

Hopper, Kate

Publication/Creation

1915-1916

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Jan 4 1906

Dear Sir,

We are much surprised
that no answer has been received
from my note of Dec 15 with
regard to the payment of the
account for Mrs. Hopper.

It seems also surprised that
no notice has been taken of his
letter of Dec 30. A reply to both
these letters in the course of a day or
two will oblige -

Yours faithfully

Wm. E. Waller
Secy.

H. S. Hopper Esq

Jan 11 1916

Dear Sir,

We are much surprised
that no answer has been received
from you with
regard to the payment of the
account for the 1000
Dollars is also surprised that
no notice has been taken of the
fact of the 1000. A reply to that
effect is the cause of a day or
two this office.

Yours faithfully
Wm. C. Walker
Secy.

H. A. Walker
Clerk

11th January, 1916.

Dear Mr. Hopper,

I have been away for a day or two or your letter of January 8th would have been acknowledged sooner.

I am extremely pleased to hear that Mrs. Hopper is so nicely, and I congratulate both you and Mrs. Hopper on her recovery, and I have pleasure in enclosing a formal notice of discharge.

I remain,

Yours very truly,

11th January, 1912.

Dear Mr. Hopper,

I have been away for a day or two of your

letter of January 11th would have been acknowledged

sooner.

I am extremely pleased to hear that Mrs. Hopper

is so nicely, and I congratulate both you and Mrs. Hopper

on her recovery, and I have pleasure in enclosing

a formal notice of discharge.

I remain,

Yours very truly,

her look so well &
strong in her life.
Enclosed please find
Cheque £5/-1/-1/-
with kind regards

Yr. V. Truly
H. S. Hopper

524.

KELLEYTHORPE,
DRIFFIELD.

Jan 8. /16.

Mr. S. Pierce

I am sorry I
have not sent you
a cheque for a/c before
but have been away
on great deal of travelling
but I am very glad
to say Mr. Hopper is
very well & I don't
think I ever saw

DRIFIELD
KELLEYTHORPE

30th December, 1915.

Dear Mr. Hopper,

In sending you a circular letter on the subject of discharge, I may say that we should like if possible to have the discharge completed during the present year, and if you could send me a wire with the word "recovered", or if necessary "relieved", I shall under stand.

With all good wishes for the New Year, and hoping Mrs. Hopper and the baby are flourishing.

I remain,

Yours very truly,

30th December, 1915.

Dear Mr. Hopper,

In sending you a circular letter on the

subject of discharges, I may say that we should like it

possible to have the discharges completed during the

present year, and if you could send me a wire with the

word "recovered", or if necessary "relieved", I shall

under stand.

With all good wishes for the New Year, and

hoping Mrs. Hopper and the baby are flourishing.

I remain,

Yours very truly,

19th November, 1915.

Dear Mr. Hopper,

The last we heard of Mrs. Hopper was very satisfactory. I trust it will now be suitable for me to discharge her from our books as "recovered". I should be glad to have alline from you to sanction this, as it is not desirable that her name should be longer on our books than necessary.

I remain,

Yours very truly,

6th September, 1915.

Dear Dr. Eccles,

We are disappointed with respect to Mrs. Hopper.

I have been away a fortnight and find little change on my return. She is very unresponsive and hardly speaks at all, though when visited by her relatives she is somewhat more communicative. There is a dullness and state of mental confusion which prevents her from taking an ordinary interest in things. She understands what is going on, and sometimes makes shrewd remarks unexpectedly. She is unemployed, will not play any games, or do any needlework, has to be dressed, and sometimes is resistive.

I still think it would be well for her to be tried at home with competent nurses, as it is possible that she may respond to a change of surroundings and ordinary interests. I do not think I have any advice to give you with regard to the management of the case, except that I do not think a person in this confused state should be trusted far. One does not know enough of the workings of her mind to do this, and it is quite possible that some impulsive act might occur at any time.

As regards the nature of the disease I must confess that one is rather perplexed. Confused states are quite common forms of puerperal insanity, the prognosis of which is good, but one cannot but remember that mental indifference,

25th September, 1912.

mutism, resistiveness are also symptoms of dementia praecox.

It is, however, far too soon to attempt a definite diagnosis between these conditions.

You are aware that there is a discharge from the ear due to middle ear disease. This we are keeping down with syringing.

I remain,

Yours very truly,

I still think it would be well for her to be nursed at home with competent nurses, as it is possible that she may respond to a course of nursing and ordinary interests. I do not think I have any advice to give you with regard to the management of the case, except that I do not think a person in this confused state should be treated for. One does not know enough of the workings of her mind to do this, and it is quite possible that some improvement may occur at any time.

Regarding the nature of the disease I must confess that one is rather perplexed. Confused states are quite common forms of psychical insanity, the prognosis of which is good, but one cannot but remember that mental indifference

THE ELMS,
NAFFERTON,
EAST YORKS.

3 Sep. 15

Dear W. Vice,

Mr Hopper called on me the other night & showed me your letter re his suggestion that Mr Hopper should come home for a little time. I shall be pleased to take charge of her, but feel, with you, that she must have two thoroughly trained mental nurses. The old nurse she had - Laura - is at liberty on the 10th. She is trustworthy. And if you agree to let Mr Hopper come home we could, perhaps, get another one. Perhaps you will write me fully giving any instructions and advice you deem necessary.

Yours faithfully
Charles Keates

THE FILMS

INTERMEDIATE

EAST YORKS

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16th August, 1915.

Dear Mr. Hopper,

Dr. Mackenzie told me of your suggestion that Mrs. Hopper should go home with a nurse for a visit to see how she gets on. Seeing that she brightens up when you are with her I incline to think that the suggestion is a good one, though I am not very sanguine as to any striking benefit by the change, yet there is a possibility of improvement. The difficulty will be the question of nursing. We are so placed that we cannot spare a competent nurse. Besides I think it would be advantageous for her to be with strangers away from the Retreat surroundings altogether. Perhaps you would be able to get trustworthy nurses at Hull or Leeds. I hardly think a single nurse will suffice. We have not felt justified in leaving her alone at all at night, and I cannot but think that a depressed and confused patient such as she is may suddenly become impulsive, and there ought to be no chance of anything going wrong whilst away from care. If the supervision is adequate there is no reason why she should not go away on leave of absence, the certificates remaining in force, so that in case of failure she could return at any time.

I remain,

Yours very truly,

10th August, 1918.

Dear Mr. Hopper,

Dr. MacKenzie told me of your suggestion that

Mrs. Hopper should go home with a nurse for a visit to see

how she gets on. Feeling that she has been up when you

are with her I incline to think that the suggestion is a

good one, though I am not very sanguine as to any striking benefit

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We have not felt justified in leaving her alone at all at

night, and I cannot but think that a depressed and confined

patient soon as she is very suddenly become hysterical, and

there ought to be no chance of anything going wrong whilst

away from care. If the supervision is adequate there is no

reason why she should not go away on leave of absence, the

certificates remaining in force, so that in case of failure

she could return at any time.

I remain,

Yours very truly,

766.
TELEPHONE 400.
CITY OF YORK



HEALTH DEPARTMENT,

50 BOOTHAM,

YORK.

EDMUND M. SMITH.
M.D., D.P.H., F.R.S.I.

MEDICAL OFFICER OF HEALTH
AND
CHIEF SCHOOL MEDICAL OFFICER.

July 24. 1915

Dear Dr. Pierce,
Re Mr. Hopper.

I examined this patient's swab
and was only able to grow
an ordinary mouth Staphylococcus.
Evidently there was no relationship
between the septic tooth and the
organism found in the urine.

Yours sincerely,

J. Bell Ferguson.

It is an important factor in the history of

of civilization for a long time, and cannot be taken

that this people with the tooth had caused a great deal

enough at 18.18 (see below), and it is also

We have argued with Dr. Huxley to give the

cause, it removed without an investigation.

The (this name) referred to is also very clear, and it

very matter. The tooth appears to be explained to the

and he says the extraction of the tooth will not be so

Mr. Campbell came to see Mr. Huxley (see below).

Dear Mr. Huxley,

19th July, 1915.

Dear Mr. Hopper,

Mr. Constant came to see Mrs. Hopper to-day, and he says the extraction of the tooth will not be an easy matter. The tooth appears to be ankylosed to the jaw (this means fastened to it with bony tissue), and it cannot be removed without an anaesthetic.

We have arranged with Dr. Evelyn to give the anaesthetic at 12.15 to-morrow, Tuesday. It is clear that this trouble with the tooth has caused a great deal of irritation for a long time, and I cannot but think it is an important factor in the illness.

I remain,

Yours sincerely

19th July, 1915.

Dear Mr. Hopper,

Mr. Constant came to see Mrs. Hopper to-day,

and he says the extraction of the tooth will not be an
easy matter. The tooth appears to be ankylosed to the
jaw (this means fastened to it with bony tissue), and it
cannot be removed without an anæsthetic.

We have arranged with Dr. Evelyn to give the

anæsthetic at 12.15 to-morrow, Tuesday. It is clear
that this trouble with the tooth has caused a great deal
of irritation for a long time, and I cannot but think
it is an important factor in the illness.

I remain,

Yours sincerely

16th July, 1915.

Dear Dr. Eccles,

I send you the
bacteriological report which
is rather indefinite.

Mr. Constable Hayes
is coming over here on Saturday
afternoon to examine Mrs. Hopper's
nasal passages as we think there
is some chronic trouble there
which needs attention.

I remain,

Yours very truly,

10th July 1918

found may be of a specific nature and may really be the
exacerbation. It is possible that the organism you have
a spontaneous character directly associated with certain
which there was a spontaneous discharge of micro-organisms
one and that you to examine it again. I know of a patient
not likely to help very much, otherwise we would already
from these infections? It is rather a curious situation
and almost assuming that it is due to a specific organism
the blood through the kidneys or can they be eliminated
you infer that there is a spontaneous discharge of these
the inflammatory type of proclivity is specific or not.
point I should like your opinion about it specifically
judgement for your trouble with regard to this. I am
sending you J. O. which I hope you will find of interest
I am much obliged to you for your reply.

