

State of the Lincoln Lunatic Asylum, from January 1st, 1851, to December 31st, 1851, inclusive : instituted November 4, 1819 [twenty-eighth report].

Contributors

Lincoln Lunatic Asylum (Lincoln, England)
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STATE

OF THE

LINCOLN

LUNATIC ASYLUM,

From JANUARY 1ST, 1851, to DECEMBER 31ST, 1851, inclusive.

(INSTITUTED NOVEMBER 4, 1819.)

1852.

LINCOLN :

PRINTED BY W. AND B. BROOKE, HIGH-STREET.

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1852.



LINCOLN LUNATIC ASYLUM.

TWENTY-EIGHTH REPORT.

The institution of a Pauper Asylum for this county has materially changed the condition of the Lincoln Lunatic Asylum, as it must at once cause the removal of about two-thirds of the patients, and qualify it for a fuller development of its original object. There are three distinct classes of society, each requiring, under the affliction of insanity, a special mode of accommodation, and source of support. It is important that the individual class, for whose accommodation this Institution is peculiarly adapted, should be understood, and the benevolent purposes for which it was established, carefully carried out, not only for the furtherance of these special purposes, but with a due regard to its future resources.

THE AFFLUENT INSANE.

The Wealthy Insane, whose friends can pay for their accommodation, are properly the subjects for Private Establishments, in which such accommodation varies between the limits of ample

domestic comfort, and opulent arrangements. It has been erroneously attempted, in some instances, to open the public institutions of the kingdom to these classes, at a high rate of remuneration, under the delusive idea that surplus payments could be drawn from this class of patients, to reduce the payments of others in humbler circumstances. This plan was originally a part of the design of the Lincoln Asylum, but was found an utter failure in practice, and it was subsequently exposed and disavowed in the Reports (A) as wholly delusive.

The Lincoln Asylum has not had any payment of its higher class beyond *one guinea* a week, excepting two or three instances (B) at the commencement of the Establishment. It is not now disposed, in any way, to interfere with the Private Establishments for the reception of persons in easy circumstances. The Proprietors of these houses are, for the most part, intelligent and well principled, and it is fortunate that they are so. It is not their interest to ill-use their patients, or to act meanly in their accommodation, or indeed to do anything, which may tend directly or indirectly to shorten life; on the contrary, their interest (if influenced by that alone) would lead them, by an ample allowance of gross diet and stimulants, to retard a cure, which might deprive them of a wealthy patient. We have heard, nevertheless, persons of education applaud the liberality of an establishment, which indulges the patients in beef steaks and eggs for breakfast, and ale and wine for dinner.—Here the Legislature has merely to guard against improper confinement, and to provide against instrumental restraint, and such defect of hygiene as may originate in carelessness, or want of enlightened information.

THE PAUPER INSANE.

The class of Paupers is now amply provided for by the arrangements of the Legislature. To leave this class of patients to the mercy of persons outbidding each other in lowness of price, was to abandon them to suffering and destruction. A profit must be

secured in such cases—and a most ample profit—to remunerate a very forbidding profession ; and whence could it be expected that the profit should arise, except from the pinching cold, bad clothing, low depressing diet, inadequate night accommodation, medical neglect, and coercive oppression to supply the want of attendance. In the Parliamentary County Asylums, the patients and their accommodation are in the hands of competent and highly respectable persons, enabled to draw upon very ample funds. The accommodation ought to be of a superior character, without meanness or grudging ; the attendants should be sufficient, and well qualified ; the resident superintendent should be an enlightened physician, remunerated as a scholar and a gentleman ; and all the appliances should be an example to public establishments of every description, and a nursery of practice and information upon the most important branches of institutional hygiene, and nervous and mental disease. The funds of a county are ample ; waste there should not be, but there ought to be liberality ; and it has hitherto been, in some degree, an act of gross injustice, that wealthy counties and wealthy parishes have diminished their own burdens, by encroaching on the just claims of reduced respectability in distress.

The experience of this house, in respect of pauper patients, would suggest that many parochial patients, dangerous to themselves, a nuisance to the public, and out of the reach of restoration, have been withheld only to evade the additional cost of maintenance. Payments of this description ought to be borne by the whole county, as the nature of the complaint would be a security against abuse from spurious applications. Where persons are maintained from the common fund of a large district, each neighbourhood, it may be said, instead of aiming at economy, will endeavour to share as much of the common fund as possible. This objection, however, does not extend to the definite case of lunacy, in which the Magistrates and Faculty will judge whether the party is or is not fit for confinement. The real danger in these asylums, and in all establishments under legal organization founded on public rates, must be the inevitable and almost irresistible tendency, to assimilate

late the management and treatment of the inmates to that of a public prison, or an union workhouse. It will require care to learn that "keepers," and "cells," and "refractory," and "discipline," are not to be the key-notes of treatment. It will be extremely difficult, and will require the greatest extent of goodness, kindness, kindly feeling, and enlightened habits of mind, to learn that freedom, cheerfulness, amusement and indulgence, access of friends and the public, should be aimed at and promoted to the reasonable verge of security and order;—above all it is necessary that the managers of these Institutions should, (under a due legal allowance) be left to form their own code of Rules and Regulations. The whole enlightened system of prison discipline, has arisen from scattered regulations originating in different quarters. Centralization, in these cases, extinguishes the gradual development of improvement, by making every change over so large a surface almost as onerous as the passing of an act of Parliament. The rules of Union houses well illustrate this position. The centralised detailed regulations of these houses, have doubtless suppressed the development of much valuable principle, which local experience would constantly have suggested.

There is another danger attending the establishment of these Institutions,—the tendency to form them originally on a scale of excessive numbers, or subsequently to extend them beyond proper bounds, as new demands for accommodation may occur. Such multitudinous assemblages are incapable of admitting any proper detailed attention to the cases of individual patients. They become mere depôts, or barracks; while the severe routine, then necessarily demanded, utterly extinguishes all domestic, familiar, and indulgent treatment. Time must determine whether it is better that the limitation of numbers should rest on a subdivision of districts, or on a separation of the sexes, or on some plan determined by the period of attack, or prospects of cure, or greater or less approach to the imbecile or to the idiotic state. The pauper insane of this county have been, for thirty years, under the care of the Boards of this house; and have during that time received, without distinction,

every kind and personal attention with other patients contributing at the same rate.—It is the duty of the Boards to throw out any remarks which this experience may have suggested ; and they have done so, under the gratifying feeling that their former patients are handed over to gentlemen, (many of them Governors of this house) universally esteemed for considerate humanity and disinterested attention to public business.

THE INSANE OF RESTRICTED MEANS.

Circumstances have now reduced the objects of this Institution exclusively to a class, for which it was principally intended on its first formation,—the Insane of Restricted Means. This class eminently demands attention ; and it is most pleasing to find that enlightened men (C) are awakened at last, though at a very late period, to the urgency of such claims for consideration. The Insane of Restricted Means may be divided into two departments ; one embracing persons of education, ministers of all denominations, writers, artists of every description, and the male and female members of educated and decayed families ; and another composed of persons engaged in business, the industrious tradesman and mechanic, industry cut off by disease, or of such modest, humble, but decent means, as the necessary severity of a parochial test must exclude. These are the cases in which the insane are detained in their own families, often to the imminent danger of human life, and too often under a dreadful and continued severity of coercion extorted by circumstances, sinking daily deeper and deeper through familiarity with dirt and privation, till at last the remark of a great writer is accomplished, that “pity may be extinguished in horror.” In other cases the means of the family are gradually allowed to crumble down, sometimes through desperation, until they bring a husband or a wife, upon whom the support partially rested, to the dimensions of public pauperism. Such persons have most pressing claims on public sympathy and charitable endowment. It is not to be expected that wholly gratuitous (D) maintenance should

be afforded, except, perhaps, under some very special circumstances of previous intellectual refinement. The sound principle—the Boards would hope—is to be found in the practice of their own establishment. They have certain rates of payment, which are selected by the friends of the patients, according to the means or feelings of the family. These payments are brought down to the very lowest level which the Boards can effect, without the concession of a single iota of the curative means on which the treatment should be founded. For this purpose the buildings, the grounds, the fixtures, and various other appliances, are a large and magnificent capital for the gratuitous use of the inmates. The proprietorship of the Governors is also here of gratuitous administration; and so severely such, that no Governor can directly or indirectly derive any profit from the administration of the fund. These sources of expense must and ought to raise the charge in any private establishment, which might be open to receive this class of inmates. In addition to this invested capital, the Boards have not at command any funds whatsoever, beyond the payments of the patients themselves, some subscriptions, and occasional donations and legacies. Out of these funds the patients are wholly maintained, except in clothing; the establishment is kept up, and the wear and tear of furniture and buildings replaced. These circumstances enforce a rigid economy; and it is to be feared that the Commissioners in Lunacy have, on some occasions, misunderstood the real position of the Institution, and over-rated its resources.

Insanity will doubtless be admitted to be a disease more properly belonging to the physician than to the surgeon, or general practitioner. As this establishment has not any endowment, and has not any claim upon public rates, physicians of experience on the spot have afforded their gratuitous services, almost daily as the cases may require, and on the principle which regulates similar gratuitous services at public hospitals supported by subscription. These gratuitous services have enabled the Governors to dispense with the services of an experienced physician at an ample salary, to reside in the house, as ought always to be the case, where the

medical treatment is in the hands of a resident officer. The resident house surgeon at Lincoln does not prescribe except on urgent occasions, and such is the universal usage in other public hospitals. This circumstance has enabled the Boards to place in office intelligent young men, who look to it as an introduction to more advantageous situations.

The Lincoln Asylum has not restricted its admissions to patients belonging to the County, and will be much less disposed to do so for the future; and may congratulate itself on being an Institution which acted, from its commencement, on the principle so humanely agitated under the sanction of Dr. Conolly. A few cases have been introduced into the house by the voluntary subscriptions of the neighbours of the parties; and it is not to be doubted that some systematic arrangement of this sort might be adopted, to meet special and distressing cases, particularly among educated and reduced individuals. Whatever may be the course of future events in reference to the "Insane of Restricted Means," it is to be earnestly hoped that the attaching such establishments to pauper asylums, may not be further extended. The complication introduced, the interfering principles, the jealousies, and the tendency against indulgent domestic management, are all most objectionable.

MISCELLANEOUS.

The Statistics of insanity, as deducible from the usual returns, may be of very little value, and shaped to almost any aspect. For instance, the rate of Mortality may be actually large, and yet may appear very small upon the face of the return, by a systematic rejection of patients in a sinking state, or by the adoption of the same principle in returning to their friends patients in a declining condition. This may be done on the defensible ground that they have become tractable, and the proper objects of domestic kindness and management in the bosoms of their own families. In these cases this Institution has always disregarded appearances.

