

The sixty-fifth annual report of James Murray's Royal Asylum Perth.

Contributors

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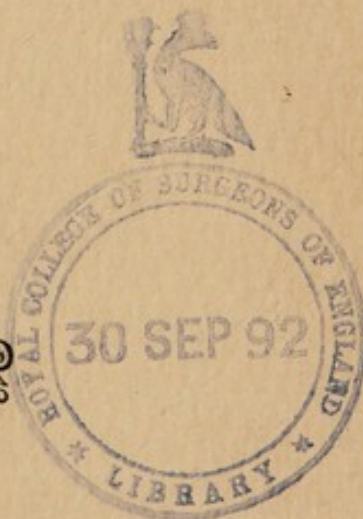
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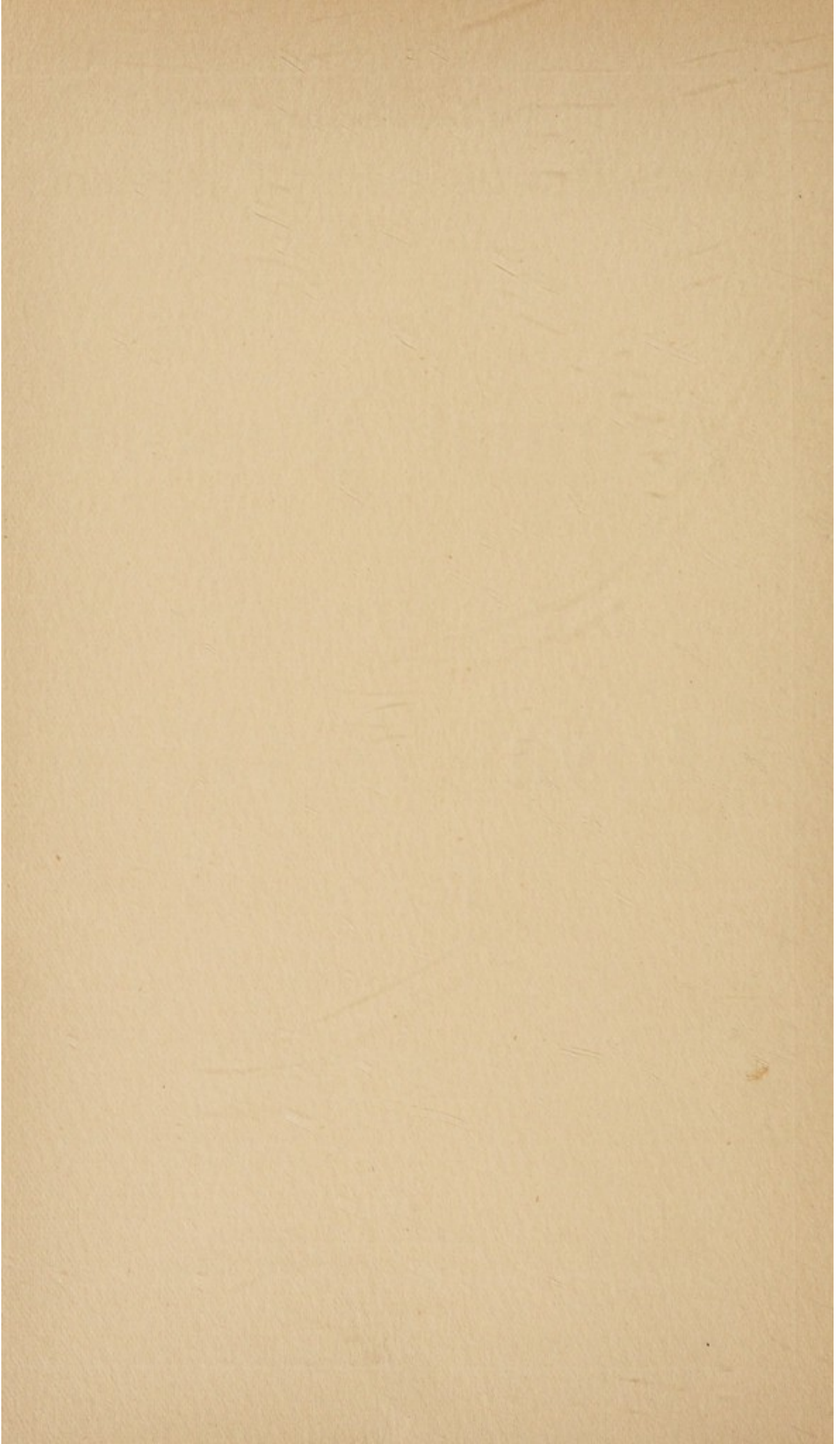


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THE
SIXTY-FIFTH
Annual Report
OF
JAMES MURRAY'S
Royal Asylum
Perth.



PERTH:
PRINTED BY J. YOUNG & SONS, 66 WATERGATE.
1892.



Incorporated by



Royal Charter.

James Murray's Royal Asylum, Perth.

Chairman.

The Viscount Stormont.

Directors Ex-Officio.

His Grace the Duke of Athole, K.T., Lord-Lieutenant of the
County of Perth.

And. Jameson, Esq., Sheriff of the County of Perth.

John Grahame, Esq., Sheriff-Substitute of the County of Perth.

George Wilson, Esq., Lord Provost of Perth.

J. P. Pirrie, Esq., Lord Dean of Guild, Perth.

D. Macgregor, Esq., First Bailie, Perth.

A. Bell, Esq., Convener of Trades, Perth.

John Thomas, Esq., President of the Society of Solicitors of
Perthshire.

Rev. A. Fleming, B.A., Minister of St. Paul's Church, Perth.

Life Directors.

Wm. Smythe, Esq. of Methven.

H. C. R. Macduff-Duncan, Esq.
of Damside.

David Mackinlay, Esq. of Cor-
don.

The Viscount Stormont.

Annual Directors.

Alex. Macduff, Esq. of Bonhard.

James F. Pullar, Esq., Rosebank.

J. D. Lumsden, Esq. of Hunting-
towerfield.

Capt. J. S. Black of Balgowan.

Robert Pullar, Esq., Tayside.

Jas. T. Sellar, Esq., W.S., Perth.

Col. Smythe, Yr. of Methven.

Col. Campbell, Perth.

Lieut.-Col. E. R. Stewart Richard-
son of Ballathie.

Geo. Gray, Esq., Bowerswell.

John Steele, Esq. of Blackpark.

John M. Miller, Esq., Mayfield.

Committee of Management.

The Viscount Stormont.

Alex. Macduff, Esq.

G. Wilson, Esq.

R. Pullar, Esq.

J. T. Sellar, Esq.

Colonel Campbell.

J. Steele, Esq.

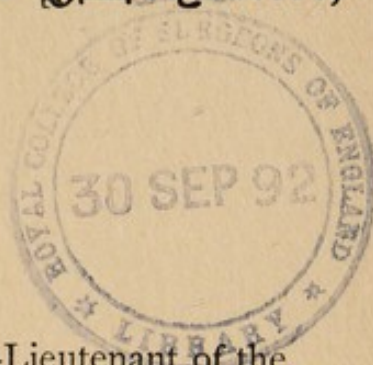
J. M. Miller, Esq.

Joint Secretaries and Treasurers.

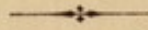
Messrs. Mackenzie & Dickson, Solicitors, Perth.

Auditors.

Messrs. J. & R. Morison, Perth.



Asylum Staff.



Physician Superintendent.

A. R. Urquhart, M.D.

Assistant Medical Officer.

Frank Hay, M.B., C.M.

Chaplain.

Rev. W. D. Knowles, B.A., Lond.

Matrons.

Miss Mountford, at the Asylum.

Miss Ball, at Kincarrathie.

Chief Attendant.

Mr. W. Henry.

Clerk and Storekeeper.

Mr. J. Chisholm.

At JAMES MURRAY'S ROYAL ASYLUM,
the 13th day of June, 1892.

At the Annual General Meeting of Directors of the Asylum, held in terms of the Royal Charter,—E. A. Stuart Gray, Esq. of Gray and Kinfauns, presiding, in the unavoidable absence of Viscount Stormont, the Chairman.

Inter alia :—

THE Secretary read the Annual State of Accounts for the year ending 31st March, 1892, prepared by the Auditors, which was ordered to be engrossed.

