

**Nineteenth annual report of the Trustees of the State Lunatic Hospital at Northampton : October, 1874.**

**Contributors**

State Lunatic Hospital (Northampton, Mass.)  
Trask, Eliphalet.  
Earle, Pliny.

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NINETEENTH ANNUAL REPORT

OF

THE TRUSTEES

OF THE

STATE LUNATIC HOSPITAL

AT

NORTHAMPTON.

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OCTOBER, 1874.

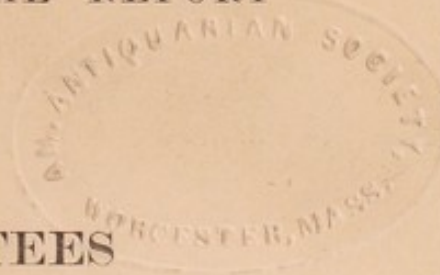
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BOSTON:

WRIGHT & POTTER, STATE PRINTERS,

79 MILK STREET (CORNER OF FEDERAL).

1875.

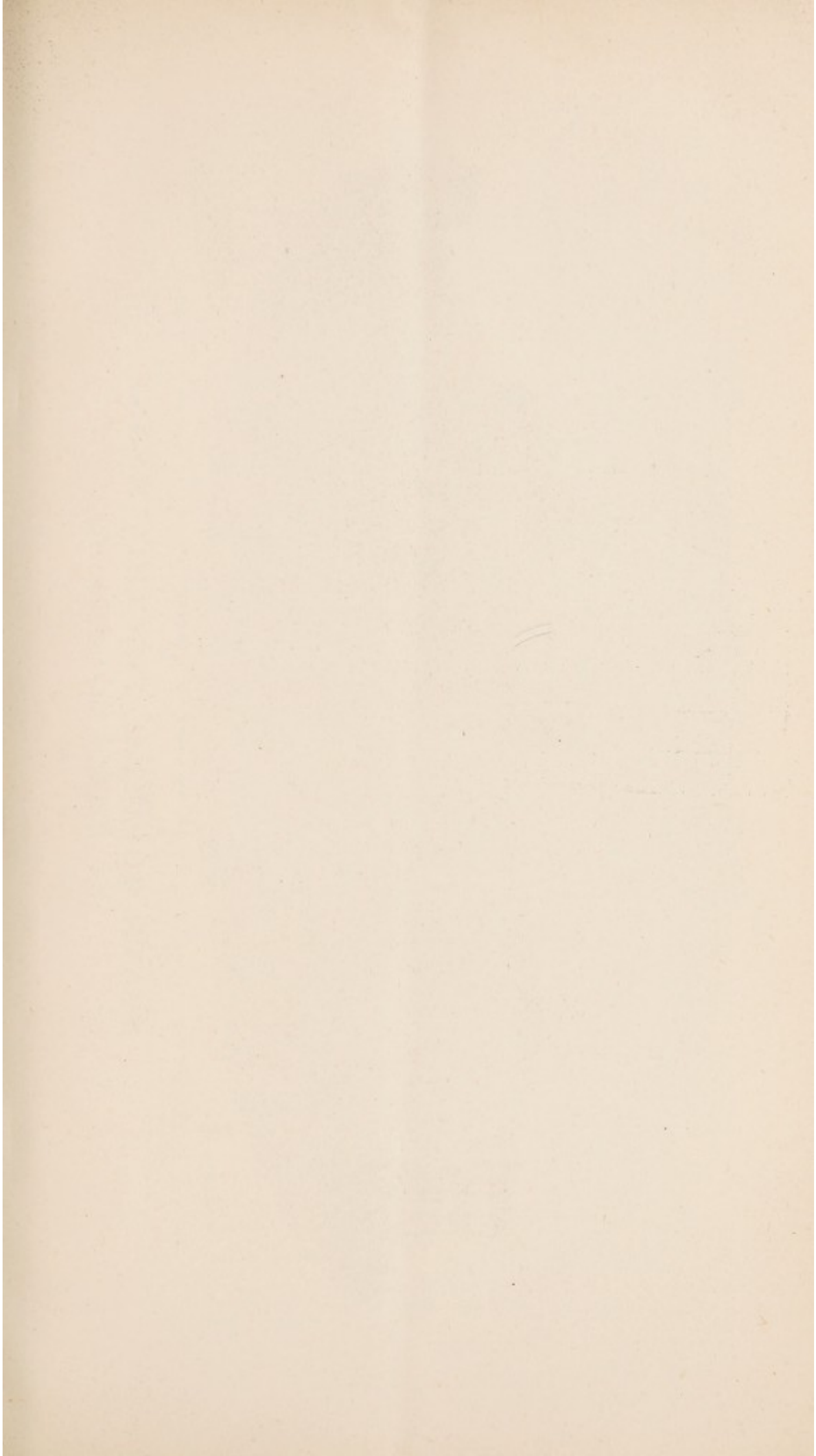




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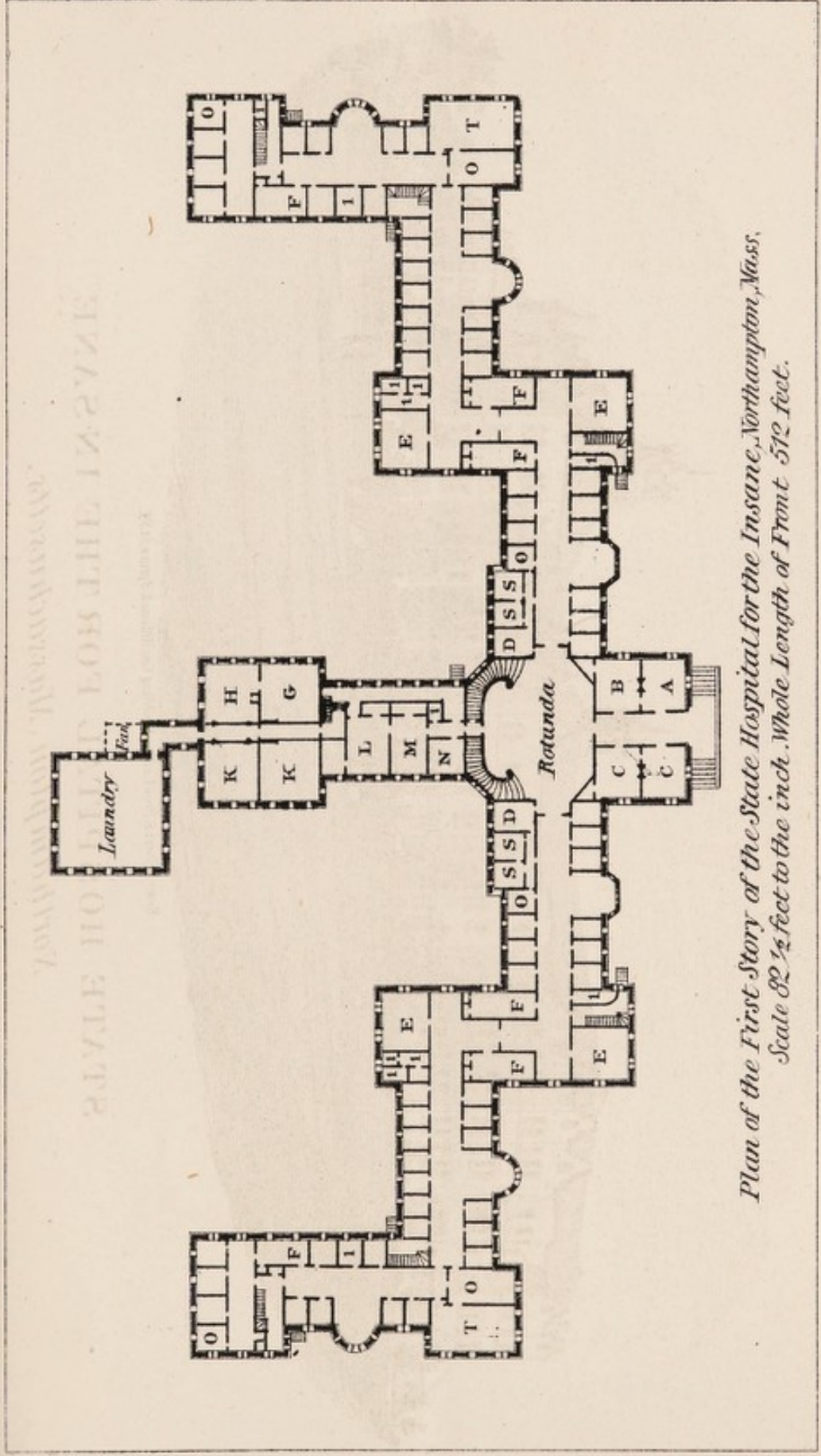







Henry Seibert & Ives, Ledger Building, Cor. Williams & Spruce St. N.Y.

**STATE HOSPITAL FOR THE INSANE**  
*Northampton, Massachusetts.*



*Plan of the First Story of the State Hospital for the Insane, Northampton, Mass.  
 Scale 82 1/4 feet to the inch. Whole Length of Front 512 feet.*





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## OFFICERS OF THE NORTHAMPTON LUNATIC HOSPITAL.

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### TRUSTEES:

HON. ELIPHALET TRASK,	. . .	<i>Springfield.</i>
HENRY L. SABIN, M. D.,	. . .	<i>Williamstown.</i>
HON. EDMUND H. SAWYER,	. . .	<i>Easthampton.</i>
EDWARD HITCHCOCK, M. D.,	. . .	<i>Amherst.</i>
SILAS M. SMITH, Esq.,	. . .	<i>Northampton.</i>

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### RESIDENT OFFICERS:

PLINY EARLE, A. M., M. D.,	. . .	<i>Superintendent.</i>
EDWARD B. NIMS, M. D.,	. . .	<i>First Assistant-Physician.</i>
ALONZO S. WALLACE, M. D.,	. . .	<i>Second Assistant-Physician.</i>
WALTER B. WELTON,	. . .	<i>Clerk.</i>
ASA WRIGHT,	. . .	<i>Farmer.</i>
DANFORD MORSE,	. . .	<i>Engineer.</i>

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### TREASURER:

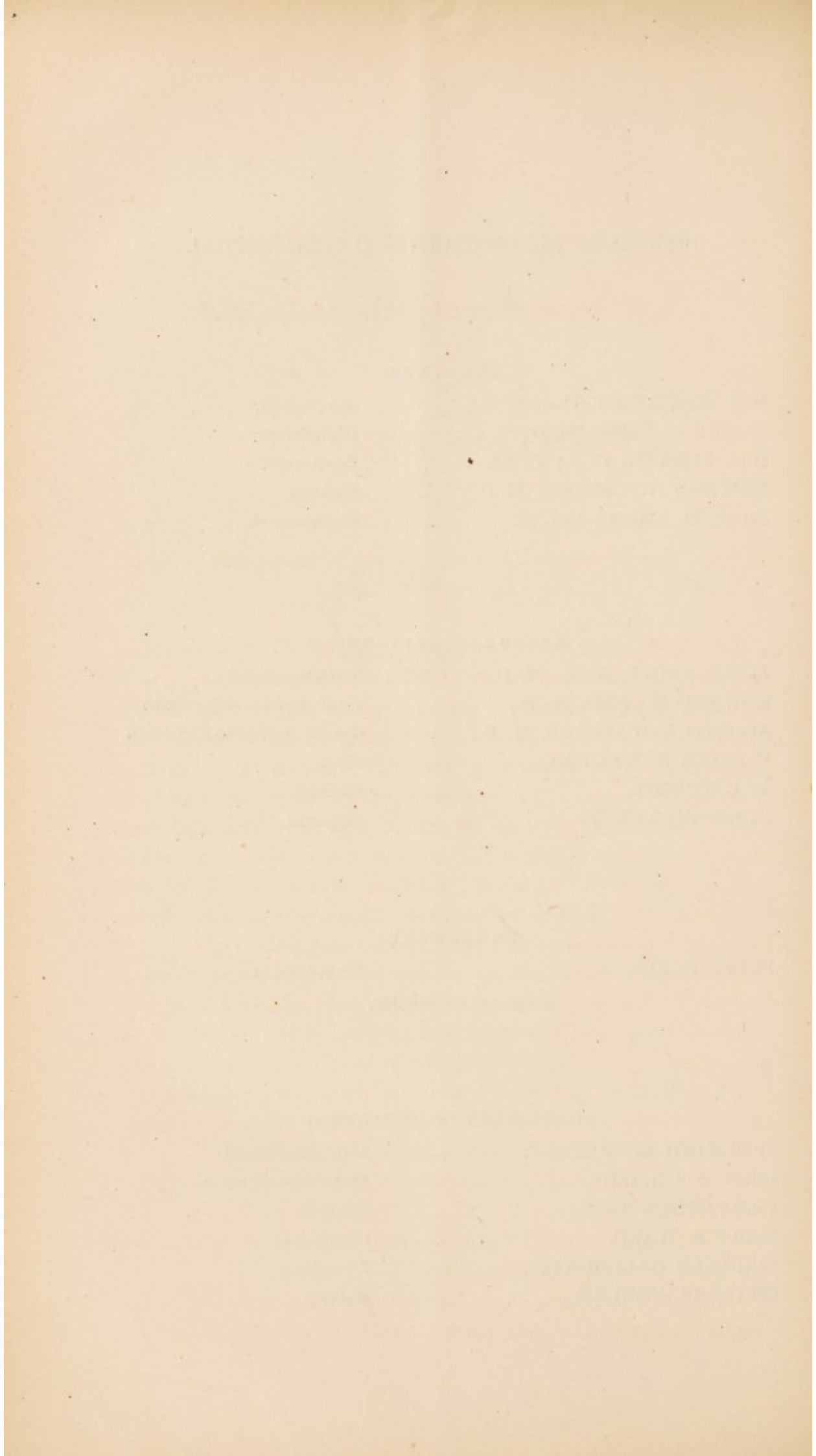
PLINY EARLE,	. . .	<i>Northampton.</i>
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Office at the Hospital.

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### SUBORDINATE OFFICERS:

JEREMIAH E. SHUFELT,	. . .	<i>Male Supervisor.</i>
LUCY A. GILBERT,	. . .	<i>Female Supervisor.</i>
F. JOSEPHUS RICE,	. . .	<i>Steward.</i>
MARY E. WARD,	. . .	<i>Seamstress.</i>
ISABELLE HALLADAY,	. . .	<i>Laundress.</i>
CHARLES ZIEHLKE,	. . .	<i>Baker.</i>



# Commonwealth of Massachusetts.

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## TRUSTEES' REPORT.

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*To His Excellency the Governor of the Commonwealth, and  
the Honorable Council.*

The official year just closed is memorable for a sudden and considerable increase of patients in a house already overcrowded at its beginning. On the 30th of September, 1873, the number was four hundred and thirty-three, of whom two hundred and ten were men, and two hundred and twenty-three were women. In the course of the year, one hundred and ninety-three persons, of whom one hundred and five were men, and eighty-eight women, have been admitted, making the whole number partaking of the benefit of the hospital: men, three hundred and fifteen, and women, three hundred and eleven; total, six hundred and twenty-six.

