

**Twentieth annual report of the Somerset County Pauper Lunatic Asylum :
from the 1st of January to the end of the year 1867.**

Contributors

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TWENTIETH

ANNUAL REPORT

OF THE

SOMERSET COUNTY PAUPER

LUNATIC ASYLUM,

From the 1st of January to the end of the Year.

1867.

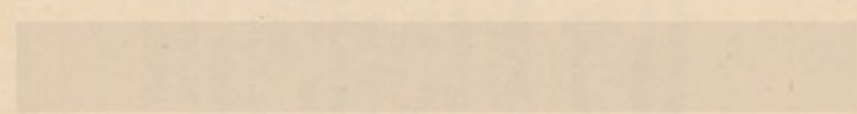
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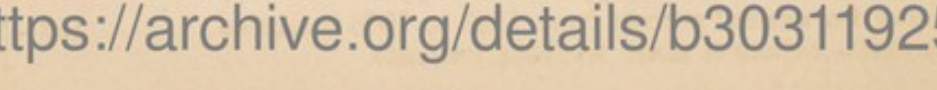
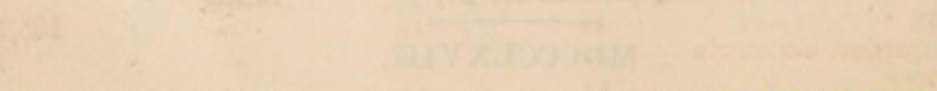
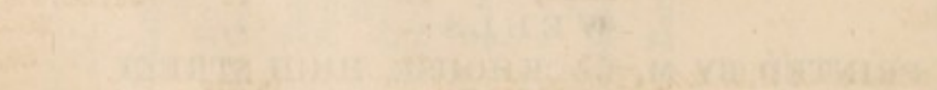
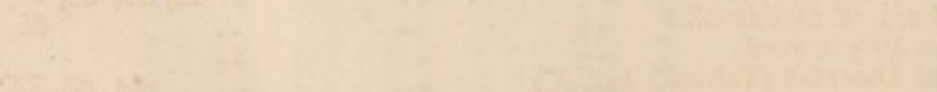
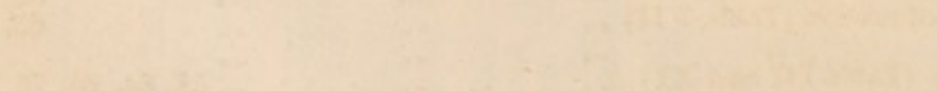
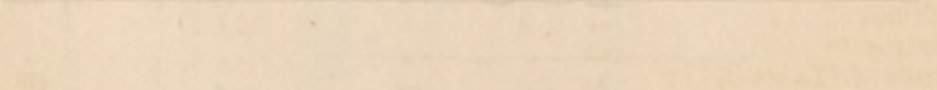
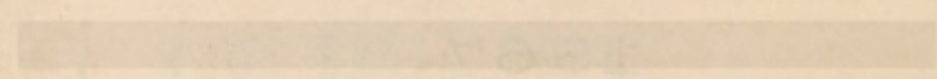
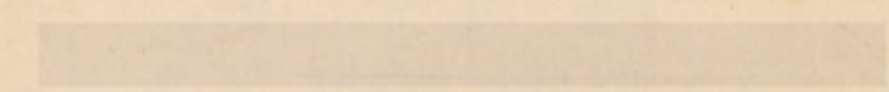
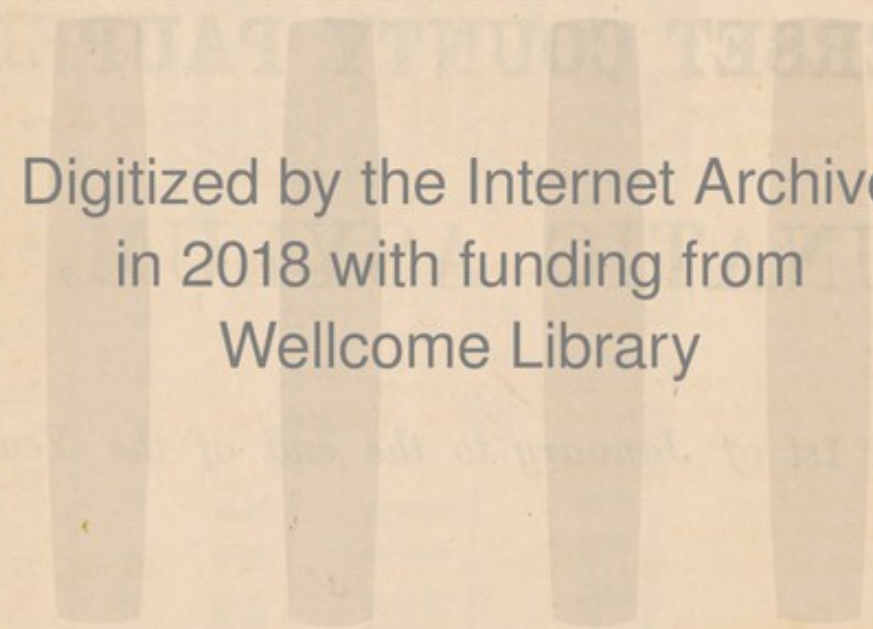


TWENTIETH

ANNUAL REPORT



SOMERSET COUNTY PAIR

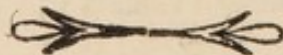


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OF THE
Somerset County Pauper Lunatic Asylum,
1867.

