

**Report by the managers of the Royal Edinburgh Asylum for the year 1841,
presented to the annual general meeting, held on 31st January, 1842.**

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REPORT

BY THE

MANAGERS of the ROYAL EDINBURGH ASYLUM
for the Year 1841, presented to the ANNUAL GENERAL
MEETING, held on 31st January, 1842.

THE Managers have viewed with great satisfaction the proceedings connected with this Institution during the past year. It was to them a season of much interest and no little anxiety, but the results have been favourable beyond their most sanguine hopes; and though a great deal yet remains to be done, they can no longer doubt as to the final accomplishment of their object. That object was to provide an Establishment for the Insane Poor, of such construction and magnitude as might secure to the inmates, at a low rate of board, every comfort of which their condition is susceptible; and they trust that in the new buildings, which are now almost completed, such a prospect will be fully and speedily realized.

The entire cost of this new Establishment will not be under L.24,000,—to meet which, the Managers had only about L.11,000 when they commenced the work. But so general is the interest felt in this truly charitable design, that no less a sum than L.9000 has since been contributed by individuals or public bodies, and many of both have not yet come forward who are known to entertain the intention of doing so. From L.4000 to L.5000 more will be necessary for enabling the Managers to complete and furnish the new Institution; and this they are most anxious to do without incurring any permanent debt, so as they may at once impart the full benefits of it, *first* to those who shall be presented by contributors, and *next* to all other poor patients sent for cure.

The execution and progress of the works are in every respect satisfactory, and only one opinion has been expressed by visitors, either as to the completeness of the buildings, or the beauty and

appropriateness of the situation. Being immediately adjacent to the present Institution, which will in future be appropriated exclusively to the wealthier class of patients, both Establishments will have the advantage of a common Superintendence, along with an entire separation of Classes; and thus, while the Medical experience derivable from the Institution, must, from its greater scale, be more valuable, the proportional expense of management will be considerably diminished.

It is hoped that the new Establishment may be opened by June next for the reception of inmates, of whom it will accommodate about 250, and they will at once find suitable occupation in the numerous works which will be purposely left for them to finish. The Managers cannot look forward to this event without painfully regretting that the late Treasurer of the Institution, who, allied as he was to its original Founder, equalled him in zeal for its advancement, and was mainly instrumental in promoting the present design, should not have survived to witness the successful result of his labours.

As regards the old Institution, — besides the general improvements which, during last year, were effected in order to render it more complete as a receptacle for the wealthier class of patients, a portion of it has been made available, though at some expense and inconvenience, for the temporary accommodation of several poor patients, whereby not only have their comforts been promoted, but the experiment has been tried how far a number of the insane may be congregated together in one apartment with safety and advantage. The result has been very satisfactory in both respects, and no doubt can now be entertained that this mode of treatment, which will be almost exclusively followed in the new Institution, possesses, in general, a decided superiority over the separate cell system.

The average number of inmates, during last year, has been greater, by nearly one-third, than during any former year. And it will be seen from the Medical Report annexed, that under very unfavourable circumstances, the proportion of cures was considerable, while the condition of all has been ameliorated. The ordinary expenditure has also been proportionally lower than in former years, and leaves a surplus of income; but on account of some extra works, and additions to the furniture and bedding, &c., which were rendered necessary by the introduction of so many poor patients,

there is a deficiency on the whole, unless the value of these additions be reckoned. When, however, the new Institution is opened, several items of expense which have hitherto fallen exclusively on the old one, will come to be divided between them, and thus the proportional amount will be lessened to both.

By means of elaborate tables, which have been constructed by the Resident Physician, for systematically recording every circumstance connected with the Institution or its inmates, full information will henceforth be attainable in regard to all matters of the least interest, and an efficient check will at same time be in constant operation against either negligence or waste. Thus, it is hoped, the Institution will speedily acquire a high character, not only for usefulness and success, but also for the care bestowed on its domestic economy, so as to render it available for the insane of all classes at very moderate rates of board.

In conclusion, the Managers may observe, that it is their anxious wish to embrace within the new establishment all the minor institutions for pauper lunatics in this city and neighbourhood, feeling convinced, that such an arrangement must tend to the general welfare of their inmates, as well as to the public advantage in other respects. They have accordingly made proposals for altogether superseding the city and other bedlams, and transferring their inmates to the Morningside Asylum, whenever it shall be opened; and they can scarcely doubt, that the favourable terms which public liberality has enabled them to propose for this desirable object, will be acceded to.

