held in his hand, the

William Petrie Aet: 34
Admitted 6th March 1888.

Patient is married, a book keeper, & resides at 21 Gower St: Paisley Rd: Glasgow.

He is said to have been insane about 2 months, this being his first attack. Cause is unknown, & there is no known N.P.

He is credited as having extravagant ideas of his strength & money; & that he fancies there is a lumps in his stomach; also that he hears voices in the palm of his hand.

He is rather below the average stature & he is rather obese. He is happy & contented in appearance, & is easily made smile. He repeats the delusion that he hears people speaking on the palm of his hand. Says that he has splendid certificates from his late employers, & that he is a powerful man. His memory is defective in some points. His speech is like that of General Paralysis, the thickness & hesitancy being very marked. There is fibrillary tremor of tongue, but none observed on lips. Pupils are equal & respond to light. Knee-jerk exaggerated on both sides. His gait is not firm, there being the slightest degree of "shuffling" of both feet when he walks. He makes a bad attempt to walk on a narrow base & he does not turn round quickly.

Lungs & heart examined, but nothing abnormal detected.

1888
10th March.
2nd April.
9th May.
9th June.
25th July.
4th Sept:
2nd Nov:
1889
12th Jan:
30th March.
20th August.
4th Oct.
1890
Septr 3

Wm Petrie.

1888

7th March. Patient is usually talkative & restless at nights. Delusions characteristic of G.P.

4th April. Sleeping a little better at nights. No change to record otherwise.

6th May. Sleeps well at night. Takes food well. Frequently exclaims that he is the "boss." Disease seems advancing.

9th June. He is becoming more obese. Does not walk so well. Speech is more affected.

25th July. Does not sleep well at night — often noisy & restless. Mentally much the same.

4th Sept: Very unsteady when walking. There is sometimes difficulty in understanding what he says, owing to the increasing affection of the speech. Bodily condition good.

2nd Nov: Noisy & talkative at times: always contented & happy. Has great difficulty in articulating. Bodily health good. Very obese.

1889.

12th Jan: Disease advancing. Not walking about so much as formerly. Everything requires to be done for him.

20th March. Becoming more helpless & mindless. It is difficult to make out what he says. Still obese. Sometimes restless at nights.

2nd august. General Paralysis advancing. Restless & talkative terms varying with quieter periods.

4th Oct. Disease progressing. Sometimes confined to bed for some days. Becoming very mindless. Speech & gait markedly affected.

1890

Sept 3 Died to-day Cause of death Gen. Paralysis

William Muir aet. 46.
Admitted 8th March 1888.

He was admitted to-day as a Voluntary Patient.

He is single, a commision agent, & resides at 16 Regent Park Terrace, Strathbungo.

He has not been "quite himself" since last September, being at times depressed. Usually he is of a very cheery disposition, & the change was markedly observed by his friends, although he says he often tried to look happy while in the presence of others. He cannot account for his illness except that during the past few months he has not been doing quite so much business as formerly, & as he works on Commission, his income was necessarily affected. He also says that last autumn he was under medical treatment for some "liver complaint," & he thinks this affection had also something to do with his mental condition.

Patient is a robust healthy looking man, of average height. At present he is cheerful in manner & tells his story in an open, frank way. He exhibits no delusion, & one does not detect any impairment of the mental faculties.

At present he says he is suffering from slight bronchitis, otherwise his general

14th March.

12th April.

1st May.

9th May.

14th May.

17th May.

William Muir

health is good.

4th March. During past few days he has complained of some pain in lumbar region. The urine contains a slight trace of albumen.

9th April. Has been doing well since admission. Is now apparently quite cheerful. Enjoys the liberty of walking about the grounds. Occupies his time in reading, playing cards, billiards, &c. Lumbar pain occasionally troubles him. Is an exceedingly quiet sensible man. Is becoming anxious about his business.

1st May. Is a little depressed to-day. During past few days he has been speaking about going away & yesterday obtained Dr. J's sanction. The thought of having to face the world again seems to have had a depressing effect upon him.

8th May. During past week he has been despondent at intervals, but has slept fairly well at nights. Last night he was very restless & slept none. This morning he is very depressed. Is inclined to sit by himself. At times seems very miserable & says he is afraid he may do harm to himself.

14th May. Still sleepless & somewhat depressed. Has had a sedative during past 2 nights & seemed the better of it.

16th May. Much better within past few days. Has been sleeping fairly well at nights. Seems "like" himself again. Discharged to-day.

Recovered - 17th May. 1888.

George Burns Aet: 45.
Admitted 12th March 1888.

Patient was transferred to-day from Stirling District Asylum, Larbert.

He is single, an Engineer & his previous place of abode was Helensburgh.

He is said to have [illegible] several years, the present existed about 9 mos to Stirling District Asylum is now certified as suffo

It is only after with Patient that an insanity become m a "free-mason", & he free masonry is the insanity, & talks abo Keeps in some way o that persons outside him in some manner "facial expressions." about the grounds makes strange gestures with his arms & hands.

Bodily health & condition ordinary: nothing abnormal detected in lungs or heart - urine normal.

25th March. Since admission he has been quiet. At times he may be seen going about the Court making gestures or "passes" with his hands. Sleeps well at night.

30th April. Behaves in a quiet gentlemanly manner. Of

George Burns.

late he has not been observed to make any gestures with his arms. From his conversation at present one could not certify him as insane. He refuses to converse about free-masonry, but on all other subjects he is agreeable & rational.

6th June. "Nothing special to record in this Case. He is quiet & conducts himself like a sane person. He is a good Cricketer & enjoys a game.

3rd July. Since last note he has written one or two letters, & the annexed is one. In it he styles himself "George Burns otherwise Christ the Son of God": he also writes that he has been engaged for many years in recovering "the Keys of the earth", & has travelled "through the earth" for this purpose.

2nd Sept: Of late patient has shown a more retiring disposition & he does not speak to the other patients as he used to do. Bodily condition good. He recently wrote what he calls a short history of his life: in it he states that certain "Keys" dictated to him all his actions & he was compelled to perform them, whether moral or immoral.

1st Nov: In several letters which he has written he has subscribed himself "George Burns a Christ". When questioned about this he becomes very angry.

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4th Feb: Practically no change in mental condition. He is always quiet & well behaved. Tidy & Gentlemanly in his habits.

2nd April. Has recently written some very indignant letters

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17

173

George Burns Aet. 45.
Admitted 12th March 1888.

Patient was transferred to-day from Stirling District Asylum, Larbert.

He is single, an Engineer & his previous place of abode was in Helensburgh.

He is said to have been insane for several years, the present attack having existed about 9 months. He was admitted to Stirling District asylum on 10th June 1887. He is now certified as suffering from "Acute mania."

It is only after repeated conversation with Patient that any indications of insanity become manifest. He thinks he is a "free-mason", & he believes that free masonry is the cause of nearly all insanity, & talks about people using Keys in some way on his person & that persons outside the asylum influence him in some manner by what he terms "facial expressions." In walking about the airing court he makes strange gestures with his arms & hands.

Bodily health & condition ordinary: nothing abnormal detected in lungs, heart. Urine normal.

23rd March. Since admission he has been quiet. At times he may be seen going about the court making gestures or "passes" with his hands. Sleeps well at night.

30th April. Behaves in a quiet gentlemanly manner.

George Burns.

late he has not been observed to make any gestures with his arms. From his conversation at present one could not certify him as insane. He refuses to converse about free-masonry, but ... subjects he is agreeable & rational. ...rd in this Case. He is quiet ...self like a sane person. He is ...ter & enjoys a game.

...he has written one or two ...ceed is one. In it he styles ...Burns otherwise Christ the Son of God": ...t he has been engaged for many ...ng "the Reys of the earth", & has ... the earth" for this purpose.

...has shown a more retiring ...es not speak to the other ...used to do. Bodily condition ...y wrote what he calls a short ...: in it he states that certain ... to him all his actions & he was compelled to perform them, whether moral or immoral.

Nov: In several letters which he has written he has subscribed himself "George Burns of Christ". When questioned about this he becomes very angry.

Dec: Practically no change in mental condition. He is always quiet & well behaved. Tidy & Gentlemanly in his habits.

April. Has recently written some very indignant letters

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Murray-Lyon Esq.
Board of Lunacy
Royal Lunatic Asylum
Woodcot &c &c

John Rowat Aet: 31
Admitted 16th March 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a joiner, & resides at 2 Comely Park Place, Glasgow.

He is said to have been insane about one week, this being his first attack. Cause is unknown & there is no known H. D.

He is said to have delusions of being in possession of great wealth, & that some doctor has given him medicine which has drained all the blood out of his body. He is also stated to have been "excited & outrageous".

When spoken to he becomes quite incoherent & talks in a rambling manner of the amount of money he is worth, of his being able to fight Sullivan (a pugilist) with his one hand, & of his having been in heaven & spoken to God... His whole manner gives one the impression that he is labouring under General Paralysis. In his speech he is hesitating, but not very slow, & he trips with many words. There is some tremor of the tongue on protrusion. Left pupil more contracted than right. Knee reflex present, apparently not exaggerated. No apparent Paralysis of lower limbs.

Lungs & heart normal on examination. Urine normal.

28th March- As rambling as ever in speech.

4th April.

28th April

28th May.

4th June.

John Rowat (Cont.d)

noisy & talkative at night. Bodily health & condition reduced since admission.

4th April. This patient seems very ill. He is pale & emaciated. Very restless. Getting Stimulants.

23rd April. During last week he has rather improved in bodily condition. Takes food better. Sleeps a little better at night. Allowed out of bed during the day.

2nd May. Improvement in bodily health & condition has continued since last note. Mental condition is that of General paralysis of the insane

6th June. Patient belongs to Kilsyth Parish & his condition is now such as to warrant his removal. He is consequently discharged to-day & taken to Stirling District Asylum.

Relieved.

William Ewart Aet: 44
Admitted 17th March 1888.

Patient is a pauper chargeable to the Old Monkland Parish.

He is married, a nail-maker & resides at Canal Street, Coatbridge.

He is said to have been insane about 4 weeks. This is his second attack, being confined in Glasgow District Asylum 6 years ago. Supposed cause is want of work. His father is said to have been insane.

He is certified as being suspicious of his neighbours & thinks that they "Keep him out of Church to suppress the truth". His wife says he is "slothful & indolent when at business & that he has assaulted her several times".

Patient is restless & is quite in-coherent in talking. When asked in what way the neighbours are annoying him, he says wildly they are not "annoying him, but themselves". He talks on in this meaningless manner, & at last when asked what is wrong with him? he replies there is a "screw loose".

He is under the average height. Bodily health & condition ordinary. Nothing abnormal detected in lungs or heart. Urine normal.

28th March. Talkative & restless during the day, but sleeps pretty well at night.

30th April. Same as incoherent. No change.

3rd June. Patient is quiet & restless. Quite incoherent in conversation. During the day he has been Bodily health good. He is off his food. Now & then happy & quite

1889
24th Jan. No change. Bodily health good.

28th April. Nothing abnormal detected in lungs or heart. Urine normal. Patient begins to take off flesh & remains the same.

4th October. Urine normal.

1890
Aug. 26th. Oct. 31st. Nothing abnormal detected in lungs or heart. Urine normal.

William Ewart.

31st April. Somewhat more settled in manner, but still incoherent in talk.

3rd June. No change in mental condition. Bodily health good.

2nd July. Quite manageable & quiet - but still incoherent in conversation. Working about the grounds.

5th Aug. During past fortnight has been one of the working patients in the West House, & has behaved well.

4th Oct. Bodily condition good. When spoken to he may answer correctly, & then wanders off on several other subjects.

2nd Nov. Now suffering from mild dementia. Seems happy & contented. Is getting stouter. Not quite so talkative as formerly.

1889.

2nd Jan. No change in Mental Condition. Bodily health good.

2nd April. Nothing new to record in this case. When he begins to converse with one on any subject, he often goes on talking in a decidedly incoherent & unintelligible manner. He is still one of the working-patients in the West House.

4th October. Unchanged. Delusions still very manifest. Eats and sleeps well. B. & C. good.

1890

Aug. 26th. No Change in mental condition. Still working in West House. Enjoys good health.

Oct. 30th. No change. Still in West House & in good health.

to vol. IV p. 271.

Richard Wildridge Aet: 27.
Admitted 23rd. March 1888.

Patient was sent by the City Parish to-day. He was found by the Police wandering about the streets. He was previously in this Asylum, admitted 22nd February 1886 & discharged 21st May 1886 (see Journal Vol: II p. 281).

Since his discharge about 2 years ago he has been living with some friends in the country. His mental condition has been much the same during that time. On afternoon of 21st inst: he disappeared from Dolmont (where he was living), nothing more being heard of him till he was discovered by the Police in Glasgow.

He seems in good bodily health & condition.

He is apparently somewhat weak-minded & is unable to tell any connected story of his doings recently. No delusions as yet detected

28th March. Has been quiet since admission. He says it was some electric or other forces which made him wander away from Dolmont. Is unable to carry on any conversation to any extent.

To day he is discharged on the authority of his father & taken home.

Relieved.

Rev: A. S. Robertson,

(Cont from page 168).

only provocation being that she referred to some money matters. He was visited again by his wife (to-day), & he lost his temper a second time. After each quarrel he expresses great sorrow & hopes that "people" wont come to hear of it.

3rd May. At times irritable & restless. Sleeps fairly well at night. Takes food well.

4th June. Has been keeping fairly well. Sleeping better at nights.

2nd July. More restless & irritable of late. Writes a great many letters, & when walking in the grounds alone, as he is allowed to do, asks people whom he meets to post them.

3rd Aug. Still the same restless disposition. Always wishing his friends to come to see him, & on several occasions when his wife visited him, he threatened to strike her with his stick. Has had considerable urinary difficulty, & small sized catheter is difficult to pass.

2nd Oct. No improvement in mental condition. Is weaker in bodily health of late. In spite of repeated warnings & scoldings he still attempts to get letters posted by strangers, whom he may chance to meet in the grounds.

1st Nov: Still somewhat feeble in bodily health, but better than at last note. On the whole, he is not quite so irritable in temper.

1889 2nd Jan: Has been fairly well during past month, although

Charles Cottee Aet: 31
Admitted 26th March 1888.

Patient is a Pauper & Chargeable to the City Parish, Glasgow.

He is married, a Glass worker, & resides at 39 Abercorn Street.

He is said to have been insane for six months, this being his first attack. Cause is unknown. A sister is said to have been confined in an English Asylum

He is certified as being excited & that he believes he has lost his brains & that his body has become a pulp. It is also stated that he has frequently attempted to commit Suicide.

Patient is of small stature & is somewhat anaemic. General health & Condition apparently a little reduced.

His chief delusion & one which he constantly speaks about is that his brains have gone & that wind now passes through his Skull as if it was a sieve. Other parts of his body were amissing when he was admitted here, but these returned after the warm bath he had, before being put to bed. He is quiet in manner

Nothing abnormal detected in lungs & heart. Urine normal. Pupils are a little dilated, but equally so.

30th March. General Condition unchanged. At times thinks he is wind - At other times this

Charles Cottee.

he is a "dishcloth", &c.

26th April. Still has many of his former notions. Does some work in the wards. Is quiet & manageable.

20th May. Condition much the same. General health good.

3rd June. Does not now repeat his foolish fancies. Is more active & does a good deal of work about the wards. Takes food well.

5th July. Seems to be quite well. Wishes to get back to his work.

23rd Aug. Discharged to-day.

Recovered.

Alexander McDonald Aet: 64
Admitted 31st March 1888.

Patient is single, of no occupation at present, but formerly a jeweller, & resides at 11 Queen Square, Strathbungo.

He is said to have been insane about six months, being worse during last three weeks. This is his first attack. Supposed cause, monetary troubles & intemperance. No known N. D.

He is certified as being excited & violent & was found in the exchange without a shirt & his dress otherwise much disordered. He is said to have delusions of having made immense sums of money. He is also said to be violent towards his sister & others in the house.

Patient seems rather frail & exhausted. He has a most violent temper & on the slightest provocation, & indeed sometimes without any, he breaks out using oaths & indecent language freely. When quiet he will tell you of his riches, of his property, & estates: also of his relationship to the Lord Provost, Prince of Wales, &c. No affection of the speech is observed. No tremor of the tongue, characteristic of G.P. Pupils apparently normal.

Nothing abnormal in lungs & heart. Urine free from albumen.

Alexander McDonald.

16th April. Patient has been noisy & troublesome since admission. He frequently has threatened to injure the attendants, & on two occasions has thrown some article of furniture at one of them. He does not take his food very well, says that it is not good enough for him, & wishes the most expensive dishes, offering to pay well for all luxuries. General health not improved. Is having a glass of whisky daily.

Transferred from East to West House on 10th inst.

23rd April. Very restless & noisy. Is confined to bed. Seems to be weak. Bed often wet.

4th May. Is kept in bed with difficulty. Still very exalted notions. Uses coarse & obscene language.

23rd May. Sleeping a little better during past few nights, but always restless when awake.

1st June. During past 10 days has been allowed to sit up for some time each day. Still very ill-tempered.

11th June. Right ear observed to be much swollen this morning ("insane ear"). Blister applied.

14th June. Ear very bad — he has been picking it. Has been destructive during past 2 days, & last night destroyed 3 pairs of blankets. Is very talkative & filthy in his habits.

20th June. Has been a little quieter during past 2 days. Passes urine in bed occasionally. Delusions very exalted & numerous. Speaks of his

Pulipaki Richard Nay Jagannadham. Æt. 25.
Admitted 6th April 1888.

Patient is single, a medical student, a native of Madras, India, but recently residing in Edinburgh.

He is said to have been insane for one week, this being his first attack. The supposed cause is mental overwork. There is no known N. D.

He is certified as being incoherent & that he believes that various charges have been made against him.

He wanders about the room from place to place in a restless indefinite manner. The slightest sound directs his attention away from the one addressing him. He thinks some-one is speaking to him from the roof. He frequently repeats that he cannot understand why he was brought here. Once or twice he asked the writer to sit down & he would tell him "all about it"; but he would not have long commenced when something would attract his attention, & then he would require to begin over again.

He is of very dark complexion, below the average height & is rather spare in body. No abnormality detected on examination of heart & lungs.

11th April. Very restless & unsettled. Quite incoherent in conversation. Last night passed urine in his room.

24th April. Has been quieter & more settled during past

Pulipaki Jagannadham.

week, & is sleeping better at nights.

7th May. Has again become very restless & talkative.

21st May. Has hæmatoma auris (left). Blister applied. Restless & excited at times. Does not sleep well or soundly.

4th June. Has been quieter during past few days. Does not talk so incessantly. Sleeps better at nights.

30th July. Still restless & unsettled. Unable to converse in a connected manner for a few minutes at a time. Bodily health fair.

6th Sept: At times sleeps well at night; at other time he is restless & talkative. Condition similar during the day.

24th Oct. Mental condition practically unchanged since last note. Can hardly settle to do ~~th~~ ~~s~~ any-thing. Has had a visit, recently, from his sister, & behaved in the same way. Bodily health & Condition ordinary.

1st Dec: Blister applied to neck on 23rd Nov: & put on Potass: Iodid: 5 grs 3 times a day. Apparently a little quieter since then. Still foolish in conduct & conversation. Wishes to have a walk to Aklensburgh.

1890.

12th Jan: Practically no improvement in mental condition. Still restless & foolish in conduct.

10th Feb: Got 30 grs sulphonal last night as a hypnotic & slept well all night. He has ~~been~~ been constantly noisy & sleepless of late.

13th Feb: Has been getting same dose every night since last note,

373.

John Charles Veitch Aet: 22
Admitted 5th April 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single, a labourer & resides at 38 Rosemount St., Glasgow.

He is said to have been insane for a few weeks, this being his first attack. Cause is unknown. There is no known N.D.

He is certified as being a masturbator & melancholic, & that he has attempted suicide at home.

Patient is apparently somewhat mindless & does not attempt to enter into conversation, often answering only in monosyllables. Generally speaking, he conducts himself in a childish manner.

He is under the average height. Bodily health & condition are not good. He is pale & somewhat emaciated. Nothing abnormal detected in lungs or heart. Urine free from albumen.

24th April. Patient seems to be labouring under dementia. He is quiet & manageable. Rarely speaks to any one unless spoken to. Sleeps fairly well at night.

29th May. No change to record.

12th July. Is in better bodily condition. Does some work in the grounds.

31st Aug: He is a bashful retiring nature, & ver

John Charles Veitch.

simple in manner. Is in good bodily health.

6th Oct: No change in mental condition. Has never attempted suicide in any way.

15th Nov: Still the same mild dementia. Is in very good bodily health. Takes food well.

1889.

12th Jan: Quiet + bashful in manner. Has recently expressed a desire to get away; the first time he has done so since admission.

24th March. No change in mental condition. Is in good bodily health.

7th July. Of a quiet and retiring disposition. Dully and vacuous and not improving. As his general health is fairly good.

22nd Oct. Still the same. No change to report. B. & C. good.

1890

October 4. Weak. nursed and just the same. B. & C. good.

1891

8 March. No change to note in this demented man. He enjoys good bodily health.

Aug. 28. Just the same. B. & C. good.

Dec. 24th. Works outside a good deal - & does everything in a dull vacant manner - He is considerably demented - His bodily health seems good.

1892

He is not degraded or dirty - or a shameless masturbator.

April. 12th. No improvement to record here.

Aug. 15th. Just the same. One of the chronic unchanged Nos.

L. Vol. IV. 571.

John Charles Stocks Aet. 38.
Admitted 9th April 1888.

Patient is a pauper chargeable to the City Parish, Glasgow.

He is married, a Police Constable, & resides at 7 Ingram St., Glasgow.

He is said to have been insane for a few days, this being his first attack. Cause is unknown. Not known at D.

He is certified as talking, at times, in a rambling incoherent manner; he believes that he has been poisoned & has threatened to kill his wife.

This patient's illness is suspicious of General paralysis. He is Voluble & at times somewhat incoherent. He readily made a friend of the writer & tried to tell him about his illness. His memory is defective. He speaks of the excellence of his own character & the great regard & confidence which the Captain of the police force has for him. His whole manner & conversation is of this grandiose type. With some words he shows a little hesitancy & tripping. There is no tremor of tongue or lips. Right pupil is more contracted than left. There is no unsteadiness of gait. Knee reflexes apparently normal.

Patient is almost 6 ft: in height, & he is proportionately well built, with a tendency to obesity. Nothing

abnormal is detected in lungs or heart. Urine free from albumen. Right pupil more contracted than left.

29th April. Easy & Contented in manner - Smoking & communicative in conversation - Keeps well at night.

13th May. Practically no change in mental condition. Speech does not seem so much affected as on admission.

26th June. Is noisy & talkative at nights; Sleeps little. Says there are electric wires under his bed which are curing him.

31st July. No change in mental condition. Noisy & restless usually at nights. Not taking food well.

4th Sept: Within past month has ~~become~~ altered in manner, ~~dull~~ & Constantly is praying aloud. Says he has committed many serious sins — refers to his life in India as a soldier. Usually goes about with his hat in his hand - sometimes dips his head under the water at the drinking fountain in the airing court. Is much thinner since admission. Face & eyes often congested.

3rd Nov: Noisy & restless. Talkative at night. Very untidy in dress. Goes about airing court in a stupid manner. Constantly praying aloud. Seems as if he were breaking down.

8th Dec: No change in mental condition. Usually noisy & restless. Bodily condition fair.

1879

2nd Feb: To-day patient had a congestive attack,

(345.

Daniel Fraser Aet: 62
Admitted 12th April 1888.

Patient is a Pauper chargeable to the City Parish, Glasgow.

He is a widower, a labourer, & has no fixed place of abode.

He is said to have been insane only a few days. He has been a patient here twice before, the last time being in August 1886 (see Journal Vol: II p. 407) & discharged January 1887. As referred to in latter Journal, his paternal uncle died in this asylum.

He is certified as being suicidal & that he hears voices which tell him to destroy himself- was taken to the ~~Central Police~~ Office by a constable, who found him shouting in the street that he was going to drown himself.

Patient speaks in a Coherent manner. He has a rather depressed appearance. He says he has been drinking. He says he is constantly troubled with voices which tell him to drown, hang, or cut himself, & feels that he must do what they command him. His condition seems to have been similar when last admitted here.

Bodily health & Condition ordinary. Lungs & Heart normal to examination. Urine free from albumen.

Daniel Fraser.

8th April. Has been quiet since admission. Is assisting the attendants in the Gallery. Does not seem so depressed. Says the "voices" have now gone.

24th April. Much happier in disposition. In good bodily condition. Sleeps well at night.

6th June. This patient seems fairly well. He seems to be suffering from mild dementia.

16th Aug: Doing well. Is now one of the working patients in the West House.

25th Oct: In good health & condition.

1st Jan. (1890) No change in mental condition. Seems to be quite pleased with his position. Is getting stout.

7th April. Apparently contented & happy. Is in good health. Still one of the working patients in the West House.

15th July. Unchanged. Works well and is in good bodily health.

22nd Oct. Considerably improved. Hears no voices and works steadily B.H.T.C. good.

1890

Aug. 26th. Patient is still working in the West House. Mentally unchanged. He enjoys fairly good health save for occasional attacks of lumbago & piles.

Oct. 30th. Unchanged. Patient still in West House & enjoying fairly good health though lately suffering from a severe cold.

1891

5 March. Unchanged. Still in West House & in good bodily health.

Aug. 13 Discharged Relieved.

Patrick O'Hara. Aet. 33.
Admitted 14th April 1888.

Patient is a pauper & chargeable to the City Parish, Glasgow.

He is married, a Labourer, & resides at 282 Castle Street.

He is said to have been insane for two weeks, this being his first attack. Cause is intemperance. No known H.D.

It is said that he has been drinking heavily of late: that he has been violent towards his wife & children & that he believes the former has been unfaithful.

Patient seems to be emerging from his previously excited condition. At present he is quiet & quite coherent. However, he asserts that his wife gave him some drug & that while under its influence she committed adultery with their lodger. He does not exhibit any other delusion.

He is a man of ordinary physique. Nothing abnormal detected in lungs or heart. Urine containing a faint trace of albumen.

18th April. Patient has been quiet since admission. He now admits that his idea of his wife's unfaithfulness has been a delusion, & he believes that his condition has been due to "drink".

14th May. Is quite well mentally. Bodily health & condition good.

Discharged to-day - Recovered.
14th May 1888.

6th April. Pa
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8th April. Is
few

30th April. Has
Stree
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1st June. Was
for
very

James Alexander Dalziel.
(Cont^d from p. 128).

fact, seems like a return of the maniacal condition.

4th April. Still restless, excited & foolish. & abusing himself again.

12th April. & a little quieter again within past few days.

25th April. Since last note he has been doing well. Sleeps well at night. Talks in an intelligent manner, & for the past week or two has been able to go to the dances.

1st June. Has been apparently quite well mentally for past month. Bodily health & condition very good. Sleeps well at night.

Discharged to-day. 1st June 1888.

Recovered.

Andrew Godfrey Aet. 69.
Admitted 16th April 1888.

Patient is a widower, a blacksmith & resides at 9 Hutcheson Square, Glasgow.

He is said to have been "peculiar" for years, but much worse during past few months. He has been of intemperate habits. He worked in Egypt at the Suez Canal, & his life there is supposed to have had something to do with his illness. The latter has been exaggerated by a slight paralytic shock which occurred 5 months ago, affecting his left side, & by the death of his wife 2 months ago. This is his first attack. A sister is at present insane.

He seems to have taken a gloomy view of all things; has thought that he will be unable to pay his taxes & for this purpose the house furniture must be sold; thinks that articles of furniture have been stolen from his house; has refused to use the W.C. at home, because he is afraid of choking the pipes.

Patient is very melancholic. He is very reserved, not showing any inclination to converse. Since admission he has refused to take food while in bed, giving as his reason that it will produce diarrhoea & consequently soil the bedclothes.

2nd April
15th May.
16th June.
16th July.
3rd Aug.
20th Oct.
2nd Nov.
1889
10th Feb.

Andrew Godfrey.

Patient is above the average height. He is somewhat emaciated, & is very frail, when he attempts to walk. His right eye is gone – this is said to have been the result of an injury some years ago.

Nothing abnormal detected in heart or lungs, except that the sounds of former are weak. There is a trace of albumen in the urine.

4th April. Very melancholic. Will not speak, unless very much urged. Objects to going to W.C. as he says he may choke the pipes.

1st May. Mental condition unchanged. Sleeps little at night & is restless.

6th June. Still depressed & miserable. Refuses to speak. Does not take food very well.

4th July. No change to record in mental condition. Sleeps better at nights.

5th Aug. Is fast becoming demented. Bodily condition indifferent. Occasionally passes urine, during the day, while sitting on a chair, making no attempt to go to the urinal.

2nd Oct. Has to be guided & treated like a child in every way. Is not any clearer mentally.

2nd Nov. No change to report. He thinks he has grown "very large" recently.

1889.

5th Feb. Deeply demented. Rarely speaks to any one. Now "wets" himself frequently. Usually sleeps well at night.

35/

James Cooper Rowe Aet: 33.
Admitted 16th April 1888.

Patient is single, formerly a warehouseman, & resides at 5 Cecil Place, Paisley Road, Glasgow.

He has been twice in this Asylum before, being last dismissed in February 1884 (see Journal Vol: II p. 463).

He has been more or less insane since his dismissal, & recently has been more unmanageable. He is certified as being incoherent & has many delusions, that there is a conspiracy to kill him, & he is afraid to go to sleep on account of this; & that he had to take out a tooth to save his life.

He is very silly & apparently demented. Does not express any astonishment at being brought here; says he came of his own free will, although some little force had to be used to take him out of the cab. He answers questions in a childish & somewhat careless manner. When being examined he pointed to a small spot & staining on the skin of his chest, & declared that it was cancer.

There is a strong family tendency to insanity, he being the fourth member so affected.

He is a little below the average

James Cooper Rowe.

Height. Bodily health & Condition fair, although muscles somewhat flabby. Nothing abnormal detected in lungs or heart. Urine free from albumen.

28th April. Since admission Patient has refused to speak to any one. At times behaves in an erratic & foolish manner.

20th May. Practically no change. General health good. Very restless.

18th July. Within last few days he has been, if anything, a little more intelligent & takes some interest in things. To-day he spoke to the writer in a quiet intelligent way. Does not behave so foolishly. Is quiet & manageable.

28th July. Patient is discharged to-day, & taken home by his father.

Relieved - 18th July 1888.

Readmitted 28th Oct. 1889

See p. 443.

Thomas Hoy Aet: 35.
Admitted 17th April 1888.

Patient is a pauper, chargeable to the Parish of New Monkland.

He is married, a labourer, & resides at Stonefield, Greenfoot, New Monkland.

He is said to have been insane 2 weeks, this being his first attack. Cause is unknown. No known H.D.

He is certified as being low spirited & unwilling to work; he imagines he hears voices; talks incoherently of different kinds of spirits, lies, & of great sins which he has committed.

His wife says that during last nine months he has been more or less melancholic - became a great reader, especially of religious books, & not inclined to converse. This contrasted very much with his previous mode of life: he was of a jolly roving disposition & rather intemperate. During last fortnight he has hinted at doing away with himself. His wife has found him writing on paper & when asked about it he would say he was recording dreams which he had had.

He is a man of average height: bodily health & condition ordinary. Nothing abnormal detected in lungs & heart. Urine free from albumen.

He is suffering from melancholia

27th April.
14th May.
24th June.
27th July.
4th Sept.
10th Oct.
14th Nov.
1889
8th Feb.

Thomas Hoy.

It is with difficulty one can get him to answer questions. He seems rather indifferent as to his coming here. When asked about his unwillingness to work & the cause of his illness, he makes no reply, simply smiles.

28th April. Does not speak much to attendants or fellow patients. Has not shown any delusions since admission. Speaks coherently when spoken to, although he is very reserve in his manner. Now wishes to get home. His wife says he has only been working at intervals during last 9 months.

14th May. Still very depressed & will hardly speak to any one. Sleeps well at night.

2nd June. Answers questions more readily than on admissions, but mental condition not much improved.

2nd July. No change to record. Bodily health & condition good.

4th Sept. Seems improved. Works about in the grounds. Speaks more freely.

2nd Oct. Nothing unusual in this man's behaviour, but his quiet manner. Seems fairly well in mind. Bodily health good.

4th Nov. Still a little dull, otherwise seems fairly well. Works regularly in the grounds.

1889
4th Feb: Is in much the same condition. Is not

William Daily (or Deely) Aet: 35.
Admitted 19th April 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single, a cork cutter, & has been resident in the Town's Hospital for the last year, at least.

He is said to have been insane for some months, this being his first attack. Cause is unknown. No known N.D.

He is certified as being a case of epileptic insanity. Apparently the outbursts are very violent, he having frequently made attempts to seriously injure the attendants in the town's hospital.

Patient is below the average height. He is strong & muscular, & general condition is good. He speaks coherently, but with some little hesitancy; whether the latter is natural or not cannot be determined at present. On his face are several scars, said to be the result of falls occurring while in an epileptic seizure. As regards his mental condition not much can be said, except that he is apparently weak-minded & childish.

Lungs & heart normal to examination. Urine free from albumen.

4th. May. Evidently a confirmed epileptic & is somewhat demented. Has had several fits since admission.

28th May. Condition unchanged. Has had

William Dailly. (Cont.)

some fits, although not many, since last note. Bodily health & Condition good. Has been having 15 grs. Potas: Bromid t.i.d. since admission.

Discharged to-day & taken to Ireland.

Relieved.

Adam Hunter Aet: 24
Admitted 23rd April 1888.

Patient is single, recently employed in sheep. farming, & resides at Sea Tower, Ayr.
This is the third attack. He was a patient in this asylum from January till September 1882 & again from June till December 1884, (see Journal of West House, Vol: XXIII (p. 15). On each of these occasions he was labouring under acute Mania.

Since his last dismissal he has been about two years engaged in sheep. farming in New Zeeland.

The present attack is said to be of 2 weeks' duration. Cause is uncertain. A paternal uncle is at present insane.

He is suffering from Acute Mania. Both manner & conversation are excited. At times he is violent & threatening. He is very restless - walks up & down the gallery & speaks in a boastful & defiant manner.

He is a tall, robust man, seemingly in vigorous health.

28th April. Still much excited & restless. Is somewhat destructive. Occasionally is violent towards the attendants. Talks almost incessantly.

3rd May. At times wildly excited. Sleeps at night, in padded room & in canvass dress. Passes water in bed.

15th May. Incoherent & rambling in his talk. Restless & noisy at nights. Sometimes passes both urine & faeces in room

Adam Hunter.

5th June. Very unsettled. Interferes with other patients when he gets an opportunity. Does not sleep well at nights. Back of neck blistered to-day.

1st July. Condition practically unchanged. May be at times a little quieter. Blister again applied to neck to-day.

5th Aug: No real improvement. Constantly talking. Noisy at nights. Still soiling his room at night.

4th Sept: Of late has been sleeping a little better at nights. Still very unsettled. Gets draught of Chloral & Bromide at bed time.

2nd Oct: During last month there has been, if anything, a little improvement in patients mental condition. He sleeps better at night. Does not soil his room. Is more manageable. Bodily health and Condition good.

1st Nov: Dec Much the same during past month. He is a little more tidy in appearance. During some nights he sleeps fairly well & is quiet, while during others he is noisy & restless.

7th Dec: Apparently settling down. Is much quieter. Sleeps well at night. He now walks round the grounds with the other patients, formerly he was confined to airing Court. Sometimes he is a little foolish in his conduct. Bodily health good.

1889.

2nd Jan: For past 2 weeks has been very well. Seems quite recovered. Is putting on flesh.

1st Feb: Doing well. Is very stout (14 Stones).

6th March. Discharged to-day as Recovered.

Thomas Renton Aet: 24.
Admitted 25th April 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single, a Boiler maker & resides at 63 Tyle field Street, Glasgow.

He is said to have been insane a few days, this being his first attack. Cause is unknown. No known H. D.

He is certified as being easily excited, rushing about the house & knocking the furniture without apparent cause; he thinks he has to sing in St. Andrew's Halls.

Patient is restless, talkative & foolish in his conduct. He is somewhat incoherent. Speaks indifferently about his being here.

Bodily health & condition are ordinary. Nothing abnormal detected in lungs or heart. Urine free from albumen. Right eye has been enucleated.

3rd. May. Has been fairly quiet since admission. Sleeps well at night.

30th May. Restless & talkative at times. On the whole he is doing fairly well.

25th June During last few days he has been more restless, & even destructive at times. Not sleeping so well at night.

24th July. Conducts himself in a foolish stupid way. Wanders about the apartment in a aimless manner. Requires to be clothed in Canvass, on account of destructive habits. Sleeps fairly well at night.

Thomas Renton.

31st Aug: Conduct the same as at last note. Often restless & noisy at nights.

3rd Oct: Very Childish & restless. Goes about the ward singing frequently. Speaks incoherently. Bodily health & condition indifferent: Still destructive & meaninglessly so, when left to himself.

6th Nov: Restless & incoherent. Does not sleep well. Can or will not do anything for himself. Circulation slow — hands sometimes livid.

19th Dec: Still in the same restless demented condition. Bodily condition fair.

1889.

24th Feb: Foolish in conduct. Answers all questions in a childish manner. Noisy & restless, & does not sleep well at nights. Bodily health and condition fair.

1st April. No change in general condition. At times he is a little quieter, but usually he is restless & noisy. Bodily health fair.

5th August. Sank & died 6. day.

Patrick R. M.

John Whitelaw, Aet. 33.
Admitted 26th April 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a foundry-worker, & resides

(see p. 133) This is his 3rd attack being dismissed from this Asylum so recently the 23rd Jan: 1888. He worked for 2 months after leaving here, but has been drinking heavily again for past 3 weeks.

At present he is much excited & troublesome. He is very shaky - face flushed. Eyes blood shot; indeed all the symptoms of Mania a Potu. Tongue furred.

Bodily health & condition ordinary. Urine free from albumen.

29th April - Much quieter to-day, but still very shaky.

30th April. Is now quite steady, able to do a little work.

17th May. Is quite well mentally. Bodily health & condition good.

Discharged to-day - 17th May 1888.

Recovered.

John Reid.

Cont^d from p. 146.

Liq: Epispas:.

25th March Blistered surfaces have never properly healed & there are now 2 abscesses with extensive inflammation around them, in posterior part of neck. These are being dressed daily. Patient is quieter & more manageable.

16th April. The presence of the long continued & somewhat severe irritation in back of neck has decidedly had a beneficial effect on patient's mental condition. He now sleeps well at night. He is quiet, orderly, & tidy in manner & dress. He is a great reader & seems to occupy his time well. He is also decidedly improved physically. Abscesses in neck now healed.

14th May. During past month improvement has been steady & rapid; & he is now quite well. He has been allowed the freedom of the grounds during past 3 or 4 weeks. Physical condition very good. He is discharged to. day — 14th May 1888

Recovered —

Readmitted
July 7th 1890
Vol. IV p. 53.

Dr James Dennistoun Aet: 33.
Admitted 28th April 1888.

Patient is married & resides at Dunpon being a medical practitioner there for the past 9 years. He is a voluntary patient & has come here for the purpose of being weaned from the habit of taking morphia to which he has been addicted more or less, for the past 9 or 10 years. He was a surgeon in the Turkish army during the Russo-Turkish war (1877-78) & it was while enduring privations there that his habit grew upon him. He has taken it by the mouth, hypodermically, & in the form of suppositories. Once last autumn he almost killed himself with it, being found in a comatose condition, with stertorous breathing & "pin-point" pupils. After this he took a voyage to Australia, thinking that might "cure" him, but he got some in Melbourne. He gave it up completely for 3 months after coming home, viz: January, February & March of this year, but again fell a victim to it in the beginning of this month. Although ordinarily a very temperate man, yet, after taking any quantity of morphia, the desire for alcoholic stimulants is so great that he gives way to this also. He last took some morphia on 25th inst: & he says that yesterday (27th) he drank one bottle

James Denniston.

of Brandy.

He looks younger than his years, is of ordinary Physique, & about the average height. In every sense he seems a healthy individual. His face is flushed & eyes congested. Tongue furred. Hands shaky. He is somewhat excited & apparently feels his position keenly.

2nd April. Did not sleep any last night, but is quieter & more settled to-day.

30th April. About 2 hours sleep last night. Says he feels all right & quite "like himself" again.

3rd May. Is quite well. Apparently contented, but feels the humiliation of being here very keenly.

30th July. Has done well since last note. Quite strong both bodily & mentally.

Discharged to-day.

Recovered.

John Lawrence, Aet: 62.
Admitted 1st May 1888.

Patient is single, a farmer & resides at Muirmailing, East Plean, Bannockburn.

He is said to have been insane 3 months, this being his first attack. Supposed cause is business difficulties. No known H.D.

He seems to have behaved in an erratic manner at home. Formerly he was industrious but recently he would not work. He sometimes would stand behind doors in the house & prevent people from going out & in: at other times he would stop the horses while working. Periods of excitement with periods of depression are said to have alternated. & occasionally he would wander about in an aimless manner.

He is a man a little under the average height & rather sparely built. He has a frail, worn-out appearance. On admission he was found constantly talking in an incoherent manner & insisting that his brother was insane & he was sane, & that this would yet be seen by the authorities here.

Nothing abnormal found on examination of heart & lungs, except that sounds of former are rather feeble. Urine free from albumen.

3rd May. Is quieter to-day, but is still incoherent.

John Lawrence.

7th May. Very noisy & restless. Canvas dress required & patient put in padded room during the day.

18th May. During last week has been much better. Excitement seems to be rapidly passing off. Sleeps fairly well at night. Quite coherent in talk.

1st June. Doing very well. Working every day in the grounds. Sleeps well. Bodily health good.

27th June. Is quite recovered mentally. During last few days there has been some inflammatory affection of the bursa over one elbow. Has been painted with iodine & swelling is less.

Discharged to-day — 27th June 1888.

Recovered.

Re-admitted - 8th April 1889.

See p. 369.

213

John Dalton Aet: 50
Admitted 2nd May 1888.

Patient is a pauper & chargeable to the City Parish, Glasgow.

He is married, a Designer, & resides at 145 New City Road, Glasgow.

He is said to have been insane for 4 months, this being his first attack. Supposed cause is intemperance. No known N. P. to insanity, but his parents & other members of the family have been intemperate.

He is certified as being very excited & violent towards his wife; also that he hears imaginary voices & sees imaginary forms. It is also said that he is suicidal.

He seems to have been labouring under Mania a potu & is now emerging. He is very tremulous in every limb. He speaks quite coherently & does not exhibit any delusion. Tongue is furred. Eyes congested.

Bodily health & Condition ordinary. Nothing abnormal detected in lungs or heart.

4th May. Now seems quite well & able for some work in the ward.

6th June. He is now in good mental & bodily condition. Is quiet & pleasant in his manner.

Discharged to-day — 6th June 1888.
Recovered.

1888.

6th July.

27th July.

4th Aug.

2nd Sept.

26th Sept.

24th Oct.

Alex: McDonald.

Cont from p. 184.

1888. millions of money & of his going to marry the Queen: always signs his name "Lord McDonald of the Isles".

6th July. During past 2 nights has had some diarrhoea & vomiting. Nothing found to account for this. Is rather better this afternoon

9th July. Has been again sleeping much better at night. Is much quieter & not so uncivil. Physical condition improved.

4th Aug: Is very quiet & manageable. Takes his food well. Sleeps well at night. Conducts himself in a gentlemanly way. Is more tidy in personal appearance. Occupies his leisure time in drawing & reading. Is unsteady in his walk. Hardly any tremor of speech observed. Does not often give expression to any delusions, but rather assumes a kind of haughty indifferent manner when spoken to about certain things.

2nd Sept: Physical condition much improved. Takes regular exercise in airing-Court. Still speaks of his independence & the ease with which he has given away considerable sums of money. Agreeable in his manner & willing to enter into conversation.

6th Sept. He is discharged to-day on leave for 4 weeks. He is very well bodily. Mental condition much the same for past month.

4th Oct: Discharged from books to-day.

-Relieved-

John Caffield Aet: 48
Admitted 6th May 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a hawker, & has resided for the past 8 months in the City Poorhouse.

He has apparently had a hemiplegic attack & is now suffering from Paralytic dementia.

9th May. To-day he is removed to Dumfries Asylum.

Discharged - Relieved.

John Philips.

Cont. from page 148.

1888.

28th March. Had a distinct Epileptic fit during last night & one during the previous night.

18th May. During the past 3 weeks has had 2 fits, one at night & one during the day. Always for some hours after the seizures patient is very stupid: there has also been observed a difference on the 2 sides of the face, the left being flabby & expressionless.

3rd June. No fits since last note. Patient seems much demented. Bodily Condition good.

2nd Aug: No more fits recorded. Mental condition unchanged.

3rd Oct: Nothing new to record in this case.

18th Dec: Is considerably demented. Goes about the airing court in a slow manner, extremities usually cold. Languid circulation. At present bodily health good.

1889.

9th Feby: Had a number of Epileptic attacks on one occasion last month, & again a number Yesterday.

1st March. For the past week patient has had a great many epileptic seizures both during day & night, sometimes continuously for hours at a time. The ~~left arm~~ twitching was confined to the right side, & the right arm & leg are at present quite paralyped.

10th April. Has had no fits since last note & he is gradually recovering the use of right arm & leg. He is very childish in Manner & speech.

To p. 448

Terence McQuade Aet: 48.
Admitted 11th May 1888.

Patient is married, a Cattle-Salesman, & resides at 16 Craigpark St., Dennistoun, Glasgow.

He is said to have been insane for some weeks, but much worse during past week. This is his first attack. Cause is supposed to be intemperance & business anxieties, chiefly the former. His mother's mind is said to have been disturbed before her death, & a sister is excitable.

He is certified as being very violent & talkative; thinks his wife has been unfaithful: his wife & children had to leave the house owing to his violence.

Patient is apparently suffering from the effects of alcohol. He is very talkative & somewhat incoherent. Uses very coarse & boastful language. He is very restless. Eyes congested. Tongue furred & tremulous. Limbs shaky.

He is a powerfully built man of average height. He is very hoarse & has a slight cough. No abnormal sound was detected on examination of lungs & heart.

12th May. Had a draught last night after which he slept a little. Is quieter this morning, but still talkative

14th May. Is now emerging from his excitable condition. Sleeps fairly well.

20th May. For the last few days has been

23rd May.

Terence Mc Quade (Cont.)

walking about the airing court. Talks a great deal with anyone who will converse with him. Speaks freely about his business affairs.

25th May. During past few days he has been more restless & excitable & speaks of his unjust detention here. Although much improved since admission his mental condition is still unsettled & unbalanced.

To day he is discharged at the desire of himself & friends. Taken home by his wife.

Relieved.

Re-admitted as a Fiscal Patient on 30th July 1888 - see page 255.

James McClymont Aet: 19.
Admitted 11th May 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single a salesman, & resides at 6 Clarendon St, Glasgow.

He is said to have been insane one week, this being his first attack. His mother died about 3 months ago & the grief which followed this is supposed to have had something to do with the cause of his illness. No known H.D.

Patient is small in stature & of spare build. His bodily health & condition seem very poor.

His mental condition seems to be that of acute dementia. He is morose & apathetic. Apparently unwilling to move about or answer questions. His father thinks he is suicidal, having been seen using his knife in a suspicious manner.

Nothing abnormal detected in lungs or heart. Urine free from albumen.

16th May. Practically no change in mental condition

30th May. At times is a little livelier, but still on the whole not much change

26th June. Is apparently emerging from the dull listless condition. Sometimes assists a little about the wards.

29th July. Improving. Bodily health and condition much better than on admission.

16th May: [illegible]

15th Sept: [illegible]

James McClymont.

4th Aug: Is now apparently quite well. Works regularly about the grounds. Is becoming very stout. At his best he does not seem to be a particularly cheerful lad.

4th Sept: Mental condition now well. Is in good bodily health.

He is discharged to-day.

Recovered.

Peter Hamilton Aet. 45
Admitted 12th May 1888.

Patient is a pauper & is chargeable to the City Parish Glasgow.

He is single, a labourer, & resides at Greendyke St. Model Lodging House.

He is said to have been insane only a few days. He is said to have been a patient in Govan Parochial Asylum 3 years ago No known S.D.

He is certified as being homicidal & this morning attempted to stab the superintendent of the lodging house in which he was staying. He hears voices which tell him to drown himself &c.

Patient is quite incoherent in his conversation, but at present is quiet.

His bodily health & condition are ordinary. Nothing abnormal detected in lungs or heart. Urine contains trace of albumen

13th May: Last night & again to-day he had a violent fit of excitement, running about the ward & knocking everything over which came in his way. A canvass suit & gloves were put on.

18th May Still very restless. Tongue dry & foul. There is acute bursitis over right patella. Fomentations to be applied.

26th May. Gets a little more sleep now, but still restless & maniacal when away. Knee is improving.

4th May.

9th May.

2nd May.
20th June.

2nd August

1st September.

Peter Hamilton.

12th May. Is now somewhat quieter & more manageable. Knee well.

11th May. During past week has been sleeping fairly well at night & is much more settled.

24th May. Doing well since last note.

24th June. Now apparently almost quite well. Is engaged in working in the grounds.

2nd August. Is quite well. Bodily Health and condition good.

1st September. Has kept well since last note. Is in good bodily health.

Discharged to-day.

Recovered.

Robert Hay Aet: 59.
Admitted 15th May 1888.

Patient is single, a handloom weaver, & resides at 8 Craigneslock Place, Glasgow.

He is said to have been insane for 9 weeks, this being his first attack. Cause is unknown. There is no H.D.

He is certified as going about the house roaring & screaming without cause; believes that he will soon die, because he is very unwell, & that his limbs & internal parts are decaying. It is also said that he has attempted suicide & tried to do injury to others.

On admission patient seemed very miserable, expressing great re-gret at having been forced to leave his home & come here "to die", as he said. He imagines that he is very unwell & says he will die "this very night".

Patient is a little below the average height & seems in good condition. He is very corpulent. On right leg there is a scar & considerable dis-colouration round about, said to have been the result of an ulcer recently healed. Lungs & heart examined – nothing abnormal detected. Urine normal.

20th May. Mental condition much the same. He constantly mourns over his "ill health".

Robert Stay.

& wishes some medicine to be given him.

2nd June. Still the same miserable condition. Says people are coming to cut him up, or to execute him, & so on.

2nd June. no improvement. Sleeps well at night.

2nd July. Condition much the same since admission. Very depressed. Bodily condition good.

2nd Aug: Still in the same miserable condition. When in the airing court is usually found crouching on a seat, with body & legs off the ground. Frequently picks his scalp.

2nd Sept: No change. Same delusions. Takes food well.

26th Oct: Nothing new to record in this case. Still depressed & miserable. Always refers to his mode of death when spoken to. Bodily condition good.

2nd Nov: No improvement. Still very gloomy & depressed. Usually sleeps well at nights.

1889.

3rd Jan: No improvement in mental condition. Says he is dying & there is no hope. Says most of his relations are dead. Bodily health fair. Sleeps well at night. Takes food well.

2nd March. Still depressed & miserable. Bodily condition good. Does little for himself.

1st May. In a very despondent condition refusing to be comforted or cheered. Bodily health rather better and sleeps well.

Jobs. 450

James Forrest Gillespie Aet: 23.
Admitted 16th May 1888.

Patient is a pauper & chargeable to the City Parish, Glasgow.

He is single, an artist, & resides at 70 Great Hamilton St:, Glasgow.

He is said to have been insane about a month, this being his first attack. Supposed cause is over study. His father was insane & confined in Woodilee Asylum 4 years ago.

He thinks he has come under the influence of a Clairvoyant, & that he has been commanded to do various things. He says he is charged with electricity & that he is "the inspired one of God." He has had both illusions & hallucinations - mistaking a window draped with white curtains for an angel with wings, & he has also heard, as he now calls them 'imaginary' voices. His friends say that at times he becomes excited & has attempted to jump over the window. He speaks in a quiet coherent manner, at times making gestures with his hands. In the course of conversation with the writer he stopped somewhat suddenly, clasped his hands & for a few minutes gazed at the roof; he explained he was praying to heaven.

Physically he is in good condition nothing abnormal detected in lungs

James Forrest Gillespie.

or heart. Urine free from albumen.

2nd May. Conducts himself in a very foolish manner. Sometimes will be found standing in a dreamy condition & then will suddenly rush away in an aimless manner. To-day he threw himself on the ground, cutting his lip as a result.

6th June. Restless & foolish. Does not sleep well at night. Talkative. Says he is commanded by Heaven to do certain things. Blister applied to neck (back) to-day.

28th June. Manner changed. Has become very quiet & will not speak to any one. Still restless during the night.

2nd July. Again talkative & foolish in conduct. Sleeping better at nights. Bodily health good.

3rd Aug: No improvement in mental condition. Untidy in dress.

2nd Oct: Patient seems rather improved. His behaviour is much more satisfactory & he is now able to work in the grounds.

7th Nov: He is, on the whole, quiet & orderly, but sometimes a little foolish, laughing to himself, &c. Has no delusions, so far as known. Bodily health good.

7th Dec: During past 2 weeks he has again become dreamy & listless & will hardly answer simple questions. Bodily condition good.

1889.

2nd Feby: Dreamy & Stupid in manner. Very slow at doing any work. Languid circulation — extremities often cold.

360

William Campbell Aet. 76.
Admitted 22nd May 1888.

Patient is single, a farmer, & resides at Newmills House, Lochwinnoch.

He is said to have been insane about six months, this being his first attack. Cause uncertain. No known H.P.

Patient has been retired from work for some years & lived with a housekeeper. The latter, about 6 months ago, met with some accident which prevented her from going about. Shortly afterwards he had an attack of "bronchitis" & he thought that he could get no one to attend to him, although his nephews lived quite near. He then became very sad & melancholic & thought he was going to die, that his money was going done, & all his friends were leaving him. He thinks the latter wish to get rid of him.

His friends say that recently he would leave his house at night & would remain about the fields, &c, & they were afraid he might commit suicide.

He is suffering from melancholia & repeats the above sentiments, that he has no means of support, & that he can be of no further use in the world &c.

Patient is a tall man, erect for his years; in fact looks more like 66 than 76. Nothing abnormal detected

William Campbell.

in lungs or heart. Slight swelling of both ankles. Urine free from albumen.

4th May. Very melancholic. Does not sleep well at night. Bowels constipated. He is very deaf.

4th June. No improvement in bodily condition. Says he has no money to keep him here. Bodily health fair.

4th July. Still depressed in mind. Not inclined to take much exercise. Sleeps better at night than on admission.

8th July. Patient has been rather brighter during past week, & answers questions more readily than formerly.

1st Aug: During past month the improvement has continued & he now takes more exercise. Takes food well. Sleeps fairly well.

6th Sept: Condition much the same as at last note. He is not talkative, but his friends say he has always been of a retiring disposition.

20th Oct: During past week or two he has not been feeling so well physically. He has complained of headache; the feet & legs have also been more swollen recently. There is the slightest trace of albumen in his urine. Mental condition fair.

25th Oct: Bodily condition a little improved, but still occasionally complains of headache, & "feeling out of sorts". He is still dull & not inclined much for conversation. To-day he is discharged & taken home by his nephew.

Relieved.

William Robertson Aet: 34 (about).
Admitted 24th May 1888.

He is admitted to-day as a voluntary patient. He is married, a clerk, & resides in Glasgow.

This is the second time he has been admitted here as a voluntary patient, the same cause being accountable for his illness. (Intemperance). (see Journal Vol: II p. 155). He was discharged last time on 15th January 1886.

He has been drinking more or less continually since beginning of last month, at intervals for some time previously. He says he feels quite unable to give up the habit himself. He is much depressed at present. Limbs very shaky. Eyes congested. Has no delusions or hallucinations. Bodily health & condition good, but he has become rather obese.

27th May. Has been sleepless since admission. Still shaky & somewhat depressed.

10th June. Decided improvement. Is much more cheerful. Sleeps better at night.

2nd July. Doing well, but becomes depressed at times when he thinks of his past life & also on account of his uncertainty whether he may be allowed to return to his situation.

25th Aug: Discharged to-day. Is now quite well.

Recovered.

John McKinn Aet: 55
(Contd from p. 150).

nearly well. Wound in neck healed. Still considerably depressed mentally. Does not sleep well at night.

2nd March. Has been able to be out of bed for past week. Is very miserable.

1st March. Has been sleeping rather better of late, & mental condition a little improved.

28th March. General health indifferent. Not much change mentally.

2nd April. Complains occasionally of pains in limbs. During last few days has been again very depressed. Says that he should have been dead long ago &c.