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OF THE
1867

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TWENTIETH ANNUAL REPORT

OF THE

VISITORS

OF THE

SOMERSET COUNTY LUNATIC ASYLUM :

PRESENTED TO THE

COURT OF QUARTER SESSIONS,

HELD AT TAUNTON, IN THE SAID COUNTY, ON TUESDAY
THE 1ST DAY OF JANUARY, 1868.

The Committee have again the satisfaction of reporting that the asylum has been healthy during the past year, and free from any epidemic or contagious disease, and that the deaths have been below the average.

The detached hospital on the female side has been opened for patients.

The new wing on the male side is nearly complete.

The committee have for the first time since the asylum was opened made an order on the County Treasurer for £400, the maximum amount which they can apply to improvements without obtaining leave of Quarter Sessions.

Some progress has been made in quarrying stone on a part of the site to be occupied by the new Chapel.

The Commissioners in Lunacy visited the house at the end of last month and made a minute expressing their approval of the state of the asylum.

The Committee have to report a resolution adopted unanimously at the meeting in November, (11 members of the committee being present) granting under the provisions of the Acts of Parliament a retiring pension of £450 to Dr. Boyd as the Superintendent of the county asylum, to which they ask the assent of the Court.

Dr. Boyd was appointed at Midsummer 1847, and came into residence in December to prepare for the opening of the asylum on the 1st of March 1848. The committee will part with him under the recollection of 20 years of uninterrupted harmony and entire confidence, during which they have observed his thoughtful care of the patients, and for the improvement and enlargement of the asylum, whereby the county property has been much increased in value, while the expenditure has been kept below the average of other asylums.

The Committee have received resolutions from the Clutton Board of Guardians, recommending the establishment of another asylum for the reception of chronics and idiots, and hinting at the expediency of a school for idiot children. The resolution is appended to the Report. The committee recognize the wise and liberal spirit shewn by this Union,

and especially in recommending that the benefits of the school for idiots should not be confined to paupers. The principle implied in this recommendation is one of very wide application, and the committee are satisfied that it might be acted on in such a manner as largely to relieve non-pauper lunatics, and at the same time diminish the cost of the paupers.

The committee have again the satisfaction of expressing their approval of the conduct of the officers and attendants.

On the reappointment of the committee they request that GENERAL GORE MUMBEE, and SIR. E. STRACHEY, be added to it.

F. H. DICKINSON,
E. H. CLERK,
J. WOLLEN,

WILLIAM F. KNATCHBULL,
EDWARD A. FREEMAN,
R. KING MEADE KING,

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The committee have again the satisfaction of ex-
pressing their approval of the conduct of the officers
and attendants.
On the recommendation of the committee they
request that General GORE, Messrs. and Sir
M. STANLEY be added to it.

- WILLIAM F. KENTON
- EDWARD A. HARRIS
- WILLIAM W. KING

The committee have the honor to acknowledge the receipt of your letter of the 24th inst. in relation to the proposed changes in the management of the school for idlers, and in reply to inform you that the committee have considered the same, and are of the opinion that the same should be adopted, and that the same should be acted on in such a manner as to relieve non-pauper idlers, and at the same time diminish the cost of the paupers.

The committee have again the satisfaction of expressing their approval of the conduct of the officers and attendants.
On the recommendation of the committee they request that General GORE, Messrs. and Sir M. STANLEY be added to it.

Proposed County Idiot Asylum.

Resolutions adopted by the

Clutton Board of Guardians,

December, 1867.

“ That it is very desirable that some special
‘ provision shall be made for the care, and in some
‘ cases for the education of the Idiot and Imbecile
‘ Inmates of the Workhouse, and for many Pauper
‘ Idiots who at present reside with their parents.”

“ That this most desirable and necessary ob-
‘ ject can be best and most economically attained
‘ by the establishment of an Asylum in connection
‘ with the existing County Lunatic Asylum.”

“ That it is the opinion of this Board that a large
‘ number of harmless Lunatics who are at present
‘ kept in the Lunatic Asylum, might be kept in
‘ an Idiot Asylum at a considerable reduction of
‘ the present cost of their maintainance.”

