

Ninth annual report of the Cumberland and Westmorland Lunatic Asylum : 1870.

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N I N T H

ANNUAL REPORT

OF THE



CUMBERLAND AND WESTMORLAND


LUNATIC ASYLUM.

1870.

CARLISLE :

PRINTED BY C. THURNAM AND SONS, ENGLISH STREET.

—
1871.



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EPIPHANY SESSIONS, 1871.

THE REPORT OF THE COMMITTEE OF VISITORS OF THE UNITED COUNTIES OF CUMBERLAND AND WESTMORLAND.

Your Committee have to report that the number of patients at present in the Asylum is as follows:—For Cumberland, 158 males, 117 females; for Westmorland, 42 males, 35 females; for other counties and private patients, 17 males, 32 females; making a total of 401 patients now in the Asylum. The total increase during the past year has been 28, but of these only 6 have belonged to the two counties. The weekly cost of maintenance for pauper patients is 8s. 9d., and 14s. for those of other counties and private patients.

The General and House Committees have met at the Asylum once a month during the past year, and the House has been regularly visited from time to time in terms of the Lunacy Act, and also by one Visitor every month in addition to the visits required by the Act.

By the 62nd section of that Act your Committee are required at this sessions to lay before the Justices of the County “a report in writing of the state and condition of the Asylum, and as to its sufficiency for the proper accommodation of the number of lunatics for whom it may be necessary to provide accommodation, and as to the management of such Asylum, and the conduct of the officers and servants thereof, and the care of the patients therein,” a copy of which report is to be transmitted to the Commissioners in Lunacy. In accordance with this requirement, your Committee have now to report that the state and condition of the Asylum continues to be highly satisfactory. The whole of the lunatics chargeable to the two counties for whom it was necessary to provide accommodation are now in the Asylum at Garlands, and your Committee have been able to receive pauper patients belonging to the County of Lancaster,

and private patients to the number of 49, without interfering with the necessary accommodation of those belonging to the two counties.

The management of the Asylum by Dr. Clouston continues to afford every satisfaction to the Committee, and they are glad to be able to report favourably of the efficiency of the Assistant Medical Superintendent, and the other officers and servants connected with the establishment.

The care bestowed upon the patients during the past year, and the desire which has been manifested by Dr. Clouston, and those under him to promote their comfort and happiness, has been unremitting. The rate of mortality has been unusually low, only $5\frac{1}{2}$ per cent. on the average number resident at Garlands, whilst the usual rate in the County Asylums of England last year was $10\frac{1}{2}$ per cent. There have been no epidemics in the establishment, and but one case of typhus fever, where a patient suffering from that disease was inadvertently sent to the Asylum from Whitahaven. In order to guard against such a danger in future a resolution was passed by the Committee, and transmitted to the various Boards of Guardians, requiring that every patient sent from a district where fever existed should be accompanied by a medical certificate that such patient was free from fever. The proportion of recoveries is also highly satisfactory, being 46 per cent. on the admissions, while the average in County Asylums of England was only $35\frac{1}{2}$ during the last year.

It will be necessary for the Court at this Sessions to appoint a Committee for the ensuing year, in compliance with the terms of the Act.

E. W. HASELL.

W. E. JAMES.

THOS. HENRY GRAHAM.

ROBERT BRISCO.

JOHN WALKER.

W. N. HODGSON.

G. HEAD HEAD.

REPORT OF COMMISSIONERS IN LUNACY.

CUMBERLAND & WESTMORLAND ASYLUM,

5th August, 1870.

In the course of our official inspection of the Asylum this day we have seen and examined all the patients except two who are away on trial, and have visited the wards and offices. There are now on the books the names of 409 patients, of whom 226 are men, and 183 are women. Included in these numbers are 7 males and 9 females of the private class, and 12 males and 21 females from out counties. There are at present vacancies for 8 males and 30 females. The admissions since the last visit comprise 93 men and 98 women, total 191; and 44 men and 50 women have been discharged, 74 being recovered. Within the same interval 37, viz., 20 men and 17 women, have died, all from ordinary causes, except one case of typhus, which was brought to the Asylum whilst labouring under the disease. No fatal accidents have occurred, and no Coroner's inquests have been held. The number employed in both divisions average 150 in the male, and 132 in the female division, the majority of the men being occupied on the land, and the women in sewing, knitting, and kitchen, and laundry work. Attending the chapel services there are usually 118 men and 67 women, a very small proportion as regards the latter sex. There are the usual associated entertainments, and most of the wards are fairly supplied with means of amusement; but as regards No. 1 on the female side, we think the provision inadequate, and that if more objects of interest and ornament were introduced there, a corresponding improvement would be observed in the demeanor and conduct of its inmates. To-day nearly all the women belonging to this and the other central wards were in the front airing ground, and with few exceptions, were quiet and well-behaved. There were some unsightly dresses of strong material among them, the number of which we should be glad to see diminished, but generally the clothing was clean and good, and the bedding throughout in the best order.

There were no women in seclusion, but three of the men in bed from sickness had the doors of their single rooms locked. These men were not considered to be in seclusion, but we think that whenever patients are locked up alone the fact ought to be recorded. As regards the amount of seclusion employed since the last visit, we find the names of 8 men recorded on 36 occasions, and 24 women on 54 occasions ; the majority of these instances of seclusion were applicable to only one of the men, and five of the women.

Restraint was once only employed in the cases of three male patients, and in each case for surgical reasons, the means employed being the Jacket or "Polka." This has been worn by one man during the night for the last six months, to prevent him from injuring himself by causing hæmorrhage.

Dr. Clouston continues to devote much attention to the medical treatment of the patients for the cure of their mental disorder ; and he has made arrangements whereby all newly-admitted cases are brought under special observation. The number of attendants and nurses is in the proportion of to 12 or 13 patients in both divisions. There have been no structural alterations except that the small basement wards have been painted and papered, but neither of these have yet been occupied. The wards were very clean, and the dormitories well attended to, we must, however, object to the use of one of the lavatories on the women's side as a bedroom, and the present population of the Asylum does not render any such appropriation at all necessary.

We have again to express a hope that the earliest opportunity will be taken for planting the women's airing court, not only with shrubs, but with trees that will hereafter afford shade. Referring to the observation made above as to the small number of women who now attend the services in the chapel, we have been informed that until lately about 20 more were present, and the chapel was then quite full, overcrowded indeed ; and this crowding was very liable to produce disturbance. We find, also, that were more space provided, a larger proportion of patients might attend Divine service. In the circumstances, we hope that the Committee of Visitors will take into consideration a suggestion formerly made for the erection of a new chapel of ample size, and the conversion of the present apartment into a recreation room.

We have had long conversations with several of the patients. One of them complained of unjust detention, but we fully satisfied

ourselves of his unsoundness of mind; another spoke of rough treatment on the part of attendants towards some of the patients, but not towards himself; the third stated that he had been obliged to go into a filthy bath which had been used previously by two dirty patients, one of them with an ulcerated leg. In both these last cases the complaints referred to alleged events which occurred more than a year ago, and the attendants implicated have left the Asylum. We were unable in any way to verify them. On the whole, we were of opinion that very little reliance could be placed upon the statements of these patients.

We have made all the statutory inquiries, and signed and examined the registers. The visitation of the Asylum by the Magistrates is very frequent, in addition to the meetings which take place every two months.

We have again the satisfaction of reporting very favourably as to the state of this Asylum and its inmates, the whole is most creditable to the Superintendent.

(Signed)

W. G. CAMPBELL,	}	<i>Commissioners in Lunacy.</i>
ROBERT NAIRNE,		

MEDICAL SUPERINTENDENT'S REPORT.

TO THE CHAIRMAN AND VISITORS OF THE CUMBERLAND AND WESTMORLAND ASYLUM.

GENTLEMEN,

I beg to submit to you the following Report of the Cumberland and Westmorland Asylum for the year 1870:—

In the beginning of the year there were 373 patients in the Asylum; there were 401 on the 31st of December.

There were 130 patients admitted during the year, of whom 71 were men and 59 women.

There were 79 patients discharged, of whom 42 were men and 37 were women.

There were 23 deaths, of whom 11 were men and 12 women.

The average number of patients resident during the year was 219 men and 184 women, in all 403.

In the accompanying tables I have given the usual statistical information in regard to the patients admitted, discharged, and dead.

ADMISSIONS.

Of the 130 patients admitted 89 were chargeable to the two counties, 28 were from Lancashire, and 13 were private patients. Last year the number admitted from the two counties was 88, the out-county patients 18, and the private patients 9, in all 115. The increase in the admissions therefore was not owing to any increase in the pauper lunacy of the two counties during the year, which, so far as represented by the admissions into the Asylum, has remained almost stationary for four years. The number of Cumberland and Westmorland patients at the end of the year was 352, being only 6 more than at the beginning, and only 10 more than at the end of 1868.

A large number of new patients admitted into an Asylum always causes a great amount of work, anxiety, and responsibility. This year the number admitted has been considerably greater than in any former year. The new cases are the most excited, the most

dangerous, and the most suicidal ; while they are at the same time the most curable, the most interesting medically, and the most to be pitied. With judgment and reasoning powers impaired, and nerves unstrung, they find themselves in circumstances utterly unlike anything they have ever been in before. They are in a strange place among perfect strangers, of whom they are often afraid or suspicious, and by whom they have to be controlled. They find themselves subjected to rules and discipline that must be quite unintelligible to most of them. They are often weak in body as well as in mind. It can be imagined that it is no easy task to allay their suspicions, and soothe their irritability, to restrain them kindly but firmly from doing harm to themselves or others, to cheer them, and make them believe that what is done for them is done for their good, and to watch them without appearing to do so too much. Their symptoms, bodily and mentally, must be observed, noted, and treated, and no resource of the medical art left untried to restore the morbid action of the nervous system, which is causing all this mental disturbance. Everything that affords the least chance of recovery in a curable case should undoubtedly be tried, and it would be perfectly inexcusable if in any such case the want of appliances of the institution, the stupidity of the attendants, or the remissness of the doctor, left a man who might have been restored to his reason, to sink into hopeless insanity. The money spent on an Asylum would be but ill spent if it were not first of all, and above all, a place for the cure of brain disease. It is undoubtedly important also, though secondarily so, to do all that can reasonably be expected to be done for the cases who, from the first, are seen to be incurable. If a man comes in labouring under a hopeless form of paralysis, which it is well known can only end in death in a year or two, and if that man is at first most excited, troublesome, and dangerous to his attendants, and is most destructive to his clothes and furniture, he requires even more patience on the part of all who have to do with him than the man whose possible recovery keeps hope and interest alive ; or if a man labours under a kind of insanity that closely simulates ordinary obstinacy, cunning, mendacity, or bad temper, it is undoubtedly hard to get attendants, whose education is imperfect, to treat such a person in the right way.

The mean age of the patients admitted was 41 years. This is rather over the average ; four of them were between 70 and 80.

The forms of insanity under which the patients laboured did not

present any special features this year, nor the causes of the disorder. Intemperance stands above the average as a cause, being 15 per cent. instead of about 12.

Of the 130 patients, 83 of them were attacked for the first time with the disorder, 34 were known to have had one or more attacks previously, while of the remaining 14 nothing was known, or they were weak-minded from birth.

The importance of sending in curable cases at an early stage of the disease seems to be now very fully recognized in those two counties. Instead of as formerly only one-fifth of them coming here in the first month of the disease, more than one-half of this year's admissions had been insane less than that time. This is unquestionably one of the chief causes of the increasing proportion of recoveries in this Asylum from year to year.

