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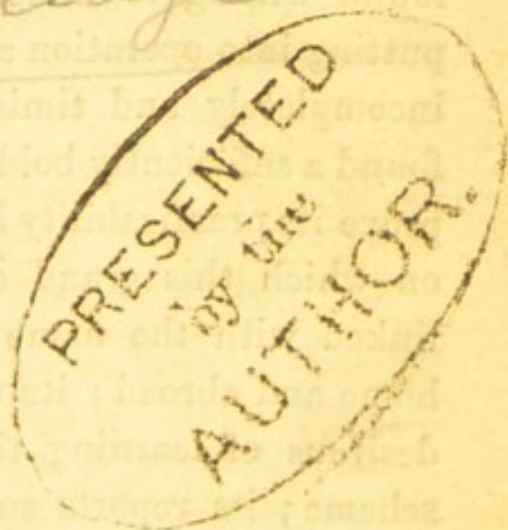
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THE MIDDLESEX COUNTY LUNATIC
ASYLUMS,

And their Reports for 1855 and 1856.

By Dr. Arledge



THE MIDDLESEX COUNTY LUNATIC ASYLUMS,
AND THEIR REPORTS FOR 1855-6.

From the "Journal of Mental Science," No. 17.

In years gone by, the reports of the Hanwell Asylum, when, under its able superintendent Dr. Conolly, the "non-restraint system" was in course of development, were anticipated and read with eagerness by all interested in the welfare of the insane. It was in this asylum that the experiment of treating the maniac without instrumental restraint was made on a large scale; that a physician was found willing to undertake the task and responsibility of putting into operation a method of treatment, which, though incompletely and timidly put forward by others, had not found a sufficiently bold spirit to adopt and extend it, and to prove its practicability in a large asylum; thus, as the theatre on which this grand experiment was performed, Hanwell, linked with the name of its physician, became famous at home and abroad; its wards furnished the school for those desirous of learning the practicability and details of the scheme; its reports supplied the lessons, and shewed the advantages to be gained, the errors to be shunned, the difficulties to be surmounted, and the encouragements to be gathered.

The fame of this Middlesex asylum extended itself so widely and so deeply on the continent, that, notwithstanding the present altered state, Hanwell is still regarded and quoted as a "model English asylum," as the one specially to be visited by those who would acquaint themselves with what the English can effect in asylum building and management. We should be much pleased to assist in undeceiving our fellow psychologists abroad ; for our own honor it is necessary that they should know that the glory of Hanwell is passed away ; that it is a very inferior and in many respects an ill-built, ill-adapted, and an indifferently managed asylum, and that if they would see a good example, they must journey beyond the metropolitan county, and turn their backs upon institutions where lunatics are herded by the thousand, fed and clothed as paupers, but not treated as patients.

Let us, however, examine the reports of Hanwell asylum for the last two years, to discover what progress, if any, has been made in improving it ; what success has befallen it, and what schemes are proposed for the future. The first thing that strikes us is, on the one hand, the gradually decreasing importance of the medical report since the earlier years of Dr. Conolly's superintendence of the institution ; and, on the other, the increasing number and copiousness of the non-medical reports. The latter circumstance is that more particularly requiring notice ; since the former is explicable from the cessation of the active changes attendant on the establishment of the "non-restraint system," from the settled quiet routine established, from the restricted movements of the population, and last, not least, from the almost utter impossibility of any facts to figure in a medical return being culled by the superintendents, overloaded as they are with work, and powerless as they are for any effective medical treatment of the inmates.

The non-medical reports consist of one from the committee, one from the chaplain, one from the matron, one from the garden committee, and one from the solicitors. This multiplication of reports is, to say the least, unnecessary; it involves many repetitions and much useless writing. We may take exception to the report of the committee of visitors, in so far as it repeats facts properly referable to the returns of the medical officers, and as it assigns a preponderating importance to the committee in the management of the institution, and in the direction of details. For if the asylum has duly qualified and trustworthy officers, the less a body of visitors meddles with the internal organization and with the direction of its details, the more advantageous is it for the well-being of the establishment. Freedom and independence of action are necessary to the cheerful and efficient performance of duties. A meddling policy is mischievous and bad; it irritates honorable minds, and deters them in their praiseworthy and noble endeavours to merit approval and reward; it affords an excuse to the dull and unworthy for indolence and neglect. The policy of Hanwell, and we may add, of its sister county asylum, is notoriously meddling. The committee must step in as the supreme and sole authority in every trifling as well as important matter; it must hold in its hands the entire correspondence; it must undertake the hiring and discharging of every servant; it will be paramount in the moral treatment of the patients; it will decide *proprio motu*, on schemes for the improvement of the establishment, and lastly, it is from it we are taught to anticipate the results of experiments in the management of the insane.

The evil result of all this interference with the government of the establishment, with the authority of the resident superintendents, and with the management of the patients, is patent to every one who will be at the pains to enquire into the actual condition of the Middlesex asylums, and particularly of Hanwell.

The law requires that the resident medical officer shall be the superintendent of an asylum. How is the intention of the law carried out in the asylums named, where the committees assume every function of consequence, and where, as at Hanwell, a matron is elevated to the same importance as the medical men, and enjoys far more actual power under the approving auspices and encouraging regard of the visitors. The Commissioners in Lunacy would be well employed in investigating the working and the present con-

dition of both the county asylums in question ; in estimating the effects of crowding tens of hundreds of helpless lunatics in a large building, under insufficient medical care ; in convincing themselves both of the hopelessness of ever keeping down the development of lunacy—when all hope of cure, except as an accident, is cut off from those cases which are driven into them under the delusion of having their malady medically treated,—and of ever seeing the day when all the pauper lunatic poor of the metropolitan county will be provided for. The visitors of the asylums take care to be heard, and to sound their own praises in their reports. How excellently well they manage all affairs ; how satisfactorily and charmingly the institutions work under their supervision : how well provided for the patients are, and how tenderly their welfare is watched : such are the representations made, and they seem to be believed. But the officers who could report on the real condition of the inmates, on the working and deficiencies of the management are not heard ; they cannot under ordinary circumstances be heard, for they do not in their peculiar position, possess that independence which will warrant them in discovering what they know and what they believe, when such knowledge is unacceptable to the committees.