13th July, 1915.

Dear Ferguson,

I am much obliged to you for your report. I am sending £1. 1. 0, which I hope you will accept as an acknowledgement for your trouble with regard to Mrs. Hopper. The point I should like your opinion about is whether you consider the friedlander type of baccillus is specific or not. Do you infer that there is a persistent discharge of these from the blood through the kidneys or can they be sufficiently explained by assuming that it is due to a cystitis arising from local infection? If the latter a catheter specimen is not likely to help very much, otherwise we would gladly take one and ask you to examine it again. I know of a patient in which there was a persistent discharge of micro-organisms of a dyptheroid character directly associated with mental exacerbations. It is possible that the organisms you have found may be of a specific nature and may really be the cause of the disease. If this be so I should expect that the nasal passages would be likely to be the original focus.

I am glad to know that there are no tubercle bacilli in the other case.

I remain,

Yours very truly,

13th July, 1915.

Dear Ferguson,

I am much obliged to you for your report. I am sending 31.1.0, which I hope you will accept as an acknowledgement for your trouble with regard to Mrs. Hopper. The point I should like your opinion about is whether you consider the Friedländer type of bacillus is specific or not. Do you infer that there is a persistent discharge of these from the blood through the kidneys or can they be sufficiently explained by assuming that it is due to a cystitis arising from local infection? If the latter a catheter specimen is not likely to help very much, otherwise we would gladly take one and ask you to examine it again. I know of a patient in which there was a persistent discharge of micro-organisms of a dysphtheroid character directly associated with mental excoriation. It is possible that the organisms you have found may be of a specific nature and may really be the cause of the disease. If this be so I should expect that the nasal passages would be likely to be the original focus.

I am glad to know that there are no tubercle

bacilli in the other case.

I remain,

Yours very truly,

think it probable that it is the
offending organism, as there were
no *B. coli* or *Staphylococci*; the
two likeliest offenders to creep
in thro' external contamination.

With regard to the *Empyema* with
persistent discharge, a friend of
mine Dr. Laurie of Derby sets
good results in similar cases

by putting two v. large drainage
tubes into cavity, and continuously
dropping in 10 volume Hydrogen
Peroxide thro' a catheter.

A saline drop indicator
shows the rate of flow of
the H_2O_2 & a screw clamp
controls it.



IVYHOLME,
HOLGATE HILL,
YORK.

July. 13. 15.

Dear Dr. Pierce,

I beg to acknowledge
receipt of letter, and fee.
With regard to the urine examined,
it is quite impossible to state
anything definite about the organism
found as the specimen was not
collected under strictly aseptic
conditions. I would, however,

After the discharge lessons
Houston's Value appliance would
help the lung to expand.

I am,

Yours Sincerely,

J. Bell Ferguson.

TELEPHONE 474.
CITY OF YORK

TUBERCULOSIS DISPENSARY,



J. BELL FERGUSON,
M.B., D.P.H.
TUBERCULOSIS OFFICER.

11, CASTLEGATE,

YORK.

12 JUL 1915

Dear Dr. Pierce,

I examined the material
you sent and beg to report
as follows: —

- (1) S. Baber - Pus showed a considerable
number of polymorphs and a small
cocci. No T.B. were found.
Inoculated on Blood-Agar one obtained
an opaque, white, porcelain-like
growth which seemed to be due to
"Micrococcus Candidans" — supposed to
be non-pathogenic.

(ii) Mr. Hopper. Urine.

Urine cloudy, much mucus.

Filtered urine free from albumen.

Smear of centrifuged deposit showed
a Gram + organism (probably from Vagina)
and a short Gram - bacillus.

Agar - Deposit smeared on agar yielded
a profuse growth, which seemed to
be like that of B. Friedländer.
Gram stain showed a small G-
cocco. bacillus, not typical of
B. Friedländer itself, but probably of
same group.

After standing at room T. for
3 days, the urine gave no smell
of B. Coli.

I hope these few findings may be
of assistance, altho' since urine
was not a catheter specimen and
may be led astray. Kind regards.
J. Bell Ferguson.

7 July. 15

Dear W. W. H. H. H. H.

May I trouble you to let me know
your opinion of Mr. Hopper of Kellythorpe.
Also if we are now able to give me the
program. I regret that because of
work has not enabled me to accept your
kind invitation to pay a visit to the Retreat.

Yours faithfully

Charles H. H. H.

THE ELMS
HARRINGTON
EAST YORKS

you think it gives
her any pleasure
yet —

Yours truly
M. Jell.

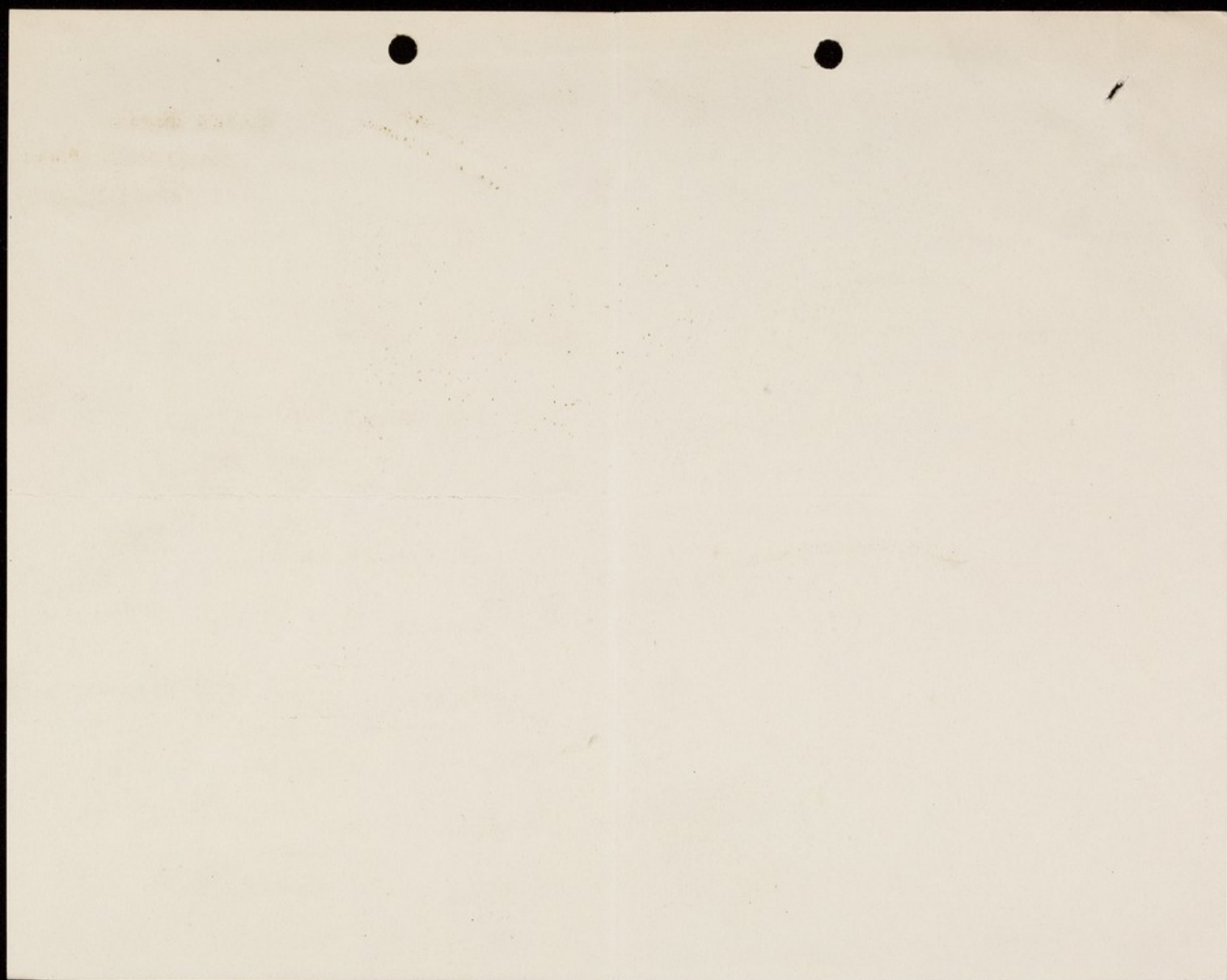
Nurses Report.

Quite alright.

685.
Arnold
Ski Langh
Hull
May 4 —

Dear Dr. Pierce

Would you be so
kind as to tell me
if my sister Mrs
Hopper is any better —
I thought of coming
over on Saturday
with my mother in
law to see her if



afraid address
Yours sincerely
Mr. Jeff.

NAT. TEL. 14 SUTTON.
TELEGRAMS, SUTTON-ON-HULL.

576.
THREE TREES,
SUTTON-ON-HULL,
EAST YORKS.

Dear Dr. Pearce

Would you be
so kind as to let
me know how
my sister Mrs. Hopper
is getting on - I
should be so glad
if you would
write to the

Three Trees
Bottom-on-Hill
East Yorks.

30th March, 1915.

Dear Madam,

There is very little to report about Mrs. Hopper. She remains in very much the same condition as when Mr. Hopper was here the other day. She perhaps takes a little more notice of what goes on, but for the greater part of the time she is in a dull, apathetic state, apparently taking no notice of anything. She is being nursed out of doors, and is gaining strength, but there is not much mental improvement yet.

Yours very truly,

Mrs. Jeff,

Three Trees,

Sutton-on-Hull,

East Yorks.

30th March, 1915.