Rather fewer than usual of the patients admitted were suicidal, only about one-fourth of them having exhibited that tendency. The latency and subtle nature of this symptom of insanity was well illustrated in the case of a man who was admitted two years ago, being then suicidal, but not strongly so. This impulse seemed to have quite passed off long ago. He was almost uniformly cheerful, sometimes being morbidly lively, singing, and dancing. I certainly never suspected for a moment that he had the remotest idea of taking away his own life. Yet, one night he took a small piece of crinoline hoop, which he had picked up on the farm, and had sharpened on purpose, to bed with him, covered his head with the bed clothes, and in the middle of the night cut his throat. The blood was seen by the night attendant when he next came round dripping from the bed. Fortunately the wound was not fatal. He had planned to do it beforehand, evidently, yet he was not depressed in mind and could assign no reason whatever for the deed. It was a mere morbid impulse that had got the better of him.

About half the patients admitted were in poor bodily health.

I have added as an appendix to this report a short account of a few of the more interesting and typical cases from a medical point of view.

DISCHARGES.

Sixty patients were discharged recovered, being 46 per cent. of the admissions. In no former year has the number been so great. Taking the admissions and discharges recovered, from the two counties alone, the numbers were 89 and 47, or a per centage of 52½ ;

from the out counties they were 28 and 10, or a per centage of $35\frac{1}{2}$; and the private patients were 13 and 3, or a per centage of 23. This striking disproportion in the curability of those different classes of patients is, I think, largely owing to the stage of the disorder in which the patients were sent here. The pauper patients from the two counties were sent early (more than half of them in the first month), and more than half of them recovered. The private patients had been long kept at home (only one-sixth of them being sent here in the first month), and only one-fourth of them recovered. Of course it may be said, that, perhaps only the incurable and unmanageable private patients were sent at all, and that if the whole number of cases of insanity occurring in that class were known, it would be found that as large, or a larger proportion recover at home, as in the Asylum. Such may be the case, but I am strongly of opinion that it is not so, and that a curable patient has a far better chance of recovery in a good asylum than he has at home. I am far from saying that every person who manifests any derangement of mind should at once be taken to a lunatic asylum. It is as much the duty of the relatives and medical attendant of a patient suddenly seized with insanity, to try every means for his recovery at home, as it is for them to lose no time in sending him to an asylum after every reasonable chance of cure at home has passed away. The time during which it is proper for patients to be treated at home must depend much on the nature of the case and on the circumstances of the patient. In one case two days may be too long, in another two weeks may be too short. It is impossible to lay down a rule that will apply to all cases; but there are certain considerations that common sense and medical experience equally approve of. If a patient is young and strong, and is so excited and dangerous to others that he has to be tied down, the sooner he is sent to an asylum the better. If an insane patient refuses food and cannot be got to take sufficient nourishment, it is above all things necessary to send him before his strength gets so exhausted as to interfere with his recovery. If a patient is suicidal and cannot be properly watched, especially if any near relative has committed suicide, he should be sent soon. Insanity after childbirth in women, if, as is very common, it be accompanied by dislike to the patient's children, or by persistent refusal of food, and does not show symptoms of improvement under home treatment within a week, requires asylum treatment, except the patient have means or friends

to insure constant watching and attention. Nearly every case of general paralysis requires to be sent to an asylum. All kinds of insanity where there are unfounded suspicions, or hatred of near relatives, will do better away from such relatives, and if they are sent away soon they may forget what will otherwise develop into a fixed delusion. If epileptic fits are regularly followed by excitement, or if an epileptic has a craving for stimulants, or shows signs of sudden motiveless violence, removal to an asylum may prevent severe injury to those near him. If the mild insanity that occurs at the change of life does not show any signs of improvement in a month or two, it is well to try change of scene and circumstances before it becomes chronic. In any sort of mental disturbance, if the circumstances of the patient are such that they manifestly aggravate it, or if no proper attendance can be got, or if the patient has evidently not sufficient food, then there can be but little question about sending him to an asylum, however mild the present symptoms may be.

On the other hand, in the following varieties of insanity, there is usually little necessity for early removal from home, viz., the insanity immediately following a drunken bout; the insanity of pregnancy, with no suicidal tendencies; the insanity after childbirth, where the symptoms are mild and manageable, and where plenty of food and stimulants can be given; the insanity of old age, where the patients can have good nourishment; delirious attacks occurring in consumptive people, or in young hysterical girls, or at the period of puberty; the insanity of children generally; the insanity occurring at the change of life for the first month or two, if good food and a change of scene can be procurable; and the insanity caused by self-abuse, if the symptoms are not very severe.

Three-fourths of the patients discharged recovered, had been insane less than a month before admission, and rather more than half of them were in the Asylum for periods under six months.

The mean age of the patients recovered was about 38½ years.

Nineteen patients were discharged unrecovered, most of them having been removed by their relatives; but 7 weak minded persons, who had before admission been inmates of workhouses, and who had been sent here on account of temporary attacks of excitement or unmanageableness, were sent back to those workhouses after they had improved as much in mental state as it was possible for them ever to do. Before being finally discharged from the

Asylum they were sent to the workhouse for a month on trial. Such persons often merely require a certain amount of kindly supervision. At present there are no places to which they can be sent except the workhouses. Much has been said and written during the past year about a system of boarding out such persons in cottages, and this plan is proposed to be extended to many more of the chronic insane. Nay, some writers on the subject would seem to suggest that all the insane should be so treated. Gloomy pictures have been drawn of asylums, and deep have been the tints in which the misery of their inmates has been depicted; while on the other hand have been represented bright cottage homes of which they would be inmates, happy families of which they would be members, subjected to the softening influence of woman's presence, their lives unrestrained and natural, the healthy influence of public opinion constantly securing them proper treatment. The great and merciful change in medical opinion produced by the writings of Conolly, by which the former chains and mechanical restraints were abolished, and the old Bedlam changed into the modern asylum, it is strongly urged, was only a half-way stage in the unshackling of the insane. Now, the prison of the asylum should follow the lash and the chains into desuetude, and the mentally affected be as free as the sane. Much of this is no doubt mere nonsense, written by doctrinaires entirely ignorant of the subject. The proposal to put an actively excited insane man, who labours under a disease of the brain into an ordinary cottage as an inmate among a family, could only have been made by a lunatic one would suppose, but when the active symptoms of his disease have passed off, and the patient has settled down into an incurable moderately manageable state, then it is averred by many whose opinion is entitled to respect, that he could be more cheaply boarded in a cottage than in an asylum, his life would be a more useful and a happier one to himself, while the necessity of constantly enlarging asylums would be obviated. It is proposed that there should be a regular system of inspection of the houses in which such persons boarded; that the cottagers should receive full instructions and a sort of training how to manage the patients, and that when any of them became very troublesome or unmanageable he should be sent to the asylum for a short time. The Scottish Commissioners in Lunacy strongly advocate this system for some cases, and are fostering its practice in certain villages in Scotland.

It has been in operation to a limited extent for two or three years, and they continue to report most favourably of the results. Certainly if the law allowed this system to be tried in England there are no two counties where it could be experimentally adopted with more hope of success than in Cumberland and Westmorland. There is an accumulating mass of chronic incurable cases here as in every asylum. Of the 250 patients who were admitted the first year, there were still left 125 at the beginning of 1870, and there are 122 now. For my own part, I should be most willing to second any feasible attempt to board out some of these if suitable custodians could be found. It seems to me that if near relatives were paid as much for taking charge of such cases as strangers, there would always be one motive more, and that surely one of the strongest of all, for looking after them well. As for the misery of the patients in asylums, it is just those few who say they are most miserable who are quite unfit to be at large. Those who are contented don't say so, those who are unhappy proclaim the fact to all comers, and make noise quite out of proportion to their number.

DEATHS.

The deaths have been about $5\frac{3}{4}$ per cent. on the average numbers resident, which is less than the average mortality in former years, and very much less indeed than that of most similar institutions throughout the kingdom. There is nothing calling for particular remark in the causes of death this year. Seven of the 23 cases were over 60 years of age, the mean age at death being 50. The mean age of the patients now remaining in the Asylum is 43 years. A *post-mortem* examination was made in every case of death. This is according to the general rules of the Institution, and has been the practice for the last eight years.

GENERAL HISTORY OF THE INSTITUTION.

The general health of the patients has been all that could be desired. Three things call for the utmost thankfulness in the history of the past year, viz., the absence of any sort of epidemic, the continued preservation from any case of suicide, and the freedom from any serious accidents among the patients. The attendants also have on the whole done their most trying duties satisfactorily. These are matters about which the officers of an asylum are usually most anxious. I speak for myself when I say that I have a sense of

great relief and gratitude at the end of each year when the Institution has been free from any trouble in any of these respects ; and if a reasonable proportion of the patients have been sent back to their homes recovered from their malady, I feel that the Institution has attained, in a fair degree, the objects for which it was provided.

The usual means of useful occupation have been provided for the patients on the farm and in the workshops, and the usual means of recreation have been continued. The influence of both for good is unquestionable.

The General Rules for the government of the Asylum were this year amended, and Rules for "General Management" added to those formerly existing for the Committee and the officers, the first four of which are as follows :—

"1. That the General Management of the Institution shall have as its first object the recovery of the curable patients.

"2. That every patient on admission shall be most carefully examined by a medical officer, and a full account drawn out at the time of—1st, his or her mental symptoms ; 2nd, his or her bodily state and symptoms, special attention being directed to the discovery of any functional or organic disorder of any of the organs of the body ; 3rd, any injuries that he or she may have received.

"3. That the medical and moral treatment of the individual cases, especially of the recent and curable cases, be the first duty of the medical officers, and shall under no circumstances be made subservient to any general superintendence.

"4. That the classification of the patients shall be chiefly regulated with the view of promoting the comfort and recovery of the curable patients."

Rule 19, before referred to, is as follows :—

"19. That a *post-mortem* examination be made in the case of every patient who dies, and a minute and careful record made of the appearances found, it being competent for the Medical Officer to omit this if he should consider it dangerous for him to perform such examination, in which case he shall state the fact in the *post-mortem* register."

These Rules were approved by the Home Secretary and the Commissioners in Lunacy.

The medical treatment of the patients has been carried on in the way referred to in the Report for 1868, and I am every year

strengthened in the conviction that the duties of the medical superintendent of an asylum, and those of physician to its patients, should never be in any way disconnected. The use of the new form of "Case Book" I find very satisfactory.

We have had rather more than the usual number of changes among the attendants. I spoke last year of the difficulty of getting good attendants. I now regret to say that there is sometimes a difficulty in keeping them when they are got and trained to their duties. Those duties are of a peculiar kind, and like everything else need an apprenticeship. It is decidedly discouraging to me, and bad for the patients, to have them leaving us just when they become most useful and reliable. I usually find on inquiry in such cases that better pay has tempted them elsewhere, or that, as is not uncommon, they have gone to less irksome duties for the same or less pay. The scale of remuneration of the attendants not having been altered since the opening of the Institution some years ago, and its greatly increased size requiring a greater number of experienced persons to form a permanent nucleus for the staff, I think you will probably during this year have to take into consideration the question of raising the wages of, at all events, the older attendants, who have the chief charge of each of the wards. They are on duty from six o'clock in the morning till eight o'clock in the evening continuously, and after that are not allowed to leave the building, except a certain number in rotation, on the Summer evenings, for a walk in the grounds, but generally have one afternoon in the week from two o'clock till ten at night, when they can go out, and every fourth Sunday, from nine o'clock in the morning. They are expected to exert themselves to make the patients comfortable, tidy, and contented, to get them to work and amuse themselves, to bear all sorts of bad language calmly, to strike or use a patient roughly under no provocation whatever, to do very disagreeable work for the purpose of keeping the patients clean, to observe the peculiarities in the patients and the changes occurring in their mental condition, and to report them to the doctors, and generally to exert a good influence on them, tending to their recovery. If a man is in any way trained or fitted to do all these duties as they should be done, I think a remuneration that will retain his services is money judiciously spent, and perhaps saved in the long run.