Seventy-six men and forty-nine women, a total of one hundred and twenty-five, were discharged; and fourteen men and eleven women, a total of twenty-five, died. On the 30th of September, 1874, the number remaining in the hospital was four hundred and seventy-six, of whom two hundred and twenty-five were men, and two hundred and fifty-one women.

The largest number in the house upon any day in the year was four hundred and ninety-five; and the smallest, four hundred and thirty. The daily average number for the year was four hundred and sixty-nine, an excess of thirty-two over that of any preceding year.

No less than eighty-four of the patients received were transferred from the state institutions at Worcester, Taunton,



Tewksbury, and Monson, and nearly all of them were incurable.

Of the one hundred and twenty-five who left the hospital, thirty-seven were considered recovered, forty-three improved, and forty-five unimproved.

Of deaths there were twenty-five, giving a ratio somewhat larger than in the next preceding year, but smaller than in any other year in the history of the institution, and much below the average for the whole period.

In this connection the Trustees may not improperly express their conviction that the diminution in the death-rate of the institution, for the last several years, is mainly a consequence of the constant and careful medical watchfulness, the better nursing, the more thorough heating and ventilation of the apartments, and the cleanliness and generally improved hygienic condition of the whole hospital.

The regular monthly meetings of the board have been held throughout the year, and an extra meeting, as usual, near the middle of October, for the full auditing of accounts and the completion of the annual report. The halls of the patients have been as regularly inspected; and the extent of this inspection, as measured by the number of Trustees making it, has considerably exceeded the requirement of the by-laws adopted at the time of the first organization of the hospital.

Of the several improvements in the course of the year, that which has been made in the kitchen is the most important. The cooking apparatus, introduced when the hospital was erected, or in the earliest years of its history, had become old and worn; it was inadequate to the convenient preparation of the food for so large a family as now occupy the house, and it was not of the most approved kinds in use at the present time. With the exception of the broiler, it was all removed and replaced by such as, after careful inquiry and the inspection of the kitchens of several large establishments, such as hotels and hospitals, appeared the best adapted to the wants of this institution. The expense of the change was about three thousand dollars.

The new cooking-range is considerably larger than the old one, having three fires instead of one.

The series of eight large iron boilers and steamers, all of



them jacketed, so that the cooking may be done by direct steam, or by the heat of the steam within the jacket, constitute, in our opinion, the best apparatus of the kind that we have ever seen. They form a compact row, are directly supplied with steam and water, as well as faucets for drawing off the water, so that no dipping, either into them or from them, is required. They have hinged covers, and from each of them a small pipe conducts the steam produced by boiling into a large common pipe, and thence into the chimney. The covers and pipes are of copper, electroplated with tin, to prevent the otherwise large amount of scouring necessary to keep them in good order.

For the preparation of tea and coffee there are two oval copper boilers, or urns, each of which holds eighty gallons. They stand upon iron frames, are directly supplied not only with steam, but with hot water, coming from a copper tank, constantly heated by a water-back in the cooking-range; and each has a water-gauge, as well as two large emptying faucets by which the tea or the coffee can be withdrawn as rapidly as a person can place and take away the cans which receive it. With this apparatus, eighty gallons of either tea or coffee can be ready for use in twenty minutes from the time the work of preparing it is begun. We have no hesitation in pronouncing these the best large urns we have seen, and equally perfect with the smaller ones used in large hotels.

With the *old* apparatus, the kitchen was often, particularly in the winter, so beclouded with steam, that a person could not see across it, or half way the length of it. With the *new*, this unpleasant and unwholesome annoyance is entirely avoided. The *old* apparatus was very noisy; the *new* is as quiet as it is effective in operation.

All of these changes in the furniture of the kitchen were made by Mr. E. Whiteley, of Boston.

The ventilation of the kitchen has been greatly improved by opening a draught from it, through a galvanized iron pipe eighteen inches in diameter, into the tall chimney connected with the furnaces of the steam-boilers for heating the building. The various odors of cooking vegetables and meats, which heretofore somewhat too largely escaped through nearly all



parts of the central edifice, now mostly take this direct route to the open air.

The oven in the bakery was rebuilt upon a considerably enlarged scale, in the early part of the fiscal year. During the time required for its construction and proper drying, the baking was done in the night, by the hospital baker, at the bakery of Carr & Lyman, in Northampton.

The large rotunda of the central building, extending three stories upwards, was designed with the expectation that no weight would be placed upon it other than the several floors. Hence its architecture was made light, the joists long, and the supports few and small. Subsequently, no proper special provision having been made for the purpose, it was found that the best place for the large receiving tank for water is directly over this rotunda, in the fourth story. Here it was consequently placed. The capacity of the tank was about three thousand imperial gallons. The weight of this large body of water was too great for its supports, as had become too evident by extensive cracks in the plastering of the upper three stories, and by the deviation of pillars from their upright position. As there are six other tanks in the attics of the wings, and as the water is now taken from the Northampton Water Works, and is constantly running, it was no longer necessary that the central tank should be very large. It has been replaced by a much smaller one, made of boiler-iron. The rotunda is relieved of a weight of twelve or thirteen tons, and the water apparatus is more compact, convenient and durable.

As the building was originally constructed, the six halls occupied by the least careful and most refractory patients, in either wing, had no special bath-room, but in each of them a bath tub was placed in the water-closet. The many inconveniences of this arrangement have been overcome, in the men's department, by a large, well-warmed bath-room, with several tubs, fitted up in the basement.

The cupolas, imperfectly constructed in the beginning, have always been a source of annoyance and labor, as well as of injury to the interior of the building, from the quantity of water which, particularly in severe storms, found its way through their crevices. This defect has been partially over-



come, from time to time, by the use of paint and putty, and by other expedients, until, at length, it was thought best to remedy it altogether. They have all recently been covered with a sheathing of boards, laid over the old ones, and the roofs re-tinned, so that it is believed they are water-tight.

A frame building, seventy-five feet long and thirty feet wide, one and a half stories in height, and roofed with slate, has been erected within the last few months. The first story is intended as a lumber-room and a poultry-house, and the half-story above as a general store-room for the coarser and heavier articles which are best preserved by protection from sun and rain, and which are not especially valuable, either as ornaments or as evidences of careful husbandry, if scattered out of doors around the buildings. All the work upon this building, except the slating of the roof and the masonry of the foundation and the underpinning, was performed by the regular employes of the hospital, with the assistance of some of the patients.

The main sewer of the hospital, which formerly ended at a point near the barn, has been extended, by heavy stone masonry, one hundred and seventy-seven feet westward, and thence, by cement-pipe of ten-inch calibre, one hundred and thirty feet farther, whence it is to be continued to the reservoirs in the meadow, an additional distance of one hundred and twenty-two feet. The causeway, also of heavy stone-work, upon which it is to be conducted over the valley and across the brook, is now in process of construction. This done, the sewage can be made far more useful as a fertilizer than it has ever been hitherto. The thirty acres of excellent meadow surrounding the reservoirs, already much improved by cultivation, can, in a few years, be made as fertile and as prolific as a garden.

A good supply of wholesome fruit is almost a necessity in a hospital, and it has heretofore been customary here to lay in a large stock of apples. As the farm furnished but a small part of the quantity needed, it has been necessary to buy most of them. Under these circumstances we have believed it to be our best policy to take advantage of a favorable opportunity, and purchase what is known as the Clarke orchard. Of land, it contains about fifteen acres;



of apple-trees, about fifty old ones, past the prime of bearing, and about two hundred and thirty younger ones, just come or coming to their most fruitful period. The price paid was four thousand dollars.

For an account of the condition and products of the farm, as well as for the detailed history and statistics of the institution for the past year, we refer you to the report of the Superintendent, hereto appended.

Dr. Edward R. Spaulding resigned the office of second Assistant-Physician, and left the hospital in June last. His services had been satisfactory to us, and we cordially commend him to those among whom may be his future residence. His place here was immediately filled, by the appointment of Dr. Alonzo S. Wallace, who has thus far performed his duties in such manner as to justify our selection.

The *earnings* of the hospital, for the board of patients, in the fiscal year, were as follows:—

For State patients, . . . . .	\$52,168 00
Town patients, . . . . .	18,826 50
Private patients, . . . . .	23,193 87
	<hr/>
Total, . . . . .	\$94,188 37

The *receipts* of money, in total and in particular, as derived from different sources, and the disbursements of the same, with the several purposes for which it was paid, may be learned from the accompanying report of the Treasurer.

The financial accounts for the year have been audited, found correct, and approved. The balances show that on the 30th day of September, 1874, there were,—

Cash assets, available for future use, . . . . .	\$28,883 73
And liabilities (bills payable), . . . . .	10,055 26
	<hr/>
Balance of cash assets, . . . . .	\$18,828 47

The *purchased* provisions and supplies now on hand and paid for, are estimated to have cost nearly fifteen thousand dollars. Among them are nine hundred tons of coal, and

upwards of five thousand dollars' worth of clothing and dry goods.

These results show that the income of the hospital during the year has been sufficient to pay its current expenses, and make the repairs and improvements above mentioned, together with many others of minor importance.

It remains for us but to say that, whatever we may have heretofore expressed of approbation of the management of the hospital by its executive officers, is re-affirmed; and that, in our opinion, the institution is worthy of the confidence of the friends of its inmates, as well as of the government and the people of Massachusetts.

ELIPHALET TRASK,  
HENRY L. SABIN,  
EDMUND H. SAWYER,  
EDWARD HITCHCOCK,  
S. M. SMITH,

*Trustees.*

NORTHAMPTON, October 15, 1874.



## TREASURER'S REPORT.

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*To the Trustees of the Northampton Lunatic Hospital.*

The subjoined statement of the receipts and the disbursement of money during the official year ending September 30, 1874, is respectfully submitted.

### RECEIPTS.

Balance in hands of Treasurer, Sept. 30, 1873, .	\$1,581 46
Received for board and contingencies of private patients, . . . . .	24,267 58
for board and contingencies of town patients, . . . . .	19,290 24
for board and contingencies of state patients, . . . . .	51,782 62
for animals and produce sold, . . . . .	1,368 05
for sundry accounts, . . . . .	1,616 53
	<hr style="width: 20%; margin-left: auto; margin-right: 0;"/>
Total, . . . . .	\$99,906 48

### DISBURSEMENTS.

For provisions and supplies, . . . . .	\$28,848 83
fuel, . . . . .	8,325 80
gas and oil, . . . . .	1,222 37
water, . . . . .	700 00
salaries and wages, . . . . .	21,531 26
furniture, beds and bedding, . . . . .	4,127 98
clothing and dry goods, . . . . .	5,344 12
contingencies, . . . . .	2,026 53
farm, . . . . .	3,455 78
	<hr style="width: 20%; margin-left: auto; margin-right: 0;"/>
<i>Amount carried forward,</i> . . . . .	\$75,582 67



<i>Amount brought forward,</i>	.	.	.	\$75,582	67
For farm stock,	.	.	.	2,025	22
farm wages,	.	.	.	3,183	33
repairs and improvements,	.	.	.	10,720	13
Clarke orchard (in part),	.	.	.	2,704	00
miscellaneous expenses,	.	.	.	3,843	18
Balance in hand of Treasurer, Sept. 30, 1874,	.	.	.	1,847	95
				<hr/>	
Total,	.	.	.	\$99,906	48

PLINY EARLE, *Treasurer.*

NORTHAMPTON, October 15, 1874.

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The undersigned, a Committee appointed to audit the accounts of the Treasurer, have attended to the duty assigned to them, and report that they have examined the books and accounts of the Treasurer, and have found proper vouchers for all entries made.

ELIPHALET TRASK.  
EDMUND H. SAWYER.

NORTHAMPTON, October 15, 1874.

## SUPERINTENDENT'S REPORT.

---

*To the Trustees of the Northampton Lunatic Hospital.*

GENTLEMEN:—As the pen is once more taken to record the summary history of a year, it is perhaps not unnatural that, amidst a numerous household, peculiarly exposed to events unpleasant in character and in consequences, the mind should first revert to that from which we have been spared rather than to that which has been performed. No suicide has occurred, and no fatal or grave accident to any patient. We have been exempt from epidemics, and nearly so from the serious forms of summer disorders; and the amount of acute disease of any and of every form, has been remarkably small.

The number of persons returned to home and friends restored to mental health, although not inconsiderable, is not so large as would have been most satisfactory; but it is all that could reasonably be expected. Not nine-tenths alone, but nearly nineteen-twentieths of the patients here, are incurable. So long as the population of the hospital is of such a character, restorations must be infrequent, and limited almost exclusively to a part of the few cases of recent origin annually admitted.

For the sum of good accomplished, the hospital cannot, therefore, rely solely or chiefly upon the number of its cures, but likewise upon the deaths prevented, the lives prolonged, the sickness averted, the bodily health sustained, promoted and improved, the amount of comforts secured, the contentment attained and the enjoyment procured; and of these, despite all cavillers, all censors, and all sensationists, there has been much.



A general numerical schedule of the hospital, for the year, is placed in the following table:—

*General Statistics, 1873-74.*

	Males.	Females.	Totals
Patients in hospital, September 30, 1873, . . .	210	223	433
Admitted from the general population, . . .	66	43	109
Transferred from the Worcester Hospital, . . .	13	20	33
Transferred from the Taunton Hospital, . . .	22	19	41
Transferred from Monson State Primary School, . . .	1	—	1
Transferred from Tewksbury State Almshouse, . . .	3	6	9
Total of admissions within the year, . . .	105	88	193
Total of patients within the year, . . .	315	311	626
Discharged, including deaths, . . .	90	60	150
Remaining, September 30, 1874, . . .	225	251	476

*Condition of Patients Discharged.*

Recovered, . . . . .	25	12	37
Improved, . . . . .	24	19	43
Unimproved, . . . . .	27	18	45
Died, . . . . .	14	11	25
Totals, . . . . .	90	60	150
Daily average number of patients, . . . . .	229.67	239.87	469.54
Smallest number on any day, October 24, 1873, . . .	207	223	430
Largest number on any day, last four days of August, . . .	243	252	495

The whole number of patients in the hospital in the course of the year exceeds, by twelve, that of the next preceding year, and by seven that of any other year in the history of the institution.

The daily average number is 32.31 larger than in any former year.

The largest number on any day is larger by thirty-six than at any antecedent time.

No person was admitted more than once within the year, and consequently the number of persons is the same as the number of patients. Among the patients admitted, however, there were thirty-eight who had previously been treated at the hospital. Nineteen of these were men, and nineteen women. This was the second admission of thirty of them; the third admission of three; the fourth of four, and the sixth of one. These facts are useful in showing that the numbers of patients received at hospitals are unreliable as indexes of the number of insane persons among the people. This proposition is more fully illustrated in the following table, wherein is exhibited the extent to which these one hundred and ninety-three persons have been connected with institutions of this kind.