Should the opening, about to be made by the removal of the pauper patients from this Institution, be taken advantage of by the public, who have hitherto been so frequently disappointed in a demand for admission, the statistics of Recovery may be expected to exhibit an improved aspect (E.) The prospects of Recovery are principally confined to cases of *recent* attack, which may be considered also as generally the cases of *recent* admission; but, in an establishment of limited accommodation, additional and recent cases must very frequently be declined, so that, when an Institution is of some standing, the old inveterate cases constitute the great body of the inmates, leaving a very small margin for hopeful cases. At this time in this Institution, out of 126 patients, only *eleven* are returned as deemed curable; and it is obvious that the statistics of such an insane population must be highly unfavourable, even under the most approved practice. The tabular rate of recovery in this house, shows a marked improvement in the years 1848-9, when, under urgent pressure and demand for accommodation, beds were placed even in the galleries, opening the way for a greater number of recent cases.

In recent cases Recovery will frequently arise from the mere hygiene and moral routine of the house, and the withdrawal of the patient from those bodily sources of diseased action and irritation which may have occasioned the complaint, or forced the development of a latent bias. At this period of the attack also, mental disturbance, which may have arisen from sympathy with a disordered function in some other part of the body, and may be remediable by direct, recognised, and legitimate modes of practice, has never, in this house, been held forth as the *medical treatment of insanity*, but rather, as the medical treatment of recognised diseases exhibiting mental disturbance as one of their symptoms. It is true that in older and confirmed cases, astonishing instances of unexpected Recovery are occasionally found to occur; but the claims of human art in having had a share in the result, are usually fantastic and unfounded. The change may have been consequent upon the gradual absorption of some morbid deposit, as may perhaps be the

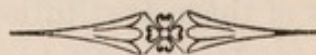
case in those instances of stupor, designated by foreign writers as cases of active Dementia; or it may have originated in the increased efficiency of some vicarious action, replacing another morbidly disturbed; or it may have happened from the union of severed parts, or the growth of parts lost, or the healing of some irritating abrasion, or the relaxation of some strictured part, or in some other of innumerable chronic changes utterly beyond the reach of existing medical science.

In all such cases, the only certain basis of hope lies in sound hygiene. Insanity is not the proper subject for heroic remedies, and violent empirical practice. It is not to be considered, except in the solitary and rare case of Phrenitis, as analogous to active inflammation, but is, on the contrary, to be regarded as more nearly allied to the irritation of debility, a position well put in Mr. Solly's able work on the brain.—Some of our modern heroic practitioners seem disposed to act upon the worst part of homœopathic theory; stimulants and narcotics produce phenomena very analogous to those of insanity, and are therefore the empirical practice of such persons, as being specific in lunacy, without any other peculiarity in the state of body indicating their use. Violent remedies are the certain test of empiricism, and it is clear that quiet, sober, regular practice never can satisfy the dupes of any class. There may certainly be cases of mental disturbance, as in Phrenitis, requiring cold applications to the head, and possibly a few others of similar character; but it is necessary that the Boards of these Institutions should keep a very active watch on their use.—It is right in this Report publicly to denounce a mischievous practice, silently obtaining through some Institutions. It was ascertained that a large sponge filled with cold water and applied to the head, had been silently adopted as a means of control in this house. It appears that this, and the cold shower bath employed for a similar purpose in some Institutions, are looked upon with great horror by the patients. The Board has formally denounced such practice, and ordered the removal of the instrument so abused.

The Board has mentioned hygiene as the basis of cure, and has great pleasure in announcing that a portion of land has been procured, and applied for materially enlarging and beautifying the grounds of the females. These patients had previously passed too much of their time in in-door and sedentary occupation. It has been ascertained in this house, that a free range in the open air is often remedial in cases of maniacal violence; a treatment remarkably confirmed by the practice of the great rural depôt for lunatics in the Netherlands; a system utterly at variance with preconceived English notions, with the solitary exception of the late self-taught Bakewell of Spring Vale in Staffordshire; and certainly the very opposite to confinement in dark and padded rooms, or the use of instrumental restraint.

E. FF. BROMHEAD, *V.P.*

June 21st, 1852.



APPENDIX.

(A)

LINCOLN LUNATIC ASYLUM.

[NINTH ANNUAL REPORT, 1833.]

It will be observed in the General Statement of the "Sums received from Patients since the opening of the Establishment," that it has been maintained chiefly by Patients in confined or moderate circumstances, at rates usually varying from eight shillings to a guinea per week. Happily the property of this Charity has not been adventured in the speculation of building extensive accommodations for more wealthy Patients, who are more properly the objects of a Private Asylum. The practice of making costly preparations for such Inmates in Public Institutions, under a belief that the higher rates may conduce to lower the charges to others, is founded upon erroneous principles. The rich will not, more than the poor, pay money for less than an equivalent ; and, if the value of the proportion of land, additional buildings, selected situations, extra apartments, superior furniture, and extra attendants and diet, required by such Patients, were all to be taken fairly into calculation, it would be found that sums of from two to four guineas per week, (supposing that they could be obtained), do not even compensate for the actual expenditure, and much less justify a misapplication of funds subscribed to a charitable purpose, or the danger of neglect to other Patients thus considered as only secondary objects. To persons of small or of moderate means, the Lincoln Asylum offers admission on reasonable terms, and with advantages such as their circumstances could not otherwise possibly command.

(B)

LINCOLN LUNATIC ASYLUM.

[TWENTY-EIGHTH ANNUAL REPORT, 1851.]

Number and Payments of each Rank of Patients, admitted or re-admitted, from the opening of the Institution in March, 1820, to December 31st, 1850.

FIRST RANK.

9 Patients at from £2 12 6 to £1 5 0 per week, £ 317 6 7
 103 ————— at £1 1 0 ————— £7237 15 1—£7,555 1 8

SECOND RANK.

229 ————— at £0 15 0 ————— £7,996 14 10

THIRD RANK.

1065 ————— at £0 10 0 ————— £47,195 11 2
 £62,747 7 8

(C)

WARNEFORD LUNATIC ASYLUM.

[OFFICIAL PUBLICATION, 1840.]

USEFUL INFORMATION CONCERNING THE ORIGIN, NATURE, AND PURPOSE
 OF THE WARNEFORD LUNATIC ASYLUM, ON HEADINGTON HILL, OXFORD.

At the time when this benevolent Association was formed in 1813, it was a prevailing error in calculating the severity of human distress, to suppose that the chargeable poor had the largest and strongest claims upon voluntary benevolence ; the opinion has been since corrected by the larger views and juster estimates of a more thoughtful philanthropy. For those may be said to labour under the severest want and most complicated wretchedness, for whom the laws of the country have provided no pecuniary aid ; who, though very poor, are not paupers ; though overburthened are not chargeable ; who, though scarcely able to maintain themselves when their families are in the full possession of health, are still thrown upon their own unassisted efforts and resources should those families be visited by bodily or mental disease ; *they cannot dig, to beg they are ashamed.* Such poverty as this appeared to the friends and founders of this Institution to be hopeless as well as helpless ; it could draw upon no parish funds ; it could appeal to no magisterial authority ; it could urge no Statutory Provision in its behalf.

Agreeably then to these views, the range of charity marked out for the operations of this Asylum extends over those wide and various fields of affliction which lie just above the level of pauperism, and from that

level upwards and onwards through all those scenes and stages of destitution, which are presented to the eye of pity by the families of poor Tradesmen and Farmers, poor Clerks and Agents in different branches of business, poor Artists and Literary men, poor Professional men in the Army or Navy, Law or Physic, poor Clergymen and Gentlemen; in short, wherever poverty is to be found coupled with respectability of station, and made oppressive by the burthensome and expensive afflictions of insanity, there this Asylum seeks subjects and occasions for the dispensation of its medical, moral, and pecuniary aids.—pp. 7, 8.

[TWENTY-FIFTH ANNUAL REPORT, FOR THE YEAR 1851.]

FUND IN AID OF POOR PATIENTS FROM RESPECTABLE AND EDUCATED LIFE,
INSTITUTED BY THE REV. VAUGHAN THOMAS, JULY, 1828.

Receipts on Account of this Fund, for the Year ending December 31st, 1851:—

£30 5 0

*General Statement of Patients admitted and discharged,
from the opening of the Asylum, July, 1826, to December 31st, 1851.*

ADMITTED, 576, OF WHOM	DISCHARGED, 531, VIZ.
22 have been Clergymen.	Cured 237
76 other Professions.	Convalescent and sub-sequently recovered 49
39 Wives and Children of Professional Men.	Relieved, or removed from motives of economy, or otherwise 173
232 Tradesmen, their Wives, and Children.	Died 72
95 Farmers, their Wives, and Children.	Remained Dec. 31, 1851 45
112 Servants, either Domestic or in Husbandry.	
<hr/> 576	<hr/> 576

THE LANCET,

OCT. 5, 1850.

[EDITOR'S ARTICLE.]

* * * Now that county asylums are provided for all the insane poor, Bethlem Hospital seems peculiarly well suited to the wants of those who have occupied, and perhaps still occupy, respectable stations in society, but whose means are limited, and who, after providing for the necessary wants of their families, are unable to support their afflicted relatives in private asylums. We find, in Bethlem, patients who have belonged to all the learned professions: officers in the army, gentlemen, artists, tradesmen, farmers, clerks, &c.; and, among the females, the wives, widows, and daughters of the same classes.—p. 396.

THE LANCET,

OCT. 19, 1850.

[LETTER FROM DR. CONOLLY.]

SUGGESTIONS FOR THE ESTABLISHMENT OF AN ASYLUM FOR THE INDIGENT
INSANE OF THE EDUCATED CLASSES.

A healthful, cheerful asylum, for the indigent insane of the educated classes, furnished with every appliance that experience or ingenuity could suggest for the comfort and improvement of patients of this particular description, and the terms of admission to which should be moderate in every case, and gratuitous in many cases, is still among the charitable institutions wanting in this country, and the hope of seeing which I do not yet abandon.—pp. 462, 463.

THE LANCET,

Nov. 16, 1850.

[LETTER FROM THOMAS DICKSON, L.R.C.S.E.,

Medical Superintendant, Manchester Royal Lunatic Hospital.]

ASYLUM FOR THE INDIGENT INSANE OF THE EDUCATED CLASSES.

I have perused, with great satisfaction, in THE LANCET of October 19, the remarks of Dr. Conolly, and his "Suggestions for the Establishment of an Asylum for the Indigent Insane of the Educated Classes," and those who have had opportunities of judging will not hesitate in corroborating the statements made in that letter, as to the privations endured by the afflicted of those classes, and which not only press heavily upon the unfortunate sufferers, but also upon their families and connexions, entailing, in most instances, a great amount of suffering, poverty, and distress.

In conclusion, I beg to say, that a "healthful, cheerful, asylum for the insane of the educated classes, (indigent as well as wealthy), furnished with every appliance that experience or ingenuity could suggest, for the comfort and improvements of patients of this particular description, and the terms of which are moderate," is already in existence in the neighbourhood of Manchester; and that, however much the wants of such an institution may still be felt in many of our large towns, in this matter Manchester has done, and is doing her duty, in having provided an establishment for the indigent as well as the wealthy insane of the educated classes.—p. 566.

THE STAFFORDSHIRE ADVERTISER,

Nov. 29, 1851.

[PUBLIC MEETING AT STAFFORD.]

ASYLUM FOR THE INSANE OF THE MIDDLE CLASSES.

