

# **Thirteenth annual report, 1877 / Newcastle-upon-Tyne Borough Lunatic Asylum.**

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NEWCASTLE-UPON-TYNE

*Borough Lunatic Asylum.*

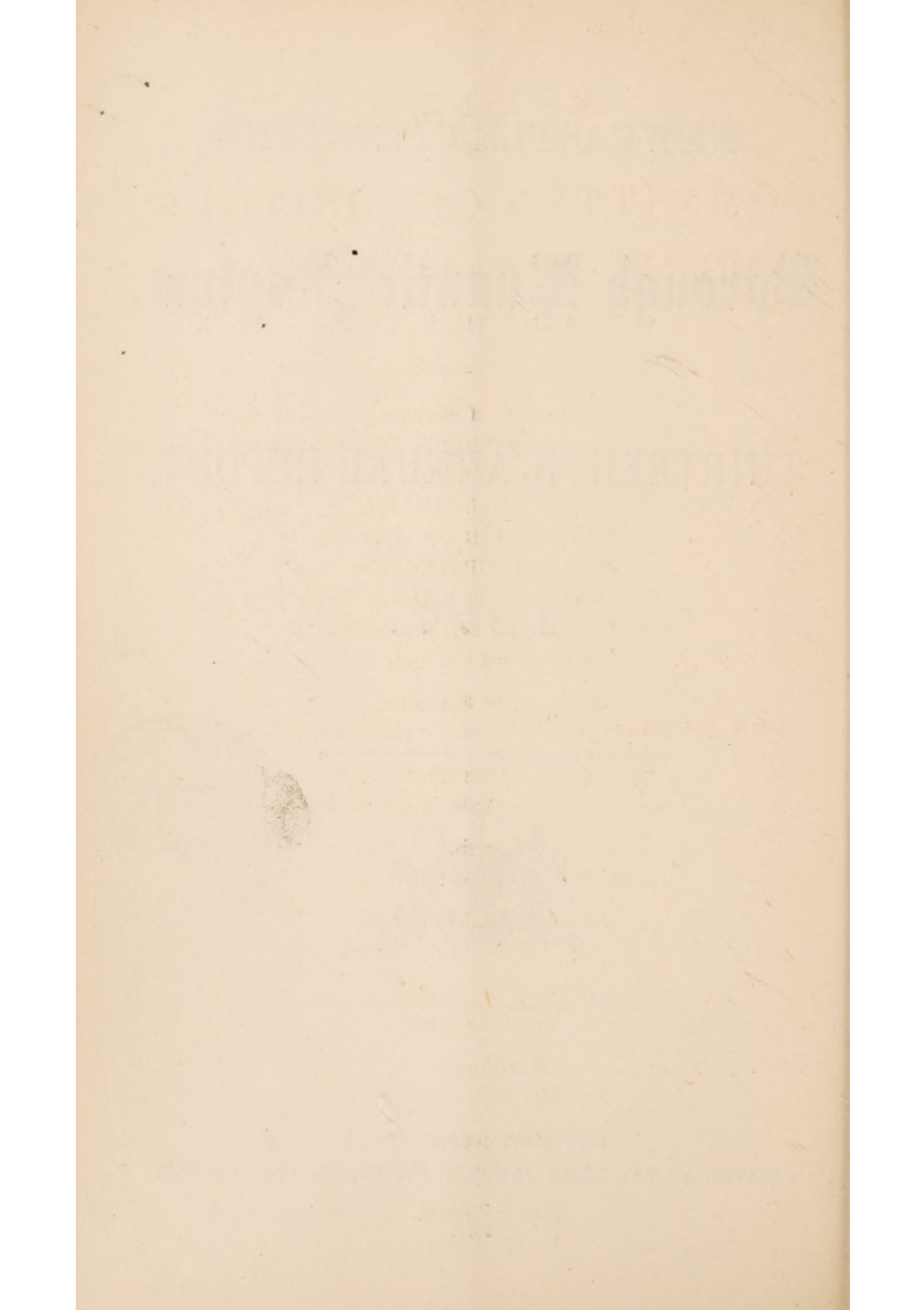
THIRTEENTH ANNUAL REPORT,

1877.



NEWCASTLE-UPON-TYNE :  
PRINTED AT THE DAILY JOURNAL OFFICE, CLAYTON STREET.

1878.



A LIST  
OF THE  
COMMITTEE OF VISITORS  
AND OFFICE-BEARERS  
FOR THE YEAR 1878.

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*Committee of Visitors.*

1. THOMAS HEDLEY, Esq., CHAIRMAN.
2. ANTHONY NICHOL, Esq.
3. JOSEPH POLLARD, Esq.
4. THOMAS WILSON, Esq.
5. WILLIAM HUNTER, Esq.
6. BENJAMIN PLUMMER, Esq.
7. T. LESSLIE GREGSON, Esq.
8. JOHN BULMAN, Esq.

*Clerk of the Committee.*

JOHN ATKINSON, SOLICITOR, 72, PILGRIM STREET, NEWCASTLE.

*Medical Superintendent.*

R. H. B. WICKHAM, F.R.C.S., Ed.

*Chaplain.*

THE REV. W. BOWLAN, LL.D.

*Assistant Medical Officer.*

W. J. BROWN, M.B., Dublin.

*Clerk of the Asylum.*

DAVID BRODIE.

*Housekeeper.*

HELEN MARIA ROSS.


*Head Nurse.*

W. S. REID.

*Head Attendant.*

G. DUNCAN.





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# Newcastle-upon-Tyne Borough Lunatic Asylum.

## REPORT 1877.

THE Committee of Visitors of the Newcastle-upon-Tyne Borough Lunatic Asylum have, in pursuance of the provisions of the "Lunatic Asylums Act, 1853," to make the Thirteenth Annual Report on the condition and management of the Institution.

On the 31st December, 1876, the number of patients on the books was 224 (viz., 98 male and 126 female). The admissions during 1877 were 58 (viz., 35 male and 23 female), and were chargeable in the following manner:—

	Male.	Female.	Total.
As Private Patients .....	0 .....	3 .....	3
To the Newcastle Union .....	35 .....	20 .....	55

The discharges were 29 (viz., 12 male and 17 female), and the deaths 17 (viz., 11 male and 6 female).

The average number daily resident was 228 (viz., 102 male and 126 female). The number of patients discharged recovered was 20, or about 34·48 per cent. of the admissions; and the percentage of deaths to the average number daily resident was 7·45; of the total number (282) under treatment, about 6·03.

The total number remaining on the books on the 31st December, 1877, was 236 (viz., 110 male and 126 female), being an increase of 12 as compared with last year. Of this number 6 are chargeable as private patients, as against 12 last year; 214 are chargeable to the Newcastle Union, as against 196 last year; 16 are chargeable to other Unions, as against 16 last year.

The Committee have accommodation for private patients,



whom they receive under the 43rd section of the "Lunatic Asylums Act, 1853," and for whom a charge of 21s. per week is made; and they are also willing to receive pauper lunatics from Unions which cannot find room within their own districts. The charge for these can be ascertained on application to the Medical Superintendent.

A fire broke out in the hayloft of a stable on the 23rd of February; it was speedily extinguished, and the little harm that was done was covered by insurance. There was a very inefficient pressure of water in the main pipe, and the store in the Asylum tanks was soon exhausted, rendering the fire engine useless. As the Newcastle Water Company are unable to guarantee a continuous supply of water, it was obvious that, lest a fire should break out in the main buildings, water should be stored in a much larger quantity than before. The Committee accordingly procured the necessary approval of the Secretary of State, and entered into a contract with Mr. Walter Scott, of Newcastle-upon-Tyne, to construct a reservoir of cement and mason work, and the necessary fittings, to contain about 150,000 gallons of water. This work is still in progress.