The Secretary thereafter read the Report of the Committee of Management on the affairs of the Institution for the year.

The Chaplain read his Report.

Dr. Urquhart afterwards submitted his Annual Report as Physician Superintendent, dealing with the year ending 31st March, 1892, as authorised by the Directors.

The last Report of the Visiting Commissioners in Lunacy was read by the Secretary.

On the motion of the Chairman, the Meeting resolved—That the Reports now submitted be approved of and recorded in the Minute Book of the Corporation, and that the same, or a suitable abstract thereof, be printed and circulated under the direction of Dr. Urquhart and the Secretaries.

On the motion of Colonel Smythe, it was agreed that the following be elected Annual Directors in room of those retiring, viz. :—

Col. Campbell, Perth ;
 Lieut.-Col. E. R. Stewart Richardson of Ballathie ;
 Geo. Gray, Esq., Bowerswell ;
 John Steele, Esq. of Blackpark ;
 John M. Miller, Esq., Mayfield ;

and that Mr. Steele and Mr. Miller be added to the Committee of Management.

The List of Directors accordingly now stands as printed on page 3.

Mr. Macduff moved, and it was unanimously agreed to, that Viscount Stormont be re-elected Chairman for the ensuing year.

It was thereafter moved by Mr. Pullar, and unanimously agreed to, that the Meeting re-appoint Messrs. Mackenzie & Dickson as Secretaries and Treasurers of the Institution, and also that the Chaplain, Auditors, and Matrons, be re-elected.



REPORT OF THE PHYSICIAN SUPERINTENDENT
for the Year ending 31st March, 1892,
presented at the ANNUAL MEETING OF
DIRECTORS, 13th June, 1892.

I HAVE the honour to submit the Sixty-fifth General
Statistics.
Annual Report, together with Tables of
Medical and General Statistics.

On the 1st April, 1891, there were 106 persons
on the Registers of the Asylum.

Forty-one were admitted during the year, of
whom 20 were men and 21 women.

Twenty-nine were discharged, 17 men and 12
women.

The number of deaths was twelve, 6 men and
6 women.

The total number of cases under treatment
was 147, and the average daily number on the
books 107.

On the 31st March, 1892, there remained 52
men and 54 women—total, 106. These figures
are similar to those of last year; and, although
they indicate active changes in the population of
the Asylum, it will be observed that the total
number resident remains exactly the same.

Four men and three women reside voluntarily
in the Institution, and at the close of the year
ten were at Kincarrathie.

It has been thought advisable to alter the Change of date
of Report.
date of this Report, so that it should apply to
the same period as is referred to in the Report of

the Committee of Management, viz., the financial year ending with the 31st of March. This arrangement seems, on the whole, to be desirable, although it has caused a repetition of figures relative to the months of April and May of last year.

The Admissions.

The average rate of the admissions for the last twenty-seven years is 26 per annum. This year it is 41, eight fewer than in 1891, when the number of admissions reached the maximum.

Thirty-two patients were admitted for the first time, and nine returned after relapse or residence elsewhere. Four were transferred from other Asylums.

Of the 41 admissions only 18 were in good bodily health, and nearly all of these were old-standing cases of mental disorder. Ten were in feeble condition, and, in consequence, urgently required skilled care and nursing. The general physical state of the admissions, however, compared favourably with that of late years. A smaller proportion suffered from the infirmities of advanced age, and the maladies complicating or causing insanity were, in the aggregate, less formidable than usual.

Statistics fallacious.

The statistics of an institution of this kind are very variable, unlike the returns of a County Asylum, which relate to the insanity of a fixed district. The patients here are brought together in varying numbers from an indefinite area, and from various centres of population. The comparative smallness of the figures dealt with is also an evident source of fallacy in attempting to draw

conclusions from our yearly statistics, unsupported by the general experience of similar institutions. It is, however, certain that the admissions reported upon at last Annual Meeting were notably below the average in bodily condition, and that the high mortality of 1891 and 1892 is directly due to the debilitated state of the patients then received.

Although in this respect there was a marked improvement during the year now ended, it by no means follows that the list of curable patients is thereby lengthened. At least half of the cases admitted were necessarily regarded as incurable. Some had been under treatment for years without benefit; others had been insane for years without any attempt at treatment. No doubt there are ample grounds for the oft-repeated advice urging the early treatment of insanity; but there always will be a residuum of cases that no treatment, however prompt and energetic, can benefit. It is apparent that the greater proportion of recoveries in pauper institutions results from the more favourable chance of cure in the evanescent insanities, necessarily brought under immediate asylum treatment in the lower strata of society, the statistics of which are unfortunately lost to medical science in the private records of family physicians attending the upper and middle classes. This is made manifest to us by the number of patients for whom application for admission is first made and afterwards withdrawn owing to their having recovered, wholly or partially, at home.

The home treatment of insanity gains favour year by year. Not of the ancient type—the un-

Early
Treatment.

Home
Treatment.

intelligent imprisonment of a lunatic in the least desirable room of the house; but the rational adoption of means that have been approved in the best hospital experience. Even in those huge aggregations of the pauper insane in densely populated districts, efforts are made to separate and differentiate the wards, to sink the institution in the home, in so far as is practicable. Much more so, in hospitals of this class, where the idea of a central hospital with succursal houses, consistently promulgated for many years by Dr. Lauder Lindsay, is almost universally carried into effect. Our experience has been all in favour of this principle of management. The houses complementary to the main Asylum have now been in occupation for a considerable period, with benefit to patients and staff, and with satisfactory financial results. There can be no doubt that the margin of cure and contentment is thus enlarged, and that any further accommodation required by this Institution should be obtained by extension on these lines.

Causes of
Insanity.

The causes of insanity, as discovered on admission, were of the usual nature. Nineteen were hereditarily predisposed, and twelve had previous attacks. Alcoholism, cardiac disease, accidents, as also worry, anxieties, and undue excitement, were assigned as active causes in the evolution of the malady.

Influenza
as a cause.

During the past year many cases of insanity have been attributed to the effects of influenza. These, in our experience, were mostly of a melancholic type, and showed how obnoxious the nervous system is to this exhausting and per-

sistent disease. It was necessary, however, to eliminate errors of every-day occurrence, and to carefully weigh the statements of relatives in regard to this factor. It was evident that the causation was assigned to influenza in some cases where the origin of the mental disease was inherent in the individuals. Two cases only resulted from attacks of influenza uncomplicated with other causes; while in another two it seemed to be the exciting agent—the last straw to overbalance minds already burdened with other troubles. This observation is borne out by the subsequent history of these patients. Those who suffered from influenza, and became insane without other apparent cause, have recovered, while the more intricate cases still remain under treatment.

The danger of mental shock was strikingly exemplified in a patient who had received a sudden fright, and became at once acutely maniacal. Notwithstanding a temporary lull in the symptoms for some days, she relapsed into such violence as to require asylum treatment for nearly three months. No words are required to emphasise the heinousness of the offence of subjecting any one to such a shock. It is of a piece with the folly of a man who fires a gun at his neighbour, thinking that it is unloaded.

Those admitted came from the following localities:—Seven from Perth, 9 from the County of Perth, 2 from Fife, 1 from Dundee, 5 from Edinburgh, 7 from Glasgow, 8 from other parts of Scotland, 1 from England, and 1 from abroad. No application from the County or City of Perth was refused. As in former years, special consider-

Mental Shock

Former
Residences of
Admissions

ation was shown to indigent patients of the class and from the locality prescribed by the charter of incorporation; but 10 such applications from other parts of the country could not be entertained.

The Recoveries.

The general Recovery rate of the Asylum during the years 1865 to 1891 inclusive is 33·50. This year it is 36·59 per cent. on the total number of admissions—30 for men and 43 for women. Altogether 15 patients left the Institution restored to health. If the figures representing incurable cases be eliminated, and the recoveries are calculated only on those admissions reasonably regarded as curable, the recoveries would stand at 63 per cent. On the other hand, there are at least six patients now claimed as recoveries who will probably suffer from relapse sooner or later, and about half of these are cases of hereditary insanity or of hereditary neurosis.

The Removals.