The Earl of SHAFTESBURY.—They were not called upon to inquire into the treatment of the insane, but he took it that they were collected together that day for the purpose of considering in what way an institution might be established or promoted in which provision should be made for those for whom the legislature made no provision—for those numerous parties who had not wealth sufficient to avail themselves of the existing means of private asylums, and who in education and in character were yet above the rank of the pauper, and who with their relatives and friends shrunk with a laudable sensibility from receiving relief at the expense of the parish. Now this was a numerous class—far more so than those who were not in the habit of considering the matter might be disposed to believe. Let them consider for a moment the vast number of clergy who went on well, so long as they were not visited by heavy affliction, but who, the moment the hand of God was on the family, were exposed to privations it would be difficult to express; look at the vast number of lawyers—look at the great numbers engaged in mercantile pursuits—and look at the small shopkeepers—all these were technically called the middle classes, but there was another class well worthy of their sympathy, and numerous and very respectable, and who felt equally with those above them the dread of being subject to parish relief, and who made most severe struggles to avoid it. He meant the class of artisans who received 20s. 25s. and 30s. a week, and who lived in a state of comparative affluence and comfort. But when in the dispensation of Providence insanity afflicted his family, what a burthen it must be to one of this class to support either a wife or a child, either at home or at an asylum? (Hear.) And how was that calamity increased when not the wife or the child, but the man himself was afflicted, and thus at once was cut off all resources of a respectable livelihood. (Hear, hear.) It was for the reception of these classes that the institution to promote which they had been called together was proposed, and his belief was that the institution being in the first place established, the payment by those parties who were able to pay would make the institution self supporting, and the contributions which would be coming in would enable them to receive those, who otherwise would be dependent upon eleemosynary assistance. (Hear.) Now it would not do for people to say there were private asylums to which these persons could be sent. There was another class entitled to consideration, and with their permission he would touch upon that point presently, as the interests of the one were materially affected by the other. But to return to the class upon which he was remarking.

It was of no use to say there were private asylums. It was true that there were private asylums open, but as Horne Tooke said of the London taverns, they were certainly open to every man who could pay for them. How could these persons pay £150 or £100, or to come lower, £40 and £30 a-year? Could they out of their slender incomes afford to pay such a contribution as that? It was altogether impossible, and if it was possible to pay it, it would be throwing £150 a-year away, as they could not command the medical care and personal treatment and superintendence they would receive from an institution of the character of the one they were met to promote. * * * * There was another great advantage to be derived from the establishment of public asylums, and not a greater advantage would be derived than this—and they might take his word for it, he spoke the language of truth—families would not be so apt to keep the affliction with which they had been visited a secret. If any member of a family were afflicted with insanity, the only object of that family appeared to be to put the party afflicted out of sight, and not let it be known to the world that (what so many appeared to think a disgrace) God had been pleased to send such a visitation. It was, however, foolish for a family to attempt to keep the visitation a secret; for he had never known an instance in which a member of a family had been afflicted with insanity but it was known to the whole of that family, if not to the entire neighbourhood. Secrecy was altogether impossible, but in this vain attempt at secrecy the wretched patient was subjected to the very worst treatment and the very worst neglect; and he must say, for true it was, and a disgrace to human nature, but nevertheless it was a fact, that in nine cases out of ten, when an unhappy being was afflicted in this way by the hand of God, the great object of the relative was to put him out of sight, and to think as little as possible of his existence. He did hope that when the system of public asylums was more general the public would see the folly as well as the impossibility of keeping the affliction which had fallen upon a member of a family a secret, and that instead of endeavouring to put the patient out of sight, and taking care that his name was never mentioned—in fact, as far as possible putting him out of existence—they would avail themselves of the advantages afforded them. As soon as the feeling to which he had alluded was done away with great benefit would arise. When it was known that it was impossible to suppress the knowledge that a member of a family had been visited with insanity, and when, in addition to that, the cost of maintenance was considerably reduced, a great benefit would arise by the patient being sent to an asylum at the time of the attack. Good heavens! how many instances had he seen, and his friend Dr. Conolly had known thousands, where a member of a family had been attacked, and his friends kept him at home, thinking that some happy change might take place, and that it was unnecessary to incur the expense of sending him to an asylum. But the malady strengthened. Day after

day, week after week, and month after month was the patient kept at home, until the fatal twelve months had gone by, when all knew that it was scarcely within the compass of human science and skill to effect a radical cure. (Hear, hear.) He was quite sure that when the institution was fully established patients would be brought to it early, and under humane and skilful treatment, such as Mr. Wilkes would employ, he had no doubt that, under God's blessing, the most gratifying results would be witnessed. (Applause.)

Dr. JOHN CONOLLY.—He had been but a very short time attached to Hanwell Asylum, when he was very much struck with the extreme want of provision for a large class of the people, in the event of the affliction of insanity falling upon them. Great and liberal provision was made, not only in this county, but throughout the kingdom generally, for the reception and care of the pauper lunatic ; and although no one was more alive than he was from experience to the distressing condition of the rich when insanity overtook them, still institutions existed in which they might be received. But between these classes of the people there was a large class, whom it was difficult to designate properly, but who were generally, for distinction, called the middle class. That class comprehended persons of education and respectability, whose means of living depended on their own exertions, and, the moment they were struck with insanity, that moment their means of livelihood were cut off, and they became, in reality, more helpless than the poor. Such a condition as this, in which the middle class were placed, was as distressing as any they could well conceive, as no provision was made for such cases. The great institutions, Bethlehem and St. Luke's, would receive patients for a limited period ; recent cases of insanity would be received into those institutions ; but, if they were paralytic or epileptic, they would not have them ; and they would not keep them after a year, except in some cases, when they would keep them two years, but generally speaking, the patients were only kept for one year, and, if they were not restored, they were sent away. In recent cases of insanity the relatives of the patient would provide for him, but when the malady became chronic, then it was that they felt the ruinous consequences. When the malady appeared in the paralytic or epileptic form then it was that it was the most distressing, and this was the most general form in which it appeared, for scarcely a week passed but one or two of such cases were brought under his notice. It was for the reception of these cases that institutions were required, and he was glad to see an institution of the kind rising up in this neighbourhood, and he trusted that the example would be followed in other parts of the kingdom.

THE LANCET,

DEC. 13, 1851.

A meeting was held on Thursday, November 27, in the Shire Hall, Stafford, for the purpose of promoting the interests of the charitable Institution for the reception of the Insane of the Middle Classes, in connexion with the County Asylum, now in course of erection at Coton Hill, near Stafford. The meeting, though not called by the High Sheriff, nor receiving the designation of a county meeting, was, in fact, one of the most influentially attended meetings of the nobility, gentry, and clergy of Staffordshire, which has been held for some time. It was presided over by the venerable Lord Lieutenant of the county, the Marquis of Anglesey, K.G., whose attendance on the occasion was hailed with delight by all present. The Earl of Shaftesbury, who was announced last week as having promised to lend his powerful advocacy to the cause of this valuable charity, addressed a Staffordshire audience for the first time on the occasion ; and from the circumstance of his lordship being the chairman of the commissioners of lunacy, as well as from the able and lucid manner in which he handled the subject, the greatest attention was paid to his statements, and the most powerful interest created by his eloquent address—an interest which, we trust, will not die with the occasion, nor be limited in its operation to those who attended the meeting. Dr. Conolly, the physician to the well-known asylum at Hanwell, addressed the audience in a speech remarkable for the absence of all affectation, and yet exhibiting such an intelligent acquaintance with his subject, and so much humanity, as evidently enlisted the judgment and sympathies of the meeting. Sir C. M. Clarke, Bart., responded to an invitation to address the meeting in a brief and energetic speech. The Earl of Harrowby and the Lord Bishop of Lichfield followed, in able and characteristic speeches ; and the proceedings of the day were wound up by brief addresses delivered by Earl Talbot, the Rev. G. Buckeridge, the High Sheriff, and Viscount Lewisham, M.P.

The following resolutions were unanimously adopted :—Moved by the Earl of SHAFTESBURY ; seconded by Dr. CONOLLY : That this Meeting is of opinion that an Institution, by which persons of the Middle Classes of society, who are afflicted with insanity, for whom no provision is made by the Legislature, and whereby they are provided at a small cost with the care and comforts which their education and previous habits require, is one of high importance to the interests of humanity, and well deserving of general support.

Moved by the Earl of HARROWBY ; seconded by the Lord Bishop of LICHFIELD : That the system which has been pursued in that Branch of the Staffordshire Lunatic Asylum, which provides for those Patients who are not supported by parochial rates, is well calculated to meet this

object ; and that this Meeting pledges itself to use its best efforts towards promoting the interests of the Institution in its new position on Coton Hill.

Moved by Earl TALBOT ; seconded by the Rev. G. BUCKERIDGE : That the District Stewards be thanked for the services already rendered ; and that they, as well as the Clergy, be requested to use their best exertions in aid of the charity.

ANGLESEY, Chairman.

A Subscription was entered into, and nearly £3000 subscribed.

(D)

THE PSYCHOLOGICAL JOURNAL,

Oct., 1851.

[ORIGINAL COMMUNICATION,

BY HENRY MONRO, M.B., OXON.]

PUBLIC ASYLUMS FOR THE MIDDLE CLASSES.

It is but too well known that the present means available for the treatment of the insane are insufficient, and that those which exist offer much room for improvement. But if one class of lunatics, more than another, seems to call peremptorily for relief at the present day, it consists of those who are sprung *from respectable but poor families*.

Let us suppose we could open a house for forty inmates (twenty of each sex), and place the expense of opening the house on the charity of a few individuals, and the current expenses of each inmate upon his own friends. Let us consider that each inmate would require the expenditure of 50*l.* per annum,—namely, 40*l.* for his keep and share of attendance, and 10*l.* for his share of house-rent, coals, and candles, &c. ; that the 40*l.* per annum were defrayed by his relatives, and the 10*l.* per annum represented the gift,—the medical attendance being the voluntary work of such gentlemen as were interested in the working of the house.

It will be said there are many private asylums willing to receive patients at 40*l.* per annum ; but the melancholy and ready answer is, that out of this sum a livelihood is obtained or a fortune made by the proprietor. This fact speaks volumes. I will only add, that one main characteristic of what I would propose should be, that no private inducement should be held forth to any one to take a share in the scheme beyond the pleasure of being at work in a just and generous cause.

I would urge as a second reason for attending to the want, of this class, that they have hitherto had less done for them, less sympathy shown them, and heavier burthens thrown upon them, than either those above or below them. I quote the words of one who has seen much of this class:—"In the majority of cases the daily bread of the middle classes is as much dependent upon the mental and bodily vigour of the head of the family as that of the mechanic or labourer. Deprivation of reason for any lengthened period may be called the certain prelude to the decay and impoverishment of the family. Deprived of the exertions of its head, the family (even if able to struggle on) is unable to afford the cost of sending him to a private asylum, or only able to send him to such an one as tends rather to increase than cure the malady. He had better go to a well-regulated county asylum, so far as treatment is concerned ; but to this the feelings of honest pride and self-respect on the part of his relatives generally demur."