The papering and painting of the wards have been completed, and various repairs of the roof and other portions of the fabric have been executed.

The Committee have made the statutory visits to the Asylum. They have always found the Institution in excellent order and the patients well cared for.

On the 9th of May a patient named Thomas Wood died, and the Coroner for the Borough of Newcastle-upon-Tyne deemed it



his duty to hold an inquest. The Committee themselves made a rigid enquiry into all the circumstances of the case, and were of the opinion that the holding of the inquest was quite unnecessary; and further, that the patient during his residence in the Asylum was kept well under observation by the Medical Officers.

The only change of importance in the staff is that Miss Hill, the housekeeper, resigned on the 30th day of September. The appointment was, on the recommendation of the Superintendent, filled up in favour of Mrs. Helen Maria Ross, formerly at Colney Hatch Asylum, and for some time in the service of this Asylum in the temporary quarters at Bensham.

The Committee are enabled to speak in the most favourable terms of the zeal and activity of their Medical and other Officers, who have performed their duties to the entire satisfaction of the Visitors.

The Committee will shortly receive the usual annual report from Mr. Wickham, which, with a statement of the receipts and expenditure under the maintenance account, will be printed and circulated amongst the magistrates.

THOMAS HEDLEY.

A. NICHOL.

JOSEPH POLLARD.

THOMAS WILSON.

B. PLUMMER.

THOS. LESSLIE GREGSON.

JOHN BULMAN.



# REPORT OF THE COMMISSIONERS IN LUNACY.

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NEWCASTLE-UPON-TYNE BOROUGH LUNATIC ASYLUM,

26TH JANUARY, 1877.

The Committee and Medical Superintendent of this Asylum have now 223 patients in their charge. None are absent on trial, and all, therefore, have been seen by us. The out-borough cases and private patients are respectively 16 and 11; the former pay 14s. a week, the latter vary from 16s. to 21s. The maintenance charge for paupers chargeable to Newcastle-upon-Tyne is now 11s. 0 $\frac{3}{4}$ d. weekly. These consist of 98 men and 125 women. The following figures show the changes since our colleagues' visit in July last:—

	Male.	Female.	Total.
Admitted .....	9 .....	8 ...	17
Discharged .....	9 .....	10 .....	19
Died .....	5 .....	3 .....	8

Every patient who died was the subject of a *post-mortem* examination, and one man of an inquest. The verdict of the jury was "died from general paralysis and bronchitis, accelerated by broken ribs, but how and in what manner his ribs were broken no sufficient evidence appeared." We have felt it to be our duty to make some inquiry into this death, although the particulars have been the subject of letters by the Superintendent to our Board. As far as we can ascertain, the deceased E. R. was admitted here on the 4th January last, and he appears to have been a restless general paralytic—a strong-built man, but feeble



on his legs. According to the evidence before us, he was a patient in the Male Infirmary, where the charge attendant is only 22 years of age, assisted by a man who acts also as gardener, and where the cases are 20 or thereabouts ; but for special charge of E. R. another attendant had been employed ; he, however, had been in the Asylum service only two months, and his age appears to be 26 years only. While in this special charge three occurrences are alleged, any of which might have been disastrous to E. R., but we do not think that the first was that on which he sustained the injuries which accelerated his death. The only person who can give testimony to the later occurrences is the attendant G., who was there in special charge of E. R. According to his account, the patient threw a spittoon at him and then charged him with an uplifted chair, in the forenoon of January the 16th ; that in a short struggle to wrest the chair from him by G., the patient fell back heavily on his left side ; that the chair cut his eyebrow ; that he (G.) immediately reported the affair to the charge attendant, who ran in from another part of the ward on hearing the noise. That on the same day, in the afternoon, another demented patient pushed E. R., when he fell backwards in his chair on to the floor, which fall G. did not, however, report. The charge attendant, when examined by us, admitted a full report of the affair, including the first fall, as stated by G., and it seems that he on the same day told Dr. Brown, the assistant medical officer, but whether he mentioned that fall is doubtful. Dr. Brown denies that he did ; and Dr. Brown insists that if he had heard of the fall he should have certainly examined then his body, which he did not do. On the 18th January, in consequence of complaints by E. R.



that the attendant had stuck pins into him, Dr. Brown examined his body, and then discovered fractured ribs on both sides. Thereafter the patient appears to have received the surgical treatment which his case demanded. From the appearance of the body of E. R. on *post-mortem* examination, Dr. Wickham and Dr. Brown consider that the fractures could not have taken place so far back as the date of an alleged fall a week prior to January the 16th, when, moreover, he was examined by Dr. Brown and no fracture could be detected. We in vain examined several patients to obtain further information. The charge of the Infirmary should not, we think, be left to a young man aged 22. Reports of assaults, &c., should be given in writing by attendants, and G. was too inexperienced to have special charge of the deceased. We cannot fix him or any other person with ill-usage of E. R., but he admits that he did not report the second fall of the patient on the 16th inst., and he did not comply with the 26th clause in the Rules as to Duties of Attendants in this Asylum, which declares that whenever a patient becomes violent the attendant should at once call for the assistance of other attendants. We strongly recommend that G. should not be for a considerable period employed (if at all) in any but in a position of little responsibility. We found the patients on the whole quiet, both in the wards and airing courts, but the worse conducted of the women are still much disposed to turbulence and noise. It would be very desirable to lessen the number in No. 2 on the female side, and to mix them with the others. There are now 21 in that ward, with three nurses. The men, also, of the least favourable cases for management, require, we think, more means of indoor amusement. We could only see



there, in the shape of games, a set of draughts and an incomplete pack of cards. The behaviour of the patients at dinner in the hall was very good—about 70 women and 60 men. Several men complained of an insufficient quantity of food, but the dietary is not open to objection; and the fare to-day—fish, with potatoes and beer—we tasted, found good, and the portions liberal. No one was in restraint or seclusion. 2 men and 4 women have been secluded for 35 hours altogether, all for violence. 2 epileptic and 3 men and 2 women have been restrained for 817 hours altogether, 3 to prevent self-injury, 2 for surgical reasons. As we passed through the wards, 4 males and 2 females were in bed. The general health is good; there has been no epidemic.

Throughout the interior of the building the bedding is in excellent order, and the wards were everywhere in a state of neatness and free from offensive smell during our inspection. Dent's clocks have been ordered, and there will be a sufficient number of stations on each side. About 100 patients attend the chapel on Sundays. 20 per cent. or thereabouts are Roman Catholics. These have no regular ministrations from the priest, but a very few occasionally attend mass outside.

The amusements and outdoor exercise are, as heretofore reported, given liberally. No improvements of a structural nature have been made since the last visit, but there is a contract shortly to be executed for preventing the waste steam passing into the drains, which is an inconvenience; and the work of re-papering some of the wards is about to be taken in hand.

CHARLES PALMER PHILLIPS, } Commissioners  
ROBERT NAIRNE, } in Lunacy.



# THE MEDICAL SUPERINTENDENT'S REPORT.

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TO THE COMMITTEE OF VISITORS.

*January, 1878.*

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to submit the Thirteenth Annual Report, with the Statistical Tables for 1877.