A slight change has been made in our dietary by which Australian canned mutton has been substituted for fresh beef on two days in

the week, which promises to be at the same time an improvement and a saving. This mutton is tender and palatable, and is much liked by them. It costs at present 6½d. per lb. cooked and free from bone, which, as rounds of beef cost about 7½d. and go in one-third in the cooking, effects a saving of 3d. per pound for butcher meat.

As the patients were digging away some sand from behind the new block for men, they made the curious discovery of about 20 cinerary British urns of all sizes, from 1½ inch up to 15 inches in diameter, many of which were got out through the care and dexterity exercised by a patient in a perfect state; a small flint knife was also found. They have been seen by several distinguished archæologists, amongst others by the Rev. Canon Greenwell, and are considered of very great interest and value.

The Institution has, during the greater part of the year, been deprived of the services of the Rev. J. F. Simpson, through a severe illness, and he has now been appointed to another position. I can testify to the very great loss his illness was to the patients, and to their strongly expressed regret at the prospect of his leaving them. His services among them were as unremitting as they were earnest and judicious, and I am in a position to say that they were the means of doing great and undoubted good. As a colleague, I may be permitted to say how much all the officers of the Asylum respected and esteemed him, and to express my great regret at the loss of one, who has always co-operated with me so cordially in the service of the Institution, and for the well-being of the patients. During the first four months of Mr. Simpson's illness, until a substitute was appointed, many of the clergy of Carlisle and the neighbourhood very kindly performed the Sunday duties of the chaplain.

In conclusion, I heartily acknowledge the services of Dr. Campbell, Miss Groder, and Mr. Todd, together with those of the two head attendants, Mr. Deuchars and Mrs. Conroy, and beg to thank you for your continued support.

I am, Gentlemen,

Your obedient Servant,

T. S. CLOUSTON, M.D.

TABLE II.

Admissions, Re-Admissions, Discharges, and Deaths from the Opening of the Asylum (Jan. 1, 1862) to Dec. 31, 1870.

					Males.	Females.	Total.
Admitted for the first time during the							
nine years	..	..	..	..	442	410	852
Re-Admissions	..	..	..	..	46	33	79
Total Admissions					488	443	931
		M.	F.	T.			
Discharged Recovered		141	137	278			
„ Relieved		20	34	54			
„ Not Improved		7	11	18			
Died	..	..	..	..	103	77	180
Total Discharged and Died during the							
nine years	..	..	..	..	271	259	530
Remaining December 31, 1870					217	184	401
Average number resident during the nine							
years	..	..	..	..	154	123	277

TABLE III.

The Admissions, Discharges, and Deaths, with the mean Annual Mortality and Proportion of Recoveries per Cent. on the Admissions for each Year since the opening of the Asylum.

YEARS.	Admitted.			Discharged.						Died.			Remaining December 31.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Nos. Resident.					
				Recovered.			Relieved.																		Not Improved.		
	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.			
	From January 1 to December 31.																										
1862	136	114	250	21	14	35	1	6	7	2	0	2	6	4	10	106	90	196	97	77	174	15	13	14	6	55.74	
1863	36	32	68	11	6	17	1	8	9	0	2	2	5	6	11	125	100	225	115	94	209	30.6	18.4	25	4.3	6.4	5.2
1864	26	21	47	8	8	16	1	0	1	1	1	2	15	12	27	126	100	226	125	100	225	57.7	18.7	34	12	12	12
1865	20	34	54	6	15	21	2	1	3	1	1	2	5	10	15	132	107	239	131	106	239	30	44	38.6	3.8	9.4	6.2
1866	40	34	74	6	13	19	0	4	4	0	2	2	7	3	10	159	119	278	134	110	244	15	38	25.7	5.2	2.8	4
1867	59	38	97	16	13	29	0	0	0	1	0	1	22	9	31	179	135	314	172	130	302	27.1	34.2	29.9	12.8	6.9	10.3
1868	49	47	96	18	18	36	0	3	3	1	2	3	14	11	25	195	148	343	188	143	331	36.7	38.3	37.5	7.4	7.7	7.6
1869	51	64	115	21	24	45	7	4	11	1	0	1	18	10	28	199	174	373	202	160	362	41.2	37.5	39.1	8.9	6.3	7.7
1870	71	59	130	34	26	60	8	8	16	0	3	3	11	12	23	217	184	401	219	184	403	47.9	44.1	46.2	5	6.5	5.7

Admitted.				Of each Year's Admissions Discharged and Died in 1870.										Total Discharged and Died of each Year's Admissions.										Remaining of each Year's Admissions 31 Dec. 1870.							
Years.	New Cases.		Relaps'd Cases.		Recovered.			Not Improved.			Died.			Relieved.			Recovered.			Relieved.			Not Improved.			Died.			Males.	Females.	TOTAL.
	Males.	Females.	Males.	Females.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.			
1862	134	112	2	2	250	1	0	0	0	0	1	1	2	23	20	48	2	13	15	2	1	3	32	30	62	72	50	122			
1863	29	31	7	1	68	0	0	0	0	0	0	0	1	8	10	18	1	2	8	0	4	4	13	8	21	14	8	22			
1864	21	18	5	3	47	0	0	0	0	0	0	1	2	8	7	15	2	1	3	1	0	1	9	7	16	6	6	12			
1865	15	29	5	5	54	0	0	0	0	0	0	0	2	7	15	22	0	2	2	1	1	2	3	5	8	9	11	20			
1866	31	30	9	4	74	0	0	0	0	0	0	0	1	6	13	19	2	4	6	0	1	1	12	3	15	20	13	33			
1867	40	31	19	7	97	1	0	1	1	1	0	1	2	26	15	41	1	2	3	1	0	1	11	9	20	20	12	32			
1868	33	33	16	14	96	4	2	6	1	3	4	0	3	20	18	38	4	6	10	2	1	3	12	7	19	11	15	26			
1869	38	47	13	17	115	8	6	14	1	1	2	3	2	18	21	39	3	2	5	0	3	3	9	5	14	21	33	54			
1870	53	44	18	15	130	20	18	38	5	2	7	0	2	20	18	38	5	2	7	0	0	0	2	3	5	44	36	80			
TOTAL	394	375	94	68	931	34	26	60	8	8	16	0	3	3	141	137	278	20	34	54	7	11	18	103	77	180	217	184	401		

Summary of the Total Admissions 1862-70.				Males.		Fe- males.		TOTAL.	
Percentage of Cases Recovered				30.9	29.9
" Relieved	7.7	5.8
" Not Improved				2.5	1.9
" Died	17.4	19.3
" Remaining				41.5	43.1

TABLE V.

Admissions, Discharges, and Deaths each Month.

	Admissions.			Discharges.			Deaths.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
January ..	7	4	11	0	1	1	0	2	2
February ..	11	5	16	1	4	5	1	0	1
March ..	7	6	13	4	1	5	1	1	2
April ..	1	10	11	2	3	5	1	1	2
May ..	8	4	12	4	3	7	1	3	4
June ..	5	10	15	2	5	7	0	0	0
July ..	7	0	7	3	5	8	0	1	1
August ..	6	6	12	3	0	3	0	2	2
September ..	2	7	9	2	2	4	0	0	0
October ..	6	2	8	7	5	12	2	1	3
November ..	7	1	8	5	2	7	2	0	2
December ..	4	4	8	9	6	15	3	1	4
TOTAL ..	71	59	130	42	37	79	11	12	23

TABLE VI.

Ages of those Admitted, Discharged, and Dead.

	Admitted.			Discharged Recovered.			Removed.			Dead.	
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.
From 15 to 20	4	2	6	2	2	4	2	1	3	0	0
" 20 " 30	14	17	31	11	6	17	1	1	2	2	0
" 30 " 40	17	7	24	6	3	9	3	1	4	1	0
" 40 " 50	15	13	28	10	6	16	1	2	3	4	0
" 50 " 60	12	16	28	1	8	9	1	6	7	2	0
" 60 " 70	6	3	9	3	1	4	0	0	0	2	0
" 70 " 80	3	1	4	1	0	1	0	0	0	0	0
TOTAL ..	71	59	130	34	26	60	8	11	19	11	10
Mean Age ..	40.8	41.6	41.2	37.4	39.5	38.4	33.1	43.6	38.4	44.8	54.0

TABLE VII.

Form of Mental Disease in those Admitted.

	Males.	Females.	Total.
Acute Mania	7	10	17
Mania	25	22	47
Epileptic Mania	1	1	2
Puerperal Mania	0	2	2
Melancholia	22	15	37
Puerperal Melancholia	0	1	1
Dementia	4	5	9
Epileptic Dementia	1	0	1
General Paralysis	9	2	11
Monomania	1	0	1
Congenital Imbecility	1	1	2
TOTAL	71	59	130

TABLE VIII.

Form of Insanity in those Admitted.—Another Classification.

	Males.	Females	Total.
Congenital Insanity (<i>from birth</i>) ..	2	1	3
Epileptic Insanity (<i>from fits</i>) ..	2	1	3
Puerperal Insanity (<i>from childbirth</i>) ..	0	3	3
Insanity of Pregnancy	0	1	1
Climacteric Insanity (<i>from change of life</i>)	5	18	23
Senile Insanity (<i>from old age</i>) ..	6	4	10
Phthisical Insanity (<i>from consumption</i>) ..	2	5	7
General Paralytic Insanity	9	2	11
Paralytic Insanity	2	0	2
Amenorrhœal Insanity (<i>from uterine disorder</i>)	0	1	1
Insanity of Puberty	1	0	1
Dipsomania (<i>drinking insanity</i>) ..	4	0	4
Rheumatic Insanity	1	1	2
Post-Febrile Insanity (<i>after fever</i>) ..	2	1	3
Utero-Mania (<i>from uterine disorder</i>) ..	0	8	8
Alcoholism (<i>from intemperance</i>) ..	8	0	8
Unknown { Sthenic (<i>vigorous</i>)	13	7	20
{ Asthenic (<i>weak</i>)	14	6	20
TOTAL	71	59	130

TABLE IX.

Assigned Causes of the Insanity

					Males.	Females.	Total.
Physical.	{	Congenital Defect	2	1	3		
		Epilepsy	2	1	3		
		Intemperance	16	4	20		
		Child-birth	0	3	3		
		Fever	1	1	2		
		Old Age	1	1	2		
		Disease of Brain	1	0	1		
		Pregnancy	0	1	1		
		Small Pox	1	0	1		
		Change of Life	0	2	2		
		Paralysis	1	0	1		
		Injury to Head	1	0	1		
		Irregular Menstruation	0	2	2		
		Moral.	{	Fright	0	2	2
Domestic Affliction	4			5	9		
Disappointment in Love	0			2	2		
Property Stolen	0			1	1		
Losses in Business	1			0	1		
Ill-treatment by Husband	0			1	1		
Predis- posing.	{	Previous Attacks	18	15	33		
		Hereditary	19	23	42		
		Unknown	19	10	29		

TABLE X.