Wealth and realized property may argue little as to moral position,—not so with hard-earned respectability ; and yet we have assisted, and are continually assisting, the poor, while we have done little or nothing for the class just above them. Education is a talent which each person is bound to accept when offered to him ; and yet, when it is attained, it doubtless very much increases sensibility to all the evils to which we are subject.

Such are some of the arguments by which I would plead for the class of poor but respectable persons. Did space permit, I could doubtless add many more.

In fixing the sum of the whole expenses of each individual at 50*l.* per annum, I am aware that I shall be charged by many with making it too small, considering that washing and attendance are included in this charge : but I do not speak without consideration and experience. I am intimately connected with a charity, where respectable poor persons are received, who have been thrown out of employment owing to no fault of their own, and who are received within the walls of this refuge in order that full employment may be found for them by the gentlemen who visit the institution, and that their strength may be restored by good and ample diet. The inmates of this charity have meat every day, as much as they want (except on one day when they have fish and soup) ; their diet in other respects is liberally conducted, and on the principle of restoring their strength, which has been previously exhausted by privations ; and the average expense of this institution (which contains between 40 and 50 inmates), is only 5*s.* a week per head in food ; about 15*l.* a-year per head. This has been the case for some years now, and *is a good example of the union of economy with liberal allowance.* I grant that in the first year or two the diet was more expensive, though not better ; but this was simply the fault of want of experience and good superintendence.

(E)

LINCOLN LUNATIC ASYLUM.

[GOVERNOR'S MEMORANDUM BOOK.]

1851, *Sept.* 3.—There is no doubt that the credit of this Institution, as regards the number of *recovered cases* which have occurred in it, has suffered greatly through the inadequacy of its size. From this cause it has, for many years past, been so nearly filled with “cases of long standing,”* that numerous applications for the admission of “recent cases” have been necessarily refused; while the great mass of cases retained, offered little or no prospect of restoration under any treatment whatsoever. The new Pauper Asylum is, I am informed, providently adapted for a larger number of patients, than the county can be expected regularly to supply; and thus may probably be made to appear, through the two Institutions, a decrease of the number of insane within their sphere—the absence of which decrease in this and other counties, has been cited as a reproach to the curative efficacy of such institutions, or otherwise as a proof of a continuous increase of the disease.

E. P. CHARLESWORTH.

* The number of cases of more than two years standing, amounts at the present time to 112 out of 128 patients.

OFFICERS,

1851.

President,

The Right Honorable the EARL of RIPON.

Vice-Presidents,

The Right Honorable the EARL BROWNLOW, *F.R.S.*
The Right Honorable LORD WILLOUGHBY DE ERESBY.
The Right Reverend the LORD BISHOP of LINCOLN.
Sir GILBERT HEATHCOTE, Bart., *M.P.*
Sir WILLIAM AMCOTTS INGILBY, Bart.
Sir WILLIAM EARLE WELBY, Bart.
Sir EDWARD FRENCH BROMHEAD, Bart., *F.R.S.*
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Surgeons,

Mr. SNOW.—Mr. HEWSON.—Mr. HOWITT.

House Surgeon, Mr. F. D. WALSH.—*Matron*, Miss A. VESSEY.

Secretary, Mr. R. HALL.—*Surveyor*, Mr. W. A. NICHOLSON.

Trustees of the Real Estate,

CHARLES CHAPLIN, Esq.
AYSCOUGH BOUCHERETT, Esq.

	£	s.		£
Brown, Captain H. ....Lincoln	21	0	Magistrates of the Louth and Spilsby	
*Brownlow, Earl, <i>V.P.</i> ,Belton	150	0	Division, their wages for the years	
Calthrop, Mr., Stanhoe Hall, Norfolk	25	0	1836, 7, 8, 9, 40, 1	102 1
Carline, Mr. ....Lincoln	21	0	Mason, Mr. R. ....Lincoln	21
Carline, Mr. R. C. ....Lincoln	21	0	Merryweather, Mr. J. ....Lincoln	21
Cayley, Sir George, Bart., Brompton	42	0	Otter, Miss A. ....Wath	25
Chaplin, Mr., <i>V.P.</i> , <i>Trustee</i> , Blankney	100	0	Pacey, Miss M. A. ....Aston House	21
Charlesworth, Dr. ....Lincoln	21	0	Padley, Mr. J. S. ....Lincoln	21
Conington, Rev. J. ....Southwell	21	0	Pierce, Rev. W. M. ....West Ashby	21
Corbett, Mr. ....Elsham Hall	21	0	Pretyma, Rev. G. T., Chancellor of	
Cust, Hon. William .....London	30	0	Lincoln	25
Davis, Mr. Thomas, Spalding, for a			*Pretyma, Rev. R., Precentor of	
few Friends	60	0	Lincoln, <i>V.P.</i>	25
Dent, Mr. ....Ribston Hall	25	0	Reeve, General	21
Durham, Right Rev. Edward Maltby,			Ripon, Right Hon. Earl of, <i>President</i>	26
Lord Bishop of	21	0	Rudgard, Mr. E. W. R. ....Lincoln	21
Elmhirst, Dr., Lincoln, for a Person			Scrope, Mr. ....Cockerington Hall	25
unknown	22	0	Sibthorp, Colonel, <i>M.P.</i> , <i>V.P.</i>	75
Empson, Mrs. S., Spellowhill, York	21	0	Skipworth, Mr. G. ...Moreton House	21
Fardell, Mr. ....Lincoln	50	0	*Smith, Mr. B. ....Horbling	21
*Fortescue, Earl ...Castlehill, Devon	21	0	Snow, Mr., <i>Auditor</i> , for a Lady	21
Foster, Mr. William .....Canwick	21	0	Steel, Mr. ....Lincoln	26
Fowler, Mr. Edward .....Lincoln	21	0	St. Albans, Her Grace the Duchess of,	
Frederick, Sir Robert, Bt., Burwood			Redbourn	21
Park, Surrey	21	0	Sutton, Sir Richard, Bart., Cottesmore	50
Fyddell, Mr. S. R. ....Tickencote	100	0	Sutton, Mr. C. F. ....Wragby	21
Glasier, Mr. S. ....Hykeham	21	0	Swan, Mr. Robert .....Lincoln	21
Goodenough, Ven. Archd., Mareham	21	0	Swan, Rev. F. ....Sausthorpe	21
Hadwen, Mr. ....Lincoln	21	0	Thorold, Mr. ....Cuxwold	21
Harrowby, Earl of .....Sandon Hall,			Turnor, Mr. ....Stoke	100
Stafford	50	0	Vyner, Mr., <i>V.P.</i> ....Gautby House	100
Hartley, Mr. J. ....Lincoln	21	0	Welby, Sir W. E., Bt., <i>V.P.</i> , Denton	40
Harvey, Mr. R. S. ....Lincoln	21	0	Welfit, Mr. ....Manby Hall	21
Healey, Mr. H. ....High Risby	26	0	Whichcote, Rev. C. ....Aswarby	21
Heathcote, Sir Gilbert, Bart., <i>V.P.</i> ,			White, Mr. George .....Grantham	51
Normanton	100	0	White, Mr. W. H. ....London	21
Heneage, Mr. ....Hainton Hall	41	0	Willoughby de Broke, Lord	50
Higgins, Mr. J., Alford, for a person			Willoughby de Eresby, Lord, <i>V.P.</i>	100
unknown	21	0	Winchelsea, Earl of .....Haverholm	25
Ingilby, Sir William, Bart., <i>V.P.</i> ,			Winn, Mr. Thomas .....Lincoln	21
Ripley Castle	50	0	Wright, Mr. ....Brattleby House	41
Lincoln, Right Rev. John Kaye, Lord			Wright, Miss .....Brattleby House	21
Bishop of, <i>V.P.</i>	25	0	Wright, Rev. W. ....Healing	30 1
Mackinnon, Rev. J., Bloxholm, for			*Yarborough, Right Honorable Earl,	
a Friend	21	0	Brocklesby	21

Benefactions under Twenty-one Pounds, up to Dec. 31, 1851...£2094 14 0

Parochial Collections, 1801—1809.....£1911 8 1

DONATIONS OF £21 OR UPWARDS,
FROM BENEFACTORS SINCE DECEASED, UNKNOWN,
PUBLIC BODIES, &c.

	£	s.		£	s.
Colison, Mr. W. ....Louth	52	10	Handley, Mr. Benjamin .....Sleaford	21	0
Danderson, Rev. Sir Charles, Bt., Lea	31	0	Hayward, Mr. Ald. C.....Lincoln	21	0
De la Beche, Duke of .....Grimsthorpe	100	0	Heneage, Mr. ....Hainton Hall	21	0
Barnard, Mr. Samuel .....Boston	21	0	Hett, Dr. R. Hobart .....Lincoln	21	0
Boyle, Ven. Archd., for a Friend ...	100	0	Hume, Sir Abraham, Bt., Haverholm	21	0
Byatt, Dr., for a person unknown ...	30	0	Hutton, Mr. ....Lincoln	21	0
Barnard, Sir Thomas, Bart., London	21	0	Hutton, Mr. H. W. ....Beverley	21	0
Burridge, Rev. B. B. ....Algarkirk	26	5	Jarvis, Colonel .....Doddington Hall	21	0
Bisville, Rev. T., Rector of Heapham	21	0	Kaye, Lady .....Coleby	50	0
Boadley, Mrs. ....Blyborough	21	0	Kent, Rev. G. D., Lincoln, for a Lady	50	0
Bomhead, Mrs. B. ....Lincoln	25	0	King, Mr. Clifford .....Ashby-de-la-		
Bomhead, Rev. E.....Repham	25	0	Launde	21	0
Bomhead, Mrs. B. ....Lincoln	25	0	King, Mrs. Captain .....Tiddenham	21	0
Brown, Mr. Hezekiah .....Lincoln	21	0	Kipling, Dr., the Very Rev. the Dean		
Brown, Rev. T. ....Leadenham	21	0	of Peterborough	100	0
Brownlow, Earl .....Belton	100	0	Lady unknown.....	50	0
Buckinghamshire, Earl of	40	0	Lincoln, Right Rev. George Tomline,		
Buckworth, Mesdames .....Stamford	50	0	Lord Bishop of	50	0
Burcham, Mr. ....Coningsby	21	0	Lincoln, Dean and Chapter of,		
Burton, Mr. Robert .....Lincoln	101	0	1807, viz.—		
Burton, Mr. ....Somerby	21	0	Late Rev. Sir Richard Kaye, Bt.,	100	0
Caplin, Mr.....Blankney	100	0	Late Rev. Archdeacon Pretymen,		
Chales, Mr. Benjamin .....Sleaford	25	0	Late Rev. Archdeacon Wharton,		
Cholmeley, Sir Montague, Bt., Easton	21	0	Late Rev. Archdeacon Bayley,		
Cholman, Mr. ....Hagnaby House	100	0	Lincoln, Corporation of, 1807	100	0
Colton, Mr. Alderman.....Lincoln	21	0	Lindsey, Earl of .....Uffington	50	0
Colton, Mrs. Sarah .....Lincoln	21	0	Lister, Mr. ....Burwell Park	631	10
Cookson, Dr. Ambrose .....Lincoln	21	0	Lister, Mr. ....Girsby House	25	0
Cookson, Dr. W. D. ....Lincoln	21	0	Loft, Mr.....Louth	21	0
Coxe, Rev. G., Twyford, Winchester	21	0	Loft, Mr. ....Grainthorpe	41	0
Crane, Dr., from the friends of the			Maddison, Mr. J. ....Bath	21	0
late Dr. Knolton .....Boston	23	13	Mainwaring, Mr. ....Coleby Hall	52	10
Curtis, Rev. P. ....Longhills	21	0	Manby, Mr. John .....Bead's Hall	53	0
Dalton, Mr. ....Knaith House	26	5	Mangles, Mrs.	50	0
Dalton, Colonel.....Slaniford Hall	25	0	Manners, Right Hon. Lady Robert...	21	0
Deacon, Rev. J. R. ....Waddington	21	0	Manners, Mr. George .....Bloxholm	225	0
Drake, Mr. T. Tyrwhit ...Shardeloes	50	0	Massingberd, Mr. ....Ormsby	50	0
Hardley, Lord	105	0	Millson, Mrs. ....Lincoln	21	0
Ellison, Lieut.-Colonel ...Sudbrooke	50	0	Monson, Lord .....Burton	100	0
Elmhirst, Colonel .....Ashby Grove	21	0	Monson, Colonel, the Hon. William	30	0
Elsdale, Rev. Samuel.....Moulton	71	1	Otter, Mr. Francis .....Stainton	21	0
Featherby, Mr. Ald. W. ....Lincoln	23	2	Otter, Mr. Henry .....Wath	25	0
Featherby, Mr. Ald. R. ....Lincoln	23	2	Otter, Miss .....Ranby House	25	0
Forsyth, Mr. T. ....Empringham	21	0	Otter, Mr. Robert .....Wath	25	0
Fowler, Mr. Ald. Robert.....Lincoln	21	0	Parkinson, Rev. Dr. ....Ravendale	21	0
Freke, Lady Sophia ...Glaston House	25	0	Peacock, Mr. Anthony .....Kyme	21	0
Gordon, the Very Rev. G., D.D.,			Peacock and Co., Sleaford, for a		
Dean of Lincoln	100	0	Gentleman unknown	50	0
Gordon, Rev. J. ....Edwinstow	31	10	Pelham, Hon. George	21	0
Goulton, Mr. Thomas .....Walcot	50	0	Preston, Mr. Thomas .....Lincoln	21	0
Gwydir, Lord .....Grimsthorpe	105	0	Raby, Rev. C. ....Grantham	21	0

