

Sixteenth annual medical report : for the year 1861-62, ending July 4th presented to the Committee of Visitors, August 2nd, 1862 and to the Court of General Sessions, October, 1862 / Kent Lunatic Asylum, Barming Heath, Maidstone.

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KENT LUNATIC ASYLUM,

BARMING HEATH, MAIDSTONE.

THIRTIETH YEAR.

SIXTEENTH ANNUAL

MEDICAL REPORT,

FOR THE YEAR 1861-62, ENDING JULY 4TH.

Presented to the Committee of Visitors, August 2nd, 1862.

And to the Court of General Sessions, October, 1862.

MAIDSTONE:

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STATISTICAL TABLES.

TABLE [1.]

OF ALL THE

ADMISSIONS, DEATHS AND DISCHARGES.

	Admitted.			Died.			Recovered.			Relieved.			Not Improved.			Total Discharged.			Remaining.		
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.
From the opening of the Asylum on Jan. 1st, 1833, to July 4th, 1861.	1712	1679	3391	679	508	1187	575	553	1128	93	155	248	111	119	230	1458	1335	2793	254	344	598
During the last year ending July 4th, 1862.	92	95	187	27	26	53	34	31	65	6	15	21	1	1	2	68	73	141	278*	366	644
Total.....	1804	1774	3578	706	534	1240	609	584	1193	99	170	269	112	120	232	1526	1408	2934			

* One less than borne on the books, because of a death on July 4th, which is counted in the discharges.

TABLE II.

General Statement, comparative of the last Two Years.

	(Years ending)					
	July 1862.			July 1861.		
	M.	W.	T.	M.	W.	T.
Patients remaining from the last year	254	344	598	268	354	622
„ admitted since (yearly).....	92	95	187	76	77	153
„ Total under treatment	346	439	785	334	431	775
Deduct discharges and deaths.....	68	73	141	90	87	177
Remaining July 4th.....	278	366	644	254	344	598
The number remaining consisted of—						
Patients of contributing parishes...	231	301	532	211	287	498
Ditto chargeable to the County ...	12	14	26	13	11	24
Ditto of Boroughs in the County...	30	43	73	29	41	70
Ditto of Parishes in other Counties	5	8	13	1	5	6
Total	278	366	644	254	344	598
Average number daily resident .....	...	...	628.7	...	...	614.7
Highest number on any day ..	279	367	646	264	363	627
Lowest ditto	256	343	599	254	344	598
Number of beds in the Asylum	308	394	702	298	394	692
Patients employed highest number daily	197	206	403	194	231	425
Ditto, lowest ditto ...	186	148	334	190	145	335
Patients were discharged as under :						
Recovered	34	31	65	31	32	63
Relieved	6	15	21	4	14	18
Not improved	1	1	2	4	8	12
Dead	27	26	53	51	33	84
Total discharged ...	68	73	141	90	87	177
The admissions comprised :—						
Cases supposed to be the first attacks	72	73	145	56	52	108
Ditto repeated ditto	20	22	42	20	25	45
Total admissions...	92	95	187	76	77	153
Cases of re-admission into this Asylum	16	16	32	16	17	33

ADMISSIONS 1861-62.

Number:—Men 92; Women 95; Total 187.

TABLE III.

The admissions comprised:—	1861-62.			1860-61.		
	M.	W.	T.	M.	W.	T.
Patients from contributing parishes	79	82	161	64	66	130
„ charged to the County account ...	5	3	8	8	0	8
„ sent from Boroughs in Kent	8	10	18	4	11	15
Total	92	95	187	76	77	153
Of the above, there were sent from Gaols ..	5	3	8	7	0	7

TABLE IV.

Ages of the Patients admitted.

Decennial periods of age.	1861-62.			1860-61.		
	M.	W.	T.	M.	W.	T.
From 8 to 20 years of age	9	12	21	4	6	10
„ 20 „ 30 „	21	13	34	13	9	22
„ 30 „ 40 „	22	18	40	24	23	47
„ 40 „ 50 „	17	19	36	9	13	22
„ 50 „ 60 „	16	18	34	11	15	26
„ 60 „ 70 „	6	9	15	14	5	19
„ 70 „ 80 „ ... ..	...	5	5	1	6	7
„ 80 „ 90 „	1	...	1	...	..	...
„ 90 „ 92 „ ... ..	...	1	1	...	...	...
Total	92	95	187	76	77	153

TABLE V.

Forms of Disorder, Prospect of Recovery and Complications in the Cases Admitted.

Forms of Disorder.	Number Admitted.			Prospect.				Complications.					
	Apparently Curable.			Curability doubtful.		Not Curable.		Paralysis.		Epilepsy.			
M.	W.	T.	M.	W.	M.	W.	M.	W.	M.	W.			
Acute Mania...	25	21	46	19	16	2	...	4	4	...	...	...	1
ditto a potû ..	7	5	12	7	2	...	1	...	2	...	...	...	...
Chronic Mania ...	6	15	21	...	1	1	2	5	12	...	...	...	...
Occasional Mania, with or without Dementia ...	9	5	14	...	...	1	...	8	5	...	...	9	5
Melancholia ...	14	21	35	6	11	4	3	3	8	...	...	...	...
Dementia ..	24	11	35	1	...	...	...	23	11	14	4	3	2
Imbecility (of old age or other), or, Idiocy with Mania	3	12	15	...	...	...	...	3	12	...	...	1	1
Idiocy...	4	5	9	...	...	...	...	4	5	...	...	2	1
Total	92	95	187	33	30	8	6	50	60	14	4	15	10

DISCHARGES 1861-62.

Discharged :—Men 41 ; Women 47 ; Total 88.

TABLE VI.

	M.	W.	T.	M.	W.	T.
Thus :—						
Recovered	—	—	—	34	31	65
„ Absolutely at first	27	20	47			
„ After absence on trial.....	7	11	18			
Relieved	—	—	—	6	15	21
„ For removal to other Asylums.....	1	6	7			
„ Ditto Workhouses.....	3	5	8			
„ Ditto Home	2	4	6			
Not Improved	—	—	—	1	1	2
„ For removal to other Asylums ...	1	...	1			
„ Ditto Workhouses .....	...	...	...
„ Ditto Home ... ..	...	1	1			
Total	41	47	88	41	47	88

DEATHS 1861-62.

Died :—Men 27 ; Women 26 ; Total 53.

TABLE VII.

Ages at Death. Periods of Residence.

Number in each Decennium.				Time of Residence.			
	M.	W.	T.	Under 1 month	Under 1 year	Under 10 years	11 to 29 years
Under 20 years of age.....	—	2	2	1	...	1	...
From 20 to 30 years	3	1	4	2	...	2	...
„ 30 „ 40 „	5	5	10	1	4	5	...
„ 40 „ 50 „	5	1	6	1	2	3	...
„ 50 „ 60 „	6	7	13	1	4	2	6
„ 60 „ 70 „	6	4	10	1	2	2	5
„ 70 „ 80 „	2	5	7	1	1	4	1
At 92 „ .....	...	1	1	...	1	...	...
Total	27	26	53	8	14	19	12

TABLE VIII.
Causes of the Deaths.

Immediate Causes.	Number of Deaths.			Remote Causes (where any) acting in Combination.											
				Acute Mania.		Epilepsy. General Palsy.		Pleurisy. Pneumonia		Dis. of Kidneys & Bladder. Genl. Dropsy.		Dis. of Heart Old Age. Constitutl. Exhaustion		Old Hernia. Abscess.	
M.	W.	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	
General Paralysis	10	1	11	...	...	2	...	...	...	...	...	...	...	...	...
Partial ditto	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...
Exhaustion of Acute Mania	1	2	3	...	...	...	...	...	...	...	...	...	...	...	...
Ditto Melancholia	1	1	2	...	...	...	...	1	...	...	...	...	...	...	...
Pulmonary Consumption	2	8	10	...	...	...	...	...	1	...	...	...	...	...	...
Cancer of Breast (1) and Stomach (1)	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...
Disease of the Heart and Lungs	3	4	7	1	...	1	...	...	...	...	...	...	...	...	...
Epilepsy	1	2	3	...	...	...	...	...	...	...	...	...	...	...	...
Apoplexy. Chronic Meningitis	2	...	2	1	...	...	...	...	...	...	...	...	...	...	...
Suffocation in a fit of Epilepsy	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Suicide by Hanging .....	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...
Obstruction of the Bowels .....	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...
Chronic Peritonitis .....	...	1	1	...	...	...	...	...	...	...	...	...	...	...	1
Tumour of the Brain	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Tabes Mesenterica .....	...	1	1	...	...	...	...	1	...	...	...	...	...	...	...
Atrophy, cerebral and general	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Accidental Strangulation	1	...	1	...	...	1	...	...	...	...	...	...	...	...	...
Disease of Lungs, Stomach and Intestines	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Natural Decay .....	...	2	2	...	...	...	...	...	...	...	...	...	...	...	...
Total	27	26	53	2	...	4	1	2	2	2	...	3	4	1	1

Deaths in Mania and Melancholia, 23 ; in Dementia, 27 ; in Idiocy and Imbecility, 3.

TABLE IX.
Per centages of the Year and Comparison.

Per centage of :—	1861-2 Per Cent.	1860-1 Per Cent.	1859-60 Per Cent.	1858-9 Per Cent.	1857-8 Per Cent.	1856-7 Per Cent.	1855-6 Per Cent.
Admissions on number remaining at the end of the last Year .	31.27	24.59	28.50	27.25	30.11	26.37	34.1
Re-admissions on the Admissions of the Year	17.11	21.56	18.28	15.06	22.65	15.82	20.31
Repeated Attacks in the Admissions of the Year.....	22.45	29.41	26.28	36.74	33.70	26.58	38.02
Discharges and Deaths on ditto	75.40	115.65	95.42	97.59	95.58	98.73	81.2
Excess of Admissions on Discharges of the Year	32.62	0.	4.57	3.01	4.62	1.28	23.07
Recoveries on the Admissions † ditto.....	34.76	40.52	42.85	40.36	36.46	39.87	36.92
Ditto on the mean daily number	10.35	10.26	12.07	11.16	10.66	10.44	12.30
Ditto on the whole number treated	8.28	8.13	9.50	8.62	8.44	8.32	9.40
Deaths on the Admissions of the Year	28.34	54.90	32.57	29.51	39.77	48.10	31.77
Ditto on the mean daily number	8.43	13.68	9.17	8.16	11.63	12.60	10.57
Ditto on the whole number treated.....	6.75	10.83	7.22	6.32	9.20	10.03	8.07

† 1861-2 Recoveries on the 77 Admissions exclusive of the clearly incurable, (110 in number,) but including the doubtful cases, (see Table 5,) 84.41. Per Cent.

Explanation of Tables 10 and 11.

Begin at the centre, (diagonal,) and read to the left for Deaths ; to the right for all other Removals.

Each Year's deaths will be found in the total column, extreme left ; the Yearly Deaths from each Year's Admissions will be found summed up in the total line at the bottom.

The Removals, except Deaths, Year after Year, out of each Year's Admissions, will be found on the right in the last column but one ; and the Removals of any single Year may be found by casting up the particular column devoted to it.

KENT ASYLUM.

FIFTEENTH ANNUAL REPORT.

1860-61.

Having begun the year with 622 patients, we have concluded it with 598. This diminution is due, both to fewer Admissions and to a greater number of Discharges and Deaths.

With regard to the number of the Admissions, it is remarkable that they amounted to only about four-fifths of the average annual admissions of the preceding ten years; the average of those ten years being 188.7 per annum and the admissions of the past year 153.

Amongst Discharges, the Deaths have been numerous.

The Removals of all kinds, compared with the Admissions, are more than as 115 to 100. This is a very unusual statement to be enabled to make, and I have never had occasion to make a similar one before.

The Asylum population has been exceedingly steady; with an extreme variation of 29 patients, there has been an average daily number of nearly 615. The lowest number (598) is on the last day of the year. (Table 3.)

The evidence of Table 12, as to the whole public Lunacy of the County, might have been expected to show a decrease in correspondence with the lessened resort to the Asylum. That expectation would, however, be disappointed, since there is a net increase of 36 Lunatics, 7 of whom are chargeable to the contributing parishes. In the columns showing the disposal of the patients there will be found, decrease of the number in Licensed Houses, increase (small) of those in the County Asylum and, also, of those in Workhouses and in the care of friends. I presume the movements expressed in these four columns showing the disposal of the patients, may be regarded as in the right directions.

Table 2. Of all the patients remaining to us this year, who were admitted 10 or more years ago, 19 only have been removed in the period, and 143 remain; so slow is the conclusion in cases of long established mental disease. The annual rate of removal is inversely to the years of residence, 57, 49, 16, 14 and 9, representing the respective contributions from the latest, upwards to the earliest of the last five years.

Table 10. The causes of death display the very serious bodily diseases to which mental affections are more especially related. Forty-six patients, or over half, died from the gravest affections of the chief nervous centre; 34 more, or nearly the other half, from states of debility and diseases whose essence is constitutional feebleness; and four, or one twenty-first part of the whole, from accidents and common diseases together, half being due to each.

Table 11. The Recoveries have been forty and a half to the hundred of Admissions, and the Deaths ten and four-tenths to the hundred of the entire number under care and treatment.

GENERAL HEALTH. The inmates of the Asylum have again enjoyed good general health, excepting, of course, the many persons enfeebled by paralysis, or, by advanced age. Four cases, however, of fever occurred in December and January, in different and distant parts of the establishment, for which no cause was apparent or ascertainable; in one of these cases the termination was fatal through inflammation of the lungs. The fever had, in this instance, immediately supervened upon Acute Mania.

ESCAPES. In the whole year, eleven patients escaped and all were recaptured; six immediately, or in a few hours, four more within two days and one (a criminal) within eighteen days. Three of the above, of whom two were criminals, escaped at one time and in company, by picking locks.

SUDDEN DEATHS. There were three sudden deaths, all of which were reported to the Coroner. One was from apoplexy, one from suffocation in an epileptic fit and the third was caused by fracture of the skull through falling in an epileptic fit.

ACCIDENTS. There were six instances of fractured bones: thigh, twice; upper arm, once; rib, once; skull, once; small bone of toe, once. Four of these were purely accidental and two were occasioned by the patients having been pushed down by other patients.

A female patient was confined of a female child, which was artificially reared for four months and then sent home. The mother had been in a

state of complete stupidity from her admission to her confinement (2 months) and she remained the same for about another month thereafter. Then a total change in her state occurred; she became excited, assaulting persons and destroying things in the most pertinacious and violent manner and, during the subsequent five months to the end of the year, this state has continued. At the same time her ideas and language have been the most obscene, and her habits the most uncleanly imaginable. This completes the recital of all the untoward events of the year.

The Occupations and Amusements of the patients have proceeded as heretofore. Much profitable labour has been performed: profitable to the institution, as the successful cultivation of the land and the execution of much other useful work may show; profitable to many of the patients in occupying and engaging their time and attention, and in completing their cure and re-establishing their bodily health and vigour before returning to their homes. We are not of the opinion that an Asylum is merely a House of Industry under another name, but that it is a mixed establishment partaking of the characters of both. We do not, therefore, advocate or attempt the indiscriminate exaction of labour; but we expect work from the able, work in proportion to strength from the convalescent, a little work from the poor in body and spirit and less, or none from those whose physical and mental powers scarcely suffice, or, barely suffice without assistance, to enable them to vegetate and live. These expectations are not always gratified; for there are some, apparently able, who will not work, who feel wronged by their detention and refuse to conform either with our wishes, or, for the sake of the extra indulgences allowed for labour.