Of those discharged unrecovered, five were transferred to other Asylums in Scotland and England (4 to the Asylums of their own districts, and 1 in the hope of change proving beneficial); 8 were returned to their friends as probably capable of home life, and 1 left to resume his work in the world. Two of those transferred to other Asylums were removed on account of their inability to pay the rate of board charged in this Institution. They belonged to the Glasgow district. Two of those who returned to their friends soon broke down and are again in Asylum care.

The Deaths.

The percentage of deaths on the average numbers resident was 12·84. This is again a very

high mortality, similar in results to last year, and far exceeding the general average of this Asylum, which is 5.49. The actual number of deaths was 12 as compared with 13 last year. Two occurred in the case of voluntary patients. Six were admitted labouring under the fatal maladies which soon and inevitably resulted in death.

Four died of pulmonary complications of influenza, 2 of general paralysis, 4 died of other senile degenerative nervous diseases of long standing, 1 died of diabetes, and 1 of angina pectoris. The last mentioned had resided in the Asylum for 25 years, and nearly the whole of that time as a voluntary patient. Her presence is very much missed in our social life. The average age at death was 60, although four were considerably younger. One had reached 82. Six were males and six were females. No death occurred in the case of a curable patient. Seven *post mortem* examinations were made, and accurate records preserved. In five cases objections were offered to such investigations.

The average daily numbers on the books during the year were—certificated male patients, 48.62; female, 51.14. Voluntary males, 4.02; females, 2.92. Total, 106.77. This is an increase of one on the average of last year, and a marked increase over the average daily number since 1864, which is 82.98. The lowest number for any one day (101) occurred on 7th July, 1891, and the highest (112) on the 1st October, 1891. These figures record the highest numbers since the paupers were removed to Murthly.

Average
Numbers
Resident.

Accidents.

The Accident Book contains records of three grave casualties. Two of these were similar in detail, having happened to the same patient. The gentleman in question was admitted with a serious suicidal wound of the throat, and was diligently nursed by special attendants day and night. Notwithstanding their being close at hand, he jumped through a plate-glass window and broke his thigh, besides sustaining other injuries. These sudden impulsive acts, occurring without a moment's warning, are amongst the most disquieting episodes of Asylum life; and in the effort to render an institution safe against such accidents, it is only too easy to have recourse to methods calculated to retard recovery and minimise comfort. To obviate another similar attempt, the windows most likely to be selected have been guarded by removable brass scroll-work screens. It should be noted that the patient referred to stated that he would not repeat his attempt after the first time, as he saw that it was impossible to kill himself in that way. On the second occasion, in the midst of cheerful conversation, he was seized with the same uncontrollable impulse, and acted on it almost before he was aware of it.

Suicidal Cases.

There have been ten actively suicidal and four dangerously homicidal patients under care during the year. These difficult cases present serious problems of management, and their treatment is embarrassed by their destructive attempts. The constant vigilance required, the perennial trial of patience and endurance, the demands on tact and temper, which are all in the day's work of an Asylum Attendant, are very inadequately recog-

nized by the world at large. But it is even easier to bear with the abuse of an actively insane patient than to keep up constant warfare with the destroying angel of dementia. Nothing can be more detrimental to the insane than apathetic and selfish management in nursing. A great deal has been done of late to improve the position of Attendants, and this Institution has not been behind in promoting their educative, social, and recreative interests; but it is undoubted that further advances must be made in this direction if the Asylums of this country are to maintain their place in the vanguard of progress.

The other accident happened to an elderly lady, who was somewhat roughly pushed by a fellow-patient, and slid to the ground. Her fall at first caused scarcely any inconvenience, but on medical examination the arm was found to be fractured. The brittleness of the bones of the insane and the blunted sensibilities of demented patients have been frequently the subject of remark in Asylum practice. In this instance it seemed scarcely possible that so slight a shock could have caused so severe an injury.

It is now several years since a patient escaped Escape. from the immediate vicinity of the Institution; but one gentleman, a new comer, last summer made his way to the west of Scotland, after a very clever departure from the cricket field. He had previously expressed himself as anxious to remain under treatment here for some months at least. It turned out, however, that his apparent acquiescence with the wishes of his family

and the recommendation of his doctor was assumed merely that he might forestall opportunities of escape.

General Health.

The general health of the establishment has been exceptionally good, and would hardly have called for remark but for the virulence of the epidemic of Influenza. That scourge left its impress on our records, not only by its serious incidence and high death-rate, but by a lowered vitality and loss of body-weight, persisting for months in those who had nominally recovered.

The Influenza.

This epidemic formed the subject of a careful and exhaustive Report by Dr. Hay, which was published in the British Medical Journal of the 14th May of this year. From that paper it appears that 55 out of a resident population of 191 were attacked by unmistakable influenza, besides a number of less urgent cases of an abortive type. There were then 107 patients in residence, of whom 36 were attacked, being 33 per cent. of the whole. The epidemic began in the female division and spread to the male wards. Every possible care was exercised to prevent infection, and the new hospital wings were set apart for the reception of those stricken with the malady. The work of the Institution was greatly hampered by the number of officials laid up, but the patients suffered more severely than the staff, who (omitting children) fell ill in the proportion of 19 per cent. only, and among whom no deaths occurred. In the former epidemic the patients were attacked less generally and less severely than the officials, in the proportion of 2 per cent. and 12 per cent. respectively.

These observations are in accordance with the general experience. There was, apparently, a certain immunity on the part of the insane during the first epidemic, while there seems to have been an absolute susceptibility in the second. The fatal cases occurred in those of low vitality, incurably insane and previously exhausted by age or disease.

The advantages of specialised hospital wards at such a time were very apparent. The proper treatment and comfort of the sick were adequately secured. By day and night the required temperature was maintained, and steam was taken from the heating pipes to moisten the air as necessary where those suffering from bronchial complications were lying.

The occupations of the patients have been conducted as formerly and repeatedly reported. On an average 66 were usefully employed. By the labours of the patients the estate has been materially improved. The curling-pond is in process of being re-made in accordance with the advice of one of the gentlemen, and the old quarry is being laid out as an Alpine garden. Part of the road round the new plantations has been made, and a court for garden rubbish has also been formed.

The amusements were sadly interrupted during the winter months; but we have to make acknowledgments of kind aid as in former years—especially to Mr. Bryson, Mr. Richardson, the Ohio Minstrels, the Messrs. Pullars' and the City Bands. The Chaplain gave several readings, with

lime-light views; there was a theatrical performance by the staff; and many parties to the excellent entertainments in the Bridgend Hall. The most noteworthy amusement of the year was a new project—a concert organized by the patients for the patients. The performers won most hearty applause, and scored a decided success. It is assuredly in accordance with the best practice to develop latent faculties by encouraging the patients to aid one another in amusements as well as in occupations; and it is to be hoped that the patients' concert will become a yearly institution.

Excursions.

The annual pic-nic to the Sma' Glen included 103 persons, and was much enjoyed. There were 9 cricket matches, with a very good record of success for the Asylum, besides a brilliant match between the Ladies and Gentlemen, which was fully described in the pages of "Excelsior."

There were 604 driving parties, besides the usual number of pic-nics and excursions.

Thirty patients were at St. Andrews and Pitlochry in the course of the summer. This is a smaller number than formerly, entirely owing to the lack of suitable patients for such a change. I have to report, in connection with this subject, that the ladies and gentlemen almost unanimously decided that they find Carnoustie preferable to St. Andrews; and accordingly the house rented for so many years at Carnoustie has been resumed. The main reason assigned was the advantage of having a garden immediately fronting the sea. Unfortunately the Carnoustie house is rather small for our purposes, but, in spite of this disadvantage, it is preferred.

The general management of the Institution has not varied much in essential details during the year. In the early part of 1891 a new dietary arrangement was introduced for the guidance of the housekeeper. The daily variation of the meals was then fixed by rule, so that monotony and hap-hazard methods might be avoided in so far as possible. The consumption of vegetables and fruit has been largely increased of late years, as has been noted in previous Reports, and the result of these changes is apparent in greater efficiency and greater contentment. It will be observed that the accounts show that there is also an economy of service, although such articles as milk and eggs show a yearly increase. The advantages of the farming operations are now undoubted; but it is to be regretted that the area of land in our hands is so limited.

General Management.

New Dietary.