“ That it is the opinion of this Board that in
‘ any county Idiot Asylum which may be estab-
‘ lished, arrangements should be made for the
‘ admission of Children of the Middle Classes at the
‘ expense of their Parents.”

Proposed County Idiot Asylum

Resolutions adopted by the

Clinton Board of Guardians

December, 1887

"That it is very desirable that some special provision shall be made for the care, and in some cases for the education of the Idiot and Imbecile inmates of the Workhouse, and for many Pauper Idiots who at present reside with their parents."

"That this most desirable and necessary object can be best and most economically attained by the establishment of an Asylum in connection with the existing County Lunatic Asylum."

"That is the opinion of this Board that a large number of harmless Lunatics who are at present kept in the Lunatic Asylum, might be kept in an Idiot Asylum at a considerable reduction of the present cost of their maintenance."

"That it is the opinion of this Board that in any county Idiot Asylum which may be established, arrangements should be made for the admission of Children of the Middle Class at the expense of their Parents."

TWENTIETH ANNUAL REPORT
 OF THE
SOMERSET COUNTY LUNATIC ASYLUM
 FOR THE YEAR 1867.

BY R. BOYD F.R.C.P.
 PHYSICIAN AND SUPERINTENDENT.

PART I.

The Admissions, Discharges, and Deaths during the year have been as follows:—

	MALES.	FEMALES.	TOTAL.
Remaining in the Asylum on the 31st December, 1866	216	271	487
Cases admitted in 1867	66	101	167
„ discharged, recovered	31	48	79
„ „ relieved	5	7	12
„ „ not improved	2	0	2
Died....	21	27	48
Remaining on the 31st Dec. 1867....	223	290	513

Showing an increase in the year of 7 males and 19 females, 1 male and 3 female patients out on probation.

Both the admissions and deaths have been greater amongst females than males, which is unusual, amounting to 35 in the admissions, and 6 in the deaths.

Of the 513 patients remaining, there are only 16 per cent. in whom there is a prospect of ultimate recovery; 26

per cent. are idiots and epileptics, 15 per cent. are sick and aged, 43 per cent. may be considered incurable ; nearly 19 per cent. of these are quiet and harmless.

Should an asylum for idiots be built, about 50 patients from the county lunatic asylum, and about 170 of the same class in the union workhouses, or lodging with relatives and friends, could be removed to it.

In this the twentieth annual report of this asylum, which it has been my duty to present to the Visitors, I propose to give a summary of the state of the asylum, and the work accomplished during that period. Under Providence there has never been any epidemic; or any accident in connexion with the building operations, in all of which the patients have been more or less employed.

In the first place, to begin by enumerating the building alterations, and repairs, which, until the present year, have been paid for out of the building fund. This fund was established in 1848, soon after the opening of the asylum, from the excess charge for patients belonging to non-contributing counties and boroughs. It was stated in the first annual report that 203 patients had been removed from licensed houses, and 81 received from different unions ; these were nearly one half of the lunatics and idiots belonging to the county, as shown by the published returns of the Commissioners in Lunacy for 1847. The accommodation provided was for 350 ; and the Committee of Visitors, finding that there was room, agreed to receive a limited number of patients from the Boroughs of Bath and Bridgwater for a definite period.

In the third annual report it was shown that the numbers had increased, leaving accommodation for only 31 patients. The garden and boundary walls advanced, and a cottage was built giving additional accommodation, by which means a small dormitory was obtained on the female side, and the care of the higher entrance, and the superintendence of the weigh-bridge provided for.

In the fourth report it is stated that the female patients already exceeded the number contemplated in the first arrangement of the building, and again in the fifth report it appears that the number had further increased.

In the sixth report it was stated that the patients were 13 in excess of the number for which the asylum was originally constructed.

In the seventh report it is stated that a cottage for an attendant, and a dormitory for ten working patients, had been constructed in the farm yard, and paid for from the building fund. These additions were approved of by the Commissioners in Lunacy. The basement story under the front wing on the male side was made available for the larder, dairy and store rooms, by the removal of a quantity of earth, and the introduction of several single light windows at the back, which enabled the old offices to be appropriated for the accommodation of patients.

In the eighth report it is stated that minor alterations had been made on the premises, principally in the farm yard; additional rain water tanks had also been made in the kitchen yard (now the dining hall) for the use of the laundry and brew-house.

By the ninth report, further additions and improvements were made in the farm yard. By the removal of several partitions on the upper floor of the west wing the dormitories were thrown into one long room which gave sleeping accommodation for 70 patients.

In the tenth report it is stated that the Committee and Commissioners in Lunacy approved of the alterations in the dormitory of the west wing, and the same alterations were carried out on the female side. It was resolved that the principle of association should be further extended by building a large room for assemblies where the patients of both sexes might have their meals together, and by thus providing more

day room enable the Committee to accommodate many more patients at a very small expense, and without making any demand upon the county. Excavations for new steam boilers, and another rain water tank behind the west wing were made.

