

The report of the Committee of Visitors and Medical Superintendent of the Devon County Lunatic Asylum.

Contributors

Devon County Lunatic Asylum.
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DEVON EPIPHANY SESSIONS, 1858.



THE REPORT

OF

THE COMMITTEE OF VISITORS

AND

MEDICAL SUPERINTENDENT

OF

THE DEVON COUNTY LUNATIC

ASYLUM.

EXETER :

PRINTED BY WILLIAM POLLARD, NORTH STREET,

1858.

COMMITTEE OF VISITORS,

1858.

Chairman: SAMUEL TREHAWKE KEKEWICH, Esq.

EARL FORTESCUE.
VISCOUNT EBRINGTON, M. P.
THE HON. W. W. ADDINGTON.
SIR E. S. PRIDEAUX, BART.
SIR JOHN KENNAWAY, BART.
SIR J. T. B. DUCKWORTH, BART.
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AUGUSTUS STOWEY, Esq.
E. A. SANDERS, Esq.

T. E. DRAKE, EXETER.

Clerk to the Visitors.

REPORT OF THE COMMITTEE OF VISITORS.

Since the period of our last report, the state of the asylum has been in all respects most satisfactory, and no change has taken place in the general management of the institution to call for any particular notice.

The balance in hand on the maintenance account, is £1275 8s. 9d., and £1000 further of the original building debt has been paid off, which has been thus reduced to £29,500.

The number of patients admitted, during the past year, has been 154; the number discharged is 78, of whom 6 have been relieved, 3 not improved, and 69, *i.e.*, 35 males and 34 females recovered. The deaths have been 41, the number in the preceding year was 40; but as the number of patients has greatly increased since that time, the decrease in the rate of mortality has been $\frac{1}{2}$ per cent.

There are now in the asylum 555 patients, *viz.*, 245 males and 310 females. The greatest number in the asylum at any one period has been 569; the total number under treatment during the year, 673; and the average number of resident patients, 544.

In our last report we stated that we had determined on erecting a new building for females, capable of containing 30 patients, on a plan so arranged as to admit of being extended, without any change in the original design. In consequence of the great increase in the number of patients, we considered at our first monthly meeting the expediency of providing the further accommodation required, and as it appeared to us that this would be effected in the most desirable manner, by the extension of the building then in course of erection,

we lost no time in proceeding with the work, and entered into a contract at prices rather below those at which the first contract had been taken. We are able to state that the whole of the new detached building is very nearly completed; the first portion of it was commenced in August, 1856, and was opened for the reception of patients removed from Exmouth in the beginning of last November, a period rather later than we had expected, but on account of the damp state of the walls, it was not considered before that time safe for their reception. The second portion of the works was commenced in January, 1857, and it is hoped that the walls will be sufficiently dry to allow the removal of patients early in the spring, and thereby relieve the present crowded state of the wards.

This building has been arranged, on the recommendation of Dr. Bucknill, in a more domestic manner than has been usually followed in asylums. All the day-rooms are on the ground floor, and the dormitories are for the most part in the upper story; it was designed to accommodate 77 patients, 24 of whom will have separate sleeping rooms, but it will really accommodate 100, some parts originally intended for other purposes, being now appropriated for sleeping rooms; it contains a kitchen and other offices, together with all the requisites for a separate establishment. The actual cost has not been ascertained, but it is supposed that, including fittings, it will be about £3800, which is below the average expense of such buildings; the grant made for the purpose by the Court of Quarter Sessions, is £3,600 and the balance beyond this will be defrayed by the building and repair fund.

Before closing our report, we desire to express our opinion as to the advantages which the asylum will derive from a detached building, and the reasons for which we venture to hope that it will be adopted by similar institutions.