Dear Madam,

There is very little to report about
Mrs. Hopper. She remains in very much the same
condition as when Mr. Hopper was here the other
day. The parapsychic takes a little more notice of
what goes on, but for the greater part of the time
she is in a dull, apathetic state, apparently taking
no notice of anything. She is being nursed out
of doors, and is gaining strength, but there is
not much mental improvement yet.

Yours very truly,

Wm. J. L.

Three Trees,

Winton-on-Hill,

East Yorks.

THE ELMS.

WAPPERTON,

EAST YORKS.

26 March. 15

Dear W. Pierce

Now that you have had
 some little time to observe my
 patient, Mr. Hopkin of Kellythorpe,
 I shall be much obliged if you will
 kindly give me your opinion of
 his case, & if possible some
 prognosis -

Yours faithfully

Charles Keble

THE FILMS

MONTREAL

1930-1931

27th March, 1915.

Dear Sir,

It is difficult to give you a very definite prognosis in respect to Mrs. Hopper. She is anaemic and somewhat feeble, but is gaining strenght physically. We are nursing her out of doors for many hours daily, which seems to suit her well. She has not had any sedative, and now sleeps for several hours every night. She is in a dull, apethetic condition and rarely answers questions, but she clearly notices what goes on though she does not join in any conversation, and she is quite unoccupied. This condition of semi-stuper is practically continuous, though once or twice she has made a sensible remark. I see no reason why she should not recover satisfactorily.

I hope that, if you are able, you will come over to see her. You need not give any notice, but just come at any time which is convenient to you.

I remain,

Yours very truly,

Dr. Eccles,

The Elms,

Nafferton,

East Yorks.

27th March, 1915.

Dear Sir,

It is difficult to give you a very definite prognosis in respect to Mrs. Hooper. She is anemic and somewhat feeble, but is gaining strength physically. We are nursing her out of doors for many hours daily, which seems to suit her well. She has not had any sedative, and now sleeps for several hours every night. She is in a dull, apathetic condition and rarely answers questions, but she clearly notices what goes on though she does not join in any conversation, and she is quite unoccupied. This condition of semi-stupor is practically continuous, though once or twice she has made a sensible remark. I see no reason why she should not recover satisfactorily. I hope that, if she is able, you will come over to see her. You need not give any notice, but just come at any time which is convenient to you.

I remain,

Yours very truly,

Dr. Hooper.

The Case.

History.

and for

Saturday morning so
hope I shall be able to
see you I should be
very pleased if you
will send me a line
tomorrow saying how
W^m Hopper is.

I remain
y^rs. v. truly
H. S. Hopper

March 25/15.

Dear Dr. Price,

Many thanks for
your letter received yesterday
I am very glad to hear
W^m Hopper is still sleeping
well & I hope now she
will soon be better.
I find I shall be unable
to get over on Friday
so I will come on

14-00000-1
14-00000-1

able to get over again
on Friday to see H. S. Hopper
& that I shall be able
to see you.

Remain
y^r A. V. Truly
H. S. Hopper

554.

March 23. /15.

Dear Dr. Rice,

I should be very
pleased if you would
let me have a line
tomorrow saying how
Mr. Hopper is getting on.
I do hope she is beginning
to make some improvement.
Now, I hope to be

WILKINSON
WILKINSON

NURSES' REPORT.

Name *M^r Hopper*

Date *March 21st 1915*

General Bodily Condition.

Fairly Good.

Weight *St. 7 lbs 5*

Food *Takes a sufficient quantity, but has to be*

Sleep *Had no sleep for about a week, but is now*
sleeping from 6 to 8 hrs a night.

General Mental Condition.

Confused & Shifty. At times
very agitated & distressed.

Resistive when attended to.

Very rarely speaks, but
appears to take notice of
whatever is going on.

Occupations *None*

Amusements *—*

Exercise *—*

Signed

F. M. Byrne

NOTICE

NOTICE

NOTICE
NOTICE
NOTICE

NOTICE

NOTICE

Now her heart + I do hope
now she will keep improving

I remain

Yours V. Truly
H. S. Hopper

March 21/55

Dear V. Pierce,

I should be very
pleased if you will send
me a line to say how
H. S. Hopper is going on.

I am so glad she is thriving
so much better & I thought
when I was over on Friday
she looked very much
better than when I

3.12
12.12.12

18th March, 1915.

Dear Mr. Hopper,

Mrs. Hopper was in the garden a considerable part of yesterday, and has had a remarkably good night, sleeping seven or eight hours. She was not, however, any clearer in the morning, in fact was rather dull, and not a very good colour. Since then, however, she has picked up again. I quite expect to be at home to-morrow morning, and shall be pleased to see you. Mrs. Hopper is variable, and it is possible that when you come she may not give any sign of recognition.

I remain,

Yours very truly,

18th March, 1915.

Dear Mr. Hopper,

Mrs. Hopper was in the garden a considerable

part of yesterday, and has had a remarkably good night,
sleeping seven or eight hours. She was not, however,
any clearer in the morning, in fact was rather dull,
and not a very good colour. Since then, however,
she has picked up again. I quite expect to be at
home to-morrow morning, and shall be pleased to see
you. Mrs. Hopper is variable, and it is possible
that when you come she may not give any sign of
recognition.

I remain,

Yours very truly,

if you think it will
be all right for me to
see her & do hope by
then she will be much
better. I should be very
glad if you will
let me know how she
is tomorrow.

I remain

Y^r V. truly

H. S. Gifford

March 17/18.

Dear F. Pierce,

Many thanks for

your letter received this
morning. I am very sorry
W. Gifford improves so
slowly but I hope she
will soon be able to
get more rest & improve.
I should like to come
over on Friday morning

1950
1951
1952

16th March, 1915.

Dear Mr. Hopper,

There is not much change to report.

Mrs. Hopper has had exceedingly little sleep, and at times she is restless. This afternoon she was carried into the garden. She was resistive, but stayed quietly in one of the shelters for some time. For ten minutes she was clear and sensible, but since then she has been restless and excited.

I remain,

Yours very truly,

14th March, 1915.

Dear Mr. Hopper,

There is not much change to report.

Mrs. Hopper has had exceedingly little sleep, and at

times she is restless. This afternoon she was

carried into the garden. She was restless, but

stayed quietly in one of the chairs for some

time. For ten minutes she was calm and sensible,

but since then she has been restless and excited.

I remain,

Yours very truly,

Seal House

Arnold.

Shilbough
Hall

March 15. /15.

Dear F. Pierce

I was very pleased
to have your letter this
morning & to hear there
was a little improvement
in Mrs. Hopper. I do hope
now she will get on
well. I should be very
pleased if you will
let me have a line
tomorrow to Kelleythorpe
as I shall be back
there tomorrow.

I remain
yours R. truly
A. S. Hopper

AND
8, PARK SQUARE,
LEEDS.
BY APPOINTMENT,
TUESDAY, } 1.30 TO 4 P.M.
FRIDAY }
TELEPHONE { YORK N° 112.
LEEDS N° 391X.
3877.

THE RETREAT,
YORK.

14 Mar. 1911

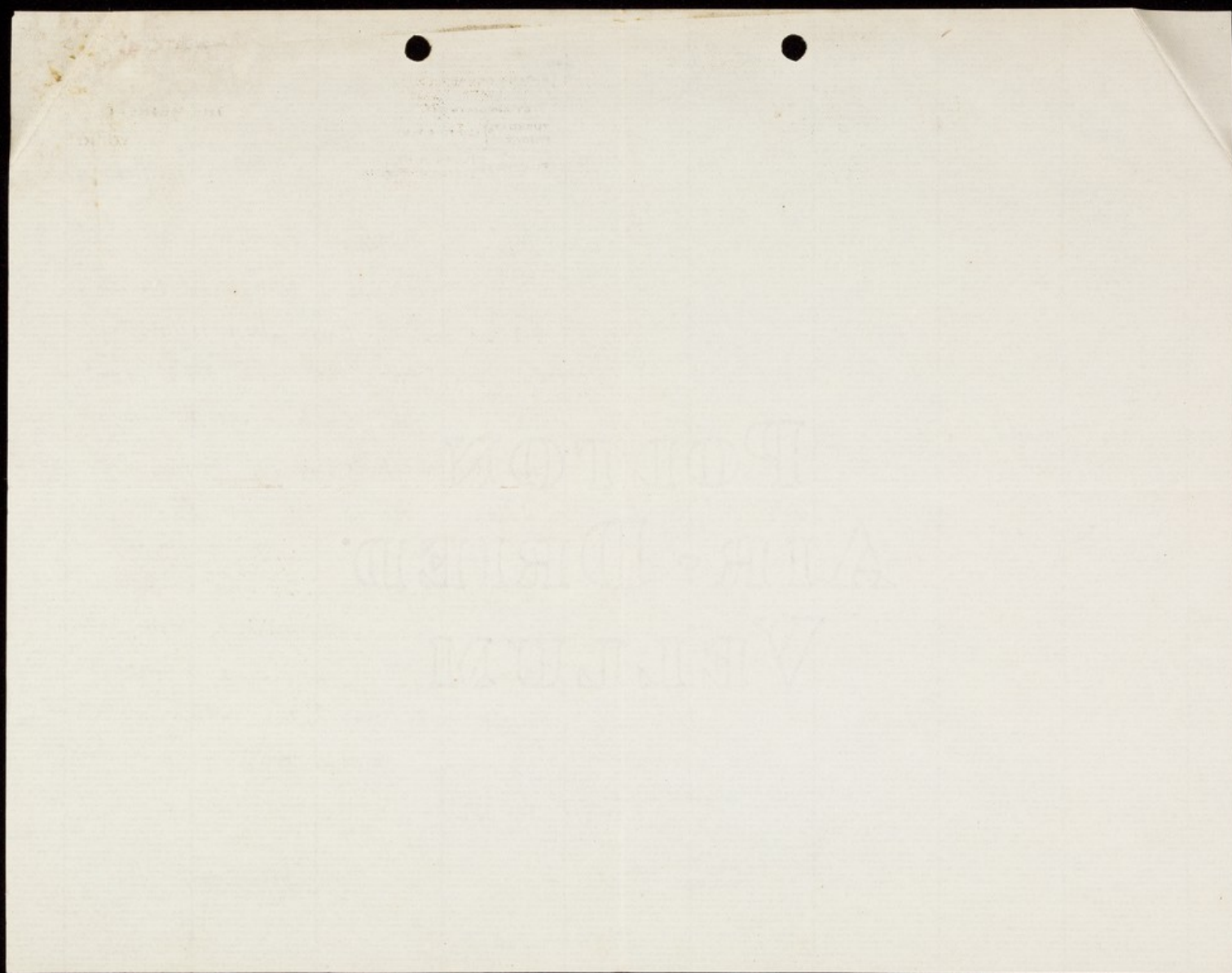
Dear Mr. Hopper

There is a little improvement
but not much. Dr. about 10 mins
yesterday Mr. Hopper was clear & asked
where she was & asked after the baby
then she relapsed into the same confused
state. Today she cannot reply
to questions at all. She has only had
a little sleep but this was without
sedatives. She certainly looks better
today. I would be well to
write to her regularly - tell her her ordinary
news. She has tried to write but
her mind is too confused