*Relation to Hospitals of the Persons Admitted, 1873-74.*

	Males.	Females.	Total.
Never before in any hospital, . . . . .	49	25	74
Former inmates of this hospital, . . . . .	12	8	20
of other hospitals in this State, . . . . .	34	40	74
of hospitals in other States, . . . . .	-	3	3
of this hospital and of other hospitals in this State, . . . . .	3	7	10
of this hospital and of hospitals in other States, . . . . .	3	4	7
of other hospitals in this State and of hospitals in other States, . . . . .	3	1	4
of this hospital, of other hospitals in this State, and of hospitals in other States, . . . . .	1	-	1
Total of persons, . . . . .	105	88	193

Only seventy-four, or 38.34 per cent. of them, came for the first time into a hospital. The similar per cent. in the next foregoing year was 39.22; and in 1871-72, forty.

By a careful consultation of the contents of the table, and the other facts above stated, it will be found that, even on the supposition that no one of the persons had ever been received more than once at any other institution than this, yet the total admissions of these one hundred and ninety-three persons into hospitals is no less than three hundred and fifty; and conse-



quently that, in the statistics of those hospitals, they count as three hundred and fifty patients. The object of these remarks is to show the real nature of the undigested statistics of the hospitals, as they appear in the annual reports, and their consequent unreliability as premises from which to deduce scientific truths.

The whole number of persons admitted, the past year, is larger by twelve than it was in 1872-73; but the number—eighty-four—received by transfer from other state institutions, is less by one than it was in that year. Hence the increase was wholly derived directly from the general population.

Patients brought to this hospital from the state institutions at Tewksbury and Monson, are not included in the above table unless they have formerly been at some hospital specially devoted to the insane. For reasons given in the report for 1872-73, they are placed among the direct commitments.

The number of admissions in each month is shown in the first table of the Appendix. The largest monthly number is in November, when three-fourths of the whole were transferred from other hospitals; and the smallest in August, when there were no such transfers. Of those received by direct commitment, the largest number, twenty, came in May, four of them from the Tewksbury State Almshouse. The next largest, eighteen, was in June, two of them from Tewksbury. Hence the largest number directly from the general population was sixteen, and this occurred in each of the two months mentioned. The smallest was in August. The quarterly admissions are indicated in the following table:—

ADMISSIONS.	WHOLE NUMBER.			DIRECT COMMITMENT.		
	Males.	Females.	Total.	Males.	Females.	Total.
In October, November and December, 1873, . . .	32	17	49	18	3	21
January, February and March, 1874, . . . . .	30	20	50	13	14	27
April, May and June, 1874, . . . . .	28	27	55	26	21	47
July, August and September, 1874, . . . . .	15	24	39	13	11	24
Total, . . . . .	105	88	193	70	49	119



They were the most numerous, not only in the whole number, but likewise in the class of direct commitments, in the third official, corresponding with the second calendar quarter; and the least numerous in the first official or fourth calendar quarter.

Of the one hundred and ninety-three persons received, one hundred and thirty were beneficiaries of the State, and thirty-seven of towns and cities. The support of twenty-six was charged to individuals. But few changes of status in this respect were subsequently made. The support of two town patients was transferred to individuals, and that of one private patient to the town from which he came.

Two state and two private patients, admitted in former years, have, within the official year, been passed over to the list of town patients.

If a person be committed by court to the hospital and no friends appear and assume the responsibility of his support, his expenses here are charged, under statute law, to the town or city in which he has a legal settlement. If he has no such settlement within the Commonwealth, his support is charged to the State. It thus sometimes happens that, through ignorance of the law on the part of the relatives or friends, persons of sufficient and even large pecuniary resources are recorded upon our books as town paupers. This fact being learned by the friends, they generally come forward and give bond for their support. This is the way in which most of the transfers from town to private patients take place. Occasionally, however, the friends fail to appear, preferring, apparently, to permit the patient to remain in the class of paupers, rather than to pay the additional charge for private boarders. They thus save one dollar and fifty cents per week.

Transfers in the opposite direction, from private to town, have a very different explanation. In these cases the patient generally has friends of limited means who are willing, through affection or duty, to sacrifice something for his benefit, so long as there is a prospect or a reasonable hope of recovery. But at length, this prospect vanished and the hope gone, the sacrifice of duty and of affection is deemed sufficient, and he is handed over to the public charge.

Of the patients who have left the hospital or died, the sup-



port of eighty-six, at the time of discharge or death, was charged to the State; that of thirty-one to towns or cities, and that of thirty-three to individuals. Of those remaining in the house at the end of the official year, two hundred and ninety-one are supported by the State, one hundred and ten by towns and cities, and seventy-five by individuals.

The table showing the weekly average number of each of these three classes of patients, a table first presented in the annual report for 1872-73, is here repeated, with additions for the year just expired.

*Weekly Average of Patients.*

OFFICIAL YEAR.	State Patients.	Town Patients.	Private Patients.	Total.
1871-72, . . .	226.96	89.57	112.27	428.80
1872-73, . . .	248.02	99.23	90.	437.25
1873-74, . . .	284.48	102.88	82.06	469.42*

It will be perceived that the increased average of state patients is very large, being a fraction more than thirty-six; while that of town patients is a small fraction more than two.

The reduction of the average of private patients is almost wholly due to the forced removal, in the course of the next preceding year, of a considerable number of that class whose residence was in other States than Massachusetts. Of pay patients belonging in this State, the average number has been only a small fraction more than *one* less than it was in 1872-73.

In the annual report for last year, it was shown that the number of town patients has pretty rapidly and regularly increased from forty-nine, on the 30th of September, 1867, to one hundred and one, on the corresponding date of 1873. On the 30th of September, 1874, the number was one hundred and ten. This is an increase in the course of the year, of nine, which is almost identical with the annual average increase for the six preceding years. Taking into consideration the effect

\* The weekly average differs, by a small fraction, from the daily average, as given upon a preceding page. The reason for this is obvious.



of recent modifications in the laws of settlement, it appears probable that this rate of augmentation will be sustained, and perhaps enlarged, for some years to come.

Of the patients whose condition, upon discharge, was recorded as "recovered," sixteen were the wards of the Commonwealth, twelve were supported by towns and cities, and nine were chargeable to individuals.

#### INEBRIATES.

Placed in the class of recoveries were at least four patients whose only title to that classification was the fact of their recovery from whatever extent of intoxication from spirituous liquors they were laboring under at the time of their admission. Such alone is the recovery that is claimed for them. To this they were entitled. But no decision could properly be pronounced upon the effect of their treatment here upon their habit of inebriety, until they should again have gone to their homes and been subjected, for a considerable period, to influences and temptations similar to those under which the habit was originally formed. Were it customary at the hospitals in this country, as it is in England, to report certain amended cases as "relieved" rather than as "recovered," these could have been so reported. True, as hinteth an objector, they might have been classified as "not insane." To this it may be replied that every one of them, before or at the time of commitment, was declared to be insane, not alone by two physicians, but by a judge of one of the courts as well; and it would not be a commendable evidence of the modesty of the Superintendent of this institution, to assert his dictum, or his opinion, as superior to the combined declarations of two of his professional brethren and the presiding officer of one of the higher legal tribunals of the State.

Those physicians and the judge can generally justify themselves in their opinion and their acts. No man is more insane than is the drunkard while the drunk is on. No drivelling idiot is more silly than the inebriate when in the stage of incoherent, nonsensical chatter, or more demented than he when he is lying, dead drunk, in the gutter. No raving maniac is possessed of more positive delusions than the intemperate drinker when in that beatific exaltation, in which,



like the countryman recently at Detroit, he declares, in reply to a cautionary word from a policeman, "I'm a thunderbolt from the North! I'm chain-lightning rolled up in a ball and stuck full of red-hot bowie-knives." But the inebriate has, in some respects, the advantage of the insane man proper. His delusions, however glorious, are more transitory. "They pass like visions of the past." They are but the rainbows that often accompany moisture and disappear when that moisture is gone. Even the invincible hero at Detroit, when waked on the following morning with vacant watch-fob, empty pockets, blackened eyes and a wounded head, and asked by the policeman if he wasn't "the thunderbolt of the North," slowly and sadly replied, "No, I hain't 'zackly a thunderbolt, but I'm the (blank) fool who thought he was."

This evanescent mental disorder, insanity though for the time being it be, is not so far recognized as such, by the laws of Massachusetts, as to authorize the forcible detention of its victim for a period adequate to that reformation of habit which alone can insure the prevention of its return. For this reason, inebriates ought not to be taken to the hospitals for the insane. There are yet other, and, to the officers of those institutions at least, still more important reasons. As a class, believing themselves improperly placed, they do not adapt themselves to their position. They demand privileges which cannot be granted, and chafe under the refusal of them. Considering themselves as not insane, they do not kindly consort with the other classes of patients. They are too liable to attempt to domineer over, to ridicule, to make jest of them. Of but too large a proportion of them it may be averred that they are the pests of the hospital; the poison sheep that "infect the flock, and poison all the rest." Whether insane or not, these are in a chronic condition of mischief, and their departure from the hospital lifts a heavy burden from its officers and other care-takers. These are plain words; but it will be perceived that their proper application is limited. Having written them, it is but just to add that there are many noble exceptions. I have never met with warmer hearts or kindlier feelings, or more tender sensibilities than among this class of patients; and of all my friends, I sincerely believe that upon none could I more implicitly rely



for succor, assistance, or self-sacrifice in my behalf than upon some of these.

When, through the representations and solicitations of their friends, or, as has not unfrequently occurred, from the dictates of their own better judgment, inebriates have consented to be placed in the hospital, or to remain in it, after commitment under the law relating to the insane, they have rarely remained sufficiently long to give a reasonable hope of reform. They soon come to believe, or at least to a pretension of the belief, that they shall never again yield to the temptation of strong drink, that they have perfect command over their appetites in that respect, and that they may as well be at home as at the hospital. They become restless, impatient of restraint, and at length leave the institution after a residence so short that they might as well have never entered it. Of all who have been here, very few have remained more than three months. Of several who came with a declared determination on the part of themselves and, in some cases, of their parents, that they should remain a year, not one has fulfilled his purpose. The one who remained the longest, and whose staying or going depended solely upon himself, is, I am happy to say, the best specimen of reformation that has left the hospital within the last ten years. In several other of these twelvemonth cases, the men were young, and still, to some extent, acknowledged allegiance to parental authority. These did not leave without consent of parents, but in one instance that consent was very soon obtained. The young man remained, not the intended year, but twenty-eight days. The instability of purpose and of will seems to characterize the parent as well as the child, sometimes on the paternal but oftener upon the maternal side. With a mother of average feminine sensibilities and sympathies, no young inebriate, judging from our observation, subjects himself to the restraints of a hospital much longer than he is so disposed.

Under these circumstances reformation here has been rare. Of all the inebriates who have been discharged during my connection with the hospital, the number who have subsequently wholly abstained from intoxicating drinks could be readily counted upon the fingers of one hand, with the thumb and perhaps a finger or two to spare. On the other hand,



we have been informed of several instances in which the person was known to be intoxicated within twenty-four hours from the time of his departure. The moral to be drawn from this is, that it is not good policy to send that class of persons to this institution. We make no pretension to skill in the restoration or reformation of them. The institutions for inebriates, several of which have been established in the United States, are the proper places for them. The superintendents of two of them have testified, before a committee of the British Parliament, to the restoration or reformation of thirty-five per cent. of the persons under their treatment. Surely, with this encouraging prospect in that direction, no inebriate should be sent to the hospitals for the insane, or at least, to this one.

We come then, either logically, or by a leap, to the conclusion that Massachusetts should have a state institution for inebriates. To the present writer this appears to be one of her greatest and most urgent needs. Furthermore, the laws bearing upon the subject of inebriation are defective and should be altered. Especially should the right of courts to commit to the hospitals for the insane any person whose only mental disorder is the temporary effect of intoxication, be clearly recognized or denied in the statutes of the Commonwealth. Nor this alone. If that right be acknowledged, the right of detention of those persons in the hospitals, beyond the time of disappearance of those temporary effects, should be so absolutely affirmed or withheld as to place the matter beyond the possibility of question or of doubt.

#### DEATHS.

Of the twenty-five patients who died within the official year, six were chargeable to individuals, and nineteen to public authorities ;—six of the latter to towns and cities, and thirteen to the Commonwealth.

By a consultation of the fourteenth table in the Appendix, it will be perceived that nearly all of the mortality was the result of diseases which nearly always, and in all hospitals, carry off a large majority of those who die. These are the several disorders of the brain, consumption, and that generally slow and gradual enfeeblement and wasting away which is



intended to be expressed by the terms "exhaustion" and "marasmus." In no case did any acute disease contracted in the hospital terminate fatally.

Neither the number of deaths nor the proportion of them relatively to the number under treatment is unprecedentedly small. The proportion, however, is less than in any other year, with but one exception, in the history of the hospital. The excepted year was the one which next preceded.

As in several former reports, so now, a table is inserted which contains the numerical history of the mortality of the hospital from the time of its origin.

*Deaths and their Ratios, from Sept. 30, 1858, to October 1, 1874.*

OFFICIAL YEAR.	Whole No. of Patients.	Daily average Number of Patients.	DEATHS.			Per cent. on whole No. of Patients.	Per cent. on daily avg. No. of Patients.
			Men.	Women.	Total.		
1858-59,	313	229.55	7	12	19	6.07	8.27
1859-60,	398	255.96	9	18	27	6.78	10.54
1860-61,	434	314.26	15	15	30	6.91	9.54
1861-62,	442	313.80	9	10	19	4.29	6.05
1862-63,	470	355.28	19	7	26	5.53	7.31
1863-64,	475	357.63	17	30	47	9.89	13.14
1864-65,	469	342.40	17	24	41	8.76	11.97
1865-66,	488	376.35	18	13	31	6.35	8.23
1866-67,	543	401.03	23	24	47	8.65	11.71
1867-68,	565	413.41	25	18	43	7.61	10.40
1868-69,	590	405.10	13	12	25	4.23	6.17
1869-70,	604	408.83	22	11	33	5.46	8.07
1870-71,	616	421.9	16	12	28	4.54	6.64
1871-72,	619	428.72	19	18	37	5.97	8.63
1872-73,	614	437.23	13	8	21	3.42	4.80
1873-74,	626	469.54	14	11	25	3.99	5.32

The mean or average annual mortality, for the fifteen years, on the whole number of patients treated, is 6.15 per cent.; and on the daily average number in the house, 8.55 per cent. The similar percentages for the past year are only 3.99 and 5.32, respectively. The latter two proportions, representing the deaths of the year just expired, are a fraction less than



two-thirds as large as the former two, which represent the average mortality of the whole period.

In the course of the last ten years much labor has been bestowed, and large sums of money expended, in the attempt to perfect the hospital in all its departments; to improve the heating and ventilation; to promote cleanliness of apartments and of person; to encourage exercise in the open air, and enlarge the facilities therefor; to insure regularity of habit in respect to food, sleep, and bodily activity; to secure the faithful performance of all the duties which the physician and the nurse owe to their patients; and to multiply and diversify the mental means and influences which, with all mankind, have an important effect upon the well-being of the individual. That labor and those expenses ought to be followed by evident results. How far such results are apparent in the condition and daily working of the hospital is not for me, but for you, to judge. By an examination of the above table you will see how much smaller the death-rate has been during the last six years than in any other equal period since the institution was opened. May it not reasonably be claimed that, on the one hand, the labor and expense alluded to, and, on the other, this important reduction of mortality, are to be regarded as holding toward each other the relation of cause and effect? I think it may; although I am fully conscious that a physician should be cautious in his assumptions or conclusions when dealing with the delicate issues of life and death. Nor is it to be expected that this small ratio of deaths can continue much longer. With the large number of debilitated bodies and shattered constitutions now here, such continuance would appear an impossibility.

