

## **Third report of the Derbyshire County Pauper Lunatic Asylum.**

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**Third Report**  
OF  
**THE DERBYSHIRE**  
**COUNTY PAUPER LUNATIC**  
**ASYLUM.**

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[ 1855 ]

THE ASSYLUM

Journal of the State of the County of Derby

THE DERBYSHIRE

COUNTY PAPER LUNATIC

ASSYLUM

Published weekly by the Derby County Lunatic Asylum

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Printed and Published by the Derby County Lunatic Asylum  
 Derby, in the County of Derby

THE ASSYLUM

Vol. 1 No. 1

1850

Printed by the Derby County Lunatic Asylum

*To the Justices of the Peace of the County of Derby  
assembled at their General Quarter Sessions of the  
Peace at Derby, on the 2nd day of January, 1855.*

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We, the Committee of Visitors of the Derby County Lunatic Asylum, beg to report as follows, viz. :—


The Asylum has been regularly visited by the Committee, and every Patient seen once in each two months by two or more members of the Committee.

The proportion of cures attests the great skill and care with which the Asylum is conducted by Dr. Hitchman. The Asylum is at present sufficient for the proper accommodation of the number of Lunatics, and the general management of the Asylum; the conduct of the officers and servants, and the condition and care of the Patients are most satisfactory.

We refer with much pleasure to the excellent Report of the Superintendent Physician.

H. SEYMOUR BLANE,

Chairman.



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TO THE COMMITTEE OF VISITORS OF  
THE DERBY COUNTY ASYLUM.

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GENTLEMEN,

The time has returned at which the Rules of the Institution require the Superintendent Physician to make a Report of the number of admissions, removals, discharges and deaths which have taken place during the year, together with such other matters as may appear necessary for the purpose of showing the state and management of the Asylum. The principles upon which the Institution is conducted having been fully described in former Reports, it will not be necessary, on the present occasion, to enter minutely into the details of management.

From January 1st, 1854, to December 31st inclusive, there have been admitted seventy-six Males, and seventy-five Females, making a total of one hundred and fifty-one; being two more men, and eighteen more women, than were admitted into the Asylum during the corresponding period of last year. Of these Patients thirty-nine were received from Nottinghamshire; ten from Lincolnshire; four from Northamptonshire; two from Staffordshire; and the remaining ninety-six from the County and Borough of Derby. Of the above number, ten Females and nine Males were admitted upon small payments from their Friends, independently of the respective Boards of Guardians belonging to the above Counties.

More Patients were admitted during the Months of May and August than in any other Months of the Year, as the following Table will illustrate :—

	DATE.	MALES.	FEMALES.	TOTAL.
Effect of Seasons.	January .....	2	5	7
	February .....	3	2	5
	March .....	9	9	18
	April .....	1	5	6
	May .....	9	14	23
	June .....	5	6	11
	July .....	9	7	16
	August .....	12	9	21
	September .....	8	5	13
	October .....	9	6	15
	November .....	4	4	8
	December .....	5	3	8
		76	75	151

The social condition of the Patients was as follows :—

Single .....	30	Men .....	22	Women
Married .....	34	„ .....	39	„
Widowed .....	10	„ .....	12	„
Unascertained..	2	„ .....	2	„
	76		75	

The Occupations of the Patients were as follows :—

MALES.	FEMALES.
Framework knitters ..... 5	Domestic Servants ..... 10
Shoemakers ..... 7	Dressmakers ..... 4
Wood-turners ..... 2	Sempstresses ..... 5
Draper ..... 1	Wives of Labourers and Mechanics ..... 17
Miller ..... 1	Farmers' Wives ..... 2
Tailors ..... 4	Butchers' Wives ..... 2
Joiners ..... 3	Milkseller's Wife ..... 1
Mill-hands ..... 3	Commercial Travellers' Wives ... ..... 2
Fellmonger ..... 1	Grocer's Wife ..... 1
Silk-weaver ..... 1	Grocer's Widow ..... 1
Brickmaker ..... 1	Lace-hands ..... 5
Fitter at Iron Foundry ... 1	Mill-hands ..... 5
Footman ..... 1	Straw-bonnet Makers ... 2
Smiths Labourers ..... 2	Comedian ..... 1
Butchers ..... 5	Glovemaker ..... 1
Coal Dealer ..... 1	Char-women ..... 4
Grocer ..... 1	None ..... 5
Lacemakers ..... 3	Unknown ..... 7
Cardboardmaker ..... 1	
Farmers ..... 4	
Collier ..... 1	
Nailer ..... 1	
Meat Dealer ..... 1	
Teacher ..... 1	
Police Constable ..... 1	
Labourers ..... 21	
Unknown ..... 2	
— 76	— 75



It will require the operation of many years to displace from the public mind, the influences of the past in reference to Lunatic Asylums; and the spread of much increased intelligence upon the laws of health, before the dread and secrecy which invest every case of Insanity can be removed. The Disease involves such perilous consequences upon the social prospects, not only of the Individual, but of his relatives—its proper treatment requiring, as it mostly does, removal from home, wars so powerfully against the instincts of affection, that it will be a happy day for humanity when it can recognise the affection as differing from others only in the importance of the organ afflicted—and can exercise sufficient moral courage to place the Invalid immediately in a Hospital especially constructed and conducted for his cure. It is the most painful fact, in connection with the workings of Lunatic Hospitals, that few Patients are admitted at the onset of their disease.

Importance  
of  
Early  
Treatment.

It is painful because the date of the Patients' admission into the Hospital is one of the most important elements in determining the final issue. It is almost impossible to overstate the value of early treatment. Upon it depends the percentage of Cures, more than upon the site and construction of the Hospital, or even, than the adoption or rejection of the 'Non-Restraint System.' Hospitals which admit recent cases only, present a large array of cures, even though they are immured in crowded cities, and adhere to the mechanical restraint of a former age, while others which admit of a chronic character, although surrounded by the genial influences of a beautiful country, and adopting the modern principles of treatment, have their wards crowded with a large number of incurable patients. It would be criminal to conceal this fact, Patients admitted into these respective Hospitals at the same date of their malady would, it is believed, present a great contrast,—in the first, they might proceed to convalescence, but with convalescence would come the painful memory of personal degradation, while in the other, convalescence would be reached at a much earlier date, and no such reminiscences would be left behind. It would be better, even that the Patients should be placed under the care of some skilful Physician in an recognised Public Hospital, although the Medical Officer should in