We have not lacked Amusements. Perhaps the most prized of all, is walking out into the country. Parties are constantly on the move, weather permitting, with this object. Some limit, however, is found necessary in order not to prejudice the work. Patients are frequently allowed, also, to pay short visits to their homes, to see their children or friends, when only a few miles distant. During hop-picking, the general desire to indulge the universal local taste is gratified by sending several parties into the neighbouring gardens every day.

Cricket is a never-failing favourite all through the season.

A general feast, with music, &c., is given every year after hay-harvest, in a meadow, in which considerably more than half the patients (the sexes mixed) are able to participate. Two years ago there was also a winter

entertainment, or ball, which was highly popular ; but the inconveniences of holding such a thing without a proper recreation room had so made themselves felt in a series of a dozen years, as to lead to its discontinuance.

Of books we have a Library of some hundreds of entertaining volumes and, considering the rural character of our patients, it is very fairly used. Then the "Illustrated London News," "All the year round," or its predecessor, "Household Words," the "Welcome Guest," "Chambers' Journal," "Sharpe's Magazine," four copies of each, have for years circulated regularly through the wards, as have also some other periodicals the publication of which has been discontinued, and many newspapers are received by patients from their friends.

Cards, draughts and other games fill up the measure of our ordinary amusements.

THE COMMISSIONERS IN LUNACY AND THE STATE OF THE ASYLUM.

At the end of 1860, a letter from the Lunacy Board, strongly condemning the Kent Asylum and addressed privately to the Chairman, came very unexpectedly ; and the more so as the two Commissioners who had visited at the end of November had in their minute left no remark displaying such general dissatisfaction, although still pointing out suggestions of their own which continued to be declined.

I have felt it a duty to procure the publication of the *whole* matter and will introduce it with extracts from the Journals of the Committee in order to show the course of business. Then the Commissioners' entry of November, the letter to the Chairman and the reply will follow. A paper of extracts from the Commissioners' November entry accompanied their letter to the Chairman. It is not necessary to print these twice over, but they will be distinguished by italics in the Commissioners' complete entry and, again, as headings to the replies upon the different subjects.

EXTRACTS FROM THE COMMITTEE JOURNALS.

At a Meeting held December 21, 1860,

"The Chairman read a letter and extracts from the Visiting Commissioners' Report which he had received from the Commissioners in
"Lunacy ;

" *Resolved* that the Visitors will take the same into consideration at a future meeting.

" *Ordered* that the extracts from the report be handed to the Superintendent, and he be requested to furnish a statement in answer to each point and submit the same to the next meeting."

REPORT TO THE COURT OF GENERAL SESSIONS.

"The Committee of Visitors have to report that they have received, through their Chairman, a letter from the Commissioners in Lunacy, accompanied by extracts from an entry made at the County Asylum by two members of their Board on the 27th November—such letter asserting the inferiority of the Asylum to similar establishments, and calling attention to the defects pointed out and the recommendations made by the Visiting Commissioners. The Visitors beg to submit this letter, with its accompanying extracts, to the Court."

At a Meeting held January 25, 1861,

" *Read* the Superintendent's statement in answer to the extracts of the Commissioners in Lunacy, on each point, and, also, his observations on the Ventilation.

" *Read* the Order of Sessions, ordering that the subject of the extracts of the entries made by the Commissioners in Lunacy on the state of the Asylum, be referred back to the Visitors for their consideration, and that they be requested to report to an adjournment of the Court thereon.

" *Read* and approved a Report on the subject and *Ordered* that the same be presented to the General Sessions."

At a Meeting held March 21, 1861, the above report was signed by all the Visitors present and ordered to be presented.

At a Meeting held May 4, 1861,

" *Read* the Order of the Court of General Sessions that a copy of the Special Report of the Visitors presented to the last Court, be forwarded by the Clerk of the Peace to the Commissioners in Lunacy and another copy to the Secretary of State for the Home Department."

At a Meeting held June 22, 1861,

"The Superintendent having applied for permission to publish in his next Annual Report, the Special Report, &c., presented to the General Sessions on the 16th April last,

" *Ordered* that permission be given to do so."

(A.) THE COMMISSIONERS' ENTRY, ENTIRE.

" Kent County Asylum,

" 27th November, 1860.

" This Asylum contains 624 patients, of whom 264 are men, and 360
 " are women. Of the whole number, 437 are in the original Asylum, and
 " 187 in the new building, and it is calculated that there are now vacan-
 " cies for 60 additional patients.

" Since our last visit in December 1859, 154 patients have been
 " admitted, 75 have been discharged, of whom 51 were recovered, and 69
 " have died, from the following causes—

" Paralysis, Epilepsy, and Apoplexy	34.
" Pulmonary Consumption	13
" Natural decay	1
" Exhaustion	7
" Disease of the Heart	4
" Suicides by hanging, and cutting throat . . .	2
" Other causes	8=69

" We have this day personally examined every patient, and have in-
 " spected all the wards.

(1) " *In the old building a large proportion of the women were in a state
 " of excitement and were very noisy. The men were more tranquil. We
 " cannot help attributing much of the restlessness which the women dis-
 " played, to the want of regular out-door exercise. In some of the wards
 " we found on enquiry, that the patients had not been out of doors for
 " several weeks.*

" *The only airing court available for patients in No. 13, and in the
 " lower wards is small, and quite inadequate for the purposes of exercise
 " and recreation.*

" Apparently no diminution has taken place in the number of strong
 " ticken dresses in use among the women who occupy the lower wards.
 " In the other wards, however, we noticed an improvement, and in the new
 " building the women were very well dressed. The clothing of the men
 " was on the whole good and sufficient.

" The bedding which consists of cocoa-nut fibre, was throughout clean,
 " and dry, but much of it was lumpy and required teasing.

(2) " *In answer to our enquiries we were informed that in some of the
 " lower wards, especially on the women's side, nearly every bed was wetted,
 " or wetted and dirtied every night; and according to the returns it*

*" appears, that last night, in the female wards, 60 beds, and in the male
wards 34 beds, were either wet or dirty. No change appears to have
taken place in the system of night watching and attendance.*

*" The wards throughout were well warmed, but the atmosphere was
close and oppressive, as all the windows were kept closely shut.*

*" We were glad to notice that a considerable number of chairs had been
supplied in the women's wards, and we would suggest that others suit-
able for infirm patients should also be introduced, so as to obviate the
necessity of tying such patients to prevent them from falling forward.*

*(3) " We would further suggest that washstands should be placed in the
dormitories, and in some of the single rooms. That more means of occu-
pation should be supplied in the wards on both sides, and that a greatly
increased stock of cheap books and illustrated periodicals should be dis-
tributed in every part of the Asylum. That the side airing court
belonging to the female wards be enlarged, and properly laid out, and
that a gravelled path be made round the land belonging to the Asylum,
so as to afford extended exercise to the patients.*

*" We also recommend that a solid roast or baked dinner be substituted
for one of the soup dinners now allowed.*

*" About 200 of the patients attend Chapel on Sunday, but prayers are
not read to them at any other time.*

*" It appears there has been no instance of mechanical restraint since the
last visit, but seclusion has been resorted to—a record of which is very
carefully kept—indeed the case-books and all other registers are kept
in a most creditable manner.*

(Signed), *" W. G. CAMPBELL, } Commissioners
 " S. GASKELL, } in Lunacy."*

(B.) THE COMMISSIONERS' LETTER TO THE CHAIRMAN.

" Office of the Commissioners in Lunacy,

" 19, Whitehall Place, S.W.,

19th December, 1860.

*" My Lord,—The Commissioners in Lunacy regret to have to bring
under your notice the accompanying copy of extracts from an entry made
at the Kent Asylum by two members of their Board, on the 27th ultimo.*

*" The entire condition of this Asylum at present is so inferior to that of
other similar establishments, and is indeed so very far below the average*

“ state of such institutions throughout the kingdom, that the Commissioners
 “ are obliged to make this appeal through your Lordship to the Committee
 “ of Visitors, in the hope of obtaining the necessary attention to the defects
 “ pointed out, and the recommendations made by the Visiting Commis-
 “ sioners.

“ I have the honour to be,

“ My Lord,

“ Your obedient Servant,

“ JOHN FORSTER, Secretary.

“ The Earl of Romney,

“ Chairman of the Committee of Visitors, Kent County Asylum.”

(C.) THE VISITORS' REPLY.

“ The Committee propose first to notice in detail the above extracts,*
 “ and then to make some general observations upon the whole subject.

“ Extract No. 1.

“ *In the old building a large proportion of the women were in a state
 “ of excitement and were very noisy. The men were more tranquil.
 “ We cannot help attributing much of the restlessness which the women
 “ displayed to the want of regular out-door exercise. In some of the
 “ wards we found on enquiry that the patients had not been out
 “ of doors for several weeks. The only airing court available for patients
 “ in No. 13 and in the lower wards, is small and quite inadequate for
 “ the purposes of exercise and recreation.*

“ A large proportion of the women is here declared to be in a state of
 “ excitement and very noisy, and the fact is mainly attributed to the want
 “ of regular out-door exercise. The two upper floors contain 157 women
 “ who have good and ample airing ground on the south front, of which
 “ regular use is made whenever the state of the weather permits. These
 “ women form two-thirds, which must be admitted to be a large proportion
 “ of the whole number in that building; therefore, their restlessness, if
 “ existing at all, cannot be imputed to want of out-door exercise.

“ Of the 87 women on the ground floor, 49 are paralyzed, or so feeble as
 “ to be incapable of taking out-door exercise in winter, except in the
 “ finest weather; the remaining 38 are refractory patients who have the

* Distinguished by italics in the Commissioners' entry, p.p. 22 and 23.

“ use of the airing ground which the Commissioners describe as small and
 “ quite inadequate; the fact being, that its size is amply sufficient for them.
 “ Being, however, on the north side of the building, it is cold and un-
 “ sheltered and, from this cause, is less often used than the front ground.

“ The men are reported to be more tranquil. This, as a rule, invariably
 “ is the case in such institutions. Moreover, there are 100 more women
 “ in the Asylum than men and, therefore, a larger gross number among
 “ them of noisy cases.

“ But the *apparent* excess of noise and excitement is to be explained by
 “ a fact, which could scarcely have escaped the notice of the Commissioners,
 “ had their object been to make a fair and impartial report. There are
 “ two separate buildings, the smaller being filled by draughting into it
 “ from the larger, quiet cases only. From the women in the upper wards
 “ of the old building, 95 quiet cases have been draughted into the new
 “ building, and 40 more into a ward set apart for laundry and kitchen
 “ workers; and as no noisy patients are put into the new building, or, with
 “ the workers, it is clear that the remaining 157 contain all the noisy
 “ patients who would, under other circumstances, be distributed among
 “ the whole 292.

“ The Commissioners remark upon the excess of noise in one building
 “ but leave unnoticed the entire absence of it in the other.

Extract No. 2.

“ *In answer to our enquiries, we were informed that in some of the*
 “ *lower wards, especially on the women's side, nearly every bed was*
 “ *wetted, or wetted and dirtied, every night; and, according to the*
 “ *returns, it appears that last night, in the female wards 60 beds, and in*
 “ *the male wards 34 beds, were either wet or dirty. No change appears*
 “ *to have taken place in the system of night watching and attendance.*

“ On the night of November 26th (the one preceding the visit of the
 “ Commissioners) in the 5 wards on the women's ground floor, containing
 “ the worst cases, there were 86 patients, of whose beds 45 only were wet,
 “ or dirty, and this is a fair general average. This tells somewhat against
 “ the general assertion in the above extract. Here, again, the Commis-
 “ sioners take no notice of the circumstance that there were, on the same
 “ night, 187 patients in the other building, of whom 2, only, were wet, and
 “ they were epileptic children. These habits are inseparable from insanity.
 “ The proposed remedy of rousing up every patient at short intervals
 “ throughout the night, as recommended by one of the Commissioners,

“ Mr. Gaskell, in the year 1857, received the most attentive consideration
 “ of the Visitors at the time, and was very fully treated of in a report
 “ made upon it by Dr. Huxley, at their desire, in which he detailed ex-
 “ periments, made suggestions and produced the opinions of the Superin-
 “ tendents of two large County Asylums, Colney Hatch and Devon. The
 “ result was the unanimous rejection of the plan by the Visitors, as
 “ visionary, cruel and, in many other respects, highly objectionable; for,
 “ even supposing the number of such cases might thereby be slightly
 “ diminished, the comfort of the patient and the prospect of cure would,
 “ in all cases, be reduced and, in many cases, the length of days of the
 “ patient be shortened by continual interruption of sleep.

“ The returns made of the number of dirty cases in different Asylums
 “ cannot be admitted as indisputable evidence upon this point. In the
 “ Kent Asylum, where the vain pretence of preventing dirty habits is not
 “ professed, it is the interest of the attendants to magnify their own
 “ labours by showing how great is the number of dirty patients under
 “ their care; and the most trifling deviation from strict cleanliness is put
 “ down as an instance of dirty habits. But, in an Asylum where the
 “ Superintendent believes in the possibility of prevention, his opinions are
 “ known, and it becomes the interest of the attendant to be very lenient
 “ in his construction of what are dirty practices; for, if he returns many
 “ patients as of dirty habits, he is liable to blame for carelessness and neg-
 “ lect of the duty of rousing them up.

“ The most careful consideration which they could give to the whole
 “ subject, has convinced the Visitors that the proposed remedy would be
 “ found in its results far worse than the evil it professed to remove.
 “ Instead of vainly attempting to prevent dirty habits, they deal with
 “ them as unavoidable symptoms of disease; and have accordingly estab-
 “ lished a very efficient system of cleansing, which enables them to meet
 “ the difficulty in a satisfactory manner, and without either worrying
 “ the patients, or diminishing the cleanliness or comfort of their beds.
 “ This is proved by the remark of the Commissioners, ‘that the bedding
 “ ‘which consists of cocoa-nut fibre was throughout clean and dry, but
 “ ‘much of it was lumpy and required teasing.’ The lumpy state of the
 “ fibre is accidental, depending upon the diligence of the patients in picking
 “ it properly. That it was ‘clean and dry throughout’ proves that, if
 “ dirty habits are not prevented, the patients, on the other hand, are
 “ neither worried nor neglected.”

Extract No. 3.

" We would further suggest that washstands should be placed in the dormitories and in some of the single rooms. That more means of occupation should be supplied in the wards on both sides, and that a greatly increased stock of cheap books and illustrated periodicals should be distributed in every part of the Asylum. That the side airing courts belonging to the female wards, be enlarged and properly laid out, and that a gravelled path be made round the land belonging to the Asylum, so as to afford extended exercise to the patients.

" But for this extract, it might have been supposed obvious to every one capable of reflection that, in such an institution, it was desirable to avoid, as much as possible, light, moveable pieces of furniture. With this impression, well-arranged lavatories, supplied with water, have been fixed, in the original building in 6 out of 10 wards on the women's side, and in 7 out of 11 wards on the men's side, and in every ward, without exception, in the additional building.

" There is, also, in every ward throughout both buildings, a sink supplied with hot and cold water. By this arrangement, 331 women out of 394 are provided with good lavatories, and the remaining 63, being the worst cases on the ground floor, are provided with sinks, affording better accommodation for washing than most of them have been accustomed to in their own homes.