Again, as heretofore, the mortality of men has been greater than that of women. The whole number of men in the course of the year was three hundred and fifteen; the deaths, fourteen; giving a percentage of 4.44. The whole number of women was three hundred and eleven; the deaths, eleven, or a percentage of 3.53. The daily average number of men in the house was 229.67: the deaths (fourteen), were equal to 6.09 per cent. The daily average of women was 239.87: the deaths (eleven), were equal to but 4.58 per cent. Expressed in another way, these results would go to show that in two



hospitals, one for either sex, the population of which should at all times be equal, six hundred and nine men would die in a period during which there would be but four hundred and fifty-eight deaths among the women.

In connection with this subject of mortality it was shown, in the last published report, that, of the patients in the hospital, the number of men had always, and, most of the time, very considerably, exceeded that of women. Of the number expressing this excess on the 30th of September, in every year since the hospital was opened, the maximum (eighty-one) was in 1868, and the minimum (thirteen) in 1873. On no day during the whole period had there been so many men as women. An equality of numbers was reached on the first day of January, 1874; and an excess of two men on the twenty-second day of the same month. This majority was soon lost, and the predominance of women has gradually increased to twenty-six at the close of the official year.

#### EMPLOYMENT, ENTERTAINMENTS, ETC.

In several of the foregoing annual reports a somewhat elaborate exposition has been made of the scheme of moral treatment, so called, as it exists at this hospital, including the details of its administration, in the several branches. It is not intended, upon this occasion, to occupy more time or space with the subject than are necessary to demonstrate the continued adherence to the plan and methods heretofore pursued.

In each of the four official years next preceding that which has recently terminated, a table has been published exhibiting, in a condensed form, the amount of work, as measured by numbers of days, performed in several departments of the hospital by the patients. It is here again introduced:—



*Days' Work by Patients, 1873-74.*

MONTHS.	FARM.	KITCHEN.			SEWING ROOM.	LAUNDRY.		
	Men.	Men.	Women.	Total.	Women.	Men.	Women.	Total.
October, 1873, .	551	93	242	335	305	30	248	278
November, .	473	90	234	324	280	22	215	237
December, .	438	93	235	328	318	22	225	247
January, 1874, .	366	93	189	282	292	22	217	239
February, .	316	84	166	250	281	23	235	258
March, .	314	93	187	270	233	23	246	269
April, .	379	90	178	268	296	27	238	265
May, .	503	93	209	302	272	22	181	203
June, .	648	90	200	290	283	26	266	292
July, .	507	93	207	300	285	21	276	297
August, .	561	93	214	307	266	24	280	304
September, .	569	90	223	313	296	13	294	312
Totals, .	5,625	1,095	2,484	3,569	3,407	280	2,921	3,201

The total number of days, in the four departments, is fifteen thousand eight hundred and two. The number upon the farm exceeds by about three hundred that of the next preceding year, and by more than fifteen hundred that of the year 1870-71. In the kitchen the number is not so large by about two hundred and fifty as in either of the next three foregoing years. This reduction is sufficiently accounted for by the greatly improved facilities for cooking. In the sewing-room there has been a diminution, since the last year, of about one hundred and sixty days, to be explained by the employment of an assistant seamstress and the introduction of a second sewing-machine. In the laundry the number was one hundred and fifty-five larger than in 1872-73, but not so large as in either of the two preceding years. In this department the washing and ironing were done during the year for a daily average number of about five hundred and twenty persons. The only expense to the hospital for labor was the wages of two laundresses, at fifteen dollars each per month.

A very large amount of manual labor, performed by the patients, is not recorded in the above table.

During the past year, as in several of its antecedents, all the repairs of beds rendered necessary by not only the "wear," but, very literally, the "tear" of the establishment, as well as the new upholstery work for the accommodation of the



increased number of inmates, has been done in the house, and almost wholly by the patients. The extent of this work is represented in the subjoined list:—

Hair mattresses repicked and put into new ticks, . . . . .	43
“ the hair repicked and put into old ticks, . . . . .	13
Hair pillows repicked, . . . . .	62
“ made, . . . . .	29
Hair bolsters made, . . . . .	1
Mattresses of split husks made, . . . . .	72
Husk mattresses partly refilled, . . . . .	57
Old husk mattresses wholly refilled, . . . . .	20
Husk pillows made, . . . . .	10

New hair is picked and the husks are split by the patients. One of the state patients, who was admitted in the early part of the year, is by trade an upholsterer, and his work is of excellent quality.

The hospital has nearly one hundred feather-beds, about two hundred and forty hair-mattresses, and over three hundred mattresses of split husks.

By walking and riding, the bodily activity of the patients, not accustomed to work out of doors, or rendered unfit therefor by disease, has been largely promoted. The airing-courts have also rendered efficient service toward the accomplishment of that end. The last year's report contained a tabulated numerical statement of the distribution of the patients upon a given day. It showed how large a proportion of them were out of doors, and how few were in the halls. The object of that exposition was to exhibit the contrast between this hospital, upon that day, and its constant self at all times previous to the preparation of the airing-courts. There was no pretension, and no intention of a pretension, that, as compared with other hospitals, there was an unprecedented proportion of the patients out of doors or absent from the halls. I well knew that, so far certainly as the patients of the male department were concerned, there was no foundation for such a claim. Not less than twenty-nine years ago, in the early part of the period of my connection with the Bloomingdale Asylum, it was made a rule at that institution, that, upon



every morning when the weather was suitable, all the men patients whose condition would permit, should go out of doors. This rule was in force several years, and was satisfactorily and, generally, strictly observed. And hundreds of times in the course of that period, the proportion of patients remaining in the halls was much smaller than it was here upon the day the records of which were placed in the table.

Airing-courts, as appendages to institutions for the insane, are no new thing. I have no doubt that they existed even before the new era of those establishments which dates from the labors of Pinel and Tuke. The Friends' Asylum at Frankford, Pennsylvania, which was opened in 1817, and was the first institution of the kind erected in the United States after the commencement of that era, was furnished with them in the beginning. The same is true of the Bloomingdale Asylum which was opened in 1821, and the Retreat, at Hartford, which went into operation in 1824. I have no definite knowledge in the matter, but the fact is probably equally true of the McLean Asylum, opened in 1818. At any rate, that institution has had them for a no inconsiderable number of years. Dr. Woodward, at the State Institution at Worcester, established the precedent of a hospital without them. The State Hospital at Columbus, Ohio, erected soon afterwards, was modelled from that at Worcester, and followed its example in this respect; and the same principle was adopted at many institutions subsequently founded. There is now a reaction. The opinion is gaining ground, that, in this matter, Dr. Woodward's predecessors builded more wisely than he, and the airing-court is again returning to its appropriate position.

The same general means as heretofore have been employed, within doors, for the purpose of exerting a favorable influence upon the minds of the patients. The custom, long since established, of frequently bringing together, in the chapel, those whose condition renders it admissible, has been continued; and a record of the exercises upon these occasions is here presented:—

## ASSEMBLIES IN THE COURSE OF THE OFFICIAL YEAR.

1. EXERCISES ON THE SABBATH,—		
Divine worship in the afternoon, . . .	52	days.
2. EXERCISES ON SECULAR EVENINGS,—		
a. <i>Readings; opening and closing with sacred music:</i>		
The Bible, . . . . .	32	“
The Bible and selections of prose, . . .	6	“
The Bible and selections of poetry, . . .	34	“
Miscellaneous selections of prose, . . .	75	“
Miscellaneous selections of poetry, . . .	64	“
Miscellaneous selections of prose and poetry, . . . . .	30	“
b. <i>Lectures; opening and closing with sacred music:</i>		
Architecture, . . . . .	1	“
The internal polity of the hospital, . . .	2	“
The beautiful, illustrated by printed diagrams, . . . . .	4	“
Astronomy; comets and the moon, . . .	2	“
The art of reading, with recitations, . . .	3	“
Physical, chemical and vital properties of atmospheric air, . . . . .	8	“
Oxygen, with experiments, . . . . .	2	“
Hydrogen and carbonic acid gas, with experiments, . . . . .	2	“
Ventilation, with illustrations and exhortations, . . . . .	1	“
c. <i>Other entertainments:</i>		
Pictures shown by oxyhydrogen lantern, . . .	5	“
Theatrical exhibitions, . . . . .	2	“
Theatrical exhibitions and tableaux, . . .	2	“
Punch and Judy, . . . . .	1	“
d. <i>Social gatherings:</i>		
Quadrille parties, . . . . .	16	“
No assembly, . . . . .	21	“
	<hr/>	
Total, . . . . .	365	days.



Thus, as will be perceived, upon only twenty-one days in the course of the year was there no assemblage for the purposes of either worship, instruction, entertainment or amusement. Of the exceptional days, thirteen were those of the meetings of the board of trustees; one, that of the governor's visit to the hospital; and one, that upon which, in consequence of the deluge from the breaking of the dam of the Williamsburg Reservoir, the supply of gas was stopped, and the household kept in darkness, relieved only by a few lanterns through the evening.

The exercises were more diversified than usual, and consequently better calculated to give satisfaction and accomplish their object. Reading, sandwiched between music, was the standard entertainment; and I am more and more convinced, that none other is so well adapted to the purpose. It is the intellectual meat and bread. Other things are necessary as the side-dishes,—the condiments, the pastry and the fruit of the mental feast; but the mind is not substantially nourished by them alone. Nor is it necessary, as some have supposed, that a large proportion of the matter read shall be simply amusing. Articles of that character are occasionally opportune here, as they are in other places; but he who supposes that an endeavor is made to introduce them as frequently as possible, is much mistaken.

In respect to all the oral exercises, whether of reading or of other entertainments, we are not conscious of doing anything, so far as the character, quantity, quality and management of them is concerned, differently from what we should for an audience of similar grade in original and educated intellect and taste, in any other place.

For the lecture upon architecture, we are indebted to the Rev. George T. Dole of Stockbridge; for the two upon astronomical subjects, to George W. Horr, Esq., of Athol. All the others were given by officers of the hospital.

Among the readings of miscellaneous selections of prose and poetry, were four which were generously contributed by Mr. Joseph Carhart, Professor of Elocution and Physical Culture in the Wesleyan Academy at Wilbraham.

The exhibitions with the oxyhydrogen lantern were given,



with his excellent instrument, by Dr. Thomas W. Meekins of Northampton.

Dramatic entertainments were introduced here, for the first time, in the course of the past year. The first two were the offering of a popular association of amateurs, known as the "P. Q. R. S. T. Club," in this town. They gave such satisfaction and so stimulated the hitherto latent artistic powers of the hospital, that they were followed by other two, brought out by domestic talent.

The great objection to theatrical exhibitions by persons immediately connected with the institution, is the amount of time required for preparation, and the almost necessarily consequent interference with more important duties. It is wonderfully easy in an institution like this, to lapse into a laxity of discipline, sufficiently agreeable to some of the persons interested, but soon followed by consequences the whole force of which is in direct opposition to the welfare of the patients. For this reason, and this alone, no attempt at dramatic performances has in former years been encouraged, and they were only permitted now with the understanding that, at the first appearance of a consequent neglect of duty, they would be suppressed.

For the introduction of the benevolent Punch and his amiable Judy to the acquaintance of our inmates, and the exposition of all the troubles of their otherwise happy family, we are indebted to persons unknown to us by name. Some foreigners would doubtless be surprised to learn that, so far as our knowledge extends, this was the first visit to Northampton of that couple, so well known in European lands.

#### ART AND ORNAMENT.

In the report for 1873 of the well-known "Friends' Retreat," near York, England, the institution which in the last decennium of the eighteenth century, and under the guiding spirit of William Tuke, took the initiative in the amelioration of the treatment of the insane in Great Britain, Dr. Kitching mentions the improvements recently made in the interior of that hospital, by an increase in the quantity and quality of the furniture, "a better style of house-painting" and "a better style of pictures." "A class of picture," he remarks, "has



lately been brought out admirably adapted for asylum decoration, in what are styled Oleographs. A large number of these productions have been obtained, and many of them are already framed and hung, and others are in progress. The subject of decoration has been making advances here for many years past, but those who have visited the asylums of America report them as being, in this respect, far ahead of ourselves."

The information given to Dr. Kitching was correct. In whatsoever other respects the British institutions for the insane may be superior to those of the United States, they are unquestionably inferior in the direction mentioned. Upon my visit to many of them, three years ago, the Retreat, near York, being among the number, I was surprised at seeing so very limited a number of pictures upon their walls. The quality, also, as well as the quantity of them, was remarkable. Very few, if my memory be not at fault, were of such style and merit that the superintendents of the institutions would be likely to permit them upon the walls of their own houses or apartments.

Surprise at this almost blank and cheerless monotony of asylum-walls in Great Britain, became astonishment in the similar institutions of Continental Europe. From the American point of view, it is difficult to understand the possibility that, in the neighborhood of such cities as Paris, Berlin, Dresden, Munich and Vienna, cities renowned for their vast collections of the choicest specimens of the pencil, and some of them the great art-centres of the world, the institutions for the insane should be left so nearly destitute of similar ornamentation. One would suppose that, in the neighborhood of those extensive galleries, all classes of the population would become so far educated in the taste for art, and in the idea of a pleasant and cheerful home, that the introduction of a liberal number of pictures in those institutions, would be one of the first measures succeeding a supply of such furniture as is an absolute necessity. But so far as appears, such has not been the effect.

It is proposed here to show to what extent this institution has been provided with pictures; and, to the end that there may be no misunderstanding as to their character or quality,



you will pardon me for a descent from generalities to details in the account of them.

The number of framed pictures now in the hospital is one thousand three hundred and eight. Ninety of them are private property, and twelve hundred and eighteen belong to the hospital. The further description of them applies to the latter alone. The frames are all supplied with paper backs for the protection of the pictures from dust, and are suspended by cord, from two eyes in each, in order to give them an angular projection from the wall. Most of the frames, with the exceptions mentioned below, are made of black walnut moulding, with a separate gilded band on the inner margin. The corridor of every hall,—those for the refractory as well as those for the quiet patients,—every dining-room, and every large dormitory, together with a few of the smaller rooms, are supplied with them.

Of large pictures there are, in pastel, three; water-colors, one; and crayon, one.

Of large engravings, with surface within the frame, of from two to seven and three-fourths square feet, there are one hundred and twenty-two. Nearly all of these are first-class pictures, most of them from the best publishing houses in London, and consequently from the productions of the leading British artists.

Of small engravings, chiefly in the best styles of execution, there are twenty-nine.

Of large chromos—oleographs—with surface from two to seven and three-fourths square feet, there are one hundred and sixty-four. These are mostly from Prussian and German publishers.

Of small chromos, with less than two square feet of surface, there are thirty-one.

Of photographs, with glass of eleven by fourteen inches, and rustic frames, there are one hundred and ninety-nine. Much the larger part of these are copies of the best pictures in European galleries.