certain cases recognise the propriety of mechanical control, than that without medical care, they should be concealed in the recesses of their own home, or confined in the wards of a Workhouse, until their disease had become established, and their Brains had undergone a structural and fatal change. It cannot be too often repeated that, the date of the Patients' illness at the time of admission is the chief circumstance which determines, whether four Patients in a hundred, or seventy Patients in a hundred shall be discharged cured. Of the one hundred and fifty-one cases, which have been admitted into the Asylum during the past year, eleven only have been received within a week of the onset of their malady; of these eleven, ten have been discharged cured,—and the other has been but a short time under treatment. The Asylum having been opened for three years it might have been reasonably inferred, that the admissions would consist chiefly of recent cases; the reverse is, however, the fact, and in no year has the number of chronic and paralysed cases borne a larger proportion to the recent cases than in the year which was just closed. Several were in advanced stages of bodily disease, thus, I. C. expired in eight hours after his arrival at this Hospital. He was removed from the vehicle in which he was brought to his bed, where he remained tranquil until the moment of his decease. The state of great prostration in which he was brought, forbade the employment of the usual washing bath; nor was he subjected to the fatigue of being shaved (of which he stood in much need) in consequence of his exhaustion. F. G., aged 76 years: admitted with the marks of restraints round her wrists, survived eighteen days—only by the administration of wine and warmth. S. C.: brought bound by straps and a straitwaistcoat in the afternoon of the 18th, was so convulsed and epileptic, that she died on the morning of the 20th, having scarcely spoken during the time she was in the Asylum. Others were in advanced stages of dropsy, phthisis, and general paralysis, and although in a hopeless condition lived on for several weeks under the fostering care of the Institution. One poor girl, admitted from Lincolnshire, in a perfectly helpless condition (the delirium of fever having been mistaken for the ravings of Insanity) was conveyed from the vehicle to a water bed, where she has remained in a state of great suffering for upwards of twelve weeks, and

Condition  
of  
Patients  
on  
Admission.

Condition  
of  
Patients  
on  
Admission.

is never likely again to recover the use of her limbs. From extreme emaciation, weakness, and pressure she had large and deep ulcers on her back, and black sloughs on her hips; and notwithstanding the most assiduous attentions, others of a like character have shown themselves in several parts of the body; the knees have ulcerated apparently from the mere touch of the bed-clothes,—and the resiliency of a water-bed has not protected her heels and neck from a like calamity. The knees had become stiffened, and the skin of these joints and of the heels discoloured before she was received, and the mischief thus commenced has continued its direful course, until she has become sore, almost in every limb. She must long since have perished, had she not been hourly watched over, and abundantly supplied with wine, and other support. Her case is referred to, not only to show how different are the requirements of a Lunatic Hospital from a Workhouse; but also to prove that even the valuable bed of Dr. Arnott will not prevent the progress of bed-sores when once the skin has been injured by pressure, and its vitality impaired by typhus fever. A private Asylum once fell under severe animadversions because of the existence of bed-sores in a deceased Patient; and it is due to justice, as well as to science, to state that in the case of S. C. these bed-sores have progressed, notwithstanding changes of linen several times a day, assiduous nursing, an abundant supply of wine, porter, and animal food, the administration of tonics, local applications, and such attention and skill as your Physician has been able to bestow upon its treatment. There is, moreover, a very close relation between the vitality of the skin, and that condition of the nervous system which prevails in general paralysis, and therefore bed-sores in a Lunatic, although to be regarded with suspicion, are not per se *proofs* of neglect and ill-treatment. Many suicidal cases have been admitted—one who had inflicted a deep wound in his neck prior to admission, and several who had attempted strangulation. All these have required great watchfulness and care.

The following table will illustrate the General Statistics of the Asylum :—

	M.	F.	Total.
Patients Admitted ... ..	76	75	151
Discharged Recovered ...	24	25	49
——— Improved ...	4	5	9
——— Unimproved...	3	1	4
Escaped ... ..	3	0	3
Died ... ..	22	10	32
<hr/>			
Remaining in the Asylum,			
December 31st ... ..	122	111	233
Out on trial ... ..	0	2	2

This gives nearly 32 and a half per cent. of Recoveries upon the number of Admissions, and rather more than 14 per cent. upon the entire number under treatment.

Three Patients have escaped from the Asylum. Two of them were of sound mind at the time; and their escape was planned with considerable skill. One of them was a "Criminal Patient," and had been promised his discharge as soon as the necessary forms could be gone through. He was, however, suspicious that his former character might hinder or postpone his freedom, and he leagued with another Patient, who slept in the same Dormitory, to effect their conjoint escape. While working in the grounds he broke a prong from his digging fork, and concealed it in his dress. At night, it is the duty of the Attendant to see that all clothing is removed from the bed-room; and if he had done this their intentions would have been defeated, but the Senior Attendant of the Ward being from home, they imposed on the second Attendant by placing their own clothes out of sight, dividing the dresses of four other Patients into three parcels, giving them to the Attendant, as containing all the clothes of the Patients in that room. In the morning the window of the sleeping apartment was found wrenched open by the steel prong. The same Attendant who was imposed upon by the clothing officiated as Night Watch, and neither he or the Patients sleeping in the room,

Escapes.

Escapes.

knew anything of the escape until six o'clock in the morning, when the room was opened by the Attendants. Active search was made and the Police of London, Liverpool, Manchester, and other large Towns were communicated with in vain. One or both men were known to the Police of Nottingham, Leeds, and other places; but they have never been heard of. It is conjectured by those who knew them that they have emigrated to Australia. The Committee will remember that having fully investigated the circumstances, they deemed it right to dismiss the Attendant. These escapes, together with those recorded in the Reports of other Asylums, show the urgent necessity of providing a State Asylum for individuals who have been convicted of crime, and who have from various causes been exempted from punishment on the plea of insanity. The Commissioners recognise and deplore the evil of retaining such persons in Asylums fitted up for the reception of a different class of Lunatics. In their last Report to the Lord Chancellor they make the following judicious observations :—

“ Insane Convicts,” meaning by that expression persons tried and convicted, and who have while under sentence become insane ought, we think, as a general rule, to be sent to State Asylums, and morally tainted with crime, and therefore unfit for association with the ordinary inmates of Asylums.” “ It is notorious that many criminals are acquitted most improperly on the ground of Insanity, and these are among the most objectionable and mischievous of the inmates of Asylums.” The Jurisprudence of Insanity in connexion with crime requires revision, and the Commissioners in Lunacy have done much good in drawing public attention to this important subject.

Deaths.