" The suggestion ' that more means of occupation should be supplied in ' the wards ' was uncalled for, as it has been a subject upon which the attention of the Visitors has been most anxiously bestowed. The extent to which occupation can be found for the inmates of an Asylum does not depend upon their number, but upon their previous occupations and habits, and upon their degree of intelligence and capability of receiving instruction. A superficial enquirer whose prejudices permit him to examine a question from one point of view only, may visit the Surrey Asylum and find hundreds employed, and thence proceed to the Kent Asylum and find only scores employed; upon which he jumps to the conclusion that Surrey is deserving of all praise and Kent of all blame, and reports accordingly. An unprejudiced person, however, looks below the surface and forbears to express an opinion until he has made enquiry into the circumstances of the case.

" He learns from his enquiries that a large proportion of the inmates of the Surrey Asylum are Mechanics, and of the Kent Asylum, Agri-

“culturists; which at once accounts to him for the difference in the
 “numbers employed at each Asylum, as it is, clearly, more easy to find
 “in-door occupation for mechanics than for agriculturists.

“There is always an ample supply of Books and Periodicals kept in the
 “Asylum; which, however, is liable to decrease by wear and tear and
 “losses and, accordingly, as had frequently been done before, an order
 “was made 17 days before the date of the Commissioners’ visit for sup-
 “plying the deficiencies.

“As to the side Airing-ground (measuring 130 feet by 60 feet) and in-
 “tended for not more than 60 patients, its enlargement is not necessary;
 “and, if it were desirable, would be difficult, being surrounded on three
 “sides by roads, and on the fourth by the Reservoir. In Summer, these
 “patients have the use of another ground (measuring 180 feet by 120
 “feet) which, having a North aspect, is very desirable for the shade it
 “affords in hot weather. The Visitors have, after much consideration,
 “adopted a plan by which an additional airing ground with a South
 “aspect, will be provided for the infirm and feeble patients of the ground
 “floor on the women’s side, which will relieve the other two grounds, at
 “all times, of at least 20, and will obviate by its aspect the only objection
 “which really attaches to the present ground.

“The concluding suggestion to make a gravelled walk round the whole
 “of the land belonging to the Asylum (*i. e.* 60 acres) would, if carried
 “out, entail not only the expense of a new walk of a mile and a third in
 “length, but probably of a close fence against the public of almost equal
 “extent and, possibly, of an increase in the number of attendants. The
 “Visitors see no reason whatever for incurring such an expense to gain
 “an object which is not required, and the advantage of which would be
 “very questionable.

“Another entry appears in the book at the Asylum, but as it was not
 “forwarded with the rest to the Chairman, it may possibly have occurred
 “to the Commissioners to be imprudent to give it further publicity. ‘The
 “wards throughout were well warmed, but the atmosphere was close
 “and oppressive as all the windows were kept closely shut.’

“It might have been supposed that the Commissioners having made
 “periodical visits to the Asylum during the last 10 or 11 years, would
 “have made themselves acquainted with the principles upon which the
 “System of Ventilation is conducted; but such appears not to have been
 “the case. The system, which has worked in a most satisfactory manner,

“ was introduced by the late Mr. Sylvester and may be thus briefly
 “ described: main channels of the requisite size introduce fresh air
 “ (warmed, or, not, according to the season) into the body of every ward,
 “ and a flue passes from each sleeping room into a main flue which termi-
 “ nates in a lofty shaft, wherein a strong draught, created by a furnace,
 “ draws off the foul air and discharges it into the open atmosphere above
 “ the building.

“ It will thus appear that the process of Ventilation, and that of
 “ Warming, go on simultaneously, the foul air drawn off being continually
 “ replaced by warmed fresh air; and it is clear that both processes would
 “ be impeded by open windows, for the air from the windows would feed
 “ the flues in the bedrooms taking the place of so much of the general air
 “ in the body of the ward, all of which ought to be removed; and in exact
 “ proportion to the quantity which actually is removed, will be the
 “ quantity of warmed fresh air supplied by the main channels. The
 “ result of this system is so satisfactory that the Visitors, who make 50
 “ visits for every one made by the Commissioners, have constantly
 “ remarked its successful working. Indeed, except upon the ground floor,
 “ reserved for the worst class of patients, among whom no degree of vigi-
 “ lance can prevent occasional acts offensive to the senses, the atmosphere
 “ of a private house can scarcely be more free from oppressive closeness
 “ than that of the Asylum.

“ Could anything be more open to objection than that the atmos-
 “ phere of a building of this description, containing hundreds of
 “ patients should, in such weather as has prevailed in the present winter,
 “ depend for its purity upon the practice of opening and shutting
 “ windows?”

“ The fact of the close atmosphere is emphatically denied, and the
 “ observation upon the closed windows does not reflect credit upon the
 “ intelligence of the Visiting Commissioners.”

“ The Committee of Visitors, having now answered, as they hope,
 “ effectually, the observations of the Commissioners, feel it due to them-
 “ selves and to this Court by which they were appointed, to protest in the
 “ strongest manner, against the unwarrantable course adopted by the
 “ Commissioners, as well as the offensive tone by which it is accompanied.
 “ The Acts of Parliament under which the Commissioners hold their office,
 “ accurately define their duties and limit them to Visiting and Enquiry

" only ; but though authority is only given to visit and enquire, it follows
 " necessarily that having visited they would make a report ; there, how-
 " ever, their functions cease."

" They are not even *authorized to suggest*, much less to *dictate arbi-*
 " *trarily* and (as they have done in the present instance) to follow up their
 " dictation by a sweeping condemnation of an Asylum whose Visitors
 " decline to adopt and act upon theories which they honestly believe to be
 " visionary and mischievous. In such a case as this, involving so many
 " important interests, plain speaking becomes an imperative duty. The
 " Commissioners clearly aim at obtaining the actual direction of the
 " Asylum, to which, it has been already shown, under the Act of Parlia-
 " ment they have not the shadow of a claim. Having unjustifiably
 " exceeded their commission, they are angry because the Visitors decline
 " to recognize their authority in their usurped position. Considering the
 " subject from one point of view only, the Commissioners expend all their
 " energies upon the presumed comforts and luxuries of the patients. The
 " Visitors, on the other hand, do not forget that they are in the position
 " of Stewards to the Rate-payers, and that the Asylum is an Institution
 " for Pauper patients ; and while they spare no expense to render it as
 " efficient as possible, bearing in mind the object for which it was estab-
 " lished, they consider it the reverse of kindness to surround the pauper
 " with comforts and luxuries to which he has never been accustomed, and
 " of which he would painfully feel the want should the recovery of his
 " reason enable them to restore him to his home.

" As to the imputed inferiority of the Asylum to other similar estab-
 " lishments, the Visitors fearlessly appeal to any competent and
 " unprejudiced tribunal. They, and not the Commissioners, are respon-
 " sible for its condition ; and as long as it may be the pleasure of the
 " Court to continue to place confidence in them, they will not fail to
 " exercise in its management that discretionary power with which the
 " law has invested them, and will invariably oppose the interference of
 " arbitrary and illegal authority, from whatever quarter it may be brought
 " to bear upon them.

" Dated the 25th day of January, 1861.

(Signed) " ROMNEY,	" AMHERST,
" EDWARD BURTON,	" C. R. C. PETLEY,
" T. H. DAY,	" FRANCIS J. STAPLETON,
" JOHN SAVAGE,	" HENRY S. JONES MARSHAM,
" JACOB J. MARSHAM,	" GEORGE B. MOORE."

SUPERINTENDENT'S REMARKS.

The foregoing correspondence is re-produced here as a matter of public interest in this County, and as, perhaps, able to afford a public example of wider utility.

It displays the encroaching spirit of the Commissioners ; and it may be affirmed, by those who possess the necessary knowledge as to how far the Kent Asylum efficiently discharges its proper duties, that the Commissioners have not shown themselves superior to the weakness of allowing angry personal feeling to govern them ; but have let the sense of opposition—rightful opposition, however—to some of their favourite schemes, mislead them into pronouncing a wide and, certainly, not just condemnation. The blame is not ours but theirs.

For myself, I believe I should be entitled to complain of the whole proceeding. Labours and a life like those of any Superintendent, faithfully performed and spent, should surely meet with a more discerning and truer consideration.

By persons on the spot, the spirit of the proceeding is well understood ; and we see with astonishment and regret that a fully efficient public establishment may be wrongfully underrated, because of an overweening official pride which has been checked and, so, disappointed.

The spectacles through which the Commissioners look at things, limit their discernment to the shameful “night-rousing” practice,* to walks round the estate, to the ‘tiring down’ of excited patients, to settees and arm-chairs, to articles of the toilette, &c. If they see not these pet objects, the Asylum picture is a dark one to them.

But, surely, the Commissioners have entered upon an unwise course since they began (for it was not always so) to recommend and, even, to insist upon particular details of treatment. In pushing their *nostrums* they have mistaken their function, whilst the attempt to overbear all other private judgment in favour of their own particular views, is tyrannical in the present state of our legal relation.

* The practice of awakening patients of dirty habits, from their sleep, four times in the course of the night, in order to defeat, by anticipation, their inattention to the calls of nature. A pretty medical doctrine, ignoring the value of sleep in the treatment of Insanity ; for it must be stated that the recommendation of this practice is wholesale, and makes no distinction between curable and incurable. To avoid acting to the prejudice of cure might be something, even if we were to be careless of the peace, comfort and length of days of those who are dependent upon us, not for their cure, (which may be unattainable,) but merely for their proper care.

So false a principle of action in no way serves the public, but produces collision and the loss of the proper dignity of the Commission and, consequently, of that respect with which they would be regarded if they were governed by the theory of their true position.

They are not Committees of Visitors; they are not Superintendents; their function is judicial but not bound by rules of law. They might, at least as easily as other judges, do justice to all. It would not be difficult to show how two members of the Commission have, in the course of the last few years, got 'wrong' with the Kent Asylum. It is by the representation and at the instance of these two individuals that the 'Board' has been set in motion, and the letter to our Chairman has followed. Surely they cannot be doing well; for have not the public a right to expect that an Imperial Commission shall not be put to disparagement, for a mistaken ambition, by some of its own members?

When we are assailed it is proper to make complete our defence. I, therefore, subjoin without apology, the main parts of the letter* of a patient (a man between 50 and 60 years of age) to his mother, which will show what opinion another description of judge of the Asylum forms of the comfort and treatment of the patients; which are surely the whole end and aim of its establishment. Voluntary expressions of opinion equally gratifying and equally just, are common enough from patients writing home, but it never occurred to me before as being worth while to advert to them as mere 'puffs' which, under other circumstances, they might have appeared to be.

For the same reason, the written reports of the Visiting Commissioners,

" Kent Asylum, Barming Heath, July 18, 1861.

* " My dear Mother,—I write these few lines to you, hoping that by the blessing of God, they may find you all well, as thank God they leave me a good deal better than I was when I came here, though I am very weak and low at present, but thank God I have no more fits since I have been here, and the treatment that I have received since I have been here has been better than I expected to find, for my Doctors and my Keepers they have acted towards me with the greatest kindness. And the inmates of the Asylum seem to be more sensible, and try to help one Another, than they Did in the Union. And the provisions which we have here are a great deal better than they are in the Union, And more of them. And I think the Air seems to suit me better, for I have a better appetite than I had, And thank God I have plenty to eat and Drink. And I get a walk out in the Air three or four hours every Day, And that I find does me good at present. My Dear Mother, I am very sorry I have caused you so much trouble, &c. But thank God I Don't want for anything here, without it is A trifle to get me A Little Extra Tobacco, &c. You can come and see me any day of the week when you think proper, &c. You can write me a line or two to let me know how you all are, &c.

W. J."

every year, have not been publicly produced; but now I have made a series of extracts from these reports,* extending over the last sixteen years; and I have divided them into two series, or, periods, an arrangement which distinctly shows that all was well until certain of the Commissioners in 1856 began to break their bounds and try to take the initiative with their suggestions. It will also be noticed that prior to 1856 we hear no remark about 'excitement' amongst the female patients. By that time the additional building had been opened a few years and was fully tenanted, and our system of draughting quiet patients into it had naturally told upon the tranquility of the women in the upper wards of the original building.

JAMES E. HUXLEY, M.D.,

July, 1861.

SUPERINTENDENT.

* Extracts from the written opinions upon the Kent Asylum, of the Commissioners in Lunacy, since the Lunacy Act, 1845.

(1.) September 30, 1845, by Commissioners Procter and Turner. "We have had great satisfaction in observing the cleanliness and excellent condition of the place. The patients appear to be very comfortable and kindly treated, and the whole reflects great credit on the Medical Superintendent and other authorities under whose care the Asylum is placed."

(2.) September 2, 1846, by Commissioners Mylne and Prichard. "We have spent the whole of the day in visiting and inspecting the Asylum. We have gone through the different wards or galleries, as well as the dormitories and single-bedded sleeping rooms, and found them all extremely clean and *well ventilated* and free from offensive odours."

"We have also seen all the patients With a few exceptions they were in a tranquil and comfortable state, and their *dress* and persons were *clean* and *neat*. Not one of them was under any mechanical coercion. *If we might venture* to suggest anything, it would be the addition to the library of some cheap and well-selected periodical literature of a light and amusing kind. The whole establishment appears to us to be in a *most satisfactory state*, and to reflect the greatest credit upon those to whom its management and superintendence are entrusted."

(3.) June 22, 1848, by Commissioners Procter and Prichard. "At the time of our visit almost all the patients (of both sexes) were out in the airing-grounds, or employed in the grounds. Since the last visit of the Commissioners about 250 volumes have been added to the library, and the airing grounds have been materially enlarged and altogether very much improved. The establishment is clean and *well ventilated*, and throughout in a *very satisfactory condition*."

(4.) December 15, 1848, by Commissioners Procter and Hume. "The House is clean and in *good condition*, and the patients were generally tranquil during the time of our visit. No one was under mechanical restraint."

(5.) March 4, 1850, by Commissioners Mylne and Gaskell. "The various rooms were remarkably clean, and the patients were in general *free from excitement* and in a healthy condition. There has been no epidemic prevalent in the Institution during the last year, and the present condition of the house in these respects is satisfactory . . . no one was under mechanical restraint, which we understand is very rarely employed. From the condition of the inmates it is manifest that the institution is under careful and active management."

(6.) January 16, 1851, by Commissioners Procter and Turner. "We found the wards throughout in a *very satisfactory* state, all being warm, clean and comfortable; and we *did not observe any offensive smell, even in the parts occupied by the worst class of patients*. We think this very creditable to the attendants themselves, and evidence of the active and careful supervision exercised throughout the establishment by the resident Medical Superintendent."

(7.) August 3, 1851, by Commissioners Mylne and Hume. "The house and its different apartments were in good order and extremely clean; and the patients generally were quiet, orderly and comfortable. There are now 537 patients in the Asylum, of whom 233 are males and 304 are females. Of these, about 140 (40 males and 100 females) are placed in the new building, *where they appear to be very comfortably lodged and accommodated*. The dress of the patients was *neat and good*, and their bedding also was of *good quality* and clean. We have made the various enquiries required by the statute with regard to the management as well as the condition of the Asylum; and the result of our enquiries has been *in all respects satisfactory*."

(8.) December 16, 1851, by Commissioners Gaskell and Campbell.

" We have personally examined all the inmates to-day, and found them
 " at the time of our visit *remarkably tranquil* and quite free from
 " mechanical restraint. The several galleries and wards were clean and
 " *well ventilated*, and the whole establishment in excellent order.