In our case it was the best mode of relieving the crowded state of the main building, but we feel that it will also greatly contribute to the comfort of the inmates, and aid in their restoration to health; it will not only be the means of preventing any temporary pressure from numbers, but also afford a change of air, scene, and residence, most beneficial to the convalescent patients. The large size of the day-rooms, and indeed the whole character and arrangement of the

building, tend to create in the minds of the patients, an impression of greater freedom and less restraint, than is likely to be felt in the long and narrow galleries usual in asylums; and, as we have before stated, in cases of epidemic sickness, the detached building might be used as an infirmary, and the risk of infection be greatly diminished.

We have resolved, after much consideration, to reduce the weekly payment for each patient, for the last quarter from Michaelmas last, from 9s to 8s 6d. But as this will leave only a small balance in hand, it will not be in our power to continue that reduction, unless the amounts becoming due from the Unions are punctually paid.

(Signed) **SAMUEL TREHAWKE KEKEWICH,**
Chairman.

TWELFTH ANNUAL REPORT
OF THE
MEDICAL SUPERINTENDENT
OF THE
DEVON COUNTY LUNATIC ASYLUM.

During the past year 154 patients have been admitted, of whom 71 were men, and 83 were women.

The number of patients at the commencement of the year, was 520. The average number resident has been 544 ; and the number resident at the present date is 555, of whom 245 are men, and 310 are women.

Forty-one patients have died ; of whom 23 were men and 18 were women.

Seventy-eight patients have been discharged, of whom 37 were men, and 41 were women.

The total number of patients under treatment during the year has been 674 ; of whom 303 were men, and 371 were women.

The mortality has been in the ratio of 7.53 per cent. to the average number resident, and in that of 6 per cent. to the total number under treatment. This favorable rate of mortality has, however, left in the asylum, a larger proportion than usual of patients suffering from hopeless forms of bodily disease, who may be expected to increase the rate of mortality during the present year. Eleven, or more than one-fourth of the patients who died,

were above seventy years of age. Eleven other patients died of that fatal form of disease, known as general paralysis; seven died of epilepsy; and thirty patients, or nearly three-fourths of the whole number died either of general paralysis, epilepsy, the decay of old age, the decay following apoplexy, or other forms of incurable disease, affecting the nervous system. Of the remaining eleven, six died of consumption, one of gangrene of the lungs, one of bronchitis, one of cancer of the stomach, one of cancer of the breast, and one from the effects of abstinence from food before she was admitted into the asylum.

Of the patients discharged, 69, of whom 35 were men and 34 were women, were discharged recovered, being in the ratio of 45 per cent. to the admissions. Of the remaining 9, six were discharged relieved, and three not improved.

The concurrence of mental alienation with bodily disease, renders many patients admissible to the infirmaries of this asylum for whom little can be done, except to alleviate the sufferings caused by various hopeless forms of bodily disease. The frequent admission of such cases necessarily augments the rate of mortality.

The general health of the patients has been excellent, notwithstanding the overcrowded state of the wards, during the past year. I attribute this to the dry and well-drained locality of the building, to scrupulous attention paid to the cleanliness of the wards, and to a sufficient dietary. Had any of these conditions of health been otherwise than favourable, the over-crowded state of the asylum could scarcely have existed, without exacting the usual penalty of dysentery or some other form of deteriorated hygiene.

Although in a crowded asylum, the care and treatment of the patients is necessarily conducted under great disadvantages, it appears preferable to incur this evil, at least for a time, than to exercise the power given by the statute of refusing the admission of patients. In those counties where the privilege of admission into the lunatic asylum has been suspended, the poor insane have accumulated in union-houses, and the provisions of the lunacy law for their care and treatment have not been carried into effect. It appears therefore to be of the utmost importance, to adopt the principle of never closing the gates of the county asylum to the admission of

patients. Various expedients may be, and in this asylum have been resorted to, for the relief of the over-crowded wards. When arrangements could be made, and the form of insanity justified the risk, some chronic patients have been sent to reside with their friends ; some few others have been placed to live with cottagers, in the neighbourhood of the asylum ; and above all, relief to the wards has been provided by the temporary Branch Asylum, which was established at Exmouth.