2nd May. During ~~past few days~~ he has been taking very little food, & he was fed ~~with~~ by the stomach tube yesterday.

2nd May. Is excited this morning. Required to be fed by tube to-day also.

1st June. Since last note has been quieter. Is taking his food better.

1st July. Has not been sleeping well. Pains in his shoulder especially at nights. Has been confined to bed since beginning of last month.

6th Aug: Always complains of pains in his shoulders or legs, chiefly at nights. Troubled much by constipation. Has been getting anti-rheumatic remedies.

1st Sept: Still complaining of Pains. Lately has been put on Pot: Iodid: & Sydiarg: Bichlor: mixture. He is considerably improved mentally, but is still somewhat dull in spirits.

5th Oct: To-day he is discharged & taken home by his wife.

Relieved.

James Steven Aet: 21
Admitted 8th June 1886.

Patient is single, a shopkeeper, & resides at 349 Dumbarton Road, Glasgow.

He is said to have been insane about one month, this being his first attack. Cause unknown. No known H.D.

He is certified as being "depressed in spirits, has committed various sins; has been poisoned &c." His Mother says he had to remove him from a police office in Glasgow, where he (James) had gone for protection from himself & others.

He has a listless dejected appearance & does not seem inclined to converse. In answering questions he seems rather confused. He says he wishes to destroy himself.

He is a tall thin man, stoops a little, shoulders narrow. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen.

20th June. Listless & uncommunicative. Circulation slow - hands usually cold & livid. Does not take any interest in his surroundings. Sleeps well at night.

25th July. No improvement in mental condition. Yesterday attempted to escape by jumping over the wall, but was immediately captured by an attendant.

15th Aug: There seems to be a considerable amount of dementia in this patient. Sometimes

James Steven.

he answers questions in a stupid thoughtless manner. General health poor. Sleeps fairly well at night.

9th Oct: No improvement in this patients condition, mentally or bodily. Dementia seems to be more marked than on admission.

4th Nov: At times he is stupid & childlike in manner. Asks foolish questions. Bodily health indifferent.

24th Nov: Discharged to-day by Authority of Board of Lunacy, & removed to Montrose Royal Asylum.

Relieved.

Patrick Craig Aet: 43
Admitted 14th June 1888

Patient is a pauper, chargeable to Parish of Old Monkland.

He is married, an Engine-keeper, & resides at 10 Hutton St. Coatbridge.

He is said to have been insane about 4 weeks, this being his first attack. Cause unknown. No known H.D.

He is certified as being "rambling & incoherent; thought his fellow. workmen meant to do him harm; that people wish to poison him."

His friends state that he has been in Australia for some years & that he recently appeared in ~~Australia~~ Coatbridge without letting them know he was coming. They know nothing of his life in Australia. Since coming to this country he has been usually restless & excited; imagining people were plotting against him.

On admission he is restless & foolish in his conduct. Makes grimaces at the people in the room. Speaks incoherently. Cannot carry on a conversation.

He is a man of average height & is in good bodily condition. Nothing abnormal detected in lungs or heart. Urine free from albumen.

26th June. ~~Was~~ quiet for first few days after admission, but recently has been noisy & foolish in his conduct. Sleeps fairly well at night.

Patrick Craig.

1888)

3rd July. Very restless & foolish. Interferes with other Patients & is accordingly frequently in scrapes. Cannot be got to do any constant work.

3rd Aug. No change in mental Condition. Bodily health & Condition good.

2nd Sept. Still conducting himself in a foolish manner. Very talkative & incoherent.

3rd Oct. Rather untidy in habits & appearance. Otherwise general condition unchanged.

2nd Nov. Goes about the airing court talking & acting foolishly. Sometimes gets into trouble by interfering with other patients. Usually restless at nights & does not sleep well. Bodily health good.

1889.

7th Feby. Uncertain & foolish in conduct. He occasionally assists the attendants in the wards, but cannot be depended upon. Bodily health good.

12th April. Usually foolish & talkative. Assists the attendants more constantly in the wards, than formerly.

17th Aug. Very foolish in his conduct. Gesticulates a great deal and talks incoherently. B. H. & C. are fairly good.

2nd Nov. I. S. 2. ——— .

16th May. In the same uncertain condition. Capable some days of conversing rationally and working in the Galleries assisting the attendants &c. at other times excited & incoherent & shifty. B. H. & Condition the fairly good & he sleeps well.

To p. 392

James Williamson Aet: 21.
Admitted 14th June 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single, a plumber, & resides at 28 Canning Place, Glasgow.

He is said to have been insane about one month, this being his first attack. Cause unknown. No known H.D.

Certified as being incoherent; says the men at his work annoy him & consequently wont go to work; hears voices; gets up at night & walks about the house; sees imaginary figures & strikes at them.

On admission he is quiet, not inclined for conversation & at present he does not exhibit any delusion. He is unconcerned & submits quietly to anything that he is asked to do.

He is of small stature. Seems in indifferent bodily health & condition. Is of pale complexion. Nothing abnormal detected in examination of lungs. Urine free from albumen. Pupils normal.

26th June. He is apparently quite indifferent to his surroundings - has rather a stupid appearance which would indicate that at his best he is not, perhaps, of a very high standard of intellect. Does not speak much.

His father says he was, before admission, suspicious of everything & body at home. Some tools went amissing at his work, & he imagined he was accused of the theft & was watched

James Williamson.

closely. His father also states that his son was not given to "drinking".

8th July. works about the wards & seems to take more interest in affairs. Bodily condition decidedly improved.

3rd Sept: Mental condition seems improved, but still too unconcerned in his manner. Does not exhibit any delusion.

1st Oct: No change to record.

3rd Nov: His father, who ~~seems~~ sees him, usually every week, thinks he is now well. He is distinctly more active & interested in his manner. Is quiet & behaves well, & so far as one can see, seems recovered.

24th Dec: Discharged to day. Seems quite well.

Recovered.

Samuel Dickenson, Sheriff, Aet. 6.
Admitted 20th June 1888. (?)

Patient is married, a farmer, & resides at North Berwick.

He is said to have been insane about three weeks, this being his third attack. He was dismissed from this asylum on 30th July 1886 (See journal Vol: I p. 473). Supposed cause of present attack is over excitement at work. No known A.D.

He was brought to the East House from the Western Police Office. He is certified as being restless, excited, incoherent, & has delusions, e.g. says he ~~had~~ saw Prince Albert Victor at the Glasgow Exhibition Yesterday. It is also said that he was found by the Police, on the street, "shouting & conducting himself in an insane manner".

On admission he was somewhat incoherent & rambling in conversation, & showed some resistance when being taken to the ward. He spoke of the loss to the public if he were detained here, & of other equally foolish affairs.

Bodily health & condition ordinary. No marks of injury observed. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen.

2nd June. The day after admission he was rather quiet & was allowed out to the Cricket-field

Sam: D. Shirriff.

in the evening. He was not long there, however, before he was conducting himself in his old manner, paying attention to the female attendants who happened to be in the grounds at the time. Since then he has been usually restless & foolish in conduct. Very untidy in dress. Frequently changes his cap with that of other patients. Usually restless & talkative at nights.

5th July. Still very foolish in his conduct. Draws figures of faces on the airing Court walls & says they represent females. At times he is seen to kiss these. Sleeping a little better at nights. Still untidy in dress.

26th July. Somewhat more settled. Sleeping well at nights. Takes a little more care with his dress.

30th Aug. Doing fairly well, but still talkative, & a little foolish in his conduct at times.

25th Sept. Now seems almost well. Is much more settled. Does not conduct himself foolishly. Sleeps well at night.

6th Oct. Has been sleeping well for past month. General health very good. Very youthful in his manner. Apparently enjoys the dances very much.

Discharged to-day- Recovered.

Readmitted Sept. 14th 1891. See Vol. V. p. 32

John Brown, Aet: 44.
Admitted, 22nd June 1888.

This Gentleman was admitted on a "certificate of Emergency", but became a "Voluntary" Patient on the 25th June 1888.

He is single, a Stockbroker, & resides at 2 St. James' place, Hillhead, Glasgow

Present illness is of 10 days duration & the cause is said to be intemperance. This is not the first attack.

No Known A. D.

Was certified as being Confused, excited, & disposed to be violent & dangerous.

It appears that Patient has had several "bouts" of drinking since 1880. He has been drinking, more or less, for past 3 weeks. Was at business irregularly during last week, but Confined entirely to the house for past 4 days.

On admission he seemed to be emerging from an acute attack of mania. He was somewhat exhausted, but still inclined to be talkative. His limbs were shaky. He stammers a little in speech, & when conversing with one, his hands & head move in a peculiar jerky manner. His head is somewhat peculiar in shape; it is elongated posteriorly, producing a kind of flattened appearance from side to side. Altogether he seems to be of a decidedly neurotic temper-

John Brown (Contd)

-ament.

Bodily Condition is good.

24th June. Has had a little better sleep last night than the previous night. He is much quieter. Dr Christie, who is his usual medical attendant, & who saw him yesterday, thinks he is now, mentally, much in his ordinary condition.

3rd June. Doing well. Takes regular exercise in the grounds. Is in good bodily health & condition.

1st July. Has been very anxious to get back to business. ~~during~~ Dr. J. has strongly advised him to wait a month at the very least. He takes his own way & it & goes to-day.

Discharged - 10th July 1888.

Recovered.

Dr. Alexander Rae Alt: 62.
Admitted 29th June 1888.

Patient is married, a surgeon, & resided previously at Stonehouse, but more recently at Innellan.

He is said to have been insane for two weeks, this being his first attack. Supposed cause is nervous shock & regret at leaving his old practice after 30 years work. His mother is said to have been nervous & desponding - died aet: 80.

Certified as being restless & distracted in his manner, evidently suspicious, & having delusions: e.g. thinks he has been "guilty of gross mal praxis, having caused the death of several patients & dreads impending medico-legal proceedings, & has had suicidal promptings in consequence".

Patient is suffering from melancholia. He is full of groundless suspicions. He imagines that he has been brought here so that his conduct may be carefully watched, having regard to the various acts of mal praxis, of which he has been accused. He thinks all the other patients are observing him: one of them who writes a great deal, he believes is taking copious notes, to be used at his trial; another, an old gentleman, he imagines is to be the Judge of the Court. He goes about the gallery in a distracted manner, asking people to explain "the whole affair" &c

4th July.
4th July.
23rd July.
3rd Aug:
30th Sept:
22nd Sept:
1st Oct:

Dr. Alex. Rae.

He is a man under the average height, & of excellent physique. Does not suffer from any physical ailment so far as can be made out. Tongue rather foul. Pulse ordinary.

1st July. Still very miserable. No argument will convince him that he is here simply as a patient & that those round about him are nearly all patients. Restless & sleepless at night.

14th July. No improvement in mental condition. Has not shown any suicidal tendency as yet.

23rd July. Very depressed & miserable. Always says he "can't understand what it is all about", & asks if any one will tell him "what will be the end of all this?" Does not sleep well. Restless during some nights.

3rd Aug: Still very suspicious of many things, although there is some slight improvement in his mental condition. Is still under the belief that people will accuse him of malpraxis.

10th Sept: Is even more depressed than he was at last note.

20th Sept: Has again shown distinct signs of improvement & during past 2 days has been cheerful & has hardly referred to his old suspicions. Sleeping better at night.

1st Oct: He is now apparently quite well, ~~but~~ at times one would think he was even too happy, but possibly it may be

William Lamond, Aet: 65
Admitted 1st July 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a Labourer, & resided at Donnachie's Lodging house, South Albion St.

He is said to have been a few days insane, this is supposed to be his first attack. No known H. P. Supposed cause is intemperance.

It is said that he attempted to jump over a window at his lodgings. He is certified as wandering about in an in-definite manner, "at times as if looking for some imaginary object: not inclined to answer questions."

On admission he was restless & excited. Swore at persons beside him. Spoke incoherently & in a loud manner. Did not attend to what was said to him. He is shaky would not protrude his tongue when asked. His bodily health is feeble & condition is reduced. Some few bronchitic râles heard in lungs. Heart apparently normal.

3rd July. Restless at night, but is quieter than on admission.

8th July. Now seems fairly well. Takes food well. Sleeps well. Speaks quite coherently. Says that it was methylated spirits he was accustomed to drink, as it was cheap.

30th July. Mental condition apparently normal. Bodily health improving, but still poor

William Lamond.

5th Sept. He is now in good bodily health & condition & is able to take plenty of exercise.

He is discharged to-day.

Recovered.

245

William Reid McLaren Aet: 32.
Admitted 13th July 1888.

Patient is single, a book-keeper & resides at 498 St. Vincent St., Glasgow.

He is said to have been insane only a few days, this being the first attack. Supposed Cause is masturbation. He is said to be suicidal. No known H. P.

He is certified as being restless, that he imagines he is being watched & followed by detectives, that he is about to die, & that he is being operated upon secretly by people in some mysterious manner. He confesses that he occasionally has strong temptations to commit suicide.

Patient is depressed & has several imaginary fears. He says there must be some reason for putting him here, viz:- so that he may be the more closely watched, & he says all the attendants & patients are paying special attention to him.

He is a man under the average height, of gentlemanly appearance, & is rather thin. Bodily health & Condition fair. He has dark eyes & hair. No abnormality detected on examining heart & lungs. Urine normal.

20th July. At times he seems rather confused. Still thinks his companions in the Gallery are detectives watching him. Sleeps fairly well at night.

15th Aug:

20th Sept:

12th Oct:

Wm Reid McLaren.

15th Aug: Some improvement since last note, but still has some doubts about the exact relationship which the attendants & other patients bear to him. Bodily health fair. At his own request he does light work in the grounds or garden. Sleeps well at night. Bowels constipated.

29th Sept: Nothing special to note except that during past month there has been gradual & steady improvement in his mental condition. Does now now speak of those around him as watching him. Occupies himself in doing light gardening.

12th Oct: Is now quite well. Bodily condition much the same since admission, but rather improved during past 2 or 3 weeks.

Discharged to-day.

Recovered.

Re-admitted May 1st 1893.

vide Vol VI p 48.

James Phillips Aet: 61
Admitted 18th July 1888.

Patient is a widower, formerly in business as a wholesale grocer, & lately resident at Camden House, Dennistoun, Glasgow.

He was previously confined in this Asylum for 18 months, from January 1878 to May 1879. He was also in Mollingside Asylum in 1882. He has never been well since his first residence here. He was dismissed in May 1879 as "relieved" — see Journal of West House Vol: 22 P. 11[illegible]

He is certified as having curious delusions, such as, that he is not a man at all & that he has been taken to heaven a long time ago; denies that his name is James Phillips; says he has no friends. It is also said that of late he has been getting more violent & unmanageable.

On admission he was evidently depressed, sullen & for some time absolutely refused to answer any questions, although he would look at one when spoken to. At length he repeated many of the above delusions. When asked why he will not speak he says "I have no tongue, no body, no anything". He seems somewhat demented. He exhibited no violence.

Bodily health & condition fair & is rather obese. He is of small stature. No bodily disease made out.

20th July. Still [illegible]

15th Aug: [illegible]

20th Sept: [illegible]

20th Oct: [illegible]

9th Dec: [illegible]

1889
6th Feby. [illegible]

8th April. [illegible]

James Phillips

20th July. Still in the same depressed miserable condition. Speaks to no one. Takes food indifferently.

6th Aug: When asked about his health his usual answer is "the same" & then he turns his head from the speaker; now & again he will add that his name is not "James Phillips" & that the latter man was killed 10 years ago.

10th Sept: No improvement in ~~bodily~~ mental condition. Bodily condition good.

6th Oct: The patients usual answer to the writer's question about his health — "the same" — truly describes his condition. There is no change to record. At now & again swears most fearfully at the attendants. Bowels constipated. Bodily health, otherwise good. Rarely speaks to anyone except when spoken to, & usually refuses to carry on a conversation.

Dec: No change in mental condition. Occasionally is troublesome & swears at the attendants. Says he is dead & therefore unable to walk in the grounds.

1889

9th Feby. Practically no change in this patients mental or bodily condition. Sometimes says he is so weak that he must go to bed, & at other times, if he does not wish to walk in the grounds, he makes the excuse of illness.

April. At times he is very irritable & swears at anyone who may speak to him. Bodily health good.

J. o. p. 451

John Hall Aet: 38
Admitted 19th July 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a labourer, & resides at 24 King St., Glasgow.

He is said to have been insane only a few days & this is supposed to be his first attack. Supposed Cause is unknown. No known H.D.

In the certificates the only delusion mentioned is that he thinks people put poison in his food.

On admission he seems to have been insane longer than "a few days". He answers questions coherently, but in a somewhat disinterested manner. He does not seem to think seriously of coming here, & altogether his whole condition indicates some degree of dementia. When asked why he has been brought here, he repeats that people were putting poison in his food.

2 He is a man of ordinary height & build & is in fair bodily health & condition. Nothing abnormal found on examination of lungs & heart.

25th July. Since admission he has been fairly quiet. To-day he was observed to become somewhat ill-tempered with another patient who spoke to him. He says people still put poison in

John Hall.

his food.

Aug: Still has the delusion that his food is poisoned. At times he is talkative & inclined to get cross when other patients interfere with him.

Sept: Cross & ill-tempered at times. Always has groundless Com-plaints about being kicked by patients & attendants.

Oct: Mental Condition does not show any change. Bodily health good. Takes his food well. Sleeps well at night

Oct: Still the same displeased & complaining man. Nothing otherwise to note.

Nov: No change in mental condition. Says that poison is put in his food, & that people torment him at night. Bodily Condition good.

1889.

Jan: Quieter on the whole, but frequently complains of the great annoyance to which he imagines he is subjected. Bodily health good.

March. Still the same Complaints about imaginary annoyances. Says that people come to his bed at night & talk to him, & some injure him. Bodily condition good.

May Still much annoyed by people talking to him but is on the whole better. Bodily health is improved but not correspondingly with a mental improvement.

July. T. S. 2.

Nov. Fatter and better physically but unchanged mentally

To p. 452.

John Webster, Aet: 55.
Admitted 21st July 1888.

Patient is married, a retired boot & shoe merchant, & resides at Glenburn Cottage, Rothesay.

He is said to have been insane more or less for two years, this being his first attack. Supposed cause unknown. A son is at present insane.

He was admitted to-day with his throat cut, said to be self-inflicted on the 15th inst.

He is described as being depressed; expresses no sorrow for attempting suicide & wishes to die; thinks people are plotting against him; he is inconstant in manner, sometimes quiet & moody & at other times excited.

On admission he was very melancholic. Said that he must die; & gave as the reason for attempting suicide that he had been told in a dream, in order to better his son, he must destroy himself.

He is a man of about average height & weight. His bodily condition & health are indifferent. No abnormality detected in heart or lungs. Tongue rather furred. The wound is on left side of neck, about 2 ins: in length & extends in a direction upwards & outwards from the middle line. Edges of

John Webster.

wound are held together 3 stitches. No other marks of injury observed.

23rd July. Sleeps fairly well at night. Wound looking well. Still depressed. Not inclined for conversation

1st Aug: Wound almost healed. Is now allowed out of bed during most of the day. Not quite so dull as on admission.

13th Aug: Wound healed. Is looking much better, both bodily & mentally.

20th Aug: Mental improvement still going on. Is now quite cheerful, although he says ~~him-self~~ he has not got sufficient confidence in himself to go away yet, should he have the opportunity. Never exhibits any delusion.

18th Sept: Doing well. Is contented & happy, but not too much so.

8th Oct: Although patient to the writer, would seem to be well, yet his friends who visit him, say that he always is jealous of his wife, & no reasoning on their part will convince him of his error.

26th Oct: Patient thinks his wife & daughter are detaining him here out of revenge. In other matters, he seems quite clear, & his general conduct & manner is that of a sane man. Bodily health and condition good.

2nd Nov: To all appearance he is well mentally, but is still inclined to believe that his wife is detaining him here unjustly. A week ago while going up ~~stairs~~ stairs he injured his leg, & apparently has ruptured

301

John Elborn Aet: 63.
Admitted 25th July 1888.

Patient is married, a glass & China merchant, & resides at 83 Victoria Road, Govan hill, Glasgow.

He is said to have been insane for about 3 months, this being his second attack, having been in this Asylum about 18 years ago* (~~see Journal Vol. 6~~). Supposed cause of present attack is business anxieties. No known N.P. He is not subject to Epilepsy, he is not dangerous to others, but he is said to be suicidal.

* as a "Voluntary" patient, from April to Aug: 1870, & discharged as "recovered".

The certificates state that he ~~is~~ dull & melancholy, imagines he cannot swallow, that he is surrounded by enemies, who are always plotting against him, & it is also stated that he attempted suicide by strangulation about 10 days ago.

Patient is morose, disinclined for conversation, & often refuses to answer questions. He says he is quite unable to swallow food owing to the pain which it causes. (He has been fed for the last week by the Stomach tube). He is depressed & very miserable. Wishes to be left alone. Objects to be interfered with in any way.

Bodily health & Condition poor. Some discolorations seen on arms & legs. Nothing abnormal detected in lungs or heart. The tongue is very thickly

John Elborn.

coated with a dry brownish fur. Fauces congested & tonsils slightly enlarged. Urine

27th July. Has been fed by stomach tube since admission, owing to his absolute refusal to take food in any other way. This evening, when coaxed & forced, took some tea from a cup. Still the same melancholic condition of mind. Tongue cleaning.

2nd Aug. Takes food fairly well now. Tongue almost in its normal condition. Bodily health improved.

6th Aug. Bodily health fair. Still very melancholic & says he "won't get well".

29th Aug. Takes more exercise in the airing Court. No improvement mentally.

30th Sept. Seems a little brighter of late. Takes food fairly well.

6th Oct. Much the same.

24th Oct. Again more depressed, & for some few days he has not been taking his food so well. Is restless at night.

1st Nov. For past week has had to be fed by the stomach tube, thrice daily. Refuses absolutely to take anything in the ordinary way. Is full of suspicion & apprehension.

21st Nov. Has taken one or two meals himself during past two days, but as a rule, he has to be fed by the tube.

20th Dec. Now takes food himself. Otherwise no change in patient's condition.

302.

Terence M.c Quade Act: 48.
Admitted 30th July 1888.

Patient was admitted at the instance of the Fiscal & is chargeable, pro tem., to the Barony Parish.

He had been apprehended & charged with assaulting another man. He was taken to the Calton Police station on the 28th inst: & while there was certified as being insane.

He was resident here for 3 weeks last May, as a private patient in the West house (see p. 217).

On admission he was quiet, manageable & quite coherent in his talk - Exhibited no delusions. Tongue was furred. There was some ecchymosis of left eyeball & lower eyelid. Lower part of left side of scrotum is discoloured & thickened, said by patient, to have been the result of a kick which another man gave him. On left thight is a small excavated sore, surrounded by considerable erythema.

From statements made by his friends it appears that he has again been drinking & fighting with some of his friends, with the result that he was removed to the police station.

31st July. Did not sleep well last night. To-day is quiet & reasonable in his manner. Thinks his friends have planned to get him certified as

- Terence McQuade -

1855

insane & Confined permanently here.
Lungs & heart examined, but nothing abnormal found. Some blownish stainings were observed on the abdomen, & both legs. There is also a small fissure on left side of tongue. These he confesses are due to syphilis.
Put on 10 grs Potass: Iodid: 3 times a day.
1st Aug: Has been usually quiet & reasonable since admission, but sometimes speaks of his unjust detention here. During his residence here he has not been quite so argumentative & boisterous as during his former residence in the Asylum.
Yesterday he was at the Sheriff Court, but arrangements were made for his detention here as an ordinary patient (private); hence he ceases to be a fiscal case & becomes a private patient from to-day's date, under an ordinary warrant.
On his return from the County Buildings he was not at all pleased with the course which had been taken.
The medical certificates, dated 1st Aug:, state that he is still dangerous & may become especially so, if set at liberty: also that he was very garrulous & excited: & accused his wife of being too intimate with his partner.
16th Aug: Transferred to-day to the West House. No change in condition.

(282

257

David Thomson Murray Aet: 32.
Admitted 1st August 1888.

Patient is single, a clerk, & resides at 3 Tennent St., Glasgow.

He is said to have been insane about 2 months, this being his first attack. Supposed cause is self abuse. No known N.P. Is not subject to Epilepsy. Has suicidal tendency.

The certificates state that he is melancholic & has delusions. He thinks people are watching him & speaking ill of him: he says he has been a great sinner & desires some punishment, e.g. to cut off a limb or to take out an eye.

Patient's brother says he (patient) has been more or less melancholic for the past 10 years. He thinks he met with some disappointment in love at that time. It is, however, only within past 2 months that he has required to give up his work.

He is a tall thin man & seems in somewhat poor health. He is of fair complexion. Nothing abnormal detected on examining lungs or heart. Urine free from albumen.

He is suffering from severe melancholia. Thinks that he must die, owing to the many sins he has committed. Confesses masturbation.

20th Aug: Seems a little brighter. Sleeps fairly well at night.

David Thomson Murray.

1st Sept: Still depressed, but has been working in the grounds a little.
Is getting porter & cod liver oil.

15th Sept: Has been very depressed during past week. One day he threw himself on the ground & asked others to cover him with ashes & earth. Yesterday morning, observing a pair of "house steps" which an attendant was using, he run up a few steps & threw himself on the floor, & caused a slight abrasion of the forehead. He says he has no name, but that he is a beast.
Is now getting Easton's syrup.

21st Sept: Is still very dull, but during past 2 days he has shown some signs of improvement. Requires close observation.

30th Sept: Has again become very depressed. Frequently expresses a wish to destroy himself. Is losing flesh. Getting porter daily.

8th Oct: A few days ago, while walking in the grounds, & with two attendants, he suddenly threw himself in front of a passing cab. Latter was stopped in time & patient received no injury.

1st Nov: Practically no improvement in mental condition. Now & again the attendants manage to make him do a little manual work. Bodily condition fair.

1st Dec: Still deeply depressed. Is constantly under observation.

310.

Robert Taylor Aet: 48 (?)
Admitted 4th August 1888.

Patient was admitted at the instance of the Fiscal & is chargeable, pro tem., to the Barony Parish.

The circumstances of this case are somewhat peculiar. He & his wife were both apprehended by the police & brought here. They were married in America in 1880. He is a widower & she divorced her former husband. The woman is the more insane of the two. She believes that she is heiress to a large estate near Edinburgh & that a number of persons have conspired together to prevent her getting it & have even attempted to take her life. She asserts that once about 80,000 dollars were offered to some one if she could be put out of the way. Among the conspirators are her divorced husband & many of her relatives. She believes that the police, detectives & others in authority have been bribed & are now in league with her relatives.

All these things her husband sincerely believes & his proof that they are true is (1) that he believes his wife's word, & (2) that he has been persecuted for his wife's sake. He talks in a quiet coherent manner & readily tells his story. Apparently

Robert Taylor (Cont?)

He is the weaker minded of the two, & has become impressed with supposed the truth of his wife's story. Says he offered £5000 to one lawyer to take their case in hand.

9th Aug. To day the patient, along with his wife, was taken over by the Barony parish, & transferred to Woodilee Asylum.

Discharged to day.

Relieved - 9th Aug: 1888.

Alexander Paterson Barr Aet: 35.
Admitted 5th Aug: 1888.

Patient is single, of no occupation, & resides at 22 Millbrae Crescent, Langside.

He is said to have been insane for 9 years at least, but "peculiar" for some time previously. This is his first attack. Cause is unknown. ~~Is known if~~ Resides is insane at present. Is not subject to epilepsy: is not suicidal or dangerous ~~to~~ others.

He is classified as being melancholic, stupid & unsociable, & refusing to be examined.

His mother says he has lived like a hermit during the past 9 years; rarely going out his room, except for a walk in a small garden; would not speak to any of the other members of the family; cooked his own food; his room was papered with pictures taken from the illustrated papers; egg-shells & other equally absurb things formed part of the decorations of his apartment.

On admission he was quiet & answered questions ~~in~~ a cheerful manner, although childishly & at times incoherently. Says his father tells him not to work, &c, while as a matter of fact, he is dead. Says he was born this year. Gives the wrong day & month. Does not seem to be able to

Alex: Paterson Barr.

carry on the shortest conversation in a correct manner.

He is very short in stature, & very short legs. Head large. Forehead almost vertical, & even ~~not~~ slightly hollowed from above downwards. Nothing abnormal about eyes. Lungs & heart examined, but no abnormality found.

1st Aug: Has been quiet since admission. Assists the attendants in the wards & makes himself generally useful.

24th Sept: Practically no change since admission. Works in the wards, but is not very active, & frequently requires to be reminded of things he has neglected to do. Bodily health & condition improved since admission.

21st Oct: Doing well - Tidy & cleanly in habits. Mental condition same. Does not converse with anyone, except in answering questions.

25th Nov: No change to report, either as regards bodily or mental condition.

1889.

1st Feby: No change in mental condition. Quiet, & well-behaved. Bodily health good.

12th April Nothing new to report, either as regards bodily or mental condition.

To p. 453

William Fisher Grier Aet: 37
Admitted 7th August 1868.

Patient is a widower, has not been recently occupied, & resides at 1 Ashton Gardens, Hillhead.

His wife died a few weeks ago & his illness is said to date from that time. This is his third attack — the first occurring about 15 years ago, when he was confined in Bridgend asylum, Glamorganshire; the second, about 5 years ago when he was admitted to Dartmavel & shortly afterwards removed to Bethlem Asylum, London. The immediate cause of the present attack is said to be his wife's death. A maternal aunt was insane. Not subject to Epilepsy: not suicidal but dangerous to others.

(See Journal of Mental Science Vol: 22. P. 404)

The certificates indicate a condition of acute mania, with great violence.

He was brought here by two of our attendants from the Central Police Office. He had gone out of his house at an early hour this morning, dressed in a fantastic manner & rode on a horse about the streets, assaulted some police & men & was at last taken to the police station. On admission here he was very violent. Had to be carried in from the Cab. Kept constantly talking in a loud manner, at times incoherently. At intervals he would become emotional & refer to his wife's illness & death.

William Fisher Grier.

His father thinks this illness has been slowly developing during past 8 months: during that time, he has been ~~a little~~ extravagant in the furnishing of his house, & has been irritable at times.

Bodily health & condition good. Lungs & heart examined but no abnormality detected. On wrists & ankles are some discolourations.

2nd Aug: Very restless & talkative during last night. Not much improvement to day. Very demonstrative. Orders the attendants about & very angry if they do not obey.

3rd Aug: Is quieter to day. Slept a little better last night.

4th Aug: Not much improvement. At times is quieter & more reasonable. Restless at nights.

25th Aug: Refused to go to bed at usual time last night. Struck & bit the night attendants.

3rd Sept: Very noisy & troublesome. Disturbing other patients. Has become also destructive & filthy. Was put in single room in seclusion yesterday for 4 hours. Destroyed canvass trousers.

11th Sept: Has been necessary to keep him in seclusion during past 4 days for varying periods of the day.

18th Sept. In seclusion again to day for 2 hours.

21st Sept: Has been quieter on the whole since last note, but at times becomes very excited. Is often filthy. A few days ago he

John Inglis Bruce Aet: 42
19 Lynedoch Crescent, Glasgow
Admitted 8th August 1888.

He is admitted to day as a "Voluntary" patient. He is married & is a merchant by occupation.

His illness has, on his own confession, been due to intemperance in drink. During past 10 days he has been unable to do any business. He has been addicted to excessive drinking for some years & on two previous occasions he has had to leave town to get well.

He seems to be on the verge of delirium tremens. His limbs are very shaky. Tongue foul & tremulous. Eyes congested. Pulse shaky. At present he has no hallucinations or delusions.

He is in good bodily health & is of a robust appearance. He complains of some weakness of ~~left~~ right arm being unable to raise it above level of shoulder. This may have been due to his "lying upon it".

9th Aug: Bowels well moved by purgative. Had draught of Chloral & Bromide last night. Slept little, but seems a little better this morning.

13th Aug: Improvement has continued. Sleeping a little better at night. Still feels shaky.

John Inglis Bruce.

30th Aug: Is now quite well. Takes food with relish. Can walk some distance without being fatigued.

Discharged to-day.

Recovered.

Henry Paterson Aet: 42.
Admitted - 19th August 1888.

Patient is single, a Ship-captain, & recently residing at the Sailor's Home, Glasgow.

He is said to have been insane for probably 6 months, this being the first attack. Inherited cause - reverse of heat. Said to attacks. Is not to others. No known e died of "Consumption." that he has de- wealth & position - ged to an heiress nself is worth

Henry Paterson. P. 267

n stature, & is in ut rather obese. g under Gneral . He has lofty e best captain one time he says he was chief admiral of the American navy. The disease is apparently not far advanced, but the affection of the speech is marked - the hesitancy, & the tripping with test words, being characteristic. There is some tremor of the tongue on protrusion, but none observed in lips. Pupils are equal & respond to light. Patellar tendon reflex present in both limbs, & slightly exaggerated. He does not perform

the balance test well, & says he feels giddy when turning round with his eyes shut. He cannot walk on a narrow base.

Tongue normal. Pulse good. Nothing abnormal detected in lungs or heart. Urine free from albumen.

20th Aug: Since admission he has been quiet & orderly. Does not sleep very soundly at night. Has a happy & contented manner — very polite. Enjoys to converse with anyone. Speaks of the fortune he made while at sea, & wishes to be removed to the best house, ~~this~~ as he has plenty of money to keep him there.

23rd Sept:- Still the same contented man. Does not now speak of getting to the West House. His speech seems to be more affected than on admission. Bodily health good.

22nd October. Frequently writes letters to his brother & other friends — most of which are characteristically those of a G.P., the shaky formation of the letters, the missing out of letters & words, blots, &c being all apparent.

2nd Nov: Happy & contented. Nothing special to note otherwise.

1889.

2nd Jan: Still the same contented & "important" style. Bodily condition good. Takes part in the dances.

9th Feb: This patient died somewhat suddenly this morning at 12.10. He was in his usual health up till about 6 p.m. Yesterday, when

Henry Paterson Aet: 42.
Admitted - 19th August 1888.

Patient is single, a Ship-captain, & recently residing at the Sailor's Home, Glasgow.

He is said to have been insane for probably 6 months, this being the first attack. Supposed Cause - reverse of fortune & extreme tropical heat. Said to have had epileptiform attacks. Is not suicidal or dangerous to others. No known N. of brothers said to have died of "Consumption". The certificates state that he has delusions regarding his wealth & position - that he has been engaged to an heiress with £40000: that he himself is worth millions of pounds - &c.

Patient is of medium stature, & is in good bodily condition, but rather obese. He is apparently labouring under Special Delusions of the Insane. He has lofty delusions. Says he is the best captain that ever sailed - at one time he says he was chief admiral of the American navy. The disease is apparently not far advanced, but the affection of the speech is marked - the hesitancy, & the tripping with test words, being characteristic. There is some tremor of the tongue on protrusion, but none observed in lips. Pupils are equal & respond to light. Patellar tendon reflex present in both limbs, & slightly exaggerated. He does not perform

the balance test well, & says he feels giddy when turning round with his eyes shut. He cannot walk on a narrow base.

Tongue nolmal. Pulse good. Nothing abnormal detected in lungs or heart. Urine free from albumen.

18th Aug: Since admission he has been quiet & orderly. Does not sleep very soundly at night. Has a happy & contented manner — very polite. Enjoys to converse with anyone. Speaks of the fortune he made while at sea, & wishes to be removed to the West House, ~~this~~ as he has plenty of money to keep him there.

13th Sept: Still the same contented man. Does not now speak of getting to the West House. His speech seems to be more affected than on admission. Bodily health good.

22nd October. Frequently writes letters to his brother & other friends — most of which are characteristically those of a G.P., the shaky formation of the letters, the missing out of letters & words, blots, &c being all apparent.

1st Nov: Happy & contented. Nothing special to note otherwise.

1889.

12th Jan: Still the same contented & "important" style. Bodily condition good. Takes part in the dances.

2nd Feb: This patient died somewhat suddenly this morning at 12.10. He was in his usual health up till about 6 p.m. Yesterday, when

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Alexander Fisher Aet: 53.
Admitted 7th September 1888.

Patient is a pauper, chargeable to the Parish of Cambuslang.

He is single, a farmer, & resides at Blairmore Farm, Dlymen.

This is his third attack of insanity & is said to be of 2 or 3 days duration. He was a patient here in 1876 & in 1885 (see Journal, Vol: II p. 1.) & was discharged as recovered on 31st March 1885. The supposed cause of the present attack is "Struck by lightning." No known A.P.

He is certified as talking in an incoherent rambling manner: he imagines himself stored with electricity; he cast off his coat & boot by the road-side, thinking these things were dangerous to him in some way. He was found by the police running through the village in a half-clothed state, & constantly saying he saved a train from destruction by lightning by conducting the latter away.

He is a man under the medium height. He has prominent teeth, most of them being denuded of gum to an abnormal extent, giving a peculiar appearance. His manner & general appearance betokens a certain amount of imbecility.

He is labouring under acute mania. Excited & incoherent in talk. Talks of having saved Glasgow from destruction

10th Sept:

11th Sept
12th

Alex: Fisher.

by explosives & has other delusions.

Bodily health & Condition fair. No marks of recent injury observed.

10th Sept: This morning patient was observed to be ill & he complained of pain in the left side. On examination a fracture of one of the lower ribs on the left side was detected. He was somewhat flushed & had a little respiratory difficulty. Wheezing râles were detected in both lungs front & back & there some evidence of pneumonic consolidation in right base behind.

It is uncertain how this fracture was sustained. On the 8th inst: he was very restless, creeping under chairs & tables whenever he got an opportunity & it is very likely the accident occurred at that time. There was no struggling with other patients or with an attendant. He himself says that no one struck or injured him.

All yesterday (9th) he was quiet & did not complain of anything, nor was anything unusual observed about him.

Strapping has been applied to left side of Chest, & a mixture of Liq: Ammon: Acet: & Spt: Æther: Nit: has been prescribed.

Temp: this morning 101·8 – to night 103· Pulse to night 120 & Resp: 30

		a.m.			p.m.		
9th Sept	Temp:	Pulse	Resp		Temp.	Pulse	Resp:
10	103·8	128	32		102·4	116	30
12	103·2	122	36		103·4	124	36

James Orr, Aet: 58
Admitted 9th September 1888.

Patient is a widower, a tailor & clothier, & resides at 166 Stockiehall St: Glasgow.

He is said to have been insane about 2 weeks, this being his first attack. Supposed causes are death of wife 3 weeks ago, domestic & business anxieties. He is not subject to Epilepsy, & he is not suicidal. All the family are of a "nervous" disposition, but there is no case of insanity known amongst the relations.

The certificate state that he is rambling in his conversation; that he is in a very excited condition & at times threatens violence to others.

Patient is a small spare man, under the average height, & very active looking. Hair grey. Tongue slightly furred. Papils apparently normal. Pulse fair. nothing abnormal detected in lungs or heart. Urine free from albumen.

He labours under mania & is lofty & excitable. His illness dates from his wife's death, 3 weeks ago & he at once informs people of her illness, his nursing, & her death. He speaks in a sharp, firm manner, & altogether he conducts himself in such a way as to impart the idea that he is a personage of some consequence.

11th Sept: Says he has had the best sleep last

8th Sept:

2nd Sept:

2nd Sept:

6th Sept:

James Orr.

night that he has had for 30 years. His General conduct is unchanged. To-day he has been boasting of his athletic capabilities & wishes to compete with any one in the Court.

8th Sept: Every morning he has many complaints about food, attendants, &c, & thinks the place is not nearly good enough for him.

24th Sept: Some improvement in mental condition, but he still would make one believe that he is a man far above the average in intellect & influence. In order to get away from this place, it is only recently that he said he could command, for this purpose, a host of men to surround the institution.

2nd Oct: Is quieter & on the whole, not so boastful, but there is still a little of the old spirit left.

6th Oct: Contrary to Dr Yellowlees' advice patient was taken home to-day by his sons. They were told they were acting against advice & also that their father could not be discharged as "recovered".

Relieved.

Re-admitted on June 20th 1894 into Vol VII p 18.

Robert Edwards Aet: 21.
Admitted 10th September 1888.

Patient is a pauper & is Chargeable to the new Monkland Parish.

He is single, a miner, & resides at 4 Baillie's Lane, Airdrie.

He is said to have been insane about a month, this being his first attack. Cause is unknown. He is not subject to Epilepsy & not suicidal. No known Hereditary Predisposition.

The certificates state that he behaves in a Childish manner; wanders about the streets, talks much about religion & often sings hymns during the night; hears harps & angels singing during the night. His mother has stated that she has known him to be Peculiar for about 3 years.

He is a stoutly built lad, & Con-siderably under the average height. Forehead short from above downwards. Under lip invariably protrudes excessively when he speaks. He is in good bodily health & condition. Lungs & heart normal to examination. Urine free from albumen.

He is apparently not of high mental development, is apparently somewhat demented. He talks in a foolish manner, & when asked questions, speaks in an unconcerned 'childish' way. Says he is not quite sure that his name is "Edwards". Speaks of his mother as "Mrs Edwards" &

Robert Edwards.

says he is not quite certain whether she really is his mother.

8th Sept: Still the same, simple lad. Nothing seems to make any impression upon him.

4th Sept: Works daily in the grounds. No mental improvement.

4th Oct: Apparently happy, contented, & quiet. but practically no change in mental condition.

1st Nov: No change to record. Bodily health good.

28th Dec: No change in mental condition. Bodily health & condition good.

Discharged to-day & taken home by his mother on authority of Parochial Board.

Relieved.

John Scott Aet: 28.
Admitted 13th September 1887.

Patient is a pauper, & is chargeable to the Parish of Old Monkland.

He is single, a labourer & previously a soldier, & is of no fixed place of residence.

There is absolutely nothing known about this man, except that he has been wandering about the neighbourhood of Baillieston from house to house, & by his actions disturbing the people. On this account he was taken in charge by the Police.

He is of average height & of Soldierly bearing. Bodily health & condition good. Nothing abnormal detected in lungs or heart. Urine free from albumen.

He talks in a rambling & somewhat incoherent manner. Says the Holy man has put a spell on him; that he wishes to shoot the Parish Priest. that he can speak in various languages & when asked to give an example, simply says he has been doing so all along; & that he & many others are influenced in all their actions by the "word thought". He cannot be got to give any account of himself. He seems somewhat demented.

18th Sept: Conducts himself in a foolish manner. Frequently in the airing-court, he will step suddenly forward & sing loudly

John Scott

in an unintelligible way. Sleeps fairly well at night.

24th Sept: Practically no change in condition. Will answer correctly some simple questions but when asked to give a reason for any of his actions, he replies that it was according to the "word thought."

6th Oct: Mental condition same. Bodily health and condition good. Able to assist a little in the wards. Sleeps well at nights.

24th Oct: Still conducts himself in a foolish manner. Thinks he can speak in several languages. At times rambling & incoherent in talk. Is manageable & usually quiet.

31st Oct: Patient is discharged to-day by order & minute of L.B.L.C. & removed by inspector of poor to be taken to Ireland.

Relieved.

William Alexander Coutts, Aet: 21
Admitted 14th Sept: 1888.

Patient is single, a druggist, & resides at Bath Head, Kirkcaldy, but was removed to-day from the Workhouse, Liverpool.

Length of time insane uncertain; supposed cause, religion: this is his first attack. Not Epileptic. Not suicidal. Might be dangerous to others. No known N.S.

Here is some history of his having been addicted to self abuse. Dec: 1888.

Certificates state that he Chatters & talks incessantly, but with Considerable sequence; that when not actually engaged in a right direction he must, he says, be "Generally raising hell", & that his own personality is lost immediately any hero of Scotts, or Shakespeare's is mentioned; that he is a great reformer & that he has great influence with the Queen.

His uncle says that for the last 2 or 3 years patient has been somewhat peculiar, more argumentative, opinionative & hot-tempered than usual. When staying with his uncle, who is a clergyman, some 3 or 4 years ago, he suddenly gave up going to church & gave up all religious work in which he was engaged, without giving any definite reason. He was assisting his father as druggist up till 6 week ago. Previous to that time he had frequently said that he must leave the trade & start something entirely new, but never indicated what his new profession was. Six weeks ago he suddenly left

Wm Alexander Coutts.

Kirkcaldy, without telling where he was going. It afterwards transpired that he had gone to America (Toronto). The next information his friends had was that he had arrived at Liverpool, found to be insane, & taken to the workhouse there on Sept: 2nd.

He is of average height dark complexioned, & rather sparely built. Bodily health & condition fairly good. He says he has a tendency to right inguinal hernia & he wears a truss: he would not allow an examination, but no indication of hernia was observed. Nothing abnormal detected in examination of heart or lungs. Urine free from albumen.

He labours under mania & is restless & foolish. At times answers questions freely & at other times does not wish to be cross-examined. Apparently likes to argue matters & objects to be told he is wrong. Has a good opinion of his own powers.

21st Sept. Is talkative & interfering, but manageable. Likes his own way. Somewhat restless at night.

28th Sept. Is restless & talkative, foolish in conduct & untidy in his dress.

6th Oct: Had a visit from his father yesterday. Did not behave at all well. No change in mental condition.

14th Oct: Rather more settled & more obedient. Inclined to interfere with other patients. Takes food well.

2914

William Oliphant Aet: 64
Admitted 24th September 1888.

Patient is married, retired from business (formerly an engraver), & resides at Forwood Bellosheildo.

He is said to have been insane about two months, this being the first attack. Supposed Cause is business anxieties. He is said not to be suicidal, nor yet epileptic, but may be dangerous to others. No relation or member of family known to have been insane, but a brother was depressed at one time, & recovered.

Certificates state that he expresses anxiety & fear about himself & family: wanders about the house at night & forces his way into rooms; he is jealous & suspicious, & has once attempted to injure his wife. His daughter says that one time he thought a great many people were passing the house bare-headed & that two policemen were going to apprehend him.

Patient is a man of the average height & is, generally, of good physique for his years; grey hair: expression rather heavy. Tongue slightly coated with fur, but moist. Pupils normal. Nothing abnormal detected in lungs. Urine contains a trace of albumen. Heart sounds very weak, but no murmur heard.

His son states that at home he is constantly walking up & down, is depressed, reticent & full of imaginary fears: talks

Wm Oliphant.

interest in nothing. These symptoms have been present for the past 2 or 3 months.

He suffers from melancholia, & is considerably depressed. Says he has come here, but will never get out. Says he is very ill & will never get well. He is reticent & sometimes looks in a vacant manner when he is addressed. He is restless & listless.

About 2 or 3 weeks ago he fell & "sprained" his left ankle, the swelling at present being considerable.

29th Sept: Still dull & melancholic. Takes no interest in anything: apparently cannot rouse himself: sits on a chair or lounges on a couch: this of course is partly due to the condition of his ankle.

6th Oct: Put to bed yesterday & fomentations applied to ankle - Swelling mostly gone to-day, but still painful to the touch, & on movement of joint. Practically no change in mental state. Sleeps fairly well at night.

14th Oct: On more detailed examination of foot to-day, when all swelling has gone, a distinct hollow is felt above the Calcaneum behind, as from a ruptured or partially ruptured tendo achilis. There is some pain to pressure here. He has not the same power to extend this foot. Bandage applied. Mental condition same.

24th Oct: Although foot still weak, it is somewhat improved

Wm Fisher Grier.

Cont- from p. 264

1888.

stuffed both ears with moistened paper & some difficulty was experienced in extracting it.

1st Oct: Sleepless & noisy at nights. Room at times found to be filthy. The other morning he stuffed both nostrils with Sotridge

6th Oct: Destructive & noisy. Tore his mattress & scattered the hair about. 2 days ago he smeared the walls of his room with the dessert which he had at dinner. Struck one of the attendants Yesterday morning, without any provocation.

24th Oct: Still cunning, destructive, & ~~filthy~~ often filthy. Almost every morning passes water in bed. Often noisy at nights. Is in good bodily health & condition.

7th Nov: Has been a little quieter at times during past few days & less filthy in habits. Is haughty & patronizing at times.

9th Dec: Quieter during past few days. Gives much less trouble. Bodily health good.

1889.

12th Jan: Of very uncertain temperament. May be fairly well & very polite for a few days, & then will become impudent & abusive, & at times even violent. At present he is fairly well, but still in the refractory gallery.

15th Feb: Has been well behaved, & on the whole quiet for past 2 weeks. Has not been in refractory ward for past fort-night. Still sometimes inclined to be voluble. To-day is discharged & taken home by his father.

Relieved.

Terence McQuade.

Cont- from p. 256.

1888.

23rd Aug: During past week he has kept fairly quiet & has slept well at night.

31st Aug: Has become restless & noisy. will not keep his bed at nights. Yesterday he said he was sure he was going to die on account of severe bronchitis, but on examining chest no indication of such an affection was detected. There was some reddening of post: part of Pharynx & of fauces — gargle ordered.

2nd Sept: He seems to have no control of himself- Rarely speaks to any one, but in a blustering loud manner. He is very Changeable & impulsive. always full of complaints, frequently against his wife & partner, & other friends. Thinks that people have been bribed to put & detain him here, e.g. D. Fellowes. At times he will begin conversation in a quiet submissive manner, and in a minute or two he will break into a wild tirade against various people, often including the British Government. Last night e.g. in presence of the writer, he jumped out of bed, & in the wildest & loudest manner possible, denounced his wife, his relations, & his Partner Nelson, saying that the latter was the real murderer of Burke & Cavendish. He writes innumerable letters & Telegrams, requesting people to come & see him, such as Archbishop Eyre, Archbishop of Armagh, several Lawyers, &c. Notwithstanding these facts, ^there are times ^when one could not detect anything wrong mentally, & he

Gavin Ferguson Meiklejohn, Aet: 30
Admitted 28th Sept: 1888.

Patient is married, a Spirit merchant, & resides at Mill St., Dunoon.

He is said to have been ill 3 weeks, this being his first attack of insanity. Supposed cause is intemperance. He has is said to have had epileptic fits: He is not suicidal & is said not to be dangerous to others. No known N. D.

Certificates state that he is incoherent restless, & that he has hallucinations of sight & hearing. It is also stated that on a previous occasion he suffered from delirium tremens "with threatened unsoundness."

Patient is under the average height & is in ordinary bodily condition. His whole appearance is that of a person after a heavy drinking bout. Face & eyes deeply congested. Tongue dry & thickly coated with brownish fur. He is unable to walk, but not apparently from Paralysis. Hands and arms very tremulous, as also is tongue on protrusion. He has a dazed, stupid appearance & apparently speaks with difficulty. Makes no attempt to answer the simplest question, but rambles on in an incoherent & indistinct manner.

Lungs & heart could not be examined, owing to his restlessness.

It appears that Patient has been somewhat unfortunate in business lately,

& was much distressed on account of this: Since then he has been apparently indulging too freely in stimulants. 3 weeks ago he had an epileptic fit, & the diagnosis of alcoholic epilepsy was made by the family doctor. About a year ago he had two fits, from a similar cause. He recovered considerably from the last fit, but became rather boisterous & unmanageable. About 10 days ago he had an attack of "erysipelas of the leg", & since then he has been in this dazed, stupid, restless condition & unable to walk.

27th Sept: Very restless all night. No change in mental condition.

1st Oct: Still restless & hardly sleeps any. Bowels well moved by purgative, & tongue is cleaning.

3rd Oct: Slept about 4 or 5 hours last night. Seems a little brighter to-day.

11th Oct: Slowly emerged from the dazed stupid condition. Is much brighter mentally. Able to be up since yesterday.

24th Oct: Seems practically well mentally. Bodily condition & health good.

14th Nov: Doing well.

2nd Dec: Has continued to be well. Bodily health & condition good.

Discharged to-day.

Recovered.

Terence McQuade.

Cont^d from p. 282

impression may be left that he is a sharp, reasonable, man & of considerable business capability.

28th Sept: To day he was visited by his Curator bonis, but on account of patients conduct no real business could be transacted. The first thing he did on entering the room was to sing a song. Afterwards, at times, he became very excited, would rise from his chair & dash his cap on the table, & for the time, refuse to tell him anything.

30th Sept: ~~Just~~ This morning, shortly before 6 O'clock, on being visited by the night attendant, patient jumped out of bed & caught the latter by the throat, saying that he (the attendant) was partly to blame for keeping him in the asylum; however another attendant came to the rescue & no harm was done.

3rd Oct: During past 2 nights patient has been very noisy, talking constantly & loudly most of the night. His manner is changed – he appears to be quite stupid – when told to go out, he will ask the way to the door, &c. He can hardly speak quietly, & is unable to converse on the same subject for any length of time.

17th Oct: For some days past he would speak to no one. At other times times he is very boisterous & even destructive e.g. he destroyed his mattress recently, also a chair.

1888
2nd Nov:
2nd Dec:
1889
4th Jan:
2nd Feb:
2nd Feb.

Terence McQuade.

1888)

2nd Nov: Patient is becoming untidy in dress. At times he is boisterous & unreasonable, at other times he is more manageable. He is also somewhat filthy in habits. e.g. often stones & rubbish found in his hat; sometimes he will spit on his hands & then proceed to rub his head: &c. This morning he touched a part of the grate, & burned his fingers. Frequently noisy at nights.

1st Dec: Apparently getting worse. Frequently very noisy at nights. Collects rubbish of all kinds & puts it into his pockets. At times is quite incoherent in conversation. Rough & boisterous in conduct. Walking not apparently affected. Sometimes his speech is "thicker" than at other times, but not much hesitancy observed.

1889.

12th Jan: no improvement. Is filthy in his habits. Shouts loudly - uses obscene language. Has recently been having Paraldehyde at bed-time as a hypnotic - 45 m to begin with, but is now getting 3iij p (one dose), & apparently with good effect.

19th Feb: 30 grs Sulphonal given last night as a hypnotic & patient slept well from 10 pm. to 2.30 this morning. Previously he had usually been very noisy all night except when under influence of Paraldehyde.

22nd Feb: Has been having 30 grs Sulphonal regularly every night since last note, always with the effect of making him sleep soundly from about 10 pm. till 6 a.m. The effect usually commenced about ½ an hour after getting the

3/4

Thomas Bowman Aet: 33.
Admitted 11th October 1888.

Patient is single, a farmer, & resides at Auchinlowdment, by Elderslie.

He is said to have been insane for 3 or 4 weeks, this being his third attack. Cause is unknown. The first attack was of short duration & occurred 15 years ago; the second, about 9 or 10 years ago: both were mild & melancholic in nature. A sister was melancholic for a short time, but is now said to be quite well. He is said not to be suicidal, epileptic or dangerous to others.

Certificates indicate that he has been dull & stupid for some days past & that at the examination he was suffering from mania; shouting out passages from the scriptures, & requiring to be held down in bed.

On admission he looked about the room in a dazed, stupid manner, apparently hardly recognising his own friends. Would not answer any questions. Occasionally would mutter something in an incoherent manner. Some difficulty was experienced in getting him to walk into the ward, from stupidity or stubbornness.

He is a man of the average height, very muscular, & of dark complexion. Black hair. Pupils apparently normal

Thomas Bowman.

Skin moist. Tongue coated with fur & is dry. Nothing abnormal detected in lungs or heart. Urine free from albumen.

14th Oct: Has been restless & noisy since admission would not stay in bed & required to be put in padded room during the night. Will not speak this morning.

15th Oct: Rather quieter to day & yesterday. Will not enter into conversation. Looks at you in a vacant manner.

17th Oct: Has had to be fed with stomach tube yesterday & to-day, during the process he resists a good deal. Will rarely speak to any one.

22nd Oct: Still being fed with tube thrice daily. Tongue very foul & dry. Does not sleep at night very well.

31st Oct: Still being fed with stomach tube, & he makes considerable resistance to the process. He is not so dull in expression. He occasionally speaks to the attendants, especially when he is interfered with & then he usually exclaims "hand off!"

8th Nov: Practically no improvement in mental condition. Being fed daily with stomach tube.

15 Dec: Has not been so well during past 2 or 3 days. He is thinner & somewhat flushed. Bases of both lungs behind are inferior in percussion quality & R.M. is harsh, but no distinct evidence of Consolidation. ~~Emp.~~ Has taken some food to-day himself. Still depressed & childish mentally. Is confined to bed.

George Mackenzie Aet: 37.
Admitted 13th October 1888.

Patient was transferred to-day from Smithston Asylum, Greenock.

He is married, a Cab. Proprietor & resides at 4 Garden St., off Stirling Road.

He has been ill about a month, this being his first attack of insanity. Supposed ... A sister committed ... not subject to Epilepsy. ... dangerous to others, & has ...

... tined in Smithston Asylum ...