" *Altogether we have every reason to be satisfied with the condition of
 " the establishment."*

(9.) July 26, 1853, by Commissioners Procter and Gaskell. " We have
 " to-day seen the patients of both sexes, who were (*with some few ex-
 " ceptions*) *tranquil* at the time of our visit, and have inspected the wards
 " used by them, which were clean and in good order. Some new work-
 " shops have been recently erected, and " (new) " farm buildings are about
 " to be added to the establishment."

(10.) May 26, 1854, by Commissioners Procter and Hume. " Some
 " of the new farm buildings adverted to in the last entry of the Commis-
 " sioners have been erected and are now in use. The various galleries
 " and rooms appropriated to the patients are clean and *free from any
 " unpleasant odour*, and the patients (*with few exceptions*) *are tranquil*.
 " *The Asylum altogether is in a very creditable state."*

(11.) May 4, 1855, by Commissioners Turner and Procter. " We learn
 " on enquiry that 380 patients (178 males and 202 females) are employed
 " in various ways, and that 114 attended the Church Service last Sunday.

" Books, cards and other amusements are provided for the patients, some
 " of whom occasionally take exercise beyond the limits of the Asylum.

" The various wards are clean and *free from unpleasant odours*; and
 " the patients, *with some few exceptions amongst the females*, *were tranquil*
 " during our visit."

End of the first period, 1845-55.

(12.) June 27, 1856, by Commissioners Campbell and Gaskell. " The
 " old building contains 408, and the new building, 188 patients. We
 " have seen all the patients and examined their wards. Some of the
 " patients were *rather noisy and excited*, but no one was under instrumental
 " restraint or in seclusion. The patients were clean in their persons and
 " dress, and *all the wards were free from offensive odour*. The bedding
 " also was clean. After a careful inspection of the Asylum we recom-
 " mend :

" 1. That more furniture be placed in the wards—*i. e.* settees and
 " arm-chairs—and looking-glasses in the lavatories.

" 2. That the airing-courts be planted and the walks kept more neatly, especially on the women's side of the new building.

" 3. That the patients be afforded increased means for more extended exercise and occupation.

" 4. That the number of ticken dresses be diminished, and *that trousers be no longer used for women.*" (Absolutely?)

" 5. That better and more comfortable provision be made for the sick and feeble.

" 6. That the wire, &c., be removed from the windows.

" 7. That knives and forks of a better construction be gradually substituted for those made of bone, and that hair brushes be allowed in the wards.

" 8. That a *regular night-watch* be established and a list kept of the patients who wet their beds."

(Compare remarks of the same Commissioners, Dec. 16, 1851. Ante.)

(13.) November 27, 1857, by Commissioners Procter and Wilkes.

" We have to-day seen the patients and inspected their wards. In reference to the points adverted to in the last Commissioners' entry, we find on enquiry that some looking-glasses have been obtained for the lavatories; that hair brushes, have been provided; and that some metal knives* and spoons with prongs have been brought into use. We observed some arm-chairs in the wards; but *we beg to repeat* the recommendation of the last Visiting Commissioners, that more occupation and extended exercise should be ensured to the patients; that more settees and easy-chairs for the sick and infirm patients be provided; that more furniture of a convenient description be placed in the wards; and that endeavours be made to diminish the number of the ticken dresses. In reference to the dresses of the patients, we think both the sexes should be provided with *greater variety* of clothing. The supply of towelling ought to be increased. We have suggested that the attendants should use their exertions to induce, and if necessary teach the patients to wash and dress themselves and to keep their persons in good order. By the report of last night it appears that 93 patients were returned as being wet and dirty (*i. e.* 48 wet and 45 wet and dirty.) We are disposed to think that this large number would be materially diminished if the persons

* Steel knives and forks, sharp and in every respect of the ordinary pattern, had always been in use throughout the Additional Building for 208 patients, from its opening at Midsummer 1850.

“ appointed as night-nurses were exempted from all other duties, and their
 “ attention *enforced* to the subject. The number of wet and dirty patients
 “ of course comprises paralytics and epileptics.” (The pet “ turning-out ”
 plan again.) “ According to the present arrangements, there appear to
 “ to be only two wards on the female side which contain two nurses each ;
 “ the remaining sixteen wards having the benefit of only one nurse each.
 “ About the same proportion seems to exist on the male side of the Asylum.
 “ The alterations now about to be carried into effect, will, we think, to a
 “ certain extent remedy this defect, but we beg to urge upon the Com-
 “ mittee the expediency of adding to the staff of male and female
 “ attendants generally.” (If a ward had but one attendant, there were
 only 14 or 15 patients.)

“ The water-closets have in many wards been doubled in number, and
 “ they seem to act perfectly well and were quite free from unpleasant smell.
 “ The wards were also clean *and* (except a few rooms, owing to some fault
 “ or error in the drains) *quite sweet*. We think that the present labour
 “ of keeping the male wards clean and also the wear of the floors would
 “ be less if the patients wore slippers while they are in-doors.

“ The want of store rooms in each gallery is at present very apparent.
 “ This defect will be amended in the wards now about to undergo alter-
 “ ation, but the amendment will be only partial and ought to be extended
 “ (by some other means) to the rest of the establishment.

“ We examined in many instances the beds and bedding of the patients,
 “ which were clean ; but we think that it is very undesirable that coir
 “ (the present material) should be used.”* (Horse-hair or woollen flock
 is suggested instead. Coir has been used for 15 years. See entry of
 August, 1851.)

(14.) November 27, 1858, by Commissioners Lutwidge and Nairne.
 “ No patient has been subjected to mechanical restraint since the last visit.
 “ During that period the number of instances of seclusion have averaged
 “ 6 weekly.

“ The several wards and rooms, and the beds and bedding were, when
 “ we inspected them, clean and *generally free from offensive odours*.

“ The coir in some of the beds and bolsters of patients of dirty propen-
 “ sities was matted or in lumps. The ticks also, were in some instances
 “ insufficiently filled. As respects the class of patients last referred to,

* Why?

“ the practice is daily to change the ticks, which are always washed before they are dried.

“ There is no special arrangement for *night nursing*† by persons exclusively engaged for that duty ; which is, as hitherto, performed by the attendants in rotation from 10 o'clock at night till 6 in the morning.

“ At the time of our visit *many of the female inmates . . . were very noisy and much excited.*

“ In reference to the observations of the last Visiting Commissioners :

“ 1. The patients, generally, have access to the airing-grounds from “ 9 to 12 and 2 to 5 ” (and, it should have been added, in Summer, from 6 to 8 in the evening also) ; “ and they are taken out in parties for walks in the country.

“ 2. On the male side arm-chairs have been introduced for the sick, “ and on the female, excepting in the basement wards, chairs have been “ generally substituted for forms.” (In January 1860 the basement wards, also, were furnished with chairs in lieu of forms. By this continuation of the experiment, all the female wards without exception have had the forms exchanged for chairs.)

“ 3. In the old building fixed seats have been introduced in all the “ single rooms and associated dormitories.” (Not so. They were always there. Their absence would be the exception. The Commissioners may have seen some replaced.)

“ 4. The question of adding to the staff of attendants and nurses is “ under the consideration of the Committee.

“ Much progress has been made in carrying out the plans which have “ already been submitted for the consideration of the Board, having for “ their object the extension and improvement of the accommodation. We “ have no doubt that these when completed, will contribute materially to “ the comfort and benefit of the patients. *The arrangements for bathing and washing have been extended and improved, and appeared to us to be “ convenient and good.*”

(15.) December 20, 1859, by Commissioners Lutwidge and Gaskell. “ The Asylum, throughout, was, at the time of our inspection, very clean, “ and the atmosphere generally was pure and sufficiently warm.

“ As respects furniture, there appeared to us to be, in the several wards, “ an abundant supply of tables and, in the upper wards, of chairs.

† The complimentary alias for the turning-out plan.—See note, page 31.

" The clothing of the male patients appeared to be good, and the same observation applies generally to the females.

" The male patients, generally, at the time of our visit were tranquil and very orderly. Many of the female patients, in several wards of the old building, were much excited and noisy.

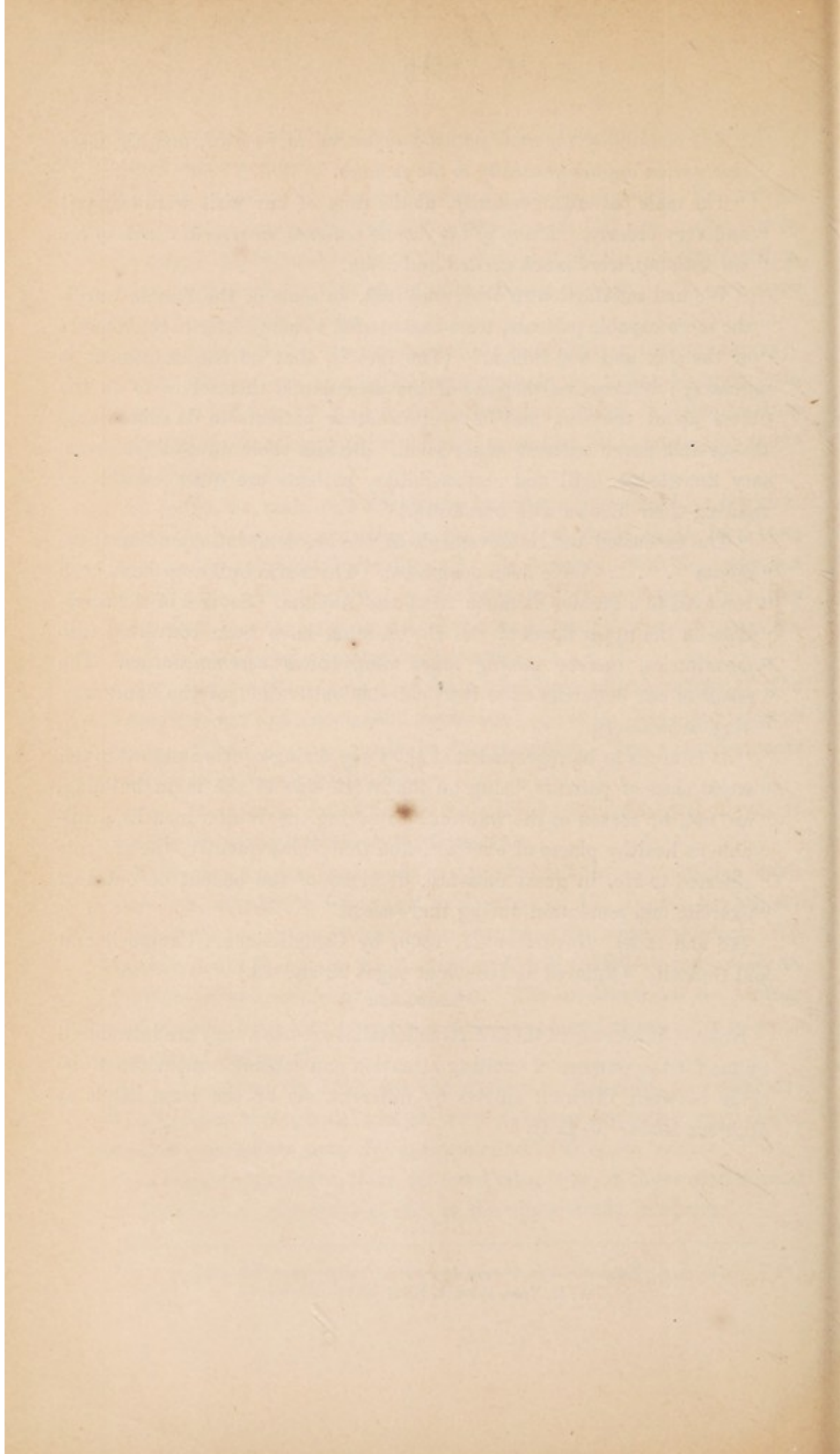
" We had satisfaction in observing that, in some of the female wards, the more capable patients, were encouraged to administer to the comfort of the sick and bed-ridden." (The fact is, that no encouragement is necessary; but care on the part of the attendants, themselves to do the offices about the sick and only allow other patients to do subordinate things and never without supervision. Besides their want of the necessary knowledge, skill and responsibility, patients are quite capable of treating their fellows with harshness.)

" The extension and improvements of the accommodation and arrangements . . . have been completed. The Farm buildings have been removed to a greater distance from the Asylum. Several of the corridors on the upper floors of the old building have been converted into dormitories, thereby adding much comfortable accommodation. The result of our enquiries as to the profitable cultivation of the land was very satisfactory.

" It is much to be regretted that the large airing-courts assigned to the worst class of patients, being on the North side of the main building, are not, by reason of the want of Sun during the Winter months, available as healthy places of exercise, and that, consequently, the patients referred to are, in great measure, deprived of the benefit of out-door exercise and recreation during that season."

(16 and last.) November 27, 1860, by Commissioners Campbell and Gaskell. (Entered at length at pages 22 and 23.)

NOTE.—Wherever in these Extracts Italics are used, they are introduced by me for the purpose of exciting attention and causing comparison to be made between different entries by different, or, by the same hands at different times. J. E. H.



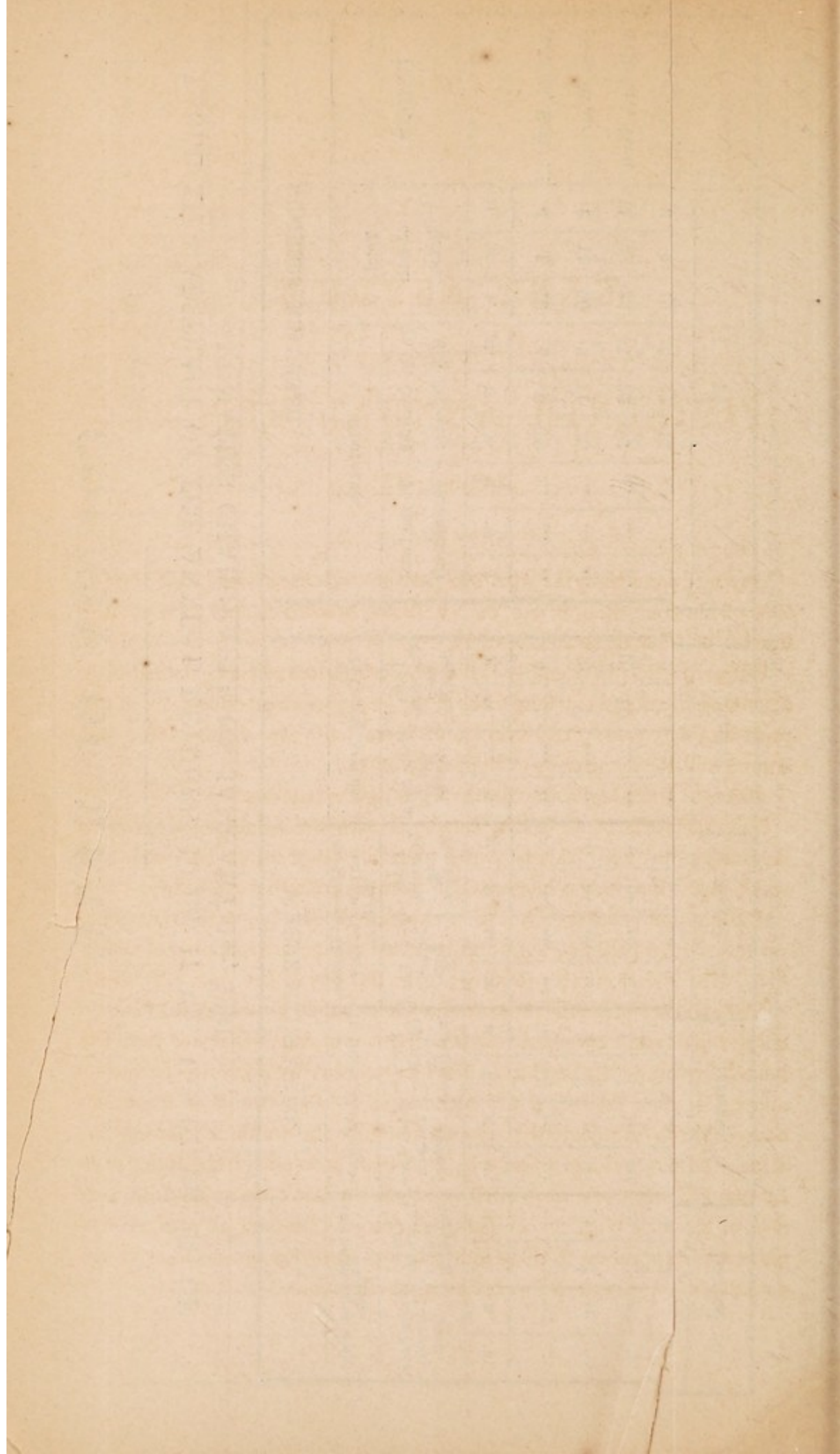
COUNTY OF KENT.

