

Report on the Royal Lunatic Asylum of Montrose for 1864 : instituted 1782.

Contributors

Royal Lunatic Asylum, Infirmary, and Dispensary of Montrose.
Walker, David.
Howden, James C.

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REPORT

ON THE

ROYAL LUNATIC ASYLUM

OF MONTROSE,

FOR

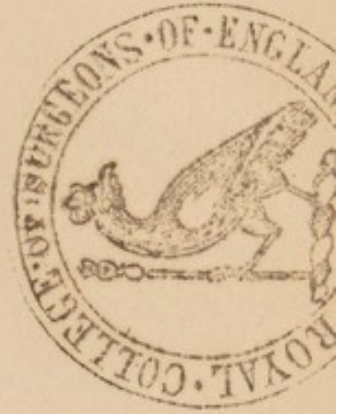
1864.


INSTITUTED 1782.

MONTROSE:

PRINTED AT THE STANDARD OFFICE.

1864.





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LIST OF DIRECTORS OF THE ROYAL LUNATIC ASYLUM &c.

J U N E, 1 8 6 4.

- The PROVOST and ELDEST BAILIE of MONTROSE
 The FIRST and SECOND MINISTERS of the PARISH of MONTROSE.
- 5 PATRICK ARKLEY, Esq. of Dunninald.
 W. MACDONALD MACDONALD, Esq. of Rossie.
 The Right Hon. the EARL of SOUTHESK.
 Sir JAMES CAMPBELL, of Stracathro.
 ALEXANDER PORTEOUS, Esq. of Lauriston.
- 10 THOMAS RENNY TAILYOUR, Esq. of Borrowfield.
 JOHN DUNCAN, Esq. of Sunnyside and Parkhill.
 DAVID LYALL, Esq. of Gallery.
 THOMAS MACPHERSON GRANT, Esq. of Craigo.
 JAMES FITZMAURICE SCOTT, Esq. of Commieston.
- 15 HERCULES SCOTT, Esq. of Brotherton.
 The Rev. ROBERT MITCHELL, Minister, Craig.
 " THOMAS MACINTOSH, do. St Cyrus.
 " JAMES HAY, do. Lunan.
 " WILLIAM REID, do. Maryton.
- 20 " WILLIAM NIXON, do. Free St. John's, Montrose.
 " PATRICK CUSHNIE, do. St. Mary's Chapel, do.
 " JOHN LISTER, do. Free St. George's do.
 " J. A. SELLAR, do. St. Mary's Chapel, do.
 " JOSHUA R. JAGOE, do. St Peter's, Montrose.
- 25 Messrs WILLIAM JAMESON, Montrose.
 ARCHIBALD FOOTE, do.
 Captain ARCHD. MACNEILL, do.
 Messrs ROBERT BURNES, do.
 DAVID MACKIE, do.
- 30 DAVID WALKER, do.
 THOMAS BARCLAY, do.
 ROBERT WALKER, do.
 JAMES SMITH, R.N., do.
 JAMES M. PATON, do.
- 35 FRANCIS B. PATON, do.
 ROBERT SMART, do.
 THOMAS NAPIER, do.
 C. H. MILLAR, do.
 DAVID MITCHELL, do.
- 40 CHARLES BIRNIE, do.
 FRANCIS ABERDEIN, do.
 ROBERT COOKE, do.
 JOHN GUTHRIE, do.
 JAMES SAVEGE, do.
- 45 GEORGE C. MYERS, do.
 THOMAS B. PATON, do.
 DAVID K. MIDDLETON, do.
 ROBERT HECTOR, do.
- 49 EDWARD MILLAR, do.

ANNUAL GENERAL MEETING.....2nd TUESDAY OF JUNE.

MONTHLY MEETING.....1st TUESDAY OF EACH MONTH,

AT TWELVE O'CLOCK NOON.

HOUSE COMMITTEE OF ASYLUM.

Messrs DAVID MACKIE.
DAVID WALKER.
JOHN GUTHRIE.
FRANCIS B. PATON.
ROBERT HECTOR.

MR. WALKER, *Convener.*

LIST OF ASYLUM OFFICERS.