Of photographs, with rustic frames, and glass of ten by twelve inches, there are one hundred and twenty-eight. These are of the same class of pictures with those last mentioned,



and, like them, were chiefly purchased of the firm of Charles Taber & Co., of New Bedford.

Of photographs, still larger than any of those above mentioned, there are twenty-eight. Among them are the three Roman pictures of the Forum, the Coliseum and St. Peter's Church, probably the largest, and among the best, photographic views ever taken.

Of large lithographs, with surface of from two square feet upwards, and in the highest style of the art as it exists in European countries, there are fifty-seven. Some of the Germanic landscapes are very beautiful.

Of large lithographs, of medium quality, there are twenty-six.

Of the best common, colored American lithographs, with glass of fourteen by twenty inches, there are forty-four.

Of the same style of lithograph, with glass fourteen by eighteen inches, there are one hundred and fifty-eight.

Of the cheapest American lithographs, intended for framing, most of them colored and with glass ten by fourteen inches, there are one hundred and eight.

Of lithographs of the same style as those last mentioned, with gilt frames and glass eleven by fifteen inches, there are one hundred and nineteen.

As all of our inmates were not educated in the galleries of Trafalgar Square, the Louvre, Versailles, the Pinakothek, the Belvidere, the Tribune and the Vatican, the common kinds of lithographs are not without their uses. Some of the patients prefer them to any others of the pictures, and they are placed in those halls where there is the greatest probability of such preference.

Of the twenty-four halls for patients, the corridors of twenty have been greatly improved in appearance by painting the walls; and in the others this will soon be done. In a few of them the coloring is wholly in oil, but in the rest in oil to the height of seven or eight feet, and in water above. In both style and color there is considerable variety. In some of the halls the paint work is panelled; in others, imitation of marble blocks; and in still others, plain.

Another means of decoration recently introduced here, is that of brackets, with flower-vases and other ornaments of art.



Of these brackets, sixty-six have already been put up, in twenty of the halls.

The library, which contains about eighteen hundred volumes, was formerly kept in the central building, and the patients who wanted books had access to it upon specified days of every week. Within the last year, eight book-cases, with base of drawers, have been placed in as many halls, and a part of the books transferred to them. Some have fifty volumes, and some a hundred each.

#### THE FARM.

With the lapse of each successive year it is found that the farm, due allowance being made for the variations of productiveness, as a consequence of natural and consequently irremediable causes, increases its contribution towards the support of the hospital. Its soil is generally becoming more fertile and its waste places gradually reclaimed.

A list of the products of the year, with the quantity and value of each, the quantity being estimated wherever the article is not harvested, is as follows:—

Hay (first growth, home farm), 71 tons, at \$20, .	\$1,420	00
“ (second growth, home farm), 34 tons, at \$23, .	782	00
“ (first growth, Parsons lot), $4\frac{3}{4}$ tons, at \$20, .	95	00
“ (second “ “ “), 1 ton, at \$23, .	23	00
“ (first growth, Clarke orchard), $9\frac{3}{4}$ tons, at \$20, .	195	00
Corn fodder (green), . . . . .	95	00
“ “ (dry), . . . . .	80	00
Corn, . . . . . 300 bushels,	270	00
Broom-seed, . . . . . 50 “	25	00
Potatoes, . . . . . 3,389 “	2,132	00
Carrots, . . . . . 500 “	250	00
Beets, . . . . . 300 “	120	00
Onions, . . . . . 140 “	105	00
Turnips, . . . . . 500 “	250	00
Parsnips, . . . . . 40 “	20	00
Beans, Lima, in shell, . . . . . 90 “	116	50
“ string, . . . . . $21\frac{1}{2}$ “	34	50
<i>Amount carried forward,</i> . . . . .	\$6,013	00



<i>Amount brought forward,</i>	.	.	.	\$6,013 00
Beans, dry,	30	bushels,		60 00
Pease, green, in shell,	26	"		54 50
Sweet corn, green, in ear,	149	"		149 00
Cucumbers,	97 $\frac{1}{2}$	"		155 50
Tomatoes,	92	"		112 00
Squashes, summer,	18 $\frac{1}{2}$	"		29 75
"    winter,	2,000	lbs.,		60 00
Melons, water,	.	.	.	39 50
"    musk and citron,	.	.	.	15 00
Lettuce,	.	.	.	30 00
Asparagus,	.	.	.	68 00
Pie plant,	.	.	.	53 00
Cabbages,	4,000	heads,		200 00
Currants, red,	11 $\frac{1}{2}$	bushels,		46 00
"    black,	$\frac{1}{2}$	"		1 00
Apples,	286	barrels,		572 00
Pears,	2	bushels,		6 00
Cherries,	8	"		32 00
Grapes,	2	"		5 00
Beef, raised here,	2,730	lbs.,		273 00
Veal,	740	"		100 08
Pork,	12,024	"		963 16
Turkeys,	349	"		87 37
Chickens,	27			19 00
Pigeons,	102			13 50
Heads and plucks,	.	.	.	49 50
Eggs,	198	dozen,		58 09
Milk, grass fed,	18,434	quarts,	1,290 38	
Cider,	18	barrels,		36 00
Broom brush,	600	lbs.,		48 00
Wood,	50	cords,		185 00
Logs for lumber,	.	.	.	450 00
Calf-skins,	.	.	.	10 78
Total,	.	.	.	\$11,285 11

The kitchen vegetables and some other articles delivered from the farm to the house, were appraised in portions as delivered, at the ruling market rate at the time. As this rate

often varied, the total valuation of any one of those productions is not the result of a multiplication of the whole quantity by a uniform price.

The total value of the year's products, even if the wood and lumber, not strictly the products of the year, be rejected, is materially larger than in any former year.

For the first time in the history of the hospital, has the farm yielded more than one hundred tons of hay. This remark applies to what is called in the list the home farm, which is all the land owned by the institution ten years ago. The product this year, as may be seen above, was one hundred and five tons. This is more than twice as much as the average yield of the three years from 1864 to 1866, inclusive; and no mention is made of the considerable quantities (estimated at five tons) of grass cut upon the grounds immediately around the buildings, and given as mown to the cattle.

The products of the garden and the tilled field have also been increased during the period mentioned, but, as a whole, not to an equal extent. The crop of potatoes, in 1864, was 1,500 bushels; in 1874, nearly 3,400 bushels; but that of beets, turnips and carrots is less, this year, than it was ten years ago. It is believed that, upon these premises, and for the purposes of the hospital, it is more profitable to cultivate potatoes than the other esculent roots.

The rain of the earlier and middle months of the growing season, which enlarged the crop of hay, and preserved over all the farm a spring-like verdure to a period unusually late, was favorable to the growth of potatoes in sandy places. Of the Early Rose, of the first planting, the yield was abundant and the quality excellent. The later plantings, also, turned out much better than was at one time expected. Of melons and of winter squashes, the crop was a comparative failure.

Of meats, it is intended to place nothing in the list which is not wholly the product of the farm. Several cows were slaughtered which had been upon the place a number of years, but no mention is made of them. In the early part of the winter, seventy-five sheep and ten two-years steers were purchased, kept upon the place, and slaughtered from time to time, as needed.



Twenty-eight hogs were killed in the course of the year. The weights of the carcasses were, respectively: 350, 415, 500, 344, 400, 365, 550, 442, 500, 434, 501, 440, 450, 441, 600, 390, 519, 500, 375, 249, 522, 438, 476, 491, 509, 448, 170, and 205; total, 12,024 pounds. The mean or average weight of the whole was 429 pounds; that of the largest ten, 514 pounds; and of the largest five, 540 pounds. A larger proportion than usual were of less than one year's growth.

The whole quantity of milk produced within the year, by the hospital herd, was 73,726 quarts; but, as usual, only one-fourth of it is entered in the foregoing list, because the rest, as is estimated, was the production resulting from the consumption of other products—hay, potatoes, beets, etc., already once valued.

The farm stock now on the premises, consists of eight horses, one bull, six oxen, two three-years steers, one seven-months calf, twenty-six fat hogs, three boars, ten breeding sows, and thirty shotes, besides twenty-five pigs, some of which will be sold.

As cows are kept here for the sake of their milk, no attempt to raise calves is made, only in a few exceptional cases. The calf just mentioned is a bull of high grade, which had so many excellent points, that it seemed wrong to send him to the slaughter. Nothing unforeseen preventing, he will be ready to take part in the Spanish bull-fights when they shall be added to the three days of horse-races which are now so beneficently promoting the growth of potatoes, broom-corn, tobacco, and other agricultural products in the valley of the Connecticut. With this prospect in view, it is proposed to name the animal either "Jonathan Edwards," or "The Puritan."

#### INSTITUTIONS, PRESENT AND PROSPECTIVE, FOR DISORDERS AFFECTING THE MIND.

It may, perhaps, be remembered that, several years ago, I gave, in the chapel, a course of six lectures upon insanity, to an audience in which the average number of insane persons was more than 250. In the course of one of those lectures, I took occasion to express my dissatisfaction with the



legal title of this hospital, and to promise the patients present that, should a time considered favorable be presented, I would suggest and advocate the alteration of it. That time has apparently arrived, and the opportunity is seized for the fulfilment of the promise.

It was asserted then, as now, that the objectionable part of the title is the term *lunatic*. It is not a pleasant word, but, like the word *crazy*, harsh and disagreeable. Its relation to the ear bears too strong a resemblance to that of the filing of a saw to the teeth. This effect may, in part, be the result of association, but it is not wholly so.

But another, and perhaps the greater, objection is its literal signification, which, according to its derivation, is *moon-struck*. The word was invented and adopted at a time when ignorance and superstition were somewhat more prevalent than at present, and sprang, as is well known, from the belief that mental disorders are caused by the moon.

In the lecture mentioned, I ventured to inform the audience that I did not believe that any one of them had ever been struck by the moon; that I never saw the moon strike or attempt to strike anybody; and, furthermore, as it is assumed that she is of the feminine gender, it would be eminently discourteous to intimate that she could, under any provocation whatever, be induced to strike.

I desire, therefore, to propose, through the medium of your board, that the next legislature abolish the present title of the institution, and substitute either "Hospital for the Insane," or "Hospital for Insane." The latter has the advantage of brevity. It is longer by two letters only than "lunatic hospital." A very large proportion of the institutions for the insane, established in the United States within the last few years, have adopted one of those titles; and their example will probably be generally followed in the future.

It is to be presumed that were the proposed change of title made for one of the state hospitals, it would likewise be made for all of them. Were this done, I would suggest another change. The State will soon have four of these hospitals in operation. They are situated each in a section of the State which might very appropriately form the basis



for the distinctive part of its title. Designated in the manner proposed, we should have the "Central Hospital for Insane," at Worcester; the "Northern Hospital for Insane," at Danvers; the "Southern Hospital for Insane," at Taunton; and the "Western Hospital for Insane," at Northampton.

Suggested by this subject, is the still larger and more important one which embraces the general enterprise for the treatment of diseases affecting the mind, at institutions established by the State. The man of prudence and foresight, when about to establish a business which in all probability will be extended in time to come, and to erect a building wherein to make a beginning on a limited scale, will not fail to adopt a general design for the future and perfected edifice, and construct that first building as an integral part of the anticipated whole. Regularity, simplicity, unity of plan and beauty of architecture, will thus be secured; and not these alone, but what, from a business point of view, are still more important, proper adaptation of means to end, and convenience and facility of practical operation. If this course be indicative of wisdom in the individual, it assuredly can be no less so in the unity of the Commonwealth.

Massachusetts has four large hospitals already founded. They are situated nearly as favorably as possible for the convenience of the people in all sections of the State. For the present they are, or rather will be, when that at Danvers and the new one at Worcester shall be finished, sufficient to meet the necessities, in this direction, of the people. But, making the experience of the past the criterion for the future, that sufficiency will be of but short duration. More will soon be wanted; and what, then, shall be done?

It is not unlikely, it is, indeed, quite within the limits of probability, that, when the new establishments mentioned shall be opened, the necessity for still further accommodations will appear so pressing, either at the moment or in the quickly arriving future, that it will be the wisest policy not immediately to destroy the old buildings at Worcester. It seems a pity to sacrifice them; for, though not quite in correspondence with the present idea of such edifices, they very well fulfil their purposes;



and many a similar institution of good repute cannot show their equals. When, however, the time shall come, as it inevitably will come at no very distant day, in which they will be relinquished and removed, some suitable substitute will be required to meet the exigencies of the time. What shall be that substitute? In the first place, were the decision of the question dependent upon me alone, it should be a hospital for epileptics. The suggestion of such an institution, as one of the needs of the State, was made in the report of 1872-73 from this hospital; and the principal reasons for a separate provision for that class of persons were very succinctly given. It may not be amiss once more to bring them to your notice.

The present population of the hospitals for the insane is too heterogeneous. It is a medley of classes which not only will not coalesce, or exist harmoniously side by side, but are positively repellant or antagonistic one to another. Among the most objectionable of these are the epileptics. From the very nature of their disease they are an almost constant annoyance to the other patients. No person who has seen the terrible spasms, the shakings and the contortions of body, the discoloration of the face and the frothing from the mouth, and heard the peculiar, startling, prolonged and unmistakable cry compounded of a sigh, a groan and a scream of a well-marked epileptic paroxysm, or "fit," can fail to recognize the force of this objection. For the fit gives no early warning of its approach, and, with many, may occur at any time or place, not in the patient's room or the common hall alone, but during an out-of-door walk, at the table at meal-time, in the festivities of the social gathering, or in the course of the chapel exercises as well. In the midst of a sermon or a prayer one of the paroxysms just described, with the consequent stir and bustle of taking the patient from the agitated congregation, constitutes no agreeable or desirable interruption. Yet to precisely such interruptions are we not unfrequently subjected. With the exception of those who have become very seriously demented, and a few whose fits are unwontedly frequent, we cannot refuse to these patients admission to the social entertainments, the other exercises upon secular evenings, or the meetings for worship.



Many of them are, a large part of the time, among the most rational of the patients. They retain their intellectual powers and tastes to a remarkable extent, and the loss of opportunity to participate in the pastimes and the other occasions of ministrations to enjoyment, to instruction, or to the sentiment of devotion, which are the chief means of rendering hospital-life bearable, would be, to them, a great and cruel deprivation.

Again, as a class, they are more than any others liable to accidents and bodily injuries. If seized, when standing, by the fit, they fall, wheresoever they may be and whatsoever is beneath them. They consequently, for proper treatment, require many safeguards which are not generally found in the hospitals. Tables, seats, bedsteads and all other furniture of their apartments should be made as free from corners and sharp angles as possible. The bedsteads should be low and guarded by elevated sides, to prevent them from falling from the bed if seized by the fit in the night. Properly, they should be watched, as they *are* in some English asylums, by night-attendants. Deaths during a fit, by suffocation in the bed-clothing, or with the face so compressed upon the pillows or the mattress that breathing is impossible, may thus be prevented.