TABLE XII.—ABSTRACT OF THE ANNUAL RETURNS (16 AND 17 VIC., CAP. 97, SEC. 64) OF
LUNATICS CHARGEABLE ON JANUARY 1ST, 1861.

NUMBERS RETURNED.										WHERE MAINTAINED.															
UNIONS.	Total of each Union.			Chargeable.						In County Asylum.				In Licensed Houses or other County Asylums.				In Union Workhouses.				In Lodgings, or with Friends.			
				To the Contribu- ting Parishes.			To the Local Jurisdictions.			From Contribu- ting Parishes.		From Local Jurisdic- tions.		From Contribu- ting Parishes.		From Local Jurisdic- tions.		From Contribu- ting Parishes.		From Local Jurisdic- tions.		From Contribu- ting Parishes.		From Local Jurisdic- tions.	
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Ashford, East ...	4	6	10	4	6	10	...	...	...	4	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ditto, West	9	11	20	9	11	20	...	...	...	5	4	...	...	...	...	...	3	3	...	...	1	4	...	...	...
Aylesford, North.	11	22	33	11	22	33	...	...	...	10	15	...	...	...	...	...	1	7	...	...	...	...	...	...	...
Blean*	6	7	13	6	7	13	...	...	...	2	5	...	...	...	...	...	...	...	...	4	2	...	...	...	...
Bridge	8	10	18	8	10	18	...	...	...	6	7	...	...	...	...	...	2	1	...	...	...	2	...	...	...
Bromley	13	9	22	13	9	22	...	...	...	11	7	...	...	...	...	...	2	2	...	...	...	...	...	...	...
Cranbrook.....	15	23	38	15	23	38	...	...	...	10	17	...	...	...	...	...	3	...	...	...	2	6	...	...	...
Dartford	17	37	54	17	37	54	...	...	...	13	31	...	...	...	...	...	4	6	...	...	...	...	...	...	...
Dover	17	27	44	4	4	8	13	23	36	2	2	6	6	...	...	4	14	2	1	3	3	...	1	...	...
Eastry	23	33	56	14	18	32	9	15	24	5	7	2	1	...	1	1	7	6	5	2	3	3	5	4	4
Elham	9	13	22	5	7	12	4	6	10	3	3	2	1	...	...	1	3	2	3	1	1	...	1	..	1
Faversham	14	13	27	10	5	15	4	8	12	6	5	...	...	...	2	7	2	...	1	...	2	...	1	1	1
Gravesend.....	9	20	29	9	20	29	...	...	...	6	15	...	...	1†	...	...	2	3	...	...	...	2	...	...	...
Greenwich	77	144	221	77	144	221	...	...	...	25	57	...	...	...	...	...	44	73	...	...	8	14	...	...	...
Hollingbourne ...	16	21	37	16	21	37	...	...	...	11	13	..	...	...	...	...	1	7	...	...	4	1	...	...	...
Hoo	1	0	1	1	0	1	...	...	...	1	0	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lewisham	19	24	43	19	24	43	...	...	...	13	22	...	...	...	...	...	5	1	...	...	1	1	..	...	...
Maidstone.....	35	47	82	13	16	29	22	31	53	9	7	14	26	...	...	1	1	4	8	7	4	...	1	...	...
Malling ..	13	19	32	13	19	32	...	...	...	10	17	...	...	...	...	...	2	...	...	...	1	2	...	...	...
Milton	5	9	14	5	9	14	...	...	...	5	5	...	...	...	...	...	...	1	...	...	...	3	...	...	...
Medway	32	35	67	24	22	46	8	13	21	12	10	2	5	1	...	1	3	11	12	5	5	...	...	...	...
Romney Marsh...	2	8	10	0	2	2	2	6	8	0	2	...	1	...	...	1	...	...	1	2	...	...	1	2	...
Sevenoaks	19	27	46	19	27	46	...	...	...	13	19	...	...	...	...	...	2	3	...	...	4	5	...	...	...
Sheppey.....	25	10	35	23	8	31	2	2	4	15	5	...	...	...	1	1	8	3	1	1	...	...	...	...	...
Tenterden	9	11	20	7	8	15	2	3	5	2	2	1	1	...	...	1	2	5	...	...	3	1	1	1	1
Thanet	23	32	55	8	8	16	15	24	39	6	1	1	1	...	...	6	12	...	...	7	7	2	7	1	4
Tunbridge	19	22	41	19	22	41	...	...	...	13	14	...	...	...	...	...	3	7	...	...	3	1	...	...	...
TOTAL	450	640	1090	369	509	878	81	131	212	218	298	28	42	2	1	17	50	111	151	28	26	38	59	8	13
On Jan. 1, 1860...	449	605	1054	378	493	871	71	112	183	227	285	30	42	12	7	16	40	106	157	17	17	33	44	8	13
Increase.....	1	35	36	...	16	7	10	19	29	...	13	...	...	...	...	1	10	5	...	11	9	5	15	...	...
Decrease .....	...	...	...	9	...	...	...	...	...	9	...	2	...	10	6	...	...	...	6	...	...	...	...	...	...
Net Increase	36									Increase 2.				Decrease 5.				Increase 19.				Increase 20.			

* No return as to the City of Canterbury.

† In the Idiot Asylum.



1957

1957										1958										1959										1960										1961										1962										1963										1964										1965										1966										1967										1968										1969										1970										1971										1972										1973										1974										1975										1976										1977										1978										1979										1980										1981										1982										1983										1984										1985										1986										1987										1988										1989										1990										1991										1992										1993										1994										1995										1996										1997										1998										1999										2000										2001										2002										2003										2004										2005										2006										2007										2008										2009										2010										2011										2012										2013										2014										2015										2016										2017										2018										2019										2020										2021										2022										2023										2024										2025										2026										2027										2028										2029										2030										2031										2032										2033										2034										2035										2036										2037										2038										2039										2040										2041										2042										2043										2044										2045										2046										2047										2048										2049										2050										2051										2052										2053										2054										2055										2056										2057										2058										2059										2060										2061										2062										2063										2064										2065										2066										2067										2068										2069										2070										2071										2072										2073										2074										2075										2076										2077										2078										2079										2080										2081										2082										2083										2084										2085										2086										2087										2088										2089										2090									
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TABLE I									
Summary of the results of the experiments on the effect of the concentration of the solution on the rate of the reaction									
Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)
0.01	0.001	0.02	0.002	0.03	0.003	0.04	0.004	0.05	0.005
0.06	0.006	0.07	0.007	0.08	0.008	0.09	0.009	0.10	0.010
0.11	0.011	0.12	0.012	0.13	0.013	0.14	0.014	0.15	0.015
0.16	0.016	0.17	0.017	0.18	0.018	0.19	0.019	0.20	0.020
0.21	0.021	0.22	0.022	0.23	0.023	0.24	0.024	0.25	0.025
0.26	0.026	0.27	0.027	0.28	0.028	0.29	0.029	0.30	0.030
0.31	0.031	0.32	0.032	0.33	0.033	0.34	0.034	0.35	0.035
0.36	0.036	0.37	0.037	0.38	0.038	0.39	0.039	0.40	0.040
0.41	0.041	0.42	0.042	0.43	0.043	0.44	0.044	0.45	0.045
0.46	0.046	0.47	0.047	0.48	0.048	0.49	0.049	0.50	0.050
0.51	0.051	0.52	0.052	0.53	0.053	0.54	0.054	0.55	0.055
0.56	0.056	0.57	0.057	0.58	0.058	0.59	0.059	0.60	0.060
0.61	0.061	0.62	0.062	0.63	0.063	0.64	0.064	0.65	0.065
0.66	0.066	0.67	0.067	0.68	0.068	0.69	0.069	0.70	0.070
0.71	0.071	0.72	0.072	0.73	0.073	0.74	0.074	0.75	0.075
0.76	0.076	0.77	0.077	0.78	0.078	0.79	0.079	0.80	0.080
0.81	0.081	0.82	0.082	0.83	0.083	0.84	0.084	0.85	0.085
0.86	0.086	0.87	0.087	0.88	0.088	0.89	0.089	0.90	0.090
0.91	0.091	0.92	0.092	0.93	0.093	0.94	0.094	0.95	0.095
0.96	0.096	0.97	0.097	0.98	0.098	0.99	0.099	1.00	0.100

COUNTY OF KENT.

TABLE XII.—ABSTRACT OF THE ANNUAL RETURNS (16 AND 17 VIC., CAP. 97, SEC. 64) OF
LUNATICS CHARGEABLE ON JANUARY 1ST, 1862.

NUMBERS RETURNED.										WHERE MAINTAINED.															
UNIONS.	Total of each Union.			Chargeable.						In County Asylum.				In Licensed Houses or other County Asylums.				In Union Workhouses.				In Lodgings, or with Friends.			
				To the Contribu- ting Parishes.			To the Local Jurisdictions.			From Contribu- ting Parishes.		From Local Jurisdic- tions.		From Contribu- ting Parishes.		From Local Jurisdic- tions.		From Contribu- ting Parishes.		From Local Jurisdic- tions.					
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Ashford, East ...	6	11	17	6	11	17	...	...	...	4	5	...	...	...	...	...	2	5	...	...	...	1	...	...
Ditto, West	12	11	23	12	11	23	...	...	...	7	5	...	...	...	...	...	5	2	...	...	...	4	...	...
Aylesford, North.	14	27	41	14	27	41	...	...	...	9	17	...	...	1	...	...	1	6	...	...	3	4	...	...
Blean*	5	13	18	5	13	18	...	...	...	2	7	...	...	2	2	...	...	3	...	...	1	1	...	...
Bridge	8	10	18	8	10	18	...	...	...	4	6	...	...	...	...	...	4	2	...	...	...	2	...	...
Bromley	13	11	24	13	11	24	...	...	...	10	9	...	...	...	...	...	3	2	...	...	...	...	...	...
Cranbrook.....	12	20	32	12	20	32	...	...	...	11	14	...	...	...	...	...	...	...	...	1	6	...	...
Dartford	22	33	55	22	33	55	...	...	...	19	29	...	...	...	...	...	3	4	...	...	...	...	...	...
Dover ‡	6	3	9	5	2	7	1	1	2	3	1	1	1	...	...	...	2	1	...	...	...	...	...	...
Eastry	21	29	50	15	15	30	6	14	20	7	7	2	1	1	9	7	3	...	1	1	5	3	3
Elham	10	19	29	4	7	11	6	12	18	3	4	2	1	3	7	1	2	1	3	...	1	...	1
Faversham	11	14	25	8	6	14	3	8	11	5	6	1	...	...	...	7	2	...	1	...	1	...	1	1
Gravesend.....	8	22	30	8	22	30	...	...	...	5	15	...	...	†1	...	...	2	5	...	...	...	2	...	...
Greenwich	87	161	248	87	161	248	...	...	...	31	50	...	...	...	...	...	46	97	...	...	10	14	...	...
Hollingbourne ...	16	19	35	16	19	35	...	...	...	11	13	...	...	...	...	...	2	6	...	...	3	...	...	...
Hoo	1	1	2	1	1	2	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Lewisham.....	23	28	51	23	28	51	...	...	...	17	24	...	...	...	...	...	5	2	...	...	1	2	...	...
Maidstone.....	37	43	80	13	14	27	24	29	53	12	9	15	27	...	...	...	1	4	9	2	...	1	...	...
Malling	14	16	30	14	16	30	...	...	...	11	14	...	...	...	...	...	2	...	...	...	1	2	...	...
Milton	7	11	18	7	11	18	...	...	...	7	8	...	...	...	...	...	1	...	...	...	2	...	...
Medway	33	36	69	26	25	51	7	11	18	14	12	2	5	1	...	1	2	11	13	4	4	...	...	...
Romney Marsh...	2	8	10	0	3	3	2	5	7	...	2	...	1	...	1	...	...	...	...	1	...	...	2	3
Sevenoaks.....	20	25	45	20	25	45	...	...	...	13	18	...	...	...	...	...	2	3	...	...	5	4	...	...
Sheppey.....	19	8	27	16	7	23	3	1	4	12	4	...	...	...	2	...	4	3	1	1	...	...	...	...
Tenterden	9	12	21	6	9	15	3	3	6	2	2	1	1	1	1	6	1	...	3	1	1	1
Thanet	23	29	52	8	3	11	15	26	41	6	1	1	1	7	13	6	6	2	2	1	6
Tunbridge.....	18	18	36	18	18	36	...	...	...	11	7	...	...	...	...	...	4	10	...	...	3	1	...	...
TOTAL	457	638	1095	387	528	915	70	110	180	237	290	25	38	5	3	14	39	110	180	23	18	35	55	8	15
On Jan. 1, 1861...	450	640	1090	369	509	878	81	131	212	218	298	28	42	2	1	17	50	111	151	28	26	38	59	8	13
Increase.....	7	...	5	18	19	§37	19	3	2	29	2
Decrease	2	11	21	32	...	8	3	4	3	11	1	...	5	8	3	4
Net Increase	5									Increase 4.				Decrease 9.				Increase 15.				Decrease 5.			

* No return as to the City of Canterbury.
† In the Idiot Asylum.

‡ No return as to the Borough of Dover, which apparently reduces the Boro' Patients.
§ The real increase—a large one—on the Contributing Parishes alone.