JAMES C. HOWDEN, M.D.....GENERAL MEDICAL SUPERINTENDENT.
DAVID JOHNSTON, M.D.....CONSULTING PHYSICIAN.
REV. WILLIAM MORTIMER, M.A....CHAPLAIN.
JAMES NIDDRIESTEWARD.

AT NEW ASYLUM.

ADAM ADDISON, L.R.C.P & S.....RESIDENT MEDICAL OFFICER.
MRS. WRIGHTHOUSEKEEPER.
MISS BURNESHEAD FEMALE ATTENDANT.
JAMES WATSON.....HEAD MALE ATTENDANT.

AT OLD ASYLUM.

WILLIAM DEAN FAIRLESS, M.D. ...MEDICAL SUPERINTENDENT.
MISS ROSS.....MATRON.

GEORGE C. CHALMERS, Banker,
TREASURER.

ADAM BURNES,
SECRETARY.

BALANCE ACCOUNT
OF THE
MONTROSE ROYAL LUNATIC ASYLUM.

<i>Drs.</i>					
Old Asylum Buildings and Furniture,	...	...	...	...	£2393 15 7
New Asylum, Sunnyside,	...	...	...	...	27,445 4 9
Do., Furniture,	...	...	...	...	2535 3 6
Carriages and Horses,	...	...	...	...	97 10 0
Medical Superintendent's House,	...	...	...	...	1250 4 3
Farm Account for Stock,	...	...	...	...	446 0 0
Outstanding Boards,	...	...	...	...	207 1 11
The Brechin Gas Company,	...	...	...	...	160 0 0
Seats in Parish Church	...	...	...	...	29 10 0
Sundries on hand,	...	...	...	...	942 12 3
Cash—Balance,	...	...	...	...	10 1 7
					£35,517 3 10

<i>Crs.</i>					
Sundry Creditors for Money Lent,	...	...	...	...	£12,400 0 0
The National Bank of Scotland,	...	...	...	...	7204 4 8
Patients' Work and Recreation Fund,	...	...	...	...	220 0 0
Stock Account,	...	...	...	...	15,692 19 2
					£35,517 3 10

ASYLUM.

INCOME for the Year ending June 1, 1864,	...	...	...	...	£13,171 8 2
EXPENDITURE do. do.,	...	...	...	...	12,848 10 3
Balance,	...	...	...	...	£322 17 11

ROYAL LUNATIC ASYLUM.

REPORT OF THE HOUSE COMMITTEE.

THE Committee, while referring to the Report of the Medical Superintendent for the usual statistical tables and details, have to report that the present number of inmates in both houses is 489; that last year it was 522, and that therefore the decrease on the year is 33. The highest number attained at any one time was 553. The decrease, which has only just taken place, has arisen from the transfer of a number of Perth and Inverness-shire pauper patients to their own district asylums. Farther withdrawals, from the opening of other district asylums, will follow; but your Committee are not prepared to name a probable period for their taking place.

Since last year the enclosure wall of the male airing ground, on the west end of the house has been completed, and the Asylum is now provided with airing grounds for male and female patients on opposite ends of the house, which leave nothing to be desired. The other works in progress last year—viz., the carpenter's shop, shed accommodation, sewage pipes, and pumping power in connection therewith—have also been completed, and a new and commodious steading for the farm erected. First painting and papering have been carried on to a large extent during the year, and little in this line now remains to be done, except the principal staircase and lobby, which must both be painted this year.

The farm, of which the draining has been completed, has continued to afford ample employment to all the patients capable of outdoor work; and a large proportion of the milk required at Sunnyside has been supplied by the cows kept on it. The total quantity of milk supplied by the farm during the year has been 8189 gallons, which, at the lowest contract price of $10\frac{1}{4}$ d, amounts to the sum of £347 12s. For some time 14 cows were kept on the farm, but the present number is only 11: they will, however, be shortly brought up again to the higher number.

The Committee have to notice a fire which broke out in a store-room of the Sunnyside Asylum in January last, at midnight. It was discovered by the night attendant in making his rounds, and at first caused great alarm; but by means of the efficient fire hose of the establishment, an abundant supply of water, and the prompt and judicious measures taken by Dr Howden and his officers, it was speedily got under, and with comparatively little damage, the amount of which was subsequently made good by the Sun Fire Office. Your Committee, assisted by Mr Burnes, made a searching investigation into the origin of the fire, but they entirely failed in tracing it. Your Committee, however, hope that, from the additional precautionary measures since adopted, a recurrence of such an accident will not take place.