In a hospital intended for epileptics alone, the ability to classify these patients for the best interest of both themselves and others, would be much greater than at institutions receiving all classes of the insane. The petulant, the irritable and the pugnacious, of which the proportion is not small, could be brought together or so placed that, even if no advantage accrued to themselves, the annoyance and danger to others would be much more limited. When to these alleged arguments is added the simplicity of purpose which is the accompaniment of a specialty, and which enables men in nearly all branches of human activity to attain a degree of perfection equalled under no other circumstances, it is believed that no reasonable man can hesitate, in the choice of methods for the treatment of epileptics, between a special hospital and a hospital for all classes of the insane.

A special institution of this kind, designed for the accommodation of from two hundred to three hundred patients, and



centrally situated, would not remain long unfilled. The withdrawal from the hospitals for the insane of a large part of the persons who would at first occupy it, would create vacancies in them by which the necessity of an addition to their number would be considerably postponed.

*Secondly.* As another means of retarding that necessity, the Commonwealth should found an institution for inebriates. The need for an establishment of this description is perhaps quite as pressing as that for a hospital for epileptics, and the charters for the two might be granted simultaneously. The arguments in favor of this second object, so far as the character of the candidates for its benefits, and the objections to the treatment of those candidates in the present hospitals are concerned, have already been adduced in the discussion of the subject of inebriates upon former pages of this Report. The arguments in support of the importance, to the inebriates themselves, as well as to the community, of *some* method of reformatory treatment in these cases, are so evident that it would be a work of supererogation to produce them here. The opening of an establishment for this class of persons would again relieve the hospitals for the insane and defer the call for more.

*Thirdly.* The State having supplied itself with the two institutions just advocated, and a further necessity arising, to what shall it next have recourse? The question appears, now, somewhat premature; but be it remembered that we began with the specific object of building for the future. Ever since the decision, by the authorities of Boston, not to erect a new municipal hospital for the insane of that city, it has appeared to me that not many years will elapse before that decision will be reversed. That a city of so much wealth and of such broad philanthropy and beneficence, will long remain without such an institution to perfect its circle of charitable works, is a proposition difficult of belief. If this opinion be correct, a hospital may thus be erected within the precincts or in the immediate neighborhood of the capital of the State, sufficiently early again to relieve the similar state hospitals, and enable the Commonwealth still longer to defer the time of increasing the number of them.

But should the authorities of Boston adhere to their present



policy in the matter, the State will be obliged to assume the burden, and add one more to the number of existing institutions. Prospectively it would appear to be her best policy to place it in or very near Boston. It should be comparatively small (though, in my view, *absolutely large*), furnishing accommodations for two hundred and fifty, or, at the utmost, three hundred patients. It should be, moreover, most emphatically a *hospital*, considering the signification of that word to be an institution for curative treatment. Recent cases, and those which, though of origin more remote, present a reasonable prospect of restoration, should alone or chiefly be received. Boston will soon be sufficiently populous, even if it be not so now, to keep constantly filled a house of the proposed dimensions and conducted upon the principle proposed. Being a port of immigration, the number of patients furnished by it will continue to be, as it now is, disproportionately large as compared with its population.

*Fourthly.* What will be the problem presented for solution when Boston shall have been supplied with its special hospital, from the municipal treasury, or with its equivalent from the funds of the Commonwealth, and the call for further room for the insane shall again be heard? It is to be hoped that the practical solution of this problem will be left to "the children of the seventh generation" of those who read this Report, or rather those who might read it if they would,—for he must be a man of some moral courage who will venture to assert or to assume that anybody really reads a report from a hospital for the insane. Yet the exigency and the problem suggested will come, and that, too, judging of the future by the past, before the advent of the *seventh*, or, probably, of the *third*, generation from even the well-grown might-be readers mentioned.

It is to be hoped that the State has already made provision for its last gigantic hospital; that it will return to the wisdom of the fathers, in this matter, and authorize no more examples of condensed townships of the insane. These terms are used advisedly. At the time of taking the national census of 1870, there were no less than seventeen towns in the Commonwealth neither of which had so large a population as is now sheltered by the roof beneath which these words are written.



It is not my intention to enter into an exhaustive argument in support of the superiority of hospitals of a capacity not exceeding two hundred and fifty or three hundred beds, to those of larger dimensions. One thing is clearly true. Were it not generally believed that the expense, per capita, of supporting patients in a small hospital is greater than in a large one, we should never have large ones. I wish, as briefly as convenient, to examine the matter in relation to this test argument, in order to ascertain whether, practically, we are not deceiving ourselves.

Two large state hospitals are now in process of construction. That at Worcester is designed for four hundred patients. It is apprehended that, of all men properly qualified to form an opinion in the premises, no one expects that it will be completed for less than a million of dollars. That at Danvers is designed for five hundred patients; and the appropriations for it, if I mistake not, amount already to nine hundred thousand dollars. I know of no reason that the ultimate cost of this establishment should be less than of that at Worcester. My own opinion is, that when they shall have both become as nearly complete in furniture and all other appointments as the Northampton Hospital, it will probably be found that each of them has cost considerably more than a million of dollars.

But, not to assume a seemingly extravagant sum, we will suppose them completed each for one million of dollars. That will be equal, at Danvers, to two thousand dollars per patient; and, at Worcester, to twenty-five hundred dollars per patient, according to the contemplated number to be accommodated. At the Willard Asylum, in the State of New York, buildings for the accommodation of two hundred and fifty patients have recently been erected. The trustees of the institution, in describing them, say:—

“The group consists of five brick buildings. The centre building is arranged with dining-rooms for the whole group, with a rear wing for kitchen and boiler-room. On either side of this central building are two dormitory-buildings, each with capacity for fifty patients. These buildings have inner partition-walls of brick, iron sash and guards, are plain, substantial, well-provided buildings, with all the usual bathing and water-closet appliances and fixtures. They present exter-



nally a fine appearance, and internally are arranged for the comfort, convenience and safety of the inmates, without expensive ornamentation. They are easily warmed, convenient for administration, comfortable for patients, and are well ventilated. Taken altogether, they are most desirable buildings for the class of patients for which they are intended. They have been built, warmed with steam, furnished and fully provided for occupancy for five hundred dollars per patient."

Having never seen these buildings, I must trust, as to their suitability, to the opinion of the trustees, which, of course, is undoubtedly correct. A photographic view of them shows that they are so near each other that, if united by very short corridors, they would be as essentially one building as any of the state hospitals of Massachusetts.

Now, if New Yorkers, who hitherto have not become proverbial for a too rigid economy in the expenditure of the people's money in the construction of public works, can erect and furnish a small hospital for five hundred dollars per patient, the people of Massachusetts could probably do the same for twice that sum, or one thousand dollars per patient. The additional five hundred dollars ought to be sufficient to make such modifications of architecture and of internal arrangement, together with additional fixtures, furniture and ornamentation as would meet the expectations of a large majority of patients supported at the expense of individuals.

According to our supposition, then, the small hospital will not cost so much, per patient, as the large hospital by fifteen hundred dollars in respect to Worcester, and one thousand dollars in respect to Danvers. At seven per cent. the annual interest of this fifteen hundred dollars is one hundred and five dollars, and that of the one thousand dollars is seventy dollars. The State, therefore, will, in effect, pay annually to the large hospitals for the mere shelter of each of its paupers, the sums mentioned (\$105 and \$70) *in excess* of what, for the same thing, it would pay to the small hospital. This is equal to two dollars and two cents (\$2.02) per week, at Worcester, and one dollar and thirty-four cents (\$1.34) at Danvers.

The State now pays directly to each of its hospitals three dollars and fifty cents (\$3.50) per week for the maintenance, including clothing, of each of its paupers. If that sum be



continued after those two hospitals shall be put in operation, the expense to the State, per week, for each pauper, will be as great, at Worcester, as it would be at the small hospital if it paid the latter ( $\$3.50 + \$2.02 = \$5.52$ ) five dollars and fifty-two cents per week; and at Danvers, as great as it would be at the small hospital, at ( $\$3.50 + \$1.34 = \$4.84$ ) four dollars and eighty-four cents per week. Who believes that, in the current expenses of two hospitals, one of them having two hundred and fifty and the other five hundred patients, there is necessarily so great a difference? I, for one, do not. If *really, practically* not, then the deciding or test argument in favor of the large hospital falls to the ground, and the small hospital is the least expensive.

Let us return, then, to our scheme for the future. After another hospital shall have been erected in or near Boston, and the need for more shall become apparent, I would found a small one in whatsoever section of the State should appear, at the time, to be best adapted to the convenience of the people. And in all future similar exigencies I would pursue the same plan, disseminating these smaller institutions through the Commonwealth according to the massing of its population in the different sections.

The smaller hospitals should be as essentially curative institutions as those which are now in operation. They should be organized with an efficient medical staff, and so furnished with the remedies of the dispensary and the munitions of the infirmary as to properly entitle them to the name *hospital*. They *should* receive as, if so officered and supplied, they *would* receive, all classes of patients, state, town and private, as well as those the origin of whose disease is either recent or remote.

I trust that the idea of asylums for incurables is exploded, not only now, but for all coming time, in Massachusetts. And, lest I may be misunderstood, you will permit me to say that my opinion of this class of institutions is of no recent origin; and that, since its formation, it has undergone no change. More than twenty years ago, I wrote as follows:—

“I conceive that the greatest objection to all and any asylums for incurables, is their liability to neglect and abuse. They must be



directed by an executive officer of ability, energy and constant watchfulness, or their natural tendency to degeneracy will not be counteracted. If such institutions *must* exist, let them be organized as if they were for curables, with a physician, of unquestionable capacity for his place, as superintendent." \*

Again, more than six years ago, the opinion was thus expressed:—

“It has always appeared to me that the greatest objection to receptacles for the incurable, the objection, indeed, paramount not only to all others, but to all arguments in favor of such receptacles, is their liability to degeneration, neglect, and, as perhaps a necessary consequence, the abuse of the inmates. Pecuniary economy is not merely the point of departure, but, as it were, the very germ itself of their origin. Based upon the principle of frugal if not parsimonious expenditure, they cannot command the services, for officers, of men of superior qualifications, and, even if they could, the mass of incurable disorder within their walls would present no sufficient stimulus to retain such men. The same influences would have a similar effect upon the boards of trustees or managers, and gradually, in the nature of things, interest, if it ever existed, would flag, and neglect and abuse must almost necessarily follow. The history of such receptacles in Europe generally confirms the truth of this position.” †

If a separate institution for that class of patients be thus objectionable, much more is that arrangement by which the same class is domiciled in a department of an almshouse. This State, however, has not always acted in accordance with that proposition.

“Advance!—in a retrograde direction!” shouted, some sixty years ago, a captain of militia, in one of the central towns of Worcester County, to the company of embryo soldiers whom he was exercising in the drill. And, as obedience is the first duty of the soldier, it is to be inferred that they did so advance. “Advance!—in a retrograde direction!” said, in effect, the legislature of Massachusetts, and the mandate was obeyed by the erection of a “receptacle” for chronic insane, in connection with the State Almshouse, at Tewksbury.

\* Institutions for the Insane, in Prussia, Austria and Germany, p. 23.

† Address before the Massachusetts Medical Society, at the Anniversary meeting, in Boston, June 2, 1868.



The buildings of that receptacle are sufficiently good for their purpose. They are commodious, airy, apparently comfortable, and not unsuitably arranged internally. They are, indeed, even better than those for a similar class of patients at some of the foreign institutions whose renown for excellence is co-extensive with the modern scheme for the treatment of the insane. The objections, however, to that receptacle are several. First, it is founded upon the erroneous elementary principle of separation of incurables from curables; secondly, it is wrong in its union with an institution for materially different purposes; and thirdly, it is wrong in its subordination, as a d epartment of a large institution, instead of having a perfect and independent organization for itself.

Among the now numerous class of chronic insane dependent upon the charity of the Commonwealth, there are, and undoubtedly there always will be, a large number in the lower grades of mental status and of bodily health. We have many of them at Northampton. With very low vitality, they cannot resist, like persons of abundant nervous energy, the encroachments of disease. Nor, if attacked, can they, for the same reason, successfully withstand and overcome its effects. Life, with them, is destroyed by disorders which make little impression on stalwart manhood. Hence these incurables require a medical care as constant and as watchful as the more debilitated and sickly class of curables. They must be supported by tonics, and so continually observed that, in the event of the approach of other disease than mere debility, that disease may be combated from the earliest moment at which it becomes perceptible. Herein consists, to a no unimportant extent, the necessity of an efficient medical force for every institution in which this class of patients is treated; and an efficient medical force, with attention undivided, is rarely found without an independent organization.

If the views expressed in what has here been written be correct, it behooves the Commonwealth, in support of the character which it has so long sustained for eminence in the liberality and excellence of its enterprises for the relief of suffering humanity, to abolish the receptacle at Tewksbury at the



earliest practicable day. This can probably be done with no sacrifice of property. The legitimate occupants of the State Almshouse are, doubtless, increasing in number, and will continue to increase, with the growth of the population and the continuance of immigration. They will require more room at a time not far distant. The day of that requirement might well be hastened by the destruction of the two small and old wooden edifices, the lowness of the rooms, and the old-fashioned deficiency of means of ventilation of which, render them, if measured by the present standard of knowledge, imperfect edifices for the purposes to which they are devoted. Thus, then, tenants for the receptacle may be found within a comparatively limited period, and its present class of occupants may be transferred to one or several of the institutions named in the course of these remarks.

Our acknowledgments are due to Miss Dix for the gift of a large, mounted parlor-kaleidoscope; to the old Book-Club of Northampton, for several volumes of magazines and reviews; to the publisher of the "Turner's Falls Reporter," for a copy, regularly, through a large part of the year, of that newspaper; and to a relative of a former patient, for three bound volumes of the "London Illustrated News," and four volumes, also bound, of "Waldie's Circulating Library."

But one change in the staff of officers has taken place in the course of the year. In the early part of June, much to my regret, Dr. E. R. Spaulding withdrew from the hospital, with a prospect of engaging in general practice. Elected by your board, Dr. Alonzo S. Wallace became his successor, and has performed the duties with a power of adaptation to the place and a degree of faithfulness which merit my highest commendation.

Approaching a conclusion, I am reminded, by memory, that the tenth anniversary of the day of my first connection with the institution has passed. Very naturally arises the question, What is the product of the effort of a decennium? Wisely counselled upon one side by the Board of Trustees, and ably assisted upon the other by subordinates, there should be some visible or otherwise evident favorable results. Avoid-



ing any endeavor to seek those results in the establishment itself, as now existent, or in the manner of its operation, I may perhaps be permitted to exhibit them in a direction which has been very rarely mentioned in my annual reports to your board. I allude to the finances.

In April, 1865, the hospital was freed from debt, and the financial statement, at the close of that month, showed a balance of three hundred and two dollars and four cents (\$302.04) in its favor. Within the first three subsequent years it received a direct bonus from the State of five thousand dollars, in two appropriations, for specific purposes; one of two thousand and the other of three thousand dollars. No other assistance from the State has been given it, other than the legal pay for the support, at three dollars and fifty cents per week each, of the patients dependent upon the Commonwealth.

As an offset to the five thousand dollars bonus, the hospital has purchased and paid for several small lots of land, the total cost of which was seven thousand four hundred and twenty-five dollars (\$7,425.00). The State, then, has been overpaid for its bonus in the sum of two thousand four hundred and twenty-five dollars (\$2,425.00).