There have been no changes amongst the officers, and very few amongst the charge attendants. I regret, however, to have to report a great number of changes amongst the ordinary nurses, and too many amongst the ordinary attendants. Twenty-one left and were replaced by others—7 attendants and 14 nurses out of 34, omitting those engaged for temporary duty. This is very unfortunate, and constitutes a difficult problem. It is possible that in architecture and in the everyday routine of asylum management the high-water mark has been reached. It is now in the domain of scientific research and educated nursing that further progress must be made. It is not the part of an asylum superintendent to decry the faithful services of the many hundreds of attend-

The Staff.

ants and nurses doing worthy and unobtrusive work in the asylums of the world, but the difficulty of obtaining the best kind seems to be perennial. No doubt the same difficulty exists in general hospitals, and indeed in all large undertakings. Even the ordinary domestic servants become scarcer, although wages have greatly risen within late years.

Out of 13 attendants 6, and out of 16 nurses 8, have not yet completed two years' service. Four men were discharged for drunkenness, two of them being brothers. One nurse was discharged for striking a patient, and one resigned on being censured.

The staff has been increased by the engagement of a third nurse companion, and by the addition of a ward maid, to relieve the nurses of certain repulsive duties. The Leave List has been revised and enlarged, and the rooms of the house servants have been rendered more comfortable.

Alterations and
Improvements.

The alterations and improvements in progress of late years were minimised in view of the adverse balance-sheets resulting from the heavy expenditure on the new wings during the years 1890 and 1891. It was, however, necessary to undertake certain urgent works, the more important of which are detailed below. In computing the expense entailed by these works the labour of patients and asylum artisans is not included. The Cupola in the Ladies' Hospital was decorated by Miss Margaret G. Dickson, and has been much admired. On the completion of her

labours the thanks of the Committee were duly conveyed to her.

The following is a list of the more important items of extra expenditure now charged at £269 16s 6d :—

1. Completion of main drain through the north-west field to the public sewer in the Gannochy Road, with manholes for irrigation and disconnecting trap.
2. Lime-washing farm and other buildings, repairs to fences, &c.
3. Additional bedsteads and furnishings.
4. New slow-combustion grates, replacing those worn out or obsolete.
5. Fountain, hewn by a patient, erected in front hall.
6. New larder for main kitchen.
7. Alterations on telephones, now connecting office with engineer's lodge and office with boiler-house, &c.
8. Speaking-tube connecting Matron's rooms with Hospital wing.
9. Painting, &c., in housemaids' rooms.
10. Painting the outer doors, rainwater conductors, &c., of the Asylum.

The Farm Accounts herewith presented show a satisfactory management. It is now three years since the byre was stocked, and two of the cows now in milk were bred here. The quantity of milk supplied during the year was 6999 gallons. The

Farm and
Garden.

fields to the north of the Asylum have now been top-dressed with the farm and stable manure, and the irrigated field with artificial manure. It will be observed that, for the first time, the value of vegetables and fruit supplied to the Asylum equals the expenditure in that department. Forced rhubarb and sea kale have been produced in large quantity this year. The south side of the cricket field was planted in order to screen it from the public road, and the east terrace was re-levelled. The casualties of the year include a repetition of the burning of part of the plantation along the side of the burn on the north boundary (by mischievous boys), and also a case of sheep-worrying. The accounts for the Farm and Garden show a surplus income of £263 and £3 respectively.

Financial
Details.

The sum received from patients' board was £8860, which is more than last year's results by £188. The average of other years, 1864 to 1892 inclusive, is £5528. The total expenditure was £10,125; the total income, £10,493,—thus leaving an excess of income of £368.

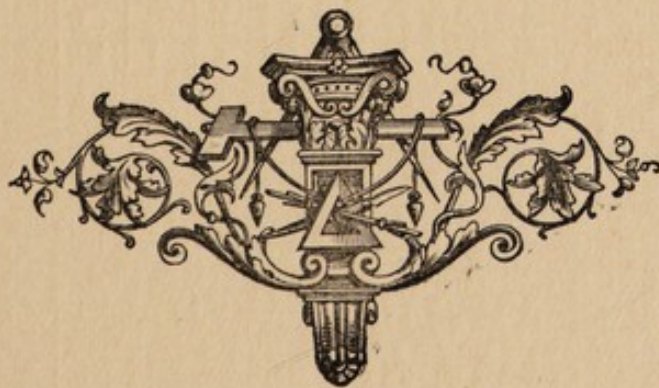
The yearly income per patient was £98 1s 4d; the yearly cost on the ordinary expenditure, £92 0s 1d. The weekly cost per patient, calculated on the expenditure, was £1 15s 5d. The 106 patients remaining on the Register together paid £8703 per annum, being an average board rate of £82 1s 1½d.

The ordinary minimum rate of board is £60 per annum; but during the past year 49 patients were maintained at rates varying from £30 to £52, as confirmed by the Directors.

The Reports of the Visiting Commissioners in Commissioners' Reports.
Lunacy will be found appended to this.

In conclusion, I beg to thank the Directors Conclusion.
for their continued confidence and support.

A. R. URQUHART.



TABLE

Showing Changes in the Population of the Asylum during the Year ending 31st March, 1892.

						Certificated		Voluntary.		TOTAL.
						M.	F.	M.	F.	
31st March, 1891.	{	Resident in the Asylum, ... ..	...	...	...	48	44	2	1	95
		Remaining on Pass, ... ..	...	...	...	...	1	...	1	2
		Remaining at Kincarrathie, ... ..	...	...	...	5	3	...	1	9
		Total number on Asylum Books, ... ..	...	...	...	53	48	2	3	106
						Certificated		Voluntary.		TOTAL.
						M.	F.	M.	F.	
Cases Admitted—										
First Admissions,			12	16	4	...	32			
Not First Admissions,			3	3	1	2	9			
Total Cases admitted during the year,						15	19	5	2	41
Total Cases under care during the year,						68	67	7	5	147
						Certificated		Voluntary.		TOTAL.
						M.	F.	M.	F.	
Cases discharged and died—										
Recovered,			6	8	...	1	15			
Relieved,			8	2	1	...	11			
Not Improved,			1	1	1	...	3			
Died,			5	5	1	1	12			
Total Cases Discharged and Died during the year,						20	16	3	2	41
31st March, 1892.	{	Total number on Asylum Books, ... ..	...	...	...	48	51	4	3	106
		Remaining at Kincarrathie, ... ..	...	...	...	5	4	...	1	10
		Resident in the Asylum, ... ..	...	...	...	43	47	4	2	96

Officers, 5; Attendants, 14; Nurses, 18; Artisans, 15; Servants, 13.

	Certificated.		Voluntary.		TOTAL.
	M.	F.	M.	F.	
Average number on Books during the year,	48·62	51·14	4·02	2·98	106·77
Lowest number resident on 7th July, 1891,	48	47	4	2	101
Highest number resident on 1st October, 1891,	50	54	4	4	112
Persons under care during the year,	67	67	7	5	146
Persons admitted during the year,	14	19	5	2	40
Persons discharged recovered during the year,	6	8	...	1	15
Transferred from other Asylums,	2	2	...	...	4
Transferred to other Asylums,	4	...	...	...	4
Percentage of Recoveries on Admissions,	40	42·01	...	50	36·18
Percentage of Deaths on average numbers resident,	10·28	9·79	24·62	33·42	11·23

REPORTS
OF THE
COMMISSIONERS IN LUNACY
FOR THE YEAR.

REPORT BY DR. SIBBALD.

JAMES MURRAY'S ROYAL ASYLUM,
12th February, 1892.

THERE are 105 patients on the Registers of the Asylum at present—46 gentlemen and 52 ladies being under certificates, and 4 gentlemen and 3 ladies being voluntary inmates. One lady under certificate is absent on pass.

Since 10th August, the date of last visit, 7 gentlemen and 8 ladies under certificates have been admitted, 3 gentlemen and 3 ladies have been discharged recovered, 6 gentlemen have been discharged unrecovered, and 1 gentleman and 3 ladies have died. Three gentlemen and 1 lady have been admitted as voluntary inmates, 2 gentlemen have left, and 1 gentleman and 1 lady have died.

The deaths are registered as due to epilepsy in 1 case, to angina pectoris in 1 case, and to influenza in 4 cases. *Post mortem* examinations were made in 3 cases.