I remain

Yours faithfully

Edmund Pearce



getting on fairly well.
He would be very
pleased if you
would send a line
to the above address
as he is staying
here. We hope
for good news.

Yours sincerely

S. Poase.

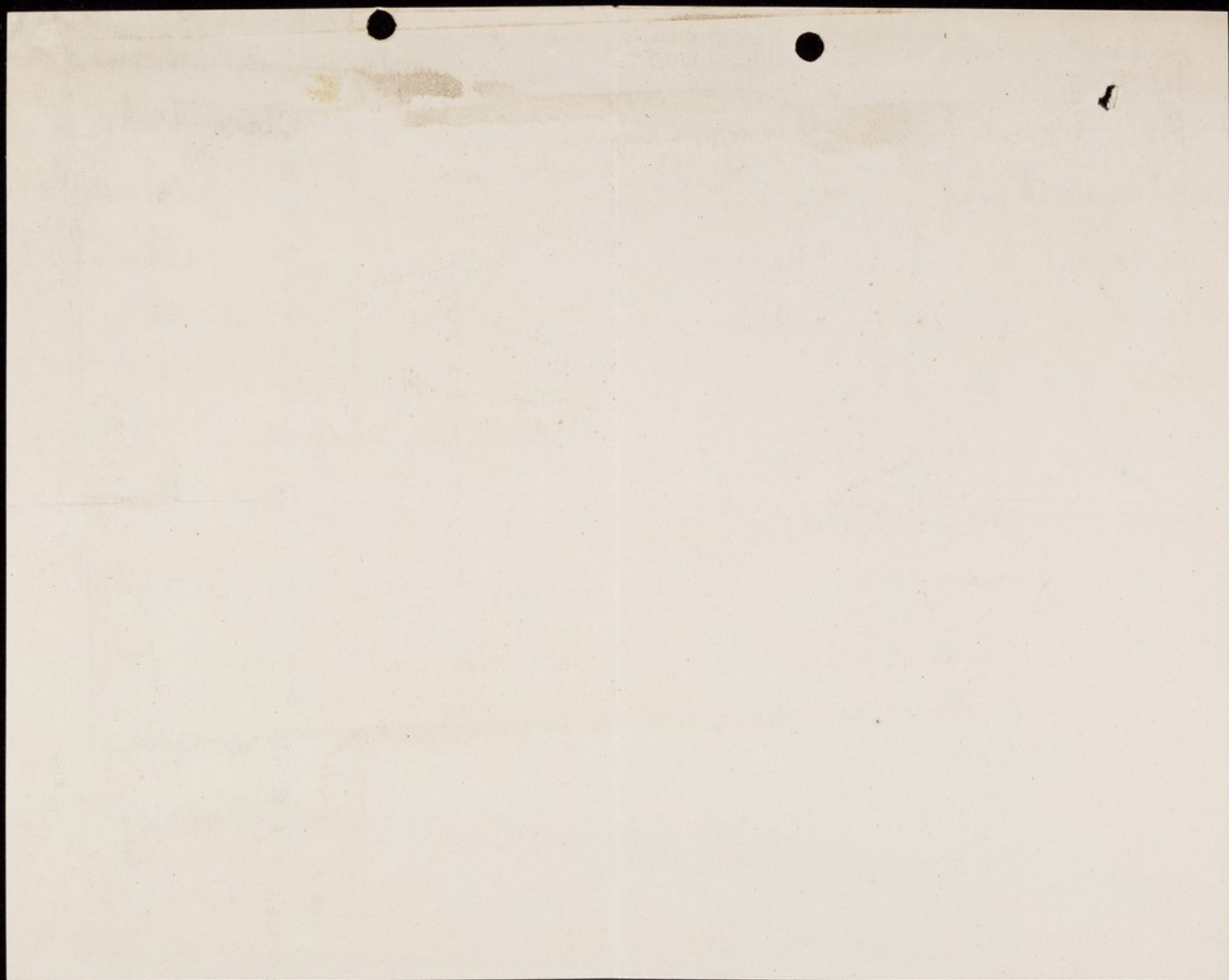
517.
Manor House
Arndel
Skirlaugh
Hull.

13-3-15.

Dear Dr. Pierce

Mr Hopper

asked me to write
& thank you for
the letter receive
to-day. He is very
glad Mrs Hopper is



THE RETREAT,
YORK.

March 13th 1915

Dear Sir

Dr Price has asked me
to write you about Mr. Hopson.
she seems comfortable & this
morning looks better I think
in spite of her having had no
sleep last night -

She takes notice of all around
her & has recognised in me
of the nurses an old friend
(Miss Willey) —

we hope soon to be able to send
better news than.

Yours sincerely

Philetus

Malin

THE ELMS

NAFFERTON

EAST YORKS.

10 March. 15

Dear W. - Vice,

Thanks for Letter, Paper
etc. My patient, Mr. Hopper
will reach you tomorrow (Monday)
about midday

Yours faithfully

Charles Wheeler

THE FILMS
NARRATION
EAST HORN

8th March, 1915.

Dear Sir,

I reply to your letter of enquiry I send you a copy of our Report, and also a set of certificates. The question of terms is mentioned on page 42 of the Report. The lowest rate, £3. 3. 0, supplies all necessaries, but patients who have private rooms and special nurses pay higher fees. Perhaps you will let me know what accommodation is required. We are very full, but can arrange to receive the patient on Thursday.

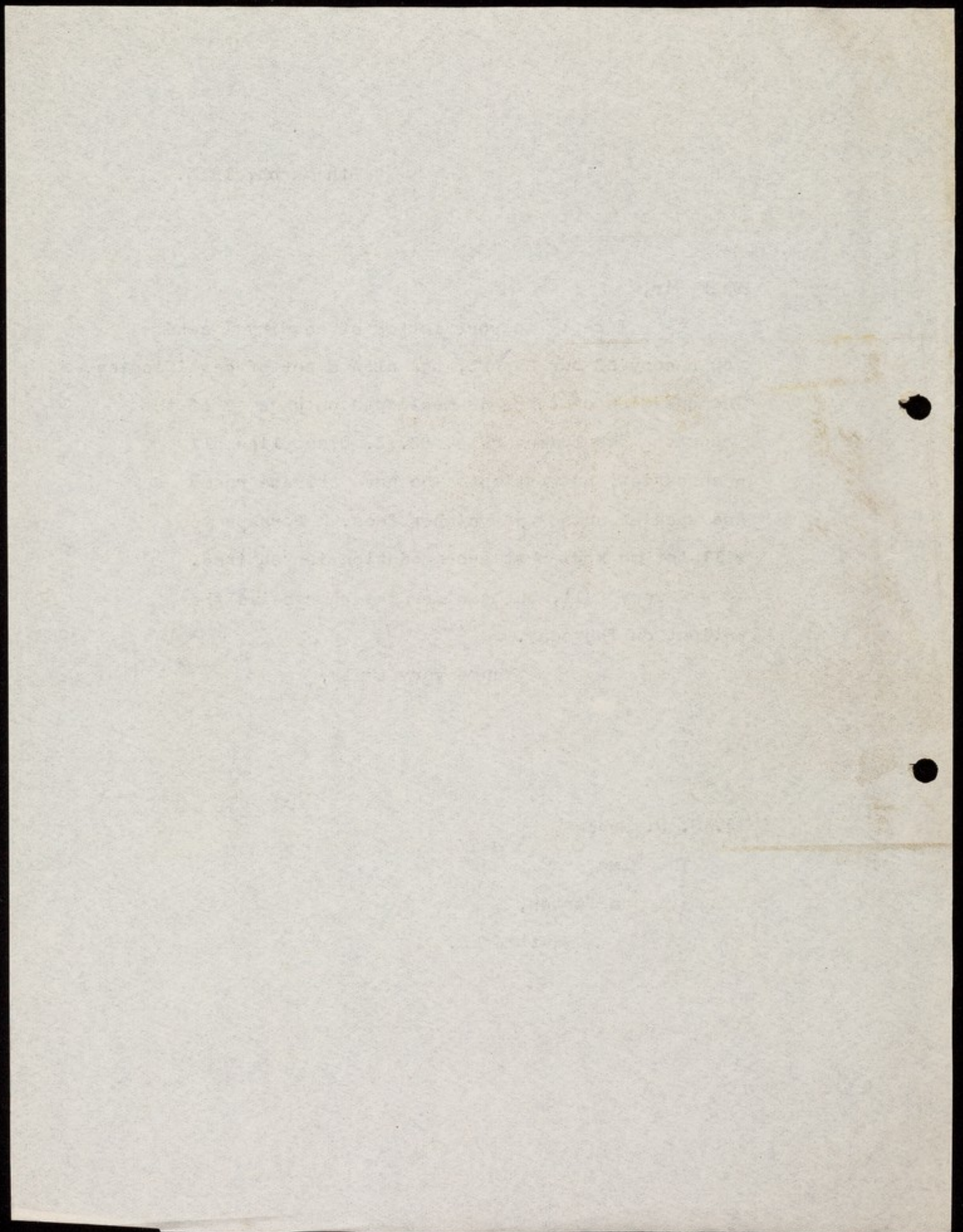
Yours very truly,

Dr. C. H. Eccles,

The Elms,

Nafferton,

East Yorks.