The amount paid by the hospital for repairs and improvements, in the course of the nine years from September 30, 1865, to September 30, 1874, is ninety-five thousand three hundred and eighteen dollars and ninety-one cents (\$95,318.91).

The surplus of cash assets now on hand is eighteen thousand eight hundred and twenty-eight dollars and forty-seven cents (\$18,828.47), or eighteen thousand five hundred and twenty-six dollars and forty-three cents (\$18,526.43) larger than it was on the 30th of April, 1865.

The purchased provisions and supplies, including fuel and stored clothing, now on hand and paid for, are estimated to have cost fourteen thousand eight hundred and eighty-one dollars and ninety-eight cents (\$14,881.98). The amount of similar supplies on the 30th of April, 1865, was two thousand and five hundred dollars (\$2,500.00). The increase of assets under this head is, therefore, twelve thousand



three hundred and eighty-one dollars and ninety-eight cents (\$12,381.98).

The value of household furniture in the hospital is, at a low estimate, at least ten thousand dollars greater than it was on the 30th of April, 1865, at the same rate or standard of appraisal. To be certain, however, of no exaggeration, let it be called eight thousand dollars.

Collecting these several sums, the account of debit of the Commonwealth to the hospital appears to be as follows:—

Excess of cost of land over direct bonus, . . . . .	\$2,425 00
Repairs and improvements, . . . . .	95,318 91
Excess of present cash assets, . . . . .	18,526 43
Increase of provisions and supplies, . . . . .	12,381 98
Increase of furniture, . . . . .	8,000 00
	<hr/>
Total, . . . . .	\$136,652 32

The *necessary* current repairs of the buildings may be estimated at three thousand dollars annually. Deducting this sum for each of the nine years since September 30, 1865, a total of twenty-seven thousand dollars (\$27,000.00), there is a remainder of one hundred and nine thousand six hundred and fifty-two dollars and thirty-two cents (\$109,652.32). To this amount, then, has the hospital assisted itself to things for most of which it is generally expected that such institutions will rely upon direct appropriations from the treasury of the Commonwealth.

With no recollection of an unkind or disagreeable word or act from any member of your board, at any time during my connection with the hospital, but with many pleasant memories of an opposite character, this Report is respectfully submitted.

PLINY EARLE,  
*Superintendent.*

NORTHAMPTON, October 15, 1874.

## APPENDIX.

TABLE No. 1.—Admissions.—1873-74.

MONTHS.	BY COMMITMENT.			FROM OTHER STATE HOSPITALS.			TOTALS.		
	Males.	Fem.	Total.	Males.	Fem.	Total.	Males.	Females.	Total.
October, 1873, . . .	5	2	7	-	-	-	5	2	7
November, . . .	7	1	8	14	10	24	21	11	32
December, . . .	6	-	6	-	4	4	6	4	10
January, 1874, . . .	5	4	9	10	-	10	15	4	19
February, . . .	2	6	8	7	6	13	9	12	21
March, . . .	6	4	10	-	-	-	6	4	10
April, . . .	5	4	9	2	6	8	7	10	17
May, . . .	9	11	20	-	-	-	9	11	20
June, . . .	12	6	18	-	-	-	12	6	18
July, . . .	5	2	7	2	13	15	7	15	22
August, . . .	2	3	5	-	-	-	2	3	5
September, . . .	6	6	12	-	-	-	6	6	12
Totals, . . .	70	49	119*	35	39	74	105	88	193

\* Includes the patients transferred from Tewksbury and Monson.

TABLE No. 2.—Discharges.—1873-74.

MONTHS.	DIRECT.			REMOVED BY BOARD STATE CHARITIES.			TOTALS.		
	Males.	Fem.	Total.	Males.	Fem.	Total.	Males.	Fem.	Total.
October, 1873, . . .	4	1	5	-	-	-	4	1	5
November, . . .	4	5	9	-	-	-	4	5	9
December, . . .	7	2	9	-	-	-	7	2	9
January, 1874, . . .	2	3	5	3	1	4	5	4	9
February, . . .	2	4	6	-	-	-	2	4	6
March, . . .	7	-	7	1	1	2	8	1	9
April, . . .	7	7	14	2	-	2	9	7	16
May, . . .	4	1	5	1	1	2	5	2	7
June, . . .	2	-	2	1	-	1	3	-	3
July, . . .	4	4	8	10	9	19	14	13	27
August, . . .	3	2	5	2	-	2	5	2	7
September, . . .	6	2	8	4	6	10	10	8	18
Totals, . . .	52	31	83	24	18	42	76	49	125



TABLE No. 3.—*Daily Average Number of Patients in the Hospital.—1873-74.*

MONTHS.	Males.	Females.	Total.
October, 1873, . . . . .	208.61	222.97	431.58
November, . . . . .	223.40	231.63	455.03
December, . . . . .	221.55	230.45	452
January, 1874, . . . . .	230.29	230.80	461.09
February, . . . . .	236.71	236.96	473.67
March, . . . . .	233.58	237.77	471.35
April, . . . . .	232.30	237.03	469.33
May, . . . . .	232.06	241.39	473.45
June, . . . . .	238.56	250.10	488.66
July, . . . . .	238.48	252.74	491.22
August, . . . . .	233.03	254.35	487.38
September, . . . . .	228.30	252.30	480.60
Average for the year, . . . . .	229.67	239.87	469.54*

\* These totals were obtained by the division of the sums of daily residence, for the year, by 365.

TABLE No. 4.—*Nativity of the Patients Admitted.—1873-74.*

NATIVITY.	Males.	Females.	Total.
Maine, . . . . .	1	1	2
New Hampshire, . . . . .	1	2	3
Vermont, . . . . .	4	2	6
Massachusetts, . . . . .	34	18	52
Connecticut, . . . . .	3	4	7
New York, . . . . .	2	5	7
Pennsylvania, . . . . .	—	1	1
Maryland, . . . . .	1	—	1
District of Columbia, . . . . .	—	1	1
Indiana, . . . . .	1	—	1
Alabama, . . . . .	1	—	1
Unknown, . . . . .	2	—	2
Americans, . . . . .	50	34	84

TABLE No. 4.—Concluded.

NATIVITY.	Males.	Females.	Total.
Canada, . . . . .	—	3	3
Nova Scotia, . . . . .	1	1	2
Newfoundland, . . . . .	—	1	1
England, . . . . .	9	2	11
Ireland, . . . . .	33	38	71
Scotland, . . . . .	4	1	5
Germany, . . . . .	4	5	9
France, . . . . .	1	—	1
Spain, . . . . .	—	1	1
Wales, . . . . .	—	1	1
Portugal, . . . . .	1	—	1
Saxony, . . . . .	1	—	1
Sweden, . . . . .	—	1	1
West India Islands, . . . . .	1	—	1
Foreigners, . . . . .	55	54	109
Americans, . . . . .	* 50	34	84
Totals, . . . . .	105	88	193

TABLE No. 5.—Residence of the Patients Admitted, 1873-74.

COUNTIES.	Males.	Females.	Total.
Hampshire, . . . . .	14	8	22
Hampden, . . . . .	30	21	51
Franklin, . . . . .	8	5	13
Berkshire, . . . . .	12	8	20
Suffolk, . . . . .	23	26	49
Worcester, . . . . .	5	6	11
Bristol, . . . . .	4	—	4
Middlesex, . . . . .	3	7	10
Essex, . . . . .	2	7	9
Norfolk, . . . . .	2	—	2
Plymouth, . . . . .	1	—	1
Barnstable, . . . . .	1	—	1
Total, . . . . .	105	88	193



TABLE No. 6.—*By what Authorities Committed, 1873-74.*

AUTHORITIES.	Males.	Females.	Total.
Probate Court, . . . . .	46	27	73
Overseers of Poor, . . . . .	5	8	13
Board of State Charities, . . . . .	40	45	85
Superior Court, . . . . .	1	—	1
Friends, . . . . .	13	8	21
Total, . . . . .	105	88	193

TABLE No. 7.—*Ages of the Patients Admitted, 1873-74.*

AGES.	Males.	Females.	Total.
Fifteen years and under, . . . . .	—	—	—
From 15 to 20 years, . . . . .	7	5	12
20 to 25 years, . . . . .	13	5	18
25 to 30 years, . . . . .	16	14	30
30 to 35 years, . . . . .	18	10	28
35 to 40 years, . . . . .	14	10	24
40 to 50 years, . . . . .	19	22	41
50 to 60 years, . . . . .	8	12	20
60 to 70 years, . . . . .	8	8	16
70 to 80 years, . . . . .	1	1	2
Unknown, . . . . .	1	1	2
Total, . . . . .	105	88	193

TABLE NO. 8.—*Civil Condition of the Patients Admitted, 1873-74.*

CONDITION.	Males.	Females.	Total.
Married, . . . . .	40	28	68
Single, . . . . .	58	40	98
Widowers, . . . . .	6	—	6
Widows, . . . . .	—	19	19
Unknown, . . . . .	1	1	2
Total of Persons, . . . . .	105	88	193

TABLE NO. 9.—*Occupations of the Men Admitted, 1873-74.*

Merchant, . . . . . 1	Clothing dealer, . . . . . 1
Physician, . . . . . 1	Junk dealer, . . . . . 1
Student, . . . . . 1	Fisherman, . . . . . 1
Manufacturer, . . . . . 1	Butcher, . . . . . 1
Teacher, . . . . . 1	Mill operatives, . . . . . 5
Editor, . . . . . 1	Mechanics, . . . . . 3
Printer, . . . . . 1	Carriage maker, . . . . . 1
Clerks, . . . . . 4	Wood carver, . . . . . 1
Laborers, . . . . . 29	Broom tier, . . . . . 1
Farmers, . . . . . 10	Boot maker, . . . . . 1
Machinists, . . . . . 6	Mason, . . . . . 1
Blacksmiths, . . . . . 2	Carpenter, . . . . . 1
Saloon keeper, . . . . . 1	Polisher, . . . . . 1
Hostlers, . . . . . 2	Hospital attendant, . . . . . 1
Upholsterer, . . . . . 1	Railroad engineer, . . . . . 1
Teamsters, . . . . . 2	Miner, . . . . . 1
Boiler makers, . . . . . 2	Gardener, . . . . . 1
Sailors, . . . . . 5	No occupation, . . . . . 9
Shoemaker, . . . . . 1	
Cloth finisher, . . . . . 1	Total, . . . . . 105



TABLE No. 10.—*Alleged Causes of Insanity of the Patients Admitted.—1873-74.*

CAUSES.	Males.	Females.	Total.
<i>Mental.</i>			
Composing a National Hymn, . . . . .	1	—	1
Love affair, . . . . .	1	—	1
Disappointment, . . . . .	—	2	2
Fright, . . . . .	1	1	2
Domestic trouble, . . . . .	1	2	3
Business troubles, . . . . .	3	—	3
Religious excitement, . . . . .	2	4	6
Loss of friends, . . . . .	3	5	8
Total of mental, . . . . .	12	14	26
<i>Physical.</i>			
Congenital, . . . . .	1	—	1
Apoplexy, . . . . .	1	—	1
Opium eating, . . . . .	1	—	1
Change of life, . . . . .	—	2	2
Paralysis, . . . . .	2	—	2
Brain fever, . . . . .	2	—	2
Sunstroke; . . . . .	2	—	2
Puerperal, . . . . .	—	2	2
Injury, . . . . .	3	—	3
Injury of the head, . . . . .	5	—	5
Epilepsy, . . . . .	4	1	5
Masturbation, . . . . .	5	—	5
Overwork, . . . . .	4	3	7
Intemperance, . . . . .	21	3	24
Ill-health, . . . . .	5	21	26
Total of physical, . . . . .	56	32	88
Total of mental, . . . . .	12	14	26
Unknown, . . . . .	37	42	79
Total of persons, . . . . .	105	88	193

TABLE NO. 11.—*Duration of Disease before Admission, 1873-74.*

DURATION.	Males.	Females.	Total.
Under 1 month, . . . . .	20	9	29
From 1 to 3 months, . . . . .	14	8	22
3 to 6 months, . . . . .	7	11	18
6 to 12 months, . . . . .	5	14	19
1 to 2 years, . . . . .	13	10	23
2 to 5 years, . . . . .	12	18	30
5 to 10 years, . . . . .	2	3	5
10 to 20 years, . . . . .	5	4	9
20 to 30 years, . . . . .	—	3	3
Congenital, . . . . .	1	—	1
Unknown, . . . . .	26	8	34
Total, . . . . .	105	88	193

TABLE NO. 12.—*Age at first attack of Insanity, 1873-74.*

AGES.	Males.	Females.	Total.
Fifteen years and under, . . . . .	1	1	2
From 15 to 20 years, . . . . .	9	8	17
20 to 25 years, . . . . .	13	5	18
25 to 30 years, . . . . .	9	12	21
30 to 35 years, . . . . .	9	10	19
35 to 40 years, . . . . .	8	8	16
40 to 50 years, . . . . .	7	12	19
50 to 60 years, . . . . .	7	7	14
60 to 70 years, . . . . .	1	4	5
70 to 80 years, . . . . .	1	—	1
Unknown, . . . . .	40	21	61
Total, . . . . .	105	88	193



TABLE NO. 13.—*Status of the Patients Admitted.—1873-74.*

HOW SUPPORTED.	Males.	Females.	Total.
<i>As first admitted.</i>			
Supported by State, . . . . .	67	63	130
Supported by Towns and Cities, . . . . .	22	15	37
Supported by individuals, . . . . .	16	10	26
Total of persons, . . . . .	105	88	193
<i>Of the same patients as at present, or when discharged.</i>			
Supported by State, . . . . .	67	63	130
Supported by Towns, . . . . .	21	15	36
Supported by individuals, . . . . .	17	10	27
Total of persons, . . . . .	105	88	193

TABLE NO. 14.—*Deaths.—1873-74.*

CAUSES OF DEATH.	Males.	Females.	Total.
<i>Nervous System.</i>			
Tumor of brain, . . . . .	1	—	1
Epilepsy, . . . . .	1	—	1
Exhaustion of acute mania, . . . . .	1	—	1
Exhaustion of chronic mania, . . . . .	1	2	3
Exhaustion, . . . . .	2	1	3
Apoplexy, . . . . .	1	1	2
Sequelæ of apoplexy, . . . . .	1	—	1
Paresis, . . . . .	3	—	3
<i>Respiratory.</i>			
Phthisis pulmonalis, . . . . .	1	4	5
<i>Digestive.</i>			
Gastric fever, . . . . .	—	1	1
<i>Skin.</i>			
Erysipelas, . . . . .	—	1	1
<i>General.</i>			
Old age, . . . . .	1	—	1
Marasmus, . . . . .	1	1	2
Total, . . . . .	14	11	25

TABLE No. 15.—*Number and Status of Patients at the close of each week in the Year, 1873-74.*