	£	s.		£
Reynardson, Mr. J. ....Holywell	21	0	Thirkill, Mr. Francis .....Boston	21
Robertson, Mr., produce of two plays	36	6	Thirkill, Mr. ....Boston	21
Rockliffe, Mrs. ....Horncastle	21	0	Thornton, Mr. Samuel .....21	
Rogerson, Mr. William .....Boston	21	0	Thynne, Rt. Hon. & Rev. Lord John	25
Saunders, Mr. S. ....Morton	21	0	Tunnard, Mr. ....Frampton House	21
Sedgwick, Mrs. ....Lincoln	50	0	Turnor, Mr. Edmund.....Stoke	100
Sibthorp, Colonel H. ....Canwick	52	0	Uppleby, Mr., for a Gentleman un-	
Sibthorp, Colonel Coningsby Waldo	50	0	known .....Wootton	40
Smith, Mr. Tyrwhit .....Lincoln	21	0	Wallis, Mr. George .....York	105
Smith, Mr. Samuel .....London	50	0	Walls, Rev. E. ....Spilsby	21
St. Albans, Her Grace the Duchess of	21	0	Whichcote, Sir T., Bart....Aswardby	100
Stonehewer, Mr. Richard .....21	0		Williams, Hon. Sir John, Justice ...	50
Summers, Mr. Eades.....Chertsey	100	0	Willis, Dr.....Greatford	500
Sutton, Rev. Thomas Manners, Sub-			Willis, Rev. Dr. ....Greatford	55
dean of Lincoln .....25	0		Willson, Rev. J. ....Lincoln	42
Swan, Mr. Alderman .....Lincoln	21	0	Wood, Mrs. ....Bath	21
Swan, Mr. John .....Ollerton	51	0	Wray, Lady.....Summer Castle	55
Swan, Rev. F. ....Lincoln	51	0	Yarborough, Right Hon. Lord .....100	
Taylor, Mrs. ....Lincoln	21	0	Yarborough, Right Hon. Earl .....300	
Tennyson, Mr. ....Bayon's Manor	21	0		

LEGACIES.

	£	s.		£
Benet, Mrs. Ann	50	0	Massingberd, Mrs.	Lincoln,
Cartwright, Mr.			by Mrs. Brackenbury	50
by Mr. W. H. Straw	90	0	Oxspring, Mr. John	Lincoln
Coltman, Mr. T.	449	8 3	Otter, Mr. Robert.....	Wath-upon-
Fairchild, Mr. Thomas	50	0	Dearne, by Miss Alice Otter	270
Featherby, Mrs. Susannah...			Parnell, Mr. Paul	Lincoln
by Mr. J. Bruce	100	0	Pell, Mr. Bennett ...	Wandle Grove,
Gane, Mr. James, by Mr. Robert			Surrey, by Mr. P. F. Pell, sen.,	
Michelson and Mr. John Henry			Mr. P. F. Pell, jun., and Mrs.	
Wagstaffe	100	0	Eliza Pell	94 1
Gildart, Rev. F., Rector of Sprid-			Reeve, Mrs.	Leadenham,
lington, by Rev. H. F. Hutton ...	250	0	by Colonel Reeve.....	45
Gordon, the Very Rev. G., D.D.,			Savage, Mr. Pool	Lincoln,
Dean of Lincoln, by Mr. Fardell...	100	0	by Mr. Joseph Moore	90
Grant, Mr. Benjamin ...			Shaw, Mr. Thomas Burton.....	450
by Mr. David Briggs, Oxcomb,			Simpson, Mr.	Ingleby
and Mr. M. G. Searle, Spalding ...	450	0	Smith, Miss Ann	Bath,
Hodson, Mrs. Kennan			by Miss Mary Mossop, Langtoft ...	49 1
by Mr. William Hopkinson	100	0	Thorold, Sir, John, Bart.....	Syston
King, Mr. Clifford			Westland, Mr. John	Boston,
Launde, by the Rev. J. King	50	0	by Mr. S. Veal.....	101 6
Knowles, Rev. Thomas			Williams, Mrs.....	Lincoln
Somercotes	19	19	Wilson, Mr. R., Willingham by Stow	10
Maltby, Mr. W.			Willson, Mr. Robert	Nettleham,
by Mr. Skill.....	450	0	by Mr. J. L. Fytche	100
			Wriglesworth, Mr. Ald.	Lincoln
				19 1

STATE OF THE PATIENTS.

Number of the Patients Admitted, and of those Discharged from the Books,

from January 1, 1851, to Dec. 31, 1851.				from April 26, 1820, to Dec. 31, 1851.			
	M.	F.	Tot.		M.	F.	Tot.
Remained Jan. 1, 1851	56	69	125				
Admitted in 1851	16	11	27	Admitted	626	531	1157
Re-admitted in 1851	4	4	8	Re-admitted	148	137	285
Discharged in 1851	13	15	28	Discharged	710	600	1310
Remained Dec. 31, 1851.....	63	69	132	Remained Dec. 31, 1851	63	69	132

State of the Patients when Discharged from the Books,

from January 1, 1851, to Dec. 31, 1851,		from April 26, 1820, to Dec. 31, 1851.	
Recovered	9	Recovered	514
Improved	11	Improved	162
Removed during treatment	1	Removed during treatment.....	290
Improper objects	0	Improper objects	2
By order of the Board	0	By order of the Board.....	38
Escaped	1	Escaped	15
Dead	6	Dead	289
	28		1310

Re-admitted Cases.

<i>Of the 1157 Patients admitted, have been re-admitted,</i>				<i>Of the 514 Patients discharged as recovered, have been re-admitted,</i>			
193 Patients 1 time each.....	148	cases		68 Patients 1 time each	68	cases	
3 " 2 times each	46	"		15 " 2 times each	30	"	
3 " 3 " 	24	"		6 " 3 " 	18	"	
2 " 4 " 	8	"		0 " 4 " 	0	"	
3 " 5 " 	15	"		4 " 5 " 	20	"	
" 6 " 	6	"		0 " 6 " 	0	"	
3 " 7 " 	21	"		2 " 7 " 	14	"	
" 8 " 	8	"		2 " 8 " 	16	"	
" 9 " 	9	"		1 " 9 " 	9	"	
90 Patients	285	cases		98	175	cases	

Of whom 17 have died and 9 remain
in the Asylum.

ADMISSIONS, RECOVERIES, DEATHS, AND CAUSES OF THE DEATHS

PATIENTS.	1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832
Carried on to each year	13	15	21	27	30	34	41	45	42	49	41	44
Admitted in each year	21	21	20	23	32	25	31	23	37	35	33	20	30
Re-admitted in each year	2	..	2	..	7	4	4	4	6	10	9	7
Total under care in ditto	21	36	35	46	59	62	69	71	86	83	92	70	81
Daily average number in ditto	6.8	15.	16.7	21.6	31.	33.4	40.8	44.3	47.	41.7	49.7	43.6	49.
Recovered in each year	6	7	8	12	10	13	14	12	19	15	31	13	12
Recovered per cent in ditto ..	8.8	44.6	47.9	55.5	32.2	38.9	35.2	27.1	40.4	35.9	62.3	29.8	24.5
Otherwise discharged in ditto	2	11	4	3	14	8	8	8	18	18	12	4	10
Died in each year	3	2	4	5	7	3	6	7	1	8	9	12
Died per cent in ditto	20.	11.9	18.5	16.1	20.9	7.3	13.5	14.8	2.4	..	20.6	24.5
Remained from each year	1	..	..	1	..	..	..	..	1
CAUSES OF THE DEATHS.													
Abscess
Aneurism of Aorta
Apoplexy	1	1	..	..	1	..	..	..	..	..	..	..
Catalepsy	1	..	..	..	..	..	..	..	..
Cholera Morbus
Consumption
Diarrhoea	3
Disease of Bowels
——— Brain	1
——— Heart
——— Liver
——— Lungs
——— Uterus
Dropsy	1	1	1	1	2	..	..	..	..	..	..
Dying when admitted	1	..	1	..	1	1	..	..	..	..
Erysipelas
Epilepsy	1	1	..	..	1	1	..	1	2	1
Fever	1	..	..	..	1	..
Found dead in bed	1	..	..	..	..
Gradual Exhaustion	1	..	..	..	2	1	2	2	..	6	5	1
Hernia
Hydrothorax
Inflamed Brain	1	..	..	..	..	..	..	..	..
——— Lungs
——— Parotid Gland
——— Trachea
Locked Jaw	1	..	..	..	..	..	..	..
Maniacal Exhaustion	1	1	..	..	2
Measles
Old Age	1	..	..	..	1	1	..	..	..	..
Paralysis	1	..	..
Psoas Abscess	1	..	..	..	..	..	..	..
Sloughing
Suicide	1	..	..	1	..	..	..	..	..	..	1	..
Tabes	4
Tumour of the Uterus
Water in the Head

From 1820 to 1826 inclusive, each year commences with April 1,

IN EACH YEAR, FROM APRIL 26, 1820, TO DECEMBER 31, 1851.