On the 1st of January, 1877, there were in the Asylum 224 patients (viz., 98 men and 126 women), and on the 31st of December there were 236 (viz., 110 men and 126 women). The average number daily resident was 228 (viz., 102 men and 126 women), and the total number under treatment was 282 (viz., 133 men and 149 women), as against 223 and 226 respectively in 1876.

The admissions were 58 (viz., 35 men and 23 women), of which number the Union of Newcastle-upon-Tyne contributed 55, being more by 17 than last year, and the remainder were private patients, no "out-county" patients having been admitted.

The discharges were 29, of whom 20 were "recovered," and 5 were relieved. The number of "recoveries" gives the per centage of 34·4 on the admissions.

The deaths were 17 in number, being a per centage of 7·4 of the average number resident, and of 6·0 of the total number under treatment. The average of deaths within the Asylums of England and Wales, in 1876, calculated on the average number resident, is stated by the Commissioners in Lunacy to be 10·6



per cent., and calculated upon the total number under treatment, 8·1 per cent., from which it would appear that our figures are still considerably below the average.

The general statistics of the Asylum are as follows:—Since it was opened in June, 1865, there have been admitted 957 patients (viz., 486 men and 471 women); and of these 296 (viz., 121 men and 175 women) have been discharged “recovered,” being a per centage of about 31·0 of the admissions. 196 (viz., 101 men and 95 women) have been discharged “relieved” or “not improved,” being chiefly “out-county” cases which were boarded here while the Asylum for their own district was being built or enlarged. The deaths have been 229 (viz., 154 men and 75 women), leaving, as has been said, at the end of 1877, 236 cases in the Asylum. The per centage of deaths, calculated on the convenient but illogical principle of Table IV., is 23·9; and, it will be observed of the actual numbers, the male deaths are a little more than double the female.

Of the admissions there is not much to be said, except that there was a larger proportion than usual of hopeless cases, and many of these were, in addition, in a debilitated physical condition, thus taxing the resources of the Asylum to the utmost, and adding considerably to the expenditure. Of many of these it may be said, that their earlier removal to the Asylum would have added to the chances of their recovery, certainly to the prolongation of their lives. General Paralysis existed in 18 per cent. of the admissions.

The deaths were due to the ordinary causes prevalent in Asylums, except in two cases, each of which was the result of



broken ribs, in the first case, the origin of the injuries being untraceable, while in the second they were the result of a blow from another patient. Another death, which was certified as being due to "Paraplegia and Mortification" and which is for the purposes of classification assigned in Table VI. to "General Paralysis," that being the primary disease under which the patient laboured, was the subject of an inquest by the Borough Coroner. As the jury gave their verdict without having heard the case read to them, it is printed in an appendix to this report, and it is not necessary to say anything here of the details. Few but those who have lived in an Asylum can have any idea of the rapidity with which sores form on the General Paralytic, and of how they resist all methods of treatment. A case is recorded in which the pressure of the hand of such a patient on the skin of the abdomen produced a sore; and there was an instance in this Asylum, in 1877, in which the contact of the scrotum with the neighbouring skin, which was always dry and clean, was resulting in the same when the patient died. In some cases contact with the bed clothes is sufficient; and a patient died here, recently, in whose elbow there was every appearance of violent bruising, but in which the symptoms were due to the formation of a bed sore, notwithstanding that the limb was on a water pillow. In the case in which the inquest was held, the appearances on the elbow, for instance, which we had observed here from day to day, going through the ordinary stages of the formation of a bed sore, were sworn to by a medical man as being probably "caused by violence"!

I have again the pleasure to report favourably of the conduct of the officers.

In conclusion, I have to renew my expression of thanks to you for all your kindness to myself in the past year, and for the hearty sympathy which you extended towards me during a very trying and otherwise discouraging period.

I have the honour to be,

Mr. Chairman and Gentlemen,

Your most obedient Servant,

R. H. B. WICKHAM.



# APPENDIX I.

TABLE I.,

*Showing the Admissions, Re-Admissions, Discharges, and Deaths during the Year 1877.*

				M.	F.	Total.
In the Asylum, 1st January, 1877 .....				98	126	224
	M.	F.	Total.			
Admitted for the first time during the Year.....	31	18	49			
Re-admitted during the Year .....	*4	*5	*9	35	23	58
Total under treatment .....				133	149	282
Discharged —						
Recovered .....	6	14	20			
Relieved .....	3	2	5			
Not Improved .....	3	1	4			
Died .. .....	11	6	17			
Total discharged and died.....				23	23	46
Remaining in the Asylum on the 31st December, 1877 .....				110	126	236
Average number daily resident .....				102	126	228

\* Including two cases in which the papers were informal.

TABLE II.,

*Showing the Admissions, Re-Admissions, Discharges, and Deaths from the opening of the Asylum to the present date, 31st December, 1877.*

				M.	F.	Total.
Admitted during the period of 12½ Years .....				461	429	890
Re-Admitted .. .....				25	42	67
Total number of cases admitted .....				486	471	957
	M.	F.	Total.			
Discharged —						
Recovered .. .....	121	175	296			
Relieved .. .....	42	39	81			
Not Improved .....	59	56	115			
Died .. .....	154	75	229			
Total number discharged and died during the 12½ Years.....				376	345	721
Remaining in the Asylum on the 31st December, 1877.....				110	126	236
Average number daily resident during the 12½ Years				94 10-25	107 11-25	201 21-25







TABLE IV.,

*Showing the History of the Annual Admissions since the Opening of the Asylum, with the Discharges and Deaths, and the numbers of each Year remaining on the 31st December, 1877.*

Admitted.				Of each Year's Admissions, Discharged, and Died in 1877.				Total Discharged and Died of each Year's Admissions to 31st December, 1877.												Remaining of each Year's Admissions on 31st Dec., 1877.				
YEARS.	New Cases.		Re-lapsed Cases.	Total.	Recovered.		Relieved.		Not Improved.		Died.		Recovered.		Relieved.		Not Improved.		Died.		Males.	Fem.	Total.	
	Males.	Fem.			Males.	Fem.	Males.	Fem.	Males.	Fem.	Males.	Fem.	Males.	Fem.	Males.	Fem.	Males.	Fem.	Males.	Fem.				Total.
1865.....	58	56	...	114	...	...	...	...	...	...	1	...	7	6	1	5	2	2	23	14	26	33	59	
1866.....	18	25	3	47	...	...	...	...	...	...	...	...	4	13	...	5	...	2	9	5	4	5	9	
1867.....	19	14	3	37	...	...	...	...	...	...	...	...	6	11	...	...	...	1	11	3	2	3	5	
1868.....	29	22	4	57	...	...	...	...	...	...	...	...	10	12	...	...	...	...	16	5	3	7	10	
1869.....	26	22	3	51	...	...	...	...	...	...	...	...	8	11	...	...	...	...	2	7	1	3	4	
1870.....	68	108	2	180	...	...	...	...	...	...	...	...	16	27	...	...	...	...	10	15	10	19	29	
1871.....	63	34	5	106	...	...	...	...	...	...	...	...	21	21	...	...	...	...	18	6	4	2	6	
1872.....	48	35	...	84	...	...	...	...	...	...	...	...	10	21	...	...	...	...	19	7	4	3	7	
1873.....	21	25	3	51	...	...	...	...	...	...	...	...	8	7	...	...	...	...	7	2	6	11	17	
1874.....	28	29	4	67	...	...	...	...	...	...	...	...	13	21	...	...	...	...	5	4	9	9	17	
1875.....	28	22	6	68	...	...	...	...	...	...	...	...	9	6	...	...	...	...	11	5	7	11	18	
1876.....	24	19	3	47	...	...	...	...	...	...	...	...	7	12	...	...	...	...	4	2	8	7	15	
1877.....	31	18	5	58	...	...	...	...	...	...	...	...	2	7	...	...	...	...	2	4	26	14	40	
Total.....	461	429	25	957	6	14	20	3	2	5	11	6	121	175	42	39	56	115	154	75	110	126	236	