No.	Name	Age	Sex	Profession	Religion	Marital Status	Place of Birth	Date of Birth	Date of Death	Cause of Death	Burial Place	Remarks
1	John Smith	25	M	Farmer	Anglican	Married	London, England	1845	1870	Smallpox	St. Mary's Church	
2	Mary Jones	22	F	Domestic	Anglican	Single	London, England	1848	1872	Typhoid	St. Mary's Church	
3	James Brown	30	M	Blacksmith	Anglican	Married	London, England	1840	1875	Heart Disease	St. Mary's Church	
4	Elizabeth White	28	F	Widow	Anglican	Single	London, England	1842	1873	Consumption	St. Mary's Church	
5	Robert Green	20	M	Student	Anglican	Single	London, England	1850	1874	Scarlet Fever	St. Mary's Church	
6	Anna Taylor	24	F	Domestic	Anglican	Single	London, England	1846	1871	Measles	St. Mary's Church	
7	William Black	35	M	Merchant	Anglican	Married	London, England	1835	1876	Stroke	St. Mary's Church	
8	Charlotte Grey	26	F	Widow	Anglican	Single	London, England	1844	1874	Consumption	St. Mary's Church	
9	Thomas Evans	21	M	Student	Anglican	Single	London, England	1849	1873	Scarlet Fever	St. Mary's Church	
10	Isabella Hall	23	F	Domestic	Anglican	Single	London, England	1847	1872	Typhoid	St. Mary's Church	
11	George King	29	M	Blacksmith	Anglican	Married	London, England	1841	1875	Heart Disease	St. Mary's Church	
12	Frances Lee	27	F	Widow	Anglican	Single	London, England	1843	1873	Consumption	St. Mary's Church	
13	Richard Scott	20	M	Student	Anglican	Single	London, England	1850	1874	Scarlet Fever	St. Mary's Church	
14	Emily Adams	24	F	Domestic	Anglican	Single	London, England	1846	1871	Measles	St. Mary's Church	
15	Henry Baker	32	M	Merchant	Anglican	Married	London, England	1834	1876	Stroke	St. Mary's Church	
16	Martha Clark	25	F	Widow	Anglican	Single	London, England	1845	1874	Consumption	St. Mary's Church	
17	John Wilson	22	M	Student	Anglican	Single	London, England	1848	1873	Scarlet Fever	St. Mary's Church	
18	Elizabeth King	28	F	Domestic	Anglican	Single	London, England	1844	1872	Typhoid	St. Mary's Church	
19	William Brown	30	M	Blacksmith	Anglican	Married	London, England	1840	1875	Heart Disease	St. Mary's Church	
20	Charlotte Green	26	F	Widow	Anglican	Single	London, England	1843	1873	Consumption	St. Mary's Church	
21	Thomas Evans	21	M	Student	Anglican	Single	London, England	1849	1873	Scarlet Fever	St. Mary's Church	
22	Isabella Hall	23	F	Domestic	Anglican	Single	London, England	1847	1872	Typhoid	St. Mary's Church	
23	George King	29	M	Blacksmith	Anglican	Married	London, England	1841	1875	Heart Disease	St. Mary's Church	
24	Frances Lee	27	F	Widow	Anglican	Single	London, England	1843	1873	Consumption	St. Mary's Church	
25	Richard Scott	20	M	Student	Anglican	Single	London, England	1850	1874	Scarlet Fever	St. Mary's Church	
26	Emily Adams	24	F	Domestic	Anglican	Single	London, England	1846	1871	Measles	St. Mary's Church	
27	Henry Baker	32	M	Merchant	Anglican	Married	London, England	1834	1876	Stroke	St. Mary's Church	
28	Martha Clark	25	F	Widow	Anglican	Single	London, England	1845	1874	Consumption	St. Mary's Church	
29	John Wilson	22	M	Student	Anglican	Single	London, England	1848	1873	Scarlet Fever	St. Mary's Church	
30	Elizabeth King	28	F	Domestic	Anglican	Single	London, England	1844	1872	Typhoid	St. Mary's Church	

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631 10 632 10 633 10 634 10 635 10 636 10 637 10 638 10 639 10 640 10 641 10 642 10 643 10 644 10 645 10 646 10 647 10 648 10 649 10 650 10 651 10 652 10 653 10 654 10 655 10 656 10 657 10 658 10 659 10 660 10 661 10 662 10 663 10 664 10 665 10 666 10 667 10 668 10 669 10 670 10 671 10 672 10 673 10 674 10 675 10 676 10 677 10 678 10 679 10 680 10 681 10 682 10 683 10 684 10 685 10 686 10 687 10 688 10 689 10 690 10 691 10 692 10 693 10 694 10 695 10 696 10 697 10 698 10 699 10 700 10 701 10 702 10 703 10 704 10 705 10 706 10 707 10 708 10 709 10 710 10 711 10 712 10 713 10 714 10 715 10 716 10 717 10 718 10 719 10 720 10 721 10 722 10 723 10 724 10 725 10 726 10 727 10 728 10 729 10 730 10 731 10 732 10 733 10 734 10 735 10 736 10 737 10 738 10 739 10 740 10 741 10 742 10 743 10 744 10 745 10 746 10 747 10 748 10 749 10 750 10 751 10 752 10 753 10 754 10 755 10 756 10 757 10 758 10 759 10 760 10 761 10 762 10 763 10 764 10 765 10 766 10 767 10 768 10 769 10 770 10 771 10 772 10 773 10 774 10 775 10 776 10 777 10 778 10 779 10 780 10 781 10 782 10 783 10 784 10 785 10 786 10 787 10 788 10 789 10 790 10 791 10 792 10 793 10 794 10 795 10 796 10 797 10 798 10 799 10 800 10 801 10 802 10 803 10 804 10 805 10 806 10 807 10 808 10 809 10 810 10 811 10 812 10 813 10 814 10 815 10 816 10 817 10 818 10 819 10 820 10 821 10 822 10 823 10 824 10 825 10 826 10 827 10 828 10 829 10 830 10 831 10 832 10 833 10 834 10 835 10 836 10 837 10 838 10 839 10 840 10 841 10 842 10 843 10 844 10 845 10 846 10 847 10 848 10 849 10 850 10 851 10 852 10 853 10 854 10 855 10 856 10 857 10 858 10 859 10 860 10 861 10 862 10 863 10 864 10 865 10 866 10 867 10 868 10 869 10 870 10 871 10 872 10 873 10 874 10 875 10 876 10 877 10 878 10 879 10 880 10 881 10 882 10 883 10 884 10 885 10 886 10 887 10 888 10 889 10 890 10 891 10 892 10 893 10 894 10 895 10 896 10 897 10 898 10 899 10 900 10 901 10 902 10 903 10 904 10 905 10 906 10 907 10 908 10 909 10 910 10 911 10 912 10 913 10 914 10 915 10 916 10 917 10 918 10 919 10 920 10 921 10 922 10 923 10 924 10 925 10 926 10 927 10 928 10 929 10 930 10 931 10 932 10 933 10 934 10 935 10 936 10 937 10 938 10 939 10 940 10 941 10 942 10 943 10 944 10 945 10 946 10 947 10 948 10 949 10 950 10 951 10 952 10 953 10 954 10 955 10 956 10 957 10 958 10 959 10 960 10 961 10 962 10 963 10 964 10 965 10 966 10 967 10 968 10 969 10 970 10 971 10 972 10 973 10 974 10 975 10 976 10 977 10 978 10 979 10 980 10 981 10 982 10 983 10 984 10 985 10 986 10 987 10 988 10 989 10 990 10 991 10 992 10 993 10 994 10 995 10 996 10 997 10 998 10 999 10 1000 10 1001 10 1002 10 1003 10 1004 10 1005 10 1006 10 1007 10 1008 10 1009 10 1010 10 1011 10 1012 10 1013 10 1014 10 1015 10 1016 10 1017 10 1018 10 1019 10 1020 10 1021 10 1022 10 1023 10 1024 10 1025 10 1026 10 1027 10 1028 10 1029 10 1030 10 1031 10 1032 10 1033 10 1034 10 1035 10 1036 10 1037 10 1038 10 1039 10 1040 10 1041 10 1042 10 1043 10 1044 10 1045 10 1046 10 1047 10 1048 10 1049 10 1050 10 1051 10 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1177 10 1178 10 1179 10 1180 10 1181 10 1182 10 1183 10 1184 10 1185 10 1186 10 1187 10 1188 10 1189 10 1190 10 1191 10 1192 10 1193 10 1194 10 1195 10 1196 10 1197 10 1198 10 1199 10 1200 10 1201 10 1202 10 1203 10 1204 10 1205 10 1206 10 1207 10 1208 10 1209 10 1210 10 1211 10 1212 10 1213 10 1214 10 1215 10 1216 10 1217 10 1218 10 1219 10 1220 10 1221 10 1222 10 1223 10 1224 10 1225 10 1226 10 1227 10 1228 10 1229 10 1230 10 1231 10 1232 10 1233 10 1234 10 1235 10 1236 10 1237 10 1238 10 1239 10 1240 10 1241 10 1242 10 1243 10 1244 10 1245 10 1246 10 1247 10 1248 10 1249 10 1250 10 1251 10 1252 10 1253 10 1254 10 1255 10 1256 10 1257 10 1258 10 1259 10 1260 10 1261 10 1262 10 1263 10 1264 10 1265 10 1266 10 1267 10 1268 10 1269 10 1270 10 1271 10 1272 10 1273 10 1274 10 1275 10 1276 10 1277 10 1278 10 1279 10 1280 10 1281 10 1282 10 1283 10 1284 10 1285 10 1286 10 1287 10 1288 10 1289 10 1290 10 1291 10 1292 10 1293 10 1294 10 1295 10 1296 10 1297 10 1298 10 1299 10 1300 10 1301 10 1302 10 1303 10 1304 10 1305 10 1306 10 1307 10 1308 10 1309 10 1310 10 1311 10 1312 10 1313 10 1314 10 1315 10 1316 10 1317 10 1318 10 1319 10 1320 10 1321 10 1322 10 1323 10 1324 10 1325 10 1326 10 1327 10 1328 10 1329 10 1330 10 1331 10 1332 10 1333 10 1334 10 1335 10 1336 10 1337 10 1338 10 1339 10 1340 10 1341 10 1342 10 1343 10 1344 10 1345 10 1346 10 1347 10 1348 10 1349 10 1350 10 1351 10 1352 10 1353 10 1354 10 1355 10 1356 10 1357 10 1358 10 1359 10 1360 10 1361 10 1362 10 1363 10 1364 10 1365 10 1366 10 1367 10 1368 10 1369 10 1370 10 1371 10 1372 10 1373 10 1374 10 1375 10 1376 10 1377 10 1378 10 1379 10 1380 10 1381 10 1382 10 1383 10 1384 10 1385 10 1386 10 1387 10 1388 10 1389 10 1390 10 1391 10 1392 10 1393 10 1394 10 1395 10 1396 10 1397 10 1398 10 1399 10 1400 10 1401 10 1402 10 1403 10 1404 10 1405 10 1406 10 1407 10 1408 10 1409 10 1410 10 1411 10 1412 10 1413 10 1414 10 1415 10 1416 10 1417 10 1418 10 1419 10 1420 10 1421 10 1422 10 1423 10 1424 10 1425 10 14

KENT ASYLUM.

SIXTEENTH ANNUAL REPORT.

1861-2.

REMARKS ON THE TABLES.

TABLE 2.—There is a considerable increase in the number of patients remaining in the July of this year as compared with the previous year. The year 1860-61, however, had been exceptional, for our whole discharges had greatly exceeded our admissions of patients in that year, and, consequently, there was a very unusual falling off in the balance remaining under care. It is safer to look back two years to show the real increase; then we have 1860, 622 remaining; 1862, 644; an average increase of 11 per annum. Our average daily number has been 628, as against 614 in 1861.

TABLE 5.—In a medical point of view, the character of our patients admitted has been unfavorable. Only one-third of them can be set down as probably curable; therefore our success in cures cannot much exceed 33 per cent. We began the year with a certain small balance of curable cases remaining, and we leave off with a similar balance in hand. The recoveries of any year must be drawn almost wholly from the current admissions and, consequently, as the curability of the admissions is so must the proportion of recoveries be. The actual rate of recovery for the past year is 34.76 per cent. and it is lower than for many years past (see Table 9).

TABLE 6.—In addition to 65 persons discharged as recovered, 21 have left the Asylum relieved; 7 for removal to other asylums, being trans-

ferred in consequence of settlements determined to be not in Kent; 8 to workhouses having Lunatic Wards; and 6 to their homes, it having appeared that their own relatives had the means, as well as the desire, to take charge of them. In harmless cases past cure, or alleviation, this last disposal is always gratifying; but it is rare, not because friends want the will but the means. It is poverty that crams our public asylums with many inoffensive persons who need not be, or, at any rate, continue therein if they had other homes. But now-a-days we have too much law for lunatics; many are needlessly sent and, once sent, and friends without help, there they must, in many instances, end their lives, with very small claim as lunatics. All this is very grievous; individually painful and the cause of natural repining: publicly injurious by expanding asylums beyond good working proportions and by over burdening the ratepayers. But what else can we expect? We have a Lunacy Board who are ever seeking to extend and fill Asylums, and so we have got too much law.

DEATHS.—Our death rate has been very moderate, only $6\frac{3}{4}$ per cent. on the whole population of the year. Once only was it a trifle lower, viz., in 1858-59 (table 9).

TABLE 8.—Out of the whole number of 53 deaths, nearly equally divided between the sexes, 21 resulted from palsy, epilepsy, apoplexy, or other diseases of the nervous system; 17 from diseases of the heart and lungs (of which 10 from pulmonary consumption); the remainder from various causes, including 1 suicide and 1 accidental strangulation. Of the 10 deaths from consumption, the patients in two cases were slowly dying of that disease when admitted; one of them having lived 2 months after admission, the other only two weeks.

TABLES 10 AND 11.—I have this year added two new tables containing a great many facts. No. 10 shows for men, and No. 11 for women, the disposal—in what state or way, and when—of every concluded case ever admitted into the Asylum in the $29\frac{1}{2}$ years of its existence. That is to say, in these tables the results of treatment can be traced through all the time. Starting from the diagonal arrangement of the years and the cases admitted in the centre, read to the left, or death side and, so far as 3578 cases go, the expectation of life, irrespective of age, may be seen through the years; read to the right and that of cure and removal are apparent in like manner. On the right, how blank are the upper parts of the columns; in other words, how few the removals after the first few years of insanity and confinement! These tables cost much time and labor, all I could devote to them for a month and, I believe, they supply a want in our statistics.

GENERAL HEALTH.—The whole establishment has enjoyed very good health, and there has been no general sickness, fatal or not, among the patients.

CRICKET.—Amongst the amusements (which have been before detailed) cricket has received an impetus through the exertions and the active participation of the assistant medical officers. Throughout the season, we have had regular games every evening, in one or other of the meadows, and a match of a more important character once a week, in the afternoon, besides the ordinary playing all day long in the men's airing grounds. To Mr. Spencer, senior assistant, our acknowledgments are due for his active promotion of the sport, in which he is aided by his skill and enthusiasm for the game. It may surprise if I add that amongst so many patients it is difficult to find even a score able to play moderately well, although we have a few who may be called cricketers. Our matches, therefore, are made up with a considerable sprinkling of officers and servants.

MOWING.—We have been much benefited by procuring a lawn-mowing machine this year; our airing grounds having been thus kept in a much neater state than before. It appears to me a singular circumstance that so few of our patients understand the use of the scythe; and, consequently, it had, hitherto, been almost impossible by their means to mow the grass sufficiently often.

BREADMAKING.—For more than a year the bread of the establishment has been made by one of Stevens's kneading machines. The practice of introducing machinery to perform labour that is both exhausting and uncleanly in human hands is much to be recommended. Another strong ground is the saving which results. Our machine, which cost £40, effects a saving to the Asylum estimated at £1 per week on our consumption. It has, therefore, paid its cost and is now an advantage in every way. The machine is durable and the bread is good: better mixed, better to cut up and to keep and clean, *i. e.*, not contaminated with human perspiration. The prices of these machines may be considered high; the money paid for them, however, is not sunk but productive in a short time.

CASE.—In last year's report, at p. 19, was mentioned the case of a woman patient who had been confined of a child in the Asylum, and whose symptoms generally had been of the most aggravated character. This patient has now recovered and left the Asylum. The time of treatment extended to two years, including a probation of several months during which convalescence was strengthening and growing into recovery. She has no recollection of the earlier time, or of the circumstances of her confinement.