The matron's is the only other report calling for animadversion, and this, not so much for the matter it contains, as on account of its presence. What, we would ask, has a matron in her proper capacity to report ? Nothing more, in our opinion, than the amount of work done, of articles made by the female patients under her supervision ; and this return to be made to the medical superintendent and to be set forth in the tables of the appendix, just as is done by the storekeeper and the manager of the farm, which officials might with as much justice be called on for an annual discourse on subjects relevant and irrelevant to their offices, as the matron. But it is not so at Hanwell ; the matron there enjoys more consideration, and can descant at large *de omnibus rebus*, medical and general, and occupy more pages than the less important medical officers. Her effusions are no doubt highly acceptable to the visitors, indeed, in some reports of earlier date, than those under notice, we are distinctly told so ; and hence she revels in touching pictures of cases, in the narration of methods of treatment and of their results, and the like matters, which did the committee rightly understand the position and interests of their medical officers, they would leave to them. Indeed, the presiding

genius of the matron is visible in everything ; she reports on the health and condition of the patients; on the conduct of the attendants ; on alterations in the house ; on points of moral management ; and when architectural changes are in contemplation, she is the oracle consulted and followed.

The ambitious tendency of the matrons of asylums is a very prevalent circumstance at the present day, and gives rise to much discord and to no slight mis-government. If the medical officer is, according to law and to the Commissioners' views, the rightful superintendent, then is it the duty of the visiting committees to see that he is so in fact, and it is the office of the Commissioners to take care that committees do not render the law void.

Let us now turn to the medical reports, which are, as might be expected from the little value assigned to medical officers in the conduct of the asylums, sufficiently brief. Remarks which should reflect on the management, complaints, intimations of defects, and plans of improvement, are matters which cannot be expected to survive the censorship of the committees, and appear in print ; unless indeed, duly accredited by them or by the Commissioners. Consequently, the medical superintendents are pretty much confined to the statistics, and to recording the movements of the population.

Dr. Begley, the long experienced and well known physician of the male department at Hanwell, reports the admission during 1854 (including 7 re-admissions) of 87 patients, "of these 44 were cases of mania, 19 of melancholia and 24 of imbecility ; general paralysis was associated with mania in 5 instances, in 1 of which epilepsy was superadded, and with imbecility in 11 cases, in 2 of which there was a double complication, viz., of paralysis and epilepsy; epilepsy was combined with mania in 7 cases, besides the one in which it was also united with general paralysis, and with imbecility in 6 cases, besides the 2 of double combination already mentioned ; there was one case of epilepsy with melancholia ; 16 patients were discharged cured, 2 as improved, 4 as not improved, and 41 have died. The average daily number resident was 425."

On the female side Dr. Sankey records the admission of 82 cases, of which only one was a re-admission ; 14 were discharged cured, and 7 relieved, and 40 died. The average daily number was 580.

To proceed with the report of 1855, we find, 73 males and 78 females to have been admitted: 16 males and

21 females to have recovered ; 5 males discharged improved, and 2 men and 5 women not improved : whilst 50 males and 45 females died.

The average number of males in daily residence was 434, of females, 583.

In the male department of Colney Hatch, during 1854, there were (including 23 re-admissions,) 219 cases admitted, of which 73 recovered, 19 were discharged relieved, 19 unrelieved, and 116 died. The average daily number was 515.

On the female side, 111 were admitted, of whom 4 were re-admissions, and many others had been under treatment in other asylums ; 38 recovered ; 3 were relieved, 5 not relieved, 1 escaped, and 58 died. The average daily number was 733.

Again, during 1855, 151 male patients, including 14 re-admissions, entered the asylum ; 42 men were discharged recovered, 16 relieved, 2 not relieved, including one escape, and 92 died. The average daily number resident was 517. In the female department, there were 59 admissions, 16 recoveries, 12 cases relieved, 1 not relieved, and 36 deaths.

The average daily number was 732.

One suicide and one homicide occurred in Hanwell in 1855. The latter as teaching a lesson of precaution is worthy of notice. Dr. Begley thus narrates it :—

“ On the 12th of April, the Patients of No. 7 Ward (25 in number), having had their supper, were going to bed at a quarter before eight o'clock, all of them, being more or less refractory, have a single bedroom each. The attendant, in seeing them to bed, inadvertently locked up two (B. and W.) in one room ; he stated that, observing the day clothing of all outside their doors, he supposed that the patients were in their rooms, and, therefore, did not take the precaution to look into them. The room No. 19 was the one usually occupied by W., a man of exceedingly clean habits, of a mild expression of countenance, but very violent, prone to strike suddenly and without provocation any person within reach of him ; so frequently had he done this, that he was not allowed to sit near other patients, even at meals, but took his food apart from them at a side table. B, whose room was No. 10, directly opposite to No. 19, was occasionally violent, always dirty in his habits, and destructive of clothing. It is supposed that this man entered No. 19 room by mistake, and that his presence there excited the homicidal tendency of the other into action. What is known is, that the night attendant, when he visited the ward at half-past ten o'clock, and went as usual to the room No. 10, to see that B. was clean, &c., found it unoccupied, and the patient's clothes outside the door ; then, hearing a noise in the room 19, he opened the door, and saw B. extended at full length on his back on the floor, naked and quite dead. W. came out of the room in his shirt immediaely the door was opened, and, pointing to B., said, “ That fellow will not allow me to sleep.” There was a mark round B's neck, as if caused by a cord, which had produced strangulation, and a mark of a severe blow at the top of the

nose, and of a bruise on the chest : the bed clothes were in great disorder ; amongst them were found the shirt and flannel of B. ; one sleeve of the former was twisted like a rope, as if W, had strangled B. with it ; the shirt was wet, as if it had been dipped in water and wrung out ; there was not a urinous smell from it, and there was not any water in the room."