HENRY JARDINE, *Chairman.*

ABSTRACT of TREASURER'S ACCOUNT for the Year 1841.

I. AS REGARDS OLD ESTABLISHMENT.

1. ORDINARY INCOME.

Amount of board for patients, L.2105 15 4

2. ORDINARY EXPENDITURE.

(1.) Disbursements for Establishment, viz. —

Provisions, coals, &c.	L.1024	8	1½
Servants' wages,	217	4	11½
General furnishings to house,	104	18	4
Repairs, &c.	67	12	2
Taxes and assessments, &c.	18	8	6½
Insurance against fire,	15	16	6
Gas,	16	6	0
Water duty,	50	0	0
Miscellaneous payments,	23	2	11½
	<u>L.1537</u>	<u>17</u>	<u>7</u>

(2.) Salaries and allowances, viz. —

Resident physician,	L.150	0	0
Matron,	50	0	0
Chaplain and Precentor,	34	0	0
Consulting Physicians,	54	12	0
Secretary,	26	5	0
Treasurer,	42	0	0
	<u>356</u>	<u>17</u>	<u>0</u>
			<u>1894 14 7</u>
Surplus income,			<u>L.211 0 9</u>

EXTRAORDINARY PAYMENTS, VIZ.

Repairs and improvements,	L.63	11	6
Various furnishings,	196	14	4
Retired allowance to Mr Hughes,	60	0	0
One year's water duty for 1840, (paid this year,)	50	0	0
Assessment for male attendants, (do.)	17	0	4
	<u>387</u>	<u>6</u>	<u>2</u>
Actual surplus expenditure on the year,	L.176	5	5

II. AS REGARDS NEW ESTABLISHMENT.

1. INCOME AND RECEIPTS.

Rent for crop 1840, of grounds let,	L.168	7	5
Amount of subscriptions, &c. paid,	6552	12	10
Dividends on bank stocks,	356	13	4
	<u>L.7077</u>	<u>13</u>	<u>7</u>

2. EXPENDITURE AND PAYMENTS.

One year's feu-duty to Watson's Hospital, L.396 0 0

Paid instalments for New Buildings, viz. —

Mason,	L.4000	0	0
Wright,	3000	0	0
Plumber,	700	0	0
Slater,	420	0	0
Plasterer,	300	0	0
Ironfounder,	251	0	0
Architect	200	0	0
Clerk of Works, &c.	118	13	0
Excavations and levelling,	155	16	11
		<u>9145</u>	<u>9 11</u>
Half expense of improving burn,		257	8 5
Agent's account for 1840 and 1841, relative to buildings, subscriptions, &c.		235	10 0
Advertising, printing, postages, &c.		299	10 3
Interest, &c. on money borrowed, and on bank account,		<u>L.243</u>	<u>2 3</u>
			<u>10577 0 10</u>

III. STATE OF FUNDS AT 31ST DECEMBER, 1841.

Balance of funds available, at the above date,	L.2299	18	0
Estimated expense of new buildings, viz.—			
Amount of contracts,	L.18,829	0	11
Expense of levelling, draining, and enclosing grounds, &c.	(say) 1300	0	0
Internal fittings, furniture, &c.	2350	7	5
Architect, clerk of works, agent, and sundries,	1720	11	8
		<u>17,154</u>	<u>9 8</u>
Total expense,	L.24,200	0	0
Whereof paid to account,			
		<u>7045</u>	<u>10 4</u>
Total deficiency of funds,		<u>L.4745</u>	<u>12 4</u>

MEDICAL REPORT

BY THE

RESIDENT PHYSICIAN,

For the year ending 31st December, 1841.

IN my Report for 1840, I took occasion to remark, that no general views could be founded on the experience of an Institution, on so limited a scale. Since that time the number of the inmates has considerably increased, but the same remark is still called for. It is not the less important, however, that the returns of the year should be recorded, for the value which their connection with those of future years will give to them.