Your Committee have given attention to various suggestions made by the inspecting members of the Board of Lunacy for the improvement of the Asylum; and, in particular, they have to state that, in order to secure the services of a more permanent and efficient staff of sub-officers, they have considered it expedient to increase the scale of remuneration both of male and female attendants. They have visited Sunnyside weekly during the year, and they have to report favourably on the condition of the house, and to record generally their satisfaction with the staff and officers. Confirmatory of their report on the state of the house are the minutes of official and periodical inspection made by the medical members of the Board of Lunacy, of which the following are the summaries:—Sir James Cox, on the 23d September, 1863, writes—“The Commissioner has rarely made an inspection which has given him so deep an impression of earnest and substantial progress.” And Dr Browne, on the 5th April last, writes—“The Commissioner willingly adopts the words of his colleague in recording his deep sense

of the improvements which have taken place in this Asylum, and of the judicious manner in which it is conducted.”

The Committee beg to return their grateful thanks for the following entertainments, &c., kindly given in the Asylum in the course of last year :—To the Militia Band for an instrumental concert; Drechsler-Hamilton Family for a concert; ladies for contributions to a Christmas tree; Rev. Mr Burns for a lecture; Rev. Mr Cumming for a reading; Montrose Musical Association for a concert; Montrose Harmonic Union for a concert; members of the Old Church choir for a concert; and to several benevolent ladies for various acts of kindness.

(Signed)

DAVID WALKER, *Convener.*

MEDICAL SUPERINTENDENT'S REPORT,

FOR THE YEAR 1863-64.

THE statistics of the last two years are in some respects much alike. The total number treated this year was 685, while last year it was 683. The average number daily resident was 532.878 this year, and 529.874 last. The admissions were 157 this and 156 last year. Again, from Forfarshire there were received this year 73—last year 72; and from Kincardineshire 11 each year. The proportion of those recovered, improved, and dead are also nearly the same. The number removed uncured is, however, much greater than formerly; for, while last year it was only 19, it was this year 65; and whereas on 31st May, 1863, there remained 521, there were on 31st May, 1864, only 489 inmates.

The admissions have been more numerous than was anticipated, owing to two unforeseen circumstances. Seventeen patients were sent from Aberdeen, who could not be received into the Asylum there, owing to the breaking out of an epidemic of small pox necessitating the refusal of new cases. Again, 20 patients were brought from Murray's Asylum at Perth but a few months previous to the opening of the new District Asylum at Murthly, to which they have since been transferred.

Liability to insanity, as to many other diseases, increases with age; and though the number admitted between the ages of 30 and 40 is greater than at any other decennial period, this arises from the fact that the number of persons alive in the general population at each succeeding period is smaller; and the proportion of 4 between the ages of 70 and 90 is perhaps higher to the number of persons alive at that age than is 36 to those between 30 and 40.

The recoveries this year bear a proportion of 33.757 per cent. to the admissions; 44 had been under treatment less than two years, and eight above that period—the longest residence of a patient cured being five years.

Advantage has been taken to a considerable extent of the clause in the Amendment Lunacy Act, authorising the liberation of patients on trial. Thirty-four were thus removed from the Asylum, of whom eighteen ultimately recovered, three were finally discharged as improved, five as incurable, two were re-admitted, having relapsed, and six still remain on probation.