In default of sufficient asylum accommodation, there are certainly, great difficulties in providing expedients for the care and treatment even of chronic patients, selected as the most tranquil and easily manageable ; but it can scarcely admit of doubt, that it is better for the visitors of an asylum to incur the responsibility of providing such expedients than to close their wards against the admission of new cases. The selection of chronic patients, for the trial by the visitors of any reasonable modifications of care and treatment, can be made with full knowledge of the peculiarities of the patients ; but the refusal to admit new patients, must be made in ignorance of the urgency of their need for care and treatment. When insanity has rendered a person no longer master of his actions, care and treatment of some kind or other become an absolute necessity ; and that it should be provided for chronic patients by their legal guardians, who are thoroughly acquainted with their requirements, is so far preferable to any arrangement, under which the care and treatment of new and difficult cases is liable to be imposed upon persons who have no practical knowledge, and no legal authority to direct them, that it appears a subject of regret that the Asylums Act should empower the Visitors to close the county asylums. It would have been far better to have given the Visitors the fullest power to dispose, according to their discretion, of chronic cases, pending the provision of additional accommodation. For this purpose they should be empowered to rent or to lease suitable buildings upon any terms which may be approved by their judgment. The requirement of the Asylum Act, [sec. 33] that a lease of buildings for the use of an asylum shall be " for an absolute term of not less than sixty years " ought to be repealed.

It has been a source of great satisfaction to find that the parochial

officers, and the officers of poor-law unions, have in many instances shewn great kindness and indulgence to patients who have been discharged cured. To have done so, indeed, was not only humane, but in the highest degree politic. A poor person, who has recovered from an attack of insanity, is extremely sensitive to the influences which meet him on his return home. If distrust, want of employment, and penury, are the prominent features of the circumstances in which he finds himself on his discharge from the asylum, it can be no matter of surprise if his mental condition begins forthwith to deteriorate, and if after a brief interval it becomes needful to send him back to the asylum. Humanity and a careful economy of the poor's rate, alike indicate how desirable it is to prevent such an occurrence; and I am glad to be able to state, that many instances have come to my knowledge of discharged patients having received such moral encouragement and pecuniary assistance as have re-established them in useful and independent positions. The lunacy statute gives the Visitors of asylums the power of making an allowance to discharged patients not greater than the asylum maintenance charge. In some asylums funds supported by voluntary contributions have been established for the same purpose; and there can be no doubt, that assistance from one or other of these sources, may be of the utmost importance in establishing the convalescence of a patient, and in securing his social rehabilitation. But as a rule, a patient discharged from a pauper lunatic asylum must depend on being placed in circumstances adverse to a relapse, upon the judicious liberality of the poor-law officers, and upon the humanity and good-will of the inhabitants of his parish. It is only by this local power and support, that the labourer can obtain good work, the servant creditable service; and I am happy to be able to testify that the inhabitants of the county, and especially the parochial clergymen, have exercised towards the patients discharged from this institution, that Christian charity to the sorely afflicted, whose true reward is in the act itself, but which has also a tangible consequence in the prevention of relapses. Of the patients discharged as cured, during the past year, only two have been re-admitted—one on account of suicidal indications, and the other in consequence of angry altercation with relatives.

Relapses which do not appear to have resulted from any of the ordinary causes of insanity, are difficult to explain. They follow no known laws of pathological action, except in some instances, those of periodicity. A patient is discharged cured; he gets into steady employment, and remains in his perfect right mind for two or three years, after which time, and without the slightest apparent cause, he becomes affected with the same symptoms as those from which he had previously suffered. In other instances the interval is shorter. Several patients in this asylum go through successive periods of sanity and insanity, as regular as the stages of an intermitting fever. In some there are three periods: a few weeks or months of maniacal excitement, followed by a period of sound mind, to which succeeds a shorter period of depression, which again is followed by excitement. It would be cruel to such patients and unsafe to the public to discharge them during the brief period of their convalescence, for experience has fully proved that the interval of sanity is apparent only, that the mind is never sound enough to bear the strain of the world's rough usage, and that any excitement, or even the removal of all control, is sufficient to induce the development of active symptoms.