Of the thirty-two Patients who have died, the deaths of twenty-two were predicated at the time of their admission, in consequence of their being at that date in advanced stages of incurable disease. Indeed a few were moribund at the time as has been previously stated. Some of these Patients, however, survived for a longer period than might have been anticipated; thus, E. P., although apparently in the last stage of pulmonary consumption, and never

able to quit her bed, except when lifted up by the Nurses, survived from May until August; and S. W., with heart disease, and dropsy of long standing, survived five weeks. Others, who were the subjects of general paralysis, lived on for several months; their existence being almost vegetative in its character, many of them having no control whatever over their excretions, and walking only with uncertain and tottering gait. Three deaths were sudden in their termination, although occurring in each case in persons suffering from recognized organic disease; thus W. B. had been paralysed and epileptic for three years, but while masticating his food a small piece of it became entangled in the larynx and produced instantaneous death. The two others were from Apoplexy. A Coroner's Inquest was held in each case. These facts, melancholy as they are, are indicative of the reluctance manifested by individuals in sending the Pauper Lunatic under early treatment, are more than paralleled in many other counties; and the mortality from this and other causes is proportionately higher, reaching in some instances to seventeen per cent.

#### OBITUARY.

	M.	F.
From Exhaustion after Mania .....	1	0
— General Paralysis .....	8	1
— Epilepsy .....	2	4
— Softening of the Cerebellum ...	1	0
— Apoplexy .....	2	0
— General Debility .....	2	0
— Chronic Bronchitis .....	0	1
— Pulmonary Consumption .....	2	2
— Old Age .....	2	1
— Dysentery .....	1	0
— Accidental Choking .....	1	0
— Cardiac Disease and Dropsy ...	0	1
	<hr/>	<hr/>
	22	10—32
	<hr/>	<hr/>

The Patients generally have enjoyed a high standard of health during the past year. No case of Fever has occurred. One Patient died soon after his admission from dysenteric symptoms, the result of chronic intestinal disease; but the Diarrhœa which was prevalent in Derby and the neighbourhood, scarcely showed itself among the Patients here, and they have been hitherto remarkably exempt from those chronic intestinal affections, which were formerly so common and so fatal among the Insane. This exemption may be fairly ascribed to the warmth, dryness, and ventilation of the Institution, and the liberal dietary and good clothing with which they are furnished. Every Patient has been supplied daily throughout the year with two kinds of vegetables; even the higher products of the garden are not denied to them, and the sick have at all times an abundant supply of fruit, if the nature of their illness does not prohibit its use. By these and such like agencies, Coehexia and Scurvy are excluded from the Institution, and the sallow, emaciated Patients, from the crowded alleys of Derby and Nottingham, soon put on the hue of health, and often acquire weight so rapidly as to astonish their friends. These are gratifying results, secured by the liberality of the County in annexing a large amount of land to the Asylum, and are secondary only to the restoration of the Patient, to which, indeed, they are auxiliary. The general appearance of this and kindred Institutions, and the recognised comforts of their inmates will ultimately serve the grand purpose of destroying the hideous traditions of the past, and uproot the injurious dread and prejudice with which Lunatic Asylums are contemplated; and then Insanity will become as curable as Rheumatism, Gout, and many other diseases. Another great step towards this desirable end has been made by the recent alterations in the Lunacy Law, and by the improved forms of the Certificates. A Patient was, until the past year, described even in the *medical* certificate as "a proper person to be confined;" but this objectionable vocabulary has been removed, and the more rational description given to him of "a proper person to be taken charge of, and detained under *care* and *treatment*." Thus removing him, as it were, from the Custodianship of gaoler, to the skill and care of the Medical man. For this, as for many

other beneficent changes, we are indebted to the zeal and humanity of the Commissioners in Lunacy.

In referring to the Medical Certificates, it may not be wrong to state, that a large amount of correspondence has been entailed upon the Superintendent during the past year, in consequence of the very inaccurate manner in which these documents have been filled up. It is quite a rare thing to receive a correct certificate even from parties to whom their previous errors had been pointed out and explained. A collection of those blunders would occupy much space, but it would be curious, as illustrating the vast number of mistakes it is possible to make in a legal document of only a few lines in extent. It is not honorable to the medical profession that these things should exist: whatever is worth doing at all, is worth doing well, and carelessness ought never to be evinced in a document which determines the freedom or detention of a fellow-creature, and upon the accuracy of which many other grave consequences may depend. Your Physician takes this opportunity of appealing to his brother practitioners, in order that they might display less haste in the composition of such documents, for he is convinced that in this, as in other high duties which they perform so well, they will act skilfully when they know that upon the due construction of the Certificate are dependant the immediate admission of a Patient, (perhaps too weak to make a second journey), the legal safety of themselves, as well as of the Resident Physician, who is liable to heavy penalties by admitting any person into the Asylum upon inaccurate or defective certificates.

Medical  
Certificates.

Occupation has been carried out as heretofore, with as much energy as is compatible with the well-doing of the Patient. The ample farm and garden, by their never-ceasing requirements, furnish an abundance of employment to all who are capable of out-door exercise. Nine acres of wheat, four acres of beans, and three of oats, have been reaped and harvested, and one thousand and fifty bushels of potatoes, and six tons of parsnips and carrots, have been dug and garnered up by their labours during the past autumn, in addition to many other crops of lesser importance. The condition

Occupation.



to which the farm was reduced by former occupants, and by the manufactory, extending over several years, of bricks and tiles, will cause abundant labour for some time to come, as several fields still require drainage, and the hedgerows throughout the Estate demand much alteration, attention, and care. The Duties of the Laundry, Kitchen, and Workshop, agreeably occupy the Female part of the Establishment. In the furtherance of all these labours, your Physician continues to be greatly indebted to the untiring zeal and industry of the Chief Attendants, Lydia Humphrey and William Joyce.

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The Amusements detailed in former Reports continue to be supplied. The Christmas Party, at which both sexes meet, went off with much animation and propriety, and was followed by the usual good effects, tranquillity and sleep at night. The Attendants and Nurses exerted themselves greatly to secure these good results; and their conduct generally has been such as to merit approbation.

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In relation to the Entertainments, and indeed for whatever promotes the happiness of the Patients, Mr. Langley deserves honorable mention. He continues to discharge his duties as Clerk and Steward with ability, courtesy, and zeal; and has hitherto done all he can to sustain the principles upon which the Institution is based, and to forward those views which your Physician deems essential, not only to the harmonious working of the Establishment, but also to the care and well-being of the inmates entrusted to his care.