... sical condition. Lungs & ... mality on examination. ... mmer, & otherwise normal. ... to some of the features ... His face is rather ... is apparently happy & ... eech is hesitating ... has difficulty in ... ds. There is no ... inequality of pupil. There is slight tremor of the tongue on protrusion. Knee reflexes exaggerated. He has some exalted notions; e.g. that he is in intimate terms with the Duke of Montrose; he says he intended starting business in Greenock, with the view of becoming a town councillor; & that he is one of the chief members of the Mackenzie clan. His brother states

Geo. MacKenzie.
Vol. III. f. 289.

George Mackenzie.

that previous to his confinement in Smithston he was very extravagant in money matters, & bought some horses, for which he had no need.

24th Oct: Practically no change since admission. Sleeping fairly well at nights.

7th Nov: During past fortnight he has been very restless. Talkative & sleepless at nights.

24th Nov: Quieter again. Sleeping well at night, although he always says he sleeps none & wishes a "draught" at night.

8th Dec: Not much change in mental condition. He seems to be somewhat demented. Still restless & talkative during the day. Always asking to get away & whenever a door is opened he tries to get out. His letter-writing does not show any shakiness, which is observed in G.P., but he sometimes misses out words. Gneral health fair.

31st Dec: No improvement. He is facile & at times is emotional. He says when he is dismissed from here he is going to London & then to the Continent for a holiday. He hesitancy & tupping in speech still marked. Bodily condition very good.

1889

8th Jan: Patient was removed to day by his wife on her own responsibility & against medical advice.

Discharged — Relieved.

(Re-admitted 30th January 1889 — see p. 339.)

George Mackenzie Aet: 37.
Admitted 13th October 1888.

Patient was transferred to-day from Smithston Asylum, Greenock.

He is married, a Cab. Proprietor & resides at 4 Garden St., off Stirling Road.

He has been ill about a month, this being his first attack of insanity. Supposed cause, business worry. A sister committed suicide. He is not subject to Epilepsy. He is said to be dangerous to others, & has threatened suicide.

He has been confined in Smithston Asylum for a fortnight.

He is in good physical condition. Lungs & heart show no abnormality on examination. Urine free from albumen, & otherwise normal.

This patient presents some of the features of general Paralysis. His face is rather expressionless. He is apparently happy & unconcerned. His speech is hesitating & rather slow: he has difficulty in pronouncing test words. There is no marked inequality of pupils. There is slight tremor of the tongue on protrusion. Knee reflexes exaggerated. He has some exalted notions; e.g. that he is in intimate terms with the Duke of Montrose; he says he intended starting business in Greenock, with the view of becoming a town Councillor; & that he is one of the Chief members of the Mackenzie clan. His brother states

George Mackenzie.

that previous to his confinement in Smithston he was very extravagant in money matters, & bought some horses, for which he had no need.

14th Oct: Practically no change since admission. Sleeping fairly well at nights.

1st Nov: During past fortnight he has been very restless. Talkative & sleepless at nights.

14th Nov: Quieter again. Sleeping well at night, although he always says he sleeps none & wishes a "draught" at night.

8th Dec: Not much change in mental condition. He seems to be somewhat demented. Still restless & talkative during the day. Always asking to get away & whenever a door is opened he tries to get out. His Otter writing does not show any shakiness, which is observed in G.P., but he sometimes misses out words. Gueral health fair.

21st Dec: No improvement. He is facile & at times is emotional. He says when he is dismissed from here he is going to London & then to the Continent for a holiday. He hesitancy & tupping in speech still marked. Bodily condition very good.

1889

8th Jan: Patient was removed to day by his wife on her own responsibility & against medical advice.

Discharged — Relieved.

(Re-admitted 30th January 1889 — see p. 339.)

John Jones Aet: 58.
Admitted 21st October 1888.

Patient is married, a Pattern-Weaver, & resides at 382 Duke St: Glasgow.

He is said to have been insane about 4 months, this being his first attack. Cause is not known. He is said ~~not~~ to be suicidal, but not epileptic or dangerous to others. No known H.P.

Certificates indicate that he has been melancholic, & that on several occasions he has attempted suicide.

Patient seems to be hypochondriacal as well as melancholic. He at once enters into conversation with one, & gives ~~him~~ the whole details of his "case" as he calls it. He admits having attempted suicide by drowning, poisoning by Laudanum &c but he hardly looks like a man who would have the courage to take his own life. He speaks of the taking of the Laudanum as the one "great mistake of his life", but seems rather disconcerted when told that the amount he took could do him little harm. He never tires speaking of his ills. Says he cannot take any food, giving no special reason for refusing such. He wishes to die, & says that it will occur soon. He admits having masturbated in his Youth.

He is of small stature & is of spare build. Bodily health and

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John Jones.

Condition indifferent. Nothing abnormal detected in examination of heart & lungs. Tongue moist & slightly coated. Pulse regular, but rather weak.

24th Oct: Still speaks a great deal about his "case". Even while playing a game at draughts he will occasionally stop & proceed to tell his opponent all about his trouble. He believes that he will soon be paralysed, but says he does not think he will die for a long time. Is quiet & orderly. Sleeps fairly well at night.

31st Oct: No signs of improvement in mental condition. Still as much concerned about himself. Thinks his legs are to be paralysed, & is very suspicious when medicine is given to him. Says, that when a youth, he masturbated freely.

14th Nov: Still depressed & suspicious. Delights to talk about his so-called ailments. Bodily health fair.

1st Dec: Restless & depressed. Thinks he does not sleep well. Says his legs are paralysed & believes that the other members of his family will soon labour under a similar mental & bodily affection.

1879.

12th Jan: Still depressed. Is very constipated: says his bowels will never "move" again: thinks he is growing "too large".

20th Feb: Depressed & miserable. Does not take his food well: says it can do him no good. Is emaciated. Says that a tree is growing in his body & that the

Wm Oliphant.

Cont'd from page 280

since last note. Mentally he is at times a little brighter, & occupies himself fairly well with reading.

10th Nov: Does not sleep well at nights, sometimes moans a good deal. Still rather depressed mentally. Ankle still painful when he tries to walk.

1st Dec: Sometimes he is more cheerful, at other times he is much depressed. Does not usually sleep well. Thinks he has been here nearly a year & wants his friends to take him away as he says he has no money to keep him here.

1889.
12th Jan: Has not been so well during past 2 weeks. Has been very depressed & not sleeping well at nights. If anything, he is somewhat thinner, than he has been since admission.

22nd Feb: He is still depressed & at times is quite stupid in his manner & conduct. He does not sleep very well at nights. Bodily health fair.

28th March. A little brighter during past week, but at times is stupid. Sleeping better at nights, & does not come out of bed so frequently as he formerly did. Bodily condition a little improved, but he is still feeble.

At his friend's request he is discharged to-day.

Relieved.

10th Nov:

1st Dec:

1889
12th Jan:

23rd Jan:

Wm Alex: Coutts.

Cont: from page 278.

Had a blister put on back of neck on 28th Inst. Seems to have done a little good.

5th Nov: Still, at times, boisterous & foolish in conduct. He writes occasionally to his father, & his letters are occasionally incoherent, & usually foolish. General health good.

7th Dec: Much improved during past week. He is quiet & orderly, & more settled in every way. He is more careful in dress. Sleeps well at nights. Bodily condition also improved. At present getting, 3 times a day, 3ij Syr: Easton:

16th Jan: 1889 Considerable improvement in mental condition. Says he has occasionally unconscious seminal emissions, & he is very anxious about these. Has been getting Syr: Hypophos: Co: for past 2 weeks.

21st Jan: Is now apparently quite well, both mentally & bodily. To-day is discharged as

Recovered.

Alex: Fisher.

Cont^d from p. ~~269~~ 270.

1888		am			pm		
	Temp:	Pulse	Resp:	Temp:	Pulse	Resp:	
13th Sept	100·8	126	36	103·2			
14th "	100·2	118	26	102·8			
15th "	100·2	84	34	101·6	78	32	
16th "	100·2	112	38	100·8	104	34	
17th "	100·4	114	30	100·8	114	42	
18th "	100·	120	36	101·4	108	36	
19th "	100·	102	30	101·2	108	36	3rd Nov:
20th "	99·8	102	30	101·2	118	34	

24th Sept: For past few days patient has been steadily improving. Physical signs in lung still marked – the dulness & increased V.R. & V.E. having become much more apparent since 10th inst. Temp: still above 99°, but under 100°.

30th Sept: Doing well. Pulse bright 114 & Resp: 24. Temp: still not normal.

14th Oct: Has been allowed out of bed for 2 hours or so during past few days. Lung is clearing up.

31st Oct: Is now out of bed all day, & going about the ward, assisting a little. Physical signs in lungs, practically gone. Takes food well. (R. pneumon:)

25th Nov: Doing well. Is quiet, manageable & sleeps well at night. Still evidence of mental weakness present. Bodily health is fair.

1889.

26th Feb: Bodily health much improved. In regard to his mental condition his friends say he is now

Dr. Alex: Rae

Cont'd from p. 242.

from his anxiety to show that he is really well: his friends say that it was his natural disposition to be lively & jocular. He has been frequently in town with his wife of late & has apparently much enjoyed such visits. Sleeps well at night. In good bodily health.

3rd Nov: Has been quite well since last note. In excellent bodily health. Discharged to-day.

Recovered.

John Rodger, Aet: 50.
Admitted 10th November 1888.

Patient is a pauper, chargeable to the Parish of Cambuslang.

He is married, a Commercial traveller, & resides at 2 Morriston St:, Cambuslang.

He is said to be insane for one month, this being his first attack. Supposed cause is some "eye trouble". He is said not to be epileptic, suicidal or dangerous to others. No known N.D.

Certificates state that he has had lofty delusions: thinks he is owner of large coal mines, that a cousin has left him half a million pounds; that he has been delivering a scientific lecture; that a lady in Cambuslang had 20 sons at one birth; &c. His wife says that recently he has been using most obscene language.

On admission he had a dreamy unconcerned appearance: as is usual on the admission of such patients he had a bath & he asked, in a stupid kind of way, if it was right that a man who was merely visiting "the place" should be subjected to such treatment. He says he is quite well & that he is only going to remain here one night. He is facile & seems somewhat demented. At times, answers questions in an irrelevant manner. When walking, he "shuffles" with both legs slightly, but apparently not with one more than the

1yr Nov:
2yr Nov:
Dec:

other: the left shoulder also is observed to droop slightly. The knee reflexes are entirely absent. There is external strabismus of right eye. Right pupil more dilated than left. Slight tremor of the tongue is observed when it is protruded. He cannot perform the equilibrium test & he cannot walk on a narrow base. He has not exhibited any extravagant delusions as yet. His memory is much impaired.

His wife has only observed this mental affection during past 4 weeks, & the first thing which attracted her attention was the loss of memory. He also spoke of having more money than he really had. The strabismus, she says, is of some years standing & came on gradually.

He is a man of average height, dark complexion & in good bodily condition. Nothing abnormal detected in heart or lungs. Urine free from albumen.

4th Nov: He is still dreamy & unconcerned. Frequently is found lying, with his clothes on, on some of the beds. No change otherwise.

5th Nov: Has not shown any lofty delusions since admission. Mentally he is childish & demented. Usually sleeps well at night. Often sings & whistles some time while sitting in the gallery. Bodily condition good.

2nd Dec: No change in mental condition. Listless & dreamy. Happy & contented. Bodily health good. Has still the same habit of going to bed during the day with his clothes on.

314

Robert Johnston.

1888 Cont^d from p. 161.

heard speaking to himself. Sleeps well at night.

15th Sept: Seems to ~~be~~ be some degree of dementia in this case. Bodily health good. Takes food well.

21st Nov: Mental condition improved during past two months. Does not talk so much to himself. He is quiet. Usually sleeps well. Is in good bodily health.

1889
20th Jan: Is quiet & well-behaved. Sleeps well at nights. Nothing special to note about bodily health.

26th Feb: The attendents say that patient is sometimes talkative, but is usually quiet. Has had some bronchitis recently, & general bodily health is not quite so good as formerly.

8th March Has not been quite so well for past two days, but had no symptoms of any acute disease. After being put to bed, the lower right half of Chest, behind, was found to be dull to percussion. R.M. is much diminished over this area but V.R. & V.F do not show any marked difference from the other side. No râles detected. Nothing abnormal discovered in front of chest. He says that some years ago he had pleurisy in this side, & he has been "weak-chested" since. Temp: normal.

10th April. Physical signs in chest much the same as above noted. He is in better bodily condition. Feels stronger & takes food well. Is getting Malt Extract. Temp: has not been above 99°. He often is restless:

3/5.

Peter McCurrie.

1888. (Cont^d from page 142)

difficulty is experienced in getting him to swallow anything. He has lost very much in flesh. The stupor is very profound. Sometimes the eyelids are closed, at otherstimes they remain open.

20th Nov: During past week the attendants have experienced more difficulty in feeding patient. Absolutely no sign of improvement in mental condition. Much emaciated bodily.

1889

28th Jan: Still lies in bed, utterly indifferent to his surroundings. The same difficulty is experienced in feeding him, but the stomach-tube has not been used since last August. Everything has to be done for him. He is much emaciated. ~~Last week~~ He has vomited on several occasions after getting food.

3rd March. Absolutely no change in mental condition during past two months. Still the same difficulty in feeding him. Lies like a log in bed.

3rd May. Has now to be fed with stomach tube regularly. Lies staring straight forward with his head raised. Resistive passively in the highest degree.

10th July. To encourage the exercise he has had massage for a week but this has had to be given up owing to some synovitis of the knee joints. For 2 days he somewhat brightened now he is as before.

2nd Sept^r. I. S. 2. Tube fed regularly.

2nd Nov^r. No change. To twice daily only as 3 times seemed too much

To 454

John Webster.

From page 252.

the Plantaris muscle. Has been in bed for a few days on account of this, but is now recovering.

31st Dec: Has quite recovered from slight injury above refered to. No change to note in mental condition. Bodily health & condition good.

1889.

20th Feb: No change in mental attitude. He still refuses to be on good terms with his wife & daughter, & says he could not live with them although he was discharged from here. He is quiet & well-behaved. Bodily health & condition good. Sleeps well at nights.

13th March. With his wife's consent patient is allowed to leave the Asylum to-day & live with his sister, the latter accepting all responsibility. There is no change to record in his mental condition. He says he could never live with his wife now. Apparently there have been, in former times, some domestic quarrels between patient & his wife, & consequently there may be some real ground for his present attitude.

He is in fair bodily health.

Discharged as

Relieved.

John Elborn

Cont^d from p. 254.

1889.

27th Jan: Patient has been weak for some time past, although he has taken his food fairly well. This morning, while walking in the ward, he seemingly fainted & fell, his side coming in contact with the floor. Towards this evening he seemed to be very flushed & the respirations were increased in frequency. No fracture of the ribs was made out, but bases of both lungs, especially the left, were dull to percussion. No complete examination of the chest could be made owing to patient's extreme obstinacy.

28th Jan: Respirations increased in frequency towards midnight & patient's face became more livid. He gradually sank & died at 2.30 this morning.

Died - 28th Jan: 1889.

A P.M. examination was made. The cause of death seemed to be Pneumonia, in the first stage, the bases of both lungs being affected. There was no fracture of any rib.

*

Archibald Taylor Aet: 42.
Admitted 22nd November 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a Ships-carpenter, & resides at 136 Piccadilly St., Glasgow.

He has been 6 or 7 times in this asylum, the last time being from February to June 1887. * See journal III p. 521

Present attack is supposed to have existed for a few days. Cause unknown. A sister has been confined in an asylum.

He is said not to be epileptic or suicidal, but is dangerous to others.

His present condition is apparently like that on previous admissions. He is suffering from Mania, but is not very violent. He is restless & foolish in conduct. ~~[illegible]~~ Uses abusive & obscene language & otherwise misbehaves himself. There do not seem to be any delusions or hallucinations.

Bodily health & condition ordinary. No abnormality detected in heart or lungs, on examination.

26th Nov: Usually restless at nights. Still boisterous & foolish in his conduct.

8th Dec: He is now very well. Quiet & well behaved. Sleeps well at night. In good bodily health.

1889

26th Jan: Has been well since last note. To-day is discharged

Recovered.

Rev. A.S. Robertson.

1889 (Contd from p. 180).

at times he is a little restless – sometimes gets out of bed during the night & walks about.

9th Jan: Last night & early this morning Patient had a severe attack of epistaxis. The bleeding was stopped with difficulty. The nostrils had to be plugged with lint soaked in Tinct. Ferri Perchlor. Patient is very weak this morning. Occasionally some blood still trickles from either nostril. He says he has had on two previous occasions a similar attack.

22nd Jan: Had another attack last night, but this was more easily stopped. Is confined to bed.

28th Jan: No further attack of epistaxis. Bodily health improving. Is quieter at nights.

25th Feb. General health improved, but still weak. Has not been so restless of late. Sleeps fairly well at night. Urinary difficulty not so great – Sound or catheter passed usually once every week – (Nos 8 to 10).

1st March. Had a paralytic seizure last night about 9 O'Clock & another to day about 4 p.m.: On both occasions left side was affected.

8th March. Is very restless, & difficult to manage at times. Incoe water occasionally in bed. Paralysis passing off.

15th March. Still confined to bed. He is very weak bodily, & seems to be becoming more childish in manner. Sometimes is very irritable – he recently dashed a tumblerful of water on an attendant's face, & on another occasion he struck his wife on the eye.

William Queen Aet: 41
Admitted 26th November 1888.

Patient is married, a Hotel Proprietor, & resides at 185 Buchanan St. Glasgow.

He is said to have been insane about 3 months, this being his first attack. Cause is uncertain, but he ~~is~~ has been of intemperate habits of late. He is not subject to Epilepsy & is not suicidal. At times he has been irritable & threatening. No known N.P.

The certificates state that he is at times incoherent in speech, that there is considerable loss of memory; he sometimes gave ridiculous orders, e.g. to shut the hotel at 4 p.m. & to put out many of the people who were annoying him

Patient presents many symptoms not unlike those of General Paralysis. His speech is of a slow hesitating character & he trips distinctly with test words, having most difficulty with the letter "r". His memory is very bad & he has difficulty in adding together simple figures. He is under the delusion that this is a large hotel which he has bought, & speaks of alterations he is going to make so as to accommodate large numbers of "Customers". The attendants he calls "boys", "waiters" &c. He performs the Equilibrium test badly & he cannot walk on a narrow base. The right pupil is more dilated than the left. There is slight fibrillary tremor

William Queen.

of the tongue.
He is a little under the average height & is in good bodily condition.

3rd Nov: Restless at nights & sleepless. Behaves at times in a stupid manner. Talkative & cheerful.

2nd Dec: Sleeping a little better, but restless when awake. Very anxious to get away.

9th Dec: Considerable improvement in mental condition. The affection of the speech is much less marked. He stands the equilibrium test much better. Sleeps fairly well at nights. Does not behave so stupidly, & does not give expression to the ~~these~~ delusions as formerly. Pupils nearly equal, but right still a little larger than left.

16th Dec: Improvement has continued, & there does not, in fact, seem much wrong with patient at present. Sleeps well. Behaves in a quiet gentlemanly manner. No abnormality observed in walking or speech, & his memory seems good. Right pupil still slightly larger than left.

23rd Dec: Left to-day "on trial" for 28 days.

1889.

6th Jan: Has remained much the same since last note. If the diagnosis of General Paralysis be correct, then it is thought that, at present, there is simply a remission, & he is accordingly discharged as Relieved.

Robert McAulay, Aet: 59.
Admitted 21st November 1888.

Patient is married, a farm servant & resides at 1 Cameron Place, ~~Dunlochen~~ Clydebank.

He is said to have been insane about 5 years, this being his first attack, & the only known cause is intemperance. He is not subject to Epilepsy, is not suicidal or dangerous to others. No known A.D.

Certificates state that he is incoherent & rambling in conversation: & that his memory is quite gone. Lately he has been going about his neighbourhood breaking fences & carrying them away in an open manner.

His wife states that up till about 5 or 6 years ago he was a farm servant, & at that time was very intemperate in habits. His illness began gradually, loss of memory & mindlessness manifesting themselves. During last summer he has become much worse, more restless & mindless.

Patient is usually of a quiet demeanour, but is utterly incoherent, apparently quite unable to answer such simple questions as those about his name, age, or place of residence. He constantly rambles from one subject to another in ordinary conversation, but the writer heard him sing a Comic song ~~with~~ in a coherent manner without any prompting.

At other times he is restless, & tries the handle of the doors as if he wanted away, but he

Robt McAulay.

does not say so, in as many words.

He is a man a little under the average height & of good Physique. Nothing abnormal detected in lungs or heart, on examination. Urine free from albumen.

1st Dec: Patient is a little quieter & he is sleeping better at nights.

9th Dec: Does not talk quite so much, but is still quite incoherent. He is quiet & manageable. In good bodily condition.

27th Dec: As incoherent as ever. Usually sleeps well at night. Does not talk so much during the day. In good bodily condition.

1889.

30th Jan: As incoherent as ever. No change otherwise.

25th Feb: Is decidedly quieter, but still as incoherent in conversation. He assists the attendants a little. Bodily Condition good.

31st March. No change to record. Never talks coherently. Bodily health & condition good.

June 10th Unchanged. Incoherent and restless. Bodily health good. Mentally unchanged.

1st August. Unchanged.

1st Nov. do.

3rd Decr. Noisy as ever and quite as incoherent.

1890

October 27th The same incoherent man, sometimes excited but usually fairly quiet unless roused when he bursts out a lot of incoherent nonsense. B.H. & C. good.

to vol. IV p. 272.

Alexander Walker.

1888. (from P. 134)

12th Dec: No improvement. When patient walks, the right foot is observed to droop, & he drags the right leg. Has been gradually emaciating during past few months. No cough at present.

1889.
3rd Jan: No change in his mental or bodily condition since last note.

Is discharged to day & taken to reside with his sister in Chryston.

Relieved – 3rd Jan: 1889

David T. Murray.

Cont^d from p. 258.

1889.

12th Jan: Apparently a little brighter for past week. Bodily condition also improved. Still requires close observation.

29th Feb: Decidedly more cheerful during past few days. He assists the attendants in the wards a good deal, while formerly he did little or nothing. Bodily condition improved.

5th March. Has continued to improve since last note, & now seems very well. Is in much better bodily condition.

May 15th Improving though very slowly. Works in the galleries especially taking an interest in plants & goes to the cricket field at night. Is quiet and retiring but answers when spoken to

July 18 Still improving but nevertheless with a some thing in his manner & conduct which is suspic-ious. Not so bright as he ought to be and seeks seclusion B. & C. fairly good. Sleeps well.

Sept 28th Discharged to-day

Relieved.

Re-admitted on January 20th 1892.
vide Vol V p 162.

Colin Govan Aet: 53
Admitted 6th December 1888.

Mia

Patient is married, a Calico Printer, & resides at 4 Ardine Terrace, Crosshill, Glasgow. He is said to have been ill about six weeks, this being his first attack. Supposed Cause - business worry & intemperate habits. He is not subject to Epilepsy, is not suicidal, or dangerous to others. A maternal uncle was insane for a time.

The medical certificates state that he is very excited, talks loudly & nonsensically, & says he is "Hamlet".

On admission Patient was suffering from Mania. He was restless, Constantly talking, & utterly incoherent. Calls the writer by different names. He was not violent or destructive so far as observed.

He is a man rather under the average height, & stoops a little. He is in good bodily condition. Tongue moist, but slightly furred. Pupils are unequal, the right being more dilated than the left. Nothing abnormal detected in heart or lungs. Urine free from albumen.

8th Dec: Very restless & sleepless during last night. Broke a window Yesterday by putting a boot through it. Pupils much less dilated & are now equal in size.

11th Dec: Still talkative & incoherent. Sleeping a little better at night, but restless when awake. This morning was very excited & would

Colin Govan.

not keep his bed: required to be put, temporarily, in canvass.

23rd Dec: Some improvement since last note. Occasionally restless at nights, but ~~for~~ during last 2 nights has slept well. Not so talkative during the day.

1889.

3rd Jan: Considerable improvement in this patients condition. He is now removed from the refractory gallery. Sleeps well at night. Is well behaved, & usually quiet, but sometimes talks a little too much.

8th Jan: Has continued to improve. Is less talkative. Sleeps better at nights.

21st Jan: Has again become more depressed, & at times is emotional. He sleeps little at nights — is restless & talkative, & during last week he has been in the refractory gallery.

4th Feb. Is quieter again & sleeping a little better. Still, rather talkative & emotional.

24th Feb: Has been removed from refractory gallery. He sleeps well at nights, & there is some improvement in his mental condition.

8th March. Up till 3 days ago he continued doing well, but has again become talkative, restless, & foolish. Has been put down to observation ward.

2nd April. He has been quieter & sleeping better during last week, but previous to that, he was noisy & restless. Has been writing a good many letters of late, many of them nonsensical.

Jo 455

Thomas Bowman.

Cont- from p. 288.

10th Dec: Patient has not been well, bodily, during past week. He has a slight cough with abundant purulent (muco-) expectoration, the latter having an offensive odour. An examination of the lungs is difficult, as patient will not assist you by taking a long breath &c. At right base behind the R.M. is not heard satisfactorily & some few râles are detected. In no part is evidence of distinct consolidation. The temp: have varied from 99.° to 102°, usually with a tendency to an evening rise. For the past 3 days they have been under 101°. Mentally, he is still demented, but speaks to one more readily than formerly. He has not been fed by the stomach tube since last note.

1889

3rd Jan: No improvement in bodily or mental condition since last note. The dulness to percussion in right side behind is more marked, along with the comparative absence of R.M., possibly point to some pleuritic effusion. The temp: still show marked tendency to an evening elevation, the highest evening temp: since last note, has been 101.4°, while it has only once reached 100.° in the morning.

Patient's friends have been very anxious to take him home & to day sanction is given to do so. He is removed in an Ambulance waggon by his father.

- Relieved - 3rd Jan: 1889

John Rodger.

Cont. from p. 298.

1889.

2nd Jan. Still the same happy unconcerned disposition, very suggestive of G.P. He sleeps a great deal, whenever he gets an opportunity.

4th Feb. During past week he has been restless & noisy at times & does not sleep well at nights. Frequently falls asleep during the day. Takes food well. Answers questions in a childish manner. Bodily health good.

6th March. Still the same feeble childish manner. Quite happy & contented. Often restless & talkative at nights. Bodily health good.

10th April. Has been much more restless during past two days & nights. Hæmatoma Auris (left) observed Yesterday. General mental condition same as before.

15th May. Extremely restless destroying everything. Sleeping badly and disturbing others. Has had attempts of urine, the catheter requiring to be used occasionally. to which he very decidedly objects. Physically he seems unchanged and takes his food well.

July 17. Unchanged. The same restless, noisy and yet quick witted fellow coming out with some very droll expressions at times

Sept. 25. Has been much quieter recently probably due to KBr and Cannabis of both of which he has been having large doses. Catheter not required. Otherwise unchanged

To p. 456

Alexander Smith Aet: 32.
Admitted 13th December 1888.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single a Flesher, & resides at 43 Market St: Glasgow.

He is said to have been ill one month, this being his first attack. Supposed cause is intemperance. He is not epileptic, or suicidal, but is said to be dangerous to others. No known H.D.

He is certified as being restless, irritable, & full of suspicion - "imagines he sees men & monkeys mixed up" -

On admission patient was apparently suffering from Mania a potu. During past month he has been drinking heavily. He is excited & very restless. He is quite incoherent in conversation. There is trembling of the limbs & other signs of excessive alcoholic indulgence. Tongue is thickly coated with fur.

He is a well built man, above the average height, & of fair Complexion. Lungs & heart apparently normal. Traces of albumen in urine.

14th Dec: Is much better to-day. Speaks in a rational manner. Is still very shaky. Slept fairly well during last night.

22nd Dec: Now quite well mentally. Still feels a little weak bodily.

30th Dec: Has complained of pain in back for past

week. Urine contains a slight amount of albumen. Patient says he formerly had "dropsy" of the feet.

1889. 8th Jan: Patient is discharged to-day. There is a less amount of albumen now present. No swelling observed on face or limbs.

Recovered - 9th Jan: 1889.

William Maxwell Aet: 42.
Admitted 15th Dec: 1888.

Patient is married, a Shipping Clerk, & resides at 438 Crown St, Glasgow.

He is said to have been insane about ten days, this being his second attack. + Only Cause which is known is business anxiety.

It is stated in the medical certificates that he has had fits of crying & shouting; believes he has committed some crime, for which he will be imprisoned; has refused at times to take food.

He is neither epileptic or suicidal, but is said to be dangerous to others. There is no known A.P.

When he was about 20 years of age it is said he had a melancholic attack, lasting about 6 months.

His wife says that patient became ill about 10 days ago & thinks it is due to some business affair, about which he became very despondent, & imagined he was going to lose his situation. Since then he has taken paroxysms of wild despair & dread. She says he is naturally of a cheerful disposition. Obstinate &

On admission he was very depressed, & it was with difficulty he could be got to answer the simplest questions. He did not give expression to any delusions.

His bodily health & condition were very poor, & he had evidently been perspiring

+ 9.1.89 Stephens Katie's had an attack in 1883, on the 18th of March & this third attack.

16th Dec:
18th Dec:
22nd Dec:
1889
3rd Jan:
12th Jan:
29th Jan:
16th Feb:
25th Feb:

much. Nothing abnormal detected on examination of heart & lungs, but sounds of former were weak. Tongue dry & coated.

6th Dec: Has been very restless to-day. Getting out of bed & pulling the bed clothes after him, &c. Did not sleep last night. Urine free from albumen, but containing abundant urates.

7th Dec: Will not speak to-day. Has taken very little food yesterday & to-day. ~~& yet~~

22nd Dec: Has had to be fed with the stomach tube on two or three occasions since last note, but for past 2 days has been taking his food fairly well. He is now sleeping better at nights. Usually refuses to answer questions.

1889.

3rd Jan: Some improvement in mental condition & now able to be out of bed. Sleeps well at night.

12th Jan: Doing fairly well. Walks daily in the airing court. Seems a little depressed, but answers questions freely.

29th Jan: Has continued to improve both mentally & bodily. Sleeps well at nights.

6th Feb: During past few days he has been again a little depressed, but converses quite freely with one. Takes food well & sleeps well at nights. Wishes to get home. Has had some bronchitis during past week.

15th Feb: Is in good bodily health. Free from bronchitis. & to-day discharged as Recovered.

William Mc Cubbin Alt: 35.
Admitted 29th December 1888.

Patient is married, a painter, & resides at 34 East Hamilton St, Glasgow.

He is said to have been insane for 8 days, this being his first attack. Supposed cause unknown. He is said not to be epileptic, suicidal, or dangerous to others. No known N.D.

Medical certificate state that he is incoherent, says that he is sent by God to deliver messages to other people & that Christ has given him over to Satan's power. His wife states that at times he is depressed & at other times is excited.

On admission he was voluble & excited. Says he has been sent by God to this place to preach the gospel of peace. His whole conversation is on religious subjects. Says another reason for sending him here is that his faith may be tested.

He is a man of average height. Dark hair & complexion. Is in good bodily health & condition. No abnormality detected in lungs & heart. Urine free from albumen. Tongue foul.

31st Dec. Does not sleep well at night. Is restless. Whenever he mixes with the other patients he shouts as loud as he can, but is much quieter when in a room alone.

1889
6th Jan.
12th Jan.
26th Jan.
3rd Feb.
14th Feb.
22nd March.
14th April.
29th Aug.

1889.

1st Jan: Is quieter, but sleeps very little at nights.

2nd Jan: Sleeps pretty well at nights. Is quiet, but occasionally acts in a foolish manner. Last night instead of getting on to the bed, he went under it & refused to come out.

3rd Jan: Still restless & foolish at times. Some nights he sleeps well, while during other nights he is wakeful & talkative.

31st Jan: Has been, on the whole, quieter during last week. Is sleeping better at nights.

1st Feb: At times he is uncertain & noisy in his conduct. Sometimes shouts & sings in the airing court. He frequently insists that his friends are waiting to take him away, & says if he is not allowed to go home quietly, he will adopt some method or another to escape.

2nd March. Still occasionally noisy & troublesome, & on a recent visit from his friends, he attempted to strike the latter. He is still sure that his father or wife frequently come to take him away & that they are prevented from doing so.

4th April. Although much quieter in his general conduct he is far from being well mentally. Still thinks he is being kept here against his friends' wish. Says that Sunday is Thursday & vice versa. Speaks about little Angels being in his breast, which guide him in his ways. Is sleeping well at nights. Bodily health good.

26th Aug. Removed to Greenock Asylum. Relieved

James Wood. Aet: 20.
Admitted 5th January 1889.

Patient was admitted at the instance of the Fiscal & is Chargeable, pro tem, to the Parish of Govan.

He had been apprehended and charged with assaulting a woman with a poker. In the County Buildings, Glasgow, he was examined by two medical men, who certified him insane.

On admission he seemed dreamy & stupid. Sometimes took a little time to answer questions & sometimes asked them to be repeated. He acknowledges that he assaulted a woman & also a man: he asked the writer, in a stupid manner, if he was one of those he had assaulted. He adds that the woman was "the devil" & that God had told him to assault her.

He is under the average height, of "spare" build & features rather effeminate. There is no shakiness of limbs or any appearance of tongue or eyes which might be suggestive of alcoholic excess. Lungs & heart normal to percussion and auscultation.

6th Jan: Slept little last night. Was talkative & restless.

2nd Jan:

22nd Jan:

4th Feb:

20th Feb:

16th March.

11th April.

15th May.

12th July.

Aug. 9

James Wood.

14th Jan: Patient ceases to be a fiscal case, having been taken over by the Govan Parish, & now becomes an ordinary pauper lunatic. There has been no change in mental condition since admission.

22nd Jan: Still foolish in conduct. Sometimes will walk quickly towards one as if to speak to him. but does not, & turns away in another direction. Sometimes refuses to answer questions.

4th Feb: Mental condition unchanged. Sleeps well at nights. Bodily health good.

20th Feb: If anything, a little improvement in mental condition. However, he is still at times foolish in his conduct. Cannot be got to do any work.

16th March. No change to record in patients condition.

1st April. There has not been much improvement during past month. He is still dull & stupid. At times he is very foolish in his conduct, & gives quite irrelevant answers to questions. Bodily health good.

15th May. Very dreamy still and talking foolishly. Has has a blister applied to the nape of his neck to rouse him. Untidy in his habits.

12th July. Considerably improved tho subject to great variations Well one day and acting very foolishly the following Untidy in his dress but talking on the whole more coherently.

Aug. 9 Discharged Recovered

John Gentleman.

Cont from p. 124

1889

12th Jan: Still talkative & foolish in conduct, but not destructive. Bodily health & condition good.

31st March. Not quite so talkative of late, but he is still incoherent & foolish at times. Is in good health.

9th April. This morning patient received an injury to one of his little fingers, by one of the airing-court doors accidentally closing upon it. The soft pulp in front of the first phalanx are much bruised, but the bone is not injured.

15th June. The same foolish babbling fellow. Bodily health good and sleeps well. Been very destructive and noisy of late

22nd Aug. No change to report.

4th Oct. Unchanged. Cannot be said to have improved any in the past summer in mind at all events tho physically he is in fair condition

4th Nov. J. S. 2.

1890

October 28. Just the same chronic maniac. Foolish & full of fancies and showing no improvement. B. & N. fair.

1891

6 March. Still very noisy & destructive in his habits. No improvement to note. His bodily health & condition are fair.

Aug. 28. Typical chronic maniac. Sulphonal useless in big doses has little effect on him. B. & C. indifferent.

Dec 23rd. Slovenly & destructive - always chattering & laughing - & sitting huddled up in a corner - idle & dirty.

To Vol. IV. p. 592.

Alex: Fisher.

Cont^d from f. 295.

as well as ever he has been & his conduct here of late has not shown anything to the contrary.

4th April. No change to record in patients condition. Is quiet & well behaved. Bodily health good.

3rd May.

Discharged

Recovered.

John Reid Aet: 45.
Admitted 14th January 1889.

Patient is married, a blacksmith, & resides at Garthcherrie, Coatbridge.

He is said to have been insane for 6 months, this being his first attack, & the cause is said to be uncertain. No known N.D. He is not epileptic or suicidal, but is said to be dangerous to others

Certificates state that he is suspicious & distrustful. He has the delusion that on two occasions, at least, an attempt has been made to poison him.

16th Jan: On admission patient was somewhat excited & suspicious in his manner. He did not enter freely into conversation but said he objected to being brought here. He repeated that an attempt had been made to kill him by putting poison into his food & medicine.

His sister says he took a particular dislike to a sister-in-law, with whom he was previously on good terms.

He is a well-built man of the average height & of dark complexion. Tongue is very foul. There is a hydrocele of the tunica vaginalis on the left side. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen.

24th Jan: Patient has been quiet & well-behaved since last note. All excitement has

John Reid.

passed off. He speaks in a coherent manner & seems very anxious about getting home. Is sleeping well at nights.

2nd Feb: Now seems to be quite well. Gneral health good. He admits that previous to his illness he had been too intemperate, & believes this to have been the cause, along with business worry.

5th Feb: Discharged to-day.

Recovered.

David Stenhouse Aet: 40.
Admitted 14th January 1889.

Patient is single, a bookbinder, & resides at 30 Simpson St: Glasgow.

He is said to have been insane for a few days, this being his first attack, & the supposed cause is unknown. No known H.D. Patient is a deaf mute. At home he attempted to jump over the window. He is not epileptic, but might be dangerous to others.

Medical certificates state that he con-stantly sits & growls like a dog: is sometimes very restless & requires to be held down.

He is of the average height. He is in weak bodily health, & is reduced in general condition. Pulse is weak. Tongue is rather dry & coated with fur. Left pupil is a little more dilated than right. There is no marked difference in percussion of lungs, but R.B. in upper part of left, both before & behind, has a more hollow tone than in right. A few wheezing râles are heard in left back. Nothing abnormal detected on examination of heart. Urine free from albumen.

Patient is evidently suffering from Mania. He is restless & excited, constantly moaning. Will not keep in bed, & requires to be dressed in a Canvass suit.

15th Jan: Slept none all night — restless at times.

David Stenhouse.

1889

19th Jan: A little improvement to day. Slept better last night & is not so restless. Cough also less troublesome. Taking his food well. By using finger signs he indicates that he feels better.

25th Jan: During past few nights he has been again more restless & sleepless.

2nd Feb: Seems to be emerging from his excited condition & is more manageable. Sleeps a little better at nights. Able to be out of bed during the day.

10th Feb: Is now very well mentally. Talks freely with his fingers. & in much better bodily condition. Cough practically gone. Takes food well, & sleeps well at nights.

2nd Feb: Apparently now quite well. Takes exercise in airing court every fine day.

8th March. Has not been sleeping so well for past week. He is more depressed & does not converse so much with his friends. Bodily health also not so good.

19th March. Much brighter again, & bodily health good. Sleeps well at nights.

1st April. Seems now quite well. A few days ago the Pastor to the deaf & dumb Institute visited him & could not detect anything wrong. He answered questions freely & correctly. The pastor, who has known him for the past 10 years, also thought he was in much better bodily condition. Discharged to-day as Recovered.

Alexander Campbell, Aet: 30.
Admitted 14th January 1889.

Patient is a pauper, chargeable to the Parish of Old Monkland.

He is single, a machinist, & resides at 14 Ross St: Coatbridge.

This is said to be his second illness, having been in Haddington District Asylum in 1885. He is said only to have been insane at present, for a day or two. Cause is unknown. No known H.F. He said not to be epileptic, suicidal, or dangerous to others.

Medical Certificates state that no reasonable answer can be obtained from him; that he talks incoherently & is excited in appearance.

It appears that Yesterday Patient refused to speak to his landlady, this being the first sign of his illness. This morning he suddenly stopped working, & refused to resume or to speak to any one.

When addressed he may stand looking at you in a vacant manner, & then may reply "I beg your pardon", but seldom gives a direct answer to your questions. He occasionally smiles without apparent reason. He sometimes assumes an attitude & remains in it until he is repeatedly told to move along. He is apparently quite indifferent to his surroundings, expressing no surprise at being brought here.

He is rather less than the average

Alexander Campbell.

height, & is in excellent physique. Complexion fair. Papils are both dilated, & equally so. No abnormality detected on examination of heart or lungs. Urine free from albumen.

13th Jan: Still dreamy & confused. At times refuses to answer questions, & only stares. Assists the attendants in the wards. Sleeps well at nights.

1st Feb: Still dull & apathetic. Always takes a considerable time to answer questions. Speaks more freely to the attendants, but even to them gives no explanation why he, at times, stands vacantly staring, when he should be doing some work. Pupils still dilated.

2nd Feb: Practically no improvement in mental condition. Occasionally will work fairly well, but at other times is dreamy, & answers questions in a slow undecided manner.

2d March He is to day transferred to Haddington Asylum. Bodily health good.

Relieved.

Donald Mackintosh Ward No. 22.
Admitted 15th January 1889.

Patient is single, a warehouseman, & resides at 39 Kenmure St., Pollokshields.

He is said to have ~~been~~ been ill one week, this being his first attack. Supposed cause is masturbation. He is said not to be Epileptic or dangerous, but is suicidal No known N.D.

Certificates state that he is dull & listless: that he "cut his throat" on the 8th inst: & the only reason he gave being that he was in bad health.

In the front of the trachea there is an incised, but only very superficial wound, about an inch in length, the result of an attempt to commit suicide on the 8th inst: Patient is very melancholic, & great difficulty is experienced in getting him to answer questions. He say he has been a great sinner & that he is lost. He confesses that he has been addicted to masturbation for some years.

He is much under the average height & is of "spare" build. Complexion dark. Tongue foul. Breath offensive. Pulse poor. Nothing abnormal observed on examination of heart or lungs. Urine contains Phosphates but no albumen.

20th Jan: Still much depressed. Rarely speaks to

Donald Mackintosh.

any one. Answers questions slowly & in a stupid childish manner. Does not sleep well at nights.

3rd Jan: Sleeping better at nights, but mental condition is unchanged.

2nd Feb: Rather brighter during past week. Sleeping better at nights. Wound in neck healed.

22nd Feb. Continuing to be a little more cheerful, but still weak-minded & childish. Bodily health a little improved. Sleeps well at nights.

3rd March. Still weak, mentally. When spoken to, he rarely says anything, but asks to get away. Bodily health good. Sleeps well at nights.

22nd March. Improving, but not by any means well yet. Rarely occupies himself by reading or doing any manual labour.

15th May. Emerging very slowly out of his state of depression. Engages in conversation only with reluctance but is on the whole brighter mentally. Physically he does not seem to be improving much being slee[illegible] & not at all robust.

21st August. During the summer he has been working out of doors but without any very marked benefit and he has not given up his vicious habits entirely.

4th Nov. Still dull and despondent tho tending to improve but only very slowly. Physically he is better having gained in weight during the past few weeks. Not taking much interest in his surroundings yet.

3rd Dec. 1890. J. S. 2.

25th Oct. Showing no improvement. Listless & silly, and becoming if is feared demented. B. B. good.

& vol. IV p. 273.

Andrew McWilliam Aet: 25.
Admitted 21st January 1889.

He was admitted to day as a voluntary patient.

He is single, a clerk, & resides at 18 Willow Bank Crescent Glasgow.

He says he has not felt quite well for the past year, but the depression has only become severe during the past few weeks. He admits that he has been a masturbator in his Youth, & he thinks this has a good deal to do with his present condition. As far as can be made out there is no H.D.

In the course of conversation he sometimes becomes quite emotional & tears flow freely. He uses such expressions as these:- "I am afraid I am damned"- I will never be able to lift myself out of this dreadful state of despondency" &c. He thinks that his lungs or heart are affected, while a physical examination of those organs does not reveal any abnormality. He is pale, & his bodily condition is indifferent. Urine free from albumen.

29th Jan: Still very depressed & does not sleep well at nights. During one night he wrote, what he said was his "will" on his shirt-front as he thought he was going to die. Takes exercise in the grounds daily. Has been put on Syr: Hypophos: Co: (Fellows).

9th Feb: Not much improvement. He thinks that

Andrew McWilliam.

"all hope is now gone". Does not sleep very well.

20th Feb. During past few days he has been walking in the garden & there seems to be some improvement in his mental condition. He takes his food well & sleeps a little better at nights.

3rd March. Has had some bronchitis during past week but he is better again. Mental condition is changeable. Sometimes he is cheerful - at other times he is depressed & thinks he never can get well.

1st April. For the past ~~two~~ days patient has been cheerful, & is in better bodily health. Enjoys going out of doors, Takes food well. Sleeping better at nights.

18th May. Does not seem much the matter with this patient. Talks intelligently and only betrays some nervousness in twitchings of the fingers &c &c. Physically improving

17th July. Subject to fits of despondency and depression. At these times he accuses and rails against himself most bitterly and when working in the garden he often prays very fervently. Allowed the freedom of the grounds & plays tennis with the Resident Doctors.

Aug. 6th. His brothers removed him to-day intending to try the effect of a sea voyage.

Discharged

Relieved.

John McPhee Aet. 42
Admitted 22nd January 1884.

Patient is a pauper, chargeable to the Parish of Old Monkland
He is married, a labourer, resides at 3 Manse St., Coatbridge.
He is said to have been insane only a few days, this being his first attack, & it is said to be due to Intemperance. He is not epileptic, or suicidal, but is said to be dangerous to others. No known H.D.

Medical certificates state that he is incoherent, destructive, & violent towards others.

On admission he was suffering from Acute Mania. He shouted aloud in an incoherent manner & some force required to be used in taking him to the ward. On being put to bed he continued to be restless & excited. He said he had been called "Jack the Ripper".

He is a man of average height, & his bodily condition is good. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen. Both pupils are contracted. Pulse good.

24th Jan: Still restless & sleeps little at nights. Is confused & dreamy & at times refuses to answer questions.

28th Jan: Is now much quieter & sleeps better at nights. Is able to assist in the wards.

John McGhee.

22nd Feb:	Is now quite well mentally. Assists the Attendants in the wards. Bodily health good.
1st March.	Has Continued to be well both mentally & bodily & to day is discharged as Recovered.

James Rodger Sloan Aet: 61.
Admitted, 30th January 1889.

He was admitted to-day as a Voluntary patient.

He is married, a Joiner, & resides at Overtown, by Kilmaurs, Ayrshire.

It is said that he has been ill about 5 or 6 months, this being his first attack of insanity. He received an injury to his head about 5 months ago, a "fly wheel" having struck him & this is the only known cause of his illness. No known H.D.

Patient is evidently very insane. He goes about the ward in a restless manner gesticulating & sometimes speaking loudly. He misnames people & says he knows some of the other patients well.

His bodily health & condition are good. On examination of heart & lungs nothing abnormal is detected. Urine free from albumen. He has double inguinal hernia & he wears a suitable truss. On the top of the head, where he received the blow, is a small linear cicatrix, but no depression of bone.

3rd Feb: Still restless & foolish in conduct. Last night, coming from the dining hall, he pushed another patient on the floor, & when asked about it denied the whole affair. Sleeps little at nights. Walks quickly about the airing-court, frequently with his hat in his hand.

12th Feb: Mental condition unchanged. Sleeps a

James Rodger Sloan.

little better at nights, but very talkative when awake.

21st Feb: Some improvement in mental condition during last week. He sleeps better at nights. He is quieter during the day & does not conduct himself so foolishly.

1st March. Now seems very well mentally. He is quiet & sleeps well at nights.

6th March. Has continued to keep well.

Discharged to-day as

Recovered.

George Mackenzie Aet: 37.
Admitted 30th January 1889.

Patient is married, a Cab-proprietor, & resides at 4 Garden St: off Stirling Road.

Patient was removed from here by his wife about 3 weeks ago as "relieved." - (See p. 290). Since his dismissal he has conducted himself foolishly: he bought numerous articles which he did not require & once or twice wandered away from the house in which he was living.

Medical certificates state that he imagines he will inherit the estate of Sir Kenneth Mackenzie although he confesses he is not "next of kin". He has also other similar delusions, e.g. that he is intimate with Princes & Dukes.

During the few weeks that have elapsed since his removal, there does not seem to have been much change in his condition. The hesitancy of speech is perhaps not so marked. There is still fibrillary tremor of the tongue. Pupils are equal & respond to light. Knee reflexes both exaggerated.

He is decidedly facile & says he is quite contented & willing to remain here for a little under observation, to show that he is quite well.

He is in excellent bodily health & condition — in fact, somewhat obese.

9th Feb: Patient continues in much the same condition. He seems contented and

happy, but is very facile. He takes his food well. General health good.

9th Feb. To-day he is removed by his wife, on her own responsibility, & taken home. No improvement in mental condition.

Relieved.

Readmitted 24th april 1889.

See p. 383.

James Proudfoot Aet: 20½.
Admitted 11th February 1889.

Patient is single, a clerk, & resides at 9 Wilson St. Millhead, Glasgow.

He is said to have been insane "more or less for 3 years", this being his first attack. Cause is uncertain. No Known H.D.

He is not subject to Epilepsy, is not suicidal but is said to be dangerous to others at times.

Medical certificates state that his conversation indicates weakness of mind: he has no knowledge of any public affairs: talks only about himself - says he feels movements in his head & back. His mother says that nearly every morning he takes a fit of screaming for about half an hour at a time. He often has refused food as he says they wanted to kill him. 19th Feb. 9th March.

Patient seems to be demented. He speaks in a confused childish manner. He says he feels some kind of fluid running over his head & down his back, & thinks that this must go through the great artery of the spine. When asked how he knows this to be the case, he replies that his brother told him so, & is apparently quite satisfied with his explanation. 2nd April. 20th April 14th Aug.

He is about the average height, but is very thin. His complexion is very dark & he looks much older than he really is. Muscularly he is poorly developed, although he says he is able to walk 11th Sept. 5th Nov. 3rd Dec.

James Proudfoot.

about a good deal. Nothing abnormal detected on examination of lungs & heart. Urine is free from albumen.

1st Feb: No improvement in mental condition since admission. He is weak minded & Childish. His gait is rather "slouching" in character & he goes about the airing-court as if he was afraid of his neighbours: he says that the attendants & other patients are constantly watching him, even when taking his meals. When asked why he does not shout in the mornings here as he did at home, he replies that "there are too many men here." He is quiet & sleeps well at night.

8th March. No changes in mental condition. Still childish & weak-minded. Seems always to be afraid of those around him.

2nd April. Nothing new to record as regards his mental attitude. Is in better bodily condition than on admission. Does not refuse his food.

20th April. No improvement mentally. Is now working in the grounds.

14th Aug. No improvement during the last few months. Silly & childish and incapable of taking about current events. Works in the grounds.

11th Sept. Unchanged mentally & physically

5th Nov. J. S. 2

3rd Decr. Working regularly in the grounds and of improved general health. Mentally no improvement. - Sleeps well & is happy enough, he says, here.

Jos. 592.

John Jones

Cont'd from P. 292.

branches will appear some day. He usually sleeps well at nights.

20th March. Still the same miserable depressed man. Usually sleeps well at night

15th June. a miserable melancholic improving none. Goes about in the most abject possible attitude looking the very personification of unhappiness. Untidy in his dress and dirty in his habits.

15th August. Unchanged. Has had some cough lately & is very thin.

4th Nov. If possible more miserable. Says he is damned and refuses to be comforted at any price. Takes his food well but is dirty sometimes and wet also.

3rd Decr. Dirty in his habits. miserable in his appearance and melancholy enveloping him like a shroud Bodily health very indifferent. ———

1890

26th May a very markedly melancholic case in very indifferent bodily health. Has many delusions characteristic of such cases but without any very special ones worthy of note —.

27th July. This patient died to-day. For some time he has been failing. getting thinner & refusing food. Death in the end came rather suddenly

Exhaustion from Melancholia

No P. M.

Henry Paterson.

Cont^d from No. 268

He fell, without any warning, while walking along his gallery. He then, it is said, became convulsed. He remained unconscious till his death (6 hours). During that time several convulsive ptizmes were observed.

Died — 9th Feb: 1889.

Post-Mortem Examination — Permission was only obtained to examine the head. There was great congestion of the membranes & surface of the hemispheres; the former were also thickened. The lining membrane of the lateral & third ventricles was thickened. No hemorrhage into the substance of the brain was observed, which might have suggested Apoplexy as the cause of death.

John Charles Stocks

1889 Cont^d from p. 190

quite like a slight paralytic stroke. The left arm & leg were partially paralysed. Patients face & eyes were congested. He has been noisy & restless of late.

8th Feb: He has quite recovered the use of his limbs to day, & is walking about as briskly as ever in the airing court.

30th March. Had another similar attack, affecting the same side on 20th inst. The effect passed off as quickly. He is restless & noisy. Foolish in conduct. Very dirty in habits. He has become much less stout within past two months.

20th April. Still restless & excited. Sleepless & talkative at nights.

3rd May. Has a very bad congestive attack last week which confines him to his bed for some days. He is now going about again but the disease is distinctly progressing and the increases frequency of congestive attacks is of bad omen.

15th July. Going down the hill. Unsteady on his feet and very untidy in his dress. Speech more thick and indistinct and the pupils very unequal. Talks incessantly sometimes, his ideas being very mixed. Been very destructive of late and sleeping badly.

25th Sept^r. Nothing to report unless gradual but continuous progress of the malady. Has another congestive attack last week after which he remains partly aphasic for some days.

J. & p. 457.

1889
11th April.
1890
October 30.
1891
7 March.
Sept. 1.
Dec. 2nd
1892.
April 8.
May 15.
Dec. 16th

Thomas Hoy.

Cont. from p. 200.

1889

Very energetic. Always requires to be told before he thinks of doing anything, but works well enough, when once he has begun.

11th April. Still inactive mentally. Seems to be quite content with his position here. Bodily health good.

1890

October 30. He under Knows no change in his patients condition since he came. He is quiet. requires a good deal of supervision to get him to do anything & is in short weak minded. B & C are good.

1891

7 March. There is no change to note in this patients mental condition. He is in good bodily health & condition.

Sept. 1. His mental & bodily conditions are as above described — Unchanged

Dec. 23rd Not so depressed as he used to be, but mind weakened in mind. Very quiet & not troublesome. He rather avoids notice. He used to work as a butcher & is very smart at the business as the writer can testify — & seems interested. But there is a great deal of automatism in what he does

1892.

April 8th Mind the same. At times inclined to be irritable.

Aug. 15 No change.

Dec. 16th He is not so depressed as he used to be. In conversation he is rather slow of comprehension but his ~~sentences~~ language is not incoherent. His general health is good.

So ✠ Vol. IV p 22

Henry Marshall Aet: 45.
Admitted 24th February 1889.

Patient is a pauper chargeable to the City Parish Glasgow.

He is married, an Engineer, & resides at 290 Castle St: with his sister.

It is said that he has only been insane for a few days, this being his first attack, & the supposed cause is intemperance.

It is said he is Epileptic & is dangerous to others. There is no known N. D.

Certified as being a "voice hearer": says he sees men coming to do him harm: speaks at times incoherently.

His sister states that he has been drinking for the past two months, & has not done any work during that time: & that last night he got out of bed & went out of the house with no clothes but his shirt: She also says that he repeatedly attempts to tare his tongue.

On admission patient was excited & incoherent in Conversation. He was very apprehensive & talked as though people would do him harm.

He is a strongly built man of average height & of dark complexion. He is in good bodily health & condition. There are a number of abrasions & discolourations on various parts of the body. There is a peculiar condition of the tongue. The anterior

Henry Marshall.

part is ulcerated & there is considerable sloughing going on. It is very foul smelling. The indentations of the teeth are quite marked showing that it is probably a mechanical injury of the tongue. He is said to have had frequent fits, but these are probably alcoholic as they have only occurred while he has been drinking.

Nothing unusual detected on examination of heart & lungs.

2nd March. Patient has been quiet since admission & now seems much better mentally. He does not sleep well at nights, but this he says is due to the pain of the tongue. The slough is separating & it is looking much cleaner. He has been washing his mouth every few hours since admission with Condy's fluid & water.

6th March. Is quiet & sleeping better at nights. All sloughing from tongue now ceased: but it is still painful.

12th March. Able to go outside now. Tongue has been healing rapidly. Quite well otherwise.

31st March. Tongue almost entirely healed. No difficulty in swallowing or speaking. Is in good bodily health.

Recovered.

John Bowie Gilmour Aet: 69.
Admitted 28th February 1889.

Patient is married, & resides at 4 Eton Gardens, Hillhead: He is an Engraver.

It is said that he has been insane for nearly two years, this being his second attack. (first about 30 years ago). Cause of present illness is business worries with some intemperance. No S.P.

He is not subject to Epilepsy, but is said to be suicidal & dangerous to others.