1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844	1845	1846	1847	1848	1849	1850	1851	Totals
47	50	66	62	85	88	101	109	96	92	112	103	104	117	126	137	138	125	132	
34	40	32	42	33	57	45	27	37	61	45	58	55	46	53	39	31	43	27	1157
6	19	10	10	12	13	13	6	15	18	16	15	13	11	12	17	9	7	8	285
87	109	108	115	130	158	159	142	148	171	173	176	172	174	191	193	178	175	160	
51.5	56.3	61.2	76.5	90.	94.5	107.2	104.2	97.2	101.	111.	109.	108.	121.	133.	137.	129.	125.	127.	
11	16	17	23	15	31	25	10	17	15	26	11	13	23	21	23	16	20	9	514
21.3	28.4	27.7	30.	16.6	32.8	23.3	9.6	17.4	14.8	23.4	10.	12.	19.	15.7	16.7	12.4	16.	7.	
17	23	20	3	12	16	15	20	24	27	24	47	25	22	18	23	24	14	13	507
9	4	9	4	15	10	10	16	15	17	20	14	17	3	15	9	13	16	6	289
17.8	7.1	14.7	5.2	16.6	10.5	9.5	15.3	15.4	16.8	18.	12.8	15.7	2.4	11.2	6.5	10.	12.8	5.7	
..	1	3	4	1	4	3	3	5	4	5	7	12	12	9	7	10	16	23	132
..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	1	3
..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
1	..	1	1	..	2	2	2	1	..	..	2	1	..	2	..	..	..	..	18
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1
..	..	..	..	4	1	1	1	5	5	1	2	1	1	2	1	5	5	..	35
..	..	..	..	..	1	..	..	1	..	1	2	3	..	2	..	..	..	1	14
..	..	1	..	1	..	..	2	..	1	..	..	..	..	..	..	..	..	1	6
..	..	..	..	..	..	2	2	2	2	1	..	..	..	..	..	..	..	1	11
..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	2
..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	2
..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	1	1	4
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	8
..	1	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	7
..	..	..	..	..	1	..	..	..	..	4	..	..	..	..	..	..	..	..	5
..	..	..	..	1	..	1	1	..	..	..	..	1	1	1	..	2	3	..	19
1	..	..	..	3	..	1	2	..	..	4	..	..	..	4	2	1	..	..	20
..	1	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	4
3	..	1	1	1	2	..	5	5	4	5	3	8	1	1	1	..	..	..	61
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	2
..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	2
..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	6
..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
..	..	..	..	3	1	1	..	..	..	..	..	..	..	..	1	1	1	..	11
..	..	..	..	1	..	..	1	1	..	..	1	3	..	..	3	4	4	..	19
1	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	4
..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
1	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	7
1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	5
..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1

and afterwards with January 1; leaving 9 months only for 1827.

CASES OF SICKNESS IN 1851.

Name of Disease.	Number of Cases.	Recovered.	Died.	Remained under Treatment.
Abscess	2	1	1	...
Apoplexy	1	1	...	...
Asthma	1	1	...	...
Bronchitis	1	...	1	...
Constipation	5	5	...	...
Diarrhœa	3	...	2	1
Disease of Brain ...	1	...	1	...
——— of Ear	1	1	...	...
Dyspepsia	3	3	...	...
Ephialtes	1	1	...	...
Erysipelas	1	1	...	...
Hernia	1	...	1	...
Influenza	1	1	...	...
Neuralgia	1	1	...	...
Œdema	1	1	...	...
Paralysis	2	...	...	2
Retention of Urine..	1	1	...	...
Rheumatism.....	1	1	...	...
Sprain	1	1	...	...
Ulcer	1	1	...	...
Totals	30	21	6	3

*Recoveries in the Lincoln Lunatic Asylum from the commencement, as affected by the duration of the Complaint
before Admission or Re-admission.*

Periods of Recovery.	Admitted within 3 months of the 1st attack.	Admitted between 3 & 12 mo. of the 1st attack.	Admitted between 1 & 2 years of the 1st attack.	Admitted, the period of being upwards of 2 years.	Admitted, having had previous attacks.	Admitted, the period of attack not known.	Admitted, Idiots.	Totals.
	387	218	76	232	463	53	13	1442
Discharged within 3 months after admission.	110	25	3	3	85	2	0	228
— between 3 and 6 months after admission.	57	18	3	4	59	3	0	144
— between 6 and 12 months after admission.	32	8	4	8	42	0	0	94
— between 1 and 2 years after admission.	5	7	1	1	10	0	0	24
— between 2 and 3 years after admission.	3	3	0	1	3	0	0	10
— after 3 years.	1	1	2	4	6	0	0	14
Totals.	208	62	13	21	205	5	0	514

AVERAGE PERIOD OF RESIDENCE IN THE RECOVERED CASES,

from April 26th, 1820, to December 31st, 1851.

	In each year.	In whole period.		In each year.	In whole period.
YEAR.	DAYS.	DAYS.	YEAR.	DAYS.	DAYS.
1820	103	103	1836	244	186
1821	161	134	1837	209	187
1822	90	118	1838	229	192
1823	145	128	1839	277	199
1824	173	138	1840	250	200
1825	234	160	1841	367	208
1826	141	157	1842	137	206
1827	148	155	1843	134	201
1828	195	164	1844	177	200
1829	277	181	1845	270	232
1830	152	176	1846	230	203
1831	118	172	1847	289	206
1832	329	181	1848	171	206
1833	310	189	1849	741	224
1834	95	180	1850	123	220
1835	190	181	1851	220	219

The averages for the whole period are obtained, not by adding together the average of each year, and taking a mean, which would be fallacious, because the number of Recoveries in each year greatly varies ; but it is obtained by adding together all the periods of residence, and dividing at each year's end by the total number of recoveries.

PER CENTAGE OF RECOVERIES AND DEATHS,

from April 26th, 1820, to December 31st, 1851.

	Recovered per cent.	Died per cent.
Of 1157 Persons Admitted	44.45	24.1
Of 1442 Cases Admitted, including Re-admissions	34.95	
Of Average numbers constantly Resident	21.1	12.1

AVERAGE PERIOD OF RESIDENCE OF THE
RECOVERED, AND DIED, IN 1851.

<i>Recovered in 1851.</i>			<i>Died in 1851.</i>		
No. on Register.	Date of Discharge.	Period of Residence.	No. on Register.	Date of Death.	Period of Residence.
No.	1851.	Yrs. Days.	No.	1851.	Yrs. Days.
1396	Jan. 28	0 138	1407	Feb. 14	0 46
1374	April 2	0 322	1391	Mar. 15	0 222
1397	July 28	0 312	1416	April 2	0 3
1424	Aug. 18	0 75	1156	June 22	5 66
*1395	Sep. 24	1 19	1241	June 23	3 269
1401	Sep. 24	0 292	1427	Oct. 17	0 108
1412	Oct. 14	0 235			
1432	Oct. 14	0 22			
*1421	Dec. 6	0 200			
Average residence, 220 days.			Average residence, 1 yr 240 days.		

* Re-admitted Cases.

LENGTH OF RESIDENCE, AND AGES IN DECENNIAL PERIODS
AT THE TIME OF DEATH.

*Periods of Decease after Admission,
in 1851.*

Between 1—7 Days	Days 7—14	Weeks 2—4	Months 1—3	Months 3—6	Months 6—12	Years 1—2	Years 2—3	Years 3—18	Total
1	0	1	0	1	1	0	0	2	6

*Periods of Decease after Admission,
from the commencement of the Institution.*

Between 1—7 Days	Days 7—14	Weeks 2—4	Months 1—3	Months 3—6	Months 6—12	Years 1—2	Years 2—3	Years 3—18	Total
8	16	16	33	33	41	40	27	75	289

*Ages at the time of Decease,
in 1851.*

Betw. 20	20—30	30—40	40—50	50—60	60—70	70 & upwards	unknown	Total
0	1	1	0	1	2	1	0	6

*Ages at the time of Decease,
from the commencement of the Institution.*

Betw. 20	20—30	30—40	40—50	50—60	60—70	70 & upwards	unknown	Total
3	29	68	58	55	45	22	9	289

NUMBER OF DEATHS IN EACH MONTH,
from the commencement of the Institution.

Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total.
26	23	19	33	26	31	22	28	11	23	24	23	289

HOUSE SURGEON'S DAILY RETURN
OF THE STATE AND CIRCUMSTANCES OF THE PATIENTS,
from 8 a.m. December 29th, 1851, to 8 a.m. January 4th, 1852.