THE ELMS,
NAFFERTON,
EAST YORKS.

7 March. 15

Dear W. Pierce,

I have a case of *pusillula*
insects wh I think I must send
to you. Could you receive her
next Thursday (March 11th)?
Kindly send full particulars of cost,
accommodation etc. Also the necessary
forms.

Yours faithfully

Charles H Eccles

THE ELMS
HARTFORD
EST YORKE

Nov 17 1915

Dear Sir,

At the meeting of the Retreat
Committee held yesterday the terms
for Mr Hopper were fixed at £3 13 6
a week

I enclose the usual form of
agreement which please return
to me when completed -

Yours faithfully

Wm E Waller
Secy.

M. S. Hopper Esq.

Nov 11 1912

Dear Sir,

At the meeting of the Patent
Committee held yesterday the same
for Mr. Hopper was fixed at £3.10.0
a week.

I enclose the report form of
agreement that please return
to me when completed.

Yours faithfully
R. B. Allen Esq.

Mr. Hopper Esq.



The Secretary is instructed to obtain the necessary signatures to the accompanying form of guarantee before the care of any patient is undertaken by The Retreat.

YORK RETREAT HOSPITAL FOR THE INSANE.

In consideration of the Directors of the York Retreat Hospital for the Insane agreeing to receive Harry Hopper of

as a patient in the said Hospital, I HEREBY UNDERTAKE AND AGREE with Richard Thompson of Dring St., The Mount, York the Treasurer of the said Hospital, to pay or cause to be paid, to the said Richard Thompson as such Treasurer, or to the Treasurer for the time being of the said Hospital, all such Sum or Sums of Money as shall from time to time be or become due and payable for the Lodging, Maintenance, and care of the said patient in the said Hospital, or whilst under the charge of the Authorities of the said Hospital, and all such Sum or Sums of Money as shall be paid or disbursed by or on behalf of the said Institution for any articles of Wearing Apparel, or other necessities, or extras supplied to, or provided for the said Patient, or the repairing or mending and washing of the articles of Wearing Apparel of the said Patient, so long as the said Patient shall continue in the said Hospital, or be under the charge of the Authorities of the said Hospital, and also to pay or cause to be paid the expenses in respect of the Funeral of the said Patient, in case the said Patient shall die in the said Hospital, or whilst under the charge of the Authorities of the said Hospital. AND I FURTHER AGREE to pay interest at the rate of five per cent. per annum on any accounts due from me as above, which shall not have been discharged within Twenty-eight days from the receipt of such account from the Treasurer, Secretary or Clerk of the said Hospital. AND I ALSO UNDERTAKE AND AGREE, at my own expense, to remove the said Patient from the said Hospital within Fourteen days after receiving Notice in writing from the Treasurer, Secretary or Clerk for the time being of the said Hospital, requiring such removal.

WITNESS my hand the _____ day of _____ 19

Name Harold S. Hopper

Residence _____

Occupation _____

SIGNED by the said _____

in the presence of

Witness's Signature, _____

Address, and _____

Profession. _____

N.B.—The charge for Board, Lodging and Medical care is payable quarterly, in advance. Disbursements by the Institution on behalf of patients, and other exceptional expenses, are charged in the following quarter's account. A residence of less than a month is charged as a month.

In the event of the death, removal, or discharge of a patient before the expiry of the quarter covered by the last payment, the surplus amount is returned by the Retreat.



Name *Mrs Hopper*

Age

Ward

Centre

Admitted

March 11th 1910

Weight on

Admission *95.5 14*

DATE		<i>Aug 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Sept 1 2 3 4 5 6 7 8 9 10 11 12</i>																											
FOOD.	Quantity Taken																												
	Very Good																												
	Good																												
	Fair																												
	Poor																												
	Very Poor																												
	If Spoon fed No. of times.																												
	If Tube fed No. of times.																												
Bowels.																													
Weight.																													
SLEEP.	Hours each night.																												
SEDATIVES.	Drug																												
	Quantity																												
	Time given																												

Diet and Treatment Ordered.

Aug 14th 5. Enema Good Result

" 16th " " Good "

" 19th " " Good "

" 23rd " " Good "

" 24th " " Good "

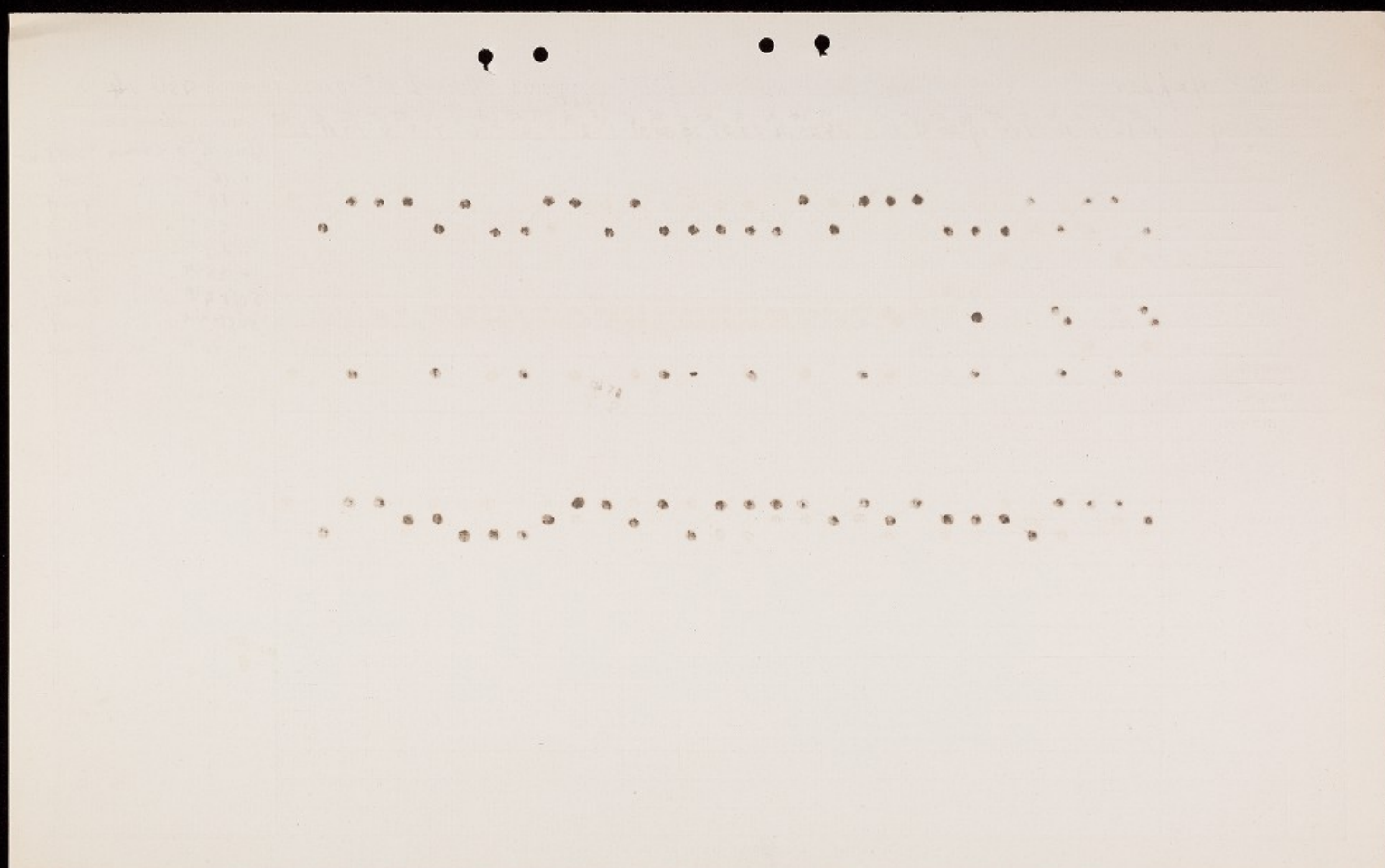
" 30th " " Good "

Sept 4th " " Constip. "

Sept 7th " " Good "

" 10th " " Good "

A vertical line should be drawn at the end of each week.