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The Non-Restraint System. It was not intended to refer to the subject of Non-Restraint in this Report. The system has been so long carried out in the largest Lunatic Hospitals of this Kingdom, that it appeared incumbent upon the profession to regard it as a settled principle, and to look forward to other improvements. From some cause, however, the subject is being re-agitated with much warmth, and great unfairness

The writings of men favorable to the principle, have been distorted, and opinions ascribed to them which they have never entertained. Truth has been disregarded, and journals with scientific pretensions have resorted to the mis-representations which disfigure our political literature. In the second Report of the Derbyshire Lunatic Asylum, two cases of attempted suicide (one alas! successful) are reported, and yet the Editor of the "Psychological Journal," has not thought it unworthy of him to intimate that the Writer of the Report ignored the existence of a suicidal disposition among the Insane, and that he regarded such cases as "imaginary and ideal." The mis-representation is so self-evident, that it would be unworthy of notice, were it not that a great principle is impugned by it, and we are gravely informed, that "Lunatics, do alas, sometimes cut their throats—ligatures are occasionally required for the treatment of these cases: and Patients resolutely determined upon self-destruction often do their utmost to effect their purpose by tearing the wound open. Under such distressing circumstances, who could for one moment question the necessity and humanity of preserving life by restraining the hands of the Patient, until the wound was cicatrised."

Your Physician has no desire to advert upon the practice of other Gentlemen in the treatment of the Insane—much less would he refer in a Public Report to matters of a mere personal interest; but he deems it due to the reputation of this Institution, and to the system which the Committee has espoused, to declare, that in his opinion, surgical requirements do not enter into the question of Non-Restraint; or if so, such cases must be regarded as exceptional. The same safety of the Patient with him, as with all rational men, is the primary concern. Upon the means of attaining that end there is (unhappily) much difference of opinion. Every person will be guided in each special case by his former experience, by inductions founded on the results of analogous cases, or by the recorded experience of others. Three surgical cases in which "restraint" was resorted to have fallen under observation during the past eight years; in each instance, the splints and other appliances, were violently thrown off so long as the Patient was otherwise fettered; but all surgical requirements were complied with when freedom to the sound

The  
Non-Restraint  
System.

limbs was granted. A necessity for "restraints" in surgical cases may possibly arise. It would perhaps be premature to state even that no other case *can* arise, in which Restraint would be justifiable. And yet, the experience of the older Lincoln Asylum, and the large Asylums at Hanwell and Colney Hatch, appears to demonstrate such a statement, as far as it is possible for the experience of the past to predicate the future. Never having hazarded any abstract speculations upon the subject, or indulged in theories as to what may, or may not occur, your Physician will, as heretofore, content himself with being simply the historian of his own experience. That experience commenced several years before the great experiment of Non-Restraint was tried at Hanwell, and embraced therefore the usual routine of strait-waistcoats, and all the paraphernalia of mechanical controul; but he can most conscientiously aver, that not a single Patient (in upwards of two thousand) has, during the past ten years, been restrained while under his observation. Many Patients have been under restraint at the period of their admission—and such restraint was deemed by other medical men to be urgently required. The following are among some such cases admitted into the Asylum during the past year. The facts within inverted commas are derived from the certificates upon which the Patients were admitted.—J. A., brought in chains: "Has threatened to murder T. E. and T. E. with a knife; has been in a state of great excitement for four days, offering to fight." G. H. and W. D. were brought in restraints from an Institution in which restraints are professedly employed, they were very violent: "G. H. is now suffering from an attack of acute mania, characterised by continued violence and excitement, rendering it dangerous for any one to approach him. His conversation is rapid and full of delusions; he shouts words without meaning, as Punch Junio. He is at present under personal restraint having threatened violence to Attendants and destroyed bedding." R. H., Attendant on the Insane, says, I saw G. H. before he was admitted—it took several men to secure him—he threatened to cut out the entrails of several persons, and to kill the first man he came to. Since his admission he has refused his food—has been in an excited state, and threatened to knock a man's head off." "R. H. says W. D. frequently strikes the other Patients. His conversation

is full of debauchery—he is intolerable when the fits come on. Yesterday he smashed with one of the fire irons the sashes of the window, and ten panes of glass; he threatens to kill me, and ran after me with a poker; says he will rip his own entrails clear out; considers himself one of the best fellows in existence.” These cases might be multiplied; they were most powerful men, and in states of violent excitement. One of them was much bruised. The verbal statements made by those who brought them, were even stronger than the written account, yet in obedience to a principle which has hitherto been unfailing, they were liberated immediately, and never restrained again. One who was a butcher by trade, slaughtered a pig for the Institution within a fortnight after his chains were removed, and from that time was employed daily in useful occupations until he was discharged—cured. A second has also returned home—cured. The third is an epileptic, and will probably remain with us as long as he lives.

These facts will form an apology for a large amount of doubt as to the necessity of mechanical restraint in the treatment of the Insane, and they gather force from the large experience and careful reflection of the Commissioners in Lunacy, who, in their last Report, testify as follows:—“For ourselves, we have long been convinced, and have readily acted on the conviction, that the possibility of dispensing with mechanical coercion in the management of the Insane is, in a vast majority of cases, a mere question of expense, and that its continued or systematic use in the Asylums and Licensed Houses where it still prevails, must in a great measure be ascribed to their want of suitable space and accommodations, their defective structural arrangements, or their not possessing an adequate staff of properly qualified attendants, and frequently to all these causes combined.” \* \* \* In numerous instances in which the employment of constant or frequent restraint was represented to be indispensable, the Patient has on our recommendation been removed to another Establishment where a different system is adopted, and the removal has frequently been found to be attended with the happiest effects.”—*Eighth Report of the Lord Chancellor, p. 42.*

It appears from these observations, that tranquillity and order among the Insane are in an inverse ratio with the amount of violence—mechanical or moral, which is employed in treating them. It is not enough to loose the fetter from the limb, the mind must not be chafed or only one part, and that the least of the non-coercion system has been attempted; in brief, the compound word “non-restraint” is a short term to express the absence of all irritation, and to imply the presence of everything that is calculated to soothe the troubled mind into healthfulness and peace.