The opening of the District Asylum for Perth and Inverness in May, and the consequent transfer of most of the patients belonging to Perth, Inverness, Nairn, Ross and Cromarty, and Sutherlands, accounts for the large list of incurable patients removed, as well as for the rapid diminution of the population of the Montrose Asylum towards the end of May. Of those removed, are two under the head of escapes. One of these reached his home in the north of Scotland, and the parish authorities declined to allow him to be returned to the Asylum; the other, who at the time of his escape was to be discharged as recovered, unfortunately died before he reached home, from the effects of injuries to his feet, contracted during his retreat from the Asylum. A regular proportion of escapes must always be looked for as inevitable in Asylum statistics; indeed, those best conversant with the government of such institutions are well aware that there are few worse signs of an Asylum than to find the column for escapes blank, because it implies an amount of confinement and restriction of liberty incompatible with sound moral treatment. This being so, it is unfortunate that in the Scotch Lunacy Act, escapes are altogether ignored. In the English Act a fortnight is the period fixed during which the Asylum authorities have power to recover escaped patients; but in Scotland it is uncertain whether a superintendent is acting legally in capturing an escaped patient at all, and, if he is, he may certainly do it after a lapse of twenty years as lawfully as after twenty minutes have elapsed. Experience has taught me that unless a patient is recovered within an hour or two of his escape, there is little or no hope of getting him until he reaches home, from the fact that the police, excepting in the neighbourhood of the Asylum, as a rule decline to lend any assistance. Four years ago an instance occurred illustrating this. A patient who was detained under an order of the Secretary of State as a criminal lunatic, escaped; intimation was given to the police authorities of Forfar, Kincardine, Perth, Aberdeen, &c.—a description being given of his person, which could be very easily recognised. A fortnight

transpired without any intelligence being obtained, when one night the Asylum Laundry was broken into. The police now took up the matter actively, and tracked the thief to Arbroath, and found him there to be no less a person than our escaped patient, who, since his leaving, had been regularly employed as a scavenger by the police of that town.

Several cases of injudicious removals have as usual occurred. In one instance a violent maniac was taken home, in spite of my remonstrances, and had to be replaced in the Asylum next morning, after having shown abundant evidence to his friends of his destructive tendencies.

The mortality has this year been low. The deaths bear a proportion of 9.380 to the average daily number of inmates and of 7.299 to the total number treated. This fact is the more gratifying that the season has been a peculiarly unhealthy one, more sickness having prevailed than in any year since I have superintended the Institution. During the spring months in particular, many cases of serious illness occurred; and an epidemic of an unusual type of pneumonia appeared chiefly on the male side of the New Asylum. Twelve patients were affected with it, all of whom, save two, recovered, under a liberal use of stimulants.

Fourteen of the deaths resulted from disease of the nervous system, twenty-four from diseases of the lungs, and six from abdominal affections. Two patients died from suffocation by food; in one case the substance was bread, and in the other a piece of butcher meat was found impacted in the pharynx. Deaths from this cause are of very frequent occurrence in asylums, where so large a proportion of the inmates are paralytic, in whom the powers of mastication and deglutition are greatly impaired. I have had frequent opportunities of making *post mortem* examinations under such circumstances, from which, as well as from cases which recovered, I have reason to doubt if suffocation is sometimes not an accidental concomitant of other diseases, instead of the real cause of death. My reasons for forming this opinion are, that not unfrequently other pathological conditions are found sufficient to account for the death, and that in some cases, even after the food has been removed from the pharynx in time to save the patient from suffocation, he will continue in a very precarious state for days or weeks after the accident. It will be easily understood that if a man takes a paralytic or epileptic attack while he is eating, part of the food

may remain in his throat, and yet the real cause of death be the paralysis or epilepsy ; or that, on the other hand, he may be actually choked during an epileptic or paralytic seizure. Whatever be the nature of the food, therefore, we must always look for a certain proportion of deaths actually or apparently from suffocation ; but it undoubtedly happens that there are what may be called preventable cases, in which, had the patient not been allowed to bolt large pieces of meat, the accident had not occurred, or when, if medical aid had been at hand, the patient's life might have been saved. Three precautions are adopted for such emergencies, viz.—The special supervision of the attendants during meal hours, the presence of the medical officer in the house at those times, and the administration of food in such a form as is least likely to cause choking.

One half of the deaths took place in patients who had been less than two years in the house—a fact which corroborates a statement made last year, viz., that insanity is fatal to life in its early stages, and that the proportion of deaths is therefore always highest when the number of admissions or recent cases are greatest. The longest period of residence of those who died was twenty-nine years, two having been for that length of time in the house. No deaths occurred in persons above 80, but five died who were between 70 and 80 years.