During the past year the ordinary business of the asylum has not been marked by any occurrences to vary the regular routine. The year has been a quiet and successful one, and its occurrences present no salient points of sufficient interest to call for remark in this place. The Branch Asylum at Exmouth was conducted so quietly and unobtrusively, that the leading inhabitants of the town made known their confidence and satisfaction in the most cordial and emphatic manner; and the return of the patients to the parent institution was not unattended by the expression of sincere regret. When the new building was sufficiently advanced, the patients at Exmouth were removed to it. The arrangements of the latter are most commodious, and the building appears to present the long sought desideratum of asylum accommodation for the insane poor at the same time economical and efficient.

All which is respectfully presented.

JOHN CHARLES BUCKNILL,

January 1st, 1858.

PATIENTS ADMITTED DURING THE YEAR, 1857.

TABLE No. I.

Forms of Disease on Admission.

Mania, recent	66	Idiocy	5
„ chronic	18	Imbecility	2
Monomania	1	General Paralysis	10
Melancholia	39	Epilepsy	7
Dementia	4		
„ with Paralysis	2		
		Total	154

TABLE No. II.

Age on Admission.

Under 10 years	2	From 60 to 70	10
From 10 to 20	6	„ 70 „ 80	4
„ 20 „ 30	29	Above 80	2
„ 30 „ 40	30	Unknown	3
„ 40 „ 50	43		
„ 50 „ 60	25		
		Total	154

TABLE No. III.

Assigned Cause of Illness in Patients Admitted.

Anxiety and Grief	1	Grief at Death of Son	1
Anxiety	6	„ „ Sister	1
Blows on Head	1	Hereditary	11
Climateric period	1	Hysteria	1
Deafness	1	Intemperance	8
Disease of Brain	1	Old Age	1
Domestic Afflictions	4	Paralysis	4
Disappointed Affections	3	Puerperal Fever	1
Disappointment	2	Pregnancy	2
Epilepsy	7	Religious Fanaticism	4
Erysipelas	1	Reduced Circumstances	6
Fevers	2	Sickness	1
Falls	4	Sun Stroke	1
Frights	6	Unknown or no cause assigned	70
Grief at Death of Mistress	1		
„ „ Parents	1	Total	154

TABLE No. IV.

Duration of Attacks previous to Admission.

Under 2 months	69	Upwards of 10 years	5
From 2 to 6 months	30	Congenital	6
„ 6 „ 12 „	8	Unknown	8
„ 1 „ 3 years	18		
„ 3 „ 10 „	10		
		Total	154

TABLE No. VII.
Discharges during the Year, 1857.