It appears that for the past two years he has been at times excitable & impracticable. Frequently had quarrels with his wife & relations & on one occasion recently, he struck the former. For the past few months it has been impossible for his wife & family to live with him, & during that time he has lived in his house with an old servant. He also has had quarrels with his partner in business, & with the clerks in the office. His friends say that he has indulged too freely in stimulants for the past few years, especially of late.

Although it would be somewhat difficult to "certify" this gentleman, yet his whole conduct is not that of an ordinarily sane man. He is very excitable & communicative. He speaks in an impulsive manner & says that all his friends have not been good to him, & that his son has done a very foolish thing

in sending him here. He even goes the length of saying that he thinks the latter perhaps more insane than himself, as he has been abroad & possibly had some head affection while there. He is unreasonable & wont listen to any argument. Says that residence in a place of this kind will kill him.

He is a man of average height & is in good bodily health & condition. Nothing abnormal was found on examination of lungs, but at apex of heart there is some prolongation of the 1st sound, almost amounting to a murmur. Nothing abnormal detected in the urine.

5th March. Slept at times during the first night, but slept none last night - in spite of 15 grs Sulphonal. He is restless & unreasonable to-day.

6th March. Some nights has slept well, but slept none last night, & had 25 grs Sulphonal. Says he felt giddy when he rose this morning (probably due to the Sulphonal. No change in his mental condition.

8th March. Had a short visit from his son to-day, whom he cursed for putting him in here. Then he soon changed his manner, went down on his knees & entreated that he should be taken away.

13th March. Sleeping rather better at nights, & without sedatives. Is more contented & less restless during the day.

2nd March. Continuing to be more contented & reasonable. & more at ease & reconciled to his position.

(359)

George Docherty Aet: 54
Admitted 13th March 1889.

Patient is married a Butcher, & resides at 7 William St., Greenock.

He is said to have been insane about 2 months, this being his first attack, & the supposed cause is Business Anxiety.

He is not subject to Epilepsy, & is not dangerous to others, but is suicidal. There is no known H. D.

Medical certificates state that he is sleepless, excited, & incoherent at times: that he has made several attempts to escape from his house; & that he thinks his wife has been unfaithful to him.

On admission patient was very miserable & depressed. Was sure that he would never get well, & that he had come here to die. He says that all his money is gone, & that his wife & he will require to go the Poorhouse. This latter is not the case, as his friends say he ~~has~~ is quite comfortable & has a good business. He lost a little money recently, but the amount was trifling. He also stated at home that poison had been put in his food.

He is a man under the average height, of stout build, & seems in good bodily health. Lungs & heart normal on examination. Urine free from albumen.

14th March. Slept none last night. Very restless & miserable to-day.

Geo. Docherty.

8th March. No improvement in mental condition. Sleepless & restless at nights. Full of suspicion. Not willing to take food. Says he wishes that he could kill himself.

31st March. Still very depressed. Does not sleep well at nights. Has had gloves on during last 2 nights, as he attempted to strangle himself with the sheets.

1st April. Still depressed. & sleeping a little better, ~~at nights~~, but occasionally requires gloves on at night. In past week has been getting 20m Ext: Opii Liq: thrice daily.

20th April. A little improved, if anything. Still, however, somewhat depressed, & occasionally expresses his desire to die. Sleeps fairly well at nights. Bodily health good. Opium mixture stopped.

1st June. Has attempted suicide repeatedly of late and is extremely depressed & miserable. Says he is to be stelled to night and that he deserves it, that his clothes are to be taken from him &c &c. Sleeping rather better but frequently rises to ask the attendants when his life is to be ended.

7th July. Has been rather better of late. Less gloomy and inclined to believe that he may not be so bad as he imagines. He has been a keen business man and has many typical Irish traits in his character.

8th Aug. Removed home by his friends against the Doctors advice.

Relieved.

Patrick Cairney Alt: 33
Admitted 20th March 1889.

Patient is a pauper, chargeable to the parish of New-Monkland.

He is married, a miner, & resides at Ballochney, New Monkland.

He is said to have been insane for two weeks, this being his first attack, & the cause is unknown. He is said not to be Epileptic, & Suicidal, or dangerous to others. No known H.D.

Medical certificates state that he talks incoherently & has various delusions:- e.g. thinks that he is going to die soon in consequence of things rattling through him; that water & wind runs up both legs; that he sees dead & living people coming into his house during the night.

Patient is apparently suffering from Melancholia with delusions of suspicion. He has a rather vacant & sullen appearance. He wishes to be left alone & says he is going to be taken to hell by the devil. He is very despondent & says "it is all up with him now", & it is of no use for any one to try to do any good for him.

He is a strongly built man, above the average height, & seems in good general health. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen. The four inner toes

Patrick Cairney.

of the right foot & the little finger of each hand, have been recently amputated, in consequence of an accident, which he says he received on the railway, about 6 months ago.

2nd March. Not any improvement in mental condition. Still depressed & rather irritable. Wishes to be left alone. Sleeps fairly well at nights.

3rd April. Seems a little brighter at times, but still bewails his condition, & frequently says "You are going to make a job of me this time." Sleeps fairly well at nights.

27th April. Still somewhat miserable & depressed. Does not interest himself in anything. Bodily health improving. Sometimes sleepless & restless at nights.

3rd June. Sometimes brighter since he wishes came on duty but still lacks interest in everything and difficult to rouse up. Sleeping better and eating well.

10th July. Still depressed and when roused wishes to be invisible and tells me not to bother him but to leave him alone since he is damned.

16th Sept. No improvement on the whole though some days he brightens up a little. Sits in a corner seat in the airing court and dreams all day long.

3rd Dec. Unchanged.

1883 7th Oct. Weak-minded & facile. No spontaneous action about him. Sits & dreams all day if allowed. B. H & C. good.

9 Nov. To day discharged by warrant of Parochial Board & taken home by wife.

Relieved.

William Harrison Aet: 25
Admitted 23rd March 1889.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a Barber, & resides at 6 Nicholas St.

He is said to have been insane only a few days, this being his first attack, & the cause is unknown.

He is not subject to Epilepsy, but is said to be dangerous to others. Not suicidal so far as known. No known H.D.

Certificates state that he is excited & incoherent. & in poor health, but says he knows of a man who can cure him at once.

His wife says he began to dress himself in a strange manner this morning; also attempted to undress in the street.

On admission patient was much excited & talkative. At times he was quite incoherent & gave irrelevant answers to questions. He says that Lewis dead, but has been raised to life again. During the course of conversation he would frequently shout "Father come in", thinking that the latter was near.

He is a dark complexioned man, under the average height, & is in very poor health. He seems considerably emaciated, has a troublesome cough, & speaks in a hoarse manner. No expectoration observed as yet. Does not complain of pain.

Wm Harrison.

On examination of the chest the whole upper part of right lung is dull to percussion, both before & behind, especially in front. A few clicking râles are heard in front above & below the level of the clavicle, but none behind. The expiratory & inspiratory murmurs are equal in volume & of harsh tone, over this dull area. V.R. & V.F. also increased over this area. Nothing special to note in left lung. Nothing abnormal detected about heart.

Pupils dilated (equally). Pulse rapid & feeble. Urine free from albumen.

16th March. During the first night of his residence patient talked a good deal, & his cough was troublesome, but since then he has been quieter & has slept better at nights.

His wife says he has been ailing for the past seven weeks - has had a troublesome cough of late losing flesh & sweating a good deal. Says he has always been intemperate, but more so of late. She also says she only observed any mental symptoms one day before admission here. There is a history of Phthisis in his family.

2nd April. Doing well. Much better mentally. Sleeping well at nights. Put on Cod Liver oil.

5th April. Again depressed. Very sleepless for past two nights & talkative. Thinks he is going to be killed. Sometimes refuses food as he thinks it contains poison.

(358)

Andrew Godfrey.

1889. (Cont.d from p. 196.)

14th March. Patient continued in the same stupid demented condition, as at last note, up till yesterday morning, when it was thought he was weaker & he was put to bed. There was no distinct evidence of a hemiplegic attack. Last night he was quite conscious, but pulse was very weak & he was evidently sinking. Stimulants given freely did not produce much alteration in his condition. He died to-day at 9.15. a.m.

Died. 14th March 1889.
Aet: 70.

On p.m. examination no distinct lesion was detected in the brain, but there was evidence of general chronic atrophy & degeneration of its substance. Both ureters were much dilated & the calyces of the Kidneys considerably enlarged. Some atheroma of valves of heart, but no warty or other growths. Heart normal otherwise.

Wm Harrison

1889. (Contd from p. 356.)

4th April. D again much improved mentally. The depression is gone. Sleeps well at nights. Bodily health a little improved & cough much less. Physical signs in chest same. Temp: usually characteristic of Phthisis Pulmonalis: often about 99° & 99.8 (am) & 100. to 102° (pm).

20th April. D well mentally. Not quite so much cough. Sweating at nights also less.

8th June. Discharged

Recovered Mentally

John Bowie Gilmour

(Cont.d from p. 350)

1889

Sleeps fairly well at nights & without hypnotics. General health good.

27th March. Was visited by his wife & daughter to-day, but had rather a stormy meeting with the former. Seems, however, to be quite settled again to night.

3rd April. Has been keeping well since last note. Sleeping well at night. Is quiet, contented, & reasonable.

Left to-day on trial.

~~1st May~~ ~~Discharged~~

~~Recovered~~

31st Dec. 1889 Discharged.

Recovered.

James Forrest Gillespie.

1889 (Cont.d from p. 226)

1st April. Still the same dreamy demented manner, both in action & speech. Bodily health fair.

30th August. No change to report in this patients condition B.H.&C. indifferent. not sleeping very well and rather thinner but no evidences of actual disease.

1890

October 27. Patient manifests no improvement. Has been for some time very dreamy in his manner and rushes off at a tangent during conversation with him. His bodily health and cond.n are fairly good. —.

1891

7 March. No change to note in this patients condition: he is in fair bodily health & condition

Sept.r 1. Unchanged. B.H.&C. good

Dec: 24th Confirmed dementia. Typical aspect, head hanging forward, body slouching, circulation poor, every action slow, every faculty blunted.

1892

April 8th Just the same. A stuporose dement.

Aug. 15th No change. Looks outside - & in summer weather even looks blue & congested.

Dec. 16th Does not now express his delusions. His work is chiefly confined to carrying coal which he does in a manner as if he were asleep.

1893

June 29th Deeply demented. Circulation very sluggish. Had lately some suppuration under one nail but he apparently felt little pain as he took no notice when it was handled & when the nail was divided. It soon healed up. He does his usual work of carrying coal and his general health is fair.

To Vol IV p 254

Hugh McLachlan Aet: 58.
Admitted 3rd April 1889.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is a widower, a hawker, & resided at Burns Lodging House, 21 Watson St.

Practically nothing is known about this man. It is supposed to be his first attack, & he is said to be both suicidal & dangerous to others.

Medical certificates state that he talks incoherently & has delusions of various kinds.

On admission he was quiet & talked in a connected manner about various things. He soon, however, gave expression to his delusions, & he then became more excited & talked much more quickly. He says that when a boy he worked in a tobacco manufactory: his masters had some secret preparation for mixing with the tobacco, & he says whenever any of the Employees found out this secret they were at once beheaded. He says he remembers a lady & gentleman who visited the place, but were never allowed to get out again. He says he knows the place where the bodies of the victims are placed, & he lately called there & asked to be allowed to dig up the remains, but was refused permission. He says he knows there is a secret drug which can cure many diseases, & that Sir Chas: Tennent offered £1,000,000 for the prescription.

He is a man of average height &

Hugh McLachlan

build & seems at present to be in good bodily health. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen & otherwise normal.

2nd April. Has been quiet since admission. Sleeps well at nights. Has not given expression to any other delusions than those above mentioned. Assists the Attendants in the wards & elsewhere.

5th April. Mentally he is improved. He is quiet & well behaved. When spoken to on the subject of his old delusions, he laughs & confesses they were fancies. Bodily health and condition good. He is employed about the wards or dining hall.

6th May. Discharged

Recovered

Archibald Mc Donald Aet: 36.
Admitted 4th April 1889.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is married, a labourer, & resided at 24 Cowden St., Glasgow.

He is said to have been insane only a few days, but this is doubtful. It is said to be his first attack & the cause is unknown. No known S.D. Not Epileptic.

Medical Certificates state that he is melancholic & cannot answer the most simple questions. His wife says that he tried to set himself on fire last night & that about week ago he attempted to jump into the canal.

Patient is apparently suffering from Acute Melancholia. On admission he made no attempt to answer the simplest question, but stared in a vacant manner. He was evidently very suspicious of those about him, & some difficulty was experienced in getting him to the ward from the reception room.

He is a man of average height, & at present apparently in poor general health. He is somewhat emaciated. Pulse rather feeble. Pupils equall dilated. Tongue a little foul. On examination of lungs, no very marked abnormality was detected, except that the percussion over upper part of right lung in front was less clear

than the same region on left side. Heart sounds normal. Urine free from albumen.

4th April. Is still very stupid & dreamy in manner. Has spoken several times, but in an irrelevant manner. He would seem to be somewhat demented. Pupils less dilated than formerly.

21st April. Not much improvement. Thinks this is his own house & points out different means of identifying it. Cannot be induced to do any work. Sleeps fairly well at nights.

30th April. Decided improvement in mental condition during past few days. Not so dull & stupid. Is beginning to interest himself in his surroundings & is not so confused. Bodily health also improving.

3rd. June. No continuous improvement to be noted. Has attempted suicide repeatedly by putting his neckerchief round his neck and attempting to strangle himself. General Health indifferent. Sleeping fairly well and taking food fairly.

18th Aug. In much the same condition. Depressed & melancholic and dejected in appearance. Does a little work about the Wards but not willingly. Sleeping rather better.

10th Nov. Practically unchanged. Varies little from sometimes less depressed than at others. —

4th Decr. Cannot be got to take an active interest in anything. Is feeding fairly well and gaining in weight but is still very depressed & unhappy.

Top. 486

Patrick Farrell, Aet: 49.
Admitted 4th April 1889.

Patient is a pauper, chargeable to the Parish of Old Monkland.

He is married, a Hawker, & lately resided at Drumpark, Old Monkland.

He is said to have been insane 14 days, this being his first attack, & the cause is unknown. No N. D.

He is not subject to Epilepsy, is not suicidal, but is dangerous to others.

Medical Certificates state that he is very violent & threatening in his manner, & at times quite incoherent in his language; & that he sometimes prays to God to send a judgment on the people. The assistant inspector who brought him to the Asylum says he gave him great trouble & tried to kick & bite the attendants.

On admission he was very noisy, shouting aloud in an incoherent manner. He gave totally irrelevant answers to questions. On being taken out of the reception room he tried to kick one of the men who assisted to bring him here.

He is a man of the average height, & of powerful build. He seems, from his appearance, to have been a man of intemperate habits. Nothing abnormal detected in lungs or heart. Urine contains urates & quite an abundant quantity of albumen. There is also a slight trace of blood to the

Patrick Farrell.

Guaiac test. Microscope shows the presence of tube casts (granular & epithelial), also a few red blood corpuscles.

6th April 1889. Is quieter on the whole since admission, but has not slept well at nights. Is often talkative. Speaks more coherently. Says that he has had a great battle with a number of witches of different colours, & that he received many scratches from them. Frequently found praying to the "Almighty", so that He may defend him from his enemies. Urine still albuminous.

14th April. Is quieter during the day, & sleeps well at night. Albumen is in much less quantity, only "slight," by heat & acid test. Otherwise patient is in good health.

20th April. Albumen diminishing in quantity. Otherwise patient is fairly well mentally & physically.

7th May Discharged

Recovered

Malcolm Murchie Aet: 35.
Admitted 8th April 1889.

Patient is single, a Marine Engineer, & has been in Buenos Ayres, South America for the past 9 years. He is a Scotchman.

He is said to have been insane about three months, the cause is supposed to be overwork, this being his first attack. He is not epileptic or suicidal, but might be dangerous to others. No known H.D.

Medical certificates states that he hears imaginary voices, which he says come to him through the air & beneath the door: also that he sees witches who tell him that sometimes he is a gentlemen & sometimes a common man. The stewards of the Vessel in which he was brought home says that he was occasionally violent & dangerous & once tore his clothes to pieces.

On admission Patient had a sullen stupid appearance, & not inclined for much conversation. He gives irrelevant answers to questions. He says he sees Ghosts which bid him do various things. When asked if he knows what has made him unwell he answers "a peep show". He uses foul language.

He is above the average height, dark complexioned & of fairly good Physique. Nothing abnormal detected on examination of heart & lungs. Urine

8th April.

9th April.

9th April.

2nd April.

20th April.

3rd June.

Malcolm Murchie.

6th April. Got out of bed last night about midnight, put on his clothes & refused to go to bed again. He is sulky, but quiet. He looks a man of very uncertain temperament & requires constant observation.

7th April. Wet his room during last night. On being asked to do something this morning, by an attendant he refused & attacked the latter. Both fell to the ground & patient complains of some pain in lower part of left side. The part has been examined & no fracture of the rib detected. No bruising observed.

9th April. Only slept at times last night, & was usually restless. Wet his room. He is more excited this morning, & talks at times incoherently.

14th April. Still in an unsatisfactory condition. Restless & talkative at nights. Often passes water in bed & room. Says this morning that he has been delivered of a child.

20th April. No improvement. Often noisy & talkative during the night. Foolish in conduct & conversation.

3rd June. Since the writer came on duty this patient has had an attack of mania from which he is now to some extent emerging. He was violent & dangerous to the attendants and was continually talking in an excited and incoherent fashion. He has wet his room on more than one occasion. He has had sedatives at night on several occasions with good effect

Top. 458

John Lawrence Aet: 63.
Admitted 8th April 1889.

Patient is single, a farmer, & reside at Meirmailing, East Kean, Bannockburn.

He is said to have been insane about 2 months, this being his second attack, having been a patient here in the summer of last year. (see p. 211). The cause of the present attack is uncertain.

He is not epileptic, possibly suicidal, & at times is dangerous to others. Not known N.S.

Medical certificates state that he is incoherent, excited, & has delusions. Says that his sister & brother are insane & that he is right. His brother says he objected to corn being sown, as there was plenty in the ground naturally.

Patient is in much the same condition as on last admission. He is very incoherent, noisy & talkative. He is in great dread that something alarming is going to happen, & clings to one for protection. He thinks he has committed some crime, & asks for pardon.

His bodily condition is better than on his last admission, but he seems worn out by constant restlessness. Nothing abnormal detected on examination of heart & lungs. Urine free from albumen.

10th April. He has slept fairly well during last 2 nights but in the day-time he is very talkative & restless, & constantly attempts to

John Lawrence.

to get out of bed.

15th April. A little quieter. Is sleeping better at nights. Able to be out of bed. Takes food fairly well.

20th April. Still improving. Quieter during the day & he sleeps fairly well at nights. Still much concerned about those at home: everything will be wrong: the horses will not be able to work, tho is sure his brother is ill.

10th May. For the last 3 weeks he has had to be fed with the tube 3rd daily offering considerable resistance. He will not take his food believing he comes not pay for it. Goes about the Gallery muttering and talking to himself in a very incoherent fashion and in a typically bewailing attitude.

18th May. Took his food himself yesterday and is somewhat quieter. Since the beginning of May he has had Sulphonal regularly at night.

10th July. Not emerging from the maniacal attack very quickly and in danger of lapsing into a state of dementia. Has not required the tube fed since last note but takes his food indifferently and requires sedatives at night.

5th Sept. Practically unchanged. Taking his food only fairly well but not making much improvement.

7th Nov. For the last few weeks the Sulphonal at night has been discontinued and he has been sleeping fairly well. There is less want of coherency in his manner and conversation and he answers questions more readily. He is not gaining much flesh but is certainly not at present losing anything.

Jo's. 459

William McTaggart Aet: 21.
Admitted 9th April 1889.

Patient is single of no occupation, & resided at 110 New City Road, Glasgow.

It is uncertain how long he has been insane, but his father says he has never been strong mentally, & thinks his mental weakness is due to Convulsions in Infancy. During the past 3 months he has become more difficult to manage, & frequently wandered away from home, sometimes considerable distances, without any special reason. He is not Epileptic or Suicidal, but might be dangerous to others. An aunt of patients was in an Asylum for a short time, but is said to have recovered.

Medical certificates state that he is restless, dull & melancholic looking: Statements are rambling & unconnected: has threatened his friends with violence: Sells his clothes: has masturbated freely.

Patient has all the appearance & manner of a demented person. He is weak minded, facile, & quite unconcerned. Says he did not fret at being brought here, & rather likes the place, simply because of the great number of companions he will have. He admits having wandered away from home, & that it was wrong to do such a thing, but can give no reason why he did it. He has never been able to provide for himself, because

William McJaggart.

he says his health has not been good, & he has always had friends to care for him. His whole conversation is childish.

He is rather under the average height, & he is not well developed bodily. There is very slight lateral curvature (right) of the middle dorsal vertebræ. Nothing abnormal detected on examination of heart & lungs. Urine contains phosphates but is free from albumen.

14th April. Has been quiet & well behaved since admission. Sleeps well at night. He always converses in the same simple childlike way. Says that his uncle, who is an artist, is going to "take him in land" & make him a "famous marine painter."

20th April. ~~Doing well~~. Sleeps well at night. At work in the grounds. Still childish & stupid in his manner & conduct.

10th ~~May~~ June. an avowed masturbator with the want of character common to them. Very childish in behaviour and takes fits of despondency. Works in the grounds. Has had his neck blistered with some slight good and has been threated with the same applied to his penis should he not reform, which however he is evidently not very anxious to do.

10th Augt. During the past 2 mos he has been at a standstill so far as his mental state is concerned. Complains in a vague and indefinite manner of feeling ill and of pains in various parts of his body. Sleeps fairly well and takes his food. B. Health certainly better

Jos. 460.

Mr. Jagannadham.

1889 (from p. 186)

always with a good result & no bad effects observed till this morning, when he was seen to stagger as he got out of bed. This passed off in the course of an hour. 20 grs. to be given to night.

24th Feby: Slept well, but staggering was seen this morning again & soon passed off. To Sulphonal to be given to night.

1st March. Has had no draughts since last note, but he has slept well every night. He is quieter also during the day.

12th March. Of late he has again been restless & talkative at nights & last night he had 25 grs Sulphonal. He slept well from midnight.

22nd March. Has been sleeping well during past 10 nights, & has taken 25 grs regularly, without any bad effects.

27th March. No Sulphonal since last note, & patient has usually been quiet at nights. Bodily health is fair.

13th April. During past fortnight Sulphonal has been given at irregular intervals as is necessary, i.e. when he is sleepless & talkative, & always with Good effect. There is no real improvement in mental condition. He cannot sustain any conversation, & often gives quite irrelevant answers to questions.

7th June. Been very restless and quite incapable of talking sensibly for 2 minutes at a time. Has 25 grs Sulphonal every night.

Jofs. 461

Terence Mc Quade

1889. (from p. 286).

medicine. No bad effects observed till this morning, when patient was seen to stagger "like one drunk", as the attendants said, immediately after getting out of bed. This passed off in the course of an hour. 20 grs to be given to-night.

26th Feb: Did not sleep well last night, & is very noisy & destructive this morning.

2nd March. Has had 25 grs for past 3 nights & slept well for first two. To get 30 grs to night.

7th March. Has had 30 grs since last note, except on 2 occasions, & slept always all night. Last night & the previous night it was not given, & patient was noisy & restless.

23rd March. Has been getting 30 grs. Sulphonal nightly since last note & it has almost invariably acted well. There never have been any bad effects observed except, as above noted, on 25th Feb. Patient, however, is still as noisy & restless during the day. Dirty in his habits & uses foul language.

1st April. For past week sulphonal has not been given regularly, & patient has slept some nights & been restless during others. Still talkative & boisterous during the day.

3rd April. For last two days, patient has been decidedly quieter & more reasonable. He had no draught last night & he slept well.

8th April. The improvement in patient's condition has been continuous since last note. He is much more settled & reasonable, more cleanly & tidy in his habits & sleeps well at nights. He is a

376.

Robt. Johnston.

(from p. 299)

talkative at nights, but of late he has been sleeping better.

10th June. I.S.2. Sleeps well and takes his food well but has been rather talkative and noisy on several occasions.

15th Sept. Has complained of sore throat and hoarseness for a few days. Laryngeal Phthisis made out. Removed to Infirmary Ward.

4th October. Has been kept in bed since last note. Hoarseness continues and there is distinct dulness at the left apex but not as yet much evidence of breaking down of lung tissue Expectorat. distinctly

Temperatures.

	A.M.	P.M
Oct. 21	97.6	99.8
22	98	100.6
23	97.	99.2.
24	97	97.6
25	98.2	100.6
26	97.	100.6
27	97.4	100.
28	97.8	99.8
29	97.2	100.8
30	97.2	100.
31	97.2	100.2
Nov. 1	97.2	99.4
2	97.4	99.4
3	97.4	98.4
4	97.2	99.2
5	97.6	100.
6	97.4	99.4
7	97.2	99.2
8	97.	99.8
9	97.	100.2
10	97.2	99.8

Nov. 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
Dec. 1 2

Dismissed

4th Nov. Getting steadily worse in spite of remedies. Temperature irregularly hectic. Sweating profuse at night. Expectorat. mucco-purulent. Dyspnoea very much increasing from 80 to 100

Dec 2nd

Removed home by his brother and sister

Entered in books as

Discharged

Relieved

Terence Mc Quade.

1889. (from p. 374)

marked contrast to his previous condition. Although his language is still a little strong, it is not foul. He now walks round the grounds with the other patients, & he has been removed from the refractory gallery.

20th April. Still keeping fairly well. Sometimes a little noisy in his talk, but he is more reasonable than formerly. Tidy & clean in dress. Sleeps well at nights.

3rd June. Has considerably improved during the past month but is still very excitable and variable in his moods.

18th June

Discharged

Recovered

Readmitted July 1892.

377

Geo. Burns.

1889. (from p. 174).

April — to his friends & Lawyer. He also wrote one to the Home Secretary, complaining of his detention here. On being told that he is kept here because it is thought he is insane, he became very angry, using strong oaths & foul language. At all other times he is quiet & well behaved. Bodily health good.

7th June — Has been very quiet and well behaved of late but mixes more with other patients and has his regular beat in the airing court where he marches up & down. Has written several letters of late to the Secretary for Scotland & Commissioners in Lunacy giving an account of his case, exposing certain details of Asylum management and asking to be set at liberty as he is not insane. To Dr Yellowlees he has been very threatening in attitude, saying he wd kill him &c &c.

17th August. — The Commissioners of Lunacy having regard to the numerous letters he sent them have answered them & in consequence of Representations made to them by the Secretary for Scotland have decided that at their next visit his case will be considered. Meanwhile the writing of the letters - which are well written - has kept him quiet & he has been less abusive in his language of late and has been able to control his temper better. Bodily health & condition good.

3rd Sept. — Sir Arthur Mitchell at his recent visit to the Asylum on the 27th ult saw this patient but the result of their interview has not yet transpired, tho there can't not be much difficulty regarding his sanity

Jos. Hh.

A. S. Robertson.

1869. (from p. 304)

17th April. Still confined to bed. Recovering the use of left arm & leg. Is looking a little better within last few days. Gets a little more sleep at nights. Still however, irritable. To-day he threw a glass of milk at his wife, who was visiting him.

10th June. Has had repeated hemiplegic attacks during the last six weeks. His speech is now very thick and the left side is paralysed. Has been very cross troublesome and wet. &c. beats his wife when in one of his moods. He then shows an amount of strength of which he would hardly at other times be thought the possessor. Takes a fair amount of food principally milk and is allowed stimulants daily.

15th July. Continues to get worse. His speech is now so thick that it is only with difficulty he can be understood. He still has a reserve of strength and is still very bad to his wife throwing things at her. Had a rather bad hemiplegic attack last week the breathing for some days being very stertorous and the heart irregular. Sequences of chronic cystitis and enlargement of the left ventricle. No distinct murmurs detected.

27th August. Sank and Died to-day at 12.35

No P.M.

Alexander McKenzie Aet: 40
Admitted 14th April 1889.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is a widower, a brush maker, & resided at 141 Gallowgate, Glasgow.

It is said that he has only been insane a few days, this being his first attack, & the cause is said to be intemperance.

He is not Epileptic & is said not to be dangerous to others: He is said to be suicidal. There is no known A.D.

Medical certificates state that patient is a voice hearer: he thinks a woman is following him & wanting to sleep with him: sees devils running about: says that the neighbours are conspiring against him.

Patient is evidently suffering from Mania a potu. He is very shaky, unable to walk without support. Arms very unsteady. He is not excited, but is confused & bewildered. He talks in an incoherent rambling, manner. He points to people who he says are running about the ward & trying to catch him. Has also hallucinations of hearing.

He is a man of average height, of fair complexion, & of good physique. Pupils are much dilated, but equally so. Conjunctiva congested. Tongue furred, & tremulous when protruded. Nothing abnormal detected in heart or lungs. Urine free from.

8th April.

21st April.

6th May.

Alex: McKenzie.

albumen.

18th April. Talkative & sleepless all night. Still very shaky. Hallucinations still present. Says he had some women sleeping with him last night. Has a suspicious & frightened expression.

21st April. Now sleeping well at nights. Is emerging from the bewildered, suspicious, condition. Speaks in a rational way & is much steadier on standing or walking.

6th May. Discharged

Recovered

John McKinnon Aet: 40
Admitted 20th April 1889.

Patient is a pauper, chargeable to the City Parish, Glasgow.

He is single, a labourer, & resided at 136 Gallowgate, Glasgow.

He is said to have been ill only a few days, this being his second attack, he having been insane about 6 years ago, but not confined in any asylum. Cause of present attack not known. No known N.D.

He is said to be dangerous to others, but not suicidal. Not Epileptic.

He is somewhat weak-minded. He is childish & silly in his manner and conversation. At times he talks in a rambling & incoherent manner. When asked if he had ever been in an institution like this before, he replied "Yes, in the Royal Infirmary": & when asked what he was suffering from, he answered "the same as at present, the want of money". He says a few days ago he applied at the Police Station for a baton, so that he might protect himself against numerous men & women who are his enemies.

He is a man of average height, of dark complexion, & of good physique.

Nothing abnormal detected on examination of heart & lungs. Urine free from albumen.

21st April. Slept about three hours last night, but was quiet. Still the same

John McKinnon.

silly, childish manner.

June 10th Difficult to make much of this man. Since the winter came he has been quiet, has been sleeping well and gives little trouble. He does not answer questions very readily and has rather a silly smile. Bodily health good.

Augst 20. Works regularly about the grounds & with the exception of some oddness in his dress it would be difficult to say that he was not sane judging from a short interview with him. He is quiet and has been sleeping well at night.

17th Sept. Has been working away as usual. Manifests no delusions but gives one the impression of being congenitally weak-minded. Instead of answering a question smartly he smiles in an idiotic way. Has been decorating his coat with bits of cloth, ribbons &c. Seems on the whole to have improved during the last month especially in body.

4th Decr. Working in the grounds. Was reported to the authorities as a fit patient for boarding out but they have not as yet removed him. Bodily health good.

24th Decr Discharged

Relieved

383

Re. George Mc Kenzie, 37.

Admitted 24th April 1889. 4 Garden St. Glasgow.

This patient is readmitted to-day on the application of his wife For prev. admission see p. 299 & 339.

The medical certificates bear that his behaviour is outrageous, that his conversation is disconnected and that he believes himself to be very wealthy. He is said to write purposeless letters continually

Physical examination shows him to be a man of good physique and with no evidences of bodily disease Mentally he is sinking very far wrong. Laughs and talks in a very happy and contented way. Says he is intimate with the Prince of Wales; that he has stayed with him and that he is very wealthy. Pupils equal. Labial muscles work fairly harmoniously but distinct trembling of the tongue and inability to say the test words.

1st June. Not much change. Quiet as a rule and very happy. Full of the grand delusions. Beginning to be rather untidy in his dress and not over cleanly in his habits but he does not wet himself. Eats very well & is gaining in flesh.

24th July. Disease steadily advancing. Has given some trouble by his habit of pulling out the hairs out of his chin setting up some inflammn of the surrounding parts. Getting very slovenly. His letters which at first were readable are now so hastily written that they cannot be read but from what can be made out it is evident that they refer to his business which he believes is flourishing exceedingly Frets very much at times but has not so many despondent periods as other G.P.'s. Lips are now very tremulous and the salvia dribbles from his mouth

4th Sept.

4th Nov.

4th Dec.

1890 July 24th

1890 Oct. 24.

George McKenzie
cont.

10th. Sept. Nothing but a steady change for the worse to be noted. Cannot converse intelligently now and muscles of mouth & cheeks very much involved. Gait unsteady and typical Still with the old delusions of greatness and still supremely happy. Is becoming very obese and carries food from the table to eat in stealth. Secretes all sorts of things in his pockets, spoons &c and laughs in a silly manner when they are taken from him.

4th. Nov. Getting steadily worse. Unites on all sorts of rubbish and asks them to be posted. Maundering in his talk and silly in his answers to questions. -

4th. Dec. Getting untidy in his dress and dirty in his habits. Speech very thick but walking still fairly good. Eating & sleeping well.

1890

July 20th. Taken home by his wife against medical advice

Discharged
Relieved.

1890

Oct. 7th. The death of this man is announced in the days newspapers -.

David Howie, 64,

Admitted 24th April '89

Patient is married and by occupation is a farmer. He resides at Irvine and the durat: of this, his first attack is only a few days. The cause is said to be debility from ill health. He is said to be suicidal but is not dangerous to others.

The medical certificates bear that he labours under great excitement, that he has alternate fits of laughing & crying. that he has attempted to commit suicide with a gun and a razor.

A neice committed suicide and a brother and cousin have been in asylums. Not subject to Epilepsy

On admission he is found to be rather excited and violent striking out at some of the attendants. This calmes down in a few hours and in the evening he was pretty quiet. He is a spare thin man of rather under the average height. Physically no evidence of disease except what seems to be an femoral hernia on the left side

6th May. Quiet now and sleeping pretty well. Certainly improved and more sensible. Talks readily and connectedly. Says he does not know what impelled him to try to take his own life but he supposes it was the devil Is eating and sleeping well and walks out regularly.

1st June Improvement noted in last report has steadily continued. He is now quiet and his manner is quite free from excitement. Has put on flesh considerably during the last month having gained about 10 lbs.

5th June. Discharged

Recovered

1891

July 4

Nov 27

Nov 24

John Somerville

From p. 9.

1891

July 4 A delusional weak minded old man who enjoys fair bodily health. He cannot understand why his nephew Yeni is allowed to go free, when he is a murderer + a thief while he who owes no man anything is kept in prisons. He is at times very excited + abusive in his address and more especially if this the case if any hint is given in speaking to him that his mind is not all it should be.

Nov 27th Yesterday he was noticed to be short of breath and coughing - + with great difficulty was got to go to bed, insisting that there was nothing wrong with him. On examination general bronchitis was found - with dullness + diminution of breathing in the region of scapula on left side - and at left base - Pulse 140 - irregular + very weak - He was worse during the day + seemed to be sinking. Whisky, Ammonia, Mist Vomica + Digitalis Senega were given every 2 hours + nourishment - This morning his breathing is somewhat easier + pulse if anything a little steadier - but his state is most critical.

Nov 29 Patient has gradually been getting worse + died to day.

Died.

Cause of Death - Bronchitis & congestion of lungs.

Dr P. M.

387

William Forsyth, 28,
Admitted 25th April 1889.

Patient is an unmarried man residing at Bellshill
This is his first attack and its duration has been 7 days. Cause said to be loss of employment. By occupation he is a draughtsman. Not epileptic nor suicidal, nor dangerous to others.

The medical certificates bear that he believes himself to be the victim of a conspiracy, the conspirators being a Mr Bick and his daughter Bella but these people are entire strangers to him. No H.P.

His mother and sisters state that he threatened to murder them and then commit suicide. He is reserved and despondent.

From an account given by his sisters it would seem that for years he has just been a burden to them refusing to work and acting in such a way as to bring discredit on them in the neighbourhood. He has refused to work over and over again and when a situation was got for him he behaved so that he could not keep it. The cause of his coming to asylum is said to be falling in love with a lady but in truth that seems to have little actually to do with it.

26th April. Slept fairly well last night and a physical examination this day reveals no lesion of any organ. He is rather under the average size and his head is not that of the most highly cultured type but he is strongly built and enjoys good health. He is rather reticent and not inclined to talk much about himself.

3rd June. In much the same condition. Quiet and easily managed and eating & sleeping well. His mental condition seems to have undergone no change. Still believes that he was persecuted and that his sisters put him here to be out of the

10th May.

23rd Feb.

26th Nov.

3rd Nov.

1890.

Oct. 25.

1891.

7 March.

William Forsyth
Cont.

way, which is indeed pretty true

10th Aug. Works regularly in the grounds and in the evening plays cricket with the others. Does not do anything very heartily and laughs when you ask him why he is here.

23rd Oct. Just the same silly small minded man. Takes a lazy fit occasionally when he wont work but lies in the airing court all day chewing a bit of straw. Has improved considerably physically since admission but it is doubtful whether there is a corresponding improvement in his mental condition

24th Nov. Has been asking to get home and says that if he got another chance he would stick into his work and not be foolish. Otherwise unchanged. It may be mentioned that he denies most emphatically that he ever masturbated.

3rd Dec. The Governors gave him a talking to the other day but the effect is not yet manifest. He is anxious to get home and his friends are just as anxious that he should remain here.

1890.

Oct. 28. During the past year this man has improved little if at all. He is surly, refuses to answer civil questions and associates with the most troublesome patients in the Gallery. When his friends visit him he is nasty to them using bad language and taken as a whole his mental condn. shows no improvement. He works in the grounds usually and his bodily health is good —.

1891.

7 March. There is little change to be noted in this patients condition. He has of late been less surly but still is seldom free from gruff in conversation. He is in good bodily health & condition.

To Vol IV p. 497.

389

Archibald. Norman Stewart Mc Intosh, 38
Admitted 26th April 1889

Patient resides at 29 Smith St Helhead and is admitted at the instance of his mother.

He is said to have been ill 14 yrs insane this being his first attack. He is unmarried and a clerk.

There is no known cause. Not epileptic. Not dangerous to others but has threatened suicide. Cousin of his mother's insane

The medical certificates bear that for the last 4-5 years he has had delusions and has manifested suicidal tendencies. He imagines he is the subject of conspiracies &c.

He is depressed and melancholic and admits suicidal impulses. He says that people on the street stare at him and make offensive remarks. He has hallucinations of sight and imagines the devil appeared to him some time ago.

10th May. Since the writer came on duty there has been little change in this patients condition so that a report of his state now may be taken as equivalent to her condition on admission.

Physically he is of average height but of poor physique with a small face, prominent cheek bones and a facial expression of misery. His whole expression would make one exclaim 'a masturbator'. Mentally it is somewhat difficult as yet to form an estimate of his condition. He talks sensibly about himself but has a long story about the Persecutions he underwent in the Registers House Edinburgh where he was employed as an Engrossing clerk. He is by creed a Political Radical & wrote some articles for the Bulletman and some one wrote a slanderous article against him in that paper. He is said to have been ill for 4 or 5 years and during that time he has

27th Aug.

27th Nov.

2nd Dec.

1890 Oct. 29.

A. N. S. McIntosh

cont.

undergone many forms of treatment being especially fond of consulting quacks. Confesses that he practised self-abuse but has given that up he says. He maintains that people persecuted him outside pointing at him &c, mistaken by an enemy of his in Edinburgh since he came into the asylum they have been however less troublesome -.

31st Aug. Physically considerably improved during the last few mos. mentally more weak minded & silly. Has the free run of the grounds and walks about a good deal, playing bowls in the Evenings &c. Talks almost entirely about himself, his ailments his pains, his enemies &c &c. Writes frequently long letters usually to his mother. They are coherent and well written, asking often for tobacco and containing often high-flown sentences and references to current political events.

27th Nov. Has been getting thinner for some time and his face is more drawn & wizened. Apart from that he is unchanged mentally and bodily.

3rd Dec. Complains very much of the back of his head being sore. Full of fancies regarding his own health. Physically he is unchanged Mentally he is not improving and during the time he has been here he is more weak minded than he was.

1890.

Oct. 29. an hypochondriac improving slightly in bodily health but still full of fancies. Fond of writing letters and anxious to correspond with those high in political power. Thinks there is now nothing wrong with him but wishes a change to another asylum. Complains of headaches but refuses to interest himself in any outdoor work but wanders about the grounds on parole. —

to Vol. IV p. 276.

391

Patrick Collins, aged 44 years.
Admitted April 27th 1889

Patient is a pauper, chargeable to the City Parish. Glasgow
He is married and is a dealer in Laces &c.
This is his first attack, the duration being a few days and the cause unknown. He is not epileptic is not suicidal but is said to be dangerous to others. No H.P.
Medical certificates bear that he hears voices and he says that wherever he goes people follow him, crying "Kill him! Kill him"
On admission he is found to be rather excited calling out that "some one is stabbing him and that he is sure to die soon. He is blind and looks a very harmless sort of a man and not of powerful physique
Urine is free from albumen, there are no bruises & he is in good bodily health.

10th May. He is now a quiet well behaved patient but he cannot understand why he was brought here as "sure he did nothing at all to deserve it". It seems that at home he had been rather free with the rod beating his wife and children more than seems to have been necessary or justifiable. He excuses & justifies his conduct on Scriptural grounds, but promises not to be so harsh in future. There seems to be now little wrong mentally. He hears no more voices and probably he will be discharged soon.

July 22

Discharged

Recovered

Patrick Craig

From p. 234.

1890

October 28. Uncertain in his conduct being usually somewhat excited and easily made more so. His conversation is incoherent and he is fantastic in his dress. B. H. good.

1891

7 March. This patient continues in this state of chronic mania. He is frequently noisy & sometimes abusive but his conversation is incoherent fashion. He is in good bodily health & condition.

Sept. 1. Unchanged B. H. & C. good

Dec. 23rd. Talkative & foolish - of late in good spirits & of a genial reckless kind - He has an untamed wild look about him.

1892

April 8th - The same silly boisterous man - Has been fairly well for him of late -

Aug. 15th Much the same - but so noisy of late.

Dec. 16th Talks a great deal - says he is the son of the Duke of Wellington &c. & incoherent in conversation which is mostly about himself. He has not been abusive lately. Walks inside. In pretty good B H & C.

1893

April 29th Good tempered and very facile. Takes life easy but is not very strong.

June 29th His spirits are boisterous but very foolish. Constantly talking and smiling. B H & C. poor.

Dec. 27th He is nearly always in good spirits and never seems dull & depressed. He often complains of piles but in a tone in which he does not seem to regard them as of much consequence. His health is only fair. If annoyed by the other patients he would readily strike.

To Vol. V p 244

John Drummond, aged 36
Admitted April 29th 1889

Patient resides at Blairmains, Melrose: and by occupation is a farmer. He has been insane for 9 mos. and this is his first attack. The cause is uncertain but may be his nomination as an elder. He is not epileptic is not suic-idal and is dangerous to others. No H.P.

Medical certificates bear that he is untidy and dirty in his habits, remains in bed most of the day, wont work or take any interest in the farm. His talk is incoherent he has confused ideas, and his personal cleanliness is defective

5th May. This man was admitted some days before the writer came on duty. He is a tall fair man, whose bodily health is distinctly under par and who has a miserable, hang-dog look on his face. The heart sounds are weak but free from murmur and the urine is free from albumen. He has not been sleeping well having been restless quiet talkative. His appetite is fair his tongue coated but moist and his bowels constipated.

10th June. Beyond doubt he is a masturbator and has recently been addicted to the vice for some time. having practised it at home and brought himself to a very low state with it —. He is being as closely watched as possible but is doubtless going on with it still.

28th August. Has had to get his trouser pockets sewed up to endeavour to stop his evil habits. As miserable & forlorn looking as ever. Can't look the doctor in the face and does not care much about conversing. Does no work but walks in the airing court a wreck of a man.

23rd Oct. Practically unchanged. For some time back he has not been so restless at night, sleeping better but apart from

25th Nov. 3rd Dec. 1890 Oct. 29th 1891 7 March. aug 31. Dec. 23rd

John Drummond.
cont'd.

this there is no change to report. Has been taking his food fairly well. Was put thro' a course of Salix without result.

26th Nov. Unchanged.

3rd Decr. The same melancholy man, avoiding one and afraid to look one in the face. Bodily health indifferent. Mentally unchanged

1890

Oct. 29th. The same miserable masturbator whose bad habits cling tenaciously to him. avoids everyone and requires to be led before he can be spoken with. B. H. Good. Works none will not take the least interest in any thing that is going on.

1891

7 March. Patient continues his solitary suspicious habits rarely speaking even when addressed. He is in fair bodily health & condition.

aug 31. Rather better, much more talkative & volunteers remarks. No improvement yet in his inclination to work which he won't do. B. H. T. C. good.

Dec. 23rd. Of late months really improved in manner & mental condition. He has been cheerful & inclined to talk, always volunteering some remark & being frank enough in manner. Is believed to have given up his evil practices. Has sung at the weekly concerts & is a regular dancer. Unfortunately his bodily health has given way. He is affected with Phthisis most unmistakeably - chiefly on the right side. The right front & scattered consolidation - & there seems to be a cavity about middle of upper lobe in front. He has had one or two slight attacks of haemoptysis - and has a cough, worst at night.

To Vol. IV. 525.

Andrew Denholm.

Admitted 12th May 1889.

This patient is a voluntary and is to-day admitted to the East House. He is a commercial traveller and thinks his brain has been failing him of late. There is a strong H.P. which makes him more afraid. In manner he is very nervous and excitable and this he says has only developed of late. He felt he could not stand the strain of more business at present so put himself under observation here.

2nd July. He has no delusions and at times it would be difficult to detect any divergence from the normal standard. At other times however he is decidedly peculiar, being very reticent and not talking, gloomy & despondent. As a rule however he is cheery and has been put on his parole. He bowls a great deal and assists in keeping the green in order..

30th July. Since coming here he has, he says, more control over himself and certainly physically he is improving. He is stouter and more robust looking. There is at times a sort of convulsive twitching of the eyelids & lips which suggests nervous instability

August 31st Patient left to-day.

Recovered

Readmitted see p. 485.

James McPherson, 37.
Admitted 1st May 1889.

Patient is a pauper chargeable to the City Parish, Glasgow.

He is married and has been insane only for a few days this being his first attack so far as is known. Cause unknown. No known H.P. Not epileptic. Suicidal and dangerous to others.

The medical certificates bear that he is a voice hearer. He says Dr Whitelaw is determined to poison him in order to get sleeping with his wife. Other men are conspiring against him and he is quite unable to take care of himself. On admission he is very violent declaring he will kill some one and cursing most heartily all and sundry. He is of average height with extremely red hair. He is a lath-splitter by trade and has this came on him he had a fairly good business and was doing well

3rd May. Has been very restless and excited with a very suspicious manner. Full of delusions. Says he hears Dr Whitelaw & his wife talking outside his room last night and that as he have got hold of them he will ——. Declares that the Doctors at present in the asylum and that he brought him here. Has has his bowels freely opened. Vomited his food yesterday saying it was poisoned. Very filthy in his language. Sleeping badly.

1st June. His usual morning salutation is a volley of oaths but apart from this he is quieter and has been sleeping better. His delusions are as fixed as ever and when he saw his wife recently he was very abusive to her.

10th July. Practically unchanged. A suspicious troublesome patient very full of delusions of suspicion. Hears voices very often at night and says there are passages under the building where his enemies are & where they talk to him from.

James McPherson

" contd.

1889

30th August. Been rather better of late and has actually been civil in his answers to questions. To his wife he talked very sensibly recently and enquired after his children. He also saw his minister and did not swear so much as might have been expected.

3rd October. Still improving(?) but with the delusions remaining that he does not give expression to them so freely as he did. Eats + sleeps well as a rule and has been doing some outside work.

21st Nov. Been worse again and is in a condition of great suspicion just now. Believes his food is poisoned and that people talk to him in the whistle of the Railway engine. His bodily health is pretty good.

3rd Decr. Full of his delusions. Swore and used very bad language to his wife when she visited him recently. Mentally then unchanged. Bodily health is good.

1890

Janry. 15th Transferred to ~~Larbert~~ District asylum by the authority of Board of Lunacy

Discharged

Relieved.

Thomas Anderson

Admitted 3rd May 1869.

This is a voluntary patient who has been ill for some time pro-
-bably about 2-3 years though lately he has become worse.
He has delusions regarding the Holy Ghost, original sin &c &c
believes that he is damned, that his past life has been so bad
that he can never be saved. In spite of this he is cheerful but
never loses an opportunity to speak on these subjects. He
has been sleeping very badly at night his friends state getting
up and causing disturbance to others. Physically he is in
good health, being rather under the average in height, and
strongly built.

5th May. Since admission he has been very restless. Sleeping badly
at night and giving free vent to his ideas of things in
general. Pointing to a nail in a wall the other day he
says. "Now say that is God" then tracing with his finger
a circle round the nail "These inside this line are the Saved"
and drawing his hand outside this "All these" he said
are damned" "and in that circle I am".

10th Aug. In much the same condition. In passing ward at night
he is always talking to himself and not paying attention
to the games. Works regularly in the grounds. Sleeps well
at night and takes his food well.

23rd Oct. Improving. Much quieter and talking about himself far
less. Works regularly and well. and has given up many
practices he had such as chewing grass &c &c.

24th Nov. Discharged

Relieved

John Wilkie (Senior) aet. 64
Admitted 4th May 1889.

Patient is married, is a master painter and resides at 39 High St. Paisley.

He has been insane one year and this is his first attack. Cause is said to be abuse of narcotics (opium). He is said to be somewhat suicidal & somewhat dangerous to others. No N.P.

Medical Certificates bear that he is taciturn, lying in bed and never speaking. He constantly rubs his head as in distress. Years ago he was addicted to the excessive use of Laudanum, Chlorodyne &c. His present symptoms appeared when he gave up the habit in a fit of remorse.

On admission he is in a very shaky condition & thin. His friends state that he has taken opium & morphia for years and that it is only a year ago that he gave up the habit. Then he became very depressed, muttering to himself and irritable. He has been getting much thinner and within the last few months as he has got worse they determined to send him here.

*. It is doubtful whether he really gave up the habit a year ago.

5th May. Slept none last night but was fairly quiet. Is ordered nourishing and light diet with 3 eggs daily. Put on some simple tonic and aperient medicine given. Nods when spoken to but does not answer or only in monosyllables.

1st June. No very definite change to note. Has got into the habit of always sitting in the same chair nodding his head, with one leg crossed over the other. Gives no trouble but does not converse much with the other patients. Has what resembles Paralysis agitans of his head which rhythmically moves to and fro. Rubs his head with his hand and appears sometimes in mental distress.

Jops. 407

5th May.

12th June.

20th July.

20th August.

6th Nov.

W. G. Colquhoun,

Admitted 6th May 1889.

15th May. This patient is to a certain extent voluntary, that is he is not admitted under a warrant but he is not voluntary in the sense that had he not put himself under treatment here for a time he would have lost his situation

He is a strong-well built young fellow of about 30 years of age of average size and fair complexion.

By profession he is a letter-sorter in the G.P.O and is in receipt of good wages. For some time he has been very intemperate in his habits and this went so far that he was told by the head of the department that he would either have to resign or else take leave of absence for 6 mos on the condition that he would put himself under restraint and treatment. The latter he has done. For some days after admission he was restless and excited but now he has settled down and has been put on parole. His bodily health is good, and he already feels the benefit of regular meals &c &c. —.

12th June. Is in perfect health mentally and bodily. Indulges in outdoor amusements especially bowling. Talks very sensibly and is prepared to remain the six mos of leave in the Asylum

30th July. Nothing new to report. Is gaining in weight and has now a very healthy colour. Takes exercise freely.

30th August. Same as before.

6th Nov Discharged

401

James Wallace, Junior, aged 30
Admitted 11th May 1889.

Patient is unmarried and resides at Calderbank near Airdrie. His occupation is that of a clerk and he has been insane six months, this being his first attack. Supposed cause is self abuse. He is not epileptic. Might be suicidal and has threatened others. No S.P.

Medical certificates bear that he is very nervous and suspicious. He says that he feels very dull and depressed but he is evasive in his replies. He was affronted in a Railway carriage some months ago and brood over this still saying that he will shoot the man &c. He has given up work and the depression and gloom are deepening.

12th May. Very restless last night and dull and reserved in his manner to-day. Does not freely state any delusions but on pressing talks about the alleged assault he received some time ago. His eyes have rather a shifty look. Bodily health and condn good.

15th May. Less restless now at night and better in every way. Declines to talk much or be communicative. Takes his food well.

30th May. Sent out now to work in the garden. More talkative & sensible in his manner, readily answering when addressed in the morning. Expresses himself as feeling better.

26th June. Not much change. Sleeps well and eats well but is occasionally suspicious and brooding in his manner.

1st August. Continues to improve though slowly. Is anxious to return home and do something. No self abuse has been detected when in the Asylum.

Discharged Recovered August 9th 1889

22nd May.

3rd June.

18th July.

18th Aug.

William Campbell, ages 31
Admitted May 20th 1889

Patient is a pauper and chargeable to the Parish of Lesmahagow. He is unmarried, a shoemaker and of Protestant Religion. The present attack has lasted a few weeks but he has been in Bothwell asylum.

There is no known cause, he is not epileptic, suicidal, nor dangerous to others. His father and brother were insane.

Medical certificates bear that his manner is restless and uneasy and that he is the subject of hallucinins He wanders aimlessly about and declares that people want to shoot him

On admission he is seen to be a man of average size & build but with a gloomy and heavy looking face not at all of the highest development. No evidence of visceral disease is discovered. Urine non albuminous

22nd May. Is in much the same condition. Is quiet & wont talk much. He denies any delusions. Since admission he has not been restless or uneasy and indeed he is quieter than one would like.

3rd June. Sent out to work. Bodily health much better & perhaps a slight improvement in his mental state Is inclined to put his hands in his pockets and lean against the wall. Sleeping & eating well.

10th July. Nothing really to note. Physical health good Mental state unchanged. While his utterance is very slow there is nothing suggestive of G.P. of inferior education and with a badly formed head.

18th August. - Not improving any. Works about the grounds but does everything in a very languid listless fashion. Difficult to rouse him up.

To 435

Thomas Mc Inally, aged 45
Admitted 20th May 1889

Patient is to night admitted to the West House.

He is married and a butcher. He is said to have been insane 3 wks and 22 mos ago he had paralysis. He is not suicidal, is not epileptic nor is he dangerous to others. No H.P.

Medical certificates bear that he has delusions that he is about to marry. He is restlessness & his speech is incoherent. He rambles in his talk. Sleepless and excited continually calling for telegrams which he expects.

Brought to the Asylum to night by his brother. On entering the Reception Room he admired the pictures hanging there and offered £10,000 for a pair of them declaring that they were very fine tho he had better at home. He was excited in manner & very effusive

21st May. Slept none last night. Excited & talkative, asking for his wife &c, wishing to telegraph to different parties &c. Physical examinat. shows, difference in size of pupils, exaggerate knee jerk, tremulousness of lips & tongue & unsteadiness of gait. Full of grand delusions. Feeding well.

10th July. Last week he had a week. marked congestive attack remaining aphasic for some hours. Disease is evidently progressing. Speech blacker and more indistinct. Not able to express himself very lucidly and stupider than he was. Has wet himself several times at night. Has been sleeping fairly well. Restless in the first part of the night but calms down ere morning.

15th August. Bruises his arm recently by a fall. Has been very destructive of late, sleeping in canvass in the padded room. Becoming more careless of his appearance & dirty in his habits

20th Sept. Discharged. Taken to Dublin by his Brother.
J.S.2.

Alexander Holmes, aged

Admitted 21st May 1859.

Patient is to-day admitted to the East House. He is 50 yrs of age, single and a farmer & and resides at Gutheil, Budge of Weir. This is his third attack of insanity - his first having been when he was 30 yrs of age — and its duration is not exactly known. Cause is put down as Constitutional de-pression. Suicidal decidedly but neither epileptic nor dan-gerous to others. No. H.P. known

Medical certificates bear that he is listless and despondng sits constantly at the fireside and utterly neglects himself & his farm duties. His brother states that he has 2ce caught him endeavouring to drown himself

On admission here depressed & gloomy, saying he is utterly beyond hope that his life is a wreck &c. He is a man of average stature and strongly built. Bodily health fairly good. Has been sleeping fairly well and eating well at home.