### RELIGIOUS SERVICES.

The Contractor for clothing to the Essex County Asylum having paid over a considerable sum for needlework performed by the Female Patients of this Asylum, some portion of it was devoted to the purchase of a Harmonium for the Chapel, and to the removal of a Screen which excluded the Male and Female Patients from the sight of each other. Mr. Fritche, sen., kindly gave some music lessons to the Chief-Attendant (Mr. Joyce), who quickly comprehended his instructions, and has ever since conducted the music part of the service with efficiency and success. The Harmonium is fitted up as an Organ and possesses much of the grandeur and power of this instrument and is perhaps equally well adapted to the purposes of a small place of worship. These changes have effected great improvement, and have approximated the character of the Chapel and its services to that of a small parish Church. In no village Church is there greater order and decorum. Several of the Patients are bowed down with deep sorrow, and they find in the Chapel Services a consolation and comfort; still more of them look forward to it as a change in the routine of their daily life. The service of the Church of England clothed as it is in language which the most simple can understand and calling as it does in many parts upon the congregation for responsive prayer—and the Psalms, with their rich description of the varied feelings of the human heart, and their suggestive teachings of resignation and trust, together with their eloquent portrayal of Him “whose mercy endureth for ever,” seem especially adapted to those “who are afflicted in mind, body, or estate”—and the result has been

that since the opening of the Chapel, now three years ago, only a solitary instance of disturbance has taken place during the Service. Even this disturbance was limited to a poor Epileptic, who, seized with a sudden paroxysm of Mania, shouted aloud. He was removed amid the most perfect quietude and silence of all the other Patients, and the Service proceeded as usual to its close. This solitary exception occurred on the last Sunday of the old year. The Chapel Services have been conducted with punctuality and decorum; and your Physician is happy to testify that the Chaplain seems at all times desirous to carry out his wishes in the moral management of the Insane.

Religious  
Services.

The Insane are so peculiarly special in their words and actions that it requires much intuition and some experience to distinguish between the workings of disease and the utterances of a troubled conscience. When the physical organ through which Mind displays itself has become disordered, its manifestations are no longer harmonious and truthful, but like a distorted prism it throws off the disjointed and scattered rays of thought tinged and coloured with all kinds of morbid fancies and spectral illusions, and the individual thus afflicted properly passes from the spiritual control of the Divine to the medical and moral care of the Psychopathic Physician. As in the treatment of an inflamed eye, or a disordered limb, the Medical Man would endeavour to adjust the imponderable agencies of light and motion to the strength and condition of each particular member, so does he in the irritable Brain claim for himself the sole guidance of those subtle moral influences which more than anything beside control or agitate, sooth or disorder, the nervous Invalid. He alone has been trained to detect and distinguish the physical ailment, and can therefore best appreciate the sympathetic relations which exist between the Mind and the Body.

Sympathy  
of Mind and  
Body.

The mysterious influence exerted by the Mind upon the Body, and the Body upon the Mind, was forcibly illustrated in the case of E. E. So long as she exhibited no physical ailment, she gave us the most unremitting anxiety in consequence of her strong suicidal

impulses, but when the Body became more obviously under the influence of disease, her Mind seemed to gather strength, hope, and peace. Her case was altogether one of deep interest. She had for many years been a most kind and trustworthy servant in a neighbouring Lunatic Asylum. Under a well-authorized hope of being married, she gave up her situation. The person to whom she had been long attached disappointed her expectations, and not only did not marry her, but abandoned her altogether. Intense grief was followed by despair—despair by madness; she threw her hard-earned savings away—she destroyed her clothing; she attempted to destroy herself. She was taken as a Patient to that Hospital in which she had so often ministered to the broken-hearted and insane. For night and day through several anxious weeks, she was closely watched, yet from time to time she almost baffled all their care. The Superintendent wrote to me several times, describing her as the most suicidal person he had ever known, and expressing strong fears that in consequence of her intimate knowledge of the habits and duties of the Nurses and the routine of the Establishment, she would accomplish her design. He had some reason to conjecture that she had a parochial settlement in Derbyshire, and feeling that she would be safer here than under his care, owing to the above causes, he exerted himself to procure her removal. That removal was effected by the Parish of Hartshorne. It was soon found that the intense apprehensions which had been expressed respecting her were well founded. She required unceasing vigilance. By abstinence from food, by attempted strangulation, and by various arts, she endeavoured to terminate her existence. She was watched night and day. Bye and bye a few lucid intervals seemed to break across the deep dark gloom of her mind, and tears welled up to her relief. In these brief snatches of returning sense, opportunities were taken to appeal to the known kindness of her nature, and to explain to her the disgrace she would bring upon those who surrounded her, and upon the Institution in which she was, if she carried her sad designs into execution. There were periods in which she felt this, and she would then implore us not to leave her for a single moment alone. The anguish which had overwhelmed her mind at length began to make rapid encroachments upon her bodily health; she became very weak,

a hectic flush tinged her pallid cheek, a short cough—slight at first—but unmistakeable in its significance, set in; and now the moments of rational calm became more prolonged, there were large intervals of time in which she might be safely left alone; she began to look out from herself, and to find consolation in listening to cheering passages from the Bible, or even in reading its hallowed pages herself. As the pulmonary disease advanced, she became quite free from all suicidal feelings, or at all events could keep them under perfect check, as wrong and sinful. A time arrived in which they disappeared wholly, and at which she became calm, resigned, and even hopeful. Her cheeks were often bedewed with tears of gratitude as she contemplated the dangers through which she had passed, and many and deep were her expressions of thankfulness to the nurses who had watched over her. She was too weak for active exertions, but she employed herself in making light and elegant articles of needlework, which she gave away as memorials of her esteem to the Nurses, the Chaplain, and others. There was always on her countenance a deep trace of the sorrows she had passed through, and pensiveness pervaded her words and actions, yet it was pensiveness imbued with much of the sweetness of hope, and rich as peaceful resignation, she gained and kept the love of all around her, and when in eleven months after her admission, she breathed her last, there was no Nurse, and scarcely a Patient, who did not feel that they had lost a friend. Her death was tranquil in the extreme. At the moment of her departure, her face was for the first time brightened up with a radiant smile, and some minutes passed away before the bystanders could believe that her spirit had flown to somewhere the wicked cease from troubling, and the weary are at rest.”

An Inmate who is usually selfish and apathetic, had been so interested by the beautiful close of Ensor’s career, that she composed some verses of considerable merit upon her death. She gave a copy of these verses to a discharged Patient, who had them privately printed at Nottingham; and some of these, to the surprise and gratification of every one, were forwarded to the Asylum. It may perhaps be right to add to this brief history a fact, which is creditable alike to the Attendants of this Institution, and to those of the General Asylum at Nottingham. The poor Patient had a yearning desire

Sympathy  
of Mind and  
Body.



that her body might be buried near to her relatives. She had no funds by which this wish could be realised, yet nevertheless her Attendants assured her that this desire should be ministered to; and by subscriptions from this Asylum to the amount of £3. 17s., aided by £1. 5s. from the Attendants at Nottingham, her remains were conveyed to that County, and repose in the quiet churchyard of Clifton.

It should have been stated, that the Commissioners in Lunacy visited this Asylum on two separate occasions during the past year, and on each occasion left favourable Reports of the Asylum, of which the following are copies:—

Derby County Asylum, March 16, 1854.