The alterations and improvements effected, as referred to in the records of the medical superintendents are few. At Hanwell, in 1854, a special night-watch was appointed, and has succeeded in greatly reducing the number of dirty patients ; and at the suggestion of the Commissioners of Lunacy, the inmates were allowed to take exercise in parties of four and six, beyond the boundaries of the institution. Our readers will be astonished to find from Dr. Begley's report, that the latter is no new plan, but was introduced many years ago, by that enlightened and far-seeing psychological physician, the late Sir William Ellis, when superintendent of Wakefield, and afterwards of Hanwell, "but was subsequently abandoned." How interesting it would be to learn from Dr. Begley why this excellent practice was abandoned. We cannot believe it was from failure, or from hesitation on the part of Sir William Ellis, but must presume it was in consequence of prejudice in some influential quarters. Surely the records of Hanwell can elucidate this point, an important one in the history of insanity ; the minutes of committee must shew when the recommendation was made and approved, and when rescinded, at whose request, and why ? However this may be, the honor due to the memory of Sir William Ellis for the origination of the idea, must not be lost sight of. We apprehend, indeed, that the more rapid and striking changes in the moral treatment of the insane, effected since his time, have unduly obscured his merits as a reformer.

Dr. Sankey, on the female side of Hanwell, has applied himself diligently to limiting the employment of seclusion, and has been successful in effecting a great diminution in it. In carrying out his object, he remarks on the increased difficulties he has had to contend with, owing to the overcrowding of the refractory ward, and the very restricted airing court belonging to it, which "divided by the number of patients using it, will yield only a space of nine feet by ten feet per patient." These are defects calling for remedy by some expedient or other. To us it seems very practicable and desirable to relieve this crowding by distributing a certain number of refractory patients in the grounds set apart for other classes : for such patients when removed

from their riotous companions become, according to our experience, more tractable and are effectually benefited, and we believe that a less precise separation of refractory from quiet cases, than usually practised, would be salutary; that both classes would be mutually advantaged by the intermixture, if made with discretion, and regulated by constant oversight. We have been a long time convinced of the disadvantage of cutting up the exercising grounds of asylums into small, confined spaces, generally walled round: to maniacal subjects there is nothing like space where to disport themselves, to wear out their restlessness and morbid physical energy; where too they are not interrupted, and not agitated by seeing the excitement of many others immediately about themselves. A diminution of the partitions of the ground at Hanwell, we are aware, has taken place, but we are of opinion, more may be done in this direction. Moreover the high walls obstructing all prospect may be reduced, or what is much better, re-constructed as sunk fences, and the bare gravelled exercising courts, in part planted with shrubs and flowers, or partly laid down in grass. The experience of other asylums shows the practicability of this, and no demonstration is needed to prove its utility.

Among material improvements in Hanwell during the two past years are, the building of the new chapel and formation of an amusement room for the two sexes; the re-construction on the male side of the water closets upon Jennings's plan, and of many of the baths, the introduction of new windows and enlargement of others, the flooring with wood of several rooms, and the formation of a few dormitories out of contiguous small rooms, increasing the light and air and the facilities of ventilation. Besides the above alterations, a ward for 50 additional patients was constructed beneath the chapel, increasing the accommodation of the asylum to hold 1,022 patients.

In the medical history of Colney Hatch for 1854, Mr. Tyerman mentions an instance of a patient fracturing his arm when in the padded-room. Mr. Marshall speaks of the advantage resulting from the adoption of "a month's liberty prior to their final discharge," and cites three instances of recovery in illustration, where the disease had lasted more than ten years. The plan of dining a large number of patients together—300 men in the spacious exercising hall, has been carried out and "found satisfactory," and its exten-

sion is purposed both by bringing together larger numbers and by introducing patients of the opposite sex.

A new supplement appears in this year's report of Colney Hatch for the first time, viz. the introduction of meteorological observations, prepared by the dispenser, Mr. Rose, by the direction of the committee. The design is to endeavour "to ascertain if any real connexion is discoverable between the ordinary sol-lunar revolutions and atmospheric movements, and the paroxysmal and recurrent exacerbations which distinguish the class of diseases," of which epilepsy furnishes the type. This being the first set of observations, it is too soon to examine them to make any deduction; we hope, however, that Mr. Rose will persevere in his observations, and that he will not lack substantial encouragement from the committee. It will be the means of furnishing a valuable series of facts and of determining several mooted questions. We could wish that attempts to cull facts from the wide field of research opened out in county asylums, were more frequent; but alas, although, the harvest is plenteous, the labourers are too few and too multifariously occupied to have opportunity to reap it.

We now come to the scheme adopted by the Middlesex Visitors, sanctioned by "the Lunatic Asylum Act" of 1853, of setting apart a limited number of beds for the reception of recent cases of insanity. This plan was put into force during 1855, but without achieving any considerable beneficial effects. The regulations laid down were—

"That three beds on the male side, and four beds on the female side, shall be reserved for the reception of recent cases, and that no chronic case shall be received on either side, unless the number of vacant beds exceeds that above mentioned.

"That the following shall not be considered recent cases within the meaning of the foregoing Regulations, viz. :—

"If the insanity shall have endured more than twelve months.

"If complicated with epilepsy or any form of paralysis, partial or general.

"That the parochial authorities of the county be informed of the above regulations, and that they be further informed that whenever they seek for the admission of a case as a recent case, the application must be accompanied by a certificate from the Medical Practitioner examining the patient; 1st. That the duration of the attack has not exceeded one year; and 2nd, that the disease is not complicated with any form of paralysis or epilepsy; and that they be requested to state whether they have any case coming within the operation of these regulations."

In accordance with this arrangement, 24 males and 42 females were admitted into Hanwell since 14th June last, but the advantages anticipated were, owing to various adverse conditions, not realized. The first man brought to the asylum under the special regulations, was found to be paralytic, and accord-

ingly the committee gave the power to their medical officers to reject any similar cases, even when certified to be not paralytic; "others having slight signs of paralysis were received, it being doubtful whether their tremors and thickness of speech were really indications of paralysis, or only the effects of cold weather and the fatigue of the journey; but the disease having unequivocally manifested itself in the course of a few days, orders for the removal of some of the patients from the asylum, were given by the committee; others are also likely to be returned to the workhouses from which they were sent." Dr. Begley adds, that "of the 24 patients admitted, 6 were paralyzed, 2 are supposed to be epileptic, and the duration of the disease in several (in six certainly) is incorrectly stated,"—having lasted above one year. "But in 8 cases, without any complication, the disease has been ascertained to be of recent date, and may, therefore, be presumed to be curable." However, we find no further history of these 24 cases, and therefore, conclude that they are still under observation.