3rd June. Little change since admission. Is quite content to loaf about the airing court and do nothing

10th July. Just the same. Is out working and in the Evening goes to the cricket ground and joins in the game tho not with any life. Is very hypochondriacal says to-day his liver is very much diseased that he cant live &c.

1st Sept. Become decidedly brighter. Engages with more activity in out-door work and has expressed a wish to get back to his farm. Subject also to despondent fits when he goes about with his hands in his pockets

1st Nov. Patient is to-day taken home by his brother. Since last note he has not improved and is to-day discharged

Relieved

John Bright Hogdson. aged 19.
Admitted 21st May 1889.

Patient is a medical Student and was last night admitted to the West House. He is said to have been insane for 3 days now and to have had a slight attack some years ago. The cause is put down as Study and Hereditary His mother is melancholic. Not suicidal but may be dangerous to others.

Medical certificates bear that he shouts and talks incoherently. that he is violent and dangerous and in short that he is acutely maniacal.

Brought to Asylum last night acutely maniacal. His hands, wrists and ankles were marked by the bandages used to restrain him. an undersized, under developed youth badly nourished

22nd May. Was very much excited all night and had to be put in the Padded Room which he disliked. Repellant in manner and abusive in talk to-day. Taken a fair breakfast. Mist. Senna Co. ordered.

3rd June. Not emerging much yet from the maniacal attack talks very foolishly and says he is not J.B. Hodgson but John Bright &c. Is not sleeping well even under Paraldehyde and is not taking his food well. Not over clean and tidy in his habits & dress and certainly masturbates

16th July. Up to quite recently the morning reports usually bore that he has been restless till 11 or 12 o'clock but slept after of late however he has not been noisy. During the day he has also been quieter and more sensible but liable at any moment to begin to talk foolishly. Being musically inclined he was encouraged to play the violin but broke it in one of his bad periods.

August 20th Removed by his friends to-day

Relieved

William Park Cross. 86.

Admitted 28th May 1889.

Patient resides at Hamilton and is single. He is a cutler by trade is said to have been insane for 8 weeks and this is his first attack but for 20 years he has had Epileptic Fits. Two brothers have been insane. There is good reason to suppose that masturbation has something to do with his illness.

Medical certificates bear that he is very restless and incoherent, entertains delusions and is excited. His father says he kept his bed last week and was unable to rise he said. He failed to recognise his friends.

On admission he is seen to be in a very weak state, thin & haggard. Mentally he is excited, talking loudly and incoherently and assaulting the attendants if he could get at them. no actual disease discovered.

29th May. Passed a very bad night restless & excited & sleeping none. Took however some nourishment and towards morning became quieter. To-day he is obviously weak but remains excited and talkative, though his talk is quite incoherent. Not taking his food well. Bowels freely opened.

3rd June. Has gained a little strength during the last few days but is still very excited. To day the bases of both lungs are dull to percussion & R. th. is defective. a peculiar condition of the lips is also observed. The labial surfaces are quite ulcerated especially towards the right side and the margins of the ulcers are ragged & un-even, discharging pus very foetid. It is not known how this came about but it interferes considerably with his taking food.

7th June. Become much worse to-day, quite delirious & very weak. Being freely stimulated.

12th June. Sank & died to-day. Exhaust from maniacal excitement.

No P.M.

John Wilkie Senr.

From p. 399.

1889

10th august. Little change to report. The night reports bear that he sleeps well and by day he is quiet. Still the same shaking of the head and fondness for a corner of the parlour where he can sit for hours before being disturbed. Physically he is better and has gained considerably in weight since admission. Taciturn and not disposed to enter into conversation with anyone.

25th October. Unchanged.

22nd Nov. Unchanged. When asked answers as to his health gives no verbal reply but nods his head.

1890.

March 1st Two days ago patient was seized during the night by a severe pain over the left renal region. This on examination was found to be accompanied by a great deal of tenderness over the Kidney & lumbar muscles. Exam. of urine showed it to contain a very considerable quantity of albumen but no tube-casts altho' a good deal of epithelial debris. This pain was greatly relieved by poultices & use of liniments. The day following however he was seized with dyspnoea & on exam. his heart a great deal of pericardial friction was heard. There was also considerable effusion into the pericardial sac. This was accompanied by great muffling weakness & irregularity of the heart sounds. Patient did not complain

to p. 525.

William Primrose aged 43

Admitted 31st May 1889.

Patient is a merchant and has been for 25 years in Shanghai, China. He has been insane 2 years and the beginning of the seizure is said to have been an apoplectic attack which he had 2 years ago. He is not epileptic but is decidedly suicidal and dangerous to others.

Medical certificates bear that he imagines he hears music, singing, voices when they are not really to be heard

He threatened violence to his attendant during the voyage home and tho he was in Glasgow only one day before examination he states he was one month. He is very lavish in his offers of hospitality without means to carry out his promises.

Twenty-five years ago this patient went to China and except for a short period he has been there tee now. For many years his business prospered and he entertained a great deal, living very highly and drinking a great deal. He seems to have been of great strength and is of a singularly handsome type. He swam 6 miles on one occasion for a wager and seems all his life to have been given to do extravagant things. about 9 years ago he married and it would seem that soon afterwards things began to go wrong and he lost money. This drove him to drink and 3 years ago he seems to have had something of the nature of an apoplectic seizure the right side being affected. From then tee now he has not been well but it is only within the last six months that he has been so ill, mentally, as to demand special attention. On admission he is extremely suave in manner and polite saying he is come to reside in this Hydrafora [illegible]

There is some paralysis - partial of the right side of the body and his right hand is slightly deformed. In walking he drags the right foot. Urine is non-albumi

William Primrose

contd.

and the viscera generally are sound.

1st June. Passes a very restless night sleeping none. Declares that his brother was outside the window talking to him all night. There is a good deal of tremor of the tongue but attends is pretty good if not quite right.

15th June. His delusions remain. almost every night people talk to him usually his brother or his wife. Says people pass electric currents thro him and that his ears are plugged so that he cannot hear them the say unless what they say to him. mentally he may be said to be unchanged but physically he is better

20th Sept. During the past 3 mos patient has changed little. He is sleeping rather better at night sometimes being a little noisy in the fore part of the night. Delusions still manifest. Gets out of bed at night and asks the attendants who it is that is talking to him. Says his wife and children are in the Asylum. Walks very much on the outer side of his right foot but this may be due to a bad corn on that foot. His case suggests G.P. but there are not many actual and obvious symptoms of that disease.

17th Oct. Unchanged. Has not been giving expression so freely to his delusions of late but they are still there. Very anxious to get away his invariable question to the Doctor in the morning being. "Can I get away to. day Doctor".

22nd Nov. Pats. bodily condition improving since winter Came on duty. Pat. still asks daily the same question as in last note. Always very polite & genial in manner. Sleeping better than formerly. Still however hearing the "voices."

p. 471.

John Smith. aged 30 years.
Admitted 7th June 1889.

Patient is single and by occupation a publican. He is said to have been insane a fortnight but to have had a similar attack some months ago. The exciting cause is put down as fright. He is not epileptic but may be both suicidal and dangerous to others. No A. P.

Medical certificates bear that he attempted suicide in the presence of one of the certifying doctors and that he assaulted his father & mother &c.

This patient is admitted to-day and whatever may be said by the friends there can be no doubt as to the cause of his insanity and that is Drink. On admission he is fairly quiet. a big strong young fellow weighing about 15 stones. soft & flabby and not over. muscular His occupn being as it is opportunities for indulging in debauch have not been awanting.

8th June. Became very excited last night & was put in the padded room where he became very maniacal. Tore his clothes &c. - quired 4 attendants to keep him. Put in canvass. Bowels freely opened. Pulse S. night soft and bounding. Tongue very foul. Skin hot & dry. Stimulant ordered.

10th June. Much quieter but still in Padded room. not to be released on. Taking his food well and passing via in good order. an examination of the heart shows that it is not in a very satisfactory condition. First sound is feeble and not altogether free from a suspicion of being followed by a murmur. Urine which at first - 3 days - contained a trace of albumen is now normal.

18th June. Quite well now mentally. on parole of which he talks free advantage

13th July Discussed Recovered.

f. 471.

411

Joseph Brown aged 30.
Admitted June 11th 1889

Patient resides with his brother at 130 Broomielaw Pk but has been in a home for Dipsomaniacs for some time. He is single and has been a soldier. This is his first attack and he has been ill 4 mos. Cause is "Drink" Not epileptic, suicidal or dangerous to others. No N.P.
Medical certificates bear that he has incipient dementia alcoholicum. want of reasoning power, makes false accusations against his friends. He is a dipsomaniac and was under medical treatment for apoplexy one year ago.
On admission he is seen to be a fairly well built man of good physique. He has been in the army and confesses to have had specific disease. - On admission he is a little excited and says he has been treated treacherously.

June 12th Slept little last night being rather excited. A physical examination this morning shows that he is in good health. There is an indistinctness and thickness in his speech strongly suggestive of G.P. but this he says came on after an operation he underwent for a growth in his larynx -. apart from this he has a very distinct feeling of well-being is always with a smile on his face and this jovial manner does not tend to allay the suspicions raised by his indistinct speech. -

July 20th Much improved. Sleeping and eating well and writing quite coherent letters. Speech and manner as before but no indications of them progressing and no other suggestive sign of G.P. Diagnosis now is alcoholic -

31st August Improvement continues. Really very well now.

17th Sept Discharged

Recovered.

Thomas Kidd, ages 23.
Admitted 12th June 1889.

Patient is single and has been by occupation a clerk. This is his first attack and he is said to have been insane for 3 weeks. The cause is put down as the death of his mother which occurred suddenly about one month ago. Not suicidal or dangerous to others. No H.P. —.

Medical certificates bear that he was found naked and very excited sitting by the fire. His talk is incoherent and he displays great emotion.

On admission here very excited but not violently so. Laughs and talks a great deal. Says he never was happier and that his brothers are in a bad way while he is on the high road to great fortune. He is an undersized but strongly built young fellow with rather a heavy face.

14th June. Talked incessantly all last night sleeping none. This forenoon he is rather quieter and was sobered when told where he was. This did not last however and he was laughing in a few minutes again. He suffers from gonorrhoea but apart from that is in good health.

29th Aug. During the past 2 mos he has been out working regularly and there is some improvement both physically and mentally. Physically he is stouter & sudden the he has been suffering from chronic conjunctivitis. Mentally he has more inhibitory power, has more control over his emotions & is more rational in his conduct. All these however vary. Some days he is really fairly well at other times he is very light headed.

23rd Oct. No change to report. Working regularly and in good bodily health. Mentally unchanged.

27th Nov. Unchanged —.

3rd Dec. The same excited man. Laughing when asked serious questions and silly in his manner. Bodily health is pretty good

30th Dec. Discharged Relieved

James Gaffney. 30,
Admitted 22nd June 1889

Patient is a pauper and chargeable to the City Parish.

This is his first attack and he is said to have been ill for a fortnight. No known cause. He is not suicidal, nor epileptic nor dangerous to others. No H.P. so far as is known.

Medical certificates bear that he has a dull & moody aspect. That he talks and mutters incoherently to himself. He lives in terror of some one who wishes to kill him and believes himself to be the subject of a conspiracy.

Physical examination shows that he is in fairly good bodily health. There is certainly weakness of the R. lb. at the left apex but nothing else to cast suspicion on this portion of lung tissue. No albumen in the urine. 25th June.

He is depressed and quiet and it is difficult to get much out of him. He confesses that his mind is weak and blames it on some one in Ireland who blackened his character to the Priest and so brought ecclesiastical wrath down on him.

23rd. June. Slept well last night and is quiet this morning. Is very quiet and reticent about himself giving evasive answers to questions.

29th Aug. Works now regularly in the Shoemaker's shop and has once or twice been going to be sent away but a conversation with him always brings out his delusions of suspicion against the Priest &c who, he says influence others against him.

23rd Oct. Unchanged. Eats & sleeps well and is quiet.

26th Nov. Unchanged. Bodily health improved, mentally unchanged.

1890. 3rd Decr. J.S.2.

28th May. Transferred to Ireland. — Relieved

John Blacks, 36

admitted 24th June 1859.

This is a private patient admitted to-day to the West House. He is said to have been insane for only a few days and this is his first attack. Cause is mental weakness. Not epileptic suicidal or dangerous to others. No known H. P.

Medical certificates bear that he believes himself to be enormously wealthy, that he talks incoherently and that his mind generally is weak.

On admission he is found to be a well built dark complexioned man of under the average size. He is very excited on admission talking a great deal of himself of his wealth and of his family & prospects.

25th June. Slept none last night being very restless and excited. Bowels freely opened this morning with black draught. Physical examination shows no lesion of thoracic or abdominal viscera. Tongue is very tremulous and pupils are widely dilated though equal. Gait is normal and all the tests of walking are fairly well performed. A short account may here be given of his family history which is certainly interesting & instructive in view of his present illness. His father died 21 years ago. He was a confirmed drunkard and had a business in Jamaica. While sailing home he had an attack of D.T. and died. There was a family of 4. one daughter & 3 sons. The daughter suffered from intense neuralgia and died from inhal^n of Chloroform taken by herself to relieve the pain. One of the sons is an accountant and is addicted to drink. another is steady and the 3rd is the subject of this report. Patients father and mother were cousins. His maternal grandfather was famous for the amount of liquor

415

James Adam. 40

Admitted 30th June 1889.

This patient is transferred to-day from Riccarton Asylum Paisley to Gartnavel. He has been in Riccarton for about 6 mos and is brought as a Private Patient here. He is a robust man above the average height and in good bodily condition. It is ascertained from his wife that for about 6 mos prior to being sent to the asylum he was ill refused to work and imagined that he was suffering from numerous complaints. He became somewhat violent in his conduct & threatened and so had to be put under control. No H.P.

1st July Slept well last night and a physical examination this forenoon detects no lesion of any organ. He is rather obese and soft.

30th July This is a very hypochondriacal patient. He is continually complaining & asking to be examined, which has been often done but always has a negative result. At one time his feet seemed a little swollen but there has never been any albumen in the urine. Eats very heartily and sleeps well. Sent out to work but this he does not care much for saying he is not able. Roused up frequently by physical means but lapses again into a dwelling condition. Has the back of his neck blistered without result.

3rd Oct. No change in this patients condition. If anything and if it were possible he is more hypochondriacal insisting that he is dangerously ill. Has sent out to work he refuses to do anything and if made to go out he lies down and has to be carried home. Has been giving some trouble on bathing days refusing to go into the bath. Has been putting on flesh and

439.

James Murray. 38

Admitted June 29th 1889.

Patient is admitted to-night at 11.30 pm. He is a pauper Chargeable to the City Parish. He has only been ill a few days and this is his first attack. Cause is intemperance. Suicidal and dangerous to others but not epileptic

A sister was in Stirling asylum some years ago. Medical certificates bear that he "hears voices" and sees men which do not exist. Some one is calling on him to steal 2 of his chessmen &c.

On admission he was talkative and when in the waiting Room manifested a strong desire to get at a man in the ceiling declaring that he would murder him &c.

He went quietly into the Infirmary ward, was bathed & put to bed.

June 30th. Did not sleep much last night. a Physical examination to-day shows his chest to be healthy. He complains of pain in the shoulder - Rheumatic - Tongue is coated & very tremulous. No mental affection to-day. Confesses that he was very foolish last night and acknowledges it was all due to Whisky - It shd be noted that he is a Cooper and employed in a Distillery - Bowels are freely opened & some anti-Rheumatic remedy given.

July 2nd. No one could now certify this man to be insane. He is practically well mentally and bodily. He is sent out to work and advised to occupy himself in out door garden work while here.

Dismissed 22nd July well

James Haesane Calder McLeod

Admitted 4th July 1889

Patient is to-day readmitted having been in the asylum for some mos and having been discharged in May 1888 (see p. 91 & 92)

Medical certificates bear that he is excitable & talkative, his pupils unduly dilated and his whole aspect and manner betoken excitement. He admits having had both suicidal and homicidal impulses and is certainly deficient in self control and dangerously excitable. He admits feelings of resentment against his brother. who says that for the last 6 mos he has been depressed (?) depressed and has rarely spoken. Rarely spoken His brother is afraid to remain longer in the house with him and the parents of the servant have removed her from the house as they feared violence from him.

For some months after he left the Asylum in May 1888 he continued well but towards the end of the year he became depressed, moody & irascible. and was subject to sudden and short lived explosions of nervous energy. Family affairs may have something to do with this. The household consists of two brothers. the father who is paralysed and a servant. James seems to have nursed his father and was found sitting by his side declining to leave him.

6th July. Since admission patient has been in a fair state of mental health. He is quiet but there is a "shifty" look in his eyes. He is pale and has lost flesh since he was last here. a careful examination of his chest gives negative results.

8th July. No change to note. He is not sleeping at all well but has had no draught. He is put to-day on Yellow Syrup.

10th July Sleeping no better and inclined to be restless.

James Ewart. about 45 yrs.

Voluntary

Became a voluntary patient to-day. He has been drinking heavily and has put himself under treatment. Is a strong wiry-built man rather past the prime of life. By occupation he is a glass and china packer and he is single. Up till comparatively recently he was sober. He got however a legacy left him and that led him to drink &c. His tongue is very tremulous and coated, pupils equal and mobile.

July. Has probably escaped very nearly having an attack of Delirium Tremens. Was very shaky for some days after admission his pulse and general condition being such that he had to get Stimulants. Is now much better and while he is not yet above suspicion there are no grounds for believing that his case is one of General Paralysis.

10th August. Is now pretty well and is allowed a great deal of freedom. There is something in his manner which is not reassuring. He has rather a light way of viewing his past conduct while promising better behaviour in the future. His speech however is quite good and his tongue is now steady & clean

30th August. Continues well. Sleeps and eats well and is in better condition every way. Is leaving soon.

5th Sept. Discharged

Recovered

Samuel Raleigh Judlay aet. 29.
Admitted 16th July 1889.

Patient is to day admitted to East House as a private patient –.

He is a bank-clerk and is said to have been ill for one month but it is only within the last few days that his symptoms have become acute.

He is not epileptic nor suicidal but may be dangerous to others. His brother was insane and in Gartnavel 5 years ago but is now quite well and in business in Paris.

Medical certificates bear that he is foolish in conduct, at times sitting with closed eyes and rocking himself about at others excited and talkative, he has delusions such as that a plot exists to kill him and he declares that an unmarried female was in the room to kill him.

His relations say that at times he is very excited shouting and removing his dress and that he is very resistive of control and that he has sudden impulses to do violence.

On admission he was sullen & quiet but with a furtive look on his face and inclined to resist the attendants. His bodily health is under the normal and he is rather anaemic. In bed at night he complained of his head saying that it was sore. These were the only words he spoke since admission.

17th July. Slept little or none last night but was quiet tho inclined to resist. No thoracic or abdominal lesion detected this morning in examining him. Would not put on his clothes himself but had to be dressed.

To 429.

20th July.

31st Aug.

6th Aug.

Peter Adair,

Admitted 28th July 1889.

This patient came in a cab to the asylum last night (Sunday aug. 28th) asking to be admitted as a voluntary patient. He was intoxicated. From his story it appears that, while a native of Scotland, he has only very recently returned from New Zealand where he has been for a number of years. Since coming to Scotland, some six mos ago, he has led a very dissipated life and fearing he was about to have an attack of Delirium Tremens he craved admission to the asylum. He is accordingly admitted as a Voluntary Patient.

30th July. Since admission he has been very nervous and shaky & has narrowly escaped having D.T. Under the influence of Paraldehyde he has been sleeping well. His pulse being very soft he has been getting small quantities of whisky and his bowels are being regulated.

3rd aug. Two soft sores have developed on his penis and are being treated. He has been living from his own confession a most dissolute life for some time. General health good and mental condition also good.

6th aug. Put on Parole and allowed as much freedom as possible. Sores slowly healing. No constitutional mischief. anxious to get away.

Dismissed

19th august

Well

421

William Tuits, aged 41
Admitted 29th July 1889.

Patient is a pauper chargeable to Crawford Parish. but is brought from H. M. Prison, Glasgow, where he has been confined for some time. He is married, a Protestant and a mason.

He has been insane for an indefinite period this being his first attack. Cause unknown. Not epileptic or suicidal but may be dangerous to others.

probably some years.

No P.M. stated but facts probably never investigated

Medical certificates bear that he states his whisky was drugged by some person who lives in his house in the guise of his wife or mother and that this stuff acts on his brain and makes him excited

He also states that several women live off him in the guise of his mother and that the minister and teacher winks at all this. Popery also has some connection he believes with the deceptions practised on him. He says that his wife and child are in the streets of Glasgow having been led away by some men who lodged in his house. – He has numerous other delusions –

Patient is a big strong man over 6 ft in height & very strong. He is not at all frank viewing all who come near him with suspicion

October 1889. Since admission he has been fairly quiet and is out working in the Grounds. He complains of some one being inside his chest & playing the devil with his heart and when his wife & children are mentioned he gets angry and distinctly dangerous using all sorts of bad language. There is no discoverable organic visceral disease & he has been sleeping & eating well.

Jos. 498.

Rev. ~~Hugh~~ William Martin Watt, 69.
Admitted 3rd August 1887.

Patient is to-night admitted to the West-House. He resides at Shotts and has been parish minister there for a number of years. This is his first attack, the duration being six mos. and the cause apparently the death of his wife some time ago. He is not epileptic or dangerous to others but is decidedly suicidal no A.P.

Medical certificates bear - "He says, he is doomed, that he is a fiend in human form, that he is tired of life and that his family are ruined through him" - His daughter states that he has been violent and threatened to commit suicide. One of the certificates bears that "he is distinctly suicidal and requires constant supervision"

4th August. Slept fairly well last night and took beef tea. In a very depressed state to-day, crying bitterly and saying he is unworthy to live that he has sinned in the most awful way and that he has ruined his family entirely. Physical examin: reveals no lesion and shows him to be(for his age) in good health. His arteries are somewhat atheromatous, and the first cardiac sound is weak. Stoops a little in his walk and his whole manner is that of an intensely depressed man. Tongue is foul and coated and the alimentary canal is out of order

30th Aug. Still very depressed and miserable saying the same things as above noted. Notwithstanding this it is possible to get a smile out of him and he has had a very fine nature being extremely likeable. Has been parish minister of Shotts for many years and is much esteemed in the district. Dr Gardner when up seeing Burns the other day saw him and thought he was rather better than when he saw him in consultation with Dr Yellowlees sometime ago. Jop. 468

423

James Blackwood Gemmell. 40

Admitted 8th August 1889.

Patient is to-day brought from Plantation Police Office. He is a private patient, the security being his brother, a house Factor in Bath St.

He is single, a tea-agent and previously resided at 168 Eglinton St.

He has been insane, off and on, for 14 years and the cause maybe the death of his mother which occurred about that time.

He is neither epileptic, suicidal nor dangerous to others.

No known H. P.

Medical Certificate bear that he is very incoherent and rambles in his conversation. He is very confused. Has no idea of how he came to the Police Office. The police state that he was apprehended for a breach of the peace and for conducting himself in a strange manner. He is stated to have thrown most of his clothes into the Queen's Dock as they were not good enough for him.

On admission it is at once seen that he is weak-minded. He cannot carry on any connected reasoning any brain-exertion and is incoherent sometimes in his conversation. Of good bodily physique.

Oct. 1889. Just the same. Works regularly in the grounds & often writes to his brothers or sister asking them to come to see him. Sketches a little but for continuous mental exertion he is not able.

May 1890. Just the same. Silly but quiet, little trouble and works regularly. Always asking the writer to give him an hour in which to hear his case but he never gets further than the beginning when he wanders to other matters.

To Vol IV p. 135.

William Alexander McCracken. 34.

Admitted 17th August 1889.

This is a private patient admitted to-day to the E. House. He is single, a shipping agent and a Protestant. He is stated to have been insane for only a few days and this is his first attack. Cause is intemperance. Not epileptic suicidal or dangerous to others. No known H.P.

Medical Certificates bear that he is incoherent in his talk and delusive in his ideas. He has no idea where he is and is quite unable to take care of himself. The Lieutenant of Police states he was found in the street conducting himself in an insane manner, and was taken to the Police Office being brought from thence to the Asylum. On admission he is extremely incoherent and quite full of delusions of all sorts and so numerous as to baffle description. Says he is in Barracks. that he is a Colonel that he has Champagne to dinner, that he came from London &c.

18th August. Slept pretty well and is quiet this morning. but is very full of delusions of all sorts. Says he has travelled much and mixed with Royalty in Society. There is noticed a distinct external strabismus, Pupils are equal. He is unable to walk across the floor his legs failing him. Cannot stand upright with his feet close together, even with open eyes and falls at once if his eyes are shut. Reflexes three gone. No clonus. Sensibility in lower limbs normal.

21st August. Eating and sleeping well. Still very full of delusions & with a very well marked feeling of bien etre. Locomotion much as before. if anything slightly better. Otherwise no change.

26th Aug. Squint before noted is now gone. Walking rather better but Romberg test very imperfect, great difficulty in turning especially if done suddenly. Physical health improved.

3rd Sept. Still having very marked grand ideas and with a very apparent satisfaction regarding himself.

To p. 488.

John young Moyes,
Admitted 20th August 1859.

Last admission 30th March 1858.

Patient is a day admitted to the West House. He is a widower residing at 14 Nelson St Hillhead. He has been insane about 3 mos and this is his second attack. His first attack was 30 years ago and he was then in this asylum for being discharged in (See Case Book.) The cause of the present attack is put down as Business worries. No H.P.

Medical certificates bear that he is incoherent, that his physiognomy indicates unsound mind and that he imagines the different portions of his body are the seat of disease. He has threatened to injure those in attendance on him and was shouting during the night in a way to alarm all those present. His housekeeper states that he is quite a changed man. That he is continually moving about the house without any regard for his appearance that he says he has been cheated of money and that his watch has been stolen all which is contrary to fact.

21st august. The night report bear that Mr Moyes slept little but was quiet and rested. To-day he is quiet & talks in a rather incoherent way. Knew Mr Angus & remembers of being here before. Fingers his necktie in an aimless way saying he is choking. Difficult to get his delusions out of him, he is so incoherent and talks in so low a voice that he cant be heard. Urine normal. Bowels and bodily health fairly good.

10th Sept. Considerably improved. Talks sensibly and seems on the way to recovery. Sleeping well at night and gaining in weight.

18th Sept. Relapsed in an unaccountable manner and without obvious cause. Has become quite incoherent again, rambling in his talk, careless about his appearance

H69

Medical cert

22nd August.

4th August.

Henry Cormack, 45.
Admitted 21st August 1889.

Private patient, admitted to-day to the East House. He is 45 yrs. of age, married, a joiner by occupat". and a Protestant by Relig". Persuas". He resides at 20 Westbury St, Glasgow but is a native of Wick. He has been ill 3 mos. this being his first attack. Neither suicidal, epileptic or dangerous to others. No N. P.

Medical certificate bear that he talks in a rambling foolish manner He has delusions such as that he has been robbed by his friends and that they have caused the Devil to injure his health He says that his wife is a prostitute. He has been spending money recklessly and talks in a boastful manner saying that he is the best workman in Glasgow &c.

On admission he is seen to be an anaemic, badly nourished man of average height. Chest & physical examination sound Urine non-albuminous. He is very talkative and excited tho' also subject to fits of depression. Pupils equal and mobile Tongue coated & tremulous and speech faulty. Exaggerated ideas of his own skill as a workman - joiner - not substantiated by the statements of others. Has other delusions such as that his brother in law is robbing him &c. Will talk right on for hours about himself and the way he has been treated by his wife & her friends. Gait seems all right. Reflexes normal. Suffers from G. P.

22nd August. Slept pretty well. and is taking his food. Put on some better tonic and a bottle of porter daily. Was found weeping bitterly this morning for "the sins of the World". Has been reading the Bible and believes he was to be made a 'Scapegoat.' Remained rather depressed all day.

30th August. In much the same condition. Impulsive and 'Large-ideas'. Believes in his own self importance and greatness. Is gaining in weight and his bodily health is improving

436.

James Anderson Leitch, 41
Admitted 26th August 1869.

Private patient. West. House. Married. Resides at 17 Fitzroy Place, Sauchiehall St. Merchant by occupation
Has been insane a few days this being his first attack
It is said that 10 mos ago and again 13 days ago he had what appear to have been epileptic seizures. He may be suicidal or dangerous to others. His mother was in this asylum for 15 yrs. (See)

Medical Certificates bear that he has during the last few days given way to unreasonable & ungovernable fits of rage making it unsafe for his wife and servant to be in the house with him. On one occasion when seen by Dr. Yellowlees he was found naked in bed and after some talk he made a violent attack on Dr. Y.
He has been very extravagant in his ideas for some weeks.

Physical Examination shows him to be a well. built under sized man.
Thoracic organs healthy. Urine contains pus and blood & under the microscope, tube casts, blood corpuscles & pus cells are seen. Palpation and percussion of renal regions yields no information
On admission he was very excited and refused to go to bed but in a few hours he became calmer tho still very excited in his conversation. Tongue tremulous and coated. Speech decidedly imperfect. Declares that he has bought the asylum &c & appointed the head attendant as his Superintendent with £10000 a year. offered the writer one thousand tons pig iron &c &c

27th Aug. Did not sleep much. Very excited and talkative in the grandiose style. Delusions very marked & manifest.
Urine as before only the amount of blood not quite so great as on admission.

30th August. Sleeping and eating well. Delusions as before. Writes a great many letters, some to his wife, others to his sister

430.

Andrew Walker, 26,

Admitted 29th. August 1859.

Private patient admitted to day to the East House. He is single & a miner, residing at Blackwood, Lesmahagow.

He is said to have been insane for 5 mos. this being his first attack. He is not epileptic suicidal or dangerous to others. A.P. His mother was in an asylum for 9 mos. after her confinement.

Medical Certificates bear that his habits are quite changed. that he wont come out of bed & that there is something terrible coming over him. His friends state that he has conceived a hatred of them and that he is constantly apprehensive of starvation &c

On admission he is seen to be a stout. young fellow of much the average height with a heavy sluggish face. Bodily & physical health good. No albumen in his urine. He is very quiet and does not enter readily into conversation whether from, reticence, from lack of ideas or from inability to express them.

3rd. September. In much the same condition since admission. Eats and sleeps well and makes no complaint. Has not been detected masturbating. The his physiognomy and unwillingness to look one straight in the face we lean to that impression

23rd. October. Improving decidedly. Working regularly in the grounds. much more cheerful in his manner. answers questions readily.

Nov. 14 Discharged

Recovered

Samuel Raleigh Fridley

cont^d from p. 419

1889.

1st August	Emerging by degrees from the repellant condition he was in. Not inclined to speak much and not sleeping well at night yet. Taking his food well. Moves about the gallery in a mechanical way and is not taking an interest in anything. Frequently asks why he is here & does not seem to realize his position
10th Sept.	Improving. Working regularly in the grounds & taking on flesh. Much more intelligent and taking an interest in music of which he is very fond. Lost a good deal of the dazed condition and appearance. Has been sleeping well since he began out door work
3rd Oct.	Improvement continues and he is now in a fairly convalescent state
16th Oct.	Discharged Recovered

Readmitted see vol IV p. 137.

James anderson Leitch

and others & stockbrokers authorizing the purchase of large quantities of pig-iron, copper, tin &c. buying for ance. He asked a great many people to dinner including Prof Gairdner. Dr Burlayson, Sir Jas. Kirg &c &c. Tongue slide tremulous, speech faulty. Pupils equal, dilated somewhat but mobile. Gait normal.

?? 3rd Sept. as before notes the delusions continue and there is no change in physical or mental condition

20th Sept. of the mental symptoms ...ifest physical symptoms ...e. his tongue is steady & ... defect in articulation ...ture than indecision in ... same time the mental ... towards ego. He has the feeling ...ous & see excessively distinct ... considerably of late. The ... there is less pus under the ... rather quieter of late and has ... his food well.

23rd ... has continued in the same ... would be impossible to give an ... short ... his delusions of the amount of iron he has bought, of the letters he has written, of the novels he has written and of the amount of money he has given in charity. The haematuria is now quite gone and he is in good bodily health tho rather soft & flabby.

22nd Nov. Last night pat. passed a good quantity of blood per rectum this being accompanied by a good deal of tenesmus. Urine today contained no blood. General health as at last note as also mental state.

To p. 493.

Samuel Raleigh Friday

cont^d from p. 419

1889.

1st August	Emerging by degrees from the repellant condition he was in Not inclined to speak much and not sleeping well at night yet. Taking his food well. Moves about the gallery in a mechanical way and is not taking an interest in anything. Frequently asks why he is here & does not seem to realize his position
10th Sept.	Improving. Working regularly on flesh. Much more inclined to music of which he is fond. Dazed condition and appearing well since he began
3rd Oct.	Improvement continues convalescent state
16th Oct.	Discharged Recovered

Readmitted see vol 7

Smith's letters.
1. Nov. 29th 1869.
2. June 5th 1890.
3. July 19th 1890.

James Anderson Leitch

and others stock brokers authorizing the purchase of large quantities of pig.-iron, copper, tin &c. buying for arise. etc
askes a great many people to dinner including Prof Saunders.
Dr Burlayson, Sir Jas. King &c &c. Tongue slide tremulous, & speech
?? faulty. Pupils equal, dilated somewhat but mobile. Gait normal.
3rd Sept. as before notes the delusions continue and there is no change
to report either in his physical or mental condition
4th Sept. This patient has many of the mental symptoms
of G.P. without any very manifest physical symptoms
His pupils are equal and mobile, his tongue is steady &
clean and while there is some defect in articulation
it is more of the nature of a burr than indecision in
utterance as in G.P. At the same time the mental
condition points very strongly towards G.P. He has the feeling
of well being, the grand delusions &c are exceedingly detailed
His kidneys have improved considerably of late. The
haematuria is lessened and there is less pus under the
microscope. He has been rather quieter of late and has
been sleeping better. Takes his food well
9th. During the past month patient has continued in the same
state regarding delusions. It would be impossible to give in a
short note an account of his delusions of the amount of
iron he has bought, of the letters he has written, of the
novels he has written and of the amount of money he
has given in charity. The haematuria is now quite gone
and he is in good bodily health tho rather soft & flabby.
2nd Nov. Last night pat. passed a good quantity of blood
per rectum this being accompanied by a good
deal of tenesmus. Urine today contained no
blood. General health as at last note as also mental state.

To p. 493.

Leitch's Letters.
1. Nov. 2nd 1869.
2. June 5th 1890

George John Richmond. 32
Admitted 2nd Sept. 1889.

Private patient admitted to-day to West House. Single, by profession a Commission Agent. Resides at Mayfield Villa Springburn. Has been insane for 7 weeks but has been ill for a year. First attack. Cause uncertain. Not epileptic but decidedly suicidal. No states H.P.

Medical Certificates state that he persistently stays in his bedroom lying most of the time in bed stating that the Freemasons are putting poison in his food. On 2 occasions he has attempted suicide. He is very despondent and wishes his life was ended. He states that he got a divine order to emasculate himself. He is dangerous to himself and to others.

On admission he is seen to be a tall thin man of fair complexion and with an exhausted appearance. No lesion of internal organs to be discovered. Pallid & bloodless. On the left side and the scrotum and running downwards & backwards is an incised or scalding wound about 1½" in length having the edges brought into apposition with 3 silk sutures. There is some orchitis and the scrotal tissues are inflamed and reddened. The wound was inflicted by himself with a pair of scissors. On the right wrist is a transverse scar the result of an attempt to sever the radial artery. On admission the parts around the scrotal wound were washed with Carbolic Solution and a simple dressing applied the scrotum being supported by a triangular bandage. a Saline purge was given.

3rd Sept. Slept none last night but was quiet. Condition unchanged this morning. Pulse 70 fairly good and temperature normal. Is not disposed to talk much. Saline acted well.

5th Sept. Wound is now beginning to unite by granulation. It is found to be difficult to keep the dressing on. Has a draught last night as he was not sleeping well.

George John Richmond.

cont.

10th Sept. Two sick sutures were put in to-day the edges of the wound not being in good apposition. General health improved. Mental condition I.S.2. In great fear of some punishment.

20th Sept. Wounds in the scrotum now almost whole, and an improvement in his mental condition. Less despondent and brooding and disposed to look with a less jaundiced eye at things. He sleeps however sleeping very badly but rests well. Has passed thro a paroxysm of asthma from which he has suffered since he was 10 years of age. Put on Fellowes Syrup and is taking his food better. Is sent out of doors as much as possible and encouraged to take an interest in games.

6th Oct. Continued to improve up till Saturday i.e. yesterday. He was then allowed to see his father and this seems to have disturbed him somewhat as to-day he has taken no food & has to be very carefully watched. Says he is eternally damned and that he has ruined his family &c.

8th Oct. Has got over the "check" caused by his father's visit. Is rather brighter and is taking his food. Is still sleeping very badly tho not restless. Is having a ~~xxx~~ mixture of Chloral & Bromide at night.

15th Nov. Pat. has just recovered from an attack of Asthma which has troubled him for the last 48 or 50 days & with which he has been confined to bed. He is now out of bed. His mental condition has been better during this attack. He is still very thin & worn looking.

Dec. 10th Since last note pat. has had some touches of asthma. Has also been feeding badly & has to be threatened with the tube. He is very thin &

John Francis Wood. 70.

Admitted 4th September 1889.

Private patient admitted to-night to the E. H. Married & a portioner. Resides at Sylvan Villa Langside
Is stated to have been insane 1½ yrs. This being his first attack. Supposed cause is Domestic anxiety. Not epileptic or suicidal but may be dangerous to others (?)
No known H. P.

Medical certificates bear that he is very variable in his moods, sometimes excited and unmanageable. Has hallucinations & imagines that he is dying, that he is being starved &c. His wife states that he has been very restless and sleepless, daily in his habits & person.

24th Nov.

On admission he is found to be an old man with all the evidences of senility, deafness, senile senile, atheromatous arteries &c In a highly emotional condition, and with no control over his rectum and bladder. Apart from that he is in indifferent bodily health but his life has been a healthy one and he has had few illnesses. He is married and has a family, in good health and doing well.

3rd Dec.

1890

5th Septr. Slept fairly well last night and has taken a good breakfast daily and wet. In a highly emotional state with little control. Burst into tears when visited and wanted his wife. Enquires if he was "J. F. Wood. Sylvan Villa" On being assured that he was became quieter. Kept in bed for the present.

Feby 10th

16th April

16th. Septr. Not much improvement either mentally or physically. Wet & daily still tho perhaps a little more control over the rectum. His invariable question in the morning is "How are all the family". A satisfactory answer quietens him but not before he has had a burst of crying. Is sleeping fairly well and is eating well.

25th June

4th October. Practically unchanged. He has been allowed to see his

John Francis Wood

Contd

friends as he is so constantly enquiring about them but as it seems to be doing him harm making him very excited it is decided that he shall not see them for some time. Stim duly and wet and with the same question on his lips in the morning. Pulse 74 fairly full and regular. Urine normal. Is getting up now and seems to be pretty steady on his feet with no ataxic symptoms. apart from a degree of Paralysis agitans especially present in his upper extremities

21st Nov. This patient is far advanced in Senile dementia. During the last six weeks he has not improved any nor can any improvement be looked for. He is being nursed that is all. Stim duly and wet and with the usual morning salutation.

3rd Decr. Has been quieter of late not crying out so much and giving less trouble apart from this there is no change. - His friends contemplate removing him soon.

1890

Feby 10th His friends took him home recently on trial but had to bring him back in a few days as he became quite uncontrollable. He is now almost bedridden but is very irritable and demands a great deal of attention.

16th April Quite bedridden now and with incontinence of urine & faeces. In fairly good bodily health considering his condn. Sees his friends occasionally but never asks to get home now

20th June Died this morning after being worse than usual for 3 days. He has been very visibly failing of late and has been taking little food. Little could be done for him beyond stimulus & this day he died.

Pulmonary Congestion & Cerebral Softening

No P.M.

William Campbell

From 402.

20th Sept.	Got a black eye recently from another patient in the airing court. No change. Eats & sleeps well.
10th October.	Works regularly in the grounds. Rather demented but with few delusions & which he gives expression —. B.H.T.C. are good.
21st Nov.	Unchanged. Becoming demented and likely to lapse into a chronic condition without much hope of improvement. Bodily health & condition are fairly good
31st Dec.	Unchanged
1890	
March.	For some weeks past this mans walk has been noted to be peculiar and there has been some change in his speech which has become thicker & slurring. These have become worse and both resemble very closely the symptoms of G.P. He is extremely stupid requiring much care and attention and there is a good deal of difficulty in getting him to answer questions
July 7th	No doubt now that this is a case of G.P. be-coming with weak. mindedness. His speech & walk are characteristic and he has a feeling of utter satisfaction tho he does not give much ex-pression to it.
16th Sept.	Disease is pretty rapid and he is now in bed, requires to be fed and is helpless.
27th Oct.	Sinking but not rapidly. Speech extremely slow & he is getting thin though bedsores have as yet been prevented.

Jos. 528

Henry Cormack contd.

Some of Cormacks Letters

Oct. 89

Sept 13th Unchanged. Evidences of G.P. very marked but no actual and unmistakeable congestive attack since admission. Has not been sleeping well for some nights Disordered alimentary canal probably the cause. Still with the grand delusions &c.

Oct. 11th. Working in the wards and has had fewer despondt attacks of late. More uniform in his mental state. Sleeps better and is loud in his praises regarding the way he is treated. —.

21st. Nov. Still very full of delusions. an unmistakeable G.P. Tells the units to-day that Jesus had ordered him to stay here for 6 mos and that he was to take the units into the ark built in preparation for a deluge to overtake the World soon. He was also ordered by God to go about & scuttle all other arks which might be built. His tongue & labial muscles are very tremulous. Writing better a great deal. Pupils unequal & dilated. Has not been untidy himself and is as yet careful and tidy in dress.

30th Decr. The same extravagant deluscioned man with many typical symptoms of G.P. Writing is now becoming very faulty and his speech is becoming thicker

Top. 550

James Watson. 59.

Admitted 3rd Oct. 1889.

Readmitted to W. H. to day. For previous admissions see Journals

He was last discharged recovered on May 18th 1886 vol. II 44

He is now said to have been ill one month and was found and examined at the Albany Hotel Sanchrehall St. Medical certificates bear that he believes his wife is against him & that his brother is insane. His wife states that he has been rushing about the country making disturbances at the hotels where he has been staying. That he has been buying horses he has no use for and making large purchases of hay and otherwise conducting himself in a very foolish manner.

On admission he was fairly quiet but seemed to talk much when the least opening was given. Said it was his brother who should be in the asylum and that his wife was conspiring against him. Boastful in manner and much addicted to letter writing. Sample appended. Physical examination shows no lesion. Urine non albuminous. 1890. Discharged

4th October. Slept badly and more excited this morning. Took nourishment this the night & a good breakfast. Knows where he is and remembers of having been here before. Says doctors are humbugs & dont know anything about Insanity. Just a suspicion of tremor in his tongue & his voice thick. Has the "well-being feeling" — Applied

11th Oct. No change to report. Repeating poetry of his own composing this morning. Writing letters continually. Is sleeping better and takes his food well. No complaints of not being well used.

James Watson

cont'd.

writes a great many letters and is
the questions of the day. Beyond being
talk it is difficult to see where his
le in the asylum.
duty pat. has been
conversation & rational
tably interested himself
his talents. He still is

Known pat. during his
, saw him a few days
ck struck with the change
Condition & colour.
ame was been twice examined lately but
beyond being of low Sp. gr. showed nothing
1890. abnormal.
March 10th Mentally patient is just the same. Ever
ready for a "row by-and" or a political
discussion. At times he gets very abusive
in his language & invective against those
who detain him here to the detriment
of his business.
April 1st Discharged today "Relieved." & gone home.

Re-admitted

see Vol V p. 92.

James Watson. 59.

Admitted 2nd Oct. 1889.

Readmitted to W. H. to do
see Journals
He was last dismiss
He is now said to h
found and exam
Medical certificates bear that
that his brother is u
rushing about the coun
where he has been staying
no use for and making
wise conducting himself u

One of Watsons letters
Sworn by Watson.
Oct 89

On admission he was fair
talk much when he le
Said it was his brother who stoned him in the
asylum and that his wife was conspiring
against him. Boastful in manner and much
addicted to letter writing. Samples appended.
Physical examination shows no lesion. Urine
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Just a suspicion of tremor in his tongue & his voice
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11th Oct. No change to report. Repeating poetry of his own
composing this morning. Writing letters continually
Is sleeping better and takes his food well. No
complaints of not being well used.

James Watson
cont'd.

23rd Oct. No change to note. Writes a great many letters and is much interested in all the questions of the day. Beyond being excited and irrelevant in his talk it is difficult to see where his insanity manifests itself while in the asylum.

22nd Nov. Since writer came on duty pat. has been quite coherent in his conversation & rational in his conduct. He has lately interested himself in developing his artistic talents. He still is very pale.

Dr. Love who had known pat. during his previous stay here, saw him a few days ago & was much struck with the change in pats. bodily condition & colour.

Urine has been twice examined lately but beyond being of low Sp. gr. showed nothing

1890. abnormal.

March 10th Mentally patient pursues the same. Ever ready for a "wordy war" or a political discussion. At times he gets very abusive in his language & inveighs against those who detain him here to the detriment of his business.

April 1st Discharged today "Relieved" & gone home.

Re-admitted

see Vol V p. 92.

James Adam

Fromp. 415

3rd Oct. (contd.)	now very fat. Becoming careless of his dress & slovenly in his habits.
Nov. 16th	Up tree yesterday patient remained in the same condition. Yesterday however he got a slight bruise on the elbow and to night the whole left arm is in a acutely erysipelatous condition. There is as yet no indication of pus forming. Orders opening medicine & fomentations.
Nov. 18th	The arm was freely opened yesterday at the elbow & drained. Temperatures very high (q.v.). He is extremely restless, refuses medicine, has has to have beef draught by the tube and wont keep his arm steady. In these circumstances and considering the soft and feebly state of his body the prognosis is not very good.
Nov. 20th	arm still very acutely erysipelatous but no indication for further incisions. Lead & opium lotions & fomentation being still continued. Extremely restless, dressing his arm requiring the assistance of 4 attendants. Tears off the splint & dressings so that a Cooches glove has had to be put on his left hand. Is taking no nourishment & rejects what is given by tube.
Nov. 22nd	a pretty profuse discharge of pus from the arm the drainage of which is quite free. Some indicn of the face being attacked the cheeks & nose being red. Otherwise weaker. Whisky ordered & nourishment.
Nov. 24th	Sank & died this morning at 8.40 a.m.

Post mortem.

"Septicaemia following Erysipelas"

see Path. Reports. Vol I p. 5.

Forms p. 102.

William Easton Young.

contd from p. 102.

4th Oct. In much the same condition. Has phimosis. Occasional outbursts of irritability relieved often by some sharp purge. B.M.T.C. are good

Dec. 6th Mental & Bodily just as at last note.

May 5th 1890. No change to note. Spends his day trotting up & down the gallery chattering in an excitement fashion. Bodily health good.

July 22nd This patient - a congenital case with highly arched palate - shows little change. Occasionally noisy & irritable but this is only a temporary condition. His general condition is that of a child armed with trifles & at times boastful. Bodily health & condition good.

Oct. 30th No change in mental condition. Bodily health is good.

Contin. Vol. IV., p. 304

Andrew Paterson.

Cont'd. From p. 120

1889.

good condition. He is more inclined to enter into conversation and takes more interest in what is going on in the Gallery. June 13.

August 28. Practically unchanged. July 15.

October 4 Rather improved. Speaks readily to the visitors and says he has been very foolish in the past. Eats & sleeps well. Takes the head of the table, and interests himself a little in things. — . October 4.

Nov. 23rd Since visitor came on last visit. Her mother spoke of noticing in manner. Enters into Conversation if spoken to but never opens Conversation himself.

1890.

March. 10 Still very depressed remarks to get away home. Bodily health very fair. 22nd Nov.

May. 16th Patient is still very depressed & labouring under the delusion that he is detained here by Government on a charge of treason. His facial expression is melancholic & he every few days picks at his head till it bleeds: similarly with his nails & fingers. His hands as a rule are cold & blue looking. He sleeps quietly & enjoys a fair appetite. 1890. April 28

July 22nd No change. General health & condition fairly good.

Oct. 30th Bodily health good for his years. He is troubled occasionally with chilblains. Mental condition shows no change.

Contin. Vol. IV. p. 303

David Robertson.

Cont^d from p. 158.

1889.

June 13. a masturbator not improving any and doing no work. Restless at night and having the dull earthy complexion of one who practises self abuse.

July 18. Unchanged. Does a little work in the Gallery. Sleeps in a bed placed in the gallery so that he may be kept under observation but it is doubtful if this prevents him abusing himself.

October 4. an unsatisfactory case. Does not give expression to any delusions but is very despondent & does not readily enter into conversation. Untidy in his habits and slovenly in dress his actions. Sleeps only fairly at night. Sometimes he is excited & restless but usually he is quiet.

22nd Nov. Unchanged. Still sleeps in gallery. Is restless occasionally at nights. B.H. & C. only fair

1890. There is little or no change in facts.

April 2nd. condition. As a rule he is very repellent in manner & sometimes refuses to answer questions at all. Occasionally he can be got to speak coherently & for a considerable time. He does a good deal of work about the gallery & for a time was working fairly well out in the garden. This garden work has had to be stopped for a time but will shortly be resumed. When not working in the gallery he marches up & down in a very energetic manner. He never reads & rarely joins in games with the other patients. He has a good appetite & is generally sleeping well though occasionally restless & talkative at nights.

to p. 589.

James Cooper Rowe aet. 33.
Re. Admitted 28th Oct. 1889.

Previous admissions see Vol II p. 463 and Vol III. N.S. p. 197.

Medical certificates bear that he is weak-minded & silly, rambling & childish in conversation and his memory is defective. Says he broke an eight day clock last night without reason. Says God requires him to do certain things at stated periods.

Physical examination shows him to be an unexercised man not exactly of the highest type of development body. No lesion discovered and in fairly good condition as regards flesh.

29th Oct. Night attendants report bears that he slept about 2 hours and was quiet. To day he is quiet and talks readily enough. Says that in place of destroying the clock he repaired it and that his father should be in an asylum and not him. Listless and without energy. Takes his food well.

Nov 5th Since admission he has been much the same. Gives no trouble but moons about the wards and airing court and will do nothing. avoids anyone who endeavours to rouse him and in doing so shows more energy than at any other time. Has not been sleeping well. Inclined to be talkative. His head shows a great lack of development laterally above the eyes hard portion being very narrow.

Nov 17th Unchanged. Has sleeping better and quiet ab night.

Dec 3d The same listless, indifferent being interested in nothing & nobody not even himself. Wont work & wont play. merely drifts along. Bodily health fairly good.

To p. 449

James McArthur. aet 53.
admitted 31st Oct. 1889.

Patient is an unmarried man & was brought to Glasgow from Manchester where his address was 20 Grafton St.. Pat. has been insane for several months & is now admitted at the instance of his Cousin Wm Robb. This is pats. first attack & no definite cause is known unless intemperance. There is no history of H. P..

The medical certificates bear that pat. has been incoherent in his talk & has exaggerated ideas about commercial matters. He states that "he has only made £40,000 & expects to make as many millions." He talks also of going to see his mother who is dead.

On admission pat. was not excited but talked in a comparatively collected manner & without any marked incoherence. His face is very pale & his hair is prematurely white. There was distinct variation in the size of his pupils. He is well nourished as regards his body & his general health is good.

Nov. 1st Pat. did not sleep very well & this morning his bed was wet. He is quite calm in manner but talks with a peculiar incoherence & air of "nonchalance". He conversed quite freely & coherently about the life he used to lead in South America (River Plate.) He exhibits no hesitation in speech or unsteadiness in gait even when his eyes are closed. He talks in an exaggerated manner of taking a trip out to the Plate

James Dr Arthur (cont.)

country as though it were quite a small undertaking.

Nov. 2nd — This afternoon pat. had a "fit" which was epileptiform in character being accompanied by convulsive movements which however seem to have been unilateral. He frothed considerably at the mouth & bit his tongue.

Nov. 3rd — Pat. had similar attack to that on Wed'day.

Nov. 15th — Pat's. mental condition continues S. S. A. He is now sleeping better than he did on admission but during the past few mornings his bed has been wet regularly.

Dec. 10th — No marked mental change but bodily pat. seems to be ageing. Always quite happy. & feels in good health. Had to get a ring cut off his finger a few days ago owing to the pressure & swelling it was causing.

March. 10th — There is very little change in patient since last note. There is still marked irregularity of the pupils but no disturbance of motion or speech. He seems to notice to have aged considerably since he was admitted.

Mentally he is as a rule in good spirits but has not the typical grandiose delusions of G. P.. He is very facile however & is quite happy in his surroundings. When asked when he is going abroad again he says he is waiting

to p. 541.

John Brown. 49

Admitted 2nd Nov 1889.

Patient is a married man from Biggar but was examined in Glasgow where he had been confined for an assault committed some weeks ago. He is a horse dealer by trade & has been insane for about a fortnight. This is his 2d attack he having been examined in Edinr in Sept 1888 and sent to Bothwell (Rosewell?) Asylum where he remained a fortnight. Cause is intemperance. Not suicidal but may be & has been dangerous to others. District H.P. a sister having been insane for many years. His nearest relative is Jane Brunton or Brown, Wallacefield, Biggar.

Medical certificates bear that he has many delusions such as that he is a lineal descendant of Sir Wm Wallace. that he is an author of considerable repute &c &c. In the ordinary course of events he would be a pauper chargeable to the Parish of Biggar but there being no accomodation for him here in that class and the District Asylum being free he is received as a Private patient his board (£40 p.a.) being charged to Biggar. He himself has squandered a considerable sum of money and has friends who are very well off have now stopped supporting him.

Physical Examination shows him to be a powerfully built man of over the average height and in good health.

4th Nov. Has been troubled very much with diarrhoea since admission. He regrets he says of the bad food he had while in Jail. He has not been sleeping very well but has been quiet though he talks very freely of himself and how he got into his present scrape through throwing a jug at a man in an Inn. He states that he is at present bringing out a book on the origin and development of Clydesdale Horses &c &c. His idea is that the first man

John Brown
cont.

	to improve the breed was Sir William Wallace and on this subject he hosts a great many peculiar notions
Nov. 14.	This seems to be a drink case. He has now settled down and is quiet working all day in the grounds and expresses regret at his conduct which brought him here.
Nov. 21.	Remains quiet. Sleeps and eats well and works steadily outside.
Dec 3rd	Works in the grounds and is quiet and behaves well.
	Bodily & mentally he is well, so far as one can judge by his actions & by conversing with him
Dec 14	Dismissed Recovered

Oct. 27.

1891
12 Month.

John Phelps

Contd. From p. 216.

1890.

Oct. 27. The writer confesses that this case has not been reported as it ought to have been and what is said now refers to his present condition

Mentally he has been getting weaker and this is quite distinct. He is silly, laughs in a facile way and yet is irritable & inclines to annoy other patients. His right leg is paralysed but the right hand is subject to twitchings over which Chloral and Bromide have a strong controlling influence. His speech is also distinctly affected being slurred but not at all like the speech of S. P. There is no movement of the left side of the body.

1891 Little change to note. Twitchings still
12 March. controlled by Bromide & Chloral. General health fair. At present suffering from Eczema Pdangrici of upper lip.

To Voe IV / p. 496.

James Cooper Rowe.

From p. 443

1890

22nd July.	Just the same, seldom speaks to the nurses and refuses to work or make himself useful. When stirred up is apt to get nasty. B.M.T.C. are fairly good
9th April	His Father to-day takes him away in the hope that a change of air may benefit him

Discharged Relieved

21st April	Readmitted to-day his father stating that his conduct was such that he cd not be relieved with
24th Sept.	Removed to-day by his father.

Relieved.

During his stay in the House there was nothing calling for especial notice

Readmitted see vol IV p. 25

Robert Hay.

Cont^d from 274

1889.

5th June	Sleeps in a very depressed state. Sits alone and talks little to any one though he answers when spoken to. Bodily health is in a rather indifferent condition but he is taking his food fairly well and sleeps well.
30th Aug.	Practically unchanged. He is in danger of falling into a dementes state unless he can be roused soon. Bodily condition is rather better of late
21st Nov.	Unchanged.
3rd Decr.	Rather cheerier the last week or so. answers question more cordially and at times is even disposed to talk. His circulation is very languid, his hands & face blue and his general bodily health is under par.
11th Octr.	The same miserable melancholic always sitting at the fireside and working none nor taking interest in anything.
27th Octr.	No abatement of his mans depression which is as great as ever in his own opinion but which does not really weigh so much on him as one might imagine. He has extra diet and his general health is fair tho his stubbornness & refusal to take exercise is against him. He is also getting frailer.
1891	
7 March.	No improvement to note. Still very depressed but still seeming to exercise on his own misery. His bodily condition is fair but he frequently picks his clothes unduly. He is becoming more feeble.