No. in Admission Book.	Age on Admission	Sex.	Length of Time Insane on Admission.	Residence in Asylum in days	Form of Disease.
1078	32	M	Unknown	1111	Melancholia with Imbecility
1504	53	M	3 months	249	Melancholia
1341	32	M	Unknown	680	Dementia
1517	43	M	Several years	235	Ditto
1530	37	F	2 months	230	Mania
1452	51	F	3 months	400	Ditto
1560	41	M	4 days	136	Mania
1590	35	M	Several years	69	Chronic Mania
1606	38	M	1 week	40	Mania
1545	52	F	3 months	208	Melancholia
1598	32	F	2 weeks	83	Mania
1413	31	M	Unknown	534	Melancholia
1581	40	M	10 years	115	Mania
1288	60	F	Unknown	863	Acute Melancholia
1631	40	F	2 months	55	Mania
1564	67	F	1 year	188	Melancholia
1627	64	M	4 days	62	Ditto
1619	32	M	1 month	84	Mania
1525	35	M	3 weeks	311	Ditto
1580	24	F	7 months	156	Melancholia
1615	40	F	2 weeks	86	Mania
1445	28	M	4 days	491	Ditto
1519	74	F	3 years	337	Dementia
1279	18	F	Unknown	548	Ditto
655	42	F	Ditto	2844	Melancholia
1600	65	M	3 weeks	132	Mania
1276	56	F	Unknown	891	Chronic Mania
1451	52	F	5 months	493	Melancholia
1628	45	F	4 days	444	Mania
1594	49	F	1 week	523	Melancholia
1546	24	M	1 month	640	Dementia
1461	37	M	8 months	468	Melancholia
228	58	F	Unknown	4118	Dementia
1558	25	F	6 weeks	255	Mania
1657	38	F	2 years	404	Mania
1465	56	M	18 months	485	Melancholia
1454	55	M	1 month	516	Ditto
1633	39	M	1 week	94	Mania
1480	26	M	3 months	451	Mania and Epilepsy
1668	26	M	1 week	48	Mania
1407	20	F	Unknown	710	Mania
1612	41	M	1 year	202	Melancholia
1677	73	M	2 years	37	Mania
1354		F	Unknown	836	Chronic Mania

No. in Admission Book.	Age on Admission	Sex.	Length of Time Insane on Admission.	Residence in Asylum in days	Form of Disease.
1345	36	M	Unknown	859	Chronic Mania
1567	20	F	3 months	301	Mania
1589	74	F	6 months	399	Dementia
22		M	Unknown	4420	Ditto
1604	29	F	Unknown	612	Ditto
1559	27	F	2 weeks	262	Mania
1547	63	M	2 weeks	394	Ditto
1760	26	M	1 week	54	Ditto
1388	34	M	Unknown	1169	Chronic Mania
1636	21	M	4 months	186	Mania
1684	55	M	1 month	119	Melancholia
1641	43	F	6 months	203	Ditto
1640	40	F	2 weeks	204	Ditto
1709	49	F	1 week	79	Monomania
1696	25	M	3 weeks	93	Mania
1638	28	F	2 weeks	208	Ditto
1596	44	F	1 year	321	Melancholia
1664	52	F	2 weeks	184	Mania
1659	28	F	1 month	156	Ditto
1727	47	F	1 week	64	Ditto
1701	55	M	2 months	109	Melancholia
1716	38	M	2 months	84	Ditto
1614	55	F	2 years	289	Ditto
1538	35	M	10 months	212	Mania
1704	25	F	6 months	226	Melancholia
1717	40	M	1 month	247	Ditto
1741	46	F	1 month	311	Ditto
1754	37	F	1 year	43	Mania
1743	60	F	1 month	31	Melancholia
1651	18	M	Unknown	241	Imbecility
1724	52	M	2 months	106	Mania
1725	37	F	4 months	104	Ditto
1667	57	F	6 weeks	222	Ditto
1178	39	F	Unknown	1086	Melancholia

TABLE No. VIII.
Obituary for the Year 1857.