Of the 42 certified recent cases, "One has been discharged cured, 1 as an improper case, 7 have died, and of the 33 remaining, the cases of about 3, (says Dr. Sankey) afford a fair prospect of recovery, and the remaining 30 are cases in which there is little to afford a reasonable hope of cure, and in several the symptoms of general paralysis have become manifest since their admission into the asylum." The prognosis here offered is assuredly very unfavourable; 10 per cent. of recoveries in 42 cases,—the majority (perhaps, nearly two-thirds) of which are uncomplicated and recent,—is very low; for experience has sufficiently shown that insanity is curable in from one half to two thirds of cases sufficiently soon submitted to treatment. A still higher proportion is realized in some lunatic hospitals, and is pronounced by competent authorities to be attainable; but then, constant medical oversight and attendance are needed, and those conditions we cannot expect to see at Hanwell, where some 1,100 patients are handed over to be (as it is supposed by the authorities practicable) medically and morally treated by two medical men, charged with a host of minor and incidental duties.

To return to the regulation in question, we believe, with Dr. Sankey, that its principle is undoubtedly good, but that "it is to be feared the difficulties in the working of the law are such, that the contemplated benefit is not likely to be realized, or, at all events, not to such an extent as the com-

mittee desired." This able officer goes on to say, that, "at the time when the subject was brought before me to report upon, after as full a consideration as my limited experience would permit, I arrived at the conclusion that the only practicable mode of selecting such cases as would furnish a reasonable hope of cure was to have all patients examined at their places of residence, and before they are brought to the asylum, by a medical man appointed by the committee, and that he should be empowered to make a selection derived from his own investigation of the respective symptoms of each case. At present this selection is left to the parochial surgeons, who, at least, have a bias toward sending the patient to the asylum; and it must be owned, that in the disqualifying clauses appended to the regulation, there are many grounds for different interpretations, according to the bias that may be influencing the judgment. For example, it is no disqualification if a patient is labouring under a second attack of the disease, provided that the present attack is of less than twelve months duration; and there is no reason, provided that the cure from the first attack was perfect, why a second attack should be made a disqualification. But a difficulty arises in establishing the evidence of the perfect cure."

In Dr. Sankey's proposition there is much to commend. If the trouble, disappointment and annoyance resulting from the transmission of hopeless, or of almost hopeless, in the guise of recent and curable cases, is to be avoided, the appointment of a medical man for the especial purpose of seeking out appropriate patients, is a desirable expedient, and one attended with little or no cost to the county. For this officer might be remunerated by receiving the fee as the certifying medical man in each case sent by him to the asylum; and notice should be given him by the parochial surgeons of every case of insanity appearing in their respective districts, and which must ultimately become chargeable to the county. Indeed we would strongly advocate it being made obligatory by the Government, that every case of insanity, whether among the rich or poor, should be reported to some proper authority in the district in which it occurs; for instance, to the 'sanitary medical officer,' by whom it should be registered, and a return be made to the Commissioners in Lunacy. Thus every lunatic in the kingdom would be brought within the knowledge of the Commissioners, and be duly watched and protected. The registration of every death, is an accomplished fact; surely that of the social

death, of any individual, by the outbreak of insanity, might as readily be accomplished. That some such course is imperative, every one acquainted with the state of insanity and of the insane in England must admit. Hundreds, we may confidently assert, and, we doubt not, thousands of lunatics are scattered here and there over the length and breadth of the land, singly lodged with all sorts of persons, of whose existence Commissioners know nothing, and of whose treatment consequently they are equally ignorant.

To return from this digression, a specially appointed officer to carry out Dr. Sankey's scheme is the more necessary, since insanity, and particularly its complications with paralysis, is so little understood by the majority of medical practitioners; the subject unfortunately not entering, except by accident, into the ordinary routine of medical studies. This fact renders Dr. Begley's recommendation of less certain efficacy; although the practice generally adopted, according to that physician, of leaving the enquiry respecting the duration of the disease to the relieving officers, explains to a considerable extent, the sending of cases as above stated, so unsuitable, and so contrary to the regulation.

A very important topic remains for consideration; viz. the proposed enlargement of both the Middlesex asylums; that at Hanwell for 600, and that at Colney Hatch for 650 additional patients. They are at present adding to the latter, accommodation for 75 more patients, so that, should the building scheme be carried out, the number of inmates will be elevated to 1980, *i.e.* just upon 2000; whilst the plan at Hanwell would likewise raise the population there to about 1650.

An extensive increase of accommodation for the pauper insane of the county is indeed urgently called for. During the last six years, an increase of the pauper lunatic population of Middlesex has taken place to the extent of 1015: in 1855 alone, 261 persons of unsound mind were added. The result is, that in spite of the building of the additional asylum at Colney Hatch, opened July 17th, 1851, and of a slightly increased accommodation at Hanwell, there now are 1118 pauper lunatics unprovided for by the county institutions. This increase of lunacy, and the startling deficiency of accommodation for cases so soon after an enormous asylum has been opened for their reception, which was expected to meet any demands for many years to come, calls for serious enquiry as to the probable causes, and as to the best means to meet the difficulties entailed.

We shall more particularly limit our observations to the latter question ; how are the unprovided for lunatics to be best dealt with ? But we must first say a few words relative to the number of cases made chargeable to the county ; and although on the point to which we wished to direct attention, we are anticipated by the contents of the letter sent in reply to the Commissioners' queries, published in the Colney Hatch report, yet our notice of it, and the confirmation which we can lend to it, will possibly aid in making it better known. " It has repeatedly (says the letter referred to,) come to the knowledge of the committee, that patients sent here as paupers, are not so in the strict sense of the word. Some of them partially reimburse the parishes for their maintenance ; and in one recent instance, by collusion with the parish officers, a patient was sent here, the *whole* of whose maintenance was paid by his friends. This is so notorious, that parish officers now use the phrase " pure paupers," to distinguish them from those who are only partially so. Admissions of this kind are probably of more frequent occurrence than becomes known to the committee of visitors ; nor have they indeed much power of preventing them. It is, however, a manifest injustice towards the really indigent, and it tends moreover, to exhibit an amount of pauper lunacy which is really in excess of the truth." Instances of the kind mentioned are, we know, of very frequent occurrence ; agreements are entered into between parochial authorities and the friends of lunatics, for not only the partial, but for the entire and even for more than the average cost of their maintenance, as charged to the parishes. A positive evasion of the law is committed by transferring the lunatic for one night to the workhouse to give him the required pauper qualification. By this trick, parties capable of paying the cost of maintenance, even in a private asylum, escape the charge, and saddle the rate payers at large with much of the expenses incurred on their unfortunate relative's account.