Commis-  
sioners'  
Reports.

There are 184 Patients in this Asylum, of whom 2 Males and the same number of Females are private Patients, and 98 Males and 82 Females are pauper. Nineteen of these are registered as being under medical treatment. No one is registered as being at present subjected to seclusion, and we did not see any one secluded at the time of our visit. Since the commencement of the operation of the existing Act of Parliament (at the beginning of November last) there appear to have been twenty-six instances of seclusion, for short periods of time each, such instances, however, having reference only to ten Patients.

Since the last visit of the Commissioners, on the 16th December 1852, 158 Patients have been admitted, 86 have been discharged, and 36 have died; 16 deaths being ascribed to Paralysis, 3 to Exhaustion after Mania, 5 to Epilepsy, 3 to Phthisis, 2 to General Debility, 1 to Suicide, (upon which an Inquest was held), and the rest to various other causes.

We learn on enquiry that about half the Patients are general

employed, 17 Males working on the Farm and Garden, and 33 in the House, and 12 Women being occupied in the Laundry, and 27 in the Wards.

About 80 Patients on an average attend the Church Service, which is read (together with a Sermon) on every Sunday by the Chaplain; and Prayers read on the week days by Dr. Hitchman.

The Dietary remains the same as heretofore. The dinner to-day consisted of rice-pudding in lieu of stew. The rations appeared to us to be ample.

We have to-day seen all the Patients, and have inspected the Rooms appropriated to their use. The Patients were remarkably tranquil, and the Wards, without any exception, clean, well-ventilated, and in good condition.

Altogether the Establishment appears to us to be in a satisfactory state.

B. W. PROCTOR,	} Commissioners in Lunacy.
T. TURNER,	

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Derby County Lunatic Asylum, Sept. 21, 1854.

There are now 229 Patients in this Asylum, of whom six only are private Patients; the remainder, to the number of 116 Males and 107 Females, being paupers.

We have this morning gone through and inspected all the Wards, and have seen and examined their Inmates.

The Patients at the time of our visit were remarkably quiet and orderly; and no one of either sex was in seclusion, which is, how-

ever, occasionally employed for short periods, in the case of violent and maniacal Patients. The different Galleries, Dormitories, and Sleeping-rooms were in excellent order, well-ventilated, clean, and free from any offensive smell.

In consequence of the long and unusual drought there has been some deficiency in the supply of water; but we did not perceive any want of cleanliness, either in the persons of the Patients, or in the sinks and closets.

The bodily health of the Patients is generally very good, and there is no epidemic or serious illness among them. The names of twelve are registered as being under medical treatment.

Commis-  
sioners'  
Reports.

We are informed that about 68 of the Males are employed in the Garden and Farm; and upwards of 50 of the Females in the Laundry and Kitchen and at their needle. All the clothing as well as the shoes required in the Establishment are made by the labour of the Patients themselves.

We inspected the bedding of the Patients, which was clean, comfortable, and of excellent quality.

We have made the various inquiries relative to the management of the Institution, directed by the statute, and have received satisfactory replies.

The condition of the Asylum altogether is creditable to those to whom more immediately its supervision and management are entrusted.

J. W. MYLNE,	}	Commissioners in Lunacy.
T. R. HUME,		

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Such is a brief outline of the Asylum's History during the past year. Although the retrospect be suggestive to the writer of many

personal shortcomings, yet it also awakens in him emotions of thankfulness that during its progress the Establishment has never been clouded by the presence of a pestilence, and that neither the wishes of the Suicide or the Homicide have been consummated. "Nisi Dominus custodieret civitatem, frustra vigilat qui custodit eam."

The Resident Physician has now the pleasing duty to thank the committee of Visitors for their personal kindness and support, and to express a hope that they may long continue to foster the Institution by their wise and benevolent exertions.

January 1st, 1855.

JOHN HITCHMAN.

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## THE CHAPLAIN'S REPORT.

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GENTLEMEN,

Since my appointment as Chaplain to your Asylum, I have always experienced great satisfaction in the discharge of the duties belonging to that office.

The regular attendance at Chapel on Sundays of the majority of the Patients (which as you are aware is entirely voluntary)—their reverential behaviour throughout the whole of the Service—the manner in which they repeat the responses, unite in singing the hymn, and their attention to the Sermon,—are evident proofs of the deep interest they take in the performance of their religious duties.

One of the Female Patients, E. E., alluded to in pages 17 and 18 of Dr. Hitchman's Report for 1853, whom I visited continually, and to whom I administered the Holy Communion, afforded me great pleasure. Though incapacitated by illness from attending the Services in the Chapel, I always found upon visiting that she was well acquainted with the subject of the previous Sunday's discourse (which of course must have been told her by other Patients); and whenever I alluded to the expected period of her dissolution, she always assured me that "she was not afraid to die"—neither, indeed, was she, as from the whole tenor of her conversation it was evident that her hopes were based on the only true foundation, Jesus Christ.

Several Men Patients have from time to time assured me that they have received great benefit from my ministrations.

I cannot conclude without acknowledging the extreme kindness of Dr. Hitchman, who upon all occasions has rendered me most valuable assistance and advice.

I have the honor to be, Gentlemen,

Your obedient Servant,

January 10th, 1855.

GEORGE FRITCHE.

RECEIPTS.

	£	s.	d.	£	s.	d.
Balance in Treasurer's hands on the 31st December, 1853	3631	11	7			
Do. in Steward's do.	34	12	6			
Sundry sales				3666	4	1
Officers' Uniform				66	7	3
Printing Charges Returned				18	4	0
Maintenance of Patents from Unions and Parishes belonging to County..	3899	0	11	14	0	0
County Treasurer	60	18	7			
Unions and Parishes belonging to Out-Counties	1197	1	3			
Private Patents	197	10	0			
Funerals and Removals	31	4	9			
Accounts due to Tradesmen for Supplies to 31st December, 1854	1202	14	3			
Salaries of Officers to ditto	200	0	0			
				5385	15	6
				1402	14	3
				£10,553	5	1

PAYMENTS.

	£	s.	d.	£	s.	d.
Tradesmen for Supplies to the 31st December, 1853	835	16	6			
Salaries of Officers to ditto	200	0	0			
Provisions	2701	19	0	1035	16	6
House and other expenses	1517	17	7			
Clothing	176	1	0			
Salaries and Wages	1644	12	7			
Extras for Sick	104	11	2			
Supplies to Farm and Garden				6145	1	4
Balance in Treasurer's hands on the 31st December, 1854	2882	5	4	427	1	5
Ditto in Steward's ditto	63	0	6			
				2945	5	10
				£10,553	5	1

Examined and Audited,  
 H. SEYMOUR BLANE.  
 THOS. BENT.  
 W. EVANS.  
 JOHN RADFORD.