At the close of 1840, the number of inmates was	39
viz.	19 males
	20 females
At the close of 1841, the number was	59
viz.	40 males
	19 females
During the year 1841, there were admitted in all	41
viz.	28 males
	13 females
And there were discharged	20
viz.	6 males
	14 females
Of whom were recovered	16
viz.	5 males
	11 females
Removed by friends, not recovered,	3
viz.	1 male
	2 females
And there died	1
viz.	1 male

It thus appears that the usefulness of the Institution has been extended during the past year, a greater number of patients having been admitted and discharged than during any former year of its existence. Of the former, a large proportion belonged to a class—the poorer—hitherto almost excluded from its benefits; but the gratification which this fact is calculated to afford, is alloyed with the reflection, that so few of these cases were of a nature to reap the full advantage of the change. With few exceptions, they had been in confinement elsewhere; and although in a condition

to appreciate and enjoy the greater comfort of their new abode, were, from the long duration of their malady, beyond the reach of curative measures. Doubtless, many of those first presented for admission into the new establishment will be of the same character, and for some time affect unfavourably the returns. But a duty is owed by society to the incurable insane, as well as to the curable, and an Institution answers important ends, when it affords a tranquil asylum to the hopeless sufferers from this worst of human maladies. Following the plan adopted in last Report, I proceed to exhibit, in tabular forms, the principal facts of the year.

Table No. I., shewing the ages at which the disease appeared in the cases admitted.

	Males.	Females.	Total.
From 10 to 20, - - - - -	3	0	3
20 to 30, - - - - -	6	6	12
30 to 40, - - - - -	9	2	11
40 to 50, - - - - -	8	2	10
50 to 60, - - - - -	2	3	5
	28	13	41

These results do not differ from others obtained from more numerous data. Insanity is a disease of the middle, or more active and useful periods of life. The parent, the husband, the grown-up son or daughter, are seized by it, and unfitted for exertions on which the welfare, and even existence of others may depend. How important, then, that the means should be provided of acting on and removing such a disease, in the poor or dependent insane, so as to restore them to their sphere of usefulness, and avert the evils which are otherwise entailed on their families, and society in general.

II. Shewing the condition of life, in regard to marriage, of those admitted.

	Males.	Females.	Total.
Married, - - - - -	6	6	12
Unmarried, - - - - -	22	7	29
	28	13	41

In every Asylum the unmarried predominate as to numbers. The married state generally implies more regular habits, more fixed and steady views, more comfortable circumstances, and, therefore, the absence of many causes of insanity which operate in the other.

III. Shewing the Religion of those admitted.

	Males.	Females.	Total.
Presbyterians, - - - -	27	9	36
Seceders, - - - -	0	3	3
Episcopalians, - - - -	1	1	2
	28	13	41

The greater number in any country will naturally belong, or be said to belong, to the established form of religion.

IV. Shewing their amount of Education.

	Males.	Females.	Total.
Well educated, - - - -	6	7	13
Able to read and write, - - - -	16	5	21
Able to read only, - - - -	5	0	5
Unable to read, - - - -	0	1	1
Unknown, - - - -	1	0	1
	28	13	41

It is important that such a record should be kept; but it does not present those facts which it is of most interest to know. The mere instruction in reading or writing has far less influence on the formation of character, than the moral training exercised by parents or instructors. Thus a better education, in the proper sense of the term, may have been enjoyed by one who can only read, than by one classed as more highly educated.

V. Shewing the Exciting Causes of the disorder in the cases admitted.

	Males.	Females.	Total.
Intemperance in the use of spirituous liquors,	6	1	7
Loss of relatives, - - - -	1	2	3
Perverted devotion, - - - -	2	1	3
Reverses in fortune, - - - -	2	1	3
Attack of fever, - - - -	2	0	2
Metastasis of asthma, - - - -	2	0	2
Wounded pride, - - - -	1	1	2
Overstrained mental exertion, - - - -	2	0	2
Puerperal state, - - - -	0	1	1
Change of life, - - - -	0	1	1
Disappointed affections, - - - -	0	1	1
Abuse of mercury, - - - -	1	0	1
Irritation from numerous decayed teeth,	1	0	1
Fall on the head, - - - -	1	0	1
Epilepsy, - - - -	0	1	1
Apoplexy, - - - -	1	0	1
Domestic disquietude, - - - -	1	0	1
Rheumatism of scalp, - - - -	0	1	1
Exciting Cause unascertained, - - - -	5	2	7
	28	13	41