Name *Mrs Hopper*

Age

Ward *Center*

Admitted

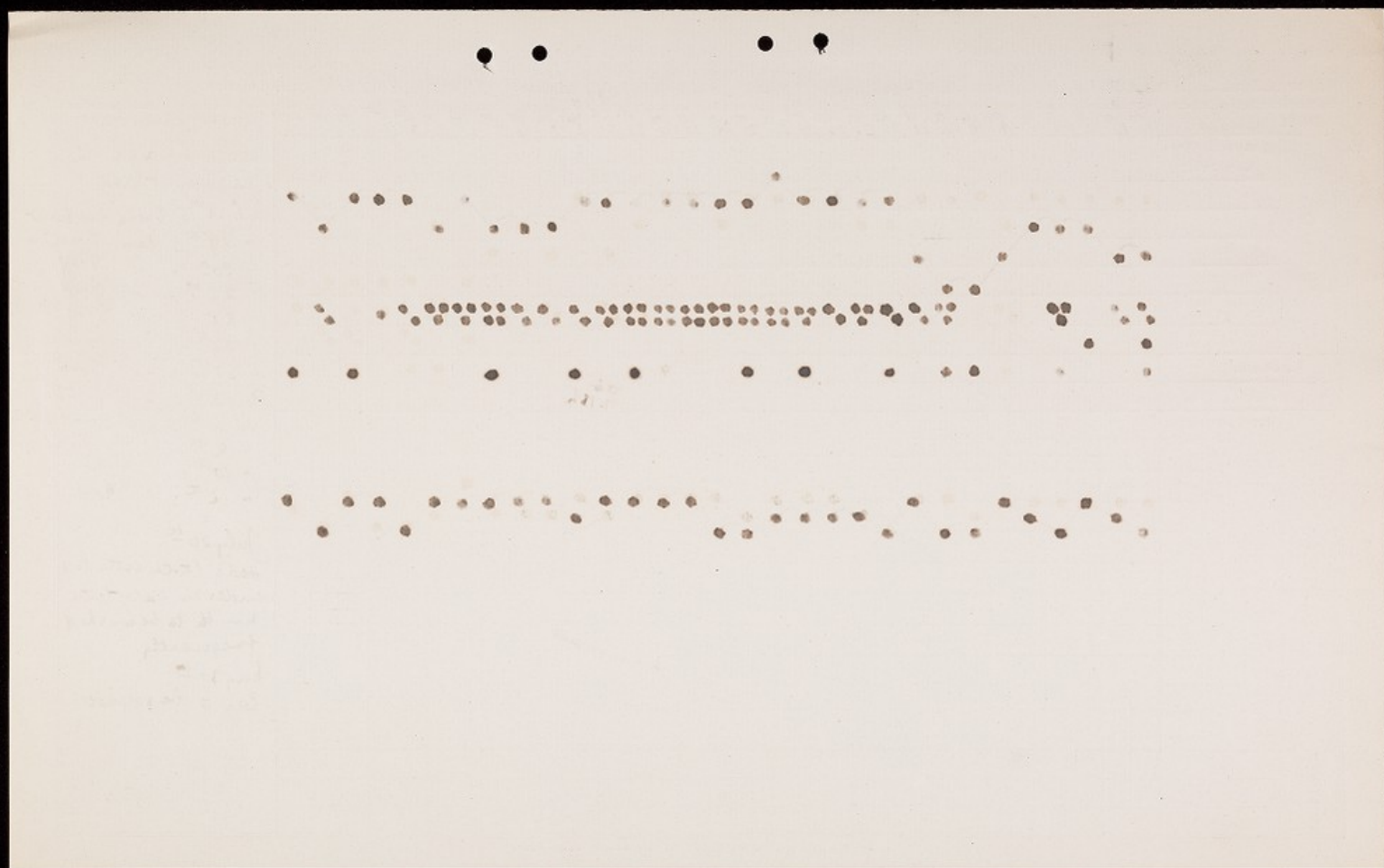
March 11th 1915

Weight on Admission

DATE		<i>July</i>																												<i>Aug</i>																												Diet and Treatment Ordered.	
		<i>13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3 4 5 6 7 8 9 10 11 12</i>																																																									
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Bowels.																																																											
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SLEEP.	Hours each night.																																																										
SEDATIVES.	Drug																																																										
	Quantity																																																										
	Time given																																																										

A vertical line should be drawn at the end of each week.

*Protopin vgs to
be given T.D.S.
July 15th S. Erema. Good Result
" 19th S Erema Good
" 20th " " Good
" 23rd " " Good
" 25th " " Good
" 28th " " Good
" 31st " " Good
Aug 2nd " " Constip
" 5th " " Good
" 8th " " Good
" 10th " " No
" 12th " " Good
July 20th
Had a tooth extracted
under an anesthetic
mouth to be washed
frequently.
July 30th
Ear to be syringed*



Name *Mr. Hopper*

Age

Ward *Center*

Admitted

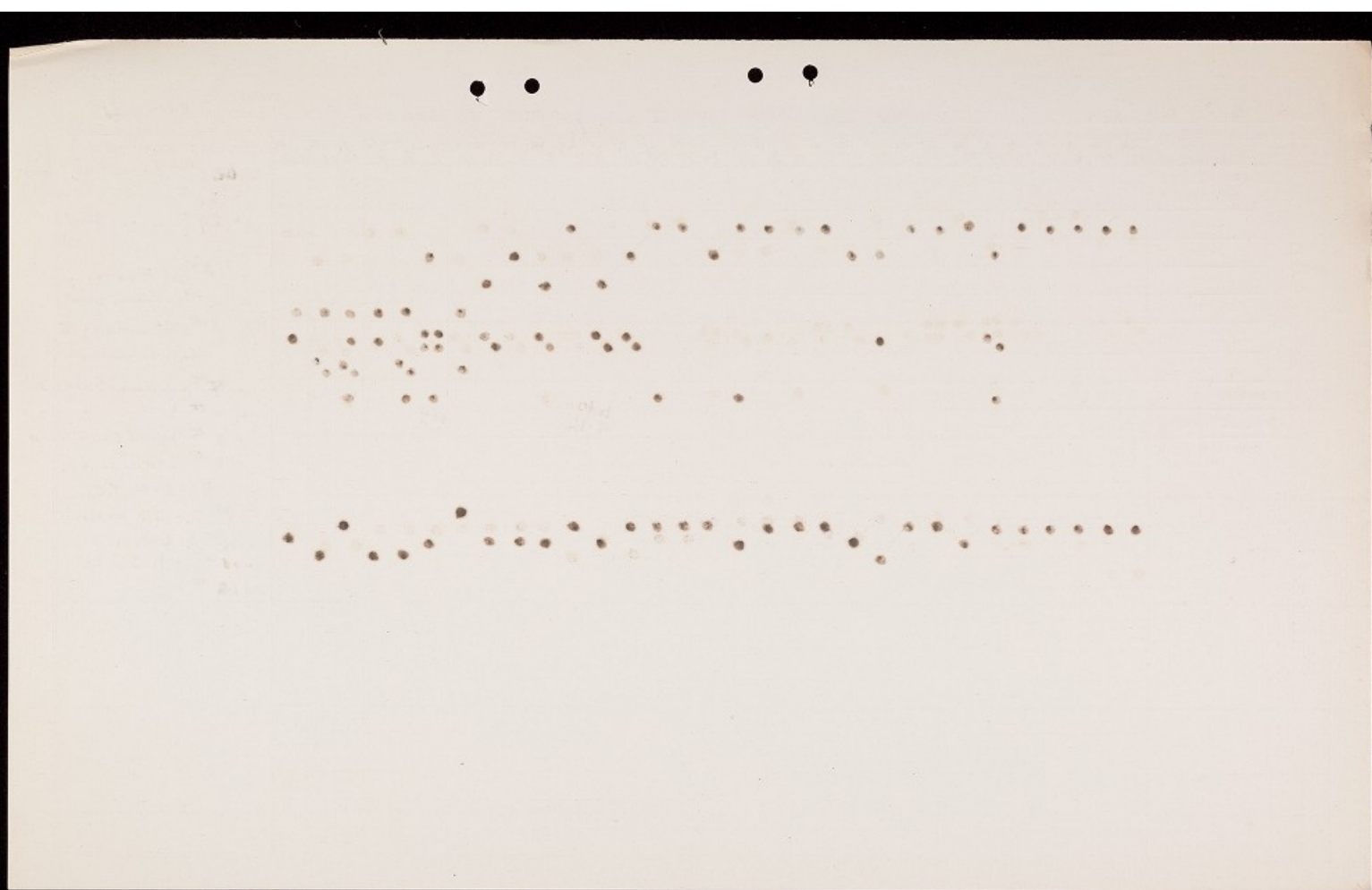
March 11th 1915

Weight on Admission

85 lb 1 lb

DATE		June 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 July 1 2 3 4 5 6 7 8 9 10 11 12																												Diet and Treatment Ordered.	
FOOD.	Quantity Taken																													July 1 st S. Enema. Good Result	
	Very Good																													" 2 nd " " " "	
	Good																													" 2 nd " " " Good	
	Fair																													July 1 st " " " Good	
	Poor																													" 2 nd " " " " "	
	Very Poor																													" 3 rd S. Enema. Good	
Bowels.	If Spoon fed No. of times.																													" 5 th Thyroid vgs to be given alternate days	
	If Tube fed No. of times.																													" 5 th Enema. Good Result	
Weight.																														" 6 th " " " " "	
																														" 8 th Thyroid discontinued	
SLEEP.	Hours each night.																													" 8 th Urotropin vgs to be given T.O.S.	
																														" 9 th H.M. 3 rd no result	
SEDATIVES.	Drug																													" 10 th S. Enema. Good	
	Quantity																													" 12 th H.M. 3 rd no	
	Time given																													" 12 th " " " " "	

A vertical line should be drawn at the end of each week.