Several patients have been boarded from time to time with the servants of the Institution, who are provided with cottages on the premises. For certain cases, especially convalescents and those of an intermittent character, this sort of accommodation is very useful ; but for all lunatics who require regular supervision and anything like treatment, whether it be therapeutic or moral, there is, I believe, no position more adapted to their wants than the wards of an asylum, especially if it be of such a size as to afford variety in occupation and amusement. That there are many patients discontented in asylums is undoubtedly the case ; that there are instances of harsh usage by attendants, despite the strictest supervision, is also true ; but the discontent is most frequently the result of a morbid mental condition, and not of the restraint ; and the risk of cruelty must necessarily increase, as the means of detecting and punishing it decrease. But to the great majority of patients a well-arranged and conducted asylum is really an asylum, and a home, in the strictest sense of the word. I have often found that patients preferred the asylum to boarding in a private

family. This holds good especially with the better classes : the constant recurrence of recreations and occupations which a large institution necessarily affords beguile the weary hours, and they experience a feeling of independence which more than counter-balances the unquestionably disagreeable concomitants of their situation. The modes of distribution of the insane poor in Scotland at present are so various in different counties that it is difficult to draw any definite conclusions from statistical tables as to the respective cost of maintenance in asylums, lunatic wards, and private houses. It is necessary of course not merely to look at the board charged for patients in an asylum, and contrast that with the cost of their maintenance in the lunatic wards of a poor-house or in private dwellings, but to take the average charge for pauper lunatics in a given district, and compare it with another in which the mode of distribution is different. In my last report I stated my conviction that lunatic wards in poor-houses were objectionable, in an economical point of view. The statistics given in the sixth annual report of the Board of Lunacy, just issued, confirm these views. In Lanark it appears that while 292 pauper lunatics are in asylums, 345 are in poor-houses; and that in Forfarshire 347 are in asylums, and only 3 in poor-houses. Yet in the former county the average daily cost of maintenance of the lunatics, whether in asylums, poor-houses, or private dwellings, is 1s 1 $\frac{3}{4}$ d; whereas in Forfarshire it is only 1s 0 $\frac{3}{4}$ d. Again, Dumfries, Elgin, Kirkcudbright, Caithness, which have no patients in poor-houses, pay respectively 11 $\frac{1}{4}$ d, 10 $\frac{1}{4}$ d, 11 $\frac{1}{2}$ d, and 10d; while Edinburgh, Lanark, Renfrew, Aberdeen, and Ayr, which enjoy the privilege of poor-house lunatic wards to a greater extent than any districts in Scotland, pay severally 1s 1 $\frac{1}{2}$ d, 1s 1 $\frac{3}{4}$ d, 1s 1 $\frac{1}{4}$ d, 1s 1d, and 1s 1d. In fact, it appears that the cost of maintenance for pauper lunatics increases in proportion to the extent of accommodation provided for them in poor-houses.

In the prospect of the parishes of Dundee and Liff and Benvie opening the poor-house lunatic wards for the reception of quiet and tractable patients, it will become the duty of the Directors to fix a rate of board for those that remain in the Asylum, different from that charged for parishes who send all their patients to it. The District Lunacy Board of Argyll have fixed their asylum rates at sixpence a day higher for such parishes as dispose part of their lunatics in other establish-

ments. The Commissioners of Lunacy, in their last annual report, remark:—"The object of the District Board in drawing this distinction was, we understand, to check the practice of parishes sending only their more expensive and troublesome patients to the Asylum, and providing for the quiet and tractable in lunatic wards of poor-houses. It is evident that were this distinction not made, parishes following the latter course would inflict an injustice on those which send the whole of their patients to the Asylum, by getting their destructive and more expensive cases treated at the same rate as that charged to other parishes for good and bad alike."

The principles of treatment adopted during the past year have been the same as those formerly advocated. Therapeutically—narcotics, the warm bath, tonics, and stimulants, were the most efficacious; morally—occupation, amusement, special supervision, and discipline, combined with kindness and forbearance. In no case has mechanical restraint been employed. On six occasions only has seclusion for a short period been found necessary in the Old Asylum; while in the New Asylum, where the recent and acute cases are treated, but where the means for classification, special supervision, and employment are more extensive, this expedient has never once been resorted to. The acquisition of the farm of Hillhead, by affording extended opportunities for out-door labour, cannot be too highly appreciated. Many patients who used to be regarded as the most violent and dangerous, have become quiet and regular out-door workers; and imbeciles and demented have been converted into useful members of our society.