It is more difficult to determine the causes of insanity than perhaps any other disease. We can trace a case of fever to contagion, or of pneumonia to exposure to cold ; but, here, numerous difficulties meet us. They are seldom of a simple nature. Moral ones conspire with physical, and both with predisposing. The first observed symptoms of the disease, occurring in connection with some unusual event, may not in reality indicate its commencement; and some anterior circumstance, unnoticed or forgotten, may have been its true cause. In those predisposed, from hereditary or acquired weakness of the nervous system, extraordinary occurrences are not required to elicit it. The ordinary anxieties and cares of life, moral and physical ills, the lot of all, are alone sufficient. The *symptoms* of the disease may also readily be mistaken for its *causes*. Thus in all such tables, intemperance in the use of spirituous liquors holds a conspicuous place. But how often may such intemperance be merely the effect of the restlessness, and craving after excitement, which are characteristic of the first stages of the malady, and under which efforts of self-control can no longer be made. Again, the overstrained or perverted devotion which seems to usher in the disease, may, in certain cases, be nothing else than the first symptoms of melancholia, induced by other and unknown causes. And the amenorrhea, which appears at first so satisfactorily to account for an attack, may only indicate the influence which a deranged state of the nervous system exercises on the uterine functions.

The limited numbers in the above table cannot truly indicate the proportion in which different causes of the disease operate, and indeed the results of *one* year in much larger institutions are liable to be affected by accidental circumstances.

It will be seen that three of the cases appeared to have arisen from fever. When the great disturbance of the nervous system produced by fever, especially in its typhoid forms, is considered, it is only matter of surprise, that permanent cerebral derangement is so seldom the result. In two of the cases, the disease, in the form of mania, came on simultaneously with the disappearance of chronic, or constitutional asthma. Similar facts have been observed. When a chest affection, especially phthisis, supervenes on a case of mania, the symptoms of the latter are often mitigated or removed ; and, on the other hand, the fatal progress of a case of phthisis may be suddenly arrested by an attack of mania.

Irritation from numerous decayed teeth, accompanied, as it was, by rather intense application to a favourite pursuit, in one case very evidently induced the derangement. In another case, attributed to epilepsy, that disease preceded by some time the insanity, and might therefore be regarded as its cause, but perhaps epilepsy is more frequently to be regarded as a complication, merely indicative of the same morbid state of the brain as the deranged mental manifestations.

VI. Shewing the number in which Hereditary Predisposition existed.

	Males.	Females.	Total.
Hereditary predisposition, - - -	5	6	11
Hereditary predisposition unascertained,	23	7	30
	28	13	41

This cause was in operation in some of those instances in which the *exciting* one was unknown, and it may be safely asserted, that had more accurate information been obtained, this predisposition would have been found to exist in a still larger proportion of the cases. That nervous diseases are hereditary, is a fact which ought ever to be prominently brought forward. It is less calculated to alarm than to shew the importance of adopting measures to counteract its influence, in certain cases, by a more careful education, repressing, rather than encouraging, precocious mental powers, and greater attention to the general physical development.

VII. Shewing the number in which former attacks acted as a predisposing cause.

	Males.	Females.	Total.
One former attack, - - - - -	1	2	3
Two ditto, - - - - -	0	1	1
Four ditto, - - - - -	0	1	1
No former attack, - - - - -	27	9	36
	28	13	41

That those who have had one attack of insanity should be liable to others, analogy would lead us to expect. The brain does not differ in this respect from the other organs of the body, which are ever liable to take on again the same diseased action of which they have once been the seat. And if prudence dictates to him who has suffered from ophthalmia or bronchitis the propriety of avoiding those circumstances or conditions which by experience he knows may again induce the disease, and of adopting measures calculated to strengthen the weakened organ, the same principles should guide him who has laboured under the present malady. Yet how seldom is this exemplified, or laws, known to regulate other functions, practically recognized as governing the manifestations of mind!

VIII. Shewing the duration of the malady before admission.

	Males.	Females.	Total
Under one year, - - -	10	8	18
More than one year, and under two,	0	2	2
More than two years, and under three,	3	1	4
More than three years, and under four,	2	1	3
Many years, - - - -	13	1	14
	28	13	41

It thus appears that, in a large proportion, the disease had existed for such a length of time, as to leave little hope of recovery. To be treated successfully, insanity must be treated early; but prejudices, ill-founded and baneful, operate to prevent this being done. It is to be hoped that these prejudices, like others formerly surrounding mental diseases, will ere long be dispelled.