Name *Mrs Hopper*

Age

Ward *Centre*

Admitted

March 11th

Weight on

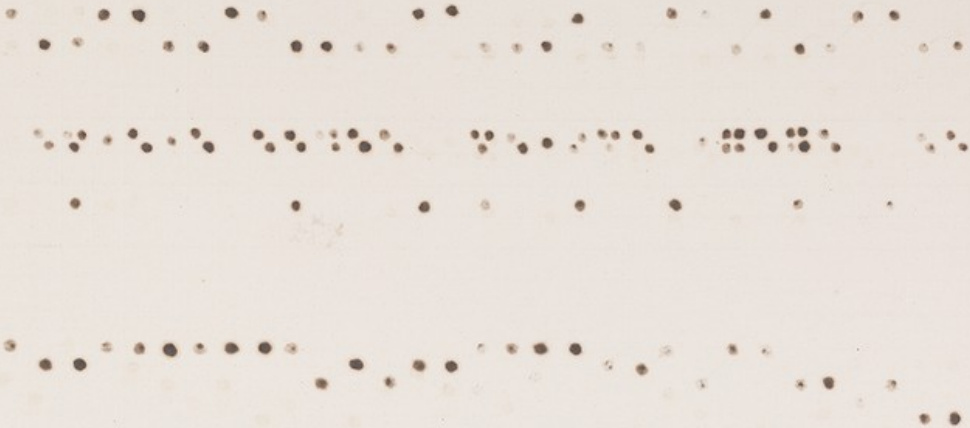
Admission *56.8. #1*

DATE		<i>May</i> 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3 4 5 6 7 8 9 10 11																											
FOOD.	Quantity Taken																												
	Very Good																												
	Good																												
	Fair																												
	Poor																												
	Very Poor																												
	If Spoon fed No. of times.																												
	If Tube fed No. of times.																												
Bowels.																													
Weight.																													
SLEEP.	Hours each night.																												
SEDATIVES.	Drug																												
	Quantity																												
	Time given																												

Diet and Treatment Ordered.

May 14th S. Enema Good
" 14th Constip.
" 21st Good
" 24th Good
" 24th Good
" 29th Good
June 2nd Good
" 9th Good

A vertical line should be drawn at the end of each week.

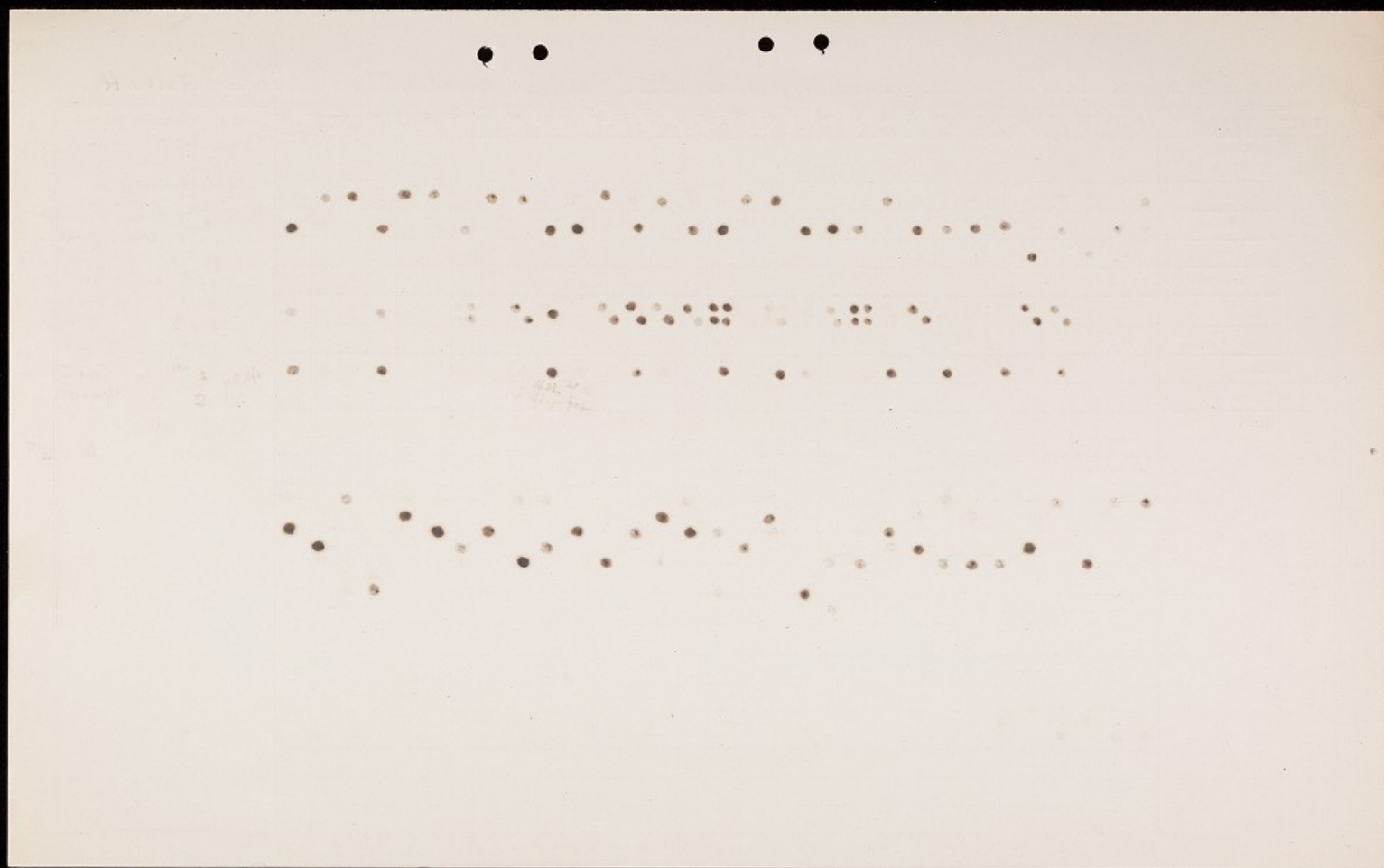


Name Hopper Age Ward Centre Admitted March 11th 1915 Weight on Admission 85 lbs 1 lb

DATE		April 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 May 1 2 3 4 5 6 7 8 9 10 11																											
FOOD.	Quantity Taken																												
	Very Good																												
	Good																												
	Fair																												
	Poor																												
	Very Poor																												
	If Spoon fed No. of times.																												
	If Tube fed No. of times.																												
Bowels.																													
Weight.																													
SLEEP.	Hours each night.																												
SEDATIVES.	Drug																												
	Quantity																												
	Time given																												

A vertical line should be drawn at the end of each week.

Diet and Treatment Ordered.
 Barley water every two hours.
 Tablets # T.D.S.
 April 14th S. Enema. Result
 " 16th S. Enema. Result
 " 18th " " Good
 " 20th " " Good
 " 23rd " " Good
 " 26th " " Good
 " 29th " " Good
 May 2nd " Const.
 " 8 " Good
 Barley water discontinued April 20th