Assuredly, indeed, no cases are more pitiable and deserving of relief, than those of heads of families, on whom the support of the whole household depends, and others, as professional men, even when single, seized with madness and without means either to have proper provision made for them, according to their previous condition in life, or able only to obtain it at the cost of pauperizing their families. It is truly hard and almost impossible to deny to such the advantages of a pauper asylum : nevertheless their admission

excludes others who are completely destitute. The former, it is presumable, have generally something to contribute towards defraying the cost of their maintenance; but it is insufficient to secure them the comforts, conveniences, and attentions, which in their past life they have been used to receive. The pauper asylum is not a fit receptacle for them, and the semi-pauper private asylum is equally unfit, for they cannot possibly receive so many advantages in it as in an actually pauper asylum,—their payment will not allow it, and it must be that the contrast of their present deficiencies with their past condition, will ever, while any mind lasts, be painful, and stand in the way of cure, or even of amelioration. We cannot therefore too heartily concur in the opinion, expressed in the letter above quoted, that “it would be very desirable that asylums should be established, where persons able to contribute a portion of the cost of the maintenance of their friends, should be assisted out of the public purse,” we would add, if private munificence do not come to their aid and build asylums for the middle classes.

In their official communication to the Middlesex magistrates, the commissioners sought to learn;—the existing accommodation; what additional accommodation was in progress or proposed; what arrangements existed with other counties and boroughs; what was the number of chronic, harmless patients which might be properly taken care of elsewhere; and, in general, what suggestions the visiting justices had to offer to remedy the present state of things. The Colney Hatch visitors reply by saying, that provision as above suggested should be made for those partly able to support themselves, and that criminal lunatics and idiots should be removed to special asylums. In all these suggestions every one will heartily concur, not as necessary only, but as essential to the well-being of all concerned.

The Commissioners’ proposition to remove chronic and harmless patients elsewhere would, in the opinion of the visitors, afford no material relief to the asylums. If sent to licensed houses, “the amount of gain would be measured merely by the difference between the number cured in them and those cured in the asylums. Again, there are many persons, of both sexes, who, under the system adopted in county establishments, are perfectly harmless, but who would not be so, if placed under other management.” They next proceed to argue against the establishment of an asylum for incurables, as involving the idea that the ever leaving it alive

is barely possible, and as consequently inflicting a cruelty without any attendant benefit on the many, who would be conscious of their hopeless condition. "In the existing state of parish workhouses, it would be impossible to find adequate accommodation for them, and to render it obligatory on boards of guardians to appropriate a lunatic ward in all union houses, would be inconvenient and expensive, particularly in the country; and, to say nothing of it being a return to the state of things before county asylums were erected, it cannot be supposed that the patients would ever be so comfortable as they are under the present provisions."

The reply of the Colney Hatch visitors to the Commissioners is dated March, 1855; at this date, speaking of the accommodation of their asylum, they observe, "they would on no account recommend any addition to be made. In consequence of the prohibition to erect a third story, *it is already inconveniently large*, and the loss of time, owing to the great distance from one portion of it to another, is a serious evil. To add a third story *now*, would be very difficult and not desirable. . . . Any remedy would be preferable to the erection of a third asylum, entailing, as it would, so vast an addition to the present enormous annual expenditure."

In July following, the necessity for taking some steps towards meeting the emergency consequent on the rapid increase of pauper lunatics unprovided for, led to an order from the Court of Justices of Middlesex, "that the committees of the two lunatic asylums be requested respectively to consider, and to report to the court, whether in their opinion, any additional accommodation can be procured, and if so, to what extent, and in what manner, at those asylums, for receiving the pauper lunatics of the county." The result of the deliberations is the resolution of the committees to enlarge each of the county asylums, Hanwell, by 600, and Colney Hatch by 650 beds.

This resolution we cannot too much deplore; it will continue and aggravate the many evils which have a long time been apparent. Certainly the Middlesex magistrates have gloried in their county possessing the largest lunatic asylum in the world; they are attracted by the hugeness of the establishment, and now seem disposed to outstrip all rivals in monster asylum building. But we think a large asylum to be no more honorable to a county than a large prison; the latter indicates neglect of the moral condition, of the education, and of the police of the county; the former is

equally evidence of neglect, and of the absence of the means of cure, where recovery is practicable. Insanity is a very curable disease when medical and moral treatment are scientifically applied to meet individual cases ; but what treatment, except the incidental and routine management of the institution, can be obtained by a recent case at the hands of the medical superintendent, charged as he is with the care of several hundreds of lunatics and numerous accessory duties. Such asylums as Colney Hatch and Hanwell might justly be called manufactories of chronic insanity. If a case recover, and few indeed are those that do recover within their walls, it is certainly the result of fortuitous circumstances, and not of any special treatment applied to it. If recent insanity is to be treated, not more than a hundred cases ought to fall within the province of any one physician. Each case must be closely watched in all its psychical and physical manifestations, and its treatment be constantly varied according to its changing conditions. But in the colossal establishments of Middlesex, positive and effectual treatment cannot be applied ; the recent case is swamped in the multitude of others demanding, although chronic, various attentions from the overtasked medical superintendent ; the patient is not justly treated, and far too frequently becomes a confirmed lunatic. The attendants accustomed to mere routine of the wards, to busying themselves in cleaning and polishing, in dressing and bed-making, and in the many details of household economy, are not qualified to observe and report the medical features of an acute case, nor properly to manage it. Indeed, except to serve in the so-called "moral treatment," *i. e.* in keeping order and observing method, in preserving cleanliness of the ward and its inmates, and in carrying out the regulations as to exercise, employment, and the distribution of meals, the attendants of very large asylums are inefficient for curative purposes. This inefficiency shews itself even when sickness overtakes the old inmates ; the nurses are not at all, or but little, awake to observing changes in the physiognomy and the various corporeal symptoms indicative of the onset of disease, and which, to save life, demand immediate attention. Where the mind and sensibility have sunk to a low state, where melancholy broods heavily on its victim, and in other instances, it is only by the eye of the experienced, that fatal disease is to be detected, for the unfortunate patient himself makes no complaint. Many, may lose their lives from this cause ;

instances may often happen where disease has made such havoc of the frame before the observation of the unprofessional and inexperienced eye notes it, that recovery is hopeless. The medical officer, confronted by hundreds of cases, cannot watch each one from day to day, and must trust to attendants to call his attention to the symptoms of disease.