JOHN LANGLEY,  
 Clerk and Steward.

**DERBY COUNTY ASYLUM.**  
**INCOME AND EXPENDITURE FROM THE 1ST JANUARY TO THE 31ST DECEMBER, 1854.**

FROM UNIONS AND PARISHES CONTRIBUTING.	INCOME FROM WEEKLY RATE FOR THE QUARTERS ENDING					£. s. d.	HEADS OF EXPENDITURE.	EXPENDITURE FROM WEEKLY RATE FOR THE QUARTERS ENDING					£. s. d.	
	31st March £. s. d.	30th June £. s. d.	30th Sept. £. s. d.	31st Dec. £. s. d.	Total. £. s. d.			31st March £. s. d.	30th June £. s. d.	30th Sept. £. s. d.	31st Dec. £. s. d.	Totals. £. s. d.		
Ashby-de-la-Zouch . . . . .	34 17 1	31 12 11	27 0 0	29 11 4	123 1 4		<i>Provisions.</i>							
Ashbourne . . . . .	39 8 6	44 11 6	51 14 4	52 11 4	188 5 8		Meat . . . . .	204 12 2	206 10 0	227 2 7	242 16 5	881 1 2		
Bakewell . . . . .	115 9 10	121 4 6	126 4 5	133 2 7	496 1 4		Flour . . . . .	181 1 0	202 10 0	207 6 8	188 16 0	779 13 8		
Belper . . . . .	133 19 10	140 1 9	140 17 3	145 5 0	560 3 10		Oatmeal, Rice, Barley, and Beans . . . . .	31 16 4	16 12 11	15 6 4	30 9 11	94 5 6		
Burton-on-Trent . . . . .	38 18 7	31 4 4	31 3 6	33 8 6	134 14 11		Tea and Coffee . . . . .	19 15 10	17 13 8	18 4 9	19 10 5	75 4 8		
Basford . . . . .	40 0 8	34 6 3	37 14 5	46 11 1	158 12 5		Sugar and Treacle . . . . .	8 2 2	12 15 0	11 15 10	11 15 8	44 8 8		
Chapel-en-le-Frith . . . . .	8 6 3	6 8 7	10 0 0	17 10 0	42 4 10		Other Groceries . . . . .	4 4 9	8 4 0	8 0 2	19 8 4	39 17 3		
Chesterfield . . . . .	117 2 8	115 14 7	132 11 7	150 8 2	515 17 0		Tobacco and Snuff . . . . .	7 7 6	7 12 0	8 12 0	10 4 0	33 15 6		
Derby . . . . .	213 13 10	220 6 2	216 4 6	226 15 2	876 19 8		Butter and Cheese . . . . .	53 3 7	53 8 0	63 2 4	67 14 0	237 7 11		
Ecclesall Bierlow . . . . .	19 14 3	16 12 8	13 0 0	13 2 10	62 9 9		Malt, Hops, Beer . . . . .	144 0 5	67 8 4	135 10 6	169 5 5	516 4 8		
Glossop . . . . .	34 18 6	39 12 11	44 12 10	36 7 1	98 15 8		<i>House &amp; other Expenses</i>							
Hayfield . . . . .	29 15 8	25 14 4	26 0 0	26 5 8	98 15 8		Coals . . . . .	251 8 1	256 11 2	120 17 4	130 19 3	759 15 10		
Loughborough . . . . .	6 11 5	6 8 7	7 7 2	0 0 0	41 9 6		Cart, Horse and Harness . . . . .	0 0 6	56 0 0	0 0 0	0 0 0	56 0 0		
Mansfield . . . . .	15 12 4	12 17 2	13 0 0	13 2 10	33 10 0		Soap . . . . .	44 10 0	1 10 0	23 17 6	23 2 0	92 19 6		
Rotherham . . . . .	6 11 5	12 8 7	6 10 0	6 11 5	26 1 5		Starch and Soda . . . . .	3 9 11	3 4 0	1 19 4	2 10 7	11 3 10		
Shardlow . . . . .	76 8 6	80 8 9	79 4 3	83 6 6	319 8 0		Oil, Candles, & Cleaning Articles . . . . .	8 16 3	1 16 7	4 13 4	14 3 1	29 9 3		
Tamworth . . . . .	6 11 5	6 8 7	6 10 0	6 11 5	26 1 5	3899 0 11	Furniture and Bedding . . . . .	38 8 11	43 17 3	79 8 0	94 17 0	256 11 2		
Uttoxeter . . . . .	0 0 0	0 0 0	0 0 0	33 12 10	33 12 10	60 18 7	Ironmongery & Cutlery . . . . .	10 17 5	8 7 11	28 4 5	20 17 4	68 7 1		
From County Treasurer.	6 11 5	9 2 11	19 10 0	25 14 3	60 18 7		Brooms, Brushes, and Earthenware . . . . .	3 12 1	3 10 10	3 9 9	20 17 11	31 10 7		
From Unions & Parishes not Contributing.							Rates and Taxes . . . . .	9 4 4	4 6 7	10 6 7	5 9 8	29 7 2		
Basford . . . . .	47 11 8	48 5 6	40 7 8	40 14 4	176 19 2		Periodicals, Printing, Postages, Stamps and Stationery . . . . .	2 13 0	19 0 10	6 15 8	18 17 11	47 7 5		
Bingham . . . . .	0 0 0	0 0 0	0 0 0	1 5 9	1 5 9		Carriage of Goods & Tolls . . . . .	3 14 8	5 19 7	4 16 7	7 2 9	21 13 7		
Bedford . . . . .	46 6 0	0 0 0	0 0 0	0 0 0	46 6 0		Removal of Patients . . . . .	14 15 9	0 0 0	0 0 0	0 0 0	14 15 9		
East Retford . . . . .	27 19 0	30 17 4	33 3 5	39 8 9	131 8 6		Funeral Expenses . . . . .	7 16 0	4 17 0	2 5 0	5 16 6	20 14 6		
Grantham . . . . .	0 0 0	0 0 0	0 0 0	6 18 6	6 18 6		Road Expenses . . . . .	15 0 0	0 0 0	0 0 0	0 0 0	15 0 0		
Liverpool . . . . .	18 8 0	8 0 0	0 0 0	10 17 9	37 5 9		Miscellaneous . . . . .	22 0 6	7 0 5	9 10 11	15 10 1	54 1 11		
Loughborough . . . . .	7 17 9	7 14 4	1 5 9	0 0 0	16 17 10		Sweeping Fuels . . . . .	2 5 0	2 5 0	2 5 0	2 5 0	9 0 0		
Leek . . . . .	0 0 0	15 6 11	0 0 0	0 0 0	15 6 11		<i>Clothing</i> . . . . .	64 8 1	15 16 11	31 6 0	64 10 0	176 1 0	1517 17 7	
Lincoln . . . . .	0 0 0	1 19 8	26 4 8	31 11 0	59 15 4		<i>Salaries and Wages.</i>						176 1 0	
Mansfield . . . . .	7 17 9	0 0 0	0 0 0	0 0 0	7 17 9		Officers . . . . .	200 0 0	200 0 0	200 0 0	200 0 0	800 0 0		
Macclesfield . . . . .	0 0 0	0 0 0	8 2 10	7 17 9	16 0 7		Servants . . . . .	200 10 9	197 11 6	218 10 10	227 19 6	844 12 7		
Nottingham . . . . .	118 15 0	108 19 8	146 3 0	208 8 6	582 6 2		<i>Extras for Sick.</i>						1644 12 7	
Newark . . . . .	7 17 9	7 14 4	7 16 0	7 17 9	31 5 10		Drugs . . . . .	6 4 9	4 2 0	8 12 6	6 4 5	25 3 8		
Northampton . . . . .	0 0 0	0 0 0	0 0 0	5 18 6	5 18 6		Wines and Spirits . . . . .	16 11 0	0 0 0	11 10 0	15 9 0	43 10 0		
Rotherham . . . . .	7 10 0	0 0 0	0 0 0	0 0 0	7 10 0		Porter . . . . .	3 18 0	9 5 6	9 13 0	13 1 0	35 17 6		
Radford . . . . .	0 0 0	0 0 0	0 0 0	2 8 0	2 8 0								104 11 2	
Stockton . . . . .	9 8 9	0 0 0	0 0 0	0 0 0	9 8 9									
Southwell . . . . .	0 0 0	0 0 0	0 0 0	3 1 9	3 1 9									
Woburn . . . . .	7 14 4	0 0 0	0 0 0	0 0 0	7 14 4									
Uttoxeter . . . . .	0 0 0	0 0 0	0 0 0	31 5 10	31 5 10									
For Funerals & Removals						1197 1 3								
For Private Patients . . . . .						31 4 9								
						197 10 0								
						£5385 15 6							£6145 1 4	