Number of previous Attacks in those Admitted.

					Males.	Females	Total.
Cases of First Attack	..	..	..		47	36	83
" Second	..	..	..		17	9	26
" Third	..	..	..		0	3	3
Had several Attacks	..	..	..		1	3	4
Congenital	..	..	..		4	2	6
Unknown	..	..	..		2	6	8
TOTAL					71	59	130

Duration of Insanity on Admission in the Admissions, Discharges, and Deaths.

CLASS.	Duration of Disease on Admission, in Four Classes.											
	Admissions.			Recoveries.			Removals not Recovered.			Deaths.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
FIRST CLASS: <i>First Attack—</i>												
Under 1 week	13	16	29	9	7	16	1	0	1	4	2	6
" 1 Month	14	8	22	5	5	10	0	1	1	2	0	2
" 2 "	4	5	9	1	0	1	0	0	0	1	0	1
" 3 "	0	0	0	1	3	4	0	0	0	0	0	0
	(31)	(29)	(60)	(16)	(15)	(31)	(1)	(1)	(2)	(7)	(2)	(9)
SECOND CLASS: <i>First Attack—</i>												
Above 3 and under 6 Months	4	1	5	0	1	1	0	0	0	1	2	3
" 6 " 12 "	4	4	8	0	1	1	0	0	0	1	1	2
	(8)	(5)	(13)		(2)	(2)				(2)	(3)	(5)
THIRD CLASS: <i>Not First Attack—</i>												
Under 1 Month	9	8	17	12	7	19	2	0	2	0	0	0
" 6 "	6	4	10	1	2	3	0	1	1	0	0	0
" 12 "	0	1	1	0	0	0	0	0	0	0	0	0
	(15)	(13)	(28)	(13)	(9)	(22)	(2)	(1)	(3)			
FOURTH CLASS: <i>First Attack or Not—</i>												
But over 12 Months	17	12	29	5	0	5	5	9	14	2	7	9
TOTAL	71	59	130	34	26	60	8	11	19	11	12	23

TABLE XII.

Illustrations of Suicidal Tendency in those Admitted.

	Males.	Females.	TOTAL.
Have Attempted Suicide	4	10	14
„ meditated „	11	10	21
TOTAL Suicidal	15	20	35
<i>Forms of Insanity in which Suicide was attempted.</i>			
Mania	0	4	4
Melancholia	3	6	9
Dipsomania	1	0	1
TOTAL	4	10	14
<i>Forms of Insanity in which Suicide was meditated.</i>			
Melancholia	5	5	10
Puerperal Mania	0	2	2
Mania	6	3	9
TOTAL	11	10	21
<i>Means used in attempts made.</i>			
Cutting Throat	1	0	1
Hanging	1	0	1
Precipitation	1	5	6
Setting Fire to Dress	0	1	1
Refusing Food	1	1	2
Drowning	1	3	4

TABLE XIII.

State of Bodily Health and Condition of those Admitted.

	Males.	Females.	TOTAL.
In good Bodily Health and Condition..	36	25	61
In indifferent Health and reduced Condition	27	26	53
In bad Health and exhausted Condition	8	8	16
TOTAL	71	59	130

TABLE XIV.

Occupations of those Admitted.

Males.				Females.			
Schoolmasters	...	...	3	Confectioner	...	...	1
Miners	...	...	5	Sempstresses	...	...	3
Grooms	...	...	3	Domestic Servants	..	...	16
Bricklayer	...	...	1	Wives of Labourers	...	...	14
Labourers	...	...	17	Labourer ..	...	...	1
Farmers	...	..	5	Wives of Sailors	...	...	3
Shoemakers	...	...	2	Wife of Plasterer	...	...	1
Mason	..	...	1	Wife of Miner	...	...	1
Butler	...	...	1	Housekeepers	...	...	2
Blacksmiths	...	...	2	Factory Workers	...	...	5
Captain of Militia	...	...	1	Wife of Waiter	...	...	1
Boiler Smith	...	...	1	Wife of Joiner	...	...	1
Joiners	...	...	4	Wife of Farmer	...	...	1
Plasterer	...	...	1	Wife of Shopkeeper	...	...	1
Draper	...	...	1	Pauper	...	...	1
Factory Hands	...	...	2	Charwomen	...	...	3
Vocalist	...	...	1	Greengrocer	...	...	1
Gardener	..	...	1	Licensed Victualler	...	...	1
Hawker	...	...	1	None	...	...	2
Clergyman	..	...	1				
Nailor	...	...	1				
Postman	...	...	1				
Slotter	...	...	1				
Clogger	...	...	1				
Painters	...	...	2				
Mechanic	...	...	1				
Tripe Dresser	...	...	1				
Currier	...	...	1				
Cattle Dealer	...	...	1				
Merchant	...	...	1				
None	...	...	6				
TOTAL	...	...	71	TOTAL	...	...	59

TABLE XV.

*Condition as to Marriage in the Admissions, Discharges,
and Deaths.*

Condition as to Marriage.	Admissions.			Discharges.						Deaths.		
				Recovered.			Not Recovered					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Single ..	40	30	70	21	8	29	5	8	13	7	7	14
Married ..	25	22	47	10	13	23	3	3	6	4	4	8
Widowed ..	6	7	13	3	5	8	0	0	0	0	1	1
TOTAL ..	71	59	130	34	26	60	8	11	19	11	12	23

TABLE XVI.

Religious Persuasion of those Admitted.

	Males.	Females.	TOTAL.
Church of England	47	39	86
Methodists	2	4	6
Roman Catholics	12	12	24
Independents	2	1	3
"Protestants"	3	2	5
Presbyterian	1	0	1
Unknown	4	1	5
TOTAL	71	59	130

TABLE XVII.

Diseases of those Discharged, Recovered, Relieved, and Not Improved.

	Recovered.			Relieved.			Not Improved.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
Acute Mania ..	5	3	8	1	0	1	0	0	0
Mania	18	10	28	1	4	5	0	0	0
Puerperal Mania	0	4	4	0	0	0	0	0	0
Epileptic Mania	1	0	1	1	0	1	0	0	0
General Paralysis	0	0	0	0	0	0	0	0	0
Monomania ..	0	0	0	0	0	0	0	0	0
Melancholia ..	9	9	18	2	1	3	0	1	1
Dementia ..	1	0	1	1	2	3	0	1	1
Idiocy	0	0	0	0	0	0	0	1	1
Congenital Imbecility ..	0	0	0	2	1	3	0	0	0
TOTAL ..	34	26	60	8	8	16	0	3	3

TABLE XVIII.

Period of Residence of those Discharged Recovered, Not Recovered, and Died.

	Recovered.			Not Recovered.			Died.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 Month	2	0	2	0	0	0	1	2	3
From 1 to 3 „	9	6	15	2	0	2	1	0	1
„ 3 to 6 „	5	10	15	1	4	5	0	1	1
„ 6 to 9 „	9	5	14	2	0	2	0	2	2
„ 9 to 12 „	1	3	4	1	1	2	1	0	1
„ 1 to 2 Y'rs.	4	2	6	1	2	3	3	0	3
„ 2 to 3 „	3	0	3	0	2	2	3	1	4
„ 3 to 5 „	0	0	0	1	2	3	0	1	1
„ 5 to 7 „	1	0	1	0	0	0	1	3	4
„ 7 to 9 „	0	0	0	0	0	0	1	2	3
TOTAL ..	34	26	60	8	11	19	11	12	23

TABLE XIX.

Causes of Death.

	Males.	Females.	TOTAL.
<i>Cerebral Disease.</i>			
General Paralysis	5	1	6
Softening of Brain	2	3	5
Exhaustion from Melancholia and Diarrhæa	0	1	1
<i>Thoracic Disease.</i>			
Phthisis Pulmonalis	3	1	4
Pneumonia	1	0	1
<i>Abdominal Disease.</i>			
Cancer of Stomach and Pancreas ..	0	1	1
Bright Disease and Erysipelas of Leg ..	0	1	1
Exhaustion from Old Age	0	3	3
Typhus Fever and Pneumonia	0	1	1
TOTAL	11	12	23

TABLE XX.

Form of Insanity in those Deceased.

					Males.	Females.	TOTAL.
Acute Mania	..	..	..	..	0	1	1
Mania	..	..	..	..	1	3	4
Epileptic Mania	..	..	..	..	3	0	3
Monomania	..	..	..	..	1	0	1
Dementia	..	..	..	..	0	4	4
General Paralysis		..	..	..	5	1	6
Melancholia	..	..	..	..	1	2	3
Congenital Imbecility	..	..	..	..	0	1	1
TOTAL					11	12	23

*Annual Statement of Receipts and Payments on account of the
for the Year ending*

D_r.

To Balance in Treasurer's hands on the 1st			
January, 1870	£2,091	10	6
Do. in Clerk's hands	36	0	0
			<hr/>
			£2,127 10

December 31—*Sales from Farm.*

To 77 stones 4 pounds Pork, at 7s. 10d.			
per stone	£30	5	0
7 Fat Pigs	43	0	0
5 do.	30	5	0
6 Cow Hides, 25½ stones, at 4s. per stone	5	2	0
138 Sheep Skins	27	2	9
55½ stones Tallow	10	14	11
218 lbs. Wool, at 1s. 3d. per lb. ..	13	12	0
			<hr/>
			160 1

Supplied the Asylum with.

To 1,464 lbs. Beef, at 7d. per lb. ..	£42	14	0
1,456 do. do. at 6d. do. ..	36	8	0
322 do. do. at 2½d. do. ..	3	7	1
7,956 lbs. Mutton at 8d. do. ..	265	4	0
7,105 do. Pork at 7d. do. ..	207	4	7
7,169 stones Potatoes at 6d. per stone	179	4	6
Cabbages, Onions, Leeks, &c. ..	91	0	9
Carting done for the Asylum ..	16	3	0
			<hr/>
			841 5

Carried forward £3,128 18

*Cumberland and Westmorland Asylum, Garlands, near Carlisle,
31st December, 1870.*

Gr.

Salaries and Wages paid during the Year.

OFFICERS.

By Medical Superintendent	£450	0	0
Consulting Medical Officer (three visits)	3	3	0
Assistant Medical Superintendent ..	100	0	0
Chaplain	125	0	0
Treasurer	20	0	0
Matron	60	0	0
Clerk and Steward	130	0	0
			<u>£888 3 0</u>

MALE ATTENDANTS AND SERVANTS.

By Head Attendant	55	0	0
Thirteen Ordinary Attendants ..	378	11	2
Night Attendant	57	9	2
Shoemaker do.	35	0	0
Tailor do.	30	11	0
Tailor Assistant	28	16	0
Baker	35	0	0
House Porter	£24	16	8
Do., a Suit of Livery	5	1	0
			<u>29 17 8</u>
Engineer	78	12	10
Carpenter	71	11	0
Two Stokers	89	14	10
			<u>890 3 8</u>

FEMALE ATTENDANTS AND SERVANTS.