Summary of the Total Admissions.				Total.	
Per Centage of Cases	Males.		Fem.	Total.	
	24.9				
	8.7		37.2	31.0	
	12.1		8.3	8.5	
	31.7		11.9	12.0	
	22.6		15.9	23.9	
	100.0		26.7	24.6	
	100.0		100.0	100.0	



TABLE V.,

*Showing the Form of Mental Disease in those Admitted and in those Discharged Recovered during the Year 1877.*

	ADMISSIONS.			RECOVERED.		
	M.	F.	Total.	M.	F.	Total.
Mania .....	3	...	3	2	...	2
„ Acute .....	8	9	17	2	7	9
„ Chronic .....	2	...	2	...	...	...
„ Epileptic .....	6	...	6	...	...	...
Melancholia .....	6	10	16	1	7	8
General Paralysis .....	5	...	5	...	...	...
Dementia .....	1	1	2	...	...	...
Monomania .....	1	1	2	...	...	...
Imbecility .....	...	2	2	...	...	...
Delusional .....	2	...	2	1	...	1
Not Examined .....	1	..	1	...	...	...
Total .....	35	23	58	6	14	20

TABLE VI.,

*Showing the Causes of Death during the Year 1877.*

CAUSES OF DEATH.	M.	F.	Total.
CEREBRAL AND SPINAL DISEASES:—			
Apoplexy and Paralysis .....	1	1	2
General Paralysis .....	3	...	3
Hemiplegia and Pelvic Abscess .....	...	1	1
Chronic Mania and Mortification .....	...	1	1
Do. and Softening of the Brain .....	...	1	1
THORACIC DISEASES.—			
Phthisis .....	1	...	1
Emphysema .....	1	...	1
Chronic Bronchitis .....	1	...	1
Disease of the Heart .....	1	1	2
OTHER DISEASES:—			
Scrofula and Epithelioma .....	1	...	1
Colloid Cancer and Melancholia .....	...	1	1
Broken Ribs .....	2	...	2
Total .....	11	6	17
Ascertained by <i>post mortem</i> examination .....	9	5	14

TABLE VII.,

*Showing the Length of Residence in those Discharged Recovered, and in those who have Died during the Year 1877.*

LENGTH OF RESIDENCE.	RECOVERED.			DIED.		
	M.	F.	Total.	M.	F.	Total.
Less than 1 month .....	...	...	...	2	...	2
From 1 to 3 months .....	2	1	3	2	...	2
„ 3 to 6 „ .....	...	3	3	2	1	3
„ 6 to 9 „ .....	...	4	4	...	...	...
„ 9 to 12 „ .....	1	1	2	1	...	1
„ 1 to 2 years .....	1	2	3	...	2	2
„ 2 to 3 „ .....	1	1	2	1	1	2
„ 3 to 4 „ .....	...	1	1	...	...	...
„ 4 to 5 „ .....	...	1	1	...	...	...
„ 5 to 6 „ .....	1	...	1	...	...	...
„ 6 to 7 „ .....	...	...	...	1	...	1
„ 7 to 8 „ .....	...	...	...	...	1	1
„ 8 to 9 „ .....	...	...	...	1	1	2
„ 9 to 10 „ .....	...	...	...	...	...	...
„ 10 to 11 „ .....	...	...	...	...	...	...
„ 11 to 12 „ .....	...	...	...	...	...	...
„ 12 to 13 „ .....	...	...	...	1	...	1
Total .....	6	14	20	11	6	17



TABLE VIII.,

*Showing the duration of the Disorder on Admission in the Admissions, Discharges, and Deaths during the Year 1877.*

DURATION OF DISEASE ON ADMISSION, IN FOUR CLASSES.												
CLASS.	ADMISSIONS.			DISCHARGES.						DEATHS.		
				Recovered.			Not Recovered.					
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
FIRST CLASS—First attack, and within three months of admission .....	20	10	30	5	5	10	4	2	6	5	2	7
SECOND CLASS—First attack upwards of three months and within twelve months of admission .....	2	2	4	...	2	2	1	...	1	1	...	1
THIRD CLASS—Not first attack, and within twelve months of admission.....	6	6	12	...	5	5	...	...	...	2	1	3
FOURTH CLASS—First attack or not, but of more than 12 months before admission ...	4	4	8	...	...	...	1	1	2	2	2	4
Not known ... ..	3	1	4	1	2	3	...	...	...	1	1	2
Total .....	35	23	58	6	14	20	6	3	9	11	6	17

TABLE IX,  
*Showing the Ages of the Admissions, Discharges, and Deaths during the Year 1877.*

AGES.	ADMISSIONS.			DISCHARGES.						DEATHS.		
				Recovered.			Not Recovered.			M.	F.	Total.
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.			
Less than 20 years... ..	1	1	2	...	...	...	...	...	...	...	...	...
From 20 to 30 years .....	12	8	20	2	6	8	2	...	2	1	...	1
" 30 to 40 " .....	9	3	12	3	2	5	4	...	4	2	..	2
" 40 to 50 " .....	4	4	8	1	1	2	...	...	2	2	1	3
" 50 to 60 " .....	4	5	9	...	4	4	...	...	1	2	2	4
" 60 to 70 " .....	4	1	5	...	...	...	...	...	...	3	2	5
" 70 to 80 " .....	...	1	1	...	1	1	...	...	...	...	...	...
" 80 to 90 " .....	1	...	1	...	...	...	...	...	...	...	1	1
Unknown .....	...	...	..	...	...	...	...	...	...	1	...	1
Total .....	35	23	58	6	14	20	6	3	9	11	6	17



TABLE X.,  
*Condition as to Marriage in the Admissions, Discharges, and Deaths during the Year 1877.*

CONDITION AS TO MARRIAGE.	ADMISSIONS.			DISCHARGES.						DEATHS.		
	M.	F.	Total.	Recovered.			Not Recovered.			M.	F.	Total.
				M.	F.	Total.	M.	F.	Total.			
Married .....	15	4	19	2	5	7	3	1	4	6	3	9
Single ..	19	16	35	4	8	12	3	1	4	4	1	5
Widowed.....	...	3	3	...	1	1	...	1	1	...	2	2
Unknown .....	1	...	1	...	...	...	...	...	...	1	...	1
Total .....	35	23	58	6	14	20	6	3	9	11	6	17

TABLE XI.,

*Showing the alleged Causes of the Mental Disorder in the Admissions, Discharges, and Deaths during the Year 1877.*