IX. Shewing the forms assumed by the disease.

	Males.	Females.	Total.
Mania, - - - -	5	3	8
Monomania,			
of Suspicion, - - -	4	0	4
Jealousy, - - -	1	1	2
Pride, - - - -	2	0	2
Vanity, - - - -	1	0	1
Poverty, - - - -	0	1	1
Unseen Agency, - -	1	1	2
Demonomania, - -	0	1	1
Melancholia, - - -	2	5	7
Dementia, - - - -	5	0	5
with Paralysis, - -	2	0	2
Fatuity, - - - -	5	0	5
with Epilepsy, - -	0	1	1
	28	13	41

This table is not to be regarded as exhibiting any thing like the proportion in which the several forms of insanity occur. There is ever a tendency in the other forms of insanity to pass into dementia and fatuity. Hence, many of the cases being old, the large proportion of these forms in the table.

X. Shewing the occupations, and by these the civil condition of those admitted.

	Males.	Females.	Total.
Gentlemen and gentlewomen,	2	5	7
Carpenters,	3	0	3
Tailors,	3	0	3
Weavers,	3	0	3
Writers,	2	0	2
Clerks,	2	0	2
Innkeepers,	2	0	2
Domestic servants,	1	1	2
Farmer's son,	1	0	1
----- wife,	0	1	1
Agricultural labourer,	1	0	1
----- labourer's wife,	0	1	1
----- labourer's daughter,	0	1	1
Officer's wife,	0	1	1
Brewer,	1	0	1
Brewer's son,	1	0	1
Bookbinder's wife,	0	1	1
----- assistant,	0	1	1
Teacher,	1	0	1
Artist,	1	0	1
Merchant,	1	0	1
Printer,	1	0	1
Skinner,	1	0	1
Carter,	1	0	1
Milliner,	0	1	1
	28	13	41

XI. Shewing the number of admissions in the several months of the year.

	Males.	Females.	Total.
January,	0	0	0
February,	1	3	4
March,	6	1	7
April,	1	0	1
May,	4	1	5
June,	2	1	3
July,	4	1	5
August,	3	3	6
September,	0	0	0
October,	2	1	3
November,	4	1	5
December,	1	1	2
	28	13	41

Were patients sent to an Asylum at the commencement of the disease, such a record would be interesting. The seasons of the year, no doubt, have a decided influence on insanity, but to what that influence amounts, it is difficult to ascertain when the period of admission into an Asylum has so seldom any connection with its first appearance.

XII. Shewing the particulars of the cases recovered.

No.	Sex.	Age.	Form of Disease.	Causes of the Disease.		Period of Residence.	
				Exciting.	Predisposing.		
						Yrs.	Mo.
1	M.	59	Melancholia,	Wounded pride,	Heredit. predis.	1	4
2	M.	27	Mania,	Dissipation,	"	0	1
3	F.	22	Melancholia,	Amenorrhea,	Heredit. predis.	1	0
4	F.	16	Monomania, with excitement,	"	Heredit. predis.	0	4
5	F.	39	Monomania of suspicion,	"	Heredit. predis. & former attack,	4	0
6	M.	35	Mania,	Irritation from decayed teeth,	Heredit. predis.	0	7
7	F.	39	Monomania of pride,	Attack of fever,	"	3	0
8	F.	22	Melancholia,	Death of relative,	Heredit. predis.	0	4
9	F.	50	Mania,	"	Former attack,	0	6
10	M.	18	Mania,	Overstrained mental exertion,	Heredit. predis.	0	4½
11	F.	22	Melancholia,	"	Former attack,	0	5½
12	M.	40	Mania,	Intemperance,	Heredit. predis.	3	6
13	F.	38	Monomania, with excitement,	Death of child,	Heredit. predis.	0	4
14	F.	27	Melancholia,	Domestic disquietude,	Heredit. predis.	0	2½
15	F.	40	Monomania of pride,	"	Former attack,	2	0
16	F.	24	Mania,	"	"	0	2½

The mortality of the year has been unusually small; and even the single case presented under that head, was one of which, from the complication present,—paralysis,—such a result was apprehended at admission.

I may remark also, that there has been very little sickness in the Institution during the same period.