Cp. Vol IV. page 427.

James Phillips

Cont^d From p. 248

1889

31st May — Mental condition remains as notes on p. 248. Speaks rarely and then makes his answers as short as possible

16th July. — Has been transferred to Private Rooms. Unchanged. Said more recently in 10 mins when heartily cursing the attendants than he has been heard to say for 2 mos previously. When remonstrated with he said that James Phillips was in Heaven and that he cares swear if he pleased. B. H. T. C. remain good. Walks out regularly

10th Sept. — Unchanged.

28th Oct. — Unchanged mentally. B. H. T. C. are good.

22nd Nov. — Unchanged. Takes no notice of any attempts at conversation save to move slightly in his chair & sigh in a listless fashion which might be interpreted as "the same".

March. 10th — Still as he tersely says "the same". He insists that he is not James Phillips & that Jno. Phillips died some years ago. Bodily health is very good at present though he is very liable to catch cold.

May 16th — Patient still is orderly & answers nearly every question by "I don't know". Three mornings ago he had a motion in his bedroom & he immediately thereafter placed it on the top of his wardrobe. He is greatly troubled with constipation & is to have a course of mineral water. He is in fairly good bodily health.

July 22nd — No change in patient's condition. General health is good.

to vol. IV p. 88.

John Hall

Cont'd. From p. 250

1889 Ætat

Decr. Occasionally expression now & any delusions & works about in a very mechanical sort of way. He is in good bodily health is getting fatter and with this & the absence of a corresponding mental improvement one is not inclined to take a very hopeful view of his case.

Oct. 1890. Just the same. No improvement to note & with a weakened mental condition

1891

7 March. Still occasionally troubled by the people up there talking about him. He is in good bodily health & condition.

Aug. 31. Unchanged. B. & T.C. good.

Dec 23rd Rather noisy of late & excited - & if spoken to begins a long tirade, directed however to the ceiling & he is really scolding at the people whom he believes live up there & put poison in his food & Attempts among him.

April 8 " 1892 — Delusions & hallucinations persist unaltered. Does not favour advances towards friendly Conversation.

Aug. 15th Full of delusions as before - declaims bitterly against the man up in the "poisoning room" & utters terrible threats against him. He gets very noisy & excited if encouraged by talking to him.

Dec. 16th He still has the same delusions. When spoken to he gets very angry and excited and says he doesn't belong to the writers society; that he doesn't belong to his religion but is a Roman Catholic. He works a little about the house. B.H & C. good.

1893

June 29th Keeps in good health but is the same mentally. He does not obtrude his delusions on one.

To Vol IV p 246

Alexander Bateson Barr

Cont'd from p. 262.

1889

2nd May. This patient is depressed but not markedly so. He seems stupid but can talk when pressed to do so. He is in good bodily health.

October 11. Just the same. Is in No 1 M.E. where he works away sweeping the floor &c but never saying a word unless he is spoken to. By dint of questioning the story of his health is got from him. His bodily health remains the same.

1890

October 28. During the past year his condition has undergone little change and any change has not been in the way of improvement. He seems sillier more automatic in all he does and smiles in a fatuous kind of way. B.M.T.C. are good.

1891

7 March. There is little change to note save increasing weakmindedness. He has lately developed a distaste for animal food but still takes plenty of nourishment in other ways. He works in the dining-hall & enjoys good general health.

July 4. This man enjoys good health. He is still in ME No I where he looks after the dusting of the plants to very carefully but never speaks save when spoken to. When he smiles - a silly way & never answers the question. Demeanour marked.

Dec. 25th Just the same. Leads a mechanical life & seems contented - useful in his own way in small matters.

April 5th 1892 Just the same. Fairly good health & contented with his limited sphere of usefulness.

L. Vol. IV. 553.

Peter McBurnie

Cont'd from p. 500.

1889.

1st Nov. Living the same vegetative existence. Fed twice daily with the tube. absolutely no change.

4th Decr. Unchanged.

1890.

October 28. Stee sleeping so far as mentalness is concerned. Fed with tube all these months and is really gaining a little flesh. On one occasion at night he is said to have asked for a little water but this is doubtful. The fauces are utterly insensitive & the passage of the tube excites no reflex actions. He is looked on as a case of anergic Stupor and possibly he may recover.

1891

7 March. Lately there has been some slight movement of the jaw during the passage of the tube. Otherwise he still continues in his state of deep stupor. He is still very thin but is gaining a little flesh.

July 4. The movement of the jaw on passage of the tube, especially closing, has been more marked of late. and any sudden interference with the skin of his face causes winking & blinking the first time but not so when repeated. On tickling the soles of his feet the leg affected ~~of~~ was distinctly moved & pulled up a little & the knee jerks were if anything exaggerated. He is moving also occasionally voluntarily in bed & his pupils react well to light though a little sluggish. the right is somewhat dilated. His arms too are sometimes moved up & down in a rhythmical fashion for some time. He is very thin & light but considerably how little the muscles are used he

c/s Vol IV. page 428

Colin Govan

Contd from p. 312

1889

May 15. a restless, incoherent, foolish man continually talking or playing the piano &c. Full of fancies without foundation Laughs in an idiotic way without rhyme or reason.

30th July. Unchanged.

29th August. Improving none. It was hoped he would be able to get out and do a little at his business which is a designer for carpets &c but this is seen to be impossible. He is too foolish to do anything. Sometimes gets into a scuffle with other patients whom he is inclined to annoy

15th October. Unchanged bodily and mentally

22nd Nov. Pats. bodily condition is good. Within the past few days he has been somewhat excited & has talked more than usual & in a very fierce way. Tore up his shirt the other day on the ground that it did not belong to him. Is still inclined to annoy other pats. by interrupting them when speaking to the Doctor.

Dec. 17th Bodily pat. was transferred to the East House

April 14. Has periods of comparative quietness when he is civil and ~~compar~~ passably sane alternating with periods of excitement when he talks incoherently accuses the attendants of doing everything to harm him and has delusions regarding the identity of fellow-patients believing that in them he sees Prime Statesmen &c. At these times he is very nasty in his language and at the dances indulges in many foolish antics with the female patients & attendants hugging them &c. His bodily health is good. It has been thought possible he might be tried outside but at present this wd not be warrant

To vol IV p. 139.

John Rodgers

From p. 314.

1889.

10th Nov. In much the same state, having occasional outbursts of noisiness but generally quieter. He has sometimes to be kept in bed for days as he dirties himself and has usually cash for some days. There is also some hæmaturia of the bladder and the catheter requires to be used. He lies in bed talking away to himself in a slow, dreamy way and with his eyes shut he is often heard to discuss things especially talking about women.

April 90. Failing much and now nearly confined to bed always. Much less coherence in his speech & not capable of walking himself. The right pupil is dilated to a marked degree and for the last few days he has had twitchings of the left leg and arm. On touching him just now he simply jumps so active is his sensation. His knee reflexes are absent but the plantar reflex is extremely great and the drawing of a feather across his face seems to give him much annoyance if not actual pain.

June 1890. Has been worse of late with suppuration of one of the groin glands on the right side. This is now nearly well and the slightly excited attack is passing off. Mentally weaker and beginning to grind his teeth.

Aug. 27. When I saw last night he continues much the same, confined to bed not talking much and requiring constant attention. During last night he took 5 shocks or congestive apoplectiform attacks and to-day he is obviously very ill. The left side is paralysed and the mouth is involved. a long examn. is not made.

Aug. 28. He died last night at 9 p.m. of

General Paralysis

P. M. see P. Records. p. 25 Vol. IV

John Charles Stocks

Contd. from p. 345.

1889

23rd October.	Has now been confined to bed for a fortnight having become so helpless that it was impossible to manage him. His conversation has now become quite unintelligible and the actual speech very much slurred. Has begun to grind his teeth and continues doing so for hours at a time. A good deal of tendency to the formation of bed sores. Wet & dirty	5th July. 30th Sept.
21st Nov.	Still confined to bed and not likely ever to be out of it. Continual progression of the disease with intervals during which he is better than at others. Takes his food fairly well being fed but has been very restless at night.	23rd Oct.
4th Dec.	Fretting away with his teeth. Getting gradually worse. Now completely bed ridden. Very restless at night and inclined to be destructive	
1890		
March 10th	Died to-day.	22nd Nov.

General Paralysis

P. M.

Jan. 17th 1890.

Malcolm Murchie

Cont'd from p. 368

1889

15th July. Found this morning looking out of the window and watching a ship coming with a load of cigars for him. Good example of his delusions. Quieter than he was but very full of delusions of all sorts. Bodily health is good. Eats and sleeps invariably well.

30th Sept. There are some indications that he is coming out of his present insane condition. He has not been talking quite so much nonsense of late and his manner is rather quieter. Does not jump up in the morning and come forward as he used to do saying. "How are you Father" or uncle or some other such name. B.H. & C. good.

23rd Oct. Improvement still going on. Talks sensibly about himself and his travels and about the asylum at Buenos ayres. Says he does not know what made him insane. Laughs in a foolish way when chaffed mildly about his size &c &c.

22nd Nov. Pat. still improving his conversation being quite rational & coherent. Bodily condition is good.

Jan. 17th 1890. Since last note patient has continued to improve & was today discharged Recovered.

John Laurence

From p. 370

1889

4th Decr. John is not making much headway. very restless in his manner and incoherent in his conversation. Sleeps fairly well at nights and is taking his food well.

1890

April 14. Not improving much unless in his food-taking. This he is doing more readily and requiring less coaxing. He is now up in the Hall at his meals Mentally he is very restless, groaning a great deal to himself, not knowing what to do at all & with a very furtive look on his face.

October 28. His condn. is more one now of depression than exaltation and thus altho at first he was undoubtedly excited. He is not improving any being resistive, groaning & generally in a bad way His friends wishes to remove him but they saw he could hardly be managed at home and he cannot make up his mind whether he would like to go home or not.

1891

7 March. For the past few months patient has been Kept in the Infirmary Ward & during the past six or eight weeks in bed. He is very anaemic & frail & is at present a Constn. From Mentally he is very depressed & can with difficulty be got to answer any questions. He has been sleeping well & takes his food with fair appetite.

July 28. To-day after being 28 days on leave he is discharged

Relieved

1889

2nd Sept/89.

23rd Oct.

24th Nov.

3rd Decr.

1890.

October 28

1891

7 March.

William McTaggart.

Romp. 372.

1889	
2nd Sept.	Has been confined to bed for some days with a fever-ish attack not to be traced to any chest or abdominal or other mischief. Seems that he is abusing himself now. Distinctly thinner and anaemic looking. Put on Easton's Syrup and kept in the house for some time
23rd Oct.	Better again. Out working but his bodily health is not in a very satisfactory condition. Has he is eating better. Has been very restless at night.
24th Nov.	Still with a good deal of lassitude about him and taking little interest in his work. Mentally he seems rather better. Has become very introspective and it would seem that to a certain extent at least he has given up his vicious habits.
3rd Dec.	Has been decidedly unwell but without any very definite being wrong. Fallen off considerably in flesh and is taking his food badly. Looking utterly miserable. Put on tonics stout &c &c with as yet little improvement. Kept in the house a part of the day as he was certainly unable to work with the others.
1890.	
October 28	Has improved considerably physically and also somewhat mentally during the past year. He now works regularly is less unhappy, somewhat brighter looking and though mentally weak is better than he was. It is known that there is a congenital element in his case.
1891	
7 March.	This patient has improved much during the past few months. He is in good bodily condition though soft. Mentally he is much brighter, talks readily & seems free of delusions. He now works with the tailor.

To Vol IV p. 499.

P. R. Hay Jagannadham

Contd from p 373

1889.

July. 15 Is doing no good. Having Sulphonal at night almost always in doses of 25 grs. This has a good effect but he complains of it making the ground rise and fall before him in the morning. Mentally there is no difference. When approached in the morning he will sometimes shake hands, mutter a few words and then hurry off. At other times he refuses to shake hands & carries on with a lot of gesturing & gibberish which no one can understand. Physically he is rather improved. He goes out at night to play cricket but stands in the field and chatters the most of the time

Oct. 23rd Up till about a week ago this patient continues in the same state and then a very decided improvement began and this was first noticed in connection with a letter he wrote his father enclosing it to a London minister to forward. The letter was excellently written, both as regards style and matter and only at one or 2 places bore traces of its author being insane. To-day he conversed intelligently with the writer about himself, his examinations, his country its customs &c. There was a restlessness about his manner while conversing and a shiftiness of his glance which attracted attention but beyond these he was sane

Oct. 25th Wrote or says (and in my opinion) a singularly good account of Hindoo customs with special reference to Brahminical law for the writer. Keeps well. Has asked for books

Oct. 28th Relapsed. as bad as ever.

Nov. 22nd For the day at beginning of this month pat. showed distinct signs of improvement. These signs however gradually disappeared & pat. has again relapsed as bad as before.

p. 470

Matthew Lover, 33

Admitted 9th Nov. 1889.

Private patient admitted to-day by E.M. Married Ply occupn a Joiner. Resides at 34 High Barhoem, Kilbarchan He has been insane 9 mos this being his first attack. For 6 mos he was in Riccarsbar asylum having left it six weeks ago. Supposed cause is unknown. Not epileptic or dangerous to others but suicidal. His maternal grandmother was insane and died so. His paternal aunt was also insane for a time.

Medical certificate bear that he thinks "Paisley asylum people can talk through him. In fact he talks nothing but a lot of nonsense" (N.B. The above in inverted commas is the medical certificate verbatim)

On admission he was distinctly excited and very full of delusions such as that people were passing electric currents thro him that men were influencing him by pulling the strings of his heart and that his wife was unfaithful &c &c.

Physically he is undersized, fair haired, and not very well nourished. Thoracic and abdominal organs healthy. Bowels freely opened with Haust. Mig.

10th Nov. Slept none last night but was quiet. Excited this morning and talkative. Declines to recognise the under as a Doctor and calls out for the other Doctor who saw him yesterday meaning Dr Yellowlees. This afternoon however he saw Dr Yellowlees but tells him that he was not the man and that he had never seen him before. Taking his food well. Bowels freely opened.

12th Still repellant and excited in manner and conversation. Full of delusions. Being acted on by Paisley people and all the strength taken from him. Tongue moist and fairly clean. Pulse full and regular.

Matthew Love
cont'd.

1889 (xxx) 1889.

21st Nov. No improvement to note. Continues full of delusions. Decines to believe that he has seen D. Yellowlees or that D. Yellowlees is really himself and. Is sleeping fairly well with hypnotics. Declares he wont stay here but will go back to Kilbarchan. Stee suspic-ious and repellant in manner and almost always with a frown on his face. Is taking his food well

4th. December. Rather improved physically but unchanged mentally with the old delusions. Says he will go away on Saturday. Perhaps hardly so repellant as he was and it is possible now to chat with him without his resenting it & going away. Sleeps & eats well.

1890

27th March. There has been some change in this mans condition. He is now allowed out in the grounds and down to the Workshops but is as insane as ever hocusing fast to his delusions. Says the Riccarsbar people still act on him drawing his heart, acting thro his head &c &c. He wont work any as he says he never will work more. Believes his wife to be unfaithful and thinks that some people here know more about it than they pretend. No lesion of his heart can be discovered & there is no albumen in his urine

28th October. Now believes in a sea voyage. Says that no one acts on him when at sea. Otherwise his delusions remain very fixed. He has now begun to hear voices at night. He now works a little making small things and helping the joiners. Believes that one Smith an attendant here is really another man & was one of his persecutors when at Riccarsbar. Believes that the writer also knows more than he confesses to of his case.

To Vol IV p. 140

George Burns
Court Row p. 377.

1889.

s full of delusions
about Free-masonry.
letter from the Lunacy
it Glasgow doctors
lect 2 of these to examine
with a report as to his
Drs W.T. Gairdner and
o him yesterday. and
annexed is a copy.
this delusions very
will be ameliorated. He
said.
the Doctors Report with
but that he may change
This does not suit him
want letter to the Commrs

of record since last
e so frequent and
ay however he wrote a
umbarton asking them
s and saying he intended
days. This letter was
not forwarded. During all these months his bodily health
has remained good, and he sleeps and eats well.

3rd Decr. Burns mental condition and physical health remain
as they were. He is at present engaged writing the history
of his life for the benefit of others. In reply to letters the Lunacy
Commrs wrote distinctly at telling him he was insane & that
he must remain in an asylum.

Matthew Love

cont'd.

1889

21st Nov.	no improvement Deemes it be that Dr Yellowes family were w here but wi -cous and ref with afroun	this his imaginary self sacrificing labours all these matters he holds are connected with Freemasonry From the nature of the delusions especially those relating to women we are of opinion that it would be unsafe for him to be liberated from a Lunatic asylum. Signed. W. J. Gardner M.D. Alex. Robertson M.D.
4th. December.	Rather imp with the exc de Perhaps hardly now & that	
1890	going away.	
27th March.	There has been He is now all Workshops but his delusions him drawing He would work more. Believes that some f they pretend. There is no a	
25th October.	now believes in a sea voyage. says that the remedy does not act on him when at sea. Otherwise his delusions remain very fixed. He has now begun to hear voices at night. He now works a little making small things and helping the joiners. Believes that one Smith an attendant here is really another man & was one of his persecutors when at Riccarsbar. Believes that the writer also knows more than he confesses to of his case.	

To Book IV p. 140

George Burns

Contd from p. 377.

1889.

ROYAL ASYLUM
GARTNAVEL
GLASGOW

Copy.

We the undersigned hereby declare on
our oath and conscience that we have to-
day visited and carefully examined
Mr George Burns, Engineer, East House
Gartnavel and find that he is of un-
sound mind He entertains extravagant
delusions. Thus he says that he him-
self is Christ and that his father, George
Burns, was God. He states that he is in
possession of a key of an electric or
magnetic nature or like a telephone with
which he can open the minds of men &
women. He has been engaged all his life
he says in the redemption of men and
women especially the latter who he holds
have hitherto been practising acts of the
most bestial kind. He believes that his
life has often been in the greatest danger
[illegible] in a few days. This letter was
not forwarded. During all these months his bodily health
has remained good, and he sleeps and eats well.

3rd Decr. Burns mental condition and physical health remain
as they were. He is at present engaged writing the history
of his life for the benefit of others. In reply to letters the Lunacy
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Matthew Love

cont'd.

1889

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To Vol IV p. 140

George Burns

Contd from p. 377.

1889.

3rd Sept. (contd) as the previous day he was full of delusions regarding his identity and his relation to free-masonry.

13th Sept. A week ago Burns got a letter from the Lunacy board with a list of prominent Glasgow doctors enclosed. He was invited to select 2 of these to examine him and furnish the Board with a report as to his mental condition. He selected Drs W.T. Gairdner and Robertson who accordingly saw him yesterday. and furnished a report of which the annexed is a copy. Burns tho' he gave utterance to his delusions very freely seems confident that he will be liberated. He has not yet heard from the Board.

18th Sept. Burns has received a copy of the Doctors Report with a note that he cant be liberated but that he may change if he likes to another asylum. This does not suit him and he has written a very indignant letter to the Commrs protesting his ~~xx~~ sanity.

10th Nov. Little has transpired worthy of record since last note. Letter writing has not been so frequent and he has been quiet. The other day however he wrote a letter to a firm of Lawyers in Dumbarton asking them to forward his half yearly dividends and saying he intended leaving the asylum in a few days. This letter was not forwarded. During all these months his bodily health has remained good, and he sleeps and eats well.

3rd Dec. Burns mental condition and physical health remain as they were. He is at present engaged writing the history of his life for the benefit of others. In reply to letters the Lunacy Commrs wrote distinctly ~~xx~~ telling him he was insane & that he must remain in an asylum.

George Burns
cont^d.

1889.

Decr 18. after about a fortnights labour Burns has finished the writing of his life. This document of 80 closely written foolscap pages has been forwarded to the Lunacy Board. The whole tenor of it was the keys by which he was forced to do certain things these keys being controlled by the craft of Free Masons who has him in subjection Written in parts with considerable power this work abounds with the most obscene and filthy language. consisting sometimes of collections of words massed together without meaning. If any truth is to be placed in his narrative then Burns has been a dangerous lunatic for years. yesterday he did a very foolish thing. He has recently got his wardrobe replenished an and last night the attendant gave him the new clothing consisting of a suit. shirts, collars, boots &c. on entering his room this morning the whole of these were found to be absolutely ruined, torn in all directions and of absolutely no use. They were lying in a heap and on the heap was found a note which will be found at p. 173. and which explains itself. Conversing with him afterwards he would give no reason for his conduct conversing readily on other subjects but remaining silent whenever the destruction of clothes was mentioned. —.

1890.

Jelmary 16. Has again been examined by two doctors with the same result. Been very troublesome of late threatening all sorts of vengeance against the place. Says he wants to go to another asylum if he cant get quite clear.

April 1st Transferred to day to the Aberdeen Royal asylum

Relieved.

John Black.

From p. 414.

he cones consume and the grand-uncle on the same side cones have the same remark made of him.

10th July. Is sleeping a little better now and though very tremulous steel is better than he was. Still gives expression to delusions and these are steel of a grandiose nature. Bodily health improving

29th Aug. Has become very quiet of late and hardly speaks but is always civil and shakes hands at the morning visit. Regarding a diagnosis more may now be said than cones have been said a month ago. Then there were suspicions that he might develop into a General Paralytic. Now however the tremulousness of the tongue is greatly gone, the muscles as a whole are in better tone and steadier and the pupils are less dilated. There is steel a rather shifty look about his face and a want of absolute frankness in his manner which makes him not above suspicion

24th Sept. Put on parole. Mentally and bodily he is improving Talks sensibly and rationally and has anxiety to get away sees it is for his good to remain here for a little. Confesses he was very intemperate in his past life and indeed it seems that for months he was not free from the influence of whisky, "tasting" continually

23rd Oct. Remains well.

24th Nov. P.L. Continues so well that today he has gone home for month "on pass."

Dec. 17th Today discharged

Recovered.

Re-admitted June 30th 1901.

vide Vol XII p 1.

James H. C. McLeod.

Contd from p. 417.

1889.

25th July. Has had a rather violent outburst and struck some of the attendants. Was brought down to the Refractory Gallery remaining there a week. He is now quiet & is back in No 5 & 6.

15th augst. Has been quiet and more sensible since last note. Does not talk much but sits in a particular place on the sofa or marches up and down the gallery talking to himself. Bodily health is improving and he is gaining in flesh.

20th Sept. Has been again brought down to the Refractory Gallery on account of his becoming abusive & violent to the attendants. Insists in wearing an eye-shade because his eye is sore but so far as can be seen there is nothing wrong with it. Refuses to give his hand to shake, offers a finger. Not civil in his manner. Mutters a great deal to himself and with a nasty gleam in his eye at times.

15th Oct. Still in Refractory Gallery and still sullen & dangerous. Taking his food well and nothing really new to note in his mental condition.

22nd Nov. Still in Refractory gallery. During past ten days has been untidy & hid one of the other pads on the face in return for some fancied insult. He has refused to speak during the visit. Last night however he was so improved as to go to the concert & while there writer had a conversation with him. His manner however was strained & gave the impression that he was ashamed of his previous conduct. Complains of dyspepsia. Rem. to p. 476. Green.

25th Sept. Still

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Has

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20th Oct. Prac

& a

again

22nd Nov.

Dec. 6th

Jan. 27th

March 10th

Revd W. McWatt

Contd from p. 422.

1889.

28th Sept. If anything a little better. Has been sleeping in No 1. at night for some time as his bowels troubled him. Is sleeping very well and indeed is inclined to sleep more than he ought. Has had an attack of conjunctivitis of the right eye. He is liable to this. Under treatment it improves but he is still wearing an eye shade. Mentally he is still depressed and has some days he is more cheerful and happier taken as a whole there is not much improvement.

23rd Oct. Practically unchanged. Some papers he got, the other day, & seem depressed him considerably but he is rather better again. B. H.T.C. about the same.

22nd Nov. Still very depressed & seems to have given up hope for recovery. Thinks he is preparing for the "great change." He has been troubled for a day or two with a slight pharyngitis. Very grateful for any little attention shown him.

Dec. 6th Very much same as last note as regards mental condition. Throat is much better.

Jan 27th For past few days Mr. Watt has been suffering from an attack of influenza which has made him very depressed. He is very low in spirits about himself & does not think he is worth any treatment or attention. Today he is better a little but still in bed. His appetite which had been bad is now returning.

March 10th Not much change in patients mental condition: still very depressed & has very little

to p. 5-40.

John Young Moyes

Cont'd from p. 425.

1889.

18th Sept.	(cont'd.) and restless in his manner. His bowels have been freely opened and atonic given	Nov. 22nd
30th Sept.	Better again. More stable and uniform in his conduct.	Dec 18th
23rd Oct.	Continues to improve and is now really pretty well. Talks sensibly and conducts himself like a sane man.	1890 Jan. 4th
20th Nov.	Pat. has continued to improve so much that today he has gone home "on pass" for a month.	Jan. 27th
Dec. 28th	Discharged recovered.	

P. R. Hay Jagannadham
Cont. from p. 461.

Nov. 22nd — He is now showing some slight tendency towards recovery.

Dec 18th — Pat. is not improving mentally. Walks about chattering to himself & making all kinds of curious gestures. Conversation still quite incoherent. B. H. & C. only fair: very thin.

1890

Jan. 4th — Pat. had a slight retrieval of consciousness about a week ago. This lasted for two or three days during which his conversation & conduct were very good indeed. Since then he has slipped back to his old condition.

Jan. 27th — During the past fortnight patient has been much better than formerly. His manner is much more subdued & he has evidently more control over himself than before. Having expressed a desire for medical books he was given a pathology work & this he has been reading pretty steadily for some time & says that he enjoys it. As to his remembrance of what he reads mine is sceptical. He is still full of delusions of which he gives evidence in the letters he writes as also in conversation. His condition generally however is much better than it has been before since mine common duty.

to p. 539.

William Primrose

Cont. from p. 409.

Nov. 25th Today on entering the gallery pat. who had been reading his newspaper was seen to stop reading & looked as though listening intently to some sound. On being questioned he said that he heard his brother's (Pat's) voice quite distinctly. After a little conversation came the usual question as to whether he could get away today

March 15th Patient still asks every morning to get away but is easily answered. For a time he did not hear voices but lately he has been troubled with them again. He is sociable in disposition & always glad to catch & play cards with the other patients. His bodily health is good.

May 5th No change to note. Bodily health & condition fairly good.

July 22nd Patient is in a state of mild dementia. He is very facile & his memory is very weak. He is very anxious to get away back to work at Shanghai & considers himself perfectly able to undertake business again.

His general health is excellent.

Aug. 8th Mental condition as at last note.

Physical condition: face somewhat expressionless & heavy looking: tongue slightly tremulous: pupils equal & responding to light & accommodation: speech slightly slurred with difficulty combinations of sounds. Right knee jerk normal left absent: plantar deficient in both especially in left

to Vol IV p. 93.

Dec 6th

March 13th

May 16th

July 22nd

Oct. 30th

David Torrance Handyside.

Cont. from p. 47.

Dec. 6th. Pat. has never yet spoken to writer since he came on duty. He stands in one position in the gallery for long spells of time with a vacant look on his face. B. H. is good. Is a mick.

March 12th. Patient is much the same as at last note. He stands for long periods in the one position with his eyes staring aimlessly. He has never yet spoken to writer but has played billiards with him. He takes more interest now in the work of the gallery. He is now in S. 46. His general health is very good & he is eating & sleeping well.

May 16th. No change to note.

July 22nd. Patient still continues silent towards the officials. He speaks readily to his attendants & in the Cricket field where he acts usually as umpire he shouts out his necessary orders. He considers the officials have conspired to keep him here & hence his refusal to speak to them.
His bodily health & condition are good.

Oct. 30th. Patient still possesses his repellent attitude towards the doctors & his father. He speaks readily with the attendants.
Bodily health & condition are good.

to vol. IV p. 153.

Mrs Marion Ferguson or anderson, 67.

Enters in this Vol. by mistake 24 albert Road Crosshill

1890. Jan. 30th

Patient is admitted on 26th Nov. She is a widow and a Protestant. Has been insane for about 5 weeks this being her first attack and the cause is H.P. & intemperance She has been & may again be suicidal. Her brother died insane in Gartnavel about 26 years ago. A sister was also here then in Merryfeats, recovered & died at home after being some years sane.

Medical certificates bear that as the result of indulgence in alcohol she has become subject of intermittent attacks of acute mania in which she becomes extremely excited screaming incessantly and endeavouring to commit suicide. She thinks she is lost for time & eternity &c &c.

She was brought to the asylum about 11.15 p.m. her nephew stating that her violent excited conduct justified them in bringing her at so late an hour. On admission she was quiet and went without trouble with the attendants.

27th Nov: Slept some hours last night and was quiet. Physical examination shows that there is a distinct cardiac lesion bruit heard at the apex a blowing S.S. murmur. Pulse is small but regular. Tongue coated & dry. aperient medicine ordered and a little whisky.

28th Nov. Talks a great deal this morning about her nervousness and about her crying fits which she says she cant help. She slept well last night and is manifestly very shaky this morning and her tongue tremulous yet she has shown no tendency to outbursts such as are described in the medical certificates

See Vol III Females

George John Richmond.

Cont. from p. 432.

1890.
Jan. 30th

miserable looking.

Yesterday morning about immediately after writer had paid the morning visit Dr. Richmond pierced his right eyeball with a needle which he had obtained from the coat of another patient. On examination no signs of the needle could be seen save the puncture made by its entrance. Suppuration followed very rapidly & a panophthalmitis resulted. Dr. Cameron & Dr. Teignmouth saw the case in the afternoon & the result of the consultation was that the eyeball was successfully enucleated by Dr. Teignmouth. The needle was found in the eyeball. It had passed through the eye, at an oblique angle from without, inwards & backwards. Patient was sick after from the Chloroform. She passed a very restless sleepless night & several times tried to tear off the bandage but having no gloves he did not succeed. She is very dull this morning & answers questions in monosyllables. Patient gave no warning of his intention. For past few days however he was more restless than usual & efforts were made to amuse him.

She was masturbating a great deal just now.

George John Richmond.
Cont.

March. 6th. Since last note patients eye has quite healed up. For some time after the operation patient required to have on locked gloves to prevent his removing the dressings & injuring his eye. Later these were only required at night & even have been dispensed with.
Mentally he is much as before being very depressed & taciturn refusing to say a word though questions repeatedly asked him. Sits apart from the other patients with his eye closed as though sleeping. He is still very thin & pale & at times requires to be pressed to take his food.
He is sleeping well under Sulphonal.

April 22nd. For past two days patient has been very excited & restless. This started about 1 am. & with no apparent cause. He had to be carefully watched all day to prevent him dashing his head on the ground. His face was very pale & haggard & expressed great fear. When questioned as to the cause of this he gave no answer but simply pointed to the fire. He is evidently labouring under some delusion but what that is he refuses to acknowledge. He will not take his food till it is put into his mouth by a spoon.
His bodily health is far from good: he is getting thinner & also paler than at last note.

to p. 5 81.

Nov. 11th. 1890.
Feb. 17th.
March 6th.
May 16th.

James H. C. In Lead
Cont. from p. 467.

Dec. 10th. Pat. often fretting about little troubles. Complained of pain in his right calf & thigh. Examined & found veins somewhat knotting & varicosity. Cold bathing & friction with towels recommended.

1890.

Feb. 17th. Since last note there have been no more Complaints from patient about his leg. Mentally he is much the same. Though there have been no outbreaks he still has a somewhat strained & reserved manner when speaking. At times he seems to overcome this & then his Conversation is very agreeable & pleasant.

March. 6th. For past two days patient has been very repellent in his manner sitting apart from the other patients & taking no interest in any person or Thing. Will not continue Conversation when it is started.

Previous to this he was very agreeable though always showing a certain amount of constraint in Conversation. Bodily health good: eating & sleeping well.

May 16th. Patient has just had another "explosion". It was heralded the previous day by his putting on a shade over his right eye which he said was painful though nothing could be seen to cause this pain. The next day in making his visit while sat down beside him

to p. 597.

James Alexander Jarvie
adm. Dec. 9th 1889.

Patient was today brought here by his Father from 33 Esplanade, Greenock. It was not intended that he should be taken in today, but merely that arrangements should be made as to his coming in as a voluntary patient. He was however in such a condition as to preclude this idea & he was admitted on an emergency certificate to the West House.

Patient is 32 years of age & a Clerk in a sugar ~~brokers~~ refinery office. He is unmarried & a Protestant, his Father being a minister in the Independent Church.

This is his second attack of insanity he having been a patient here from Sept. '77 to Sept. 78. (<u>see Casebook O.S. Vol. 22 p. 105.</u>)

The present attack came on a few days before his admission & is supposed to be due to anxiety about business matters. The sugar refining generally has been very active of late & patient has had a good deal of overwork. His Father suspects however that patient had also been speculating on his own account. He is not suicidal but might be dangerous to others. (He did attempt suicide during his former illness. see reports.) Dec. 10th

There is no Previous H.P.

The medical certificates bear that his manner is greatly changed: that his memory has been very bad: that he has ~~lost~~ delusions of spirits: that he has Dec. 11th

James Alexander Jarvie.

laughed & cried alternately & without cause. That he has shown inability for continuous thought.

On admission patient seemed in splendid health physically having a well developed muscular system. He has a fair complexion with ruddy cheeks.

Mentally he was very excited & answered questions in a very abrupt manner. His eyes had a wild & at times "far away" look with both pupils dilated. His tongue, which he protruded when asked, was clean, moist with tremulous. His pulse was somewhat quickened but not markedly so.

He walked up & down the gallery in a very restless fashion & smoked in a similar way biting very hard at his pipe. He took a fairly good "tea". He had Sulphonal gr. XXX & went to bed quietly. He remained quiet only for a short time & then became noisy talking to himself etc..

Dec. 10th He slept from 1 till 3 this morning but afterwards became very noisy & restless at times. Has been well walked today both in airing Court & in the gallery. Ought to have Sulphonal gr. XXX.

Dec. 11th He slept last night very noisy & restless & his room was wet this morning. When

James Alexander Jarvis

Cork.

writer spoke to him last night he was quite collected in his replies & answered questions correctly. Sulphonal gr. XXXV.

Dec. 12th Only an hour's sleep last night from 3 till 4. He was very noisy & restless jumping out of his bed, throwing the clothes all about the room. He took a stretcher out of his bed & broke it. His bed was then taken out of his room. & mattress laid on floor. Today he is still very excited. His hands are hot & clammy & his pulse considerably quicken-ed. Pupils are still dilated though not so much as on admission. His appe-tite varies greatly. Sulphonal gr. 40.

Dec. 16th Last night patient had a fairly good sleep is today looking much better than formerly being more collected in manner & having lost to a certain extent the wild look. His feeding is very erratic. Before going to bed last night patient seemed fairly fagged out, his limbs threatening to give way from sheer exhaustion.

1890.

Feby. 17th Since last note patient has greatly improved but this improvement has been by no means rapid or uniform. About a month ago he was well enough to be removed from the refractory gallery to 5 & 6. He was soon sleeping much better at nights but still continuing to be reckless & talkative.

March 8th

March 8th

Jas. Alex. Savic.

Contd

During the day he wandered about the gallery in an aimless fashion with a listless slouching gait + taking no interest in either the other patients or what they did. At times he would sit down at the piano + play but always in a mechanical fashion + repeating the same air over + over again. When spoken to he would brighten up a little + answer questions but in a reasonable sensible way. When alone he laughed in a silly fashion to himself.

This state however has gradually passed off. He is still in S + B having been removed from there one for striking an attendant

He is now much improved both in appearance + manner. He takes an interest both in himself (as seen from his attention to his personal appearance) + in what is going on around him. His manner + Conversation are quite frank + he seems to recognize that he has been ill + also that he has improved. He now occupies himself with reading + his evenings with billiards etc.

March 6th Patients improvement still continues very satisfactory + shows no tendency to relapse. General health good Though at times is troubled with piles.

March 8th Discharged. Recovered. Taken away by Father.

Re-admitted July 16th 97. vide Vol IX P 254.

Robert M'Kechnie aet. 85.
adm. Dec. 15th 1869.

Patient was today brought here from Dennistoun where he has been staying for some time, his proper address being 1 Broomhill Terrace, Partick. He is admitted at the instance of his wife under the Lunacy Statute.

He is 85 years of age, married & belongs to the Free Church of Scotland & formerly a farmer.

Patient has been insane for 18 months during which time he had a private attendant living with him. He has however been "peculiar" for nearly 11 years. This "peculiarity" seems to have consisted in insisting on having his own way in every thing: he had strange whims & fancies about his dress, the contents of his trunk &c. &c. The alleged cause of his illness is old age & the fact that too much deference was paid to his wishes. He has threatened to commit suicide & has also been dangerous to other people especially his wife.

There is no known H. Disease. It is stated that his mother's family were peculiar.

The medical certificates bear that he has been subject to great excitement with violence on the most trifling occasions: that he has threatened to commit suicide & also to smash his wife & the servant girl: that his language has been very coarse & abusive so much so that his wife is frightened to be in his presence.

Dec. 17th

Patient is in health according to his years

Robert In Kechnie.

His heart & lungs show no evidences of actual disease. He has an inguinal hernia on the right side for which he wears a truss. He seems to have some irritation at the neck of bladder as shown by very frequent desire to micturate. There were a number of bruises on his legs & arms which were said to have been inflicted by his previous attendant who was addicted to drink.

There was no sign of mental excitement when he was admitted. He did not seem to realise where he was, thinking that he was in a "hydropathic." He acknowledged afterwards to the writer that "he was daft himself & had come to get cured! he imagined that would be a lot of daft folk here." His memory seemed to be entirely gone, which he himself also acknowledged. In conversation he was at times wandering but never absolutely incoherent. "Senile" describes its character. His shirts & his dress were well seen as he was going to bed. He insisted on having on two woollen night caps with thick ear pads. These he explained were to protect him against the cold to which he was very susceptible

Dec. 18th He slept fairly well during the night rose up pretty often to make his water. He has a fairly good appetite. This

Robert M Kechnie

Cont.

morning he told writer that he fancied he had seen him (the writer) somewhere before; he fancied it had been at Portree Inverness where he used to farm many years ago. His memory is not altogether gone especially for old events & regarding old people. He is quite quiet.

Dec. 20th Today part talked in a rambling way to writer about some old Highland chiefs, tartans etc. & also about a man in Edinburgh who wanted to "Cure" him for £200.

July 22nd External exam. of his bladder showed there was no distension. Yesterday he requested writer to draw off his urine for him. This idea was probably put into his head by the sight of the "feeding bottle" which the writer had just been using

Oct. 30th He is restless today: walks about the gallery a great deal: requires to be watched.

1890.

Feb. 13th June 29th Feby. 17th This patient has now quite settled down & is much improved since last note. He is now giving no trouble & takes his food well. His mental condition shows no change: his memory is very bad as one being better aware of this than patient himself. He still has his fancies about his bladder & now & then asks for a bottle of castor oil.

March. 5th Is change. Bodily health very fair: appetite is good & he sleeps well.

March 11th Two days ago while out of his bed ma

-Ring water patient fell & struck his head against his bed & thereby got a black eye. There was a small wound over the left eyebrow.

May 16th. Since last note patient has improved a good deal as to his bodily health. As face is now getting plump & has a brighter colour. Mentally he is just as before in a state of senile dementia with great restlessness & weakness of memory. He sleeps well.

July 22nd. No change to note in case. Restlessness loss of memory with fleeting delusions & occasional irritability are still the prominent characteristics.

Bodily health & condition are good.

Oct. 30th. Mental condition unchanged. Bodily health fairly good.

Feb. 13th. Still in good health, otherwise unchanged.

June 29th. His condition is now rather poor & his strength diminished. He can walk about however fairly well, tho' feebly. He is very restless particularly so at nights & has always wrong ideas as to where he is & what he is doing. He imagines that he has been at various fairs & country places recently - that he has made purchases - &c &c. At times he is excited & irritable. The latter he seems to have inherited as the left ankle & leg were swollen & inflamed. This is nearly better with rest in bed - but a slight bronchitic condition always present tended to increase when he was in bed. & his skin became hot & dry - so he was made to get up & a bandage applied.

To Vol. IV. P. 422.

485

Andrew Denholm.

Prev. admission sep. 395. Re-admitted 19th Decr. 1889.

1890.

Readmitted 1. day as a voluntary Patient He left the Asylum on August 31st to resume his occupation as a Commercial traveller but found himself unequal to it and places himself as a voluntary patient under Dr Rutherford at Dumfries. He thinks he improved considerably there and left at the end of 4 mos. after staying a fortnight in Glasgow he felt himself again becoming more nervous and came here. His case is evidently a rather peculiar one. He labours more under the fear of becoming insane than actually being insane or perhaps it might be more correct to say that his delusion is the fear of being insane. He talks intelligently & rationally so long as he is kept from talking about himself. Quite plainly he is not of a robust constitn either bodily or mentally & there is a shiftiness in his manner & habits indicating a lack of nervous stability. Dr Rutherford writes stating that he endeavoured to make mischief among the patients at Dumfries and tho he has never done that here it is quite in keeping with his character. His bodily condition is fairly good. and he eats & sleeps well.

28th July

28th Oct.

25 Dec.

1890

3rd Jany Was much distressed this morning because he thought that in the night he had had some sort of a shock but there seems to reason to believe that he has anything of the sort. Complains of numbness in his fingers but sensation is quite good

28th Jany. Just the same.

5th Feby Discharged

Recovered

Readmitted on Nov. 22nd 1893. Vide Vol. VI p 292.

archibald MacDonald.

From p. 364

1890.

28th July. The same suicidal melancholic showing no improvement but continually asking away for a trial. He has not attempted suicide of late but has to be almost forced to take his food. He is despondent, says nothing can be done for him that he should be allowed to die &c.

28th Oct. There has been a very great improvement in this man's condition. He is more cheerful, acknowledges that he has been ill, but knows he is better, works very well and altogether behaves like a sane person.

There has also been a great improvement in his physical health.

25 Dec. Today discharged

Recovered.

John Stevenson Voluntary
admitted 19th Decr. 1889.

1889

Dec 10. Patient come into the E. H. to day as a voluntary case. He is a young man about 30 by profession an analyst and employed at Broxburn Oil Work. He has the reputn of being very clever and his abilities have not been over-rated. He is depressed & confesses that for some weeks he has contemplated suicide. He states that nothing he does is right & that he has broken all the laws of God or man. It seems that some mos ago he was in Paris on Holiday & confesses that he did not just behave himself.

On admission he is depressed & gloomy with large mobile pupils & great desire to back to any one. He is evidently in good health but states that for some time past he has lost flesh & that he has no pleasure in anything. There seems also to be a girl in the question.

1890 13th Feby. Jelmary 19. Has considerably improved and is now out regularly in the Garden where he works well. He is still however depressed & sullen & not inclines to enter into conversation. Bodily he has

1891 7 March. improved very much & is now firm & strong

April 2nd He leaves to day. Improvement has gone on fairly steadily and of late especially he has improved very much being now bright & cheery and anxious to get back to his work.

Discharged to day Recovered

Readmitted See Vol IV D. 89.

October 28.

William a. McBracken.

From p. 4244.

1889.

Decr 10. There is great ataxia in this case and great well-being feeling but the characteristic symptomes of ~~the~~ G. P. are not present. He talks sillily, is always asking away days there is nothing wrong with him &c, but he is easily led off to talk of other things and then laughs at a very little thing. His health is fairly good i.e he is well nourished and eats & sleeps well.

1890

13th May. The locomotor symptomes have grown more marked of late and now he walks on a very broad base, & puts down his feet with a peculiar stamp. His pupiles are contracted & equal and while his speech is slow it is not that of a G. P. Mentally he is growing weak. Sometimes he is very emotional, crying a great deal at other times he is full of mirth joking away &c.

October 28. He is now hardly able to go up to the Hall for his meales requiring assistance and staggering a great deal. He insists very strongly on the fact that his bowels are regular and thinks that stones keep him to get away. Mentally he is weak - .

1891

7 March. The motor signs in this case have increased lately. He is very shaky & the co-ordination in his walk very marked. He complains frequently to J. Jones in his legs dull aching & a sense but occasionally very sharp. Mentally he is unchanged. As a rule happy & jovial & goin' away the room but sometimes very surly & passionate.

Cp. p. 393. Vol IV.

489

James Symington, 39

Admitted 19th Decr. 1889.

Patient is a pauper chargeable to the City Parish
He is 39 years of age a spirit salesman and married &
resides at 27 Young St. Glasgow.
He has been insane a few days, this is his first attack
and the cause is intemperance. He is epileptic, and
dangerous to others but not suicidal. No H.P.
Medical certificates bear that it is a case of Epileptic Insanity
He thinks his wife is unfaithful and has threatened her with
a poker. He hears imaginary bands of music &c
The other certificate bears that he is shy but depressed looking
answers questions incoherently imagines noises about his
house &c.
His family and personal history may be briefly summed
up thus. His father and mother were healthy and lived
to old age. There is no neurotic history, his brothers &
sisters being either alive or having died of some non-
-nervous illness. The closest questions fail to elicit any-
-thing pointing however vaguely to Insanity either in
his own or his wife's family.
Personally he was a healthy man up
till 5 years ago when he had his first distinctly epileptic
fit. Previous to that he acknowledges to have had giddiness
occasionally when his stomach was deranged. Never had
Syphilis or any venereal complaint. Up till about 10 years
ago he was temperate taking spirits very seldom. Since
that however he has been a pretty heavy drinker, never
getting drunk but tippling a great deal at all hours
of the day. The first fit 5 years ago came on in
the night when he was in the Bath Room. He remained
unconscious for half an hour being however severely

James Symington
cont.d

stunned by falling on some raised surface. The next fit was 10 mos after the first and not so severe. Since then they have been coming oftener and in the year drawing to a close he thinks he has had about 12. He frankly acknowledges that for some years his habits have been getting more intemperate. During the last month he has had 8, 2 of which were in one night. From his description of his sensations after them and from the description got from his wife no doubt remains as to their being Epileptic in nature. No aura can be ascertained definitely to exist. He complains of having motes floating before him for some days before the fits and there is dimness of vision and some giddiness. He has never had S.? (?)

Present Condition. A careful examin.n of the nervous system is almost entirely negative. The only definite fact is a dilat.n and slight inequality of the pupils. No other ocular symptom. Reflexes all over the body normal. In good physical health. Tongue coated but protruded readily, normally & in the median line.

Mentally nothing abnormal can be made out. Talks sensibly acknowledges he has been drinking remembers the fits he had the day before his admission and says he was drunk when he threatened his wife. —.

10th Jany Since admission this man has continued absolutely well He has been under careful observation but has had no fits and nothing has arisen to known suspicion on his mental condition. Treatment has been simply to get all his organs into good working order.

28th Jany Discharged

Recovered

John W. Gibson
admitted Dec. 27th 1889.

Patient was brought here at the instance of the procurator fiscal & remanded here as a place of safety pending a commission in lunacy. He was admitted to the East House.

Patient is 33 years of age & is married. He is in practice as a surgeon dentist in London Road. He is a member of the Univ of Scotland. Dec. 31st

This is his first attack & has lasted only a few days: drink is the cause.

He was arrested in charge of assaulting his wife.

He is not suicidal but is said to be dangerous to the lieges.

There is no H.P. 1890. Jan. 3rd

The medical certificates simply bear that he is of unsound mind & dangerous to the lieges & requiring confinement in an asylum.

On admission patient was quite collected in his manner & answered questions readily & seemed to realize his position. He was in good bodily health.

Dec. 28th Pat. slept well last night & today had a long conversation with writer. He spoke quite freely & openly about his case & showed in his conversation no signs of incoherence. He admitted to have taken drink pretty regularly but only occasion- 15th July 28th ult.

John H. Gibson.

-ly to excess. He spoke in a most temperate fashion & showed no signs whatsoever of excitement in his manner. Judging from his conversation he seems to be a man of considerable intelligence.

Dec. 30th Today the writer was struck with a letter which Patient wrote to his wife there are numerous misspellings, the writing also being much superior to what one would have expected. Patient however states that his general education was sadly neglected when he was young. Hence the deficiencies above of which he is himself aware.

1890. Jan. 3rd Pat. was today examined before Sheriff Balfour & result of exam. was his recommittal.

Writer was much surprised at the change in patient's appearance when he saw his wife. His face became very excited & his eyes flashed in a manner which looked no good for her.

15th July Has improved much since last note and is now probably as well as he will be. During a long conversation with him it is impossible to detect any flaw in his mind and in the Galleries the attendants report favourably of him.

26th March Discharged

Recovered

James Anderson Leitch

Cont. from p. 430.

Dec. 28th Pat. today fell in a "fit" while walking about in the gallery. Writer was not present at the time but from description given by the attendants it would seem to have been of the nature of a Convulsive attack, though the Convulsive symptoms were absent. Pat. remained dazed for some little time after the fit but in a few hours was quite better. To remain in bed for a day or two.

Dec. 31st 1890 Yesterday & today there has been a considerable quantity of haematuria.

Jan. 4th Haematuria has now passed off.

March 5th Of late this patient has improved very much. He now has lost the majority of his grandiose ideas although he still has a great amount of self confidence & assertiveness. His manners are almost always calm & suave to a degree & he is very tractable. He greatly enjoys the dances & drawing-rooms but these show that he has tendency to the erotic.

As to bodily health, it is very fair. He has had no return of the haematuria since last note. He is eating & sleeping well.

There is still nothing either in speech or gait to suggest G.P. & there is no irregularity of his pupils.

April 7th Tonight patient had a fit. The writer did not see patient in it having just left the

gallery about a quarter of an hour previously. According to the attendants description patient was playing attaggatelle & suddenly fell down on the floor.
His face became very blue & he frothed at the mouth The froth being tinged with blood. Both arms legs moved Con. Convulsively.

Patient was unconscious for about five minutes & took about three or four minutes to get out of his dazed state. He dropped off to sleep shortly after & slept for several hours.
On visiting patient about 6 hours after the attack he described it to his stomach. By that time he was quite recovered & felt quite well.

Patients mental condition still continues free from the ataxia exhibition which was formerly its characteristic. He is very facile & good-natured to a degree. He does not work with such satisfaction to his worldly conditions now his symptoms together away. His labial & buccal muscles show some slight choreiform in action & his speech is attended a little thick & tremulous.

H. P. 5-63.

Matthew Peters, 22

Admitted 5th January 1890.

Pauper Patient chargeable to New Monkland.
Single, a baker and Protestant residing at 7 High Airdrie. First attack of Insanity, of a few days duration and cause unknown. Not epileptic but may be suicidal & dangerous. No H.P.

Medical certificates bear that he is full of delusions such as that one of the Doctors is his brother. That he is impeached for high treason and that his father is a Sheriff. His conversation is incoherent & his manner excited.

On admission he is fairly quiet and not inclined to say much but in what he does say there is not much sense. A physical examinn. shows that he is in good health & no lesion of abdominal or thoracic viscera can be noted.

October 28. 1891

February 28. Has been much more excited of late sleeping badly talking quite incoherently and having to be kept in the house. He inclines to sit a great deal with his head down and talks away to himself. He is in short sub-acutely maniacal

March 7.

May 16. Has been rather quieter of late having had better nights and not so gesticulative or talkative. He is now working in the grounds but does not appear to have derived much benefit from that yet. He has many delusions though they are difficult to make out as he wanders a great deal. His bodily condition is indifferent but is better than it was and he has been having extra diet to fatten him.

July 4.

Aug. 25th

1892 April 8th

August 27. Has been perhaps a little more rational, playing cricket in the evening and taking an interest in the

Aug. 15th Oct. 14th

Matthew Peters

cont^d

game but often talking away to himself all the time of the game. It cannot be said that there is any well marked improvement.

October 28. Just the same incoherent boy, improving none, sleeping & eating well but showing no evidence of return to mental health -. His bodily cond^n is good.

1891

7 March. There is no improvement in this case. He is very stupid & cannot be got to give a coherent answer to a simple question. He behaves in a foolish senseless fashion & chatters fragmentarily to himself. He is in fair bodily condition.

July 4. Much the same as at last note. Foolish incoherent & often talking to himself. He fields pretty well at the cricket & from his ability there one would expect his mental condition to be better than it is. His B H & C is pretty good.

Dec. 25th: No improvement here & none to be expected. His cast of countenance - shape of head - palatal arch - all seem to indicate a predisposition to insanity - He is considerably demented - & hardly ever intelligible. Makes many signs when talking, & laughs & chatters to himself - He is cleanly enough - but never asks to do anything.

1892

April 8th: Still semi-demented excitement continues: Incoherent to a degree. In fair health.

Aug: 15th. The same.

Dec. 16th No excitement now. He sits in the same place as a rule most of the day though now and then he can be induced to do a little work.

To p 520.

Alfred Duff Gree,

Admitted 13th Jany 1890

Fiscal case chargeable to Govan Parish. Said to be dangerous to the leiges and to have committed an assault on his brother. He is 25 years of age, single & by occupation a dyp-aters storeman. Resides at 197 Caledonia Road, Glasgow. He has been insane a few days. This is his first attack and the cause is unknown. He is dangerous to others & may be suicidal

17th Jany. There is no M.P. stated. He is said to have assaulted his brother with a ham knife stabbing him. was removed to the Police office, examined by 2 doctors & found to be insane. He was taken over by Govan Parish 2 days after admission. He is a stout strongly built little fellow and has evidently been drinking hard indeed he confesses that he has. There is a good deal of humor about his hands & his face is slightly bloated. Since admission he has been quiet gives no trouble but is rather quiet and sullen. His sleep at night has been indifferent.

April 1890. Now pretty well tho weak. minded to some extent. Idles in a silly way and puts all his misfortunes down to drink. much improved in bodily health since he came and out every day working. Rather slow yet in manner & conversation and not quite up to the mark

August 25. Now practically well, conversing rationally & behaving in a very satisfactory way

October 11. Was seemly for Dunlop recently and is to day discharged

Recovered

Wellcome Trust

From 421

1890

5th Janry. Has has bobe kept in confinement for some days as he has a short but sharp outburst having thrown a chair at an attendant & threatened to kill him. He calmed down in 24 hrs and seems to have no recollection of anything having happened. He complains of some peculiar feeling at his heart often asking the doctors to feel his pulse. Pupils are at present very dilated & his manner is strange & distraught.

18th June Has been pretty well oflate, more amenable & pleasant. Is out at present working in the grounds and is quietly behaved. B. Health is good.

22nd aug. Threatened one of his fellow patients with a spade & has to be brought into the house. Lounges about caring nothing for indoor work and is now behaving well enough.

29th Oct. Has a cold abscess over the left breast opened recently. It was small & gave no trouble. It is now healed up. No mental change to report.

1891

7 March. Still very sullen & suspicious. If asked a question answers it in an abrupt & repellent manner. He is in good bodily health & condition.

aug. 31. Unchanged B. & T.C. good

Dec. 23rd Has become thinner & delicate looking lately. On examination there is found dullness & diminished breathing over the left base & axillary region - & general flattening of that side - In other parts there are rales - & interrupted breathing. The condition is one of thickened pleura & pulmonary disease.

Jo. Vol. IV f. 524.

Rev. Thomas Robertson
adm. Jan. 11th 1890.

Patient was admitted to Re West House today at the instance of his wife.
He is 52 years of age & a minister of the United Presbyterian Church, residing at Brossbank, Shetland.
This is patient's second attack of insanity the first having occurred when he was 28 years of age & a student.
The present attack has lasted less than a fortnight. The cause is not known.
For some time previous to his illness he had been depressed about his religious matters especially about the comparatively small amount of success in his ministrations in comparison with that attending the work of some revivalists who came to this parish.
He has been violent at times but has not been suicidal though he might be: he has not been subject to epilepsy.
A Cousin on his mother's side was insane.
The medical certificates bear that he is quite apathetic to his surroundings refuses to answer questions & to take his food. His wife states that he has delusions about his preaching not having been faithful & that his soul is lost.
On his admission which was on the emergency certificate patient was absolutely apathetic, refusing to answer questions

Jan. 12th

Jan. 13th

Rev. Thomas Robertson

& taking no notice whatsoever of his surroundings. Ammonia of spearing & tossing were sufficient to stir him out of his lethargic condition.
He is a man of obese habit with very soft & flabby muscles. His heart & lungs are normal & there were no marks of injury on his person. He had two small sores at the root of his nose which looked as though caused the pressure of eye glasses.
Patient had a very unkempt appearance looking as though he had neglected himself this being further strengthened by the neglected condition of his toe nails which were very long & curling over the points of his toes.