No. in Admsn. Book	Age at death	Residence in Asylum in days.	Form of Mental Disease when admitted.	Apparent Cause of Death.
1556	73	116	Melancholia	Gradual Decay after Apoplexy
1534	41	195	Melancholia	General Paralysis
1439	87	415	Dementia	General Decay
1537	43	192	General Paralysis	General Paralysis
1557	18	131	Mania	Phthisis
1444	66	417	Dementia	Atrophy of Brain
1176	72	754	Ditto	Ditto
1396	36	585	Mania	Apoplexy
1232	71	982	Chronic Mania	General Decay
1593	78	125	Dementia	Cancer of Stomach
251	29	4054	Idiocy	Epilepsy
528	77	3285	Mania	Bronchitis
1330	34	811	Mania	General Paralysis
1367	76	720	Dementia	Decay of old age
1469	54	451	Mania	Exhaustion from Mania
1617	49	120	General Paralysis	General Paralysis
534	43	3282	Chronic Mania	Phthisis
1646	43	58	Mania	General Paralysis
1680	47	9	Melancholia	Exhaustion
1630	45	140	General Paralysis	General Paralysis
1316	34	914	Dementia	Phthisis
1634	66	119	Mania	Softening of Brain
625	25	3340	Mania	Epilepsy
1678	36	13	Mania	Phthisis
1459	45	578	General Paralysis	General Paralysis
1672	86	82	Chronic Mania	Epilepsy
1579	66	284	General Paralysis	General Paralysis
1498	26	1215	Mania	Epilepsy
1620	49	205	Dementia	Ditto
1587	50	273	Ditto	Gangrene of Lungs
1460	31	611	Mania & Epilepsy	Phthisis
1735	53	7	Mania	Exhaustion from Abstinence before Admission
522	27	3362	Imbecility	Epilepsy
526	71	561	Mania	Carcinoma of Breast
1482	40	237	General Paralysis	General Paralysis
1268	32	1117	Melancholia	Phthisis
1685	70	168	Dementia	Epilepsy
1292	34	1435	Melancholia	Ditto
1623	49	310	General Paralysis	General Paralysis
1713	86	135	Mania	Apoplexy
1660	40	239	General Paralysis	General Paralysis

County Treasurer's Account, from Jan. 1st to Dec. 31st, 1857.

DR.	£	s.	d.	CR.	£	s.	d.
To Balance due from Treasurer on last Account	1179	9	11	By Interest Paid	1207	6	6
To received Two Rates, including the Stoke Damerel Half Rate	3772	15	8	Principal paid off (leaving £29,500 due)	1000	0	0
				Paid on account of the New Buildings	2100	0	0
				Balance due from the Treasurer	644	19	1
	<u>£4952</u>	<u>5</u>	<u>7</u>		<u>£4952</u>	<u>5</u>	<u>7</u>

EDMUND WM. PAUL, *Treasurer for the County of Devon.*

Balance Sheet.

General Statement of Receipts and Payments of the Devon County Lunatic Asylum, for the Year 1857.

RECEIPTS.	£	s.	d.	PAYMENTS.	£	s.	d.
For County and Borough Patients	13916	19	0	Balance on 31st Dec. 1856	362	8	6
From Sale of Mats, Matting, Rags, Potatoes, &c.	69	2	4	For Salaries and Wages	2033	7	0
Of Dr. Bucknill, 1½ Year's Rent of Field (less Income Tax)	26	9	6	Provisions	6009	6	7
				Necessaries—Coals, Ironmongery, Utensils, &c.	1219	4	2
				Clothing, Bedding, Leather, &c.	1364	1	6
				Surgery and Dispensary, including Wines and Spirits	133	12	4
				Maintenance of Out-door Patients	124	2	0
				Funeral Expenses	14	5	10
				Garden, Farm, and Piggery	254	3	1
				Coir and Rope	114	1	11
				Advertising, Printing, Stationery, Books, Stamps, &c.	122	8	2
				Rates, Taxes, and Tithe Paid to Building and Repair Account	824	10	7
				Miscellaneous payments, not included under the above heads	121	6	7
				Balance in the hands of the Treasurer	1275	8	9
	<u>£14012</u>	<u>10</u>	<u>10</u>		<u>£14012</u>	<u>10</u>	<u>10</u>

Building and Repair Account.

	£	s.	d.		£	s.	d.
Balance in hand on the 31st Dec. 1856	1339	17	2	Paid Manley on Account of his Contract for New Buildings	2350	0	0
Received by Transfer from Establishment Account	825	10	6	Paid Bills for Repairs and Labour of Artizans	875	6	2
Of County Treasurer	2100	0	0	Balance in Treasurer's hands	1040	1	6
	<u>£4265</u>	<u>7</u>	<u>8</u>		<u>£4265</u>	<u>7</u>	<u>8</u>

WILLIAM MORGAN, *Clerk and Steward.*