CAUSE.	ADMISSIONS.			DISCHARGES.						DEATHS.		
	M.	F.	Total.	Recovered.			Not Recovered.			M.	F.	Total.
				M.	F.	Total.	M.	F.	Total.			
Paralysis.....	6	...	6	...	...	...	...	...	...	4	...	4
Brain disease .....	1	...	1	...	...	...	...	...	...	1	...	1
Old age .....	1	1	2	...	1	1	...	...	...	...	3	3
Epilepsy .....	5	...	5	...	...	...	...	...	...	...	...	...
Intemperate drinking .....	7	3	10	3	6	9	2	...	2	...	...	...
Uterine disorder .....	...	4	4	...	1	1	...	...	...	...	...	...
Syphilis .....	1	...	1	...	...	...	...	...	...	...	...	...
Change of life .....	1	5	6	...	1	1	...	3	3	...	...	...
Sexual excess.....	2	...	2	...	...	...	...	...	...	...	...	...
Poverty .....	...	1	1	...	...	...	...	...	...	...	...	...
Fever .....	1	...	1	...	1	1	...	...	...	...	...	...
Overwork .....	...	...	...	...	1	1	...	...	...	...	...	...
Masturbation.....	...	...	...	1	...	1	2	...	2	...	...	...
General paralysis .....	...	...	...	...	...	...	2	...	2	1	...	1
Over-lactation .....	...	...	...	...	...	...	...	...	...	1	...	1
Anæmia .....	...	...	...	...	...	...	...	...	...	...	...	...
Hereditary .....	1	2	3	...	2	2	...	...	...	...	...	...
Congenital .....	...	3	3	...	...	...	...	...	...	...	...	...
Unknown .....	9	4	13	2	1	3	...	...	...	4	2	6
Total .....	35	23	58	6	14	20	6	3	9	11	6	17





# NEWCASTLE-UPON-TYNE BOROUGH LUNATIC ASYLUM.

*Average Cost per Week per Patient for the Year 1877.*

Headings of Expenditure.	Amount.	Less Sales.	Average.
	£ s. d.	£ s. d.	s. d.
Provisions.....	2849 0 3	96 14 0	4 7 $\frac{1}{8}$
Clothing .....	760 6 10	2 3 0	1 3 $\frac{1}{8}$
Salaries and Wages .....	1720 8 6	...	2 10 $\frac{3}{8}$
Necessaries .....	755 17 10	...	1 3 $\frac{1}{8}$
Surgery and Dispensary .....	38 12 7	...	0 0 $\frac{6}{8}$
Wines, Spirits, and Porter .....	73 18 6	1 10 0	0 1 $\frac{4}{8}$
Furniture and Bedding .....	428 19 0	...	0 8 $\frac{5}{8}$
Garden and Farm .....	435 0 11	33 1 4	0 8
Miscellaneous ...	304 8 9	0 9 4	0 6 $\frac{1}{8}$
Building and Repairs .....	1401 19 4	...	2 4
	8768 12 6	133 17 8	14 4 $\frac{6}{8}$
Less by Ordinary Repairs' Account	1401 19 4		2 4
	7366 13 12		
„ Sales .....	133 17 8		
Nett Cost and Average.....	7232 15 6		12 0 $\frac{6}{8}$

DAVID BRODIE,

Clerk of the Asylum.



# NEWCASTLE-UPON-TYNE BOROUGH ASYLUM—DIET TABLE.

BREAFAST—8 15 A M.										DINNER—1 P M.										SUPPER—6 15 P M.											
Males.					Females.					Males.										Females.											
Bread.	Butter.	Coffee.	Tea.	Bread.	Butter.	Coffee.	Tea.	Bread.	Beer.	Cooked Meat free from bone.	Uncooked Vegetables.	Meat and Potato Pie.	Irish Stew.	Soup.	Fish.	Pudding.	Cheese.	Bread.	Beer.	Cooked Meat free from bone.	Uncooked Vegetables.	Meat and Potato Pie.	Irish Stew.	Soup.	Fish.	Pudding.	Cheese.	Bread.	Butter.	Tea.	
oz.	oz.	Pt.	Pt.	oz.	oz.	Pt.	Pt.	oz.	Pt.	oz.	oz.	oz.	oz.	Pt.	oz.	oz.	oz.	oz.	oz.	Pt.	oz.	oz.	oz.	oz.	Pt.	oz.	oz.	oz.	oz.	oz.	Pt.
Sunday .....	8	1	...	6	...	1	...	...	$\frac{1}{2}$	$4\frac{1}{2}$	16	...	...	...	...	16c	...	...	$\frac{1}{2}$	$2\frac{1}{2}$	12	...	...	...	...	...	16c	...	8	...	1
Monday .....	8	...	1	6	...	...	1	...	$\frac{1}{2}$	...	...	16	...	...	...	...	...	...	$\frac{1}{2}$	$\frac{1}{2}$	...	14	...	...	...	...	...	8	...	1	
Tuesday .....	8	1	...	6	...	1	...	...	$\frac{1}{2}$	...	...	...	20	...	...	...	...	...	$\frac{1}{2}$	$\frac{1}{2}$	...	...	18	...	...	...	...	8	...	1	
Wednesday .....	8	...	...	6	...	...	1	...	$\frac{1}{2}$	3	16	...	...	1	...	...	...	...	$\frac{1}{2}$	$\frac{1}{2}$	3	12	...	...	1	...	...	8	...	1	
Thursday .....	8	1	...	6	...	1	...	...	$\frac{1}{2}$	...	...	16b	...	...	...	...	...	...	$\frac{1}{2}$	$\frac{1}{2}$	...	14b	...	...	...	...	...	8	...	1	
Friday .....	8	...	1	6	...	...	1	...	$\frac{1}{2}$	...	16	...	...	...	16	...	...	...	$\frac{1}{2}$	$\frac{1}{2}$	...	12	...	...	12	...	...	8	...	1	
Saturday .....	8	1	...	6	...	1	...	...	$\frac{1}{2}$	...	...	...	...	1	...	12d	1	...	$\frac{1}{2}$	$\frac{1}{2}$	...	...	...	1	...	12d	1	8	...	1	

Tea for 100 persons to contain 1lb. of Tea, 4lbs. of Sugar, and  $\frac{1}{4}$  gall. Milk. (Milk from the Farm.)

Coffee for 100 persons to contain 1 $\frac{1}{2}$ lbs. of Coffee, 4lbs. of Sugar, 1 $\frac{1}{2}$  gall. Milk. (Milk from the Farm.)

(a). Australian Corned Beef or Mutton.

Meat and Potato Pie for 100 persons to contain 28lbs. of Meat uncooked and with bone, 24lbs. Flour, 3lbs. Suet or Dripping.

Irish Stew for 100 persons to contain same Meat (Australian) and Potatoes as on Sundays.

(b). Australian Meat and Potato Pie for 100 persons to contain same quantity of Meat and Potatoes as on Sundays, with 20lbs. of Flour, Seasoning, &c.

Soup on Wednesday to contain, for 100 persons. Liquor of Meat boiled same day, with 6lbs. Barley, 3lbs. Rice, 3lbs. Peas, 16lbs. Cabbage, Seasoning, &c.

Soup on Saturday to contain, for 100 persons. 12lbs of Hough Beef, with 6lbs. Barley, 3lbs. Rice, 3lbs. Peas, 16lbs. Cabbage, Seasoning, &c.

(c). Rice Pudding for 100 persons to contain 11lbs. Rice, 4lbs. Currants, and 3lbs Sugar.

(d). Dumpling Pudding for 100 persons to contain 24lbs. of Flour, 4lbs. of Preserves, and 3lbs. Suet.

Extra Diet for Workers—2oz. Bread, 1oz. Cheese, and Half-pint Beer for Luncheon.

Extra Diet for Sick and Debilitated—according to Medical Order.