ACCOMMODATION.—The establishment has sufficed for the wants of the county during a series of years, and there is now a moderate surplus of vacant beds. The year shows a considerable increase of patients (1861, 598—1862, 644); so that, perhaps, we may not expect to go on much longer without some sort of enlargement. Another consideration supporting this view is the very generally expressed anticipation in other counties that the new law of March last, equalizing the incidence of the charge for lunatics in Asylums, will have the effect of causing a greater proportion to be placed in Asylums. If that happen, we shall want much more room; not only for a time but permanently, because the additional cases to be received will be of the incurable class. They will change to some extent the character of the establishment, rendering it more an Asylum in the literal sense, and consequently our proportion of discharges must fall. Large as the Asylum now is and undesirable as it must be to extend the surface our buildings cover, I deem it a fortunate thing to be able to state that, in consequence of the proper liberality in our existing space, it would be easy to find good accommodation for about 100 more patients within the walls as they stand. The additional building alone would receive 80 of these (40 of each sex) after trifling alterations calculated to improve it at the same time; whilst the men's side of the original building would yield space for the remaining 20, upon a rearrangement within which is itself much needed for the sake of modernizing a structure now many years old. As an alternative plan, I would recall attention to a series of suggestions made in my Report for 1859, recommending the establishment of a proper Lunatic Ward, with all necessary appointments, in every Union Workhouse, as the true means of preventing the overgrowth of the County Asylum.

THE LUNACY BOARD.—The year has not been allowed to pass without another example of the unjust disposition towards us of the Commissioners in Lunacy, which, on public grounds, I think it right to detail as briefly as possible. When two of the Commissioners visited on December 12, they left the following paragraph in their written record of their visit. "One woman in 8 and 11 ward was in a state of nudity. We learnt, on enquiry, that for the last twelve months this patient has generally remained naked in bed, the door of the room being kept locked."* This statement is perhaps not objectionable, and the circumstances themselves admit of very easy explanation, which was given, and such explanation would, I believe, be reasonable and satisfactory to any impartial person as it is to ourselves. Some time after the visit a letter was sent from the Lunacy Board to our visitors, alluding to the above circumstance

in these terms:—"The Board observes with much surprise from this entry" (meaning the entry made by the Visiting Commissioners) "that ——— has generally remained for the last twelve months in a state of nudity."*

What the Visiting Commissioners had written and, if awkwardly, still intelligibly and not untruly stated, and what the Board refer to as the source of their information, I have already quoted. Could anything be more grievously misrepresented than in the version which the Board have made out of this as given in the last quotation?

Even the Visiting Commissioners' own statement, although not untrue, is inexact; for to say that a person lies naked *in* bed is a contradiction between terms, and a more careful writer would have expressed his real meaning better, which was that the person wore no night-dress in bed. See, however, what the board have made of the evidence before them: they have converted the simple fact of a person's lying in bed without a night-gown into a charge of there having been in the Kent Asylum a patient suffered to remain in a state of nudity generally for twelve months! The simple fact is that this patient would only lie between the blankets. Is that a practice elsewhere unknown? It would have required the use of restraint to keep a night-gown upon her. This, then, is how the Lunacy Board are serving the public; they invent a charge in the first place, and then prefer it in company with terms of strong censure, in order to condemn a noble Institution.

In this single report, limited to the retrospect of one year, there will be found no less than five grave examples of the operation upon us of our English Lunacy Board.

At p. 20 we have a reflection upon the grievous filling of public Asylums; the result of over attention to lunatic affairs. At pp. 23 and 25, we have specimens of the ways in which the Board act; one of singularly careless and culpable misrepresentation, the other of a violent and arbitrary temper for which there was no reasonable excuse.

At pp. 29, *et seq.*, there is a fair and natural conclusion drawn of the effects produced upon the lunatics themselves by the Commissioners' interference in the immediate management of the patients. And at p. 33 will be found an instance of the willingness of the Commissioners to intermeddle with professional judgment and responsibility, when every consideration both of sound discretion and of courtesy would seem to dictate the very opposite course.

* Both these statements are published in the Commissioners' last report.

DIARY OF OCCURRENCES 1861-2.

July 4.—The annual hay-treat to the patients in the large meadow.

July 10.—Suicide of a female patient (E. M.) This was the case of a patient possessed with the disposition to self-destruction in a very high degree. In the earlier period of her residence very distinct evidence of this had been given and more than one attempt frustrated. The propensity continued in spite of medical treatment and, in consequence, much watchfulness was exercised; nevertheless all precaution was defeated through a mere accident. For better security at night this patient slept in a two-bedded room which was occupied, also, by another patient of a very watchful character. I do not think that this proceeding is ever quite justifiable of giving to one patient the anxious charge of another; but I believe the practice is not uncommon and, in this instance, it proved effectual for a long time. On one unfortunate night, however, the nurse accidentally left that particular bedroom door unlocked, although closed, and early in the morning the patient slipped out without awakening her guardian and effected her purpose by hanging herself with her apron in the water-closet. Her companion awakening some time later missed her, saw the door open, searched and found her dead. The accidental omission to lock any other door in the ward would have been of little consequence. Ill luck always seems to dispose these events. A coroner's inquest was held and a verdict returned in accordance with the circumstances stated. No blame was imputed, the nurse being a careful person and the accident of omitting to lock a door such as might occur to any one.

Aug. 1.—A male patient (H. R.) escaped. Brought back in three hours.

Aug. 25.—Accidental death of a male patient, (J. G.) under singular circumstances. He was found dead in the morning, hanging by his head which he had forced through a square in the window frame. He must have used considerable force in thrusting his head through an aperture measuring only five and fifteen-sixteenths inches by nine inches. The greatest transverse diameter of his head was five and three-quarter inches, and there were his ears in addition. He was caught by his chin and by the back of his head and, being the subject of general palsy, had not the power in his arms necessary to raise his body and release his head, although it would have been easy for a healthy person to have done so. The window was about seven feet from the floor and his bedstead stood under it, and he had rolled up his bedding to stand upon. The pressure of the sash-bar under his chin strangled him. Possibly he had an idea of getting

out, irrational as it was, under some delusion causing terror. In another case, I once knew a man put his arms and legs through the glass of a similar window, thinking to get out because he fancied the place was on fire. Hence the necessity for guarding some windows. A coroner's inquest was held and a verdict according to the circumstances was returned.

Aug. 31.—A male patient (S. S.) walked off the premises and was immediately brought back.

Sep. 9.—A male patient (H. R.) escaped and was brought back in an hour.

Sept. 21.—I received a letter from the Commissioners in Lunacy respecting the accidental death of August 25, requesting a series of particulars in addition to the certificate sent at the time. I acknowledged it and stated that I would lay it before the next meeting of the Committee for their instructions. On September 26 there came another letter from the Commissioners, desiring an immediate reply to their questions and threatening to summon me to their office on October 2, if I did not answer them by Saturday morning, September 28. On the 27th, I obtained the permission of the House Committee and answered the questions, which was of itself a very easy matter. My hesitation regarded a principle involved. The Commissioners' intemperance does not seem creditable as it was not called for. The matter was already a month old and, certainly, my reason for wishing a little delay would have been allowed by persons desiring to deal fairly. But it was evident that the Commissioners were willing to force me into opposition with the Committee of Visitors. Circumstances like this are worth mentioning for the insight they afford into the arbitrary disposition and conduct of our Lunacy Board.

Sept. 29.—A female patient (S. P.) fractured one of her thigh bones by falling accidentally over a mat. Recovery.

Oct. 12.—A female patient (M. A. C.) escaped. She was immediately brought back.

Oct. 14. Dr. W. C. Hills, senior medical assistant, left us to enter upon his appointment of Superintendent of the Norfolk County Asylum. He had devoted himself to our interests for nearly eight years, and the general esteem in which he was held may be gathered from the pleasing circumstance that a general subscription was entered into for the purpose of presenting him with a token of regard; which was done. The project originated with the attendants and superior servants, and when first brought to my knowledge there was already a list of more than seventy subscribers. The proposal having met with universal acceptance, the number of subscribers eventually reached nearly one hundred.

Nov. 3.—A male patient (C. C.) broke a rib by falling accidentally in his ward.

Nov. 4.—A criminal patient (real name unknown) made his escape in the course of the night and has not since been heard of. This man was a convicted thief and an old offender. We had had him in a previous year, had lost him then and recovered him after a time, he having given himself up. His malady was melancholia, limited to a strong disposition to commit suicide, at which he had made several attempts in gaol and elsewhere. When he had bad luck, *i. e.*, got apprehended and in trouble, his desire to destroy himself returned. On his last apprehension, when before the magistrates preliminary to his committal, he had cut his throat in the open court. From the Gaol he was soon transferred to the Asylum and he escaped as stated. He was then, apparently, of sound mind and has, no doubt, returned to his accustomed evil practices; and he will probably again attempt to destroy himself the next time "luck" is against him. The malady appeared to be genuine, though of partial character. It is, perhaps, rather a mood than a disease; but very apt to return, demanding strict precaution and not safely manageable in a gaol.

Nov. 7.—The shoemakers'-shop of the Asylum had been broken into and robbed in the previous night and many pairs of boots and shoes stolen. The thief has not been discovered. It was difficult not to conclude that our suicidal runaway of three days before must have been the thief. He knew the premises and, no doubt, wanted an easy job to start him afresh. Description: known to us by the name of "Fred" or "Charley;" about twenty-five years of age, tall, very narrow and straight, short legs and a peculiar short, quick step; sallow complexion, very dark hair and eyes, no whiskers; extensive scar on his throat. Some of my brother superintendents will probably meet with him some day.

Nov. 11.—A female patient (C. L.) ran off the premises and was immediately brought back.

Nov. 16.—A male patient (W. S.) escaped from the carpenter's shop. He was brought back from his home on the 19th.

Nov. 24.—A male patient (W. B.), an epileptic, was found dead in the morning. He had died in a fit. Reported to coroner.

Dec. 12.—An official visit by two of the Commissioners in Lunacy.

Dec. 14.—A female patient (M. A. C., the same as on Oct. 12) escaped over the airing ground wall at a part next a public road where it is ten feet high, but, being of stone, is exceedingly rough. This patient possesses a cat-like activity and is always climbing. She was immediately recaptured. To prevent this sort of thing in future, a band of Portland

cement, five feet wide under the coping, has been put on the walls of this airing ground all round inside.

Jan. 30.—A fire in the foul-laundry oast, or kiln. It was accidental and, no doubt, originated in a spark from the fire below flying up through the perforated floor, setting light to the clothes and then firing the cone, which was as dry as tinder from the constant desiccation during some years. Oasts have usually been constructed, as this was, of wood and lath and plaster. The upper half of the cone was burnt and a load of clothes, also. The whole has now been rebuilt of brick and made fire-proof in every part.

Jan. 30.—A male patient (J. D.) escaped and was brought back in a few hours.

Feb. 4.—A male epileptic patient (J. L.) was found dead in the morning at six o'clock. He had been seen alive after five and helped through a fit. He died during a fit, not of suffocation, but lying supine and with nothing to obstruct respiration. A coroner's inquest was held.

Feb. 21.—A male patient (J. C.) escaped. He was immediately recaptured.

Feb. 21.—Certain alterations in two of the men's wards finished and the wards re-occupied. During the previous two months these had been in progress. The part of the building with which we had to deal was the oldest on the male side and the most in need of reform. Two or three years since, the whole of the women's side of the principal building had been remodelled, and I regard the alteration in these two male wards as the first instalment of a similar general improvement of the whole. In the first place, all stone floors have been removed and replaced by wooden ones. The two wards are thrown together to be worked as one. The day space in the one is enlarged and the whole of the other devoted to sleeping accommodation. The bath-room is restored and improved and the lavatory extended. A proper food-pantry is provided and minor details of improvement have not been overlooked. The effect on the accommodation is to give ten more beds for men and the cost has been about £180. This, therefore, is a very remunerative outlay. The beds are worth much more than the money and the improvements may be said to have cost nothing. Subsequently, chairs for all were introduced as a part of the furniture of the ward and the forms removed and disused. It is this ward which will in future be used for our Winter parties of the patients, which additional purpose it will conveniently answer.

Feb. 28.—Return to a resolution of the House of Commons requiring
 "The number of lunatics at present confined in the Lunatic Asylums of

‘England and Wales, to be classified as curables, incurables and idiots.’
(Per the Commissioners in Lunacy.)

On February 26, Patients, M. 275, W. 362, Total, 637						
Probably curable,	-	“	14	“	33	“ 47
			<hr/>		<hr/>	
Incurable,	-	“	261	“	329	“ £90
			<hr/>		<hr/>	
Idiots,	-	“	46	“	47	“ 93
			<hr/>		<hr/>	

June 7.—New front airing-ground for women finished and taken into use. It is of small dimensions, on the South front and is for feeble patients only. It will have the advantage of much sun and will enable such patients as are infirm to sit or walk in the open air apart from those who are active and refractory. We have now no less than five airing-grounds for women.

June 16.—A male patient (W. B.) escaped from the hay field. He was brought back in two or three hours.

June 27.—Held the annual hay-treat in the large meadow. It was attended by about half the patients and appeared to be generally enjoyed.

July 2.—A male patient (J. P.) escaped from the cricket field by getting over the hedge. He was soon brought back.

ASYLUM TOPICS OF MORE GENERAL INTEREST.

I rejoice to say that in the practice of this Asylum we have continued to eschew in the management of our patients certain novel experiments of very questionable fitness as applied to persons in a state of disease. We have not yet begun to wake them, at intervals through the night, to get out of bed, in order to make them avoid acts of inadvertence proper to them as insane persons, but opposed to our notions of cleanliness. And we are unable to perceive any particular harm in their occasionally sitting or lying down on the floor, so as to disregard annoying the patients for the sake of its prevention. In illustration of the duty of forbearance with the latter habit of the insane, I would instance the lamentable case of violence to a patient (he subsequently died) in the Hanwell Asylum in November last. This patient was lying on the floor; an attendant ordered him to get up with violent language, of which the patient took no heed. The attendant then became angry and kicked him. Still there was no obedience. He then beat him with a stick about the back. He afterwards beat him with a fire-shovel and drew him along by the legs. He then got on him and walked forwards and backwards upon the patient. He next took hold of his legs and dragged him to a doorway, after which

he twisted him round by the heels. Lastly, he took him by the head and knocked it three or four times on the stone floor and kicked him two or three times at the bottom of his belly. (See newspaper account of the inquest held after his death, which took place on the 20th of December.)

Now, what possible evil, or injury, could a patient's lying on the floor occasion, equal to a result such as this in the hands of an attendant the most inconceivably inhumane? What is the prevention of the bad habit worth? Not so much as one angry word, if that were all; but, oftentimes, patients are rendered by their malady incapable of taking heed when spoken to. Here we have a fine example of "straining at a gnat and swallowing a camel." The gnat is turned into a camel by the too great importance attached to an inconsiderable trifle. The ordinary means by which one human being guides and induces another are here inoperative; nevertheless, anger at disobedience may be roused in the mind of an uneducated attendant. Therefore, I must think that there ought to be no stringent or general order such as that patients must not lie on the floor. In this case, I felt so strongly the injustice of an editorial remark in the "Medical Times and Gazette" of January 11, that I endeavoured to point out what I believe to be the real source of the evil in a letter to that journal, which appeared therein on January 25. The editor had written, "Our late remarks on a similar case at Colney Hatch point to the real evil that requires remedy—irresponsible management by a committee of magistrates." Thus, an oft-repeated stigma was publicly affixed again, claiming to indicate the truth but failing to do so. What would the writer have? Irresponsible Commissioners in Lunacy instead? Then, lunatics must be brought to one pattern; they must rouse of nights;* they must not crouch on the floor (as a young lady in the bosom of her family will sometimes do, at the feet of an elder, and who says "nay" to that?). Having lost their freedom as to the world external to the asylum, they must, also, lose the little independence left to their lives, even as to how they must proceed in the search for bodily comfort. They must expiate their misfortune in a life of perpetual drill: they must sit; they must walk round the estate of the Asylum; they must work; but they must not do anything not in the miserable book of routine for every case made and provided.