Name Mrs. Hopper

Age

Ward Centre

Admitted

March 11th 1915

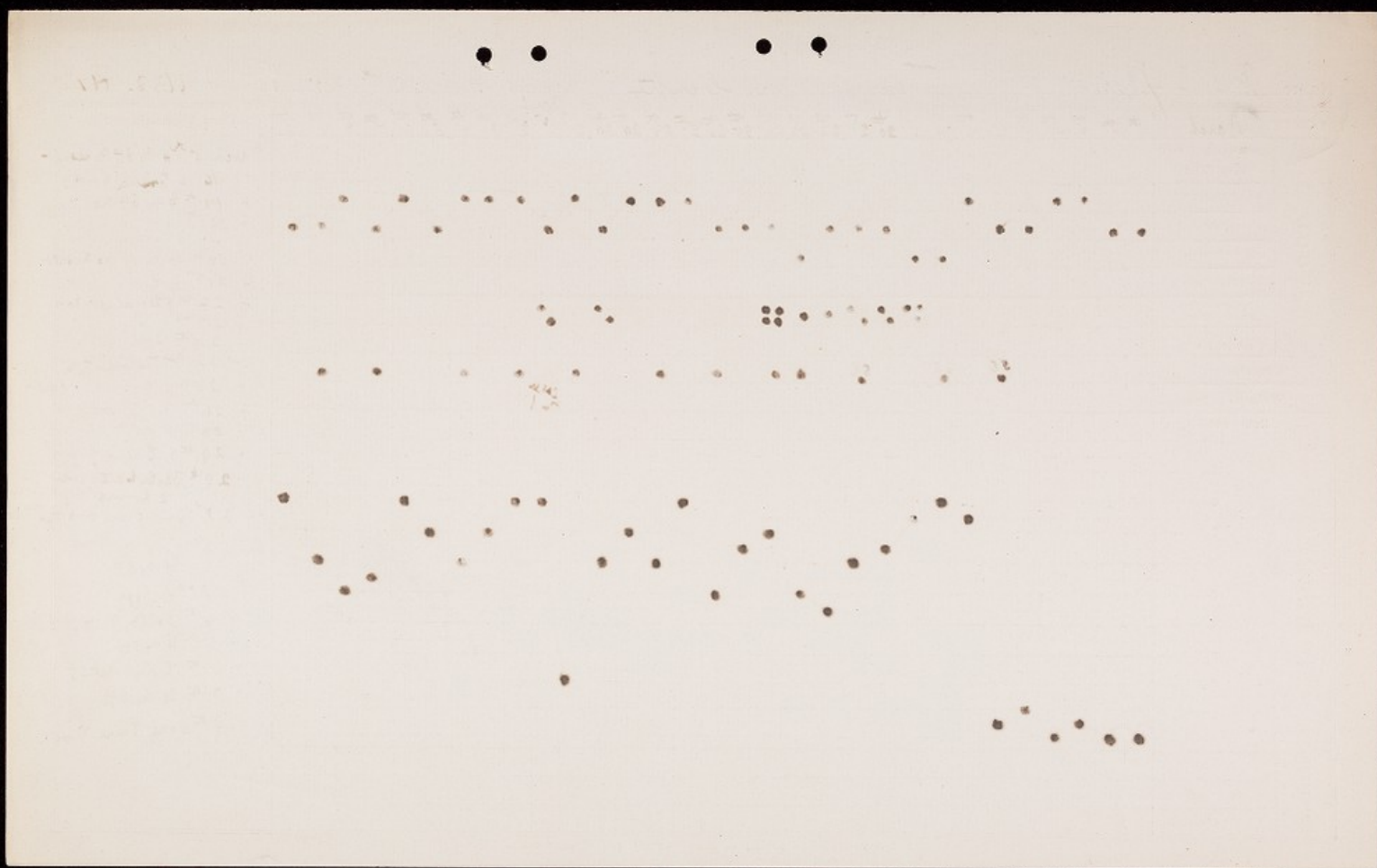
Weight on

Admission

56.8. 41

DATE		March 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 April 1 2 3 4 5 6 7 8 9 10																															Diet and Treatment Ordered.	
FOOD.	Quantity Taken																																March 15 th 4 9 3 1/2 No result	
	Very Good																																- 16 S. Enema Good	
	Good																																- 17 4 9 3 1/2 No	
	Fair																																- 18 S. Enema Good	
	Poor																																- 20 4 9 3 1/2 No Result	
	Very Poor																																- 21 S. Enema Good	
If Spoon fed No. of times.																																- 22 1/2 Special Apt. No.		
																																- 23 1/2 " " "		
If Tube fed No. of times.																																- 24 1/2 " " "		
																																- 24 1/2 Tablets T.D.S.		
Bowels.																																- 25 S. Enema No Result		
Weight.																																- 26 1/2 " " " "		
SLEEP.	Hours each night.																																- 28 1/2 " " " "	
	10																																- 29 S. Enema Good	
SEDATIVES.	Drug																																- 29 1/2 Barley water every 2 hours	
	Quantity																																- 31 1/2 Soap Enema Good	
Time given																																April 2 nd " " " "		
																																- 4 9 3 1/2		
																																	3 rd 4 9 3 1/2	
																																	- 4 th Salts a.m.	
																																	- 5 th 4 9 3 1/2	
																																	- 6 th Special Apt 5 th	
																																	- 7 th 4 9 3 1/2	
																																	- 9 th Soap Enema Good	

A vertical line should be drawn at the end of each week.



Name Kate Hopper. Age 23. Date of Admission March 11. 1915
Address Kellythorpe, Driffeld.
Description - Married.
Religious Persuasion Church of England.

P. H. Excellent health during adult life, also during childhood so far as is known. Excellent housewife. No previous attacks of mental disorder.

H. P. C. A Patient's husband had a very severe accident shortly before birth of child, which caused patient great anxiety. Signs of mental disorder first appeared two days before birth of child. Health during the pregnancy very good. Patient does not take food well.

F. H. No family history of mental disease. No relationship between parents.

Abstract of observations.

Patient sits with mouth open staring into space. Refuses to speak. Frequently throws off clothing. Patient has talked about poison, threatened to throw herself out of the window, & says she is dead & has been poisoned.

Special Features

Fits

Habits

Suicidal

Homicidal.

Nurse Lind who brought patient states she was at first very excitable, talking very rapidly, chiefly about death, shooting, cut throat, saying 'all dead' 'I have done it' - bringing her hands in great distress.

Lately has refused food, but has been persuaded to take about 27 oz. at night. Has had Paraldehyde - 3vi. per rectum.

No fever lately - was 101°.

No discharge & evidence of sepsis.

Bowel most obstinate - appears ^{to} purposely retain faeces.

Catheter has been necessary every 24 hours.

Nov. 11th. Pupils wide. Then react to light.

Bovril smells paraldehyde.

Not found in chest & abdomen. No supra-pubic dulness.

V. shaped palate.

very suitable

very suitable

Take out 2/3

as

dehens



Name M^r Hopper. Ward. Centre Date of Exam. March 12th 1915

General Bodily Condition

Height. 5 ft 3 in. Weight (without clothes) 7st 6 lbs.

Nutrition. Fairly good. Complexion Clear

Injuries. (if any) ✓

Deformities. ✓

Head & Neck. ✓

Teeth. Good. Hair Plentiful & in good condition

Arms & legs. ✓

Skin In. good condition.

Tongue. Coated. Respiration 18

Pulse. 96 Temperature. 97⁶

General health appeared good.

Mental Condition

Appearance Very Vacant.

Clearness of Conversation. Disconnected.

Orientation Does not appear to know where she is

Memory Not good.

Coherence

Delusions No evidence

Hallucinations " "

Emotional state. Very distressed at times & asks to be

Complaints ✓ (given "another chance".)

Conduct & behaviour

Is very restless & ^{Confused} constantly in & out of bed. Has had to be spoon fed & seemed to have no idea of feeding herself.

Appeared to recognize a nurse, who was in the dormitory & partly remembered her name.

- Mar: 12th Pt. restless, confused & agitated. Constantly in & out of bed. Taken food fairly well. S. Enema given this a.m. with fairly good result. Did not pass urine from coming in, until 8-30 this evening. Had no sleep.
- " 13th Pt. had no sleep, but remained quietly in bed. Restless & confused most of the day. Was fairly sensible for a few moments during the afternoon & asked where she was. ^{Since admission.}
- " 15th Pt. slept only 20 min. Appears quite dazed at times. Restless this evening constantly out of bed & struggling with nurse. Thinks another pt in the room is her Sister.
- " 16th Very troublesome during the night & inclined to be violent. Slept 1 hr. Carried out into the garden. Very troublesome to take out & agitated & very distressed. Became calm, calmer & fairly sensible for a few minutes. Had no memory of being taken out. ~~Very drowsy, & was asleep at 7 p.m.~~
- " 17th Pt. confused & chattering at times. Slept 1 1/2 hr. Had a quiet day. Less troublesome to take out. In bed in the garden most of the day. Had no sleep, but drowsy when brought in & was asleep by 7 p.m.
- " 18th Had a good night. Slept 7 1/2 hrs. Confused when awake & wet the bed this a.m. Quiet & seems dazed. Tired most of the a.m. Apt. given each night without result. S. Enema given about every 3rd day with good result. Most difficult with medicine. Is sleeping better now. (See chart)
- " 19th Is becoming more resistant & at times very troublesome over food. Was to be spoon fed. Visited by her husband who she seemed very distressed & crying but seems unable to say why. (He recognises)
- " 20th Condition much the same. Walked across to the garden yesterday & back again, but very resistant whenever interfered with. Is taking food better again.
- " 25th Condition much the same. Very unresponsive.
- " 28th No change visited by her husband yesterday, did not talk to him.
- April 4th No change. Is very resistant at times, especially so over her bath.
- " 18th Pt. is somewhat brighter & takes more notice of her surroundings, but very rarely speaks. Is taking food

- 22
 is sleeping fairly well. Has been up & down the last few days & walked in the garden. Has done a little knitting. Has not been able to write so far.
- Apr. 23rd Visited by her husband & Sister. Recognized them both & walked round the garden with them.
- " 26th Complained of toothache but refused to take the med given to relieve her.
- May 2nd Seems brighter & rather more responsive, but is very resistive at times. Visited by her husband yesterday. Crying after he left.
- " 9th Has been fairly bright all the week. Resistive at times. Visited by her husband yesterday. Not so well in the evening Temp. 101st. Better today staying in bed.
- " 13th Very depressed again. Crying a great deal. Impulsive. Talks occasionally, but still incoherent. Sleeping well. Visited by her husband yesterday. Seems pleased to see him.
- " 23rd Condition much the same. Very unresponsive.
- " 30th Visited by her husband & Sister yesterday. Very miserable. after they left. Trying to speak, but seemed unable to get the words out.
- June 9th Very miserable & resistive. Received a parcel on Thursday. refused to open it. Visited by her husband yesterday.
- " 13th No change. Visited by her husband yesterday. Went round the garden, but ~~would~~^{did} not talk to him.
- " 20th Condition much the same. Played croquet on Friday. Visited by her husband yesterday.
- July 4th Has been most resistive & troublesome over food, during the last week. Struck knee when being fed. Calomel 11gr. given yesterday & Salt this a.m. No result as yet. Spoke quite sensibly this a.m. Thyroid & gr to be given alternate days.
- " 6th Tube fed. Most resistive.
- " 8th Tube fed 11. Thyroid discontinued. Urotropin & gr to be given T.D.S.
- " 11th Still very troublesome over food & has had to be tube fed. In bed in the garden since Friday.

- July 11th Visited by her husband & Doctor yesterday. Spoke to them a little & appeared sensible. (Menstruation began). Specimen of urine sent to Dr. Ferguson yesterday.
- " 18th Has been most troublesome & resistive near food. Tries for several times. (See chart). Visited by Dr. — yesterday. Had her nose & mouth examined. Also visited by her husband. Talked a little to him & seemed very distressed when he left.
- " 20th Pt had a tooth extracted under an anesthetic. Gums suppurating. Mouth to be washed out with Listerine.
- Right foot slightly burned with bottle. Dressing applied by Dr. Wilson.
- " 25th Has been brighter during the week & taken food well. Foot seems better. Right ear has been discharging. Syringed with Boreas Lotion twice a day. Visited by her husband yesterday. Cried when he left.
- Has spoken to the Nurses several times.
- Aug 1st Has been up & dressed since Monday. Is taking food well but has to be fed by spoon. Wrote a letter to her husband on Tuesday. Refused to open the letter that came in reply, but read it when opened for her.
- Will occasionally answer a question & has expressed a wish to see the Baby. Is still very slow in her movements & at times resistive.
- " 8th Condition much the same. Ear still discharging a little. Visited by her husband & Sister, Baby & Nurse yesterday. Took very little notice of the baby. Cried a good deal after her husband left. Refused to take her lunch with them.
- " 22nd Pt is feeding & attending to herself. Will usually answer when spoken to, but rarely speaks otherwise.
- Is still very slow in her movements & refuses to play games or occupy herself in any way.
- Visited by her husband yesterday. Has expressed a wish to go home.
- No discharge from ear for the last 3 days.
- " 29th No change. Visited by her husband yesterday.
- Sept 5th Condition much the same. Pt has a boil on below her left breast. Fomentations applied. Visited by her husband today.
- " 12. Pt left the Retreat today, accompanied by her husband.