By Head Attendant	25	0	0
Twelve Ordinary Attendants	199	1	8
Night Attendant	15	7	6
Nurse for Male Infirmary	17	14	0
Head Laundress	25	11	9
Two Laundry Maids	30	3	11
Cook	27	0	0
Housemaid	14	16	10
Two Kitchen Maids	23	0	8
			<u>377 16 4</u>

Carried forward £2,156 3 0

(Asylum Staff and Rate of Payment see page 48.)

*Annual Statement for 1870 of Receipts and
Dr.*

To Amount brought forward	£3,128	18	
---------------------------------	--------	----	--

Sales Maintenance Account.

To Stores supplied to Medical Superintendent	£78	4	1
180½ stones of Rags	9	0	6
368 lbs. Dripping	7	13	4
Old Butter Firkins, &c.	1	6	7
364 old Shoes	0	15	0
¾ cwt. old Lead	0	10	0
2 lengths Iron Spouting	0	3	9
Piece Iron	0	0	6
		97	13

Expenses Removing Patients to other Asylums.

To West Ward Union, Westmorland	2	14	
---------------------------------------	---	----	--

Funeral Expenses of Patients Deceased.

To Brampton Union	£1	0	0
Carlisle do.	9	15	0
Kendal do.	1	12	6
Longtown do.	3	5	0
Penrith do.	3	5	0
Whitehaven do.	8	2	6
Wigton do.	3	5	0
Manchester (Township of)	3	7	6
Liverpool (Parish of)	1	12	6
		35	5
Carried forward		£3,264	11

*Payments on Account of the Asylum.**£r.*

By Amount brought forward £2,156 3 0
Provisions.

By Arrowroot, Sago, &c.	105½ lbs.	..	£3 15 9	
Apples .. ..	.. ..	..	1 5 5	
Biscuits	16½ lbs.	..	0 8 3	
Barley	94 stones	..	7 1 0	
Beef	3048¼ stones	..	1,061 19 0	
Butter	530½ stones	..	406 9 4	
Coffee	92 stones	..	92 19 0	
Cheese	458 stones	..	201 4 1	
Currants and Raisins	107 stones	..	29 16 0½	
Chicory	38½ stones	..	13 9 0	
Cocoa and Chocolate	3 lbs.	..	0 5 8	
Candied Lemon ..	21 lbs.	..	1 1 0	
Carraway Seeds ..	2 lbs.	..	0 2 0	
Eggs .. ..	.. ..	..	19 18 1	
Flour	9,140 stones	..	767 19 2	
Fish .. ..	.. ..	..	8 17 8	
Gelatine	12 pkts.	..	0 6 0	
Ginger	11 lbs.	..	1 0 4	
Lemons .. ..	.. ..	..	1 18 5	
Milk	20,930 gallons	..	959 5 10	
Mutton (Australian } cooked) }	462½ lbs.	..	13 9 9	
Mustard and Pepper	188¾ lbs.	..	8 0 1	
Nuts .. ..	.. ..	..	1 11 0	
Oatmeal	1,670 stones	..	153 1 8	
Oranges .. ..	.. ..	..	3 11 6	
Peas	400 stones	..	27 12 8	
Potatoes	2,670 stones	..	61 7 6	
Rice	46 stones	..	5 18 0	
Carried forward .. ..	.. ..	£3,853 13 2½	£2,156 3 0	

*Annual Statement for 1870 of Receipts and**Dr.*

To Amount brought forward £3,264 11

For Maintenance of Patients.

To Alston Union	£182 10 0
Bootle do.	121 18 9
Brampton do.	397 11 3
Carlisle do.	1,654 16 3
Cockermouth do.	900 1 3
East Ward do. (Westmorland) ..	417 16 3
Kendal do.	975 11 3
Longtown do.	223 16 3
Penrith do.	817 2 6
West Ward do. (Westmorland) ..	289 3 9
Whitehaven do.	1,150 2 6
Wigton do.	735 7 6
County Treasurer (Cumberland) Main- tenance of Patients chargeable to the County	302 11 3
Do. Westmorland do.	22 16 3
Haltwhistle Union (Northumberland) ..	3 3 9
Parish of Liverpool	546 12 0
Township of Manchester	415 0 0
County Treasurer (Lancaster) for Main- tenance of Patients chargeable to the County	104 4 0
Private Patients	510 10 0
Clothing and extra Attendants for do ..	65 5 0

Carried forward £9,835 19 9 £3,264 11

*Payments on Account of the Asylum.**£r.*

By Amount brought forward ..	£3,853	13	2½	£2,156	3	0
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Provisions continued.

y Salt	336 stones	..	£4	4	0	
Sugar	925 stones	..	215	0	2	
Saltpetre	16 lbs.	..	0	8	0	
Spices .. ..	.. ..	..	1	10	5	
Syrup	3 stones	..	0	8	6	
Treacle	48¼ stones	..	4	14	4½	
Tea	1,576 lbs.	..	161	8	10	
Tabacco & Snuff	414 lbs.	..	69	17	9½	
Vinegar	18½ gallons	..	2	10	9	
Yeast Substitute	.. ..	..	6	10	0	
Yeast (German)	.. ..	..	15	0	7	
						4,335 6 7½

Supplied from the Farm.

y Beef	1,464 lbs. at 7d.	..	£42	14	0	
Ditto	1,456 lbs. at 6d.	..	36	8	0	
Ditto	322 lbs. at 2½d.	..	3	7	1	
Mutton	7,956 lbs. at 8d.	..	265	4	0	
Pork	7,105 lbs. at 7d.	..	207	4	7	
Potatoes	7,169 stones at 6d.	..	179	4	6	
Cabbages, Onions, Leeks, &c.	91	0	9	
						825 2 11

Carried forward	£7,316	12	6½
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*Annual Statement for 1870 of Receipts and
Dr.*

To Amount brought forward .. £9,835 19 9 £3,264 11

*Credit by Maintenance of Patients away on
trial previous to being discharged.*

Alston Union	£1 15 0
Brampton do.	7 12 6
Carlisle do.	20 2 4
Cockermouth do. ..	3 16 3
East Ward do.	12 2 0
Kendal do.	7 15 0
Penrith do.	11 5 0
Whitehaven do. ..	12 0 0
Wigton do.	7 8 7
Liverpool (Parish of) ..	3 2 0

86 18 8

9,749 1

To Mr. H. Dobinson, Treasurer of the Committee of
Visitors, amount of Expenditure on account of
Capital (see page 43) 239 19

Carried forward £13,253 11

*Payments on Account of the Asylum.**Gr.*

 By Amount brought forward £7,316 12 6½
Clothing.

Buttons	..	729 dozen	..	£3 8 6	
Boot Laces	..	5½ gross	..	3 8 0	
Camlet	..	132 yards	..	3 14 4½	
Canvas	..	243½ yards	..	5 17 11	
Chocolate Tick	..	201 yards	..	13 2 6	
Cloth	..	58 yards	..	6 6 0	
Clog Soles	..	179 ..	..	2 4 0	
Cotton Handkerchiefs	..	18 dozen	..	3 5 3	
Cotton Cord	..	6 lbs.	..	0 13 0	
Elastic	..	10 yards	..	0 10 0	
Felt Hats	..	9 dozen	..	8 2 0	
Flannel	..	1,106½ yards	..	49 18 10	
Fustian	..	88 yards	..	9 18 0	
Fleecy Wool	..	2 lbs.	..	0 9 4	
Grey Calico	..	1,015 yards	..	19 7 10½	
Knitting Cotton	..	62 lbs.	..	6 4 0	
Leather	..	1,007½ lbs.	..	95 13 4	
Muslin	..	143 yards	..	4 1 6	
Making Shoes	..	148 pairs	..	20 4 6	
Men's Cloth Jackets	..	124 ..	..	93 9 0	
Making Flannel Drawers	..	141 pairs	..	4 14 0	
Printed Cotton	..	1,628 yards	..	46 12 1	
Reels of Cotton & Twist	..	684 ..	..	6 15 9	
Sailcloth	..	84½ yards	..	9 17 2	
Shoemakers' Nails, Thread, &c.	..		..	5 3 5	
Stuff for Dresses	..	63 yards	..	3 12 2	
					<hr/>
Carried forward	..		..	£426 12 6	£7,316 12 6½

Annual Statement for 1870 of Receipts and
Dr.

To Amount brought forward	£13,253 11
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Carried forward	£13,253 11
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*Payments on Account of the Asylum.**£.*

 By Amount brought forward .. £426 12 6 £7,316 12 6½
Clothing continued.

By sundry articles of Clothing for Private

Patients	£2 18 7
Small Woollen Shawls 3 dozen ..	4 3 0
Sheeting Linen .. 783¾ yards ..	28 5 8½
Straw Bonnets .. 100	8 15 0
Striped Linsey .. 235½ yards ..	21 1 11
Stays 101 pairs ..	16 0 2
Stay Laces .. 6 gross ..	0 18 0
Trowsers 92 pairs ..	29 11 1
Thread 24 lbs. ..	3 4 0
Tapes 33 gross ..	5 1 4
Worsted and Yarn .. 318 lbs. ..	35 11 4
Winsey 34½ yards ..	1 19 6½
Waistcoats .. 112	30 12 4

 614 14 6
Necessaries.

By Blacking 14½ stones ..	3 6 4
Blacklead 13½ stones ..	4 2 3
Bath Bricks .. 2 gross ..	2 8 0
Blue 6 lbs. ..	0 6 0
Candles 14 lbs. ..	0 7 0
Coal 1,041 tons ..	579 12 6
Dubbin 2 stones ..	1 1 0
Gas Tapers .. 24 lbs. ..	4 19 0
House Cloth .. 379 yards ..	10 5 2
Matches 100 dozen boxes	4 2 0
Oil 42 gallons ..	9 19 0
Plate Powder .. 8 packets ..	0 8 0

 Carried forward £620 16 3 £7,931 7 0½

*Annual Statement for 1870 of Receipts and**D£.*

To Amount brought forward £13,253 11

Carried forward . .. £13,253 11

*Payments on Account of the Asylum.**£r.*

By Amount brought forward .. £620 16 3 £7,931 7 0½

Necessaries continued.

By Rubbing Stones	500 dozens	..	£7	5	10	
Soap (Hard)	554½ stones	..	98	14	9	
Soap (Soft)	264 stones	..	38	18	11	
Soda	264¼ stones	..	8	18	1½	
Starch	464½ lbs.	..	9	4	7½	
Sundries	0	1	3	
Whiting	18 stones	..	0	6	0	
			<hr/>			784 5 9

Surgery and Dispensary.

By Drugs, &c.	89	11	11
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Wine, Spirits, and Porter.

By Wine..	.. 176½ gallons	..	£122	10	0	
2 Spirits	.. 16 gallons	..	13	12	0	
4 Porter and Ale	882 gallons	..	78	1	6	
			<hr/>			214 3 6
			<hr/>			
Carried forward	.. ..	.. ..	£9,019	8	2½	

Annual Statement for 1870 of Receipts and
Dr.

To Amount brought forward £13,253 11

Carried forward £13,253 11

*Payments on Account of the Asylum.**£s.*

By Amount brought forward	£9,019	8	2½
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Furniture, Bedding, and Repairs.