Among the female attendants these disadvantages must be still more felt; they are not nurses, accustomed to medical matters; they are besides mostly young: from these circumstances, judging from our experience of the backwardness of young women to report various particulars concerning female patients, it happens that when sickness occurs, or a recent case is admitted, they are found very inefficient, and the consequent cause of much prejudice to the cases under their care. In these great establishments, moreover, where the medical element is almost null in effect, what security is there for the due administration of medicines, for the proper employment of various appliances to the sick, and for the observation of the effects of remedial agents? Surely, from these circumstances, as well as from the consideration of the previously noted evils, it becomes evident that large asylums, such as those of Middlesex, are unfit for the *treatment* of insanity; they may serve for chronic cases tolerably well, but for the treatment of recent attacks, a special establishment is necessary, in short, a lunatic hospital for the county. Unfortunately, the impression prevails among the magistrates of Middlesex, that insane people only require to be placed in an institution among other insane people, and where a moral system of treatment is pursued. That insanity is a disease of the bodily structure, just as an inflammation of the lungs, and requires systematic medical treatment, is a truth ignored by them. The resident medical officer in one of their asylums is with them nothing more than an officer by having whom, the expense of a visiting surgeon is avoided. The superintendent is an overlooker and director, the head of a staff of subordinate officers, but cannot rightly be termed the physician of the asylum; he is wanted to exercise medical functions only when casualties demand, and, as far as practicable, to attempt something in the medical way before a patient makes his exit from this world, provided always, that the patient has complained, or that the existence of illness has been discovered by the attendant.

How high an opinion the visiting justices entertain of the capacity of the bodily and mental powers of a medical superintendent, and, on the other hand, what value they set upon medical treatment, is well illustrated by the following fact, mentioned in the report of the steward of Colney Hatch, for last year. He writes, "I must also remind the committee, that some three years since it was with them a matter of serious deliberation, whether it was advisable that the male and female departments should be placed under the care of one medical superintendent, and, in fact, whether one medical officer should have the supervision and direction of 1250 inmates, and an extended range of building, or whether the two departments should continue, as they are at present, separate and distinct." If then, argues the steward, "it is considered feasible for one person to superintend 1250 patients of both sexes in a building extending from one extreme to the other, nearly two-thirds of a mile, would it not be equally feasible to superintend 840 patients in a building one half (somewhat more we would remind the steward, when his additional wards are built,) the extent, provided they are conveniently and safely located, although those patients are all males."

Who can dispute the feasibility of a medical or of any other man *superintending* 840, 1250, or two or three thousand more patients, collected in an asylum or in a town, as a governor or director, if subordinate agents in sufficient number are allowed him? But we think the question with the county is not, how can we govern our insane population most easily, and at the least possible cost, but how many, and by what means can we succeed in curing cases of insanity as they arise, and thus permanently diminish the expenditure, and consequently the rates. Certainly the latter results are not to be attained by persevering in the old scheme of congregating lunatics by tens of hundreds, (a circumstance in itself prejudicial to recovery and to health,) but by making suitable provision for the immediate treatment of the pauper insane.

The circumstances of the county are now so pressing, that something must be done to find accommodation for the 1100 cases yet unprovided for. However adverse, therefore, we are to enlarging the present overgrown asylums, it seems almost inevitable unless a third asylum be erected. The city of London is now compelled to build for its lunatics. Could the county arrange with the city authorities to build a joint asylum? Such a plan would save expense to both

parties. Is not, however, the erection of a third asylum demanded for the county by the fact of the constant progressive increase of lunacy ; for even if the whole number of chargeable patients be provided for in the existing asylums by the extensive additions contemplated, this will no sooner be effected, than a host of fresh applicants will demand admission, and then surely, further extensions could not be thought of.

The county is bound to provide for its indigent pauper population, and cannot shirk the expense. To enlarge the present asylums will only stave off the necessity for a new one for a year or two ; and whether a third be built for existing chronic cases or not, an hospital for recent ones is imperatively demanded, both for the interests of the afflicted patients themselves and for those of the county. Such an hospital, with a proper medical staff, would furnish every possible means of preventing for the future, the alarming increase of chronic cases, and we hope, might so restrict the number of incurables, that future accommodation for them would not be called for. Taking the possible cures at 70 per cent, and the deaths at 10, the incurables to be drafted to the two or the three other asylums, would be but 20 per cent, exclusive of paralytics, epileptics, and idiots ; a number not exceeding the removals by death and by occasional recoveries, after many years confinement, annually taking place in them. Accommodation for 300 recent cases would, we believe, be found sufficient.

The great argument with the visiting justices against the erection of a third asylum is, the immense expense, whilst the inducement to enlarge the existing establishments is derived from the comparatively cheap cost at which it may be effected. No doubt the latter plan has the advantage of cheapness ; but, as said above, it will defer the carrying out the former for only a few years. Then again, if the proposed additions be made, more medical officers are certainly required. In the Colney Hatch report, the steward remarks, "an addition to the present medical staff of the asylum would, I presume, be required ;" but none of the Hanwell authorities seem to have thought of such a requirement ; no accommodation for even one additional medical officer is provided for in their plan. So it seems that the present woefully insufficient medical staff must submit to the imposition of more work on themselves ; that evils resulting from the neglect of medical treatment, and from imperfect medical supervision, must continue to augment.

until they attain such proportions, that public attention is directed to them, and public indignation visits their abettors.