NUMBER OF PATIENTS.	MALE.							FEMALE.						
	M.	T.	W.	TH.	F.	S.	SU.	M.	T.	W.	TH.	F.	S.	SU.
In the wards	63	63	63	64	64	64	63	69	69	69	69	69	69	67
In the male epileptic ward	5	5	5	5	5	5	5	..	..	..	..	..	..	..
In the female disorderly ward .....	..	..	..	..	..	..	..	12	12	12	12	12	12	12
With confined bowels	1	1	1	..	..	..	..	..	..	..	..	..	..	..
With relaxed bowels .....	..	..	..	..	..	..	..	1	..	..	1	..	..	1
Uncleanly by day .....	..	..	..	..	..	..	..	1	1	1	1	1	..	1
Uncleanly by night	1	..	..	..	..	..	1	2	3	2	3	3	..	4
Wet by day	2	3	3	2	3	2	3	..	..	..	..	2	2	..
Wet by night	7	7	5	5	5	6	7	4	3	3	4	4	5	3
Slept on straw cases	6	4	5	5	6	6	6	3	3	3	4	4	5	3
Wore socks in bed .....	..	..	..	..	..	..	..	4	4	4	4	4	4	3
Noisy in the day	11	11	12	11	12	11	11	22	24	26	21	21	25	23
Noisy in the night	8	8	7	7	9	9	8	17	21	17	10	16	18	19
Destroyed their clothing .....	..	..	1	..	..	..	1	..	2	2	1	..	1	1
Destroyed their bedding .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Refused a part of their food .....	..	..	..	1	..	..	..	2	2	..	..	..	..	..
Refused all their food .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Had epileptic fits by day	2	2	2	1	..	2	1	1	1	1	1	1	1	1
Had epileptic fits by night .....	..	2	..	..	..	1	..	2	2	1	1	2	1	1
Met with accidents .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Attempted suicide .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Under night watching	24	22	23	25	25	25	25	20	20	20	20	20	20	20
Under hired nursing	2	2	2	2	2	..	..	1	1	1	1	1	1	1
Under medicinal treatment	1	1	1	1	2	..	..	1	1	1	..	..	..	..
Under surgical treatment .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Kept their beds by day .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Took wine medicinally .....	..	..	..	..	..	..	..	3	2	2	2	2	2	2
Took porter medicinally	7	7	6	6	6	6	7	9	9	9	9	9	9	9
Allowed extra meat	4	4	4	3	3	3	4	..	..	..	..	..	..	..
Disallowed meat .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Fed with the feeder .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bathed in a warm bath .....	..	..	..	..	21	..	..	..	..	..	..	..	8	1
Exercised in the galleries	63	63	64	63	63	63	63	69	69	69	69	68	67	68
Ditto in the grounds	63	63	61	62	63	63	61	..	..	..	4	4	..	..
Ditto in the country	3	1	5	..	..	..	..	..	..	..	..	..	..	..
Ditto in the town .....	..	..	..	3	3	..	..	..	..	..	1	..	..	..
Ditto in active games outdoors .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ditto in active games indoors	7	7	7	7	7	7	..	..	..	..	..	..	..	..
Capable of employment	49	48	49	50	50	48	52	44	44	44	44	44	44	22
Willing to be employed	32	31	32	30	31	30	32	24	22	29	29	28	27	11
Had active employment	31	31	32	30	31	30	32	22	20	27	28	27	26	12
Had sedentary employment .....	..	..	..	..	..	..	..	15	14	14	9	15	12	..
Employed indoors	24	24	25	24	24	23	23	23	21	28	28	27	26	11
Ditto outdoors	15	15	15	14	15	14	..	..	..	..	..	..	..	..
Ditto in the airing grounds .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ditto in the kitchen garden	15	15	14	13	14	13	..	..	..	..	..	..	..	..
Ditto cleaning rooms	19	18	20	19	18	19	18	21	16	26	27	27	25	11
Ditto in the laundry	1	1	1	2	2	1	1	1	2	..	1	1	1	..
Ditto in the kitchen	12	11	10	13	14	13	11	2	3	2	2	2	1	1
Ditto in knitting	1	1	..	..	1	1	..	3	3	3	4	3	4	..
Ditto in sewing .....	..	..	..	..	..	..	..	10	10	9	17	17	12	..
Engaged in reading	10	10	9	12	13	10	12	9	9	11	11	9	7	12
Chewed tobacco	26	26	25	26	26	25	24	..	..	..	..	..	..	..
Smoked in the grounds	18	21	22	20	22	21	20	3	3	4	3	4	4	3
Attended church on Sunday .....	..	..	..	..	..	..	6	..	..	..	..	..	..	3
Ditto house service on Sunday .....	..	..	..	..	..	..	49	..	..	..	..	..	..	35
Attended evening prayers	50	50	44	48	48	49	46	26	29	28	30	30	30	29

The above Return is made out daily, from the respective Attendants' Daily Returns of the state and circumstances of each individual patient.

HOUSE SURGEON'S WEEKLY RETURN OF THE
SOCIAL AND MENTAL CONDITION OF THE PATIENTS,
from December 23rd to December 29th, 1851.

Number of Patients in the House.	M. 63	F. 69	Totals. 132
First Rank.	2	3	5
Second Rank.	11	12	23
Third Rank.	50	54	104
Maintained by their Friends.	22	26	48
Maintained by the Public.	41	43	84
Less than 1 year since the first attack.	5	1	6
From 1 to 2 years since the first attack.	6	6	12
More than 2 years since the first attack.	52	62	114
Less than 1 year since admission.	13	6	19
From 1 to 2 years since admission.	4	9	13
From 2 to 26 years since admission.	30	44	74
Readmitted cases not included in the above.	16	10	26
Not expected to recover.	52	59	111
Expected to recover.	11	10	21
Convalescent.	1	0	1
Cases of Idiocy.	0	1	1
Cases of Epilepsy.	7	2	9
Cases of Paralysis.	3	2	5
Cases of Imbecility.	0	0	0
Having attempted Suicide.	14	11	25
Attended Sunday Morning Prayers.	57	42	99
Attended Church.	8	6	14

RECEIPTS,

from January 1st, 1851, to December 31st, 1851.

	£	s.	d.
Balance in the Treasurer's hands, 1st January, 1851	17	9	11
Cash from Patients, including payments in advance, and clothing procured	4147	16	10
Annual Subscriptions	80	18	0
Benefactions	51	0	0
Rents of Cottages and Gardens.....	14	7	0
By sale of Ashes	3	10	0
Bones	3	14	2
Grease	18	16	6
Old Pumps (2)	3	2	1
Old Materials	17	9	5
Rags	0	7	0
Stone Steps (2)	0	8	0
Interest allowed by the Bank	3	4	6
	£4362	3	5

STATE OF DEBTS AND CREDITS,

January 1st, 1852.

DEBTS.		£	s.	d.	£	s.	d.
Patients' Advances in hand.....		352	3	11			
Bill for 24½ tons of Coal and Leading		11	13	3	363	17	2
CREDITS.							
Due from Patients		3	7	4			
In the hands of the Matron		40	0	0			
Balance in the Bank, 1st January, 1852.....		218	10	9	261	18	1
Outstanding Debt.....		£101 19 1					

COST PER HEAD,

calculated on the average daily number of Patients in the year.

	Total cost per year.			Average cost per year.			Average cost per week.			Average cost per day.		
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
Salaries and Wages	732	10	0	5	15	4½	0	2	2½	0	0	3¾
Food, including Household	1544	17	2½	12	3	3¼	0	4	8	0	0	8
Coal, Candles, &c.	297	7	6	2	6	10	0	0	11	0	0	1½
Medicine, Printing, &c. ...	155	7	3½	1	4	5½	0	0	5½	0	0	3¾
Furniture and Linen	171	18	10	1	7	0	0	0	6¼			
Repairs, Taxes..	410	12	3	3	4	8	0	1	2¼			
	£3312	13	1	£26	1	7¼	£0	10	0	£0	1	5

COMPARATIVE STATEMENT

of the Number and Payments of the Patients, in each of the three last years.

			<i>Number of Patients admitted,</i>					
1849			1850			1851		
Self-supported	26		.....	26		.....	18	
Parochial	14		.....	24		.....	17	
	<hr/> 40			<hr/> 50			<hr/> 35	

<i>Payments of Patients on the Books,</i>											
1849				1850				1851			
Self-supported	£1385	17	3	.....	£1528	5	6	.....	£1593	15	9
Parochial	£2274	5	6	.....	£2042	9	10	.....	£2066	8	9
	<hr/>				<hr/>				<hr/>		
	£3660	2	9		£3570	15	4		£3660	4	6

<i>Number of each Rank of Patients admitted.</i>									
1st Rank.....	0 M.	1 F.	|	.....	0 M.	1 F.	|	.....	1 M 1 F.
2d Rank.....	10	7	|	.....	9	3	|	.....	7 2
3d Rank.....	12	10	|	.....	18	19	|	.....	12 12
	<hr/>				<hr/>				<hr/>
	22	18			27	23			20 15

<i>Payments of each Rank of Patients on the Books.</i>									
1849				1850				1851	
1st Rank, at £1 1s. per week	£ 261	3	0	...	£ 184	17	0	...	£ 250 10 0
2d Rank, at 15s.	£ 619	17	9	...	£ 829	9	0	...	£ 879 5 11
3d Rank, at 10s.	£2779	2	0	...	£2556	9	4	...	£2530 8 7
	£3660	2	9		£3570	15	4		£3660 4 6

Number of payments of each Rank of Patients admitted or readmitted, from the opening of the Institution in March, 1820, to December 31st, 1851.

FIRST RANK.

9 Patients, at from £2 12 6 to £1 5 0 per week, £ 317 6 7
 105 ——— at £1 1 0 ——— £7488 5 1—£7,805 11 8

SECOND RANK.

238 ——— at £0 15 0 ——— £8,876 0 9

THIRD RANK.

1089 ——— at £0 10 0 ——— £49,725 19 9
 £66407 12 2

☞ Variations in the Rates of payment by some of the Patients, will account for the apparent excess of Patients in the above Tables beyond the real number.

COMPARATIVE STATEMENT

of the principal Articles consumed, and the average number of Persons maintained, in each of the three last years.

Principal Provisions, &c., consumed.

	1849		1850		1851	
	£ s. d.		£ s. d.		£ s. d.	
Lead .....lbs.	58,156	284 18 7	54,142	248 6 10	56,291	252 2 10
Butter .....lbs.	2,796	133 19 2	2,660	124 17 10	2,706	123 17 10½
Candles ...lbs.	861	21 14 3	888	20 6 4	866	19 1 7½
Cheese .....lbs.	327	10 4 1	391	11 19 2	866	25 2 3
Wool .....tons	299	195 9 11	284	176 17 7	238	134 15 2
Coffee .....lbs.	872	48 0 5½	857	43 12 3	874	46 0 7½
Flour .....sts.	415	38 0 10	424	35 6 8	448	34 13 6
Wheat .....lbs.	31,472	684 16 3	31,273	638 19 10½	31,881	575 17 4½
Milk .....gills.	3,773	123 5 7	3,701	123 2 4	3,478	116 3 0
Barley meal		3 10 3½	.....	2 8 11	.....	3 16 8
.....gills.	72	14 15 4	66	13 15 6	61	12 0 6
Potatoes ...pks.	2,669	130 2 8	2,077	71 16 2	2,147	68 2 10
Peas.....lbs.	840	9 2 5	829	8 10 9	728	7 16 0
Map .....lbs.	2,548	49 6 9	2,546	45 15 2	2,066	45 17 11
Yarrow .....shs.	750	9 15 0	400	5 4 0	400	5 4 0
Tobacco .....lbs.	5,312	101 4 0½	5,261	95 4 8½	5,475	97 0 10
Tea .....lbs.	562	105 13 1½	562	102 3 6	587	109 12 6½
Vegetables, Seeds.....		28 17 0	.....	23 12 3	.....	35 10 9
		£1992 15 9		£1791 19 10		£1712 16 3½

Daily average number of Persons maintained.

	1849		1850		1851
Patients.....	129	.....	124	.....	127
Household.....	23 $\frac{1}{4}$	.....	23	.....	22 $\frac{3}{4}$
	<u>152$\frac{1}{4}$</u>		<u>147</u>		<u>149$\frac{3}{4}$</u>

Daily average Consumption of Bread and Meat, per head,

	1849		1850		1851
Bread.....	oz. 16 $\frac{1}{2}$	.....	oz. 16	.....	oz. 16 $\frac{1}{4}$
Meat	oz. 8 $\frac{3}{4}$	.....	oz. 9	.....	oz. 8 $\frac{3}{4}$

Weekly average Loss of weight of Bread and Meat, as shown on taking Stock weekly.

	1849		1850		1851
Bread	lbs. 2 : oz. 4	.....	lbs. 1 : oz. 1	.....	lbs. 2 : oz. 13
Meat	lbs. 7 : oz. 4	.....	lbs. 7 : oz. 0	.....	lbs. 6 : oz. 6

DIETARY OF THE THIRD RANK PATIENTS,

except where specially altered by the Faculty, or by a Weekly Board.