Altering and Repairing Sewing Machine	£3	9	3
Brushes	19	16	0
Carpet	5	9	4
Crockery and Glass	25	9	10
Cocoa Matting and Mats	2	0	9
Dripping Tins	2	7	0
Dust Pans	0	18	0
E fringe, Dyed	0	15	11
Fire Irons	0	3	6
Feather Dusters	0	10	0
Gutta Percha Chambers	3	8	0
Interments	13	5	0
Ironmongery and Repairs	19	8	0½
Knives and Forks	1	6	0
Leather Cloth	5	14	0
Mattress Ticking	8	7	5
Mangling Cloths	1	5	6
Milk and other Tins	3	19	8
Mincing Machine	2	2	0
Repairing and Cleaning Clocks	3	10	0
Sheeting Linen	35	10	2
Shoemakers' Tools	1	10	4
Shovels	1	9	0
Sundries	1	15	10
Table Linen	17	16	0
Towelling	8	19	5
Sheet Tin	1	4	0
Upholstering	9	11	7
White Calico	1	10	6
Washing Tubs, Buckets, and Repairs	13	10	10
Wash Leathers and Sponges	1	12	0
	<hr/>		
		217	14 10½
Carried forward	£9,237	3	1

*Annual Statement for 1870 of Receipts and
Dr.*

To Amount brought forward £13,253 11

Carried forward £13,253 11

*Payments on Account of the Asylum.**£s.*

By Amount brought forward £9,237 3 1

Garden and Farm.

Wages	..	..	..	£123	10	0
Rates and Taxes	..	..	..	24	16	8
Cows	..	..	..	99	7	0
Sheep	..	..	..	262	7	9
Pigs	..	..	..	77	14	0
Oats	..	..	..	10	7	6
Straw	..	..	..	10	4	0
Indian Meal	..	..	..	17	19	2
Bran	..	..	..	0	15	0
Guano	..	..	..	40	8	6
Manure	..	..	..	42	11	10
Lime	..	..	..	10	19	0
Grass Seeds	..	..	..	3	0	10
Carrot, Turnip, and Rape Seed	..	..	..	2	7	2
Garden Seeds	..	..	..	3	5	2
Implements and Tools	..	..	..	6	10	2
Smith Work	..	..	..	2	3	6
Sheep Dipping Composition	..	..	..	0	6	0
Iron Work for Barrows	..	..	..	0	10	0
Slaughtering Cows	..	..	..	0	10	0
Medicine for Cattle	..	..	..	0	5	2
Tolls	..	..	..	0	4	0
Sundries	..	..	..	0	2	11
				<hr/>		
				740	5	4
				<hr/>		
Carried forward	..	..	..	£9,977	8	5

*Annual Statement for 1870 of Receipts and**Dr.*

To Amount brought forward	£13,253 11
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Carried forward	£13,253 11
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*Payments on Account of the Asylum.**&c.*

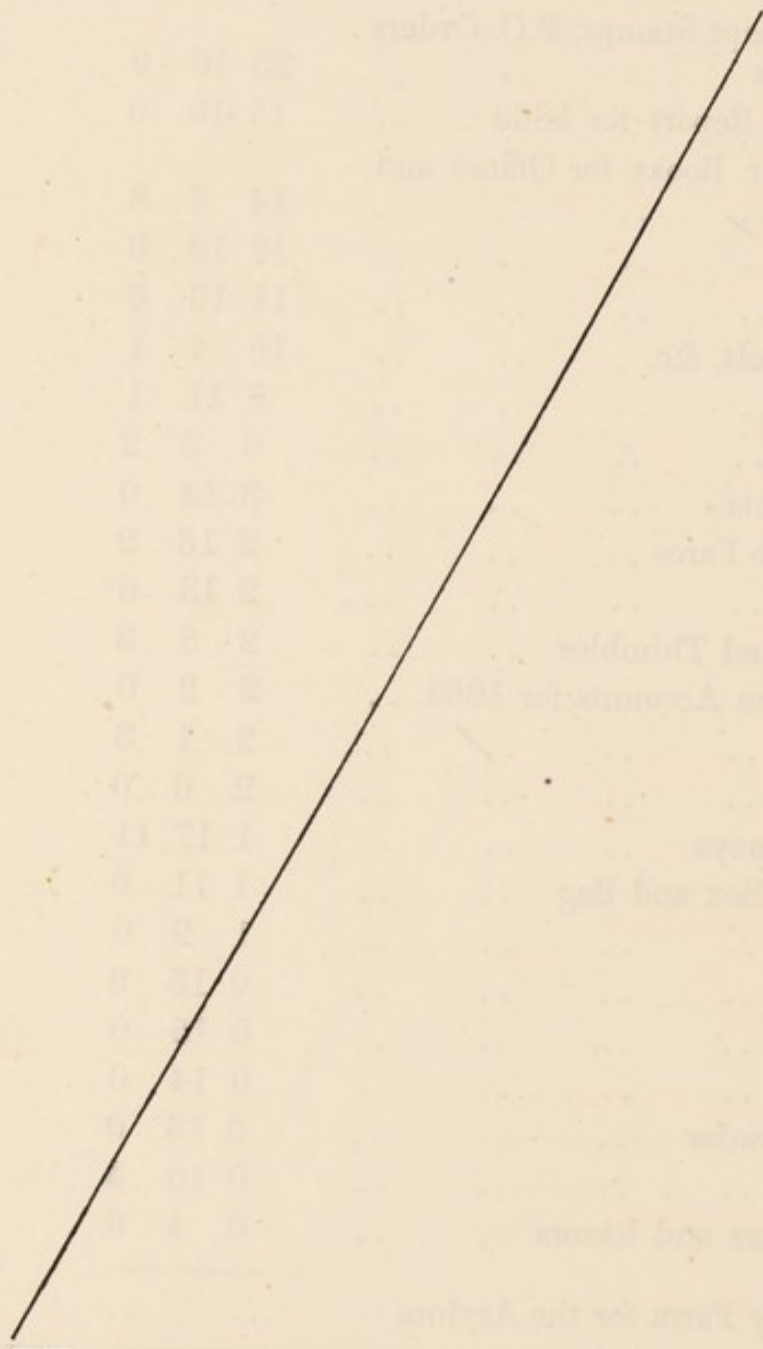
By Amount brought forward	£9,977	8	5
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Miscellaneous.

By Advertising	£32	7	6
Newspapers and Periodicals		28	4	4
Postage and Receipt Stamps, P.O. Orders and Telegrams	23	16	9
Printing Annual Report for 1869	..			15	10	6
Account and other Books for Offices and Wards	..	..	..	14	6	8
Fire Wood	..	..	..	12	10	0
Stationery	..	..	..	11	16	6
Carriage of Parcels, &c.	..	..		10	4	1
Escapes	..	..	..	6	11	1
Sundries	..	..	..	6	3	2
Removing Patients	..	..	..	3	14	0
Railway and Cab Fares	..	..	..	2	16	2
Amusements	..	..	..	2	13	0
Pins, Needles, and Thimbles	..	..		2	8	3
Auditing Asylum Accounts for 1869	..			2	2	0
Toll	..	..	..	2	1	3
Tobacco Pipes	..	..	..	2	0	0
Sweeping Chimneys	..	..	..	1	17	11
Rent of Letter Box and Bag	..	..		1	11	6
Spectacles	..	..	..	1	2	0
Canary Seed	..	..	..	0	15	9
House Duty	..	..	..	0	15	0
Cotton Waste	..	..	..	0	14	0
Disinfecting Powder	..	..	..	0	13	0
Corks	..	..	..	0	10	4
Grinding Scissors and Razors	..	..		0	4	6
				<hr/>		
					187	9 3
Carting done by Farm for the Asylum	..	..			16	3 0
				<hr/>		
Total Expenditure on Maintenance Account	..			£10,181	0	8
				<hr/>		
Carried forward	..	..	..	£10,181	0	8

*Annual Statement for 1870 of Receipts and
Dr.*

To Amount brought forward £13,253 11



£13,253 11 9

JONAS TODD,

Clerk and Steward.

*Payments on Account of the Asylum.**£r.*

By Amount brought forward £10,181 0 8

Capital Account.

By 13 Enamelled Iron Water Closets, labour and material, fitting-up 6 of the same, and altering 2 Baths	£49 10 11		
Alterations and Repairs to Engine at the Water Works	43 19 2		
Re-painting the Two Large Water Cisterns inside and out	29 3 11		
Furnace Bars, Castings and Repairs ..	18 3 3		
Iron Sewer Troughs	15 3 9		
36 Enamelled Iron Lavatory Basins ..	14 2 0		
Insurance	13 4 0		
Paint and Varnish	9 12 3		
Fencing	8 0 0		
Bricklayers' labour and material, re-setting Gas Retorts and repairing Furnaces ..	7 14 6		
Mason's labour and material for Drain in Female Airing Court, and other repairs	7 1 6		
Locks, Keys, &c.	6 18 9		
Bricklayer and Mason's labour fixing Fire-grates	3 19 3		
Leather Belts for Machinery	3 13 4		
Broken Stone for Roads	2 5 0		
Gas Fittings	1 15 2		
Flower Bulbs and Seeds	1 12 0		
Manure for Flower Borders	1 2 0		
Flower-Pots and Bass Mats	1 2 0		
Gasket	0 18 8		
Repairs to Gas Meter	0 18 0		
		239 19 5	
By Extra Charge for maintenance of Private and Out-County Patients, Paid to separate Account in anticipation of further Buildings being required		731 4 1	
By Balance in Treasurer's hands, 31st December, 1870	£2,061 0 3		
Ditto in Clerk's hands	40 7 4		
		2,101 7 7	
		<u>£13,253 11 9</u>	

*Examined and found correct 14th March, 1871.**J. R. DONALD, District Auditor.*

*Average Weekly Cost of Maintenance, Medicine, Clothing, and
Care of Patients during the year 1870.*

	s.	d.
Provisions	4	1 $\frac{9}{16}$
Clothing	0	7 $\frac{1}{16}$
Salaries and Wages	2	0 $\frac{11}{16}$
Necessaries (e.g., Fuel, Light, Washing, &c.) ..	0	9
Surgery and Dispensary	0	1
Wine, Spirits, and Porter	0	2 $\frac{7}{16}$
Furniture, Bedding, and Repairs	0	2 $\frac{8}{16}$
Garden and Farm	0	8 $\frac{7}{16}$
Miscellaneous	0	2 $\frac{2}{16}$
	<hr/>	
	8	10 $\frac{13}{16}$
Less Money received for Articles, Goods, and Produce Sold, Funeral Expenses, &c.	0	3 $\frac{2}{16}$
	<hr/>	
Total Average Weekly Cost per head	8	7 $\frac{11}{16}$ *
	<hr/>	

Daily Average Number of Patients resident—

Males, 218 $\frac{316}{385}$ Females, 183 $\frac{195}{385}$ Total, 402 $\frac{146}{385}$

*Weekly Charge for Maintenance, &c., of Pauper Patients from
Counties to which Asylum belongs:—*

	s.	d.
Quarter ending 25th March ..	8	9
„ „ June ..	8	9
„ „ September ..	8	9
„ „ December ..	8	9
Weekly Charge for Pauper Patients from other Counties	14	0
Do. do. for Private Patients ..	14	0

* Total average weekly cost per head for the County Asylums of England for 1869, 9s. 5d.