The Register of Restraint and Seclusion contains 21 entries. They refer to the use of restraint in the treatment of 2 patients, in both cases for surgical reasons. Three accidents are recorded, all involving fracture of bones. Two of them occurred to the same patient, and were the result of suicidal attempts. There has been no escape.

Seventeen attendants and servants have resigned, 5 have been dismissed, and 24 have been engaged.

The patients continue to be exceedingly well provided for. They are kept in great comfort; they receive skilful treatment; and their individual requirements are carefully and kindly considered. Great attention is given to providing occupation for those who are able to engage in it. Many help the attendants in their duties, and others occupy themselves with artizan and garden work. One is at present occupied as a surveyor. The ladies are chiefly engaged in needlework and knitting. Occupation of such kinds is in itself useful as a means of treatment, and it lends an additional value to recreation. This is abundantly provided in various ways, such as games, music, social meetings, and excursions.

The several parts of the Institution were found in admirable order. The decoration and furniture are everywhere elegant and comfortable, and as little as possible suggestive of Asylum arrangements. In the mansion-house of Kincarrathie they are in every way such as is found in the best class of private residences, and the life of the inmates is similar to that of ladies and gentlemen in their own homes.

The Books and Registers were examined, and were found regularly and correctly kept.

JOHN SIBBALD,

Commissioner in Lunacy.

REPORT BY SIR ARTHUR MITCHELL, K.C.B.

JAMES MURRAY'S ROYAL ASYLUM,
4th May 1892.

THERE are 101 certificated patients, 47 gentlemen and 53 ladies, at present on the Register. Of these 1 lady is absent on pass. There are 7 persons on Register of Voluntary Inmates, 4 gentlemen and 3 ladies.

Since the date of last visit 5 gentlemen and 4 ladies have been admitted, 1 gentleman and 3 ladies have been discharged as recovered, 2 gentlemen have been discharged as unrecovered, and 1 gentleman has died. There has been no change among the voluntary inmates.

The cause of the death was heart disease, the diagnosis being confirmed by a *post mortem* examination.

The Case-Books continue to be kept in a very satisfactory manner.

There is no entry in the Register of Restraint and Seclusion; no escape has taken place; and no accident is recorded.

The staff now includes 4 lady companions.

Thirty-one gentlemen and thirty ladies are led to engage to a greater or less extent in work which is useful and healthy. No fewer than

thirteen of the gentlemen work in the garden. This is very creditable to the management, and must tend to promote the cure of the curable and the contentment of the incurable.

A considerable improvement has been made in the sleeping-rooms of the female servants.

The utilisation of the drainage is said to give results which are highly satisfactory.

Dr. Urquhart was absent on holiday, and his Assistant, Dr. Hay, was Acting Superintendent. Everything was found in excellent order. There was complete freedom from excitement and complaint. The state of the Asylum and of the inmates reflected much credit on all concerned in the management during the absence of Dr. Urquhart.

The Books and Registers were examined, and found, as usual, to be kept with care and accuracy.

ARTHUR MITCHELL,
Commissioner in Lunacy.

JOHN FRASER,
Deputy Commissioner in Lunacy.



STATISTICAL TABLES OF THE MEDICO-
PSYCHOLOGICAL ASSOCIATION.

PREPARED BY DR. HAY.

(These Tables do not include Voluntary Patients).

TABLE 1,

Showing the Admissions, Re-Admissions, Discharges, and Deaths during the Year ending 31st December, 1891.

	M.	F.	T.	M.	F.	T.
In the Asylum, 1st January, 1891, ...				50	51	101
Cases Admitted—						
First Admissions,	13	14	27			
Not First Admissions,	3	4	7			
Total Cases Admitted,				16	18	34
Total Cases under care during the year,				66	69	135
Cases Discharged and Died—						
Recovered,	6	8	14			
Relieved,	7	4	11			
Not Improved,	1	1	2			
Died,	6	5	11			
Total Cases Discharged and Died, ...				20	18	38
Remaining in the Asylum, 31st December, 1891,				46	51	97
Average resident during the year,				49·59	50·24	99·83
Persons* under care during the year,†				65	68	133
Persons admitted ,,				15	18	33
Persons recovered ,,				6	8	14
Transferred‡ to this Asylum,				2	2	4
Transferred from this Asylum,				3	2	5

* Persons, *i.e.*, separate persons, in contradistinction to "cases," which may include the same individual more than once.

† Total cases, minus re-admissions of patients discharged during the current year.

‡ Patients transferred from one Asylum to another, even when re-certified, are to be regarded as transfers.

TABLE 1a,

Showing (1) the Previous Attacks among Persons admitted during 1891, and (2) the Number of Times they had previously Recovered in this or any Asylum.

(1) Number of Previous Attacks.	Persons.		
	Male.	Female.	Total.
Have had One Attack,	5	1	6
„ Two Attacks,	1	1	2
„ Three or more Attacks,	0	3	3

(2) Number of Times Patients Recovered.	In this Asylum.			In any Asylum.		
	M.	F.	T.	M.	F.	T.
Once,	1	2	3	3	2	5
Twice,	1	0	1	1	0	1
Thrice or more,	0	2	2	0	3	3

TABLE 2,

Showing the Admissions, Re-admissions, Discharges, and Deaths for the Twenty-seven Years from the 1st of January, 1865, to the 31st December, 1891.

	M.	F.	T.	M.	F.	T.
Number resident, January 1st, 1865,				37	34	71
Persons Admitted during the period of 27 years,	275	284	559			
Re-admissions,	49	73	122			
Total Cases Admitted,				324	357	681
Total Cases under care during the 27 years, ...				361	391	752
Cases Discharged and Died—						
Recovered,	97	127	224			
Relieved,	100	98	198			
Not Improved,	50	59	109			
Died,	68	56	124			
Total Cases Discharged and Died,				315	340	655
Remaining 31st December, 1891,				46	51	97
				M.	F.	T.
Average resident during the 27 years,				41'30	39'94	80'87
Transferred to this Asylum,				47	43	90
Transferred from this Asylum,				74	64	138

TABLE 2a,

Showing the Admissions and Recoveries of Persons* from 1st January, 1865, to 31st December, 1891 (a period of Twenty-seven Years).

History of Recoveries of Persons.	The same, only omitting all Persons transferred from other Asylums.					
	M.	F.	T.	M.	F.	T.
Persons Admitted during 27 years,	275	284	559	246	267	513
Of whom were Discharged Recovered during } the same period, being 33'09 per cent. of } Persons Admitted,	84	101	185	83	95	178
Of whom were Re-admitted Relapsed,† ...	17	24	41	17	22	39
Leaving Recovered Persons who have not } Relapsed,	67	77	144	66	73	139
Relapsed Persons Discharged Recovered,‡ ...	12	16	28	11	16	27
Net Recovered Persons, § being 30'59 per cent. } of Persons Admitted,	79	93	172	77	89	166

* Persons, *i.e.*, separate persons, in contradistinction to "cases," which may include the same individual more than once.

Re-admission applies only to re-admission into this Asylum.

† *i.e.*, Persons who have relapsed one or more times.

‡ *i.e.*, After last re-admission, if relapsed more than once.

§ *i.e.*, Recovered persons sane at the present time so far as the Asylum statistics show.

TABLE 3,

Showing the Admissions, Discharges, and Deaths, with the mean Annual Mortality and Proportion of Recoveries per cent. of the Admissions, for each Year since the opening of the Asylum, 30th of June, 1827.