Jan. 12th. Patient slept after 1 a.m. but was very restless before that. Beef tea was offered him during the night but he refused to take it. He is today as apathetic as ever lying like a log in his bed & taking no notice of any thing or any body. He took only a little milk to his breakfast.

Jan. 13th Last night he slept well & took a little beef tea during the night. Today there is almost no difference in his condition saving that when spoken to his breathing is changed into a series of peculiarly loud

Rev. Thomas Robertson.

Sighs. Took only some tumblerfuls of milk yesterday.

Jan. 14th. On making his night visit last night the writer was struck with the peculiar character of patient's breathing which was rough & noisy & somewhat laboured. Skin moist also as before. Chest was carefully examined but nothing found. Temperature was taken & found to be 99°.4. Enema was given with difficulty but with good effect. Taking nothing but milk.

Jan. 17th. Today patient was threatened with the feeding tube. Dr. J. had great difficulty in getting him to take laxative medicine having to pour it down patient's throat & nose.

Jan. 27th. Patient has now got beyond that state of despair in which he was plunged. He will now talk when spoken to but is still in the depths of despair at having "striven with the living God" etc. He is now taking his food with fair good appetite. He is having moderate doses of sulphonal at bedtime & this is helping his sleep very much.

Feby. 17th. Patient has improved greatly since last note. He now converses comparatively freely but with a certain amount of "dullness" which however may be habitual. He is taking now

Alfred Henry Watson.
adm. January 16th 1890.

Patient was admitted today to the West House at the instance of his Father.
He is 18 years of age, an apprentice draper (lately) & stays with his Father at 11 Kensland Street, Hillhead. He belongs to the Episcopalian Church.
This is his first attack & has lasted 21 days & the supposed cause is the excitement of going to America whence he has but shortly returned.
He is not suicidal but he is at times dangerous to others. He has not been subject to Epilepsy.
There is a N. P. in his case. His brother, (about whose antecedents little is known as he was an adopted daughter of her parents) was greatly addicted to drink which caused her death. A brother also was sent to one of the Colonies is said to have been insane in consequence of great privations which he underwent.
Patient was till a few months ago an apprentice in a drapery warehouse in this City. While there he did not have a very good character as regards his willingness to work. He had always to be kept at it.
About two months ago he went out to

Alfred Henry Walton

America to enter into business with his brother who is a farmer. There however he was much the same as in Glasgow not working well.

The first outbreak however occurred one day when he held a loaded revolver to his brothers breast & said he would shoot her. She however put him off from carrying out his threat.

Patient has always been in the habit of making grimaces & twisting his head about. The day before his admission Dr. J. saw him in Consultation & it was hoped that it might not be necessary to have brought to an asylum. During the night however he became very violent & had to be restrained. He was then brought here.

The medical Certificates bear that he has been very excited & violent & that he has various delusions to the effect that people are trying to choke him, to separate him from his Father & that he has to burn for 100 years.

On admission was much quieter than he had been during the night & answered questions asked him through in a loud tone in a very surly manner. Although comparatively calm his eyes had a somewhat excited look. His tongue was foul & dirty

Alfred Henry Walton.

but not trembles persuasion. His hands are both clammy & his face some-what pale.
His general health is good as also is his appetite.

Jan. 16th — Pat. took his food well yesterday & had laxative medicine. He is in consequence looking better. Has a curious fatuous way of smiling & twitching his mouth. His head turns & eyes curious circular movements as though in pain.

Jan. 17th — Last night patient was very restless rising every now & then from his bed & imploring in a most plaintive voice to be taken home to his father. He had a draught (Paraldehyde) which caused him to sleep after 1 hour.

Feb. 1st — This patient is now showing some signs of improvement. He is sleeping well & taking his food much better. He still has curious fatuous manner as before & still makes fearful grimaces. He is not so repellant in manner however. He has begun to practise the piano.

Feb. 10th — Patient is not making rapid progress towards recovery. He is at present in a kind of torpid condition & can only with difficulty be roused to speak & when he is roused he speaks in a jerking automatic manner.

p. 517.

505

Archibald Millar, 47.

Admitted 22nd January 1889.

Patient is to night admitted to East House. He is 47 years of age, married and a schoolmaster. Presently he resides with his son at 800 Cathcart Road, Govanhill

He has been insane about one week & this is his 2nd attack he having been in Merryflats in 1887. 10th July

Cause is put down as Drink and he is both suicidal & dangerous to others. No H.P. stated

Medical certificates bear that he is very nervous & excitable, has hallucinations imagines that he has had poison administered in his food and that he is heir to a fortune of £150,000

On admission he is moderately quiet, quite disposed to talk but easily managed.

23rd Jany. Slept one hour but was quiet the remainder of the night 10 Chloth
Is quite contented this morning. Knows where he is and acknowledges that he has been a heavy drinker. Seems to have a good deal of wee beng feeling about him. Shows a discoloration on his right hand & remarks that his wife did it with the poker. His pupils are widely dilated but equal They respond slowly to both light and accomodation. Knee reflexes normal. No ocular symptoms beyond the dilation of the pupils. Tongue protrudes readily and not tremulous. Fairly clean. Gait not accurately observable on account of lameness resulting from an old Potts fracture of the right leg.

25th Jany. Slee a little excited especially after being spoken to for some time but with no delusions. Confesses that the whole thing is due to drink but says also that he has not been drinking lately and that he never will drink again. His alimentary canal is now in a little better order & his appetite is good. He is slee rather restless at night

Archibald Millar

cont.

but his lameness prevents his taking much exercise. This lameness is also less than it was and he thinks the support given by a bandage to his foot is beneficial.

10th July. The suspicion that this might be a case of G.P. cannot now be entertained. He is really very well mentally and the only thing that attracts attention is the dreadful condition of the pupils. Wants away and when reminded of his having been in an asylum before he says that that was 8 yrs ago and as he says it is a good lesson that leaves its result for 8 years. Sleeping very well at night and with greatly improved physical conditions.

10 Oct. Discharged

Recovered.

Alexander Mackenzie In Crone
admitted 5th February 1890.

Patient is 33 years of age, unmarried, a traveller for a firm of brewers. He belongs to the Presbyterian Church & resides at 344 Saint Vincent Street. He is admitted at the urg. instance of his father.

This is his first attack of insanity & it is said to have lasted ~~three~~ two weeks.

He is not epileptic, suicidal or dangerous to others.

There is no Previous H.P. mentioned in certificate.

Patient's father states that a maiden aunt of the patient was insane for a few months at the Climacteric period: she did not require to be sent from home for treatment.

The medical certificates bear that patient has been very irritable & suspicious & has delusions that he has been drugged, & robbed by people who are trying to ruin him.

On patient's admission he struggled violently to escape & avoid detention. He soon however quietened down & was able to sleep in 2nd. & gallery.

He is very powerfully built man but too fat for his years. His face has a somewhat bloated & puffed out appearance as though patient was accustomed to free living. His eyes were slightly suffused & pupils somewhat dilated. No tremor of the tongue or hands was observable.

Feb. 6th

Alex. M. M. Crone.

Patients manner is frank, he readily answers questions & joins in Conversation during which he repeatedly gave evidence of the delusions under which he is labouring. He ascribes his troubles to a Court of Session action which he gained against a hotel Keeper who had set a dog at him & who in consequence of the loss of money caused by the action, failed. By this failure a number of rival travellers were affected & since then they have formed themselves into a conspiracy against him. To carry out this a Comic paper was started & in this he & members of his family were represented as prostitutes. Crowds used to follow him in the streets & he used to hear voices speaking to him.

The delusions about drugging only began a week ago but his friends had noticed him peculiar about five weeks ago at which time he had been overindulging in liquor.

He admits to having taken a good quantity of alcohol but not to excess lately.

Feb. 6th Patient slept well last night & this morning has been busy writing

Alex. M. M'Crone.

to the Sheriff explaining about the conspiracy & demanding his release.

Feb. 8th. A friend of patients who was here today states that for the last years or more not a day has passed during which patient was not more or less under the influence of drink. Some of his closest friends were anxious about him some months ago on account of his excessive drinking.

Patient still insists that his story about the conspiracy is quite true & appears to get people to corroborate his statements.

Feby. 16th. Patient has been urged for some time to get a friend to corroborate his story about the 'Comic newspaper conspiracy'. Two days ago such a friend came to see him & was unable to do so. Patient now trades the lack of proof by stating that it is this friends brother who can prove the truth of his statements. His delusions are evidently pretty deeply impressed. Apart from his delusions however is quite coherent in conversation & behaves in quite a seemly manner.

March 8th.

On a new patient being admitted a few days ago ~~Pat~~ Mr. M'Crone insisted that he was a thought reader who had been sent to annoy him, this of course being a part

Alex. M. M Crone.

of the general conspiracy.

It would seem from information received that there is a well marked H.P. & all apparently on his mothers side.

A ~~aunt~~ aunt, an uncle & two cousins all showed signs of mental derangement. The aunt's case has already been mentioned, it ending in recovery.

The uncle's attack followed an attack of erysipelas & ~~was~~ he also recovered but relapsed again, the mental derangement being preceded again by the erysipelas: he died insane.

One of the cousins showed symptoms very similar to patient's & he only partially recovered. The other cousin recovered after two attacks of melancholia.

March. 6th Patient does not yet show many signs of improvement. To the visitor, it is true, he now says his delusions are not true & that he does not believe them but from information got from the attendants they still seem to be fixed on his brain. On more than one occasion he has accused other patients of reading his thoughts & speaking about him & has threatened to strike them for it. He complains a good deal about being detained here & says he "will make it hot" for us if he is not let away.

H. P. 626

George Alexander McLaren, 18
Admitted 11th Feby 1890

Private patient admitted to East House. Accountants clerk and resides at 13 Roxburgh St, Kelvinside. Has been ill for a fortnight but has been peculiar for four months. This is his first attack and the cause is unknown. He is doubtfully epileptic has spoken of suicide & is dangerous to others.

There is an H.P.

Medical certificates bear that he has a vacant look & general appearance of a person of weak intellect. He is under many delusions and his answers to questions indicate unsoundness by their absurdity.

On admission he is seen to be an overgrown boy, thin & anaemic & in a very indifferent state of health. He refuses to answer questions and in a word is in a state of stupor.

12th Feby. Slept none last night and was much inclined to rise out of bed and simply stands on the floor looking straight before him. To-day it is noted that his pupils are very dilated though fairly mobile that all his reflexes are sluggish and his tongue coated being only protruded after a great deal of ordering. He only answers questions after being repeatedly shaken up and then gives utterance to many delusions such as that he has no head &c that his legs are broken &c.

29th March Improving but very slowly. Is having nursing treatment baths, nourishing diet in abundance, mineral tonics &c &c. In spite of all these he shows little spontaneous action being inclined to sit & move & his circulation is very languid his hands being blue & cold.

May 31st

June 21.

July 28.

E. A. MacLaren
cont?

May 31st Rather better but improvement not uniform. Some-times wonderfully bright and cheery talking not very rationally but still more so than he did sometime ago

June 21. Continues to improve and when he walks with his father talks very rationally to him. Still inclines to stand about a good deal & not inclined to work with the others but he enjoys a game at cricket in the evening. His bodily health has greatly improved & he is now quite stout

July 28. The improvement having been maintained he is to day discharged.

Recovered

Richard J. Wallis, Fiscal Case
admitted 11th February 189

Case admitted to-day at the instance of the Procurator Fiscal
Patient is 38 yrs. of age & by occupation a traveller
for a firm of tea merchants.
This is his first attack of insanity & it has
lasted only a few days according to the warrant.
He was examined at the Central Police Station Feby 12th
whether he had been convicted on a charge
of using obscene & threatening language
He had delusions of suspicion about the people
in St Enochs Hotel & said they had put
poison into his food. He also accused his
Landlady of putting drugs into his food in 13th
order to stir up his amatory desires.
Patient is a tall striking looking man
who looks however much older than his years.
His appearance is typically "blasé." His dress
is of the latest fashion & his jewels more
numerous than valuable. General health fairly good.
He is somewhat excited in manner but
very polite & capable of coaxing. His speech
is somewhat stuttering though not marked
by so & his ideas express considerable men-
-tal exaltation. There is marked irregularity
of the pupils. His tongue is distinctly tremu-
-lous on protrusion. His walk is some-
-what straddling & points to increased base of sup-
-port.
Subsequent conversation with patient brought
out the fact that he considers himself a ser-
-vant of a nobleman & that through personal in-

fluence he could attach one of the Life Guards to himself as his body-servant.
He seems to be quite happy in his quarters & does not seem surprised at his being here.

Feby. 12th. Patient had a fairly quiet night but this morning is much more excited & gives utterance to numerous delusions chiefly of a religious character. He is beginning a struggle with the evil one. His ideas however express great self elation.

13th. Patient passed a bad night only sleeping for 3 hours. He was very noisy shouting & praying most vigorously with the perspiration pouring off his body as though in an agony of soul. He was able however to pull himself together for a time & explain to writer that he was subject to difficulty of micturition at times: he also asked for a specimen bottle.
Today he has been very excited throughout shouting at the pitch of his voice as during the night. His struggle with the evil one still goes on. In order that he may have nothing false in his being he today tore off a military pad which he usually wears on his chest. "Away with everything false" he cried. He continues this shouting & grovelling on the floor till forced from

to p. 547.

James Robertson Black.
adm. Feby. 14th 1890.

Patient is 22 years of age & a clerk. He is a member of the Baptist Church. He was brought from his father's house Tower Villa, Sweetmouth & admitted to the West Ward at the instance of his father. This is his first attack of insanity & it has lasted 2 weeks. The alleged Cause is "religious meditations".
There is an H. P.: his mother committed suicide.
He is not epileptic or dangerous to others but has already injured himself by cutting off both his testicles & the greater part of his scrotum with a razor.
The medical certificates bear that he has injured himself as above, that he has various religious delusions as to his being Adam etc. & having been chosen by God to act as a go-between between his uncle & women: that he hears mysterious voices & thinks he has been removed to a place called Hellfield.
Patient is tall & thin & has peculiar & somewhat effeminate way of speaking. The wound on the scrotum is almost healed but there are still some granulations & also a slight discharge of pus. His skin was hot but moist & his tongue dirty. Heart & lungs gave no evidence of lesion. The pupils are

Feby 14th

March 6th

J. R. Black.

equal but very widely dilated.
Patient seems to have no idea as to where he is & on being asked questions answers in a quite incoherent manner. Some questions he answered correctly but these only of the simplest kind such as his name age & thereafter became utterly confused. He is quite quiet however & lying in bed. He takes his food fairly well.

Feby 18th Patient rested quietly last night although he slept but little. He is so much the same state mentally today as he was y'day. His face has a dreamy far off look & his pupils are still dilated. Incoherence is still well marked.

March 6th Since last note patient has made a distinct advance for the better. He has got out of the torpor in which he was & is now able to talk for a time coherently. He still has thoughts in a much less marked degree than before, a dreamy far off look. His appearance is much brighter & his attitudes do not betoken so much listlessness. The size of his pupils is much decreased. He has a curious & almost effeminate tone of voice. His bodily condition has also improved much. The wound in the scrotum has now healed & Patient is gaining flesh.

to p. 527.

A. H. Halton

Cont. from p. 504

Feby. 17th Patient still is in a torpid condition lounging in chairs & taking little or no interest in anything that is going on around. He requires to be shaken & spoken to repeatedly before he answers questions & then he speaks in a very mechanical way. He is now however sleeping well & also taking his food. A blister was applied to his back with however but little result. This will be repeated however.

March. 6th Patient has made very little progress since last note. His manner is still repellent but tends now to be aggressive. He sits in a lounging manner in a chair & pays no attention to his dress or personal appearance. He answers questions listlessly in a sullen cavilling manner. He still continues to make the curious "faces" previously noted.

The thickening through repeated had very little effect on him. Now he is on Iron & Phosphorus to which however he is not responding much.

His bodily condition is improving slightly & he is eating & sleeping well.

Apl. 29th Patient's mental condition is not improving. He is still very repellent in manner & when spoken to rarely replies save in coarse abusive language. His conversation after a few sentences becomes incoherent. He still has thrush in less degree. The chronic bronchitis

May 15th

30th

July 22nd

Aug 5th

of his facial muscles. He sits in a most strongly manner & pays no attention to his personal appearance. Physically he is better & is now tending to get fat. He is sleeping & eating well.

May 15th Patient is now showing distinct signs of improvement. He will now speak pleasantly when addressed & has once or twice within the last day or two started conversation on his own account. He has begun again to play on the piano & wrote home for some more music. He is also paying more attention to his personal appearance. He is to be tried up in No. 4 gallery.

30th Improvement still going on. Patient is still a little childish in his manner but is losing this peculiarity. He is working daily in the garden & takes interest in the games. His power of concentration is improving also: this is very marked in his practicing of the piano as also in his attention while playing cricket. His bodily health is very good.

July 22nd Patient still continues to improve but is very unstable in his manner. He is very aggressive & blustering in conversation & demands, when he is to get home. His bodily health & condition are very good. He is still in No. 4.

Aug 5th Improvement still going on. Patient is becoming more subdued in his manner & gaining in self control.

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Rev. Thos. Robertson.

Cont. from p. 501.

interest now in things around him & is reading a good deal. He sleeps well & has a good appetite for his food. He still declares that he will never get better.

March. 5th Since last note patient has made a vast improvement which has been gradual & sure. He has now thrown off his depressed lethargic condition & is now practically well. He takes a great interest in things going on around him & his conversation is frank, cheery & altogether humorous.

Last Sunday he was out as much with the head attendant & was greatly pleased with it as also benefited so much so that he is to repeat the experiment next Sunday & spend it with his nephew.

Bodily he has also improved greatly his face having lost the sallow bilious look it bore on his admission. He is taking his food well & has gained in flesh & of this he is himself aware. Today he complained of passing stool per rectum due to piles with which he has been previously troubled.

He fully realises how ill he has been & is very thankful for his recovery.

Mar. 22nd Discharged today Recovered.

1843 June 6th

July 4th

Mathew Peters

cont: from p 496.

When spoken to very often doesn't answer but grins and points to his clothes. BH & BC fair.

1893

June 6th His mother is desirous of taking him away for a change and also to see whether he would not do at home so he has been taken away to-day on probation. There is no real change nor is there any hope of his getting better as he is demented. He seems harmless however.

July 4th Taken off the Books to-day.

Discharged Relieved

on

July 4th 1893.

Thomas Duffus, 60

Admitted 16th. Febuary 189

Private patient admitted to. day to East House. He is married and a cashier, usually residing at Gourock.

He has been insane about 2 mos this being his first attack and the cause being probably Cerebral Haemo He is not epileptic or suicidal but may be dangerou others No H.P.

Medical certificates bear that he is completely unable to himself or to attend to his affairs He becomes h when spoken to and exhibits a restlessness me Sanity.

The following information is obtained from his wife he has been married for 25 years.

Up to the Summer of 1885 he enjoyed good health and so fa she knows he never had Rheumatic fever nor kidney disea In the Summer of 1885 when walking in the street he had a shock He did not become unconscious nor did he lose the entire power of his ~~left~~ right arm & leg but both were very perceptibly diminished in power. His Speech was not affected nor does his wife think there was any paresis of the face, or tongue He was soon able to return to business but there always remained a slight drag in his walk In the Winter of 1886 he had an acute attack of inflammn of the kidneys with oedema of the limbs &c. This confined him to bed for about six weeks and his wife seems to think he has never been the same since. From that time dates his mental weakness, slight at first and evidenced by irritability and being easily put out - He was always a quick tempered man, later by loss of memory and speech becoming imperfect, & by fits of passion & loss of restraint

Till about the middle of December 1889 ~~often~~ he continued much the same, his family bearing with his peculiarities & ill-temper,

Thomas Duffus.

contd.

complain of great headaches and the loss of mem-
marked. The headaches seemed to be principally
ife states that his head perspired greatly espec-
& scalp. Towards the end of December of
morning it was evident that he had had a
speech had been noticed previously & the mi-
morning was quite unintelligible and the
es to one side the right. Face was also twisted
His wife states that there was no loss of
in the arm or leg
mission he was quiet but his speech was so in-
was impossible to make out what he says.
xamn shows a hypertrophied heart with very
mur at the apex. Urine s.g. 1020 highly
. In sem-granular tube casts, but no blood.
ses by the dynamometer in the two arms. Sen-
-sation all over the body is normal and the only thing to be noted
is the increased knee jerk on the right side. No clonus.
Bowels constipated, tongue furred, pulse 68 and regular

10th. Mch. Has improved somewhat since admission and from his mental condition has given no trouble. His speech is now more distinct and he is quite happy taking his food & sleeping well. From his indistinct speech delusions &c cannot be ascertained but it is unlikely he has any. Urine & cardiac condition as before.

22nd Mch. To-day just after dinner he died very suddenly. There was at first a suspicion of choking as he had not risen from the table but the nurse saw him within a very few minutes & before he was dead & ascertained there was nothing of this kind. The cause of death was unquestionably Haemorrhage

Died

No P.M

Apoplexy

521

Thomas Duffus, 60

Admitted 10th. Febuary 189

Private patient admitted to. day [illegible] He is
married and a cashier, usually
He has been insane about
attack and the cause being pr
He is not epileptic or suicidal b
others no H.P.
Medical certificates bear that he is com
himself or to attend to his affairs
when spoken to and exhibits a re
Sanity.
The following information is obtain
he has been married for 25 years.
Up to the Summer of 1885 he appe
she knows he never had Rheumatic
In the Summer of 1885 when work
he did not become unconscious nor
of his ~~left~~ right arm & leg but both were very perceptibly diminished
in power. His Speech was not affected, nor does his wife think
there was any paresis of the face, or tongue He was soon able to
return to business but there always remained a slight drag
in his walk In the Winter of 1886 he had an acute attack
of inflammation of the kidneys with oedema of the limbs &c. This
confined him to bed for about six weeks and his wife seems
to think he has never been the same since From that time
dates his mental weakness, slight at first and evidenced by
irritability and being easily put out - He was always a quick
tempered man, later by loss of memory and speech becoming
imperfect, & by fits of passion & loss of restraint
Till about the middle of December 1889 when he continued much
the same, his family bearing with his peculiarities & ill-temper,

Thomas Duffus.

cont.

Then he began to complain of great headaches and the loss of memory became more marked. The headaches seemed to be principally frontal, and his wife states that his head perspired greatly especially the forehead & scalp. Towards the end of December & on awaking one morning it was evident that he had had a slight shock. His speech has been noticed previously to be imperfect but that morning was quite unintelligible and the tongue was protruded to one side the right. Face was also turned to the right side. His wife states that there was no loss of power at this time in the arm or leg.

On admission he was quiet but his speech was so indistinct that it was impossible to make out what he says.

a Physical examn shows a hypertrophied heart with very distinct P.S. murmur at the apex. Urine s.g. 1020. highly albuminous with fine semi-granular tube casts, but no blood. There is no difference by the dynamometer in the two arms. Sensation all over the body is normal and the only thing to be noted is the increased knee jerk on the right side. No clonus. Bowels constipated, tongue furred. Pulse 68 and regular.

10th March. Has improved somewhat since admission and from his mental condition has given no trouble. His speech is now more distinct and he is quite happy taking his food & sleeping well. From his indistinct speech delusions &c cant be ascertained but it is unlikely he has any. Urine & cardiac condition as before.

22nd March. To-day just after dinner he died very suddenly. There was at first a suspicion of choking as he has not risen from the table but the nurse saw him within a very few minutes & before he was dead & ascertained there was nothing of this kind. The cause of death was unquestionably Haemorrhage

Died

No P.M

Apoplexy

523

William Mc Ilwraith, 42

Admitted 21st Feby 1890.

Duriâ patient admitted to day to East House. He is 42 years of age single and an architect residing at "The Gavels Brookstow". He has been insane 3 mos. This is his first attack and the supposed cause is Overwork. Neither epileptic nor suicidal but decidedly dangerous to others. No H.P.

Medical certificates bear that he has a confused dreamy manner and has numerous delusions of suspicion eg. that his food is tampered with. He also states that he has to place his bedstead against the door to keep people out. He accuses his sisters & mother of conspiring against him.

27th Feby. It is somewhat difficult to form a correct estimate of this man mental condition and his insanity is determined more from what has taken place in the past than from what can be made out of him in even a lengthened conversation.

It may first be said that his father brought out several patents and when he died he left his son William to carry out several ideas which has only been partly put in shape at the time of his death. The patient therefore has been working at these and at ideas of his own for some time and especially since Dec 1889 he has done things which led his friends to infer that his mind was disturbed.

about 2 mos before Xmas he became very sleepless and sat up to all hours. Insisted on his bed being made in a particular way and made mr cushions out of oranges an idea for utilizing orange skins from which he expected to derive much profit. Then by mixing paraffin oil & water and burning the mixture he said he has got a light which would excel the Lucigen one say a man selling cannot come to his mothers door. & some were bought. He insisted on wrapping one up & carefully sealing & keeping it. He became fantastic in his dress & fond of

William Mc Murraith
cont^d

ornamenting it. Took unusual precautions at night locking his door and barricading it and screwing his bed posts to the floor right through the carpets &c. Became suspicious of the food cooked for him always smelling it and insisting on boiling the water he washed in in a separate vessel. He was in the habit of going away for days without saying where and when away letters would come to him written by himself and containing a Xmas card or some such thing and many of these letters the containing no valuables were registered. He afterwards went to France where he stayed for some time and has to be brought to London where he was in lodgings which he has to leave on account of his eccentricity of behaviour. While in London he saw Dr Savage but his opinion is not known. While all this was going on he was unfit for mental work and hence he comes to be here.

Some days after admission when the writer saw him and had a long talk with him he was so much on his guard that little could be got out of him. He declines to be drawn and when some of the above deeds were mentioned he laughed and acknowledges that they were foolish but asks of a man could not smell his food without being thought insane. In the asylum he is quiet, inclined to complain about the attendants & food, and refuses to walk round the grounds with the other patients. Asks for a great many things such as drawing books, colours &c &c.

10th March. Dr Yellowlees and the writer have had long talks with the patient and in several of these he has shown if not actual insanity and mental derangement yet an amount of mental twist pointing probably to the fact that were he at home this would have opportunity for freer play and also leading one to think

To p. 531

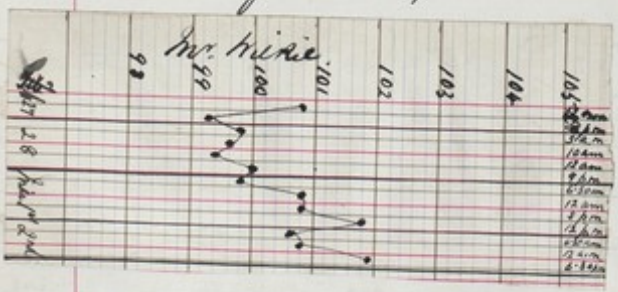
John Wilkie Senr.
Cont. from p. 407.

of pain over the precordium but com-
plains a feeling of weight & shortness of
breath
A blister was applied over the heart &
℞. digitalis given at intervals.
Today he is somewhat better though
still very breathless: heart stands to be very
weak & irregular, but is answering
to the Digitalis. The pain over the left
Kidney is also much relieved.
Since the pericarditis started there has been
a considerable rise of temperature for
which see chart

March 8th. Yesterday patient was much weaker altho' the
pain much lessened. Heart action was very ir-
regular & fluttering. Patient took little or
no food today. Towards evening he gradually
became weaker & died at 10 minutes to one
this morning.

Died.

Cause of death, Pericarditis



Alex. Gr. In Crone
from p. 5-10.

March 6th He is quite coherent in conversation & is able to control himself pretty well. At times he has an excited look in his eyes but this is exceptional. He is of a sociable disposition & plays cards & other games with the other patients.
He is in good bodily health & has gained flesh working as on his admission.
" He suffers at times from dyspepsia & piles which bleed but not to any great extent.

April 8th This patient shows a good deal of improvement since last note. For the past three or four days he has been free from his delusions about people reading his thoughts.
He has been sleeping in No. 1 gallery since the 30th of March when he was very noisy at night hammering at his door & threatening to break the furniture of his bedroom under the delusion that one of the attendants was reading his thoughts & speaking to him while he lay in his bed.
Since that date however he has improved as noted above & will soon be able to be tried once more in No. 4 gallery.
Physically he is also looking much better. He is thinner & has lost the puffy bloated appearance he had on admission.
As a rule he is sleeping well.

to p. 5-65.

I. R. Black.

Cont. from p. 516.

March 6th — He does not seem yet to realize how he has mutilated himself nor other things his memory is deficient.
He is at present on a course of Iron. Quinine & Strychnine & is responding well to it.
His father was here a few days ago was greatly pleased at his improvement.

March 31st — Patient has made still further progress both mentally & bodily since last note. He is working in the garden daily for some hours & working well.
He is now much brighter & will open conversation on his own account. He has lost to a certain extent the dreamy manner previously noted. He is now sleeping well & is to be tried on Dr. 4.

April 28th — Patient still continues to improve somewhat but is very dreamy in his manner. For the past few nights he has been restless & last night was raving. When asked why he said he could not help it. He says at times he feels as though he had lost all his self control.
He is in good bodily health.

May 12th — Taken away by Father today & discharged Recovered.

1890
Nov.
1891
7 March.
July 4
Dec 23rd
Dec. 31st
Jan 1st
Jan 2nd

William Campbell

Rowe p. 435.

1890

Nov.

1891 7 March. Still slowly sinking but no marked change within the past few months. At present there is a good deal of irritation of his scrotum & thighs due to urine. A small tumour probably cystic is developed on his right upper eyelid & is now about the size of a pea.

July 4 There is little change in this case. No bed sores have formed & the irritation on thighs is gone. The small tumour on eye lid has not grown much & gives no trouble. His pupils are irregular, the right dilated, and react sluggishly to light.

Dec. 23rd Lingering on - an advanced case of dementia & general paralysis - He is bedridden - emaciated - speechless & indifferent to everything - & has to be tended like a child - There is enormously exaggerated tremor in the arms, almost a clonic spasm, when they are held up - & all the muscles tested & contract. The (large) limbs are much drawn up & contracted - & there is great muscular wasting -

Dec. 31st All last night he had a series of slight shocks - not convulsive - but mostly taking the form of abduction of conservatives, with twitchings of limbs - in a very slight degree - This morning he is very weak - & his pulse is failing.

Jan. 1st Sinking, undoubtedly - dying from brain atrophy & exhaustion of all vital power.

Jan. 2nd Death - at 1.15 A.M. this morning.

P.M. G. Paralysis of Insane Register.

Thomas Mc Fadyen, 21

admitted 5th March 70

Brought to the asylum to day from Greenock asylum where he has been as a pauper since 13th Jany. and ad- 8th
-mitted to the East House as a private patient

He is single, aged 21, and a stationer's assistant and has been insane about 3 mos. The cause is unknown He is not epileptic or suicidal but may be dangerous to others No H.P. known. 14th

The transfer certificate bears that he has delusions of suspicion and that he is somewhat anaemic.

A quiet, tall anaemic looking boy, shifty in look & manner and in very indifferent general health. His personal history is that he was picked off the street and educated by a Glasgow gentleman. Who his parents were is not known & H.P. cannot be ascertained. He is an acknowledged mas- 13th March.
-turbator & tho he avers that he has now stopped the habit it is doubtful. He confesses he practised it when a boy "Masturbation grafted on a hereditary neurosis" (T.Y.)
He converses readily enough but not with any amount of free- -ness. His words are hesitating and to every sentence he prefixes you see. His whole manner, the downcast look and rather dejected air proclaims the masturbator 28th Oct.

6th March. an examination to-day shows some doubt on the con- -dition of the heart. It would hardly be correct to say that a distinct murmur exists but it would be equally incorrect to say that the sounds are pure. a note will be made at a later date regarding this. Lungs are sound. He confesses that he said his foot was poisoned once but now he believes it must have been mistaken and in a conversation with him to-day no actual delusions could be brought clearly out Weak-minded he certainly is, but granted that no H.P. exist

Thomas Mc Farlane
Contd.

not it is hoped too far gone for recovery.

8th Just the same. Says he would like home but makes the request in a very half hearted way. Sleeping well and taking his food well. Says that he was much troubled some time since with Rheumatic pains and that he is easily made breathless.

24th Much the same mentally but better physically. Says he likes being here now better than he did. Does somewhat incoherent in his conversation and shifty in his manner. Would avoid work if he could manage it. Now working in the garden which he objected at first but now he has become reconciled to it and it is doing him good.

13th Albany. Improving none in spite of exercising, feeding & garden work. Does not enter into anything with any interest and when at work in the garden requires constant supervision. If left alone in the Gallery he buries his head on his hands and seeks on being roused up he does not resent it or get angry but smiles & saying he was all right walks away to another seat.

28th Oct. At times this man's case has seemed hopeful but after making some progress he has always relapsed & it cannot be said that during the last few months there has been any real improvement. His excitable reckless & thoughtless want of coordination in his thoughts & deeds.

Go Vol. IV p. 277.

John McKenzie Hamilton, 29
Admitted 6th March 1891

1890

Pauper patient chargeable to New Monkland, admitted to-day. Twenty-nine years of age and resides at 22 Commonhead, airdrie. Married & a joiner. He has been insane for an uncertain period and this is his first attack. Cause is not known. 25th March

He is not epileptic or suicidal but may be dangerous to others. No M.P. states 18th May

Medical certificates bear that he has delusions & hallucinations. Imagines he can converse with persons during the night who stay miles away by the agency of a spirit. Believes himself to be the Prince of Peace and says he has received a divine call. 29th Oct.

Quiet, but cheerful and happy on admission. Laughs & is in anything but a depressed condition. Strikes up an acquaintance at once with the other patients 1891 7 March.

7th Slept some hours last night and is quiet to-day. Silly in his talk and manner. In good physical health.

8th Noted to-day as being restless and noisy during the night assumes the titles that he was St Pentecost and has a great mission. Taking his food well. Bowels freely opened by aperient medicine. Aug. 28.

1892

11th Mch. Has been sleeping much better. Still rather too happy & light to be normal. Says he is the Angel of Light & that where he is there can be no darkness. In other respects more sensible. always has a Bible in his hand when speaking to any one. April 5th

18th March Very much improved especially mentally. Has now no delusions or at all events does not give expression to them. Sleeping well at night without draught of any kind and eating well. Aug. 15th

John McKenzie Hamilton
cont.

1890

26th March. Continues to improve and is now really very well mentally tho he has fallen off a little in body. He is to-day sent out to work in the Grounds. —

13th May. Improving tho somewhat slowly. His bodily health is not all that could be desired and he is thin. Mentally he is better and disclaims his old delusions. —

29th Oct. The improvement if there is any is very slow & he is not bodily what he ought to be. remaining thin & anaemic & with some suspicion of beginning chest mischief. Quiet & despondent about himself and having not the least wish nor making the slightest effort to get well. —

1891

7th March. This patient has improved considerably in bodily condition. Mentally he is still very reticent sullen & rebellious in manner. He is still very delusional.

Aug. 28. a very silent, sullen & rather suspicious man. believing the Doctors know more than they tell & that they are responsible for him being here. His B.O.T.C. is good but he is becoming demented.

1892

April. 8th Has 'ups & downs'. Has been often silent & reserved, & entertains fanciful ideas about his being here, & those that keep him. At present however he is fairly well and working at box-making in the garden. His bodily health is pretty good.

Aug. 15th In fair health. but not improved mentally from last noted condition.

So Vol. IV p 24

533

David Craig. 37

Admitted 6th March 1890

Private patient admitted 8 days to East House. Hers 37 yrs of age and an oil-merchant residing at 121 Gartsland Drive, Dennistoun. He has been insane for about 17 mo and this is his first attack. The supposed cause is Business reverses and pecuniary difficulties. Neither suicidal nor epileptic but dangerous to others.
an uncle was insane and in Gartnavel 20 years ago (Capt. Alex. Taylor. See case Jours Vol. p.)
Medical certificates bear that he has persisted in keeping his bed without sufficient cause for a year. Thinks his bed is full of needles and says he has been in Hell.
From his sister the following information is obtained. He has been insane for about 2 years and delusions of suspicion first attracted attention. Complained of being followed on the street, of his friends laughing at him & of being watched. People also mesmerised him. Later delusions of jealousy appeared, especially where his wife was concerned. Did not believe his children were his own. Then he believed himself to be inspired, a prophet &c.
His sister also states that the probable cause may be failure in his business. He is an oil merchant & some years ago lost a considerable sum thro' a fraudulent partner. His jealousy against his wife is quite unfounded as it was a love match and he married when really he had not a sufficient income to justify such a serious step.
He has not been intemperate and previous to this illness was a very likeable fellow.
He refused to come to the asylum and was brought by 2 police constables with whom he came quietly enough. A little excited after admission refusing to put away his

7th

24th March

13th Aug.

David Craig
cont.

hat. saying he was not going to stay. In the evening however he become quieter and went to bed readily.

7th — Slept a few hours last night and was quiet. To-day he manifests his sanity but seems affected by his position here. Says his bed last night was all right but the one he slept in at home was full of Electric needles and that he was constantly being magnetised. Not at rest yet. goes about the Gallery with hat in hand as if expecting a summons out. Denies any "tiff" in the affection existing between himself and his wife but wont say any thing about his inspiration. Physically he is a heavily built man, but rather soft. No disease detected on physical examination -.

21st. March. — Still somewhat resistive & sullen and sleeping badly. sometimes for 4 hours at night and at other times rather better. He answers questions readily enough but manifests no desire for spontaneous conversation. Declines to work in the Gallery or in the Grounds and wont wear house slippers but gives no reason for refusing to do so. Takes his food only indifferently well and spends most of his time pacing up and down the Gallery.

13th April. — Some improvement in this patients condition has now to be noted. Up till about 3 weeks ago he continued sullen & refused to take interest in anything. Now however he is working daily in the garden and his manner has considerably changed for the better. He replies more cheerfully when spoken to and does not slink away from one. When approached on the subject of his delusions he is extremely reticent and it is doubtful if his belief in them is at all shaken. He is sleeping better at night and his appetite remains good

J. P. 595

535

John Forrest

admitted March 1st 1890.

Private patient admitted to the Hospital at the instance of his brother.

He is 47 years of age, single, a protestant & of no occupation residing at Barrhead by Lanark. March 27

This is his 5th attack of insanity & he has been more or less insane for 27 years. He has been in this asylum 3 times before & was last discharged in p. 55. Nov. 1889. He has also been in Bothwell asylum.

The Cause is uncertain probability being that this attack is due to the previous one. He is neither epileptic nor suicidal but he is at times dangerous to others. " 27th

2nd H. P. The medical certificates bear that he is restless & requires restraint: that he is in a state of dementia from which he can with difficulty be roused to answer questions: that he takes an interest in everything: sits with his eyes fixed on the ground & is incapable of taking care of himself. Apl. 8th

On admission patient was depressed & restless in his manner & only answered questions with pressing & in an abrupt fashion. He was calm & quiet in demeanour. He remembers having been here before & recognized the attendants who had known him before. Apl. 16.

Bodily, he is in good health save that he is a martyr to asthma which usually is worst at night.

March. 2nd Patient did not sleep at all last night being troubled with asthma tho' not to a great degree. He was somewhat excited during the night. When writer was making his night visit patient was more reticent than during the day but his conversation was very abrupt & aggressive. Today he is again very taciturn & sits gazing before him in an absent manner.

" 3rd Patient slept better last night though troubled a little with his asthma. Mental condition same as yesterday.

Apl. 8th There is very little to note in patients mental condition. The depression still continues but patient will speak when spoken to though he rarely starts a conversation on his own account. He has been troubled pretty severely for the last few nights with his asthma. He received a good deal of benefit from taking Liq. Morphinae in drop doses of a 1% solution.

Apl. 16. Patients asthma is now gone but it has been replaced by an attack of excitement. Patient is very restless both during the day & night. He is very careless about his dress & has a slovenly unkempt appearance.

to p. 5363.

537

James, Alexander Forbes.

admitted March 4th 1879.

Patient was admitted as a Voluntary patient to the West House.
He is 5-9 years of age & a retired gentleman, married & a protestant.
He has been ill for 29 years ever since he had a fall from a horse in Australia. While in Australia he used to drink freely but does not do so now.
He is very depressed irritable & suffers from fearful headaches & also is a dyspeptic. April 29th
He is a well nourished man but his face expresses his depressed mind. He takes no interest in reading as it makes his headaches worse. He seems to be able to talk of little save his own miserable condition. He has the usual "dyspeptics sade mecum" viz the shape of drugs for his stomach.

March 5th Patient slept little last night & complains bitterly of the noises made by the trains & also by the early rising of the other patients & attendants. He says he feels very depressed, the morning as usual being his worst time. May 9th

March 31st Patient is still very depressed about himself & seems to suffer very intensely from his headache. Nothing satisfies him viz the way things go for his sleeplessness which is not

so great as he would like to make out.
He has very apptly one day at being found asleep in the afternoon & asserted most strongly that he had not been sleeping.
His dyspepsia has not troubled him much since his admission. He is taking a good deal of exercise in & outside the grounds with his attendant.

Apl. 29th Patient shows some slight improvement at times. His condition varies greatly he being one hour depressed & another very irritable & restless: when in latter condition he has a great craving for tobacco which gives him relief for the time.
Three days ago he went home to Edinburgh & has benefited greatly by it being almost cheery on his return yesterday. He admits now that he sleeps much better when he thinks he does. His bodily health is fairly good & his dyspepsia has not troubled him much of late.

May 9th Today patient was very excited & restless. His hands were warm & moist & showed a good deal of tremor. His face has a somewhat "unslept" look to which draws visitor's attention. He complains greatly of his headache & is in great distress in case it should have been due to his own folly in smoking.
He is still very self-centred & broods over his health.

to p. 599.

P. R. Hay Jaggannadham.
from p. 470.

March. 10th Since last note patient has continued to improve steadily namely until now he is quite well. He is working hard at his medical work & is in great hope of going forward for his examination in July. He seems to realize how ill he has been. His bodily health is much improved altho' he is still very thin.

April 21st Today discharged
Recovered.

July 1890. Patient still keeps very well & has sent word that he has passed his 2nd professional exam. at Edinburgh.

1891
august. Patient graduates "M.B." this summer at Edinburgh and is doing very well. C.R.O.

March 10

May 5th

" 12th

June 8th

Rev. H. M. Hall.
from p. 468.

March 10th Control over his ~~emot~~ feelings & when spoken to very often breaks down & weeps. His views of the future are still very gloomy & he thinks that his condition is the cause of great suffering to others. He takes a great interest in all matters connected with his home district but these as a rule seem to deepen his distress & hopelessness about himself. He reads very diligently & is sometimes healthy but about when sleep prevents his doing so. He is inclined to be very much upset by very little matters.
Physically he is extremely strong. He has got over his attack of influenza but is troubled a good deal with dyspepsia as also with palpitation.

May 5th No change to note. Bodily health fairly good.

" 12th Went home today on probation with an attendant.

June 8th Today discharged
Relieved.

Readmitted
Vol IV p. 107.

James Mc Arthur
from p. 445.

March. 10th for letters & then he will start in a month.
His general health is fairly good. He eats, sleeps well.

May 16th This patient is at a standstill as regards symptoms. Mentally he is still confused & facile & evidently has a sense of "how ill". He is very hearty in his manner & readily Congratulates one on looking so well. Oct. 30th
He does not seem to realize where he is & talks about going to his office in afternoon as though it were an every day occurrence with him.
He is given to making sarcastic remarks about the other patients some of whom have complained of his threatening them. Feb. 13th
Physical signs of G. P. are not very marked save for the irregularity of his pupils.
There is little or no lingual & buccal tremor & his gait is unaffected as yet.
His face has a heavy & expressionless look.
He sleeps quietly & has a good appetite.

July 22nd No change to note.

Aug 5th This patient's mental condition shows no change since last note.
His face has still the heavy expressionless look but shows little or no tremor. His tongue shows very slight fibrillar tremor but tends to become arched on protrusion.
There is no affection of his speech even for difficult combinations of sounds.

The pupils are unequal the right showing marked contraction: ~~they~~ both however react both to light & accomodation.
The Knee reflexes are ~~absent~~ in both legs.
There is no tendency to fall on standing with feet close together & both eyes shut.
There is no implication of his gait.

Oct. 30th The physical signs of this patient's disease show no change. His voice at times is tremulous but this is not constant. His mental condition continues as at previous notes, the chief feature being his defective memory.
General health is fairly good.

Feb. 13th – Very little change to note, unless the fact that he has lost to some extent the cheery manner that he had when the visit was made in the morning or evening. He now tends more towards absorption in his newspaper, and he does not speak as a rule till he is addressed. Occasionally he makes enquiries about the keys of his office which he says he misses from his pocket; but he is easily satisfied about them. He had a congestive attack not long ago one evening, from which he was quite recovered next morning. His gait is not yet what might be called a S.P. gait; but he is not quite so strong upon his legs as he was.

Continued in Vol. IV, p. 247

Alfred George Collingridge. 38.

Admitted 8th March 1890.

Private patient admitted to day to East House. She is 38yrs of age, married and resides at 40 Stanley St. Pollock-shields. By occupn. he is a jewellers assistt

Hers stated to have been insane 14 days and this is her first attack and the cause is put down to Business.

Hers both suicidal & dangerous to others. no H.P. known.

Medical Certificates bear that she has a restless & excited manner, say that robbers are watching him and that he intends to shoot them. Is restless and very excitable and wones ought play the piano all day long.

On admission hers very excited, admires the pictures on the walls and offers great sums of money for them. asks about silver plate being under the belief that he came here to see the asylum some thousand pounds worth of plate.

9th March. Slept 2 hours last night being excited & restless but not co-orently realising where he is. To-day he is rather quieter but very boastful and when encouraged tells of great achievements he has done &c. There is some double vision according to his own accounts & distinct ataxia he being quite unable to walk along a plank or to stand alone with his eyes shut. His physical health is fair. He confesses to have had Gonorhoea but never Syphilis. There is some indistinctness of speech but no actual thickness and tho there is a slight tremor of tongue it is not marked. Pupils are moderately dilated, but the left reacts more actively than the right. He has been married about 18 mos & his wife has had twins Has been treated by the local doctor for Locom. ataxia

Alfred George Collingridge
cont'd

April 25 The delusions of grandeur are not now quite so marked - that he is simply boastful by nature is having made wonderful breaks at Richard's g before the Queen &c. which is known. He cant sing a note and on Concert was amusing to hear him trying to ets - He also dances much altho the 'annot him. There is evidently some ease at all events at present in calmer. Inclined to fret a great deal ee sort of thing which cant be given

removes by his wife, there being little , condition, the ataxia remaining fewer evidences of actual brain inflammation

Relieved

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Admitted 8th March 1890.

Private patient admitted 8 day 8 East House. She is 38 yrs of age, married and resides at Shields. By occupn. he is a jewel. Hers stated to have been insane first attack and the cause is pu Hers both suicidal & dangerous to o

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On admission he very excit on the walls and often speak them. asks about silver pe that he came here to see th pounds worth of petals.

9th March. Slept 2 hours last night being vaguely realising where he is. To-day he is rather quieter but very boastful and when encouraged tells of great achievements he has done &c. There is some double vision according to his own accounts & distinct ataxia he being quite unable to walk along a plank or to stand alone with his eyes shut. His physical health is fair. He confesses to have had Gonorhoea but never Syphilis. There is some indistinctness of speech but no actual thickness and tho there is a slight tremor of tongue it is not marked. Pupils are moderately dilated, but the left reacts more actively than the right. He has been married about 18 mos & his wife has had twins Has been treated by the local doctor for Locom. ataxia

April 26. He an but of to l eve but

26. He cha but inc

Alfred George Collingridge
cont'd

April 25. The delusions of grandeur are not now quite so marked and it may be that he is simply boastful by nature but he talks of having made wonderful breaks at Richard's of having sung before the Queen &c. which is known to be untrue. He cant sing a note and on Concert evenings it was amusing to hear him trying to outsing the others. He also dances much altho the ataxia was against him. There is evidently some trace of the disease at all events at present so he is much calmer. Inclined to fret a great deal and ask for all sort of things which cant be given him.

26. He to-day removes by his wife. There being little change in his condition. The ataxia remaining but there being fewer evidences of actual brain irritation or inflammation

Relieved

William Napier, 65

Admitted 10th March 1890.

Son's address 18 Lauriston Rd Chiswick

Voluntary patient admitted 8. day to the East House. Age 65 years of age and has been getting very depressed for 3 mos past. His son states that he has no suicidal tendencies. He was insane before and in this asylum for 11 weeks. That is about 30 years ago and he made a good recovery.

Admitted 8. night as a voluntary patient. A stout well built strong looking man evidently much depressed and conscious that he is mentally ill. He is to sleep in a single Room in No 4 Gallery.

11th March. "Extract from account Book."

"While sleeping in an unlocked room this patient was seen he says about 5h a.m. with a sudden feeling that the day of judgement was come and he therefore broke the window in order to get out by it. In so doing he cut the left side of his head on the glass dividing the temporal and post. auricular arteries. The night attendants visit was made immediately thereafter and medical aid was at once obtained before much blood was lost. At 11 p.m. and at the two previous visits of the night attendant at 12 and 2.30 a.m. he has been found sound asleep. Steps are being taken to have him arrested".

9th March

9th March

at 5.30 a.m. this morning the writer was awoke to see this patient. He was then in the Infirmary ward where he had been brought by the night attendant. He was bleeding profusely and the above named arteries were spouting freely. They were ligatured but even then the haemorrhage was considerable & necessitated a good deal of pressure. Ultimately it was however arrested. and the head washed

24th March

William Napier
contd.

and dressed. During this time he kept on moaning, saying he was a lost man &c that a case has come to him in the night and that he tries to answer it. He seems to have awakened from sleep rushed blindly to the window, breaking the glass and one of the astragals first with his hand & then putting his head thro the opening. To. day he is quieter & evidently penitent. The wound is not dressed to. day and he is of course kept in bed To. night there is no fever, and no medicine but haemorrhage is still going on. He fainted twice this afternoon on endeavouring to rise but has taken food well. Mem to. day certified and discussed as a Voluntary patient being readmitted to. morrow on a Warrant.

13th. March. The wound is doing well. It has been dressed once and there is no suppuration. Dressed now with some antiseptic. Mentally he is still very depressed and says he is damned &c that there is no hope for him &c. He meekly attempted suicide again to. day. He has not yet been allowed up but seizing the tumbler standing at his bedside he broke it and with the sharp edge he attempted to cut his throat. Beyond scratching the skin he did no harm. He has been very restless at night and to night is ordered 20 grs Chloral & 30 Bromide.

17th March. Allowed up to. day for the first time. Wound still doing well Professes to be or is much ashamed of his conduct and says he will do better in future. Pupils to. day are much dilated and there is a furtive look about him that is not satisfactory Physically he is better and is now beginning to get some colour into his cheeks.

24th. March. Very much better especially mentally and also physically Confesses he does not know what was wrong with him when he attempted suicide, but puts his hand to his head &

Jos. 548.

Richard J. Wallis (Facial)
from p. 5:14

Feby. 13th — Exhaustion to cease.

Feby. 20th — Since last note patient has been maniacally excited with only short intervals of quietness being brought on by simple weakness & fatigue. His nights have been very noisy & his excitement has been great & this in spite of constant walking in airing courts & gentle persuasion the use of drugs. He has not been taking his food well & his bowels have been constipated.
For the past two nights however he has been somewhat quieter & today he shows signs of settling down. His struggle with the Evil one & his woes over the results he expected being in his favour. His cry now is "victory".

25th — Patient is now much quieter & greatly pleased with himself & everybody else who he meets. Sleeping better at nights & taking his food well. He is having Sulphonal 30 at nights.

March. 3rd — Patient is now settled down & very happy. He is sleeping well.

11th — Patient still getting calmer & more rational. Ideas still express great elation with occasional references to his late victory. General health much improved. His appetite is good & his complexion is much brighter & clearer.

24th — Removed to day to Spaldwick Union
Relieved

William Napier

From p. 5746.

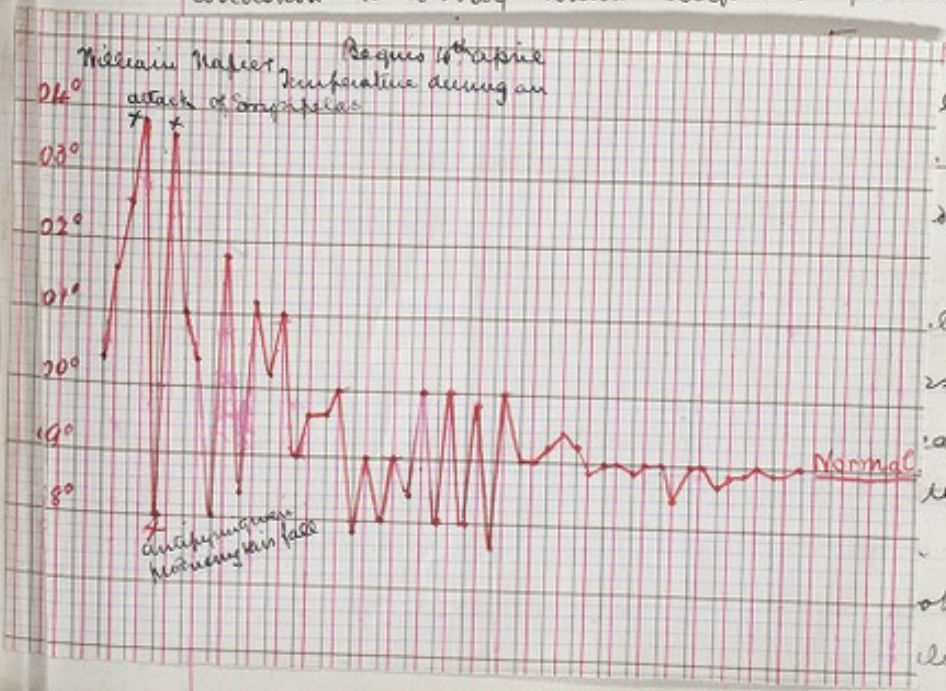
says it is all muddled. He is now sleeping well at nights is not despondent and looks at things in a more cheerful way.

14th April. The wound is now nearly well and he is very bright & cheery. Sent up to Ward 4 and going out regularly. Eating & sleeping well without drought.

4th April. Probably he has got cold in one of his eyes for it is very swollen (the left) and there is some fever the temperature being 100° to night. The parts affected are the eyelids and the wound which is not yet quite healed up is not in the least inflamed.

5th April. The parts swollen to day are distinctly erysipelatous and there is some serous matter in a blister under the lower lid. Temperature to day is 101°2 and pulse numbers 110. His mental condition is also worse. He is low & despondent and thinks he wont get better. Some simple sedative ord-ers for to night.

6th Ap. The lower lid is to day punctured in various places and a considerable quantity of serous fluid escapes. His general condition is to day much improved probably by a brisk



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charge has stopped
is soon to be
ear to be very
reach for because
dangerous tend-
ening has been
done To 585

Richard J. Wallis. (Facial)
from p. 3:14

Feby. 13th — Exhaustion to cease.

Feby. 20th — Since last note patient has been maniacal excited with only short intervals of quietness being brought on by simple weakness of [illegible]. His nights have been very noisy & his excitement has been great & this in spite of constant walking in airing courts & giving the use of drugs. He has not been taking his food well & his bowels have been constipated.

For the past two nights however he has been somewhat quieter & today he shows signs of settling down. His struggle with the Evil one & his woes over the results to be expected being in his favour. His cry now is "victory".

25th — Patient is now much quieter & greatly pleased with himself & everybody else who he meets. Sleeping better at nights & taking his food [illegible] at nights.

March 3rd — Patient [illegible] He is sleep[illegible]

11th — Patient s[illegible] Ideas st[illegible] casional [illegible] General heal[illegible] good & h[illegible] Cleaner.

24th — Removed [illegible]

4th April

4th April

5th April

6th Ap.

Removed

William Napier

From p. 5746.

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6th Ap. The lower lid is to-day punctured in various places and a considerable quantity of serous fluid escapes. His general condition is to-day much improved probably by a bath Salina administered yesterday & the temperature is lower.

7th Ap. Continues to improve but a considerable portion of the lower left eyelid has sloughed and he has developed otitis media of the right ear. Notwithstanding these he is cheerier and mentally better.