*Number of Patients in the Asylum on the 25th December
1870, and Unions to which chargeable.*

			Males.	Females.	Totals.
Alston Union	..	..	6	2	8
Bootle do.	..	..	6	1	7
Brampton do.	..	..	10	6	16
Carlisle do.	..	..	37	35	72
Cockermouth do.	..	..	26	14	40
East Ward do.	..	..	9	10	19
Kendal do.	..	..	23	17	40
Longtown do.	..	..	7	3	10
Penrith do.	..	..	20	15	35
West Ward do.	..	..	10	7	17
Whitehaven do.	..	..	28	24	52
Wigton do.	..	..	15	16	31
Chargeable to the County of Cumberland	..	..	8	6	14
Do. Westmorland	..	..	0	1	1
Do. Lancaster	..	..	2	4	6
Parish of Liverpool	..	..	2	11	13
Township of Manchester	..	..	5	7	12
Private Patients	..	..	8	10	18
			<hr/> 222	<hr/> 189	<hr/> 411

*Contract Prices of the Principal Articles of Provisions and
Necessaries supplied during the Year 1870.*

Description of Articles.				For the Quarters ending							
				25th March.		25th June.		25th Sept.		25th Dec.	
				s.	d.	s.	d.	s.	d.	s.	d.
Arrowroot	...	...	at per st.	14	0	14	0	14	0	14	0
Barley	...	...	"	1	6	1	6	1	6	1	6
Beef (forequarters)	...	...	"	6	9½	6	9½	6	4½	6	4½
Ditto Rounds	...	...	"	8	4	8	4	8	0	8	0
Ditto Houghs	...	...	"	2	4	2	4	2	6	2	6
Butter (salt)	...	...	"	16	0	14	0	12	6	16	6
Cheese (new milk)	...	...	"	9	6	9	0	8	6	8	6
Coffee	...	...	"	20	0	21	0	20	0	20	0
Currants	...	...	"	5	6	5	0	5	0	5	0
Flour (best seconds)	...	...	"	1	8	1	7½	1	8	1	9
Milk (new)	...	...	at per gal.	1	11	1	11	1	11	1	11
Mustard	...	...	lb.	1	6	1	6	1	6	1	6
Oatmeal	...	...	st.	1	10	1	10	1	10	1	10
Peas (split)	...	...	"	1	5½	1	5	1	5	1	5
Pepper	...	...	lb.	0	6	0	7	0	6	0	6
Raisins	...	...	st.	7	0	6	6	6	0	5	6
Rice	...	...	"	2	6	3	0	2	6	2	6
Saga	...	...	"	2	6	3	6	3	0	3	0
Salt	...	...	"	0	3	0	3	0	3	0	3
Snuff	...	...	lb.	3	6	3	9	3	6	3	4
Sugar (moist)	...	...	st.	5	0	4	8	4	6	3	10
Tobacco	...	...	lb.	3	4	3	5	3	4	3	4
Treacle	...	...	st.	2	0	2	3	1	10	1	10
Vinegar	...	...	gal.	2	6	2	8	2	6	2	6
Coal	...	...	ton	11	3	11	3	11	3	11	3
Soap (hard)	...	...	st.	3	9	3	7½	3	4½	3	3
Soap (soft)	...	...	"	3	0	3	0	3	0	2	9
Soda	...	...	"	0	8	0	9	0	8	0	8
Starch	...	...	"	5	6	5	0	5	6	5	6

Ordinary Diet Table.

		BR'KFAST.					DINNER.								SUPPER.					
		Bread.	Porridge.	Milk.	Coffee.	Butter.	Bread.	Meat Pie.	Cooked Meat free from Bone.	Dumpling.	Irish Stew.	Cooked Vegetables.	Potato-pot.	Broth.	Milk.	Bread.	Milk.	Tea.	Butter.	Cheese.
		oz	pt	pt	pt	oz	oz	oz	oz	oz	oz	oz	oz	pt	pt	oz	pt	pt	oz	oz
Sunday	Men.....	8	...	...	1	$\frac{1}{2}$	...	10	...	...	...	12	...	...	1	8	...	1	$\frac{1}{2}$	...
	Women . . .	6	...	...	1	$\frac{1}{2}$	...	9	...	...	...	9	...	...	$\frac{3}{4}$	6	...	1	$\frac{1}{2}$	...
Monday	Men.....	...	1	1	...	...	3	...	5	...	...	12	...	...	1	8	...	1	$\frac{1}{2}$	...
	Women . . .	6	...	...	1	$\frac{1}{2}$	2	...	4	...	...	9	...	...	$\frac{3}{4}$	6	...	1	$\frac{1}{2}$	...
Tuesday	Men.....	...	1	1	...	...	3	...	...	...	22	...	...	...	1	8	...	1	...	1 $\frac{1}{2}$
	Women . . .	6	...	...	1	$\frac{1}{2}$	2	...	...	...	18	...	...	...	$\frac{3}{4}$	6	...	1	...	1 $\frac{1}{2}$
Wednesday	Men.....	...	1	1	...	...	3	...	...	...	...	...	22	...	1	8	...	1	$\frac{1}{2}$	...
	Women . . .	6	...	...	1	$\frac{1}{2}$	2	...	...	...	...	...	18	...	$\frac{3}{4}$	6	...	1	$\frac{1}{2}$	...
Thursday	Men.....	...	1	1	...	...	3	...	5	...	...	12	...	...	1	8	...	1	$\frac{1}{2}$	...
	Women . . .	6	...	...	1	$\frac{1}{2}$	2	...	4	...	...	9	...	...	$\frac{3}{4}$	6	...	1	$\frac{1}{2}$	...
Friday	Men.....	...	1	1	...	...	...	...	...	16	...	...	...	...	1	8	...	1	...	1 $\frac{1}{2}$
	Women . . .	6	...	...	1	$\frac{1}{2}$	...	...	...	13	...	...	...	...	$\frac{3}{4}$	6	...	1	...	1 $\frac{1}{2}$
Saturday	Men.. . . .	...	1	1	...	...	7	...	...	...	...	...	...	1 $\frac{1}{2}$	...	8	1	...	$\frac{1}{2}$	...
	Women . . .	6	...	...	1	$\frac{1}{2}$	5	...	...	...	...	...	...	1 $\frac{1}{2}$	...	6	...	1	$\frac{1}{2}$	...

Extra Diet for Working-Patients, employed in the Kitchen and Laundry.

MEN.		WOMEN.		
Bread.	Cheese.	Bread.	Cheese.	Tea.
ounces.	ounces.	ounces.	ounces.	pints.
3	1	2	$\frac{3}{4}$	$\frac{1}{2}$

PORRIDGE—Six ounces of oatmeal to each pint.

COFFEE—For 100 persons, 20 oz. coffee, 10 oz. chicory, 4 lbs sugar, and 3 gallons of milk.

DUMPLING—For men, each 9 ounces flour, 1 ounce currants and raisins, one-sixth of an ounce of sugar, and two ounces dripping. For women, each 7 ounces flour, 1 ounce currants and raisins, one-sixth of an ounce of sugar, and 2 ounces dripping.

MEAT PIE—For men, each 6 ounces of uncooked meat free from bone, 3 ounces of flour, and 1 ounce dripping. For women, each 5 ounces of uncooked meat free from bone, 3 ounces of flour, 1 ounce of dripping, and seasoned to taste.

IRISH STEW—For 100 persons, 32lbs. of uncooked meat free from bone, 6 stones of peeled potatoes with a suitable dilution of water, and pepper and salt to suit taste.

POTATO-POT—For 100 persons same as Irish Stew.

BROTH—For 100 persons, 28 lbs. meat, (necks, houghs, &c.) including bone, 10 lbs. barley, liquor from stewed bones, thickened with bread crusts and vegetables, and seasoned to taste.

TEA—For 100 persons, 1 lb. tea, 4 lbs. sugar, and 2 gallons of milk.

Rations allowed to Attendants and Servants.

8lbs. bread, $\frac{1}{2}$ lb. butter, 1 lb. sugar, $\frac{3}{4}$ lb. cheese, 2 ounces tea, and 2 ounces coffee weekly; 1 quart of milk daily to males, and 3 gills to females. Cooked meat and vegetables each day for dinner, at discretion, with rice, sago, or fruit dumpling three days in the week.

Asylum Staff and Rate of Payment.

OFFICERS.

*T. S. Clouston, Esq., M.D., Medical Superintendent	...	...	...	£500	0	0	per annum
†W. B. Page, Esq., F.R.C.S., Consulting Medical Officer	...	...	...	1	1	0	per visit
J. A. Campbell, Esq., M.D., Assistant Medical Superintendent	...	...	...	100	0	0	per annum
†The Rev. J. F. Simpson, Chaplain	...	...	...	125	0	0	"
†H. Dobinson, Esq., Treasurer	...	...	...	20	0	0	"
Miss H. C. Groder, Matron	...	...	...	60	0	0	"
§Mr. Jonas Todd, Clerk and Steward	..	...	...	140	0	0	"

MALE ATTENDANTS AND SERVANTS.

Head Attendant	...	...	...	55	0	0	"
Four Attendants, each	...	...	...	35	0	0	"
One Attendant	...	...	...	33	0	0	"
Two Attendants, each	...	...	...	30	0	0	"
One Attendant	...	...	...	27	10	0	"
Five Attendants, each	...	...	...	25	0	0	"
†Night Attendant	...	...	...	58	5	10	"
Shoemaker Attendant	...	...	...	35	0	0	"
Tailor Attendant	...	...	...	31	0	0	"
Baker	...	...	...	35	0	0	"
‡House Porter	...	...	...	25	0	0	"
||Engineer, Gasman, and Lodge Keeper	...	...	...	1	10	0	per week
†Carpenter	...	...	...	1	7	6	"
†Two Stokers, each	...	...	...	0	17	0	"
Farm Bailiff	...	...	...	0	14	0	"
*†Gardener	...	...	...	0	18	0	"
†One Farm Labourer	...	...	...	0	15	0	"

FEMALE ATTENDANTS AND SERVANTS.

Head Attendant	...	...	...	25	0	0	per annum
Night Attendant	...	...	...	16	0	0	"
Two Attendants, each	...	...	...	20	0	0	"
One Attendant	...	...	...	19	0	0	"
Two Attendants, each	...	...	...	17	0	0	"
One Attendant	...	...	...	16	0	0	"
Four Attendants, each	...	...	...	15	0	0	"
Two Attendants, each	...	...	...	12	0	0	"
Nurse for Male Infirmary	...	...	...	18	0	0	"
Cook	...	...	...	26	0	0	"
Head Laundress	...	...	...	26	0	0	"
One Assistant ditto	..	...	...	15	0	0	"
One ditto ditto	..	...	...	14	0	0	"
House Maid	...	...	...	15	0	0	"
One Kitchen Maid	...	...	...	12	0	0	"
One Kitchen Maid	...	...	...	12	0	0	"

Marked *, with unfurnished house and garden, coal, gas, washing, and pony kept.

Marked †, neither boarded nor lodged.

Without a mark, boarded and lodged.

Marked ‡, boarded and lodged, and a suit of clothes in the year.

Marked ||, with house and garden.

Marked §, with part board and washing.

Marked *†, with vegetables.

MEDICAL APPENDIX.

Two Cases of Rheumatic Insanity.—As these two cases of this very rare and interesting form of insanity have been fully reported elsewhere* they need not be detailed here. They resembled each other most closely in origin, symptoms, and termination in recovery. In both cases there was an attack of rheumatism to begin with, the joints and not the heart being affected in each case. In the course of this attack in each case violent maniacal excitement came on suddenly, and at the same time the rheumatism of the joints began to disappear. The maniacal excitement in each case was accompanied by violent chorea, hallucinations of the senses, partial paralysis of motion in the legs, deadened reflex action, and impaired nutrition, showing that every part of the nervous system was affected as well as the brain. The temperature of the body in each was very high, this feverishness being the only one symptom common to the rheumatism to begin with, and the insanity that followed. The course of the symptoms in those cases make it extremely probable that they were typical examples of a special form of insanity, caused by a rheumatic inflammation of the connective tissue of the brain and spinal cord.