Year.	Admitted.						DISCHARGED.												Died.			Remaining 31st December in each year.			Average Number Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Number Resident.					
	Recovered.			Relieved.			Not Improved.			M.			F.			T.			M.			F.			T.			M.			F.			T.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1827-1864.	719	752	1471	255	341	596	92	116	208	180	159	339	1	102	257	37	34	71	73	13	62	30	135	4	36	72	45	34	40	52	5	66	4	36	5	05
1865.....	13	9	22	4	3	7	5	2	7	2	7	9	0	1	1	38	31	69	39	60	34	00	73	60	30	77	33	33	31	82	3	21	...	1	36	
1866.....	12	6	18	4	6	10	5	4	9	2	1	3	2	2	4	37	21	61	37	09	24	80	61	89	33	33	100	00	55	55	5	39	8	02	6	46
1867.....	15	7	22	3	3	6	5	2	7	0	0	0	6	1	6	39	25	64	39	67	25	46	65	13	20	00	42	85	27	27	12	60	3	92	9	21
1868.....	12	14	26	4	3	7	2	0	2	1	2	3	4	3	4	43	31	74	38	08	30	09	68	17	38	46	15	38	26	92	2	62	9	97	5	87
1869.....	22	18	40	4	4	8	7	2	9	2	2	4	3	0	3	49	41	90	45	77	40	56	86	33	18	18	22	22	20	00	6	55	...	3	47	
1870.....	10	17	27	5	4	9	2	3	5	4	7	11	6	4	6	46	40	86	48	54	41	75	90	29	50	00	23	53	33	33	4	12	9	58	6	64
1871.....	9	25	34	3	4	8	4	6	10	4	4	8	8	2	6	42	43	85	45	65	41	87	87	52	33	33	24	00	26	47	4	38	14	27	9	13
1872.....	13	9	22	4	4	8	4	1	3	3	4	7	3	2	4	45	41	86	42	92	41	10	84	02	30	77	44	44	36	36	2	32	4	86	3	57
1873.....	8	9	17	3	3	6	2	2	4	5	5	10	4	2	4	41	38	79	42	70	40	64	83	34	37	50	33	33	35	29	4	68	4	92	4	79
1874.....	6	13	19	3	2	5	3	6	9	2	2	4	4	3	5	37	37	74	37	39	41	23	78	62	50	00	15	38	26	31	5	35	7	27	6	35
1875.....	5	8	13	2	3	5	1	2	3	1	0	1	1	4	3	34	37	71	36	36	34	19	70	55	40	00	37	50	38	46	11	00	8	77	9	92
1876.....	10	7	17	2	5	7	0	1	1	0	3	3	3	3	6	39	32	71	36	87	37	16	74	03	20	00	71	42	41	17	8	14	8	10	8	10
1877.....	8	6	14	2	0	2	5	3	8	5	1	6	6	0	0	35	34	69	36	83	34	41	71	24	25	00	...	...	14	28	...	...	...	...	...
1878.....	2	7	9	1	6	7	1	2	3	2	2	4	4	1	1	32	31	63	33	18	35	74	68	92	50	00	85	71	77	77	3	01	...	...	1	45
1879.....	9	10	19	2	3	5	0	1	1	1	0	1	1	2	4	36	35	71	34	13	33	79	67	73	22	22	30	00	26	31	5	83	5	92	5	88
1880.....	10	16	26	2	6	8	2	1	3	0	0	0	0	4	5	38	44	82	37	80	38	93	76	73	20	00	37	50	30	76	15	82	2	56	6	43
1881.....	10	7	17	5	5	10	2	7	9	1	0	1	1	4	3	37	38	75	38	12	40	58	78	70	50	00	71	42	58	82	7	87	2	46	6	43
1882.....	6	10	16	1	0	1	3	4	7	2	3	5	5	4	5	33	40	73	31	58	40	95	72	54	16	66	...	...	6	25	12	60	2	44	6	89
1883.....	21	14	35	6	8	14	2	2	4	2	3	5	4	2	4	42	39	81	38	24	42	00	80	24	28	57	57	14	40	00	5	20	4	76	4	99
1884.....	11	18	29	3	5	8	4	3	7	3	1	4	4	7	7	41	43	84	41	88	40	57	82	45	27	25	27	77	27	58	4	75	12	07	8	48
1885.....	14	16	30	2	4	6	5	6	11	1	4	5	5	2	4	45	44	89	44	18	44	93	89	11	14	28	25	00	20	00	4	52	2	44	3	37
1886.....	19	15	34	9	5	14	9	6	15	3	1	4	4	2	4	42	46	88	44	70	44	73	89	43	47	32	33	33	41	17	2	23	2	23	2	23
1887.....	18	28	46	7	11	18	3	10	13	0	4	4	4	3	3	48	48	96	44	45	50	00	94	45	38	88	39	28	39	13	4	49	2	00	3	17
1888.....	17	19	36	5	7	12	6	7	13	0	2	2	2	3	3	53	49	102	49	15	47	52	96	68	29	41	36	84	33	33	2	03	4	20	3	10
1889.....	12	12	24	3	7	10	6	9	15	0	0	0	0	6	2	50	43	93	51	43	45	55	96	98	25	00	58	33	41	66	11	08	4	40	8	24
1890.....	16	19	35	2	6	8	7	2	9	3	0	3	3	4	7	50	51	101	49	28	45	76	95	05	12	50	31	58	22	85	8	11	6	55	7	36
1891.....	16	18	34	6	8	14	7	4	11	1	1	2	2	5	11	46	51	97	49	59	50	24	99	83	37	50	44	44	41	18	13	04	9	80	11	34
For 27 yrs.	324	357	681	97	127	224	100	98	198	50	59	109	68	56	124	Average or Percentage.			41	30	39	94	80	87	38	25	34	27	36	05	5	54	4	70	5	16
Gen. Totals	1043	1109	2152	352	468	820	192	214	406	230	218	448	223	158	381				33	76	42	20	38	10	33	76	42	20	38	10	5	82	4	70	5	28

of each Year remaining on the 31st December of the Year reported on.

Year	Admitted.			Of each Year's Admissions Discharged and Died in 1891.						Total Discharged and Died of each Year's Admissions to 31st December, 1891.						Remaining on 31st December, 1891.															
	First Time.		Not First Time.	Total	Recovered.			Relieved.			Not Improved.			Died.			M.	F.	T.												
	M.	F.			M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.															
	M. F.		M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.	M.												
1827 to 1864	Not Ascertained.		1471													5	6	11													
1865	9	3	0													0	0	0													
1866	11	3	1													0	0	0													
1867	12	6	3													2	0	2													
1868	10	11	3													0	0	0													
1869	19	15	3													3	0	3													
1870	7	12	3													0	3	3													
1871	8	22	1													0	0	0													
1872	12	7	1													1	0	1													
1873	5	7	3													0	0	0													
1874	5	9	1													0	0	0													
1875	3	7	2													1	0	1													
1876	10	5	0													1	0	1													
1877	7	6	1													0	0	0													
1878	2	6	0													0	0	0													
1879	9	9	0													0	0	0													
1880	9	15	1													0	0	0													
1881	9	5	1													0	0	0													
1882	6	9	0													0	0	0													
1883	20	11	1													3	2	5													
1884	9	14	2													0	0	0													
1885	12	11	2													2	0	2													
1886	17	13	2													0	0	0													
1887	14	22	4													1	4	5													
1888	12	11	5													1	4	5													
1889	12	10	0													2	1	3													
1890	13	15	3													5	5	10													
1891	13	14	3													7	12	19													
Tot. for 27 yrs., &c.	275	284	49	681	6	8	14	7	4	11	1	1	2	6	5	11	98	119	217	91	98	189	42	48	90	52	47	99	41	45	86
General Totals.	Not Ascertained.	Not Ascertained.	Not Ascertained.	2152	2	6	8	7	2	9	3	0	3	4	3	7	352	468	820	192	214	406	230	218	448	223	158	381	46	51	97

TABLE 4 (contd.)

Summary of Total Admissions.

						Male.	Female	Total.
Percentage of Cases Recovered,	...	...	...	...	...	33·76	42·20	38·10
„ „ Relieved,	...	...	...	...	...	18·40	19·30	18·87
„ „ Not Improved,	...	...	...	...	...	22·05	19·65	20·82
„ „ Died,	...	...	...	...	...	21·38	14·25	17·70
„ „ Remaining,	...	...	...	...	...	4·41	4·60	4·51
						100	100	100

TABLE 5,

Showing the Causes of Death, with the Ages at Death, during the Year 1891.

Cause of Death.	Between 30 & 35.		Between 45 & 50.		Between 50 & 55.		Between 60 & 65.		Between 65 & 70.		Between 70 & 75.		Between 75 & 80.		Between 80 & 85.		Totals.		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	Cerebral Apoplexy,
General Paralysis,
Epilepsy,
Diabetes Mellitus,
Influenza, with Bronchitis,
Do., with Bronchitis and Cardiac Disease,
Cardiac Disease, with Senile Decay,
Pneumonia, Lobar,
Pneumonia, Lobular,
Total, ...	0	1	1	0	1	1	0	1	2	2	4	0	1	1	1	0	1	6	5

TABLE 6,

Showing the Length of Residence in those Discharged Recovered and in those who have Died during the Year 1891.