8th Ap. Eye is now quite well & the ear discharge has stopped. Mentally he is bright & well and hopes soon to be able to go home. His tissues appear to be very prone to take on an erysipelatous attack for because a slight bruise on his ankle showed a dangerous tendency to get very red & fiery looking has it been let alone To 585

Hugh Kennedy Erskine, 27

Admitted 22nd March 1890

Private patient admitted to-day to East House. He is 27 years of age, single and in the gas engineering business. Resides at 6 Newton St. Glasgow. He has been periodically affected with Insanity for 10 years having been in this asylum 6 years ago. The duration of the present attack is put down as six days and the cause is unknown. Not epileptic. suicidal or dangerous to others

No N.P. known.

Medical certificates bear that he is very melancholy, ashamed to be seen out of doors, confesses to excessive masturbation. Has had several attacks of melancholy, used profane language without cause and is always afraid of doing wrong. —.

On admission he is very dull & sleepy looking, answers questions very slowly and says he is sent here for misbehaviour at home.

25th March. Not much improvement yet in spite of rousing up treatment. Inclines to moon about the wards not doing anything. Bowels have been freely opened & He has stimulated to act freely. He has no delusions that can be made out but will not talk freely about himself.

2nd April. Distinctly better. Cheerier and taking an interest in things going on around him and eating and sleeping well: and in every way improving —

21st April. Still improving. Working regularly in the Garden and bright and cheery. Appetite good & sleeping well.

13th May. Continues well. Was out on leave one day seeing the Cattle Show and returned all right.

October 30. Has has one or two attacks of depression of late but just now is very well. B. N. Good.

To Vol IV p. 505

Henry Cormack

From p. 436.

1890

Jany. This is an undoubted G. P. with many of the characteristic symptoms of G. P. and at present with a strong religious element, imagining he holds conversation with angels with Christ &c. His sleep at night is very indifferent and it is often difficult to get him to take food, and medicine.

October 29. Is now entering the 3rd stage or well on in the 2nd. Quieter and more easily managed but very [illegible] with the strong religious cast in all his delusions [illegible] There

August 18. Has got much worse [illegible] fused to bed. His lungs are now involved and bedsores are forming in spite of his being on a water-bed &c. He never talks any now & is obviously very ill.

Aug. 27. Got gradually worse & this day he

Died

No P. M.

549

Hugh Kennedy Erskine, 27

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To Vol IV p. 505

1869 January. October 29. 91 March. August 19. Aug. 27.

Henry Cormack

From p. 436.

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October 29. Is now entering the 3d stage or well on in the 2nd. Quieter and more easily managed does not steer with the strong religious cast in all his delusions and with the speech symptoms very marked. There is also at present a great difference in the size and mobility of the pupils. Bodily he is in fairly good health but is of a very loosing.

91

March. Patient has now become very dull & stupid talks very little. He is listless in his attitudes & careless of his dress. He is occasionally noisy at times & frequently wet. He is thin & pale.

August 18. Has got much worse recently and is at present confined to bed. His lungs are now involved and bedsores are forming in spite of his being on a water-bed &c. He never talks any now & is obviously very ill.

Aug. 27. Got gradually worse & to-day he

Died

No P. M.

IV. p. 505

William McIlwraith

Bompas 574.

1890.

Mch 10th (contd) that since admission there may have been some improvement He is taking his food fairly well complaining of it a good deal and also sleeping well at night. He holds himself rather aloof from the other patients and has reading a good deal says that he is working out several ideas in his brain.

Mch. 26th The other morning he showed more temper than he has yet done at the writer's morning visit when his welfare was enquired of he became very excited & made accusations against all & sundry after about 10 mins he quieted down. Since last note also he has shown some eccentricity in his dress. For a scarf pin he wears an ordinary pin with a piece of orange peel stuck on the end of it. With a box of water colours which he got he paints in a fantastic way the envelopes of letters he writes & in a thousand other little ways he shows his mental derangement.

April 2nd as evidenced by his conduct this patients mental condition has not improved since the last note. He is extremely insolent and impertinent not only to the officers of the House but to some of the other patients and to his sisters when they come to see him. When said Good morning to and his health enquired into he refuses to answer or endeavours to look at the speaker and if a reply be insisted on he does not give a very civil one. Sometimes he says "Why do you come to me with your hollow mockery of a good morning" and then he gets furious and in his rage is incapable of distinctly articulating his words. Lately he has written letters to various members of Parliament asking them to put a question in the house regarding his case and he has been in correspondence with the Board of Lunacy, not getting much satisfaction

Repeat

28th Aug.

8th May

12th June.

William McIlwraith.

He has been sleeping very indifferently tho this he denies and his appetite is not very good. He refuses to take medicine and scorns the medical skill he has here.

28th Apl. Just the same. On the evening of the last concert he got under one of the beds of the dormitory where he remained till the end of the concert and would have remained longer had his absence not been discovered and his place of concealment found. As Repellant & over-bearing in his manner as ever and with no change to note.

18th May. Insolent & impertinent and showing no improvement. Declines to see his sister when she visits him or if seeing her sings so for a few minutes only. Fond of saying smart things (?) and then walking away with great dignity. B. M. T. C. continue pretty good.

12th June. In this man's behaviour there is a great want of the calmness and reason of sanity. He bears himself with hauteur and insolence and takes no pains to show that he is a reasonable man. As noted before at the morning visit he is exceedingly impertinent refusing sometimes to say Good morning. When pressed for an answer he gets excited and there is a great amount of tremor of his muscles of his lips and muscles tongue. His utterance becomes indistinct and he clenches his hands. His pupils are usually dilated & there is no difference in size. His answer to the morning salut. and enquiry as to his health is usually "What your business Give your verdict. I despise you and stamp you under my feet. In the Gallery he associates with the worst more patients and interferes with the medical treatment of the other patients telling them they are quacked and offering to do better for them

To p. 570

William Gemmell, 38

Admitted 29th March 1890

Private patient admitted to-day to East House. He is 38 yrs of age and by profession a physician. residing and in practice at Beith, Ayrshire. He has been insane for 2 weeks but peculiar for months and this is his first attack of Insanity.

Probable cause is over-study with alcoholism & morphia habit. Neither epileptic suicidal nor dangerous to others. No H.P. 29th

Medical certificate bear that he has delusions, such as that he came to Germany in a hansom from London, that he is Bismarcks attendant &c. His father states that of late his behaviour has entirely changed and he is evidently in a very excited state

On admission he is in a very excited state, not much motor excitement, and beyond moving about the room is quiet bodily but talking incessantly and quite incoherently. On examination of his person showed a large excoriation on the dorsum of the right foot and several ecchymoses on the shoulders. From his brother who accompanied him it is ascertained that he has been addicted to morphia drinking, having also taken Chloral & Bromide. 30th

Some time ago he believes he had discovered some wonderful medicine and asked to have his name taken off the Medical Register in order that he might advertise it. It was of the nature of a bacillus-destroyer. He was when at College a distinguished student and since graduation he has worked very hard and probably has not taken sufficient rest 31st

1st April

2nd April

28th Slept none last night. Has to be put in the Padded room not for his violence but to keep his noise from disturbing

William Gemmill
Contd.

	the others. In the same state of excitement to-day. Talking continually and absolutely incoherently, never finishing a sentence and his words having no meaning on the questions asked him. It is found impossible to persuade him to take medicine and to-night he is given 3ii Paraesclyde by the nose tho not without difficulty. He is taking his food fairly well, spilling a good deal of it &c.
29th.	Slept none last night but was rather quieter. Bowels moved to-day. This forenoon he is very noisy and is given m. 40 of Paraesclyde hypodermically. Its effect was almost instantaneous. He became quieter, but did not sleep and in about 1 hr the effect began to wear away. In his soup to-day he is given 45 grs Sulphonal. No other change to note.
30th.	Slept 3 hrs last night but was very noisy the remainder of the night. Given 60 grs to-day in the same way. Conversation as incoherent as ever and none of the motor-paralysis of Sulphonal yet evident.
31st.	Slept 6 hrs last night and gets to-day other 60 grs Sulphl. His pulse to-day is 68 good & full. Tongue white & foul but slightly cleaning at edges. Reflexes are sluggish & pupils rather more dilated than on admission but normal.
1st April	Slept 6 hrs last night but yet not the least evidence of the Hypnotological action of the drug. Speech shows no thickening, slurring or slowing and the heart action is good. Locomotion is not affected. Ordered 90 grs to-day. Mental condition unchanged.
2nd April	Slept only 3 hours last night & was restless.

J. H. 579.

555

James Lyon

admitted March 22nd 1890.

Patient is 32 years of age & a surgical instrument clerk. He is unmarried & is admitted as a voluntary patient.

He labours under the delusion that he is 23rd
acquired syphilis having exposed himself to risk of it about three months ago.

He is not epileptic or dangerous to others he tried however to commit suicide with a revolver which fortunately had been tampered with.

So far as known there is no N. P.. 24th

On admission patient was very depressed & assured the writer that there was no doubt as to his having syphilis in spite of the fact that Dr. Cameron had told him he could find no trace of it.

His conviction as to his having syphilis was founded on his body being (according to his statement) covered with spots & also on knowledge acquired from a book on venereal diseases written in the last century.

He seemed to think there was nothing left for him but death & that a perhaps 25th
unnecessarily one. 3rd

He says that he has lived a regular life & has not masturbated since grim youth He admits however that lately he has been smoking to great excess: he says he smoking the whole night before his ad

-mission.

His general health is good this body Pt small well nourished.

23rd Patient did not sleep very well last night but this morning is somewhat better. He is very depressed & thinks he would be much better at home where he could treatment for his malady. He does not like the peculiar chattering ways of some of the patients.

24th Patient slept some last night & had at his own request to be removed to the refractory gallery. He was allowed to lay & sleep on 2nd. flr but became so restless & excited that he was to. - Ran down.

Today he is looking fresher than on his admission possibly owing to his tobacco supply being limited. He says the patients are all avoiding him owing to the horrible smell which arises from him.

25th Patient slept better last night.

31st Patient is now sleeping much better being still a little restless at times. His delusions are still very fixed. He says that the attendants are speaking to one another about him. What about this his door to him.

James Lyon
Cont.

He asked the writer today if he was to be kept here till he was cured or died & immediately thereafter asked not to be sent away. He is very nervous & thinks that everything any person does is to affect him.
Today he is better Tinct. Cardamom. bis die
Liq. Strych. 3i Aqua 3viii 3ss 8va die.

April 8th. This patient shows signs of improvement. He is now coming to the conclusion that he cannot have had syph-ilis. This conclusion however is not firmly established in his mind as yet but is in process of building.
His manner is still nervous when speaking. He has a curious way of closing his eyes for a time & dilating his nostrils while conversing.
He thinks he is getting better here but also that his progress would be more rapid if he were back at his business
He is still very self centred & very anxious in case there will be a great "scandal" (sic) in Greenock over his having been in an Asylum.
Physically he is also improved his face having a healthier colour & his muscles having more tone than on his admission

May 2nd

May 26th

Apl. 29th. The improvement noted in patient's condition has not continued. He does not realise

that his illness is a mental one & not a bodily one. On all other subjects save his own condition he is sensible enough but on these subjects it is difficult to get him to talk. He is very self centred. He is now having the freedom of the grounds but complains about having no same person to talk to. When writer (whom patient acknowledges is same) speaks to him the conversation always drifts round to himself & "what would you advise me to do"? His mental & physical powers are very slow in starting & he seems unable to follow out any train of thought. His bodily health is now good but patient is still apt to smoke all his tobacco in the few days after getting his allowance but he is learning to be more careful however of his limited store.

May 2nd. Patient left today with his Aunt & Cousin. Discharged Relieved.

May 26th. Patient today paid a visit to writer to consult him as to the truth of an alleged homeopathic cure for Cancer. Patient feels certain he is going to have it sooner or later. He allowed himself to be talked out of his delusion. He has gained in weight since leaving the Asylum & says that while at work he feels quite well.

William Haddell
admitted April 3rd 1890

This patient is a "voluntary" one. He is 26 years of age, single & by profession an dentist, having previously been five years in an architect's office. He was today admitted to the West Home.

He is suffering from depression & has talked about committing suicide. He is not epileptic or homicidal.

He had a similar attack of depression about two years which however passed off in a months time by means of rest & change to the country.

The alleged cause is masturbation which he has practised since he was 21 years of age.

The present attack began about two months while he was working at his profession in Ipswich. He then had delusions that certain people were trying to do him harm. To get free from them he left his home for three days & three nights & one day crossed two large ditches in order by passing thro' water to baffle the blood hounds which he believed were following him.

For some time before this however & since he has been working very badly having lost all interest in his work.

It is also alleged as a cause of his depression his being dependent on his father for support.

His pictures do not sell well although he gets them exhibited readily enough.
On admission he was very anxious to get away having evidently repented for the time being of his resolution to become a patient.
He is somewhat stunted in growth his face has a pasty look his skin a cold & greasy feeling. There is an eruption of acne on his back but his thoracic organs show no signs of disease.
His weight is
He is somewhat reticent but answers questions & acknowledges that he has been given to self-abuse having learned the habit from a companion.
His pupils are equal but widely dilated & he will not look one straight in the face for any length of time.
His hands are sluggish in action.

4th Patient slept very little last night but rested pretty well. His mental condition is just as last night, he being quiet & reserved standing apart from other patients. I have a Black draught.

5th Patient was working in the garden today for a few hours & tonight is looking better & fresher.

8th Patients appearance shows great improvement. His complexion is much clearer &

William Haddell
Cont.

the extreme dilatation of the pupils is now gone. His manner too is frank & his eyes do not refuse to meet another's gaze as on admission.
Yesterday & today he refused to go out to the garden to work. He is giving a good deal of trouble & remains in the grounds as he thinks of going home & considers the best way is over the asylum walls.
He is now on a mixture containing Strychnine & Arsenic with Liq of Calumba. April 29th

April 18th Patient is not making good progress towards recovery but rather the reverse. The improvement noted in his manner & last note has not continued. He has again got the shifty gaze & almost shamefaced look which he had on admission. He displays a great deal of apathy & torpor both in his bodily & mental acts: his walk is slow & all his actions & he takes a long time in beginning anything. So with body & mind. Just as you expect him to answer a question there is a pause & the question may have to be repeated several times before an answer is got at all. His conversation is rambling in the extreme. May 2nd

A new symptom in his case which he co

heard to-day is that he hears voices speaking within. These voices are of people he knows. Thus he heard his Father calling him an "infidel" & other terms of reproach. Other voices asserted that he was a bad man.
For 2 or 3 mornings he has refused to take his food on the ground that he will not live if he does not take food & accordingly will pass away from the Asylum when dead. He always takes his dinner & tea however.

Apl. 29th — Patient's condition is much the same as at last note. His torpor is if anything increased & at times amounts to a semi-cataleptic condition. He still occasionally refuses a meal on the same grounds as before mentioned. The condition of his pupils varies markedly being now dilated widely & again contracted. His bodily condition is improving. The Strychnine & Arsenic mixture has been changed for one containing Iron & Quinine as it seemed to be increasing the rigidity of his muscles.

May 2nd — Patient left to-day with his Father to go to Arran.

Discharged Relieved.

Re-admitted May 27th 1893. vide Vol VI p 106.

James Anderson Leitch

Cont. from p. ~~494~~ 494

Apl. 7th — There is no marked tremor in his tongue nor is gait yet affected.

Apl. 18th — Since last note patient has not been working at all still being pale + tired looking. On being questioned as to his health he admitted having passed some blood per rectum for two or three days but not having taken much notice of it.

Patient was informed the writer that he had also had a return of the hæmaturia but had purposely concealed this in order that it might not damage his prospects of getting away home.

His urine examined last night proved the truth of this there being a very considerable quantity of blood easily seen by naked eye readily by microscope + Guaiac test: the deposit also contained some bladder epithelium.

June 18th — Urine re-examined today shows no trace of blood but a very plentiful deposit of white crystals: Sp. Gr. 1 is high 1025:

May 5th — Urine was lately examined daily for a week. On the first two days there was a trace of blood: then one day with heavy cloudy deposit: thereafter free of blood + other morbid products.

June 12th — Yesterday + today patient has shown decided tendency to go back to his former hypochondriacal state of mind. He has greatly exaggerated some of the

leading articles in the daily papers & prophesies that portentous changes will follow very shortly. He has also been talking with great gratitude for the kindness of a friend with whom he used to do business. This business was evidently according to patient on a very large scale hundreds of thousands sterling being involved. His face is shaking today & his facial muscles show a good deal of tremor.

Tonight patient came out of his bedroom when the writer was passing through & informed him that he was sleepless but busy thinking out some splendid scheme by means of which he would not require to speculate any more in order to make money.

June 18th Tonight patient had another severe congestive attack. It occurred shortly after tea while the patient was playing at bagatelle. The attendant noticed that Mr. Lilch was trying in vain to strike his ball with [illegible] & went forward to see the reason. Patient then became unconscious & fell on the ground in a general convulsion. All his limbs were involved but the attendant is of opinion that the convulsions were more severe on the left side the body being turned towards that side. Patients face became livid & almost black.

to vol. IV p. 29.

Alexander M. M^c Crone
from p. 5-26.

April 22nd The signs of improvement which were note in this patient have now disappeared. His delusions are still very fixed & it would seem as though patient had simply managed to conceal them for a time. About a week ago as a drawing room patient was pleasant & talked & danced with the ladies with evident enjoyment. When not so employed however as when a song was being sung patient suddenly bows his head & proves anxious by his suspicions of some one trying to read his thoughts. These delusions of thought reading are still firmly impressed on his mind. But in addition to these he is now accusing the writer of causing him pain in various parts of his body as in abdomen & shoulder. The former of these probably arises from dyspepsia with which he is sometimes troubled but the origin of the latter cannot be discovered.

May 30th

When reasoned with about these delusions he laughs in a disbelieving way & meets every argument with "Oh I know all about it." He is restless occasionally at night but not noisy. He is still in No. 1 gallery.

May 16th Patients delusions are still very fixed & since last note patient has attacked two of his fellow patients under the belief that they were reading his thoughts. He constantly asks when

July 22nd

he is to get away when this illusory tremors is to be stopped".
He wrote to his mother stating that he was going to change his name, probably in the hope of putting an end to his persecution.
He also about a fortnight ago broke his watch – a Waterbury – by knocking it against the wall at the boundary of the grounds.
For this action he could give no reason.
His bodily health is good & his weight is becoming more proportionate to his years than it formerly was.

May 30th This morning patient had another outburst of violence. He was proceeding to attack another patient against whom he has several times previously vented his illwill, whom he today thought was making an improper use of his (Mr Brown's) name when two attendants interfered by placing themselves between the two.
Mr. Mr Brown immediately turned on them & struck them several times.
When remonstrated with for his conduct he immediately burst out in a furious passion & said he was not going to be made a fool of.
He was ordered a strong purge.

July 22nd Patient shows no signs of improvement. His delusions as to being hypnotised are still very fixed.

to Vol IV p. 75.

William Milligan
adm. Apl. 8th 1890.
See O.S. vol. 22 p 375.

Patient is 68 years of age, single, a solicitor & a protestant.
He is admitted into the West House at the instance of his sister who lived with him at 9 Breadalbane St. Dumfries.
This is his sixth attack of insanity & it has lasted 7 days. The cause is stated to be the previous attacks to his bodily illness in shape of a severe attack of influenza which began 3 weeks ago.
His last illness was in 1882-83 for which see journals referred above.
He is not epileptic, suicidal or dangerous to others. There is no Brown S.P.
The medical certificates bear that he is quite unmanageable at home: has used filthy & obscene language towards his sisters, calling them "Bitches." That he has taken an animus against his friends & that he has refused to eat for a week.
On admission patient was somewhat excited & very abusive in his language. He directed his abuse chiefly against the Superintendent for being away from home at the time of his arrival. The people too came in for his wrath & he called them by all sorts of coarse obscene names. The only thing that made him stop speaking was his getting hoarse & weak.

Wm Gilligan

He is in a very weak bodily condition. His illness has told greatly on him & he is very thin. His breathing is laboured & somewhat quick & on examination there was found to be dullness at the bases of both lungs & also some crepitant & muco-crepitant râles. These however are limited strictly to the bases. He has little or no cough.
Pulse is rapid being over 100, & irregular & his hands are hot & moist. His face expresses a good deal of exhaustion. Temperature is quite normal.
On his chest both back & front are several areas of broken skin due to perspiring.
He was ordered food & stimulants to be given regularly through the night.

9th Patient slept fairly well last night save from 2 am. till 4.40 when he was delirious. He had stimulants & some arrow-root. This morning he is somewhat better but still weak although he himself says he is well. Pulse is stronger than last night & only 90 per min. His tongue is very clean, red & dry & also painful. Mentally he is much the same as last night. His powers of observation are endless & he is never at loss what to say next.

10 p. 6.71.

David Boyd

Cont. from p. 5-4.

April 10th The cuts were quite superficial, resembling each in direction about ½ an inch in length. The instrument he used was a small piece of glass ¾ in. square which he had picked up in the grounds. When asked his reason for doing this he said he was doomed to hell fire.

A stitch was made in each wound.

" 11th Wound is now healing quickly.

May 16th The wound is now healed but patient is not improving. He is still deluded.

July 22nd No change to note in patient's case. His bodily health & condition are fairly good.

Oct. 30th This patient's bodily health is fairly good. Though he is subject to attacks of colic resulting from constipation. His mental condition shows no change. He is quite convinced of his own utter unworthiness & eats drowns.

1890 October 29.

1891 7 March.

Mar. 1892 – Nothing to note bodily or mentally.

May 4th. This patient is still continually depressed and in his attitudes, expression of face, voice, & remarks, exhibits a fixed and intense misery. His delusion seems to be chiefly that he is doomed for ever to hell. He complains a few days ago of pain in his head, and his tongue was furred. Some Hay Powders & Rhubarb relieved him readily

To Vol. IV page 495.

William Mc Straith

from p: 552.

himself. Continues to be fantastic in his dress and has destroyed several articles of clothing brought him by his friends.

His bodily health is pretty good and Physical examinations have failed to reveal evidence of organic change of any organs. His appetite is good, and he sleeps well. —

1890 October 29. Remains the same repellant man, abusive & self asserting and declining to hold intercourse with the Officers of the asylum. He now believes (see Letter) that he is kept here by Freemasons and that the Doctors are in league with them. However he says that a day of reckoning is at hand and that this place is to be blown up soon and then the writer that the experience he is having here will soon fit him for Perth Penitentiary. His bodily health is good & he eats & sleeps well but refuses to interest himself in anything going on in the House.

1891

4 March. Patient shows no improvement. His delusions as to the Free Masons are very fixed. He is very abusive to all Officials of the House & to his relatives. He is very fantastic in his dress & is very destructive of his clothes. Lately he was found deliberately cutting through the upper of his boot with a piece of glass. His letters are ornamented usually in a childish fashion.

He is in good bodily health & condition.

top page 365. Vol. IV.

William Millington
Cont. from p. 5·68.

Apl. 10th Patient slept about six hours last night & took a good deal of nourishment in shape of eggs milk & stimulant.
This morning he complains of a feeling of tightness across his chest.
He is also coughing a little.
Examination of his chest still shows considerable amount of congestion.
He is still abusive & violent on having his pipe.
His urine is high coloured but otherwise normal.

Apl. 13th

About 2 p.m. today patient had an epileptiform seizure. The writer was not present when the fit commenced but from the attendants description it would seem to have begun with tonic spasm followed by clonic spasms affecting both sides of his body & accompanied by a good deal of cyan-osis. Quarter of an hour afterwards he had partly recovered consciousness & in half an hours time he was as abusive as ever. There was no paral-ysis of the limbs & following but he seem to be some slight paralysis of the mouth. This however is doubtful as patients speech is always somewhat mumbling owing to his want of teeth.
Previous to the fit patient had been snoring.

Apl. 20th

Wilson Milligan.

Patient is very obstinate in refusing his food which he can only be got to take after a great deal of coaxing. He is always ready for Stimulants.

Apl. 13th. For the past two days patient has gained a little strength. He is now taking nourishment more readily. He is still very weak however. His skin is warm & moist perspiration being profuse. Tongue is dry & red slightly furred at one side. Pulse regular very rapid & averaging from 78 to 82. Temperature normal.

This morning about 11 am. patient had another epileptiform seizure similar to last but less severe than that of Apl. 10th. As on that occasion patient was taken screaming immediately before the fit. He was screaming first before the fit came on. There was today the same tendency to paralysis of the mouth after the fit passed.

Apl. 20th. Patient has now quite recovered from his bodily illness although still a little weak in his limbs.

His mind is far from strong & he cherishes great hatred for those who sent him here as he says without good cause.

In some respects his mind is very alert & active but his memory especially for

Robert Cowbrough, 76.

Admitted 10th April 190

Private patient admitted to East House. He is marg aged 76, and a draper's assistant residing at Broom Farm, Uckfield

He has been insane for 3 years this being his first attack tho of late he has been much worse. Cause is not stated but he acknowledges self abuse. He is not epileptic but suicidal not dangerous to others. No D.P.

Medical certificates state that he is melancholic, seems forgetful, does not sleep at night, says he is afraid of some one hunting him. His sister states that once attentive to his duties he is now lazy and is in co- 14th
-stant dread of something

11th April. Slept very little last night and on going into the ward this morning he is found sitting up in bed sing- ing Scotch Songs. Says he has a splendid voice and is rather incoherent in his conversation. Refused to take his food this morning. Ordered Black Draught and exer- cise. To-night he is quieter but refuses medicine and is inclined to be talkative

12th Just the same to day. In the airing court in the afternoon he walked to the water very sensibly and seems better to day 15th

13th At 12.30 this morning he became very noisy when sleeping in the Infirmary ward and the attendant put him in a passage room as he cannot be managed. There he became furiously maniacal butting his head against the pass & scratching his skin. To-day there is a considerable blood tumour under the scalp. The following is from the accident Book

" Robert Cowbrough a recently admitted patient sleeping in the 16th
" Infirmary Ward became very excited at 12.30 this morning

Robert Coudrough
cont^{d}.

"He was placed in a padded room where he was frequently visited by the night attendant. This morning he is found to have a considerable extravas^{n} of blood under the scalp & over the vertex caused by butting his head against the pads. There are also some abrasions of the skin of the legs & arms but none of any importance ^{cr} ——.

Since the day he has been with difficulty controlled being very maniacal and dangerous to others. as he refused all medicine he got a hyposcemic injection of Paraldehyde (60-70 ms) and this has quietened him a little. He is out in the airing court with an attendant as much as possible

14th Slept little last night and to. day is so beyond control that extreme measures have to be taken. He refused to keep on clothes attacked the attendants and patients and was in great danger of doing harm to himself. At 2 o'clock he is "packed" and remained in it till six when his face was beginning to look congested and he was removed The effect was very great & very quickly manifested. He became quiet, & drowsy and is now (10.30) asleep. This the day he took little food but at night he got 2 beat up eggs. milk and a little whisky

15th Slept all night but to. day is back to his furious condn of mania. Wet Packed again from 5 till 9 o'clock but this time with little benefit. He became quieter but simply of necessity and when removed from the pack he was very violent to those around. Fed with the tube at 10 and given ℥ii Paraldehyde, a little whisky, eggs milk & Black Draught.

16th Slept all night & bowels freely opened to day with much benefit. The blood tumour is now distinctly less in size

To p. 577

575

David Allison, 46

Admitted 19th April 189

Patient is a pauper chargeable to Cambuslang Parish. He is 46 years of age, married and by occupn. a ploughman but lately he has been working on a Pit head. He resides at 3 Flemington Rows, Cambuslang.

He has been insane for 3 weeks and this is his first attack, the supposed cause being injury to his head. He is not epileptic but is both suicidal and dangerous to others (No H.P.) Distinct H.P. a brother & aunt having been insane. Medical certificates bear that he has twice attempted to poison himself. He refuses to answer questions or do simple acts. His wife states that he received an injury to his head about a year ago and since then he has had several attacks of this kind. Has been very changeable in his conduct of late one night he wandered away from the house in a half dazed condition.

The following information is obtained from his wife to whom he has been married 5 years, she being his second wife. She states that when he married her he was quite well and continues so till about 2½ years ago. At that time he received an accident to his knee which confined him to bed for some time and rendered him lame. He about this time, went off his food and became strange in his manner, quite different from his own self. (This is the only way, his wife, an uneducated woman can put it and when leading questions are put to her, the answers are such as not to be relied on). After recovering from the accident to his knee he went to work about a colliery and one day a piece of coal fell on his head. The skin was not broken but there

2nd Aug.

David Allison

cont'd

doubtful

seems no reason to believe that this accident has anything to do with her illness. That was 2 years ago but before that she notices that he talked strangely, built castles in the air, imagined that his just rights were withheld from him, that he was of a high social position and in general thought he showed he better than he was.

Six weeks after the piece of coal fell on his head he has the first fit. He fell down in a chair. his face was drawn to the left side and the arms twitched. In the later fits the legs were also involved but do not seem to have been so in the earlier. The eyes were never noticed to squint but for some days after the fits his speech was very slow and only came back gradually. He never seems to have become unconscious completely. —

These fits recurred sometimes as often as every fortnight and he had the last 2 close together in April of this year. For some time previously he had been wetting himself and getting very stupid and his memory was very obviously failing him. His first wife had about 8 children to him in whom no nervous tendencies are known. His present wife has two of a family both of whom died young. She states that the nervous generations was quite absent for about a year but previous to that was keen and she says that she believes he led rather a wild life when he was a young man. —

27th Aug. This is undoubtedly a case of General Paralysis but one departing in some measure from the typical form. He never appears to have had any grand delusions or been excited and now it would seem that the disease is pretty far advanced. Dop. 601.

Robert Coubrough

from p. 574

and the bruises on the body are well. To-day he has been fairly quiet and the effect of the Paraeschyde has not quite passes away. To-night he is much livelier and is with fee getting 3ij Paraeschyde and eggs &c. May 13th

Ap. 18th Slept well last night and is out in the court all day dressed in his own clothes &c. Still very incoherent in his conversation and contrary in his wishes but very distinctly better. Not taking his food by any means well yet, fee again to-night getting Paraeschyde as before. June 8th

21st Slept very well last night without hypnotic and is much more composed, collected & conceding to-day. Eating well now and the blood-tumour entirely absorbed. Looking back now on the attack this which he has passed one can see thinking that in many points it differed from typical acute mania. Even in his wildest moments he seems to know what he was doing and there was an absence of the blind unreasoning impulse of the acute maniac. Apart from this also, in his conversation he displayed a certain October 30. relevancy at times hard to reconcile with the violence of his conduct as indicative of the brain storm supposed to be raging at the time.

28th. Since the last note he has been very quiet and rational so much so that he was able to go out to work in the grounds. Two or three days ago however a small boil appeared on the inner surface of the right knee. This was opened to-day and though short as the operation was it disturbed him very 1891 considerably mentally. He lost all control over himself, cried aloud March 7 and was in a quasi-hysterical state. This state lasted for some hours. Physically he is much the same, of phthisic habit and full, flushed appearance.

Robert Cowbrough.

cont'd.

May 13th. Self ablubhon is this patient is very deficient. To. day he was found weeping and cd give no reason for this except that his friends has not come to see him. He has been keeping fairly well up tee to. day. but the least thing sends him off his balance — He is taking his food well & sleeping well

June 30th. Last Sunday the nurses came out with him from Divine Service and made some remark to him. This seems to have acted like a match to gunpowder for he became maniacal and quite beyond control. He was put in a pack and kept in it for 5-6 hours and came out much quieter. In the evening he had Tri Paraedehyde and slept very well. The following day he was very drowsy and was kept in bed & now he is up and perfectly quiet. He says he does not remember anything that happened to him during the attack, that it is all a blank. Previous to this attack it was thought he was improving. He was working in the grounds and his mental balance seemed to be more secure.

October 30. He has had no maniacal attacks since last note and has been working regularly but yet there is something about him, a shiftiness and want of open-ness and candour that is not satisfactory. While he cd not be said to be insane the maniacal attacks have evidently affected his brain distinctly and there is a want about him. His bodily health is fairly good. —.

1891

7 March. Patient has had no return of maniacal excitement since last note. He is very childish & silly in his conduct, very emotional & with little self-control. He is in excellent bodily health.

William Gemmell
Tromp. 534.

1890.

April 2nd. During the past fortnight there has been some improvement in this patients condition. Sulphonal has been given up as it was having no effect and during the last few nights he has been sleeping rather better and has also been quieter in the day. He refuses medicine of all sorts and the need not being urgent he has not been tube fed. He takes his food well and his bowels are being kept open.

Mentally he is still very far from well. Incoherent & a degree in his conversation and rambling in manner & conduct, full of delusions and with a mind far from balanced. He is not at all violent, never disturbing the other patients either by addressing them or interfering with them. as yet he takes no interest in what is going on around him nor does he assist in the work of the Ward.

28th ap. Distinctly better. For the last 3 nights he has slept very well with a moderate dose of Chloral (30grs) and thro the day he is somewhat less noisy. His alimentary canal is also in a better condition but his conversation is still very incoherent and irrelevant, and at times he becomes very excited.

13th May. The improvement noted above has not progressed or indeed been maintained. His condition is extremely variable & unsettled. Some nights he sleeps well and some days his conversation approaches coherency. At other times he sleeps badly and his talk is absolutely incoherent. His bodily condition remains good & he is having 30grs Chlal at bedtime.

16th June. Patients condition shows no improvement. absolutely incoherent in his conversation and incapable of fixing his attention on any subject.

July 11

October

1891
7 March.

William Bennett

cont'd.

July 11th — Has been sleeping much better of late and in his whole conduct and conversation there is some slight improvement. He is more interested in things going on around him than he was, has asked the writer some intelligent questions and is quieter during the day. gesticulating less and taking his food in a more way. He was taken out last night to the field to play cricket. He behaved better than was expected and was fairly orderly. At times he shows that when well he must have been very clever and it is easy to see that he is a nice and likeable fellow.

October 29. Is now in ward 4 Gallery and is better, being somewhat more coherent sleeping better and less excited. It seems that he never has any fancy for any outside work and he will not employ himself in doing anything here and this undoubtedly hinders his Recovery. There is a laxity about him & a great want of balance and the prognosis is grave. B. H. T.C. Good

1891

7 March. Patient is still very restless, rambling in his conversation & very careless of his personal appearance. He has been sleeping fairly well of late but frequently is restless at night.

A short time ago the same complaint took for a fortnight with a subacute bronchitic attack from which he has now recovered completely. He is in good health & is becoming fat.

Vol IV. pg. 385.

Geo. John Richmond.

Cont. from p. 475.

May 5th Patient is at present quiet & sleeping well. Still very depressed & requiring constant observation. Only takes his food by dint of pressing. Rarely if ever speaks when spoken to. Occasionally will smile in a pleasant manner. Eye wound has now quite healed. July 22nd

May 24th While out walking in the grounds today patient stepped an abrasion of the left knee & a considerable amount of bruising of the legs by throwing himself down in front of a coal cart & allowing the wheel to pass over his legs. An attendant was walking two yards behind him but so sudden was patients action that he was unable to get hold of him before the wheel had passed over his legs. Aug. 6th

On being questioned afterwards as to the reason for his action he touched up to reply but pointed to his head in a deprecating manner.

Locked gloves have been put on both his hands to prevent his removing the dressing.

29th The scrape is progressing favourably & locked gloves were removed from patient.

Since the accident patient has taken his food much better & with much less forcing than formerly. Oct. 30th

30th The abrasion is not working as well today there being a slight tendency to erysipelas in it.

July 22nd Patient has quite recovered the effects of his accident, the abrasions on his leg having healed up completely.
His mental condition shows no sign of improvement & he takes his food with the greatest reluctance. Every few days* he requires to be fed with the tube. He will not answer a single question asked him & seems completely weighed down by some terrible delusion.
He is constantly picking his skin into little sores.
His bodily health & condition are very poor.

Aug. 6th Since last note last note patient has picked up somewhat in his bodily condition though still very thin. He has been taking his food with less reluctance till y'day when he had to be fed with the tube.
His mental condition cannot be well estimated as he preserves complete silence.
There is less irritability in his skin & he to a great extent given up picking it.

Oct. 30th This patient has improved considerably in his bodily condition since last note. He is taking his food with less reluctance than heretofore.
The nothing [illegible] which he is subject has of late been very troublesome as a rule coming on at night.

to vol. IV p. 15-1.

John Forrest

Cont. from p. 5-36.

Apl. 16th — This conversation is carried on in a short ejaculatory sentences & his manner at times is almost insolent. At night he sleeps little this too in spite of drugs. He tries as hard as possible to keep awake & often when he feels himself dropping off to sleep he commences to sing songs in a loud voice greatly perhaps to his own delectation but decidedly to the annoyance of the other patients. As a rule sleep prevails over him about 12 o'clock & he will then sleep till 4 or 5 a.m..

He has a blotchy erythematous eruption over his forehead & face which seems to have got more marked since this maniacal condition began.

Apl. 29th — The eruption on patients face is not improving in spite of sedative treatment. It seems to be aggravated by his rubbing it with his hand & scratching.

May 6th — The eruption on patients face has now quite disappeared. Patient at present is suffering from a low form of congestion of the lungs. There is not definite dullness but at the bases of both posterior sides of the axillae & inter-scapular bases are heard. Along with this there is rough breathing in the upper parts of the lungs. There is also a considerable rise in temperature but never more than 101·2.

This attack began about five days ago by

May 15th

30th

July 22nd

patient had been working out of sorts for some days before that but made no complaint & when asked as to his health insisted that it was first rate.
He is now improving somewhat by rest in bed & poulticing.

May 15th Patients chest condition has now improved wonderfully. The temperature still shows a tendency to rise in the evening.
Mentally patient still continues in a state of chronic mania, noisy, boisterous self assertive & restless. He has been having Sulphonal gr. XL nightly for the past few days. It has succeeded in making him sleep during the night but whenever he wakens he is very noisy. The eruption is again returning on his face. There is general hyperaemia as also some small papulates. This has only come on since the sulphonal was renewed but whether this is a mere coincidence or not cannot as yet be stated.

30th Patient still continues in a state of chronic mania: noisy, untidy & restless. He is sleeping fairly well under the influence of sulphonal but becomes very talkative whenever he awakes: he says himself that he sleeps far longer than is good for him.
His general health is fairly good.

July 22nd No change to note. General health & condition fairly good.

to Vol IV p. 85

5 585

William Napier

Contd. from p. 5748

1890.

May 6th — In very good health now mentally and physically. Interests himself in the patients in the Gallery and says he was never better in his life. His temperature which (as shown in the chart) shows a suspicious tendency to evening rise is now normal and his rest at night is good —

May 13th — Continues well and now in No. 4 Gallery. Nothing to note either in his mental or physical condition both of which continue satisfactory —

June 5th — Discharged Recovered

Taken home by his sons.

1890

October 4

1891

7 March

August 18

Dec. 28th

1892 April 8th

Aug. 15th

Dec. 16th

1893

April 29th

Duncan Miller

from p. 30.

1890

October 4. Sometime ago he got over the wall and went to Coatbridge where he was brought from next day. He says there was some one he wanted to see and thought there was no harm in going. Since then he has not been allowed so much freedom. His old delusions are still in strong force and he is often very incoherent. His B. H. & C. are good.

1891

7 March. No change to note in patient's mental condition. Since his last escape he has not been trusted to work alone outside. He is in good bodily health & condition.

August 18. Unchanged. B. H. & C. are good.

Dec. 28th. Just the same

1892 April 8th. A very excitement, talkative man. who usually drifts into obscene remarks before he has talked long. He talks more pure nonsense than any other patient. It is quite impossible to make anything of it.

Aug. 15th. An amusing man to listen to – if he keeps from obscenity. Usually cheery – & in fairly good health.

Dec. 16th He does no work now except a little in the Wards, partly from the reason that he is rather lame and partly also because he objects to work without being paid for it. He still talks the most absurd nonsense but if listened to long he generally refers to the women. His B H & C. good for his age.

1893

April 29th Not been so talkative as of late but still as incoherent as ever.

S. Vol IV p 206.

5 587

William Milligan
Cont. from p. 5 42.

Sept. 29th — Recent impressions is very weak. He is very facile & can easily be led from his favourite subject of conversation viz. the sickedness of those who sent him here. He is taking his food with good appetite & as a rule is sleeping well, tho occasionally very restless & getting frequently out of bed.

May 6th — Patient still makes good progress both mentally & physically. He has now got the liberty of the grounds & is walking a good deal though not very fast. His mental condition is becoming more stable & his animus against his sisters & partner is lessening as he has not mentioned their names for the past two or three days. Oct. 30th

May 15th — Patient is improving daily & he is making good use of his parole within the grounds. He is inclined at times to be a little quarrelsome but he is very easily appeased & talked over. His bodily health is very fair.

" 30th — Patient though much improved is still far from well being very insolent & rude in his conduct towards his neighbours. His general health is very good & he is eating & sleeping well.

June 22nd — Patient is still very uncertain in his temper & filled with ideas of vengeance on his sisters & others concerned in sending him here. Aug. 4th

He has a wonderfully acute intellect still in many respects. He is however very facile in manner. He is inclined to stir up strife in his gallery & is essentially of the "busybody" type.

His bodily health & condition are good.

Aug 4th. At present patient is confined to barracks having been paying too much attention to the ladies in the grounds.

Oct. 30th. The condition of this patient varies greatly. He gets a great deal of freedom & every now & then takes advantage of this. Shortly after his parole had been returned to him he had again to be checked for speaking to the ladies in the grounds & insisting on walking with them. His temper is very irritable & when the attendants remonstrated with them he turned upon them with curses & foul language.

He has frequently been detected trying to stir up strife in his gallery.

He still cherishes very unfriendly feelings towards his sister & his partner & this without cause.

His bodily health is excellent & he is sleeping very well.

Continued Vol. IV., p. 901

589

David Robertson

Cont. from p. 442.

July 1st — Today transferred to East House.

October 30. — Has been working regularly outside all summer but has not derived much benefit in a mental sense from it though his bodily health is very good. He is shifty in his look, incoherent in his conversation & evidently weak-minded. There is really nothing fresh to report about him. It is doubtful whether he will ever practise bad habits —.

1891

Feb. 6th — Transferred to West House to-day as a working patient in No 1.

March 7 — This patient shows no improvement. He is sullen & repellent in manner & foolish in his conduct. He works fairly well & is in good bodily health & condition

August 18. — Has been working all summer. He is demented but in good bodily health.

Dec. 23rd. — A weak minded young man in indifferent health — who gets occupation outside. He is listless & torpid — & is in no way improved.

1892

April 8th — Great want of memory & interest in everything. A listless muddled young man.

Aug. 15th — Works about outside, in a mechanical way. Keeps in fair health, but is always pasty in appearance & dull.

Dec. 16th — Very difficult to get him to enter into conversation. Knows nothing except perhaps that he has had his dinner or tea as the case may be. He continues to work outside but is by no means energetic about it.

To Vol IV p 160

1890

January 22

October 30.

1891

7 March.

August 18.

Nov. 13th.

Dec 23rd.

April 8th.

John Barr.

from p. 574.

1890

January 22. an old man now getting very frail and suffering from Senile Dementia in a very marked form. Some times he is very happy and cheery & the next minute he is despondent, says all his cows are dead that he does not get his food &c &c. His legs are much swollen and closely resemble Elephantiasis and his general health is indifferent there being many evidences of advanced senility

October 30. Becoming frailer but still able to be up and about Subject to great alternation of mental condition sometimes being quite lively at other times very dull and cries at his miseries. Thinks his wife has left him here and that everything at home has gone wrong.

1891

7 March. No change mentally. Lately he has become very frail & is now confined to bed. He sleeps most of the day but occasionally wakens up & mutters lamentations about "Bell".

August 18. Now entirely confined to bed & very frail. As a rule not inclined to talk much and only now & then being emotional. The condition of senile dementia is very marked.

Nov. 13th. Has suffered lately from a carbuncle (small) on the left buttock - Now nearly well. A helpless - bedridden demented patient.

Dec. 23rd. Just the same - Seldom speaks - & is quite demented.

April 8th. Unchanged - a mere animal.

J. Vol. IV. p. 570

591

James Galloway

Cont. from p. 39.

1890

May 5th 1890. A general paralytic in whom progress of the disease is very marking slow.
Expression, & rather want of it, articulation & gait typical. Pupils equal & contracted. react to fair points.
Mentally he is as a rule happy though at times angry. Quite demented & answers "yes" to every question.
Usually sleeps quietly but occasionally restless & talkative.

October 30.

1891

May 30th Since last note patient has failed a good deal. He has been found wet every other night & is getting very unsteady in his gait & showing great tendency to fall.

7 March.

July 22nd Not much change since last note. Patient frequently wet at night but a little steadier in his gait.

August 18.
Dec. 23rd.

Aug. 6th Patient is now confined to bed, being so helpless in his walk & requiring constant attendance as to his bladder & bowels.
At present is suffering from a slight attack of pharyngitis which however is now improving.

Jan. 19th Patient has had several congestive attacks lately. Yesterday morning he took one, and has not got over it. He is comatose, breathing heavily; the right arm is drawn up. Pulse feeble & rapid.

1892

April 8th
Aug. 15th
Dec. 16th

Jan. 20th Died last night 10.45 pm.

During the whole of the last attack there were muscular twitchings all up the right side.

James Proudfoot

from p. 342.

1890

October 30. a partially demented patient. of whose recovery one is not very hopeful. He gives no trouble but cannot be roused to interest himself much in things and though he works regularly he does so in a very automatic way and without seeming to take any pleasure in his work. His bodily health is good & he eats & sleeps well.

1891

7 March. This patient is becoming more & more weak-minded. He has a vacant look on his face & rarely looks straight at any one. He works regularly in the grounds & is in fairly good health but in poor bodily condition.

August 18. Just the same. B. & C. fair.

Dec. 23rd. Dementia. with a peculiar shyness & obstruct-like way of trying to hide himself. If spoken to he doubles up & covers his face & turns towards the wall. Speaks in a hoarse whisper, & can hardly speak without laughing foolishly and saying "Oh: God" Some weeks ago he either from sheer stupidity or impulse put his foot thro' a window - but he did not hurt himself - Probably his strange behaviour is occasioned by delusions, but what they are cannot be said.

1892

April 8th. Unchanged.

Aug: 15th. Just the same in every respect.

Dec. 16th Stands nearly always in same position - facing the wall. very shy in appearance as if frightened of being hurt. B & C. fair.

To Vol IV p 38

John Shields.
Cont. from p. 110

May 5th 1890. Delusions as to his having taken of ~~bread~~ meat that he will not eat still very fixed. Still being fed with stomach tube. Effort was made to make take his food by spoon failed. Salt was also put into his food which made him drink of his own accord. He would not however take milk but only water.

Apart from this delusion as to his taking food his mind is quite active. He reads the newspapers etc. evidently with a purpose. From an answer given on the Storm of Commons stating that it was not legally possible to prevent an adult from fasting, he argues that we have no right to feed him here. Bodily health is fair.

Nov. 7th

Mar. 18th

April 29th

June 1st Patient today took his meals himself.

July 22nd Still taking his food himself. His delusions as to religion however are still fixed & when spoken to on almost any subject he answers by quoting what he considers a text suitable to the occasion. Bodily health & condition fair.

Aug. 4th Patient was shown the notice of his sisters marriage in the newspapers but appeared no interest whatever in the event. He is still feeding himself.

" 7th Patient today asserts that his food is being tampered & will not be reasoned out of this belief.

He knows that this is the case because he has seen signs passing between the attendants when he enters the dining room.

Nov. 4th Still the same delusions as to his food. Yesterday he broke several dishes at table on account of his not getting proper food. Although he does not take much food he does not seem inclined to starve himself altogether. His general health is fairly good though he is thin. He sleeps well.

Mar. 18th For some weeks has been in No 1 by his own request. He still occasionally complains about the food, but takes it better than he did in 576.

April 29th Has gained a little in weight. Body is thin. but skin is fairly pliant & nourished. Refuses to show his tongue. Declares he does not want medicine of any kind. Insists that his milk & tea & other foods are tampered with, and that numerous people in Glasgow are conspiring against him, and influence people in Eastwood to tamper with his food. He says that he sees several patients watching him at meal time and laughing and making faces at him. but he does not bear any malice towards them, as they are powerless in the hands of his enemies.

Attitudes are most dejected. Facial expression gloomy and sullen.

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595

David Craig

Tromp. 534.

1890.

June 16th Working now regularly in the garden and has lost a good deal of his Hands off manner. He is not yet however free from his delusions tho he is evidently ashamed of them He is sometimes seen standing looking at the ground & talks as if carrying on a conversation with an invisible person on being spoken to about it he laughs and will not talk about it. He is much thinner but is taking his food well and, the attendants say that he is much pleasanter in many ways than he was. August 18.

July 11th No change in his condition. He was put on Strychnine and Quinine some time ago as he was not taking his food and he is now a little brighter like. His answers to questions are always coherent and he is always pleasant to the nurses Sept. 23rd

October 30 His bodily health is now very good and mentally he is also better but not much. He is now quiet civil and well behaved but shows no anxiety to get away from here and when he sees his wife he is quiet and in a word does not display any 1892 like a normal amount of anxiety or care about Jan. 28th himself. He works out regularly does not seem to have delusions & eats & sleeps well.

1891

7 March. Patient continues in his dreamy-apathetic state. Walks with head bent in the gallery & taking no interest or notice of what goes on around him. He talks occasionally in a rambling fashion about profits & losses His brother & sister were here y'day but their visit has had no effect on him. April 8th. Aug. 15th.

He is in good bodily health & condition but during the frosty weather he suffered much from chilblains on his fingers some of which ulcerated.

August 18. Has been working in the garden regularly all Summer & is in good bodily health and condition. His mental state shows no improvement. He is silly, & foolish often in her conduct. When spoken to he answers readily enough but displays no interest in what is said to him. Not anxious to get home. Quite content to stay here & with no zest in things generally. In short he is drifting dementwards.

Dec. 23rd. He is now a mild. mannered patient - usually in good humour - but reserved & not desirous of attracting attention - He is a little bent & his attitudes & expression are slightly despondent, but he brightens up when addressed - He does not freely express his delusions, but he is still subject to them as before - He believes that fairies are but in his bed & clothes - but he sleeps fairly well - & is not any trouble.

1892
Jan. 28th. For last ~~two~~ days has expressed frequently a desire to get home - & is brighter in manner - Previously to this he was quiet, reserved, but foolish, as before. Yesterday he made his escape from the grounds, to Hyndland station, but was brought back at once.

April 8th. Very quiet - Avoids the others as a rule. Is decidedly weak minded - & entertains still strange fancies.

Aug. 15th. In much the same state. A good deal of apathy about him, at least for anything beyond himself.

To Vol. IV. p. 569

James A. C. Macleod.

Cont. from p. 476.

May 16th & made inquiry as to his eye. Patient immediately started up in a most excited fashion & became very abusive in his language making all sorts of accusations & threats. He continued to do this at intervals during the next two days but yesterday & to-day is much quieter. All & anybody came in for his abuse. Although he made frequent threats he never struck any one.

To-day he is quiet & even depressed & talks with the constrained air which has previously been noted. He seems however to be returning to his normal state. He has begun his favourite occupation of working out theon problems which he had discarded for the past week.

Oct. 30th

Variability

30th Since last note patient has kept very well & has approached close to his normal condition. To-day however he is showing signs of the approach of another "storm" by sitting apart from the other patients & wearing his topcoat in the house on account of his feeling chilly although the day is bright with sunshine. His manner is also beginning to assume the strained form previously noted.

Lapsing

July 22nd Patient did not have the "explosion" apprehended in last note. He has kept very well since then being frank & attentive & most cheery in his conversation.

Feb. 15th

At present he is at his best his interests in his old life & associates being again roused up.

He has written numerous letters to his family & old friends. He is now also willing to receive his friends when they come to visit him which for a long time he refused to do.

His self control is at present good but in this respect he is ever uncertain & seems to be thoroughly aware of this himself.

Physically he is in good health & in fair bodily condition.

Oct. 30th — There is no improvement in this patient although his condition is constantly changing. One hour he is frank & natural & cheery in conversation, the next he is irritable & morose & apparently have great difficulty in restraining himself.

Variability

His mind is gradually becoming weaker & he more frequently indulges in fits of laughing without cause.

"Laughing"

His general health is fairly good though slightly troubled with dyspepsia. He sleeps well but it is feared he indulges in masturbation.

Feb. 15th — Patient recently had a slight illness, and remained in bed. Little could be found wrong except that he was getting wasted and very pale. It was ~~in~~discovered that he was indulging in masturbation to great excess. As he is sensible enough still to be sensitive a heavy scolding was given him, and he was ordered out of bed.

Contin. Vol. IV. p. 299

599

James A. Forbes.

Cont. from p. 538.

May 9th — At dissects out all the signs & symptoms of his case & tries to assign causes for them in a most praiseworthy manner but is never able to satisfy himself.

At times he can be weaned away from himself & can then laugh heartily & talk pleasantly but only for a very short time.

His general health is fairly good.

May 10th — Today discharged

Relieved.

V

1891

Oct. 30

March 7

15th August

Oct. 8th

15

Dec. 23rd

John McKinlay
from p. 160.

1890

October 30 an epileptic demented whose mind is now very weak and whose fits show no change as regards frequency or severity. He is in fair bodily health but requires a great deal of care and attention.

1891

7 March. The fits still continue in former frequency. Patient is very mischievous. He is very dangerous & several times of late has attacked fellow patients. He is in fair bodily health but his bodily condition is indifferent & he is rarely free from bruises & scratches. The results of his falls.

18th August. a very mischievous epileptic requiring to be taken great care of. B. & C are indifferent

Oct. 8d. The number of fits which this patient had during the first six months of the year was 123

In January	27 :	26 by day	& 1 by night	
February	21 :	18 "	" 3 "	"
March	24 :	22 "	" 2 "	" 72
April	21 :	16 "	" 5 "	"
May	17 :	8 "	" 9 "	"
June	13 :	11 "	" 2 "	" 51

" 15 During the 3rd quarter of the year this patient had 52 fits

In July	18 (	15 by day	& 3 at night :
August	17 :	15 "	" 2 " "
Sept	17 :	15 "	" 2 " "

Dec. 23d. Fits continue much the same in frequency - Rather quiet of late.

Vol. IV. p. 552.

601

David Allison

From p. 576.

1890

October 29. He has had no epileptiform attacks since admission but has very stupid has a difference in the size of his pupils and his speech has some of the characters of that of a G.P. He is also very shaky on his legs and sometimes web. his bowels also troubling him a great deal. /.

1891 7 March.

1891 7 March. Patient is very sullen moody & obstinate. He will not speak much so that it is hard to judge of his speech. There is still some irregularity of the pupils but this does not seem to be constant. His gait is shaky but is not getting worse.

August 18.

August 18. If this patient labours under G.P. there is at present a remission of the disease. His mental condition now & for some time has been one of depression to some extent, & great stupidity. He has delusions about his bowels not moving & believes there is something far wrong with one of his knee joints. His bowels are sluggish & his knee stiff, but not neither to the extent he believes. His speech is distinctly thick but not characteristic of G.P. His pupils are moderately dilated but equal & his tongue is only grossly tremulous. There is considerable blotting out of the facial lines of expression, and his walk is slow but not ataxic. At times he is more intelligent than at others but as a whole there is a very distinct blunting of the intellect and a drowsiness of all actions mental & physical. His bodily health & cond.n are good.

To Vol. IV. p. 5-23.

1891 7 March.

August 18.

Dec. 23rd.

1892 April 8th Aug. 15th.

Dec. 16th

1893 June 29th

Dec. 27th

Robert Downie
Group. 28.

1891
7 March. This patient continues to be depressed & rarely can be got to speak much. He is becoming very weak minded.
In early part of winter he had a severe attack of pneumonia of the left side which at first appeared to be going on to suppuration but eventually left a hard leathery swelling which has since been quite absorbed. He is now in fairly good health & bodily condition.

August 18. Remains unchanged. He is not so deeply depressed & doubtfully suicidal but he cares nothing for himself requires to be looked after, to keep himself tidy and is becoming demented. B.H. & C. are good

Dec. 23rd. Hardly looking so well. Very pale & stiff. Is always slouching in a corner, & is lazy & untidy.
Still it is feared practises masturbation. His appearance is very like it. Somewhat excitable & always reticent.

1892
April 8th Unchanged. A degraded demented dirty man.
Aug. 15th No change to note here. He is more idle & demented than depressed now.

Dec. 16th He is very depressed though he answers a simple question civilly enough. He says he has no wish to leave the Asylum. He goes about with a hang-dog air and is very untidy and slovenly in appearance.

1893
June 29th Still very depressed and in poor health. In fact there is no change.

Dec. 27th He generally sits in the same seat, in the same attitude and with the same expression which is that of one depressed. His health is poor.

To Vol. IV p 180