A Case of Hereditary Insanity.—W. A., admitted February 4, male, æt. 28, married for three years, can read and write, labourer. First attack. Father insane and in an asylum. Was sober and industrious. No cause of his insanity can be assigned except that his father was insane. Has been insane for eight months. His first symptoms of insanity seem to have been a sort of listless state of mind which his friends called depression, a carelessness about doing his work, and a want of interest in anything. His wife ran away, but it made no impression on him; he would not work, so was taken to the workhouse to prevent him starving. His symptoms got worse. On admission he was listless and careless about every thing; had a facile, silly manner; showed no sort of surprise at being brought here, or any curiosity as to where he had come to; smiled at nothing; his memory seemed good when he was asked questions, which he answered perfectly coherently; had no delusions; was a stout-built man, fair complexion, with a countenance not very intelligent, and not particularly vacuous. All the bodily functions

* Journal of Mental Science. July 1870.

and organs seemed healthy, except that the circulation appeared languid. Pulse 99, temp. 96°, weight 142lbs.

After coming here he gradually became less rational, was never sociable in the least degree, took no interest in anything, apparently, if he got food and tobacco, did anything he was told to do. After about a month he began to do impulsive aimless things, *e.g.*, get up suddenly and break dishes, or windows, or furniture. When asked about this could not explain it in any way. At times gets a little feverish, caused no doubt by masturbation; works on the farm regularly, and gets very stout; is slowly but gradually getting demented, though when roused to attend to anything he is still rational and coherent. Those were precisely his father's symptoms.

This is a good example of what is now generally recognized as Hereditary Insanity—of like begetting like. It seems as though in those cases the brain power, which in an ordinary human being is sufficient to last through life, gives way in youth from want of original force. It is a sort of premature dotage between 20 and 30, all the body except the brain being left healthy in its functions. Such a case may live to old age, though he has, as it were, died in his youth. It seems to be an example of the mode Nature takes to stop the reproduction of families strongly tainted with insanity. From the first there is no hope of cure.

A Case of General Paralysis caused by Excesses.—F. H., admitted February 26th, male, æt. 28, married, fair education, had been at various times a "vocalist," a circus rider, and latterly a clown in a theatre. First attack. No relatives insane. Insanity caused by intemperate habits, sexual excesses, and constant excitement; had been insane for a week. His first mental symptoms were intense excitement, and wild and extravagant notions as to his immense wealth; he was quite sleepless, restless, and would take nothing but brandy. He had got worse up to his removal from Manchester to the Asylum.

On admission he was furiously excited, jumped and danced about, shouted and gesticulated. All his delusions were of an exalted character. Memory almost gone; he was nearly incoherent; could scarcely answer questions; had delusions that he had £100,000, thousands of bottles of brandy, thousands of Arabian horses, which he wished at once to present to the Queen, &c. He was a slight-built, tall, wiry man, dark complexion, grey eyes, firm muscles, and little fat. His lips trembled slightly as he spoke, especially when he

talked fast and said long words. Tongue clean. Pulse 84, M. T. 98.6°, E. T. 99.4°, weight 123lbs., height 5ft. 11in. The tremulousness of the lips and tongue, the interference with articulation, especially of long words, and the extravagant delusions of wealth and grandeur, showed the case to be one of General Paralysis.

His acute excitement continued, and it was with great difficulty that he was got to take sufficient food. He was taken out into the fresh air for a few hours each day, and then had generally to be put into the padded room on account of the danger of leaving him in the ward with other patients. He never slept except under the influence of chloral, of which he required quantities varying from 40 grains up to 80 grains to cause sleep. It never reduced his temperature. When once asleep he slept the whole night; on one occasion slept for 15 hours after a drachm dose. It did not make his appetite any worse than it had been before he took it; but after taking it for eight nights running he became sick after taking food one morning. It was stopped for one night, when he never slept at all. He got the chloral next night, slept, and was not sick next morning. The excitement continued, and he died of exhaustion in about three weeks. The usual pathological appearances of General Paralysis were found in his brain at the *post-mortem* examination.

This case is in all respects the opposite of the last. It is an example of the most acute form of insanity, produced by the most apparent causes. His brain, which was probably a good and sound one that would have performed its functions well as long as the rest of the body if it had got proper treatment, was exhausted by excesses, poisoned by alcohol, and stimulated by excitement, and naturally it gave way. In the one case, by a mysterious law of hereditary transmission, the man's brain was from the first such that it could only work for so many years whatever were his habits; in the other case a certain mode of life as surely brought about mental disorder. Both cases are at present reckoned as "insanity." In reality they have but little in common.

Two Cases of Climacteric Insanity.—S. D., admitted 18th April, female, æt. 52, single, can't read or write, sempstress in Liverpool. First attack. No insanity in family. Predisposing cause: hard work for long hours with no exercise. Exciting cause: the partial and irregular return of menstruation after it had ceased for some time. Had been insane for about three days; had been much excited, jumping up, screaming, and imagining that

people were shouting at her in the streets, and would then become depressed, and imagine that her neighbours were accusing her of cruelty to nieces; had been sleepless and weak in body. On admission she was depressed, suspicious, and reserved; memory impaired; was coherent; could answer questions; expressed the delusions above mentioned, but said she felt not herself, and admitted that they might be "fancies." She was a little, careworn, thin-looking woman, with a suspicious nervous expression of face, dark complexion, grey eyes, muscularity slight, nervous system enfeebled and irritable. Said she felt her head queer; that when the menstruation came on again "it flew to her head." Bodily organs healthy. Pulse 84, M. T. 98°, E. T. 97.8°, weight 94lbs., height about 4ft. 9in.

After coming here she took food well, took regular exercise in the open air, required chloral gr. 20 at night for a few nights to procure sleep; was put on quinine and iron and stimulants; was settled enough to employ herself usefully for a part of the day in about a fortnight; gained half a stone in weight in three weeks, and was discharged recovered in two months.

J. S., admitted 6th June, female, æt. 43, widow, can't read or write, charwoman. First attack. No insanity in family. Was a quiet, industrious, sober woman, having four or five young children. She was in poor circumstances and had scarcely sufficient food, which, with hard work and her just ceasing to menstruate, were the predisposing causes of her malady. The exciting cause was her husband drowning himself, after which she became depressed and flighty. This was some months ago. Her actual insanity was only of about a week's duration. She began to fancy that people wanted to do her an injury, that they took her money from her, and talked nonsense about "wearing the crown." She became sleepless and lost her appetite. Those symptoms got worse, until she became acutely excited, making a row in the street; imagined that she heard voices telling her that people were going to poison her; never slept for four nights.

On admission was depressed and irritable looking, with a slightly excited manner when she spoke; memory fair, was coherent, could answer questions, and give on the whole a rational account of her illness, and knew there was something wrong with her, realizing that her notions about being poisoned, &c., must be "fancies"; said the drive and removal to a strange place seemed to have settled her mind. Is a thin, smart-looking woman, with an averagely intelligent face, light complexion, grey eyes,

muscularity under average, nervous system excitable, has felt heats over body, giddiness, and as if "movements" in head. Bodily organs healthy, tongue has a slight grey fur and is tremulous; appetite fair, menstruation almost ceased three months ago. Pulse 86, M. T. 97.6°, E. T. 97.6°, weight 100lbs., height 5ft.

From the moment she came in she began to improve, requiring no medical treatment whatever except some tonic medicines for her appetite. In a week she had begun to gain in weight, and was sleeping and eating well, employing herself industriously, feeling her head better, and becoming quite cheerful in manner. In three weeks she had gained half a stone in weight, and was discharged quite well in two months, having gained 19lbs. in weight.

These are two almost typical examples of the mild sort of insanity that occurs at the change of life in women. In both cases a change of circumstances, fresh air, and good food were all the remedies really needed. They are both examples of the sympathy of the brain with another organ, and the brain being ill-nourished its functions were upset. The want of any *fixed* excitement or depression, and want of *fixed* and real belief in the delusions or hallucinations, and the consciousness of the patient that she was ill, were very characteristic. In both cases if the patients had been in better circumstances they need not to have been to an asylum; but as it was, being both sent early, they at once recovered, instead of getting into a chronic state.

A Case of Senile Insanity.—J. W., admitted 21st May, male, æt. 74, married, nailor. First attack. Sister had an attack of insanity in old age. Was a sober, steady, hard-working man. Disease predisposed to by old age, caused by poverty and anxiety about want of work. Had been three weeks insane. Disease began by depression of mind, restlessness during the day, sleeplessness at night, and want of appetite. Got worse, until he was much excited, trying to choke his wife.

On admission he was very depressed, stupid, confused, and lethargic in mind; memory much impaired; was only very partially coherent; could just answer one or two simple questions when pressed. Is a pale, thin, dark-complexioned, pinched-looking old man, with grey hair, grey eyes, muscles small and flabby, nervous system weakened, arteries atheromatous at wrist; otherwise the bodily organs were normal. Tongue slightly furred, appetite bad. Pulse 84 weak, M. T. 97.2, E. T. 97°, weight 106lbs., height 5ft. 7in.

He was put to bed for the first few days, ordered beef tea and wine, and was carefully watched. He at first slept ill, but soon began to sleep well, and to eat also. He got quinine and iron, with plenty of nourishing food and stimulants, and became rational, coherent, and as well as one might expect a man so old to be, in six weeks, when he was discharged. He gained a stone in weight in that time.

This is an example of the more hopeful cases of Senile Insanity, caused by want of proper food. I do not think he would required sending here at all if he could have got proper food at home. Most cases of Senile Insanity are much more unsatisfactory. They remain long excited and very troublesome to manage, and at length get exhausted, or sink into a sort of dotage. This sort of insanity is probably caused by impaired nutrition of the brain from atheromatous arteries.

Acute Mania at Pubescence treated with large and continued doses of Chloral.—R. H., admitted 6th August, male, æt. 17, single. First attack, caused by over-training for a foot-race. Had been a week insane. His first symptom was simple excitement, which became more and more severe until he was in a state of acute mania. On admission he was most excited, talking continually, making grimaces, repeating unconnected sentences, whistling, spitting, and singing; incoherent; memory gone; could not answer any question correctly. Was an intelligent boyish-looking lad, in poor condition, face flushed, grey eyes, which were wild and sparkling; tongue furred; bodily organs healthy. Pulse 80, M. T. 98.6°, E. T. 97.2, weight 124lbs., height 5ft. 7in.

He was quite sleepless, and was getting worse, being most troublesome to manage. He was put on chloral, 30 grs. three times a day, which calmed his excitement and made him sleep at night. He took his food well. He became rational for five days after being six days in the house (when the chloral was stopped of course), but had a relapse, and was more excited than ever. He was put on chloral, 30 grs., which had now little effect, so it was increased to 40 grs. three times and sometimes four times a day for two months. He got at the same time quinine and iron, and shower baths in the morning. All this time he took his food well, and steadily increased in weight until he had gained 30lbs. The excitement ceased at the end of two months and he remained well, having quite altered in his appearance from a boy to a man.