Length of Residence.					Recovered.			Died.		
					M.	F.	T.	M.	F.	T.
Under 1 Month,	...	...	...	...	0	1	1	1	0	1
1 Month and under 3 Months,	...	...	...	...	3	3	6	0	0	0
3 " " 6 "	...	...	...	...	2	3	5	1	0	1
6 " " 9 "	...	...	...	...	0	1	1	0	0	0
9 " " 12 "	...	...	...	...	1	0	1	0	1	1
1 Year " 2 Years,	...	...	...	...	...	...	...	1	1	2
2 " " 3 "	...	...	...	...	...	...	...	1	1	2
6 " " 7 "	...	...	...	...	...	...	...	1	0	1
7 " " 8 "	...	...	...	...	...	...	...	0	1	1
8 " " 9 "	...	...	...	...	...	...	...	1	0	1
11 " " 12 "	...	...	...	...	...	...	...	0	1	1
Total,	...	...	...	...	6	8	14	6	5	11

TABLE 7,

Showing the Duration of the Disorder on Admission in the Admissions, Discharges, and Deaths, during the Year 1891.

CLASS.	Admissions.			Discharges.						Deaths.		
				Recovered.			Removed Relieved or otherwise.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
FIRST CLASS.												
First attack, and within 3 months on admission,	3	7	10	3	4	7	1	2	3	0	1	1
SECOND CLASS.												
First attack above 3, and within 12 months on admission,	4	3	7	0	1	1	3	1	4	2	0	2
THIRD CLASS.												
Not first attack, and within 12 months on admission,	3	4	7	2	3	5	0	0	0	1	0	1
FOURTH CLASS.												
First attack or not, but of more than 12 months on admission,	6	4	10	1	0	1	4	2	6	3	4	7
Total,	16	18	34	6	8	14	8	5	13	6	5	11

TABLE 8,

Showing in Quinquennial Periods the Ages of those Admitted, Recovered, and Died, during the Year 1891, and of those remaining on 31st December, 1891.

	Admissions.			Recovered.			Deaths.			Remaining.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
15 years and under 20 years,	...	...	...	...	...	...	...	...	...	...	...	...
20 "	1	1	2	1	0	1	...	...	...	0	1	1
25 "	3	4	7	1	2	3	...	...	...	3	2	5
30 "	1	0	1	0	1	1	...	...	...	6	1	7
35 "	3	1	4	3	0	3	...	...	...	6	2	8
40 "	1	4	5	0	2	2	...	...	...	5	7	12
45 "	3	3	6	...	...	...	...	...	...	6	5	11
50 "	2	0	2	...	...	...	...	...	...	3	3	6
55 "	0	2	2	0	2	2	...	...	...	2	2	8
60 "	...	...	...	...	...	...	...	...	...	2	2	11
65 "	1	1	2	0	1	1	...	...	...	6	3	9
70 "	0	2	2	...	...	...	...	...	...	2	4	6
75 "	...	...	...	...	...	...	...	...	...	3	0	3
80 "	1	0	1	1	0	1	...	...	...	2	5	7
85 "	...	...	...	...	...	...	...	...	...	0	2	2
90 "	...	...	...	...	...	...	...	...	...	0	1	1
Total,	16	18	34	6	8	14	6	5	11	46	51	97

TABLE 9,

Showing the condition as to Marriage in the Admissions, Recoveries, and Deaths, during 1891, and of Patients Resident 31st December, 1891.

Condition in reference to Marriage.	Admissions.			Recovered.			Deaths.			Patients Resident, Dec. 31st, 1891.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Single, ...	12	13	25	5	6	11	4	3	7	40	37	77
Married, ...	3	2	5	1	2	3	1	2	3	5	7	12
Widowed,	1	3	4	0	0	0	1	0	1	1	7	8
Total,	16	18	34	6	8	14	6	5	11	46	51	97

TABLE 10,

Showing the Probable Causes of Insanity in the Persons admitted during the Year 1891.

M., 15; F., 18; T., 33.

Causes.	Predisposing Causes.											
	Hereditary.									Previous Attacks.		
	Insanity.			Neuroses.								
M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
MENTAL—												
Business Anxieties, ...	1	0	1	...	...	...	...	...	...	...	...	...
Domestic Trouble, ...	0	2	2	...	...	...	...	...	...	0	1	1
Mental Strain and Worry, Fright and Mental Shock,	4	1	5	0	1	1	2	0	2	2	0	2
Religious Excitement, ...	0	1	1	...	...	...	0	1	1	...	...	...
Love Affairs, ...	0	3	3	0	3	3	...	...	...	...	...	...
PHYSICAL—												
Accident, ...	1	1	2	1	0	1	0	1	1	...	...	...
Alcoholism, ...	1	1	2	1	0	1	0	1	1	...	...	...
Self-Abuse (Sexual), ..	3	0	3	1	0	1	1	0	1	1	0	1
Anæmia, ...	1	0	1	...	...	...	...	...	...	1	0	1
Amenorrhœa, ...	0	3	3	0	2	2	...	...	...	...	...	...
Cardiac Disease, ...	0	3	3	0	1	1	0	1	1	0	1	1
Typhlitis, ...	0	1	1	...	...	...	...	...	...	...	...	...
Malarial Fever, ...	1	0	1	...	...	...	...	...	...	...	...	...
Influenza, ...	1	2	3	1	0	1	...	...	...	...	...	...
Sunstroke, ...	1	0	1	...	...	...	...	...	...	...	...	...
Epilepsy, ...	1	0	1	...	...	...	...	...	...	...	...	...
Adolescence, ...	2	1	3	1	1	2	...	...	...	1	0	1
Climacteric, ...	0	2	2	0	1	1	0	1	1	0	1	1
Senility, ...	1	0	1	...	...	...	...	...	...	...	...	...
Previous Attacks, ...	6	5	11	2	3	5	2	0	2	6	5	11
Hereditary Predisposition,	5	9	14	5	9	14	...	...	...	2	3	5
Neurotic Inheritance, ...	3	2	5	...	...	...	3	2	5	2	0	2

TABLE 11,

Showing the Form of Mental Disorder on Admission in the Admissions, Recoveries, and Deaths of the Year 1891, and the Form of Mental Disorder of the Inmates, 31st December, 1891.

Form of Mental Disease.	Admissions.			Recovered.			Deaths.			Remaining* 31st Dec., 1891.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
CONGENITAL MENTAL DEFICIENCY,	...	...	...	...	...	...	...	...	...	...	...	...
MANIA.												
Recent, ...	2	4	6	4	2	6	1	0	1	0	2	2
Chronic, ...	...	...	...	...	...	...	1	2	3	3	8	11
Recurrent, ...	2	1	3	1	1	2	0	1	1	3	3	6
MELANCHOLIA.												
Recent, ...	5	6	11	1	3	4	0	1	1	3	3	6
Chronic, ...	1	1	2	...	...	...	...	...	...	0	8	8
Recurrent, ...	0	2	2	0	1	1	...	...	...	0	1	1
FOLIE CIRCULAIRE,	...	...	...	...	...	...	...	...	...	0	1	1
DELUSIONAL INSANITY, ...	3	3	6	...	...	...	0	1	1	8	10	18
DEMENTIA, ...	3	1	4	0	1	1	4	0	4	27	15	42
	16	18	34	6	8	14	6	5	11	46	51	97

* Epilepsy—M., 1; F., 1.

TABLE 12,

Showing the Station or Occupation of Patients admitted during the Year 1891.

MALES.				FEMALES.			
Assayer,			1	Manufacturer's Wife, ...			1
Bank Teller,			1	Dressmaker,			1
Butcher,			1	Farmers' Daughters, ...			3
Clerk,			1	Farmer's Sister,			1
Commercial Travellers, ...			2	„ Widow,			1
Commission Agent,			1	Gentlewomen,			4
Druggist,			1	Governess,			1
Farmer,			1	Nurse,			1
Grocer,			1	Printer's Wife,			1
Ironmonger,			1	Schoolmistress,			1
Law Student,			1	Servants,			2
Merchant,			1	Tradesman's Daughter, ...			1
Schoolboy,			1				
Schoolmaster,			1				
Total,			15	Total,			18

TABLE 13,

Showing Bodily Condition of Admissions.