DATE.	State.	Town.	Private.	Total.	DATE.	State.	Town.	Private.	Total.
<b>1873.</b>					<b>1874.</b>				
Oct. 4, .	246	100	85	431	Apr. 4,	289	96	85	470
11, .	246	99	86	431	11,	289	97	83	469
18, .	246	100	85	431	18,	289	97	81	467
25, .	246	100	85	431	25,	295	98	79	472
Nov. 1, .	247	100	86	433	May 2,	293	101	78	472
8, .	267	103	88	458	9,	294	103	77	474
15, .	268	104	88	460	16,	294	102	76	472
22, .	267	103	85	455	23,	295	102	75	472
29, .	267	103	85	455	30,	299	103	78	480
Dec. 6, .	266	102	83	451	June 6,	300	105	78	483
13, .	266	102	81	449	13,	302	107	79	488
20, .	269	100	83	452	20,	305	107	79	491
27, .	269	100	85	454	27,	307	108	80	495
<b>1874.</b>					July 4,	305	108	78	491
Jan. 3, .	276	99	85	460	11,	303	110	79	492
10, .	277	99	86	462	18,	302	111	79	492
17, .	274	99	87	460	25,	301	111	78	490
24, .	275	97	89	461	Aug. 1,	302	110	77	489
31, .	274	98	90	462	8,	303	109	77	489
Feb. 7, .	289	100	90	479	15,	302	109	77	488
14, .	289	98	89	476	22,	300	111	76	487
21, .	287	98	87	472	29,	297	110	76	483
28, .	289	97	86	472	Sept. 5,	293	111	76	480
Mar. 7, .	288	96	86	470	12,	293	111	76	480
14, .	288	98	86	472	19,	297	112	76	485
21, .	289	98	86	473	26,	291	110	77	478
28, .	288	98	85	471					



TABLE NO. 16.—*List of Articles made in the Sewing-Room.—1873-74.*

Sheets, . . . . .	606	Dresses, . . . . .	332
Pillow cases, . . . . .	655	Skirts, . . . . .	292
Bolster cases, . . . . .	13	Chemises, . . . . .	393
Bed-spreads, . . . . .	96	Sacques, . . . . .	43
Bed ticks, . . . . .	201	Waists, . . . . .	6
Pillow ticks, . . . . .	56	Night-dresses, . . . . .	41
Curtains, . . . . .	40	Capes, . . . . .	2
Bureau covers, . . . . .	11	Aprons, . . . . .	179
Waiter napkins, . . . . .	9	Bonnets, . . . . .	80
Tea spreads, . . . . .	10	Shirts, . . . . .	323
Napkins, . . . . .	20	Shirtees, . . . . .	8
Dish towels, . . . . .	355	Pants, . . . . .	10
Rollers, . . . . .	123	Suspenders, pairs, . . . . .	195
Carpets, . . . . .	3	Drawers, . . . . .	52
Pieces of carpet, hemmed, . . . . .	130	Collars, . . . . .	137
Handkerchiefs, . . . . .	91	Camisoles, . . . . .	24
Neckties, . . . . .	114	Camisole suits, . . . . .	4
Clothes bags, . . . . .	14	Articles repaired, . . . . .	23,222

TABLE NO. 17.—*Monthly Consumption of Gas.—1873-74.*

MONTHS.	Cubic Feet.	* Daily Average.
October, 1873, . . . . .	34,650	1,117.74
November, . . . . .	42,350	1,411.66
December, . . . . .	47,800	1,541.93
January, 1874, . . . . .	44,950	1,450.00
February, . . . . .	33,250	1,187.5
March, . . . . .	27,750	895.16
April, . . . . .	18,450	515.00
May, . . . . .	14,050	453.22
June, . . . . .	11,900	396.66
July, . . . . .	11,450	369.35
August, . . . . .	13,150	424.19
September, . . . . .	19,700	656.66
Total, . . . . .	319,450	875.21*

\* Daily average for the year.

TABLE No. 18.—Supplies for the several Departments for the year 1873-74.

	Sheets.	Fellow Cases.	Bed Spreads.	Blankets.	Rubber Sheets.	Bed Ticks.	Pillow Ticks.	Towels.	Curtains.	Wash Bowls.	Ewers.	Chambers.	Mirrors.	Hair Brushes.	Carpet Strips.	Plates.	Cups.	Saucers.	Tumblers.	Mugs.	Bowls.	Pitchers.	Syrup Cups.	Castles.	Knives.	Forks.	Combs.
<i>Men's Department.</i>																											
Upper 1st Hall, . . .	10	14	6	3	-	5	2	-	3	-	3	4	-	-	10	7	4	8	66	-	6	-	-	3	3	2	-
2d Hall, . . .	24	24	-	12	-	7	2	12	-	2	-	14	2	-	2	3	17	4	24	-	-	-	-	2	-	-	1
3d and 4th Halls,	20	28	3	26	-	6	2	4	-	-	-	32	-	1	-	8	-	12	-	3	-	-	-	-	-	-	3
Middle 1st Hall, . . .	18	24	-	3	2	9	1	15	-	1	-	5	-	1	-	-	6	24	-	-	3	1	-	-	-	-	1
2d Hall, . . .	24	16	5	15	1	19	4	2	1	-	-	14	1	1	-	-	-	6	-	-	-	1	-	-	-	-	5
3d and 4th Halls,	18	24	4	23	-	-	6	-	-	-	-	28	-	1	-	6	7	15	-	-	-	-	1	-	-	-	3
Lower 1st Hall, . . .	18	36	-	11	-	11	-	4	-	-	-	5	-	-	4	6	-	28	-	-	4	-	-	3	-	-	2
2d Hall, . . .	54	51	6	27	5	14	12	4	-	-	-	30	-	1	12	1	18	3	3	-	-	-	2	-	-	-	2
3d and 4th Halls,	60	46	5	28	9	5	-	10	-	-	2	19	-	1	1	-	18	18	-	-	2	1	-	-	-	-	2
<i>Women's Department.</i>																											
Upper 1st Hall, . . .	16	12	-	-	-	1	1	24	2	1	2	-	1	-	1	-	-	6	18	-	-	1	1	1	-	-	-
2d Hall, . . .	39	41	6	12	3	2	2	40	6	-	2	18	2	-	-	27	18	24	24	-	12	4	1	3	7	7	-
3d Hall, . . .	27	27	1	5	-	14	3	15	6	-	-	18	-	-	-	6	6	12	3	4	-	1	-	1	-	-	7
4th Hall, . . .	24	24	-	-	1	-	-	-	-	-	-	6	1	-	-	-	6	10	6	-	3	1	-	-	-	-	2
Middle 1st Hall, . . .	27	31	12	4	-	8	6	24	5	-	-	12	3	-	10	6	-	18	24	-	3	-	2	-	6	6	5



Middle 2d Hall,	48	48	14	12	-	-	1	42	2	-	-	12	18	18	6	-	7	1	-	4	4	10					
3d Hall,	12	24	-	12	-	-	-	30	1	-	-	-	-	-	-	-	-	-	-	-	-	9					
4th Hall,	24	24	4	12	3	-	-	12	-	-	-	-	-	-	-	3	4	-	-	-	-	-					
Lower 1st Hall,	24	-	12	6	9	-	-	12	-	8	-	-	-	-	12	-	1	1	-	-	-	9					
2d Hall,	36	40	2	6	13	12	-	30	-	-	-	-	6	3	3	12	3	-	-	-	-	15					
3d Hall,	27	27	-	10	4	24	-	24	1	-	-	-	-	-	-	-	3	1	-	-	-	11					
4th Hall,	-	2	2	9	5	6	3	12	1	1	6	12	6	6	-	3	-	2	-	-	-	3					
Kitchen,	-	-	-	-	-	2	-	-	-	-	150	24	18	18	42	-	24	1	-	9	30	1					
Rear,	29	26	3	1	2	13	-	1	1	2	-	-	-	-	-	-	-	3	-	-	-	-					
Centre,	20	22	-	-	-	18	-	-	1	-	2	-	36	1	2	15	4	-	-	-	-	-					
Aggregates,	599	611	85	237	39	151	70	266	29	7	12	368	17	6	40	250	119	287	232	27	90	26	5	15	32	49	91

TABLE No. 18.—Continued.

	Spoons.	Table Spreads.	Napkins.	Tin Plates.	Tin Cups.	Iron Spoons.	Dish Towels.	Rollers.	Wash Basins.	Soap, lbs.	Brooms.	Whisks.	Dust Brushes.	Scrubg Brushes.	Dust Fans.	Mops.	Pails.	Spittoons.	Blacking.	Shoe Brushes.	Lanterns.	Spools Thread.	Skeins Linen Thread.	Papers Needles.	Papers Pins.	Darning Needles.	
<i>Men's Department.</i>																											
Upper 1st Hall, . . .	4	-	6	-	-	-	-	2	-	20	8	4	-	3	-	-	1	1	4	1	-	1	-	-	-	-	-
2d Hall, . . .	-	2	-	-	-	-	8	8	-	26	21	2	2	1	-	-	-	-	9	2	-	-	-	-	-	-	-
3d and 4th Halls,	6	-	-	3	3	18	10	-	-	38	18	1	1	1	-	1	1	5	5	2	-	-	-	-	-	-	-
Middle 1st Hall, . . .	-	-	-	-	-	12	3	4	1	32	10	2	2	-	-	-	-	-	4	1	-	12	-	-	-	1	-
2d Hall, . . .	-	-	-	-	-	6	-	-	-	38	19	-	-	1	-	2	2	3	8	1	-	-	-	-	-	-	-
3d and 4th Halls,	-	-	-	6	16	30	-	3	-	43	16	1	-	1	-	5	2	10	13	3	-	-	-	-	-	-	-
Lower 1st Hall, . . .	-	-	-	-	1	-	6	-	-	22	10	-	1	-	1	2	-	-	11	-	-	-	40	-	-	-	-
2d Hall, . . .	-	-	-	5	12	28	6	12	1	28	32	1	1	1	-	1	1	4	19	4	-	2	-	-	-	-	-
3d and 4th Halls,	-	-	-	21	10	18	12	-	-	21	16	-	3	-	3	3	2	7	13	1	1	3	-	-	-	-	-
<i>Women's Department.</i>																											
Upper 1st Hall, . . .	-	2	-	-	-	-	-	4	-	16	7	-	-	-	-	-	1	-	-	-	-	-	-	-	3	-	-
2d Hall, . . .	9	4	-	-	-	-	18	4	1	42	18	-	2	-	-	2	2	-	-	-	-	-	-	-	2	-	-
3d Hall, . . .	-	-	-	-	-	6	6	4	-	34	9	-	-	-	-	-	-	-	-	-	-	19	1	1	3	-	-
4th Hall, . . .	-	2	-	2	2	-	-	2	1	16	9	-	1	-	-	-	-	-	-	-	-	3	1	2	-	-	-
Middle 1st Hall, . . .	-	-	-	-	3	6	12	-	1	34	21	1	2	1	-	1	3	-	-	-	-	5	-	3	7	-	-





TABLE NO. 19.—*Annual Cost of Gas.*

Y E A R.	Cost of Gas.	Average No. of Patients.	Cost per Patient.
1860-61, . . . . .	\$2,030 39	314.26	\$6 46
1861-62, . . . . .	2,085 29	313.80	6 64
1862-63, . . . . .	2,109 02	355.63	5 93
1863-64, . . . . .	2,069 79	357.63	5 78
1864-65, . . . . .	1,653 05	342.40	4 82
1865-66, . . . . .	1,107 98	376.35	2 94
1866-67, . . . . .	1,056 16	401.03	2 63
1867-68, . . . . .	1,022 51	413.41	2 47
1868-69, . . . . .	903 92	405.10	2 23
1869-70, . . . . .	915 30	408.83	2 23
1870-71, . . . . .	1,043 99	421.90	2 47
1871-72, . . . . .	980 94	428.72	2 28
1872-73, . . . . .	1,006 61	437.23	2 30
1873-74, . . . . .	1,066 74	469.54	2 27

The hospital has always been supplied with gas by the Northampton Gas-Light Company, at the uniform price, under special contract, of three dollars and twenty-five cents (\$3.25) per thousand cubic feet, with an additional charge for meter-rent.



*Trustees of the Northampton Lunatic Hospital.*

N A M E.	Residence.	When app'ted.	Service ended.	From what cause.
Charles E. Forbes, .	Northampton, .	1856	1857	Term expired.
Lucien C. Boynton, .	Uxbridge, . . .	1856	1858	do. do.
Eliphalet Trask, . .	Springfield, . .	1856	-	Still in office.
John C. Russell, . .	Great Barrington,	1856	1859	Resigned.
Horace Lyman, . . .	Greenfield, . . .	1856	1857	Removed.
Charles Smith, . . .	Northampton, . .	1857	1860	Resigned.
Luther V. Bell, . . .	Somerville, . . .	1857	1859	do.
Zebina L. Raymond, .	Greenfield, . . .	1858	1859	do.
Franklin Ripley, . .	Greenfield, . . .	1859	1860	Died in office.
Edward Dickinson, .	Amherst, . . . .	1859	1864	Resigned.
Walter Laflin, . . .	Pittsfield, . . .	1859	1866	Term expired.
Silas M. Smith, . . .	Northampton, . .	1860	1863	do do.
Charles Allen, . . .	Greenfield, . . .	1860	1861	Resigned.
Alfred R. Field, . .	Greenfield, . . .	1861	1864	do.
Edward Hitchcock, .	Amherst, . . . .	1863	-	Still in office.
Silas M. Smith, . . .	Northampton, . .	1864	-	do. do.
Edmund H. Sawyer, .	Easthampton, . .	1864	-	do. do.
Henry L. Sabin, . . .	Williamstown, . .	1866	-	do. do.

*Officers and their Salaries.*

PLINY EARLE, A M., M.D., Superintendent, . . . . .	\$2,500 00
PLINY EARLE, Treasurer, . . . . .	300 00
EDWARD B. NIMS, M D., Assistant Physician, . . . . .	1,200 00
ALONZO S. WALLACE, M.D., Assistant Physician, . . . . .	700 00
WALTER B. WELTON, Clerk, . . . . .	1,000 00
ASA WRIGHT, Farmer, . . . . .	1,000 00
DANFORD MORSE, Engineer, . . . . .	1,000 00
Total of salaries, . . . . .	\$7,700 00

*Number of Persons, other than Officers, employed in the Regular Duties of the Hospital.*

OCCUPATIONS.	Males.	Females.	Total.
Supervisors, . . . . .	1	1	2
Assistant Supervisor, . . . . .	-	1	1
Assistant Clerk, . . . . .	-	1	1
Seamstress, . . . . .	-	1	1
Assistant Seamstress, . . . . .	-	1	1
Laundress, . . . . .	-	1	1
Assistant Laundress, . . . . .	-	1	1
Baker, . . . . .	1	-	1
Steward, . . . . .	1	-	1
General Attendants, . . . . .	11	14	25
Housework, centre building, . . . . .	-	3	3
Cook, . . . . .	-	1	1
Assistant Cooks, . . . . .	1	3	4
Watchman, . . . . .	1	-	1
Carpenters, . . . . .	3	-	3
Painter, . . . . .	1	-	1
Assistant Engineer, . . . . .	1	-	1
Hostler, . . . . .	1	-	1
Farmers, . . . . .	5	-	5
Totals, . . . . .	27	28	55