Charges of ill-treatment by attendants have of late years, been made in many asylums; casualties and injuries, known during life, and others brought to light by autopsies, are of too frequent occurrence; and although committees have partially exonerated their servants from blame, and juries have found verdicts of "natural death" and "no person in default," yet suspicions will arise that the treatment of the inmates is often none of the kindest, and no doubt can exist that a greater concentration of superintendence is frequently heeded. Can a proper superintendence of the psychical and physical, of the moral and medical condition of 600, or as is proposed of 800 mentally, morally, and bodily afflicted patients, be exercised by one man; can that one man, in addition, regulate and watch the conduct of some 50 or more attendants and servants; overlook the general order and working of the establishment; carry into effect medical treatment, diagnose disease, secure the due administration of medicines, feed patients who would starve themselves, order and arrange employment and exercise for the inmates, attend to casualties and to sanitary details, make weekly or fortnightly reports to the committee, keep records of the cases and make the necessary returns to the Commissioners, conduct autopsies and keep records of them; can, we repeat, each and all these duties, and not a few minor ones unmentioned, be satisfactorily and properly performed by any one man? Can he be made accountable if the machine goes wrong in any part? Can he feel sure his patients are kindly treated and properly attended to? Can he do justice medically to any one afflicted patient, whose restoration to health and to society depends on the efficient exercise of medical skill? Will not every thinking, reasonable man reply in the negative? We look upon an attempt to persuade the visiting justices, that the present system is radically wrong, as hopeless; they are too much enamoured with the notion of its completeness and excellence, too satisfied with the sufficiency and perfection of their arrangements. In their eyes Colney Hatch and Hanwell are model asylums, matchless in size, and in every other good quality.

If the enlargement of the existing establishment be determined on, the rate-payers should insist on the increase

of the medical staff to secure their effectual working. If this be done, then the other evils consequent upon their great magnitude will be of secondary importance, and some security will be supplied against the rapid production of incurable cases, as permanent charges upon the rates.

We had intended to have carefully analysed the plans for the additions proposed to Hanwell and Colney Hatch; but the want of space forbids detail. The Hanwell plan is the production of Mr. Harris, formerly the engineer; whilst the Colney Hatch plan is designed by the steward, Mr. Henderson, who confesses to his non-professional character as an architect.

The estimated cost of the additions at Hanwell, which involve the entire re-building of the general offices, is £68,600; the cost at Colney Hatch, including the building of new and the enlargement of former general offices, is £42,874, making for the two £111,474, and providing for 1,250 additional cases. He would be a bold man who would undertake that this estimate should not be exceeded. What is the wont of architects? Is it not the common rule, (at least, the exceptions only prove it the rule,) that their estimates are greatly exceeded ere the work is completed. Have not the visitors of Colney Hatch a example before their eyes in their own asylum, estimated to cost about £80,000, but which actually did cost from £250,000, to £280,000? They must have an apostolic amount of faith to believe that £42,874 will provide them space for 650 more patients, and the renewal of most of their offices on a still more extended scale than heretofore. Moreover, be it remembered that this estimate is made by a gentleman, very ingenious indeed in his ideas, but not aided by any personal experience in building matters. What a host of extras may therefore be looked for! No commission, no clerk of the works, no expenses for ground work are charged. A dining hall, 80 feet by 50 feet, for female patients; a scullery, 24 feet by 18 feet, and a mess-room for attendants, 45 feet by 24 feet, are to be built for £1,508, the fittings to cost only £55 of this sum; a bake house with three ovens and loft above, and the necessary fittings to be built for £302; and so on of other structures, all on the same building-made-cheap plan.

Mr. Henderson and Mr. Harris entertain the views of the committee as to large asylums and medical supervision. We should think the rate-payers to have got off very well indeed, if the proposed changes cost no more

than £150,000, and we would put it to the magistrates and to the rate-paying public, if this sum, or the estimated £112,000, would not be far better expended in building and fitting an asylum less expensively constructed than Colney Hatch, for the reception of the chronic, old and harmless patients, who require a less elaborate system of management, and less attendance than the rest of the asylum population. In a detached wing of such an asylum the idiots might well be accommodated, and their separation advocated by the visiting justices be thus sufficiently secured.

The scheme for adding to the accommodation of Hanwell, is particularly objectionable, and deserves the veto of the commissioners, and the protest of every one interested in the welfare of the insane. Extensions of the ground-plan are forbidden by its already overgrown extent, except for the purpose of removing the general offices to a more convenient position. Additions to the existing buildings are opposed from several considerations, and especially from their unfitness. Who that has seen Hanwell, does not perceive that it is a most indifferent asylum in its very structure; that the wards are too narrow and low; the rooms confined; ventilation and warming imperfect, and that irremediably so; the windows bad; the staircases exceeding in badness all those we have ever seen; the airing-courts too confined, and the *tout ensemble* of the building internally unpleasing and heavy. If a third story be raised above the present floors, it must partake of the like defects with respect to limited dimensions; an effectual system of warming and ventilation will be impracticable; the deficient courts will become still more so. Moreover, all the objections hitherto urged against a third story to an asylum, apply in their fullest extent to such a construction at Hanwell.

It should be remembered that Hanwell asylum is overpopulated; that there are wards and dormitories beneath the level of the ground, which in any other asylum would scarcely be tolerated by the Commissioners. Rather than see the patients so situated, we would prefer an addition to the extent of the wards above, even by the construction of a third story. Before new accommodation is provided for fresh cases, the giving up of these underground abodes ought to be insisted upon. Much has been said and written against corridors with rooms opening on each side, but here at Hanwell we find such galleries not only on the ground floor, but also beneath it, and containing some fifty patients and upwards, who have in such dull abodes to drag out their unfortunate existence. The underground dormitories for females, lighted

only by windows opening into damp, narrow areas, one entering out of another, wretchedly ventilated, and in appearance like wine vaults, are probably known to few.

The rule of the House of Commons is, to have grievances redressed, before grants of money are voted. Let this rule be enforced by the ratepayers in the case of Hanwell: let them see the present patients properly lodged and tended, before money is voted to furnish accommodation for fresh inmates. The stone or tile floors of the sleeping rooms require to be replaced by wood; the institution to be properly warmed and ventilated; bath-rooms rebuilt and multiplied, so that each ward should have one bath; and if bathing is to be systematically pursued, as it should be, a bath-room for each department erected; and last, not least, a sufficient supply of hot water for the baths, so that some decency may be observed and the feelings not outraged, by bathing ten or a dozen patients in the same quantity of water.