						Male.	Female	Total.
Good Bodily Condition,						6	6	12
Fair „ „						3	3	6
Bad „ „						7	9	16
				Total, ...		16	18	34

REVENUE AND EXPENDITURE ACCOUNT

FOR YEAR ENDING 31st MARCH, 1892.

REVENUE.

I. Board of Patients,	£8859 17 4
II. From Patients for use of Carriages, ...	407 6 0
III. Farm Receipts,	924 3 1
IV. Garden Receipts,	259 12 1
V. Discounts,	41 18 5
Total Revenue,	£10,492 16 11

EXPENDITURE.

I. House Expenses, viz.—	
Provisions, £3327 12 7	
Fuel, 447 9 11	
Lighting, 163 4 10	
Furnishings, Fit- tings, &c., 432 2 9	
Amusements and Petty Outlays, 148 7 9	
Sum of House Expenses, ...	£4518 17 10
II. Salaries and Wages,	2721 6 6
III. Repairs to Property, &c., ...	470 17 2½
IV. Rent, Taxes, and Insurance, ...	468 4 6
V. Stationery, Postages, and Ad- vertising,	98 0 3
VI. Rent Charges and Interest, &c.,	716 2 6
VII. Carriage Account,	271 10 8
VIII. Farm Payments,	603 16 9½
IX. Garden Account,	255 16 9
Total Expenditure,	10,124 13 0
Excess of Revenue,	£368 3 11

FARM ACCOUNT.

Valuation of Stock, 31st March, 1891,	£300	6	0
Stock purchased during year—			
Sheep,	£248	9	3
Cows,	57	5	0
Pigs,	14	17	6
			<hr/>
		320	11 9
Wages, Feeding Stuffs, and Accounts,		239	2 6
Repairs on Farm Buildings,		44	2 6½
Rent (31½ acres at 30/-),		47	5 0
			<hr/>
		£951	7 9½
Sales of Produce—			
Cows and Calves,	£51	18	3
Pigs,	54	5	0
Mutton and Heads,	350	16	8
Skins and Wool,	34	14	0
Pork,	79	7	0
Fowls,	3	1	0
Milk,	296	13	2
Eggs,	14	6	2
			<hr/>
	£885	1	3
Rent of Fields,		21	10 10
			<hr/>
	£906	12	1
Valuation of Stocking at 31st March, 1892,	308	14	0
			<hr/>
		1215	6 1
Balance in favour of Farm,	£263	18	3½
			<hr/> <hr/>



Incorporated by



Royal Charter.

JAMES MURRAY'S ROYAL ASYLUM, PERTH.



HIS Asylum is healthily situated, amidst picturesque surroundings, on the Hill of Kinnoull, in the immediate vicinity of Perth. It stands in the midst of extensive Pleasure-Grounds, surrounded by the fields of the Home Farm, and commands unrivalled views, extending over the valley of the Tay to the range of the Grampians. The central position of Perth, and the improved railway service, make it accessible from all parts of Scotland.

Being an Endowed Institution and a Chartered Corporation, under the management of a Statutory Board of Directors who have no pecuniary interest in its prosperity, the profits on each year's transactions have been devoted to modernising and perfecting the original fabric of the Asylum, in order to render it an efficient Hospital, as well as a comfortable Home, for all classes of Private Patients.

The last important supplement to the resources of the Institution is the erection of two New Wings for the reception of Acute Cases. These have been fitted with every modern improvement in the means of treatment of the Insane.

The Directors have also taken on lease the beautifully situated Mansion-House of Kincarrathie, in the neighbourhood of, but distinctly separated from, the Asylum. It has now been in use for six years as a Convalescent Home, and for Patients of the Higher Classes suffering from the milder forms of mental disease. Other Houses, at the Seaside and in the Perthshire Highlands, are also rented yearly. The various buildings of the Establishment at Perth are connected with the National Telephone Company.

The Distinctive Features of this Institution are, that it is the only Royal Asylum in Scotland which receives no Paupers; that it contains a limited number of Patients, permitting of Individualised Treatment; and that it is developed as a Central Hospital for the treatment of acute and difficult cases, with Succursal Houses for less serious cases. Special attention is devoted to the Occupations of the Patients; there are ample means of Amusement; and the utmost

Liberty, with due regard to safety, is accorded. Carriages are kept for the use of those Patients for whom such exercise is desirable.

No Publicity is implied in the proceedings connected with the admission of Patients, nor in the term "Royal Asylum."

The Directors have every confidence in referring the friends of those requiring treatment to the Reports of the Commissioners in Lunacy.

Particular attention is directed to the General Regulations, as informalities may lead to serious delays in the admission of Patients.

Trained Attendants can be sent for a Patient at any time at a fixed charge.

GENERAL REGULATIONS.

Applications for Admission should be addressed to the Physician Superintendent, Dr. Urquhart, Murray House, Perth, from whom may be obtained the Statutory Forms to be completed before Patients can be received.

These are indispensable in every case—

1. Petition to the Sheriff of the County, and accompanying Statement by a Relative or Guardian of the Patient.
2. Two Medical Certificates by duly qualified Practitioners.
3. Order granted by the Sheriff of the County in which the Patient resides, or in which the Asylum is situated.
4. Letter of Obligation for Payment of Board, &c., to be signed by a responsible person.

In a case of Urgency, however, the Certificate of Emergency (in proper legal form), granted by any Medical Man, with the Request for Admission, is sufficient for the detention of a Patient for three days, during which time the ordinary papers can be filled up.

When the other documents are complete, the Physician will obtain the Sheriff's Order if so desired. These papers are private and confidential, and no publicity is implied in getting the Sheriff's Order.

The Transfer of Patients from other Asylums to this, or *vice versa*, will be arranged on instructions being received to that effect.

Epileptic and Paralytic Patients are received only on special terms; and the admissibility of all Patients is determined by the Physician.

Every Patient must be provided with suitable and sufficient Clothing. An accurate list of all articles brought with the Patient must, on admission, be delivered to the Asylum Official in charge, and the name fully marked on each garment. Unless this Regulation is complied with, no responsibility will be incurred by the Officials of the Institution, and in no case can they be held answerable for the safe keeping of articles of Jewellery. If any necessary part of Dress should not be supplied after eight days' intimation has been given that it is wanted, it will be furnished by the Institution, and the cost of it charged against the Patient.

Visitors to Patients will find it most convenient to call before Noon or after Two o'clock. Dr. Urquhart is in the Office daily at Half-past One o'clock. Except in cases of urgency, no visitors are received on Sunday.

All communications regarding Patients must be sent to the Physician, and due notice must be given to him before a Patient is admitted or removed.

VOLUNTARY PATIENTS.

Neither Sheriff's Order nor Medical Certificates are required for the admission of Voluntary Patients. They are received only on presentation of the Sanction of the General Board of Lunacy, Edinburgh. That document is obtained by the Patient making written application, addressed to the Secretary of the Board.

RATES OF BOARD.

The Institution being devoted to the care and treatment of the Insane of the Upper and Middle Classes only, the object of the Directors is to provide for those entrusted to their care at moderate Rates of Payment, according to the requirements of each case. These Rates are the subject of special arrangement, and include all expenses, except Clothing, Wine Account, and Amusements and Excursions beyond the Grounds. Terms to include these items may be proposed.

The ordinary Rates of Board are £52, £60, £84, and £100 per annum. The first-named is for Patients belonging to the County of Perth. A private bedroom cannot be secured under the £84

rate. Patients paying higher rates (£150 to £300 and upwards) have private rooms and special attendants, as well as the use of the general sitting-rooms, &c. The minimum rate for reception into Kincarrathie or separate Cottage is £150 per annum. These arrangements are subject to alterations for medical reasons.

The Board is payable quarterly, and in advance, to the Secretaries and Treasurers, Messrs. Mackenzie & Dickson, 61 George Street, Perth.

Should adequate reasons be shown, the Committee of Management may reduce the Rate of Board in special cases. No part of the first quarter's board will be returned; after that period, if the Patient be removed, on application to the Treasurers the Committee of Management may order a portion of the board for the unexpired time to be remitted.

NATIONAL TELEPHONE COMPANY, No. 104 PERTH.

POSTAL AND TELEGRAPH ADDRESS—"DR. URQUHART, PERTH"