XIII. Presents a view of the state of the Institution on the 31st December.

	Males.	Females.	Total.
Mania —			
Continued, - - - - -	2	1	3
Periodical, - - - - -	2	3	5
Melancholia —			
Religious, - - - - -	2	4	6
Hypochondriacal, - - - - -	2	0	2
Monomania —			
Of Suspicion, - - - - -	4	1	5
„ Unseen Agency, - - - - -	3	2	5
„ Pride, - - - - -	6	0	6
„ Vanity, - - - - -	1	1	2
„ Jealousy, - - - - -	1	0	1
Dementia, - - - - -	8	4	12
Fatuity, - - - - -	9	3	12
Ages.—			
Between 10 and 20, - - - - -	2	0	2
„ 20 and 30, - - - - -	4	3	7
„ 30 and 40, - - - - -	15	4	19
„ 40 and 50, - - - - -	12	7	19
„ 50 and 60, - - - - -	5	1	6
„ 60 and 70, - - - - -	0	4	4
„ 70 and 80, - - - - -	1	0	1
„ 80 and 90, - - - - -	1	0	1
Expected to recover, - - - - -	5	4	9
Not expected, - - - - -	35	15	50
Dangerous to themselves, - - - - -	3	2	5
„ to others, - - - - -	8	2	10
Paralytic, - - - - -	2	1	3
Sick, - - - - -	1	0	1
Destructive to clothing, - - - - -	3	2	5
Under Restraint —			
During the Day, - - - - -	0	0	0
„ Night, - - - - -	0	1	1
In Seclusion, - - - - -	0	1	1
Attend Chapel, - - - - -	25	15	40
Employed in various ways, - - - - -	30	16	46
Unemployed, - - - - -	10	3	13
Maintained by Friends, - - - - -	23	17	40
„ Public, - - - - -	17	2	19

I now proceed to make a few remarks on the moral treatment pursued in the Institution during the year. In what does the moral treatment of insanity consist? It may be said to consist in encouraging habits of self-control, in gently exercising the faculties of the mind, especially those not involved in the disease, in affording scope for the pursuit of useful employments, in gratifying

innocent tastes, and bringing to bear on excited feelings and eccentricities, the influence and example of sound minds. For prosecuting such treatment, something more is required in an Asylum than provisions for the safe-keeping of its inmates. The scholar should have his library, the artist his studio, the agriculturist his farm, the artisan his implements, and every one, society, and the means of recreation and amusement. Opportunities should be afforded for the inmates leading, so to speak, a rational life. An epitome of the world without, should be presented to them, wanting, as much as possible, the sources of agitation and excitement in operation there.

I have endeavoured to keep these objects steadily in view. The inmates have been encouraged to engage in such pursuits as were congenial to their tastes; and already that system of in-door occupation has been begun, which, I trust, will form a conspicuous feature in the extended establishment. In excursions to the country, visits to public places, and to relatives at home, efforts of self-control have been beneficially called forth. Meetings of the inmates, for various purposes, have been held, where the influence of example, and the restraining effect of society, have been exemplified. I allude to the daily attendance in chapel,—to concerts,—to meetings of a convivial nature,—and to others in the winter evenings, when, with the aid of a magic lantern, some information on interesting subjects, and no little amusement, was afforded. Daily religious services might, at first, appear open to the objection, that as religion is the cause of insanity in some, and is the subject of delusions in others, it ought not to be made a frequent subject of attention in an Asylum. But experience leads us to draw a distinction between the effects of it presented to the inmates as a body, and as individuals. It may be advantageous, and certainly not hurtful, to place them in conditions where a certain restraint must be imposed on their demeanour, and religion is exhibited simply as the page of truth exhibits it, while it might prove positively injurious to attempt by arguments or reasonings, however cogent, addressed to individuals, to combat their gloomy or perverted views. Attendance in the chapel forms an epoch in the day,—it tends to give a new current to thoughts usually morbid; and it is not to be forgotten, that there are among the inmates of an Asylum, those who entertain the justest views of religion, and are, therefore, entitled to the enjoyment of all its privileges.

Every day is adding to the triumphs of moral over physical restraint, in the treatment of the insane. Whether we are yet prepared to dispense with the latter—in the sense of *personal* restraint—in all cases, I do not presume to determine. To diminish its amount is, however, now the object of all engaged in the treatment of the insane; and, as in other cases, it is by the accumulation of facts, and the details of varied experience, that correct views are to be acquired on what still remains disputed regarding it. For eighteen months I have not considered it necessary to use personal restraint on any

occasion during the day. In one case, (a suicidal patient,) I have been reluctantly compelled to make use of it during the night; but with a larger staff of attendants, or a building constructed on the plan of the new establishment, I would have been enabled to dispense with it even in that instance.

It is with the greatest pleasure that I hail the prospect of the speedy completion of the new Asylum. My duties must then be increased; but I shall have the satisfaction of exercising them in a building admirably adapted for the insane poor, in whom my warmest sympathies are interested.

W. M'KINNON, M.D.