*A Copy of the Entries in the Case Book of  
the Newcastle-upon-Tyne Borough Lunatic  
Asylum, in the Case of T. W., deceased.*

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[It having been suggested that these Entries were written after the Enquiry had been commenced, it is proper to affirm what one would otherwise have thought sufficiently obvious, that they were made from day to day according to the dates given, and that no alterations were subsequently made.]

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Reg. No. 848.

T. W., admitted 29th March, 1877 ; male ; 59 years ; married ; poor ; tailor ; Church of England ; previous abode, 18, Ord Street, Newcastle-on-Tyne. This is the first attack, and he was 59 years old when it supervened. He has never been under treatment. The existing attack has lasted for about three weeks. The supposed cause is not known. He is not subject to epilepsy nor suicidal, but is dangerous to others.

Chargeable to the Newcastle-on-Tyne Union.

Address of his  
Wife.

A. W.,

18, Ord Street,

Newcastle-on-Tyne.

Medical Certifi-  
cate.

1st. Talks nonsense continually ; cries without cause ; says he has bought a large home and is going to drive a pair of horses.

2nd. His wife, A. W, says, " I am afraid of and cannot manage my husband. Last Saturday he knocked me down while I was preventing him from leaving the house undressed."

On Admission.

He was placed in the second ward, and slept in a single room. The heart's action was heard over an extended surface. The pulse was 78 when the patient was sitting



up. The tongue was clean. There was a tumour beneath the angle of the jaw upon the right side. There was a vaccination cicatrix upon the left shoulder. The upper eyelids were swollen and red, and he said that he had not slept well for some time past, and that he had suffered from a pain in the back, but that it was quite better now. His pupils were contracted, and his gait irregular. His bodily health appeared to be fair. He said that he was a better singer than Jenny Lind, and offered to sing a song. He asked for half a gallon of ale.

Some urine which he passed at 5.0 a.m. was examined at 3.45 p.m. Its sp. gr. was 1010; it was of a pale straw colour, and a white flocculent deposit had been formed; its reaction was acid; and it became clouded upon being boiled, but this appearance disappeared upon adding nitric acid to it. He was in a very excited state during the day, attempting to kick those around him, and threatening to blacken everybody's eyes. He was ordered Chloral Hydrat,  $\text{ʒi.}$ , aquam ad.  $\text{ʒii.}$ , Mft. Haust., to be taken at once (2.30 p.m.). It had very little effect until bedtime, when he fell asleep.

Much quieter during the day, but noisy at bedtime. 31st March.

Remained pretty quiet during the day. 1st April.

Was very excited this morning, and struck T. B. and G. T. upon their heads with his slipper, and without any provocation. The draught (*vide* 30th March) was repeated, and he was put to bed. He commenced crying in a maudlin manner, and remained quiet for the rest of the day. 2nd April.

Was excited in the morning, but having been put to bed and given a draught containing Chloral Hydrat  $\text{ʒi.}$ , aq. ad.  $\text{ʒii M.}$  (at 10 a.m.), he remained quiet until the evening, when he again became excited, when he was given another draught containing Chloral Hydrat grs. 45, aq. ad.  $\text{ʒii M.}$ , after which he calmed down. 3rd April.

He is still kept in bed during the daytime, in a single room in the second ward. At 10.0 a.m. he was given a 4th April.



draught containing Chloral Hydrate  $\text{ʒi.}$ , aq. ad.  $\text{ʒii. M.}$ . At 12.30 p.m. his pulse was 72; temp.  $97.4^{\circ}$  Fahr.; pupils contracted. He was talkative, crying in a maudlin manner. When asked how he was, he said that he never felt better in his life; that the people in Newcastle should not pay any rates, and that he had written a paper to explain the matter, and had shown it to his wife and his friends, but that they could not understand it, and said that he was mad. He said that Newcastle was now completed, and there was no use for any Town Surveyor; that he and his family, of whom five out of eight were living, were going to manage this establishment (*i.e.* the Borough Asylum), and he would add a new wing to it, &c., &c. He remained comparatively quiet during the day; at 8.0 p.m. the pulse was 72, and temp.  $98.4$  deg. Fahr. The pupils were still contracted, but he said he could see better than ever he did. He was then given a draught containing Chloral Hydrat  $\text{ʒfs}$ , aquam ad.  $\text{ʒii M.}$ ; at 10.0 p.m., the pupils were contracted; pulse, 78; temp.  $98.2$  deg. Fahr.; skin cool. He had tossed his bed clothes about, and micturated upon the floor. He was talkative, and slept, while being examined, at intervals.

5th April.

Did not sleep well last night. He was very excited in the morning, and struck T. H. [a patient], who returned the blow; but no injury was inflicted upon either of them. At 9.20 a.m. his pupils were semi-contracted. Pulse 96; temp.  $98.8$  deg. Fahr.; tongue slightly furred. He was then given Chloral Hyd.,  $\text{ʒi.}$  aq. ad.,  $\text{ʒii. Mft.}$  Haust., and put to bed. The draught did not take much effect upon him during the forenoon, and he became very violent at about 12. At 12.10 p.m. the pupils were unchanged. Pulse 84; temp. 97 deg. Fahr. He was unable to stand, trembled, and was alternately violent, quarrelsome, talkative, sleepy, and crying. At 8.30 p.m. he was quiet. Pulse 96; temp.  $98.8$  deg. Fahr.; pupils contracted, tongue slightly furred. He was then given a draught containing Chloral Hydrate grs. 45. He was sleeping soundly at 10.15 p.m.



Slept well last night. At 11 a.m. the pupils were contracted. Pulse 78; temp. 98.5 deg. Fahr. He said that he would blacken the ward attendant's eye whenever he got up, but did not attempt to rise. He was then given a draught containing Chloral Hyd.,  $\text{ʒi. aq. ad., ʒii.}$  At 12.45 p.m. the pulse was 72; temp. 97.8 deg. Fahr.; pupils contracted, and he was quiet. At bedtime he became excited and broke his chamber utensil, inflicting a few scratches on his hand. When seen at 8.5 p.m. he was singing loudly. At 8.20 p.m. his pulse was 96, and temp. 96 deg. Fahr., the pupils being semi-contracted. He was then given a draught containing—Chloral Hydrate grs. 45, aq.  $\text{ʒii.}$  As yet he permits his temperature to be taken quietly, being under the impression that his strength is being tested. He became so excited at 9.20 p.m. that his bedstead had to be removed. At 10.30 p.m. the pupils were unchanged, the pulse 84 and the temperature 96.1 deg. Fahr.

He slept during a portion of the night. At 10 a.m. he was asleep; at 11.20 a.m. his pulse was 96, and temp. 98.5 deg. F., and his pupils contracted. At 12.40 p.m. the pulse was 72, temp. 97 F., and the pupils contracted. He remained quietly in bed during the day. At 8.25 p.m. the pulse was 96, and temp. 97.1 deg. Fahr., and the pupils contracted. He was then given a draught containing Chloral Hydrate grs. 45, aq. ad.  $\text{ʒii.}$  He said that he was gimlet-eyed, and could see through a nine-inch plank. At 10.25 p.m. he was asleep.

He did not sleep well during the [night]. He was noisy and became very excited at 2 a.m. At 10.25 a.m. his pulse was 84; temp. 96.5 deg. Fahr., and the pupils very much contracted. He was then given a draught containing Chloral Hyd.  $\text{ʒi., aq. ad. ʒii. M.}$  He remained quiet during the day. At 9 p.m. his pulse was 82; temp. 98.5 deg. Fahr. The pupils were contracted, and he was quiet. Draught to be discontinued.