As it is probably quite as much my own desire to obtain recognition of the "real evil," as it is the desire of the writer of the foregoing paragraph, I beg to reproduce here my letter of comment.

* In order to show that I am not indulging in a mere fancy in thinking that the "turning out plan" (as also all other forcible measures) fatal to the non-restraint principle of management, I may mention that I have understood that the nocturnal rousing was not introduced and established at the Lancaster Asylum some years ago, without recourse being had to cold water, in the shape of the shower bath, as a means of enforcing it.

“ ‘ Suum cuique.’ ”

“ SIR,—The paragraph in your last issue headed ‘ Ill-treatment of a Lunatic at Hanwell,’ prompts me to offer to your readers some observations, arising from asylum experience which leads me to differ from you in the conclusion that such painful accidents are necessarily attributable to ‘ irresponsible management (of those Institutions) by a Committee of Magistrates.’ There are other forces in action besides those originating with the Committees; forces by which both they and all their chief officers are influenced, with or without the concurrence of their opinion. I mean the reports and suggestions made by the Commissioners in Lunacy at their visitations.

“ On the present occasion it will be enough for me to confine myself to the matter in hand, by showing the connexion there is between one of the principles of treatment and management of lunatics advocated and pushed by the Commissioners and the above lamentable accident; and to my mind these things are distantly related as cause and effect.

“ One of the habits of persons of disordered mind, to which the Commissioners make constant objection, is that of lying or crouching on the floor. Every one must share this objection as a feeling, as, also, the general opinion that the more the carriage and conduct of insane persons in Asylums can be brought to resemble, by attention, those of sane persons and the less those of the lower animals, the better for all parties. But there are limits to the measure of a full success. Notwithstanding these limits—impassable, indeed, in some cases—the Commissioners exercise no moderation in complaining of the absence of that sort of discipline which, it must be supposed, they consider the height of good management of the insane. In their Minutes of Visitations from time to time, they return to subjects of foregone condemnation with a wearying reiteration. This brings me to my point:—the Commissioners are in the habit of complaining (amongst other complaints) that they see patients lying or crouching on the floor, and of proceeding to say that they think *greater efforts on the part of the attendants* might prevent or diminish this and other evils.

“ What follows from the repetition of these statements year after year? Committees of Visitors, naturally looking upon Commissioners’ opinions as being possessed of professional force, direct the attention of their superintendents to the matters under objection, and that, perhaps, with an evident dissatisfaction that such comments should be made.

“ Superintendents, desirous of seeing what may be done, and willing, perhaps, to subordinate their own better judgment in a case wherein it might appear as if leaving matters alone was merely neglect instead of

“a discriminating professional wisdom, insist upon the most assiduous
“preventive care, in this particular matter, from their attendants.

“The attendants obey and are met by the stubborn difficulty which
“they are expected to overcome. They have to fear being considered
“negligent, and they cannot be expected to distinguish between those of
“their patients whose ill-looking habits must be humoured, and those in
“whom they are avoidable and may be found fault with and, perhaps,
“cured.

“Of course, under no circumstances whatever, can any exercise of
“violence, whether in language or action, be permitted; nor, if permitted,
“could it produce any good fruit.

“Attendants, then, fearful of seeming neglectful and less careful of
“their patients than of themselves, finding some patients quite inattentive
“to their wishes and orders as to lying on the floor, get provoked by the
“passive resistance made to their authority and having lost temper, the
“rest follows as a thing to be expected.

“To trace the evil result to its right source, we must travel upwards
“through Attendants, Officers and Committees of Visitors to the Com-
“missioners in Lunacy; then it appears that, however remotely, the ill-
“treatment of patients flows from the exigent restlessness of the latter.

“In other matters besides this one, I could illustrate the operation of
“the same principle if need were; and it is to me a distressing reflection
“that we are, in all our enlightenment on the treatment of lunacy in our
“day, merely travelling in a circle and going back to a system of coercion
“—different from that of old in form and pretension, but, nevertheless,
“a system of worrying and coercing still.

“We are aiming at too great uniformity: setting up Sanity as the
“standard by which to regulate Insanity; forgetting that they are
“essentially opposite things and that, although the distinction between
“the two may be, oftentimes, but a shade of difference, there are cases
“lower down the scale towards the worst end, where the disparity is so
“great and the symptomatic habits are so unconquerable (except by
“curing the parent disease itself by direct treatment), that we must even
“tolerate them, forbearing efforts which, in proportion to their uselessness,
“must be cruel.

“The duty and the honour of retarding and preventing this return to
“a miserable state of things are, and will be, with the medical officers.
“They are the only friends of the lunatic who fully understand him;
“they have the right of a professional judgment in all matters affecting
“him, and they can, if they will, safely and steadily resist all ill-judged
“interference.

"It would not be right to blame Committees of Visitors for these accidents until after it should have been shown that they had controlled their Medical Officers in such a way as to deprive them of their professional discretion.—I am, &c.,

"Jan. 13, 1862.

"J. E. H."

Surely, the above case affords a most lamentable example; and to think that it really happens, mediately, through the striving of the Commissioners to supplant all other discretion with their own is alarming, since the field of their operations is the Kingdom and embraces all County Asylums.

It would seem that we have no sooner got completely rid of the old system of gross and unnecessary oppression of insane persons under confinement, than we are introduced to and invited, nay, pertinaciously urged to receive with favor, a new tyranny, put forward, like a wolf in sheep's clothing, in the philanthropic dress of the time. Thus, we have a system of waking and disturbing patients from their sleep offered to us as "*night nursing*;" and we are urged to incessantly meddle with our patients who are following inclinations harmless in themselves, merely to please *ourselves* and make appearances gratifying to *us*. We are not asked to consider how far sleep may be interrupted, for a secondary object, without detriment to our invalids, in view of an end acceptable in itself if it were attainable consistently with a higher duty and aim. In short, we are to treat our patients not so much like human beings to be cared for and cured, as like objectionable animals all whose unseemly ways may be put down by force and suppressed. It might, however, reasonably have been supposed that the abolition of the system of material personal restraint would have cleared the ground for true medical treatment; and that the spirit of a properly informed professional intelligence would have governed every fresh project (whencesoever proceeding), for the better management of the insane. In the hands alone of medical officers enjoying (as, indeed, they universally do) the well-merited confidence of their Committees, this principle would ever be held in view. If the well-being of the Lunatic and progress in the knowledge of his disease are to be the first objects, these officers must be uncontrolled from without and not pestered with fanciful suggestions.

The Medical Officers know the necessity there is for restraining their own desires in coping with the difficulties incidental to the malady—a necessity imposed by a benevolent sense uninfluenced by the poor desire of exercising power—so that every act and arrangement, everything done or left unattempted shall answer to a comprehensive intelligence, pervading the entire system of treatment.

THE COMMISSIONERS VISITING.—The most astonishing instance I have yet seen of the disposition of the Commissioners to presume upon their functions and intermeddle, is contained in their own Report of their visit to one of our County Asylums last year. They actually wrote the following words :—“ Mr. C. (the late medical superintendent) “ accompanied “ us through the wards and rooms, and we pointed out to him the cases of “ such patients as appeared to us to be improving, and in which there is “ reasonable hope of early discharge.” Out of their own mouths, then, it is to be understood that the Commissioners esteem so little the need of deliberate care (founded not only upon a knowledge of the history of the cases, but upon extended personal observation) in forming a safe judgment of the fact, or probability of recovery, that they permit themselves off hand, and at a single brief examination, to suggest the patients likely soon to be recovered and able to leave the Asylum. Facts like this speak volumes of words to the wise; but the proceeding may be deemed even less improper and offensive to a medical superintendent than derogatory to the Commissioners themselves.

Here is a warning to Superintendents to guard well the respect due to themselves and to suffer no encroachments; a warning which is, I fear, not unneeded. I have observed with regret a want of proper independence in the public tone of some of these gentlemen towards the Commissioners. Do any require to be reminded to respect themselves, and that the responsibility of any practices they may adopt to gratify the Commissioners, is not the less entirely their own; that they cannot shift it and, therefore, ought never to yield up the duty of conscientious, self-emanating action? Again, who would assist to put on the bonds of his own enslavement—sell his duty and independence together for the questionable good word of the Commissioners, to be published in his Annual Report? If these things are not true then am I arrogant. But if there is too little self-respect; overdue submission to the Commissioners; a slavish bowing down to them, which is what they desire as the best preparation of the soil for their crop of encroachments, then I proclaim the wholesome truth, indifferent as to the charge of arrogance.

In Scotland, the desirableness of restraining the Commissioners has already appeared, to judge by the effort made this year under the auspices of the Lord Advocate to correct by law the anomaly of Commissioners both visiting Asylums and then sitting in judgment upon their own reports and opinions in the capacity of members of their own board. Thus, they report to themselves and “ *Sic volo sic jubeo, stet pro ratione voluntas*” must in human nature be the way things are ordered. The present arrangement wants looking at from two points of view: the

Commissioners' point and the Asylums' point. The system is probably smooth and agreeable to the Commissioners, but it is too one-sided to allow of fair play for the Asylums. What appeal would the latter have if appeal were desired? The private opinion of a Visiting Commissioner pronounced anew by the voice of his Board avails itself of an undue advantage, for the contrary opinion of a Medical Officer of an Asylum may be entitled to at least equal respect. Under the existing arrangement there is no proper judge. The present system is so obviously a comfortable one for the Commissioners and so favorable to the growth of their authority that, in the public interest, it follows that it ought not to be allowed to continue. I think, then, as the People of Scotland may be supposed to think—that the present system is *not calculated* to work well and fairly: and that in England we have proofs that it *does not* in the fact of (1) collision between Justices and Commissioners wherever the Justices preserve their right independence, and (2) in that of the adoption, at the Commissioners' suggestion, of mischievous practices with the Insane where the Justices do not.

VENTILATION.—Under this head I would avail myself of the opportunity of spreading the knowledge of and recommending certain simple methods both for the removal and admission of air, which have become known to me recently, or of late years, and which I have put to the proof. For the Asylum we have no need, these matters being systematically provided for and made primary objects of attention; but I would speak of contrivances applicable to private apartments, and not less applicable to public ones if required.

A few years ago, after reading a description of Dr. Chowne's method of ventilation by a syphon tube, I tried the plan, according to my idea as to its application, and am able to say that it is highly successful. Dr. Chowne declared the discovery of a law by virtue of which air does always descend the short leg, and ascend the long one, of an inverted syphon tube. Taking the principle alleged without question, I tried the practice; first in connection with the chimney of the room, the fire at the bottom of which, without doubt, would not merely determine the movement the right way but quicken it also. Next in a room without fire or chimney, on the first floor, the long leg of the syphon passing up through the second floor and opening in the roof-chamber. Both have been decidedly successful, and deserve to be recommended. The chimney itself, in the former plan, becomes the long leg of the syphon; the short leg of which is open, in the room, at the ceiling, at the level of which it takes away the air of the room. Reasons:—the top stratum is the worst air and, at night, is loaded additionally with the unwholesome products

from burning gas; therefore, this is the air to part with and not the purer air at the lower parts of the room at the level of the fire place. A common fire ventilates well, but it takes the best air. But the air in the higher parts of a chamber is the warmest and, if let at once into the chimney, it would, therefore, fly off at too great a rate and the room would be cooled; besides this, a direct opening into the chimney at the ceiling would cause the fire to smoke. The form of the syphon tube is adapted to all these considerations. The air, though taken from the worst sort, must descend the short leg and pass the bend, (which must be as low as the chimney opening over the grate), thence to ascend the long leg and be let into the chimney at the ceiling level. Thus, although there is an opening into the chimney at the top of the room, it is closed by the lower part of the long leg, closely fitted to it and practically, whether as regards the air of the room or the draught from the fire, there is no opening into the chimney higher than the bend of the syphon (bottom of the diaphragm), which is as low as the grate, and, therefore, the smoke draught is uninjured and the room cannot be over-cooled by letting its warmest and worst air go away at too rapid a rate. Two-thirds the area of the chimney (usually 9 by 14 inches) may be safely supplied from the syphon-tube; and perhaps very much more might be taken, but that I have not proved. How little will suffice for the smoke and products of combustion? The less the lower and the more the upper air of a room is removed the better for true ventilation. I have to add that in Summer, without fire, these syphons work well, but less actively—still, very actively when there is much wind.

The other (natural) syphon in a room without a fire place is, also, deserving of recommendation because, in Asylums, it will be applicable in so many more situations. I kept a daily account of this for 46 days. The action was right on 35, reversed on 5 and unsteady on 6. A good deal depended on the direction of the wind. I soon came to regard it, however, as a matter of no consequence which way the action might be. We want movement of air, *i. e.*, the opposite of stagnation, which is closeness, and we get by reversed action, good, tempered air, from the roof chamber. My experimental syphons are all made of wood and occupy space in the rooms they serve. The one above described is of the clear size of 9 by 12 inches, equal to $\frac{3}{4}$ of a square foot. In a new building how very easily syphons could be constructed in the thickness of the walls and in sufficient number.

The above observations all relate to the removal, only, of air. That however, is not the whole of ventilation. It is, also, necessary to admit

air from without in a bearable way, *i. e.*, without exposure to draughts which the human frame cannot bear with impunity. Try, then, the clever and simple suggestion of Mr. Peter Hinckes Bird which was lately described in a paragraph in a medical journal. Struck with its value no less than by its singular simplicity, I immediately put it to the test. It can be applied to all *sash* windows, not to those of any other form.

Raise the bottom sash two or three inches and fill up the opening left by so doing. This is all. There will then be an opening about the middle of the window, between the two sashes, directed upwards. By this the air is to enter and to be guided, and there is no perceptible draught to persons in the room. After this, let no one sit, night or day, in close rooms rendered uncomfortable and unwholesome by the poison of gas-burning, or of the products of respiration.

Any carpenter can fit and fix a piece of wood to the linings, inside the bottom sash, of the same depth as the lower framing of that sash. Then, the air-trap is set by raising the lower sash until the lower edge of it just crosses the upper edge of this fixed piece of wood. There is nothing unsightly, no glass hidden. It may be always in action, night and day, and the value is directly proportioned to the simplicity, as always happens with every really good idea, whilst the ordinary use of the window remains as before.

It may be a question (although it is not so to me) how far this plan might be available for the wards of an asylum—the air not being warmed, wherefore it might be necessary, in severe weather, to shut down the sashes, which would stop the ventilation. But there can be no question that, in Asylums not provided with a system of ventilation and dependent on doors and windows, this method would be practicable on many days of the year when, on account of driving rain, violent wind and inclemency of weather, the only means they possess of admitting air cannot be practised. For my part, I think that with windows so arranged for admission, with syphon tubes for extraction of air and with open fires for comfort, an Asylum would be provided well and cheaply in the matter of internal ventilation, if not in the best manner. In winter the sleeping apartments and portions of the day-rooms distant from the fires, would necessarily be cold; against this there is no means of providing except by a costly system of warming the air through the medium of hot water.

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SUPERINTENDENT.

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