Examined. (Signed) **H. SEYMOUR BLANE,** **JOHN LANGLEY,**  
 CHAIRMAN. CLERK & STEWARD.

No.	Name	Age	Sex	Color	Religion	Profession	Place of Birth	Residence	Married	Children	Other Notes
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

REMARKS ON CLOTHING AND BEDDING, MAINTAINED BY THE FEMALE PATIENTS  
BETWEEN THE 1st JANUARY AND THE 31st DECEMBER 1881

RETURN OF CLOTHING AND BEDDING, MADE BY THE FEMALE PATIENTS  
BETWEEN THE 1<sup>ST</sup> JANUARY AND THE 31<sup>ST</sup> DECEMBER, 1854.

200	Aprons.
100	Bonnets.
200	Bolster Cases.
160	Boot Uppers.
170	Caps, Women's.
158	Ditto, Men's.
314	Chemises.
12	Drawers.
190	Gowns.
92	Ditto, night.
154	Handkerchiefs.
12	Men's Cloth Suits.
119	Mattress Covers.
1	Pall.
103	Petticoats.
82	Pinafores.
140	Stocks.
154	Sheets.
225	Shirts.
70	Ditto, Flannel.
25	Shawls.
24	Shrouds.
12	Strong Dresses.
170	Towels.

The whole of the Repairs are done in the Asylum.





## ORDINARY DIET.

	BREAKFAST.				DINNER.								SUPPER.																	
	Males.		Females.		Males.				Females.				Males.		Females.															
		Bread.		Bread.		Beer.		Bread.		Uncooked Meat.		Pie or Pudding.		Soup.		Stew.		Vegetables.		Beer.		Bread.		Cheese.		Bread.		Butter.		Tea.
	oz.		pt.	oz.	pt.	oz.	oz.	oz.	pt.	oz.	oz.	oz.	pt.	oz.	oz.	oz.	oz.	oz.	pt.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	pt.	pt.	
Sunday . . . .	6		1	5	1	$\frac{1}{2}$	6	7	..	..	12	..	..	..	..	..	12	..	$\frac{1}{2}$	6	2	5	5	5	$\frac{1}{2}$	1	1			
Monday . . . .	6		1	5	1	$\frac{1}{2}$	6	..	..	1	..	..	..	..	..	..	..	12	..	$\frac{1}{2}$	6	2	5	5	$\frac{1}{2}$	1	1			
Tuesday . . .	6		1	5	1	$\frac{1}{2}$	6	7	..	..	12	..	..	..	..	..	12	..	$\frac{1}{2}$	6	2	5	5	$\frac{1}{2}$	1	1				
Wednesday . .	6		1	5	1	$\frac{1}{2}$	6	7	..	..	12	..	..	..	..	..	12	..	$\frac{1}{2}$	6	2	5	5	$\frac{1}{2}$	1	1				
Thursday . . .	6		1	5	1	$\frac{1}{2}$	6	..	..	12	..	..	..	12	..	12	..	..	$\frac{1}{2}$	6	2	5	5	$\frac{1}{2}$	1	1				
Friday . . . .	6		1	5	1	$\frac{1}{2}$	6	7	..	..	12	..	..	..	..	..	12	..	$\frac{1}{2}$	6	2	5	5	$\frac{1}{2}$	1	1				
Saturday . . .	6		1	5	1	$\frac{1}{2}$	6	..	14	..	..	14	..	..	..	..	..	..	$\frac{1}{2}$	6	2	5	5	$\frac{1}{2}$	1	1				

Workers  $\frac{1}{2}$  pint Beer extra at 11 o'clock a.m., and at 4 o'clock p.m.  
 Laundry Women,  $\frac{1}{2}$  pint Beer, with Bread and Cheese at 11 o'clock a.m.

AVERAGE WEEKLY COST OF EACH PATIENT.

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	s.	d.
Provisions .....	5	8 $\frac{3}{4}$
House and other Expenses .....	2	0 $\frac{1}{2}$
Clothing .....	0	6
Salaries and Wages .....	3	0 $\frac{1}{2}$
Medicines and Extras for Sick ...	0	2
	<hr/>	
	11	5 $\frac{1}{2}$
	<hr/>	

Average Daily Number of Patients, 207.