He did not sleep well during the night. At 11 a.m. the

6th April.

7th April.

8th April.

9th April.



pulse was 76, the temp. 99·1 deg., and the pupils semi-contracted. He continued very quiet during the day. At 8·20 p.m. the pulse was 82; temp. 99·1 deg. Fahr; the pupils contracted, and he was quiet. Said that he was going to turn the patients all out to work, to enlarge the Asylum, and to get "a fresh lot" in.

10th April.

Did not sleep much during the night. This morning he could not stand, owing, as he said, to his legs being cramped. He stated that he had been in great pain all night with cramps in every portion of his body. At 10·50 a.m. his pulse was 77 and felt like a piece of whip cord. His temperature in the right axilla was 98·8 deg. F., and in the left 98·5 deg. Fahr.; both pupils were equally contracted, and his face very anæmic. His tongue was clean. His sphincters were relaxed, and he passed his urine, &c., in bed. His left side appeared much colder [than] the right to the touch. In the afternoon he was somewhat better and was able to walk, and the sphincters had resumed their tone in a great measure. At 8·20 p.m. his pulse was 94, temp. 99·2 deg. Fahr., and his pupils contracted. He was excited, and had evidently been knocking against the door, as he had burst a small collection of pus, which had formed on the back of his hand, by doing so.

11th April.

Did not sleep during the night. He was noisy, and damaged his bed. In the morning he was very excited, tearing up all his clothes and bedding into strips and tying them round his legs and feet. His pulse was 82 and his pupils contracted. It was impossible to ascertain his temperature. He was put into a strong dress and given Chloral Hydrate ʒss. aq. ad. ʒii. Mft. Haust.

12th April.

Slept during a portion of the night, and was pretty quiet during the day.

13th April.

Did not sleep well last night, and vomited at 9·30 p.m. He has been very quiet during the daytime. His room was in a very dirty state this morning.

14th April.

Did not sleep well last night. He cannot retain his



urine, and is unable to stand. He still suffers from many delusions, the principal one being that he owns this institution, and is going to turn it to some other purpose than that for which it was designed. His pupils are still contracted. Ordered a pint of beef tea (extra) per diem.

Did not sleep well during the night, and was found to be wet at 6 a.m. Became very excited about 1 p.m., endeavouring to leave his room and shouting violently at the other patients. He was ordered Tinct. Cannabis Indicæ ʒi. Potass Bromidi ʒss. Aquæ ʒvii. Mft. Haust, to be taken immediately. After receiving the draught he became more composed and slept for a considerable time. 15th April.

Did not sleep well, was found to be wet at 6 a.m. He appeared to be stronger to-day and more excited. At 12 (noon) he was placed in seclusion, to prevent the intrusion of others. He damaged the woodwork of the single room in which he was, and had to be removed to another. His speech has become very peculiar. He slurs over some of the syllables of nearly every word of any length. His language is most incoherent. At bedtime he was so excited that the draught (15th April) had to be repeated. He suffers from almost complete paraplegia. 16th April.

Did not sleep during the night. Was noisy and would not remain in bed. When visited in the morning, he was found sitting on the floor without any clothes, and appeared to be under the delusion that he was in his own house, and that his wife had a tea party up stairs, and that the persons whom she had invited were making a great disturbance. He was anxious to assure the medical officer that he was not to blame for the disturbance because his wife had invited these persons without his knowledge or consent. He was so excited that it was found necessary to repeat the draught (15th April). After receiving the draught he slept for some time. He was very excited during the day and was placed in seclusion for two hours. At 8 p.m. his room was in great disorder, he having torn 17th April.



up everything and scattered the straw out of his bed in every direction. He was ordered Tinct. Cannabis Indicae  $\zeta i$  Potass, Bromid  $\zeta ss$  aq. ad.  $\zeta ii$  Mft. Haust, to be taken at once. This had the effect of causing him to sleep. Owing to his urine constantly dribbling from him it was suspected that his bladder was distended from paralysis, and upon examination it was found to be enormously distended.\* A catheter *à boule* (equal to No. 10 gum elastic) was introduced and about 55 ounces of urine were withdrawn, with apparently great relief to the patient, who said that it was better done than he could have done it himself. The urine was of a smoky orange colour. It had a slightly ammoniacal odour, but an acid reaction. Its sp. gr. was 1012 and no albumen was detected. There is a patch upon the external malleolus and another on the outside of the left foot which may be either a contusion or incipient gangrene, but most probably the latter.

18th April.

Did not sleep well during the night. At the morning visit about a pint of urine, and at eight p.m. about half a pint. The urine was of a lighter colour upon each occasion than last night. He has taken his food better to-day than usual, and been much quieter. Both his feet and ankles are in a state of gangrene, and his legs are much colder than the rest of his body. His bowels not having been moved for some time, he was ordered an ounce of castor oil.

19th April.

Was noisy, and did not sleep well during the night. Suffers much from thirst. Ordered a pint of porter (extra) per diem. About a pint of urine was drawn off night and morning. The castor oil not having operated, the dose is to be repeated to-night.

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\* Some objection was taken to this circumstance, as implying that the condition of the bladder had been neglected by the Medical Officers. The truth is that the bladder was examined daily from the first date of his being found wet, and that until this date there was no distension nor dribbling; previously he had been wet at intervals and dry in the meanwhile, and this was the first day on which the "constant dribbling," &c., indicating paralysis of the bladder, was present.



Slept during a portion of the night. About a pint of dark smoky-coloured urine, with a strong ammoniacal odour, was drawn off this morning. The castor oil operated freely. His bed has not been found wet since the catheter has been used. At 8.30 p.m. more than a pint of very dark reddish brown urine was drawn off. Owing to the castor oil having operated too freely, it was found necessary to order him Tinct. Opii m 60, Acid Sulph dil., m 20, Aquam ad. ʒiss. Mft. Haust, to be taken at bed time. 20th April.

Slept well last night. Was found to be dirty at 12.0 and 6.0 a.m. The diarrhoea has ceased to-day. This morning he appeared to be more sensible than usual, but very drowsy. About three-quarters of a pint of very dark-coloured urine was drawn off at the morning visit. The urine has a very strong ammoniacal odour. The legs, which are not improved, were bandaged with flannel rollers, cotton wadding having been applied over the feet and ankles. A hot foot warmer was applied to the feet. These applications would have been applied sooner but for his restless and destructive disposition; but now he does not appear to be capable of interfering with the dressings. More than a pint of urine, of a lighter colour, was drawn off at 8.20 p.m. He is beginning to be sensible of the pain in his legs. He recognised his brother-in-law, who visited him to-day. His brother-in-law stated that W.'s father had died from paralysis, and that W. himself had suffered from an affection of the spine for twelve months before his admission to the Asylum. 21st April.

Slept well last night, and was found to be dirty at 10.0 p.m. and at 6.0 a.m. The urine was drawn off in the morning and at night—there was somewhat less than a pint in the morning and more than a pint in the evening. 22nd April.