The amusements include twelve pic-nics, twelve concerts, seven dramatic entertainments, six lectures, besides the Christmas Tree and festival, regular weekly balls, parties to amusements in town, weekly classes for singing and dancing, the meetings of the Debating Club during the winter, and cricket and other athletic games in summer.

We have been placed under obligations to many parties unconnected with the Asylum for their liberal services in catering to the amusement and edification of the patients by means of concerts, lectures, &c.

In consequence of a liberal arrangement made by the Scottish North-Eastern Railway Company, I was enabled to send pic-nic parties to places of interest at a distance, such as Dunnottar and Glamis, at a very moderate charge.

The engagement of a person who combines the functions of messenger, precentor, teacher of music, and conductor of concerts, theatricals, &c., has proved satisfactory ; and those of the Directors who have been present at our dramatic entertainments will, I think, allow that we have no reason to be ashamed of our *corps dramatique*. The Christmas pantomime, "The King of Cannibal Islands," organised by Dr Addison, was especially successful in affording enjoyment to the patients.

The chaplain's services have been regularly and faithfully performed, and continue to be a source of comfort and consolation to those who are necessarily prevented from joining in the ordinances in public places of worship.

As an experiment, a harmonium was used for a time to conduct the psalmody in the chapel, with results so satisfactory as to convince me that the acquisition of such an instrument would greatly enhance the devotional exercises, and be the means on other occasions of furnishing enjoyment to the patients.

In the Old Asylum, in addition to the chaplain's services, divine worship has been conducted once a-day on Sabbath by Dr Fairless, who has also given frequent readings during the week to patients under his charge.

Miss Brand, the matron of the Old House, was, in April last, appointed to the charge of the female department of the New Perth District Asylum, and was succeeded by Miss Ross, who had been for some time in the service of the Institution, and in whose efficiency I have the greatest confidence. I gladly express my satisfaction with the manner in which the officers under me have performed their duties, and my gratitude to the House Committee for their hearty and active co-operation in carrying out all schemes for the welfare of the patients.

That the condition of the Institution is satisfactory may be judged from the reports of the inspections of the Commissioners in Lunacy, made since last annual meeting. The Commissioners state that the "condition of the Montrose Asylum is one of progressive improvement"—a condition which there is little doubt it will maintain, while the Directors persevere in that liberal and enlightened system of management which they have hitherto adopted.

JAMES C. HOWDEN.

TABLES.

Table I.—Shewing the General Results of the Year.

	Males.		Females.		Total.
In Asylum at 31st May, 1863,	225	...	296	...	521
On Trial at 31st May, 1863,	3	...	4	...	7
Admitted,	67	...	90	...	157
<hr style="width: 100%;"/>					
Total under Treatment during the year, ...	295	...	390	...	685
Discharged and Died—					
	Males.	Females.	Total.		
Recovered,	18	...	35	...	53
Improved,	8	...	12	...	20
Uncured,	35	...	30	...	65
On Trial,	3	...	3	...	6
Escaped,	2	...	0	...	2
Died,	22	...	28	...	50
Total Discharged and Died during the year,	88	...	108	...	196
<hr style="width: 100%;"/>					
Total Remaining in Asylum on 31st May 1864, ...	207	...	282	...	489
Of whom are in the New Asylum,	166	...	164	...	330
" " Old Asylum,	41	...	118	...	159

*Table II.—Shewing the Daily Average Number of Patients,
For each Month and for the Year.*

Period.		Males.		Females.		Total.
June, 1863		223.466	...	299.533	...	522.999
July, "		226.193	...	302.483	...	528.676
August, "		227.386	...	298.838	...	526.224
September, "		228.966	...	297.700	...	526.666
October, "		230.676	...	300.999	...	531.675
November, "		233.233	...	299.033	...	532.266
December, "		234.548	...	300.354	...	534.902
January, 1864		235.322	...	303.353	...	538.675
February, "		232.103	...	312.551	...	544.654
March, "		233.645	...	305.224	...	538.869
April, "		232.166	...	305.399	...	537.565
May, "		231.128	...	300.257	...	531.385
<hr style="width: 100%;"/>						
For whole year, 1863-64,		230.736	...	302.142	...	532.878

Table III.—Shewing Condition as to Marriage.