BREAKFAST.	DINNER.	SUPPER.
<i>Males.</i>		
Bread 6 oz.	Bread 3 oz.	Bread, toasted and } 6 oz.
New Milk, boiled..... 1 pt.	Meat, cooked & boned 4 oz.	buttered†..... }
	Potatos* 12 oz.	Tea† 1½ pt.
<i>Females.</i>		
Bread 5 oz.	Bread 3 oz.	Bread, toasted and } 5 oz.
Tea† 1 pt.	Meat, cooked & boned 4 oz.	buttered†..... }
	Potatos* 8 oz.	Tea† 1 pt.
<i>Males and Females.</i>		
<i>Sunday</i> .....Roast Beef.	<i>Wednesday</i> ....Boiled Beef.‡	<i>Friday</i> .....Roast Beef.
<i>Monday</i> .....Boiled Beef.	<i>Thursday</i> .....Roast Mutton.	<i>Saturday</i> .....Boiled Beef.§
<i>Tuesday</i> .....Roast Mutton.		

Diarrhæa Diet.—Rice Pudding ; avoiding Meat, Broth, and Potatos.

* Carrots are used occasionally instead of Potatos ; also Peas, or Beans, or Turnips, as in season.

† Each Patient is allowed, per week, Tea, 1 oz., Sugar, 8 oz., Butter, 8 oz.

‡ For Females.—For Males, Cold meat 4 oz., stewed with Ox cheek, 1 pt. } and Rice Pudding, or

§ For Males.—For Females, Cold meat 4 oz., stewed with Ox cheek, 1 pt. } Yeast Dumpling, 8 oz.

☞ Toast-water is supplied at Dinner, and in every Day Room, at all times.

WORK DONE BY FEMALE PATIENTS,

(☞ when the weather will not admit of exercise in the open air,)

from January 1st, 1851, to December 31st, 1851.

ARTICLES MADE UP

Aprons 63	Flannel Waistcoats... 69	Shaving cloths 4
Blanket Case..... 1	Gowns 63	Straw cases..... 15
Caps 33	Matrass Covers 6	Stockings, knitted prs 23
Carpets 4	Neckerchiefs 30	Strong dresses 2
Chair-cover 1	Nightcaps 32	Table clothes 20
Chemise 60	Night gowns 20	Tray clothes 2
Counterpanes 5	Pocket handkerchiefs 30	Towels 144
Door Blinds 6	Pillow slips 84	Top petticoats 28
Dusters 48	Shirts 117	Window blinds 10
Flannel Petticoats..... 30	Sheets 54	

NUMBER OF AIRING GROUNDS, APARTMENTS, BEDS ;

Airing Grounds 2	Single Sleeping-rooms ... 40	Beds for Patients..... 127
Exercising Galleries..... 6	Double and treble ditto ... 2	Do. 2 Offs., 14 Attends 16
Patients' Sitting-rooms... 14	Dormitories..... 14	Do. Female Servants ... 5—

DAY ROOMS, BED ROOMS, BEDS.

		PATIENTS'	PATIENTS'	OFFICERS' AND SERVANTS	
		Day Rooms.	Bed Rooms, and Beds.	Bed Rooms, and Beds.	
FEMALE SIDE OF THE HOUSE.	South Front. South Front. 1st Story.	Sitting Room.	No. 1 1	A—Female Attendant	1
		Exercising Gallery.	No. 2 1		
		Sitting Room.	No. 3 1		
	West Front. West Front. 1st Story.	Sitting Room.	No. 4 Infirmary 1	B—Female Attendant	1
			No. 5 1		
	West Front. West Front. 2nd Story.	Sitting Room,	No. 6 Dormitory 8	C—Female Attendant	1
		Exercising Gallery, (and	No. 7 1		
		for active amusements).	No. 8 1		
	South Front. South Front. 2nd Story.	Sitting Room.	No. 9 1	D—Female Attendant	1
		Exercising Gallery.	No. 10 1		
		Sitting Room.	No. 11 1		
	West Front. West Front. 2nd Story.	Sitting Room.	No. 12 1	E—Female Attendant	1
		Exercising Gallery.	No. 13 1		
		Sitting Room.	No. 14 Infirmary 1		
MALE SIDE OF THE HOUSE.	North and South Fronts. 1st, 2nd, 3rd Stories.		No. 15 1	F—Female Attendant	1
	North and South Fronts. 1st, 2nd, 3rd Stories.		No. 16 Dormitory 7	G—Fem. Head Attend.	1
			No. 17 Watch do. 7		
			No. 18 Watch do. 7		
	North and South Fronts. 1st, 2nd, 3rd Stories.	Sitting Room.	No. 19 Watch do. 4	G—Fem. Head Attend.	1
		Sitting Room.	No. 20 1		
			No. 21 1		
	East Front. East Front. 2nd Story.		No. 22 1	H—Male Head Attend.	1
			No. 23 1		
			No. 24 1		
	East Front. East Front. 2nd Story.	Sitting Room.	No. 25 1	I—Male Attendant	1
		Sitting Room.	No. 26 2		
			No. 27 Dormitory 4		
	East Front. East Front. 2nd Story.		No. 28 Dormitory 4	J—Male Attendant	1
	East Front. East Front. 2nd Story.	Sitting Room.	No. 29 3	K—Male Attendant	1
		Sitting Room.	No. 30 Dormitory 4		
			No. 31 1		
	East Front. East Front. 2nd Story.		No. 32 Dormitory 4	L—Male Attendant	1
	East Front. East Front. 2nd Story.		No. 33 Dormitory 7	M—Male Attendant	1
			No. 34 Watch do. 7		
			No. 35 Watch do. 7		
	East Front. East Front. 2nd Story.		No. 36 Watch do. 4	N—Male Attendant	1
			No. 37 1		
			No. 38 1		
	East Front. East Front. 2nd Story.		No. 39 1	O—Male Attendant	1
			No. 40 1		
			No. 41 1		
	East Front. East Front. 2nd Story.	Sitting Room.	No. 42 1	P—Male Attendant	1
		Exercising Gallery.	No. 43 1		
		Sitting Room.	No. 44 1		
	East Front. East Front. 2nd Story.		No. 45 Infirmary 1	Q—Male Attendant	1
			No. 46 1		
	East Front. East Front. 2nd Story.	Sitting Room.	No. 47 Dormitory 8	R—Male Attendant	1
		Exercising Gallery, (and	No. 48 1		
		for active sports).	No. 49 1		
	East Front. East Front. 2nd Story.		No. 50 1	S—Male Attendant	1
			No. 51 1		
	East Front. East Front. 2nd Story.	Sitting Room.	No. 52 1	T—Male Attendant	1
		Exercising Gallery.	No. 53 Infirmary 1		
		Sitting Room.	No. 54 1		
	East Front. East Front. 2nd Story.		No. 55 1	U—Male Attendant	1
			No. 56 1		

The Third Story contains Sleeping Rooms only.—All the Sitting Rooms, the Infirmaries, eight of the Dormitories, and two of the Lavatories, contain fireplaces.

OFFICIAL BOOKS.

The Books marked thus (†) are laid before the Chairman of each Weekly Board for examination, and those marked thus (*) for his signature also.

The Books marked thus (*) are kept by Act of Parliament.

<i>Chairman</i>	Chairman's Portfolio, and Order of Proceeding. †Board Memorandum Book.
<i>Secretary</i>	Rough Minutes' Book. †Recorded Minutes' Book. Standing Board Orders' Book. Current Board Orders' Book.
<i>Sub-Treasurer</i> ...	†Benefaction Book. †Subscription Book. †Cash Book. †Bank Book. House Ledger. Abstract of House Ledger. Patients' Ledger. Abstract of Patients' Ledger. Salaries and Wages Book. Auditors' Check Book.
<i>Physicians</i>	Physicians' Case Book. †———— Special Report Book.
<i>Surgeons</i>	Surgeons' Case Book.
<i>House Surgeon</i> ...	*House Surgeon's Journal of Daily occurrences. *House Surgeon's Registry of Admissions' Book. *House Surgeon's Case Book. *House Surgeon's Medical Journal, and Weekly Report Book of the Cases of Sickness. *Ditto Registry of Discharges' and Deaths' Book. *The Visitors' Book } for entries by the Visiting *The Patients' Book, } Commissioners in Lunacy. Attendants' Daily Return Books of the Special circum- stances of their respective Patients individually.

	†House Surgeon's Daily Return Book of the Special Circumstances of the Patients collectively.
	†House Surgeon's Weekly Return Book of the Distinctions of the Patients as to Rank, length of Residence, past Duration of Disease, & Prognosis.
	†House Surgeon's Registry of Control Book.
	House Surgeon's Day-Book of Medicines issued.
	†Sick Patients' Wine, Spirits, and Porter Book.
	†Register of the number of Persons daily maintained.
	Attendants' and Servants' Hiring and Discharge Book.
	House Surgeon's Cash Receipts' Book.
<i>Matron</i>	†Stock Book of Provisions as received and issued daily.
	Book of Issues to Attendants and Servants.
	Pass-Books of the Issues to Attendants and Servants.
	†Cravings' Book for Furniture, Patients' Clothing, &c.
	Book of Articles made up by Female Patients.
	Patients' Inventories' Book of Clothing and other property.
	House Inventories' Book of Furniture, &c.
	Patients' Tradesmen's Pass-Books.
	House Tradesmen's Pass-Books.
	Matron's Petty Cash Book.
<i>House Visitor</i>	Visitors' Weekly Report Book.
<i>Governors</i>	Governors' Memorandum Book.
<i>Casual Visitors</i> ...	Strangers' Name and Address Book.

Any Governor may at all times inspect, extract, or copy any Bills, Accounts, Journals, Registers, Minute Books, or documents whatsoever, provided that the names of the Patients shall not be copied; and all documents kept by order of the Rules or of any Board, shall be the property of the Institution.—RULE VIII—12.

A Key to the Books of Accounts is left always in the house, so that they may be at all times accessible to the Governors.—REG.—VIII—1.

BOARD LETTER* OF INQUIRY

to the Friends of Patients, who have been discharged.

Lincoln Lunatic Asylum,

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As Chairman of the Weekly Board of Governors holden here this day and in pursuance of the regulations of this Institution, I have to request the communication of any complaint you may have to make in regard to the treatment, property, accounts, or any other matters whatsoever, in reference to the case of _____ late a Patient; or a statement of your satisfaction, if satisfied, addressed to "The Chairman of the Board, Board Room, Lunatic Asylum, Lincoln."

I am,

Your obedient Servant,

Chairman.

* The Answers are filed.

FORM OF LEGACY.

Persons disposed to contribute to this Asylum by their last Will, are particularly requested to use the following words.

I bequeath out of such part of my estate as may be applied to Charitable Purposes, a Legacy of £ _____ sterling, to the LINCOLN LUNATIC ASYLUM, to be paid clear of legacy duty, within _____ months after my decease, to the Treasurer for the time being of the Asylum, whose written receipt for such Legacy shall be a sufficient discharge to the Executors.*

☞ For want of this form, many Charities have lost their Legacies, the Testators having charged them on their *real* instead of their *personal* estate.

* If so intended.