To notice some of the alterations and additions designed, we may first state that Mr. Harris proposes the construction of some additional wards, having a row of rooms on each side of a central passage or corridor; that is, he will perpetuate and increase an already existing evil. He adds a projecting recess from the centre of each ward to form a day room, and uses the present day rooms for dormitories. The recess is a good feature, rendering the wards lighter and more cheerful, but the multiplication of patients in each ward, by using the day-rooms as large dormitories, is objectionable and subversive of proper supervision and management: in some wards as many as sixty or seventy patients will be congregated. Indeed, the crowding will be very great in those wards where the patients occupying the third story only for sleeping, must be disposed during some portions of the day. The conversion of the existing workshops into dormitories is open to several objections: but the notion of sleeping the patients employed in the laundry and washing houses, in a room over the laundry cannot be too severely condemned; for it is nothing less than cruelty to restrict the unfortunate female patients to the wash-tub from year's end to year's end, day after day, from morning till night, and when night comes to march them up-stairs to sleep, above their workshop; forbidding them, as it were, to forget their position, and denying them the change of other wards, and other companions. We discover no day-room and no dining-room provided for them. Indeed, Mr. Harris states that "both patients and servants will take their meals in the laundry."

By examining further into the details of the plan, we might point out numerous other objections and defects. For instance, there is no provision for increased airing courts to meet the requirements of the proposed large increase of patients. Truly, Mr. Harris has squared one or two old courts; has added a small yard on each side as an airing court for his projected refractory wards, and designed a large additional court in front of the building, but this last is abstracted from the fine exercising ground, which is at present one of the few good features the asylum has to boast of; the proceeding is therefore on the sapient principle of "robbing Peter to pay Paul." It should be noted, moreover, that the fine front fields will be encroached upon by the extension of the present wings forward in a T shape. The newly erected chapel will also be too small for the augmented population. For the present number of inmates it is actually too small, if all attended who could do so; the scheme advanced to remedy this is to build a gallery, but the elevation of the chapel is really too limited to admit of one being erected; such an additional structure would interfere not only with the appearance, but with the lighting, and especially with the ventilation of the building; a most insufficient supply of air would be afforded to each person, and besides these evils, there are all the disadvantages of an elevated gallery for the use of the insane.

We would, however, give credit to Mr. Harris for several projected improvements: among these are, the rebuilding of the kitchen and other offices, common to the two departments, in a central position in the rear of the house; the removal of the foul linen wash houses further away from the wards (Is a separate one needed on each side?), and of the piggeries and cow houses. The position of the covered way, on each side, to the kitchen should be reconsidered; it very awkwardly cuts off the proposed dormitories from the ward to which they belong, as well as the existing subterranean dormitories, or, as they might rightly be called, wine cellars appropriated to patients. Certes, we should rejoice if the latter were quite cut off, and the discredit of them to an English asylum abolished.

Reviewed as a whole, Mr. Harris's plan for enlarging Hanwell cannot be commended. It perpetuates and augments existing evils and introduces others. It proceeds on an erroneous principle, that of building upon, altering and patching a bad basis, the existing ill-built edifice,—and therefore necessarily repeats what is objectionable. At the same time, except in the case of general offices, as mentioned, it

remedies no defects; it leaves the present population badly, and much of it wretchedly lodged; it leaves subterranean not ventilated, and not-to-be-ventilated wards or dormitories, dismal and dungeon-like in character, half lighted and overcrowded; it leaves all other wards and dormitories equally overcrowded with beds touching beds, with a most insufficient supply of air, badly or not at all warmed; it leaves the present, winding, barred, cage-like and dangerous principal staircases, and the equally bad small staircases, together with many other grave defects untouched and unremedied. A proper infirmary in lieu of the very unfit rooms so called, is needed on each side, especially on the female; a dining hall, common to the two sexes, or one for each sex, is a desideratum; but no such improvements are proposed.

We have no space to review the plan for the enlargement of Colney Hatch. The same architectural objections do not obtain as at Hanwell; but the congregation of so many hundred lunatics in one area is objectionable, and unless medical supervision be provided far more completely than heretofore, any increase should be utterly denounced.

The saving in cost of construction and in subsequent cost of management, will not be much if the projected additions be made in lieu of building another asylum. It is on the ground of great comparative cheapness that the present schemes at Hanwell and Colney Hatch are urged upon the county rate-payers; let then the estimates given be closely investigated; for we detect the omission of many items of expenditure, and are perfectly convinced that the estimates for almost every part of the work are very much understated. We entertain very considerable doubt, of the greater cheapness in working the asylums when so added to, compared with the management of a distinct establishment, provided that efficient government and the practicability of medical treatment be ensured, and that the increased duties be not thrown upon the present insufficient medical staff. In Mr. Henderson's plan distinct offices are proposed for each sex, a new additional kitchen, laundry, dining hall, &c., are to be erected, and for these additional servants must be hired, just as much as if they were offices of a distinct asylum. No doubt the larger the number collected in any given building, the less is the average cost of maintenance, but this cannot outweigh the many disadvantages of the excessive multiplication. The argument that a better locality than Colney Hatch could with difficulty be found is very fallacious; it is a tenacious clay soil, and the building is low down on a hill side, and consequently disadvantageously

placed for ventilation. Few will recognise the force of the argument, that "the enlarged asylum will surpass in working a new institution, because in the latter the staff are strangers to one another, and in many cases strangers to their duties."

We trust the committee of Colney Hatch asylum will re-peruse and reconsider their letter of March, 1855, to the Lunacy Commissioners, and be induced to retain their then expressed convictions, that, on no account should any addition be made; that the building is already inconveniently large, and that the loss of time its size involves to the officers, is a serious evil.

Here we must pause, hoping that wiser counsels as to the best mode of managing and treating the insane poor will for the future actuate the visiting justices of the Middlesex county asylums.

J. T. Arlidge.

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 county asylum.

J. T. Ashby

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