	Males.		Females.		Total.
I. Single	39	...	51	...	90
II. Married	24	...	22	...	46
III. Widowed.....	4	...	17	...	21
	—		—		—
	67	...	90	...	157

Table IV.—Shewing the period of Residence of those Recovered and those Dead.

	RECOVERED.			...	DEAD.		
	Males.	Femal.	Total.		Males.	Femal.	Total.
Under 4 weeks	0	0	0	...	2	1	3
" 2 months	1	0	1	...	1	0	1
" 3 "	0	6	6	...	0	1	1
" 4 "	2	2	4	...	0	2	2
" 5 "	2	2	4	...	1	1	2
" 6 "	2	3	5	...	2	0	2
" 7 "	0	1	1	...	1	2	3
" 8 "	2	3	5	...	0	0	0
" 9 "	0	4	4	...	0	0	0
" 12 "	2	1	3	...	2	0	2
" 2 years	5	6	11	...	6	3	9
" 3 "	1	6	7	...	1	4	5
" 4 "	0	1	1	...	1	6	7
" 5 "	1	0	1	...	0	2	2
" 6 "	0	0	0	...	1	1	2
" 7 "	0	0	0	...	1	2	3
" 8 "	0	0	0	...	1	0	1
" 9 "	0	0	0	...	0	0	0
" 10 "	0	0	0	...	0	0	0
" 14 "	0	0	0	...	0	1	1
" 17 "	0	0	0	...	1	1	2
" 29 "	0	0	0	...	1	1	2
	—	—	—		—	—	—
Total,	18	35	53	...	22	28	50

Table V.—Shewing the numbers, Curable and Incurable, of Patients admitted.

	Males.		Females.		Total.
Curable,	37	...	42	...	79
Incurable,	30	...	48	...	78
	—		—		—
Total,	67	...	90	...	157

Table VI.—Shewing the Counties to which those admitted belong.

Aberdeen,	17	Nairn,	2
Banff,	4	Orkney and Shetland,	3
Caithness,	8	Perth,	20
Clackmannan,	3	Ross and Cromarty,	3
Fife,	8	Stirling,	3
Forfar,	73	Durham,	1
Kincardine,	11		—
Lanark,	1		157

Table VII.—Shewing Ages of those Admitted and Dead.

	ADMITTED.			...	DEAD.		
	Males.	Females.	Total.		Males.	Females.	Total.
Under 20 years	2	6	8	...	0	0	0
From 20 to 30 years	13	14	27	...	1	0	1
" 30 to 40 "	18	18	36	...	6	8	14
" 40 to 50 "	10	24	34	...	3	5	8
" 50 to 60 "	14	17	31	...	4	8	12
" 60 to 70 "	8	9	17	...	7	3	10
" 70 to 80 "	1	1	2	...	1	4	5
" 80 to 90 "	1	1	2	...	0	0	0
	—	—	—	...	—	—	—
	67	90	157	...	22	28	50

Table VIII.—Shewing the Causes of Death.

	Males.	Females.	Total.
1. Apoplexy,	0	1	1
2. Paralysis,	3	1	4
3. General Paralysis,	3	0	3
4. Epilepsy,	3	0	3
5. Maniacal Exhaustion,	2	1	3
6. Phthisis,	2	9	11
7. Tuberculosis,	0	2	2
8. Bronchitis,	1	2	3
9. Pleurisy,	0	1	1
10. Pneumonia,	3	0	3
11. Pulmonary Emphysema,	0	1	1
12. Cardiac Disease,	1	1	2
13. Pericarditis,	0	1	1
14. Diarrhœa,	0	1	1
15. Diarrhœa, with Gangrene of foot,	0	1	1
16. Organic Disease of Liver,	0	1	1
17. Peritonitis,	1	2	3
18. Suffocation by choking with food,	1	1	2
19. Marasmus,	1	2	3
20. Phlegmenous Erysipelas,	1	0	1
	—	—	—
	22	28	50

Table IX.—Shewing Mental Condition of those Discharged on Trial at Expiry of their Period of Probation.

	Males.		Females.		Total.
Recovered,	6	...	12	...	18
Improved,	2	...	1	...	3
Incurable,	3	...	2	...	5
Re-admitted,	2	...	0	...	2
Still on Probation,	3	...	3	...	6
	—		—		—
Total,	16	...	18	...	34