Did not sleep well. Was noisy during the night, and was found to be dirty at 10 p.m. and 2 a.m. He suffers greatly from thirst, and is beginning to suffer greatly from pains in his legs; the skin is beginning to give 23rd April.



way over the outer surface of his left foot and the toes of his right foot. The feet are very black, and the tissues are mortifying as far as the ankles, and some black circular sloughs are observable about the knees. About a pint and a half of urine was drawn off in the morning. It is still very dark and ammoniacal, but not so much as it was. Carbolic oil (1 to 30) has been applied over the places where the skin has given way or is about to give way, and the cotton wool and flannel rollers applied as before. The beef tea has been increased to two pints daily. His appetite is still very fair. At 8.30 p.m. about a pint and a half of urine was drawn off. He is again suffering from diarrhoea, and the draught of the 20th is to be repeated. Sensation is returning to his limbs. He says that he feels "their form better." His room is to be washed out with carbolic acid and warm water. Some bed sores which have formed over the gluteal region are to be dusted with equal portions of oxide of zinc and starch powder.

24th April.

Slept during a portion of the night. Says that he was in London and Paris, &c., last night. When it was suggested that he had been dreaming, he admitted that he had. About a pint and a half of dark coloured urine was drawn off at the morning visit. He suffers greatly from thirst. Nearly two pints of urine were drawn off at 8.45 p.m. As he appeared to be in great agony from pains in his thighs and legs, probably reflected from the spinal cord, he was ordered Tinct. Belladonnæ mxx. aq. ad. ʒi. Mft. Haust. to be taken at bed time.

25th April.

Did not sleep well last night, and was found to be dirty at 4 a.m. Nearly two pints of urine were drawn off at the morning visit. The urine is of a lighter colour. His mental state is worse. He was ordered Tinct. Belladonnæ, Tinct. Ferri Perchlor, āā ʒi. Æther chlor ʒss. aquam ad. ʒviii. Mft. Mist. ʒi. three times daily. Nearly two pints of urine were drawn off at the night visit. He is full of his old delusions.



Did not sleep well during the night. The urine was drawn off night and morning. It is becoming much clearer; but the last few drops contain a white matter, showing that there is a slight cystitis. 26th April.

The mixture which he was ordered on the 25th, although it appeared to cause a slight improvement in his bodily condition, yet counteracted that improvement by the intense mental excitement which it caused. He began to knock himself about the room, masturbate, tear up his clothes, threaten and strike at anybody who came near him. The mixture was therefore discontinued, and the following ordered Quin. Sulph. gr. xx., Acid Nit. Mur. dil.  $\mathfrak{z}$ i. Aq. ad.  $\mathfrak{z}$ viii. Mft. Mist.  $\mathfrak{z}$ i., at 7.30 a.m., 12.30 p.m., 5.30 p.m., and 8.30 p.m. 30th April.

He is still very strong, although the gangrene is steadily creeping upwards, and there is a large black slough over the gluteal regions. He is constantly dirty, and the stools are of a black colour, liquid, and have a very foetid odour. The cotton wool is not applied now, but bandages soaked in Carbolic Oil (1 to 30) are sewed on the legs, as he draws up his legs and tears off the dressings frequently. 2nd May.

No improvement. The sloughs about the feet and ankles are separating. The muscles of the leg are beginning to waste away. Suffers greatly from thirst, but he seldom complains of any pain, and fancies that he is getting better. Suffering from a frequent, short, hacking cough, and from diarrhoea. The beef tea has been increased to three pints, and the porter to two pints *per diem*. The following mixture was ordered Quin Sulph.  $\mathfrak{z}$ i. Acid. Nit. Mur. dil.  $\mathfrak{z}$ ij. Aquam ad.  $\mathfrak{z}$ viiij. Mft. Mist.  $\mathfrak{z}$ j four times daily, to be taken as before. 3rd May.

The diarrhoea has ceased, but he is becoming quite exhausted from the constant discharge and sloughing, caused by the gangrene. The olecranon process of the right elbow has been laid bare. The extensor muscles, and some of the bones of the left foot, as also the lower end of the right tibia are bare. The sacrum is exposed, and 7th May.



the gluteal muscles are sloughing away. Some of the bones of the foot are necrosed. The odour caused by the sloughing is intolerable. The sores are washed with Sol. Acid Carbol (1 to 40), and then dressed with charcoal and Carbolic Oil (1 to 30), but although these means cause some small portions to heal, yet the sloughing continues to attack other portions. He does not appear to have much (if any) pain in the parts that are dying, although he says that he can feel as far as the knees (which have begun to slough). He takes his food pretty well, and suffers greatly from thirst. Special watching has been commenced to-night.

8th May.

Sinking. Slight stertor in his breathing.

9th May.

Died at 8.35 a.m. in the presence of attendant Nicholas Veale.

Apparent cause of death—Gangrene, resulting from Paraplegia, as certified by William J. Brown, M.B., L.R.C.S.I., Assistant Medical Officer.

10th May.

*Vide* P.M. Register, page 75.



*A Copy of the Entries in the Post-Mortem Register of the Newcastle-upon-Tyne Borough Lunatic Asylum, in the case of T. W., deceased.*

Name, T. W., aged 59 years, height 5ft. 11in. Date, 10th May, 1877, at 11.25 a.m. o'clock, being 26½ hours after death. Reg. No. 848.

	WEIGHTS.				OZ.
Encephalon	...	...	...	...	51½
Cerebellum	...	...	...	...	6½
Heart	...	...	...	...	12
Right Lung	...	...	...	...	27
Left Lung	...	...	...	...	15
Liver	...	...	...	...	65
Spleen	...	...	...	...	5½
Right Kidney	...	...	...	...	5½
Left Kidney	...	...	...	...	5¾

There was no *post-mortem* rigidity. The body was well nourished as regards the trunk and upper extremities; but the lower extremities and face were emaciated. The bones of some of the fingers, of the right elbow, of the sacrum, and lower portion of the lumbar vertebræ, of both ankles, and outer side of the left foot had been exposed by the sloughing away of the soft parts. The bones of the ankles and left foot had been partially necrosed. The extensor tendons upon the left foot were exposed. There was a large black slough over the upper surface of the right foot. The toes of both feet were in a state of sphacelus. The knees were covered with black gangrenous patches. There was an extensive dark patch upon the left thigh, showing that decomposition had already set in there. The odour from the body was intolerable. The dura mater was adherent to the calvarium and the arachnoid could not be dissected from the dura mater. The three mem-



branes were united over the centre of both hemispheres, and the pia mater was adherent to the brain substance so firmly that a small portion remained behind, upon attempting to separate it from the brain. There were extensive organised deposits of lymph beneath the pia mater. The brain substance was firm. The convolutions were flattened and more intricate (at least appeared so) than usual. The yellow granules contained in the choroid plexuses in the lateral ventricles were firmer and larger than usual, being about the size of a pea. They had a very gritty feel and were firmly attached to the floors of the ventricles. The walls of the ventricles were much firmer than usual. There was no fluid in the ventricles. The spinal cord was very anæmic, and its sheath was very loosely attached to it. The lungs were not adherent to the pleuræ, and, with the exception of a slight congestion in the lower lobe of the right lung, the lungs were in much better condition than they usually are, being almost normal. The valves of the aorta were competent. There was a large white patch upon the anterior surface of the right ventricle. The blood in nearly all the vessels was coagulated. The liver was friable, its capsule easily detached. It was nodulated upon its surface. It had a cartilaginous feel upon section, and its colour was yellow, resembling beeswax. The spleen was shrivelled and of a pale pink colour. The stomach contained a large clot, resembling Liebig's extract of beef. The stomach was dilated (enormously) with gas. The intestines were black and gangrenous. The cartilages of the ribs were ossified. The coats of the bladder were hypertrophied.



2