By the eleventh report it appears that the boilers in the old kitchen were removed, and it was converted into a temporary dining hall for 130 patients. Two new bath rooms and lavatories were built, and the kitchen passages covered with glass; and 267 yards of boundary wall along the Frome road built.

From the twelfth report it appears that room had been provided for 440 patients, 90 more than the number originally built for, and that when the alterations then in progress were completed room could be made for 500.

It is stated in the thirteenth report that the new dining hall was completed; some of the offices were converted into dormitories for 40 beds close to the laundry. New pigsties, yard, and root shed had been constructed near the farm yard: also, on the men's side, a new wash house, drying closet, coal house, and two cottages at the back gate were built.

From the fourteenth report, it appears that in consequence of a fire which destroyed part of the drying room, improvements were made in the laundry, including iron roofs, iron drying horses, the introduction of steam instead of open fires for the boilers, two iron, and half-a-dozen slate cisterns; a double action pump, and a wringing machine were provided.

The fifteenth report of the Committee of Visitors contains an abstract of the New Lunacy Act 25 & 26 Vic. c. 111, in which power is given to form a building fund out of the extra charges made for patients sent from places which did not contribute to the building of the Asylum. Such a fund as now sanctioned by Act of Parliament was

established soon after the opening of this asylum through the judicious care of Mr Moody, which has enabled the Visitors, without drawing upon the county, to provide the additional accommodation already referred to. The present Chairman has always taken a great interest in the receipts and expenditure of this fund and in the same report has given the following summary:—In all about £8,600 have been received and nearly the same sum expended, since the house was opened in March 1848. During the first six years, about £2,000 were spent in completing the boundary wall and lodge, in levelling and quarrying, in getting the ground in order in front of the house, and in completing some of the out-buildings behind. During the next three years, considerable improvements were made in the farm-yard, and a dormitory was then built at an expense of about £1,000, and the large dormitories were formed in the house by taking down wooden partitions; after that the kitchen and workshops were removed, the laundry—after the fire—was repaired, steam was introduced instead of open fires for the boilers, iron was substituted for wood in the roof, and lastly the large dining and recreation hall was built. The house was built for 350 patients and cost £52,000. At the end of 1859 there was room for 440, and 520 can now be accommodated, at an expense of about £8,000 for the additional 170 patients. No charge has been made on the County Rate for repairs and alterations; and it is right to add that land has been bought which cost rather more than £3,000. It is satisfactory that so large an increase has been secured at so small a cost, and that much of what has been done, has been conducive to the good of the patients; the masons, carpenters, &c., who happened to be in the Asylum, being employed on their proper work, and thus made to assist them.

In the sixteenth report, it is stated that there was only room for ten female patients, and it was considered desirable by the Visitors that a place should be provided for chronic cases. The purchase of a house and estate then in the market, within a distance of three miles from the

asylum was recommended, which would have accommodated 70 patients. The recommendation not meeting with the approval of the majority of the Visitors, fell to the ground, and it was resolved that any additions required for patients should be made by enlargements or alterations of the existing premises. Contiguous to the laundry there were dormitories made for 12 female patients.

In the seventeenth report, it is stated that what is now the new hospital had been partly built, and the new west wing commenced. The asylum contained 528 patients. A Turkish bath was constructed.

In the eighteenth annual report it appears that further additions were made of a new laundry and dormitory to the new Hospital. Earth closets and lavatories were added in the north wing; on the male side, a store room, and a dormitory was fitted up above the female infirmary, &c. A new and enlarged gasometer was put up.

In the nineteenth annual report the new building at the farm is reported as finished, to contain 33 patients, and should any infectious disease break out, to be used as an hospital. The new building on the male side is roofed in, and the fire proof arches are being constructed. This closes the summary of additions and improvements from the opening of the asylum to the end of 1866.

Since the last annual report the detached hospital for 33 patients came into full operation. It is complete in itself, provision being made therein for cooking and washing. It has been occupied now for ten or eleven months by convalescent, orderly, and working female patients. It is to be hoped that it may not be required for the treatment of those contagious or infectious diseases, which have occurred in some other asylums.

The cost of the hospital has been very small, under £20 a bed,—less than half the average cost in workhouses. It would be very desirable to have a second detached

hospital in the event of any epidemic which might spread to both sexes. The existing one is preferred by many patients, to the main building, being more domestic and home like, and the change to it seems to hasten and establish their recovery.

The new west wing for 70 male patients is not entirely fit for occupation. The two attics for about 30 patients and an attendant's room are quite ready, as well as the second floor which will accommodate a similar number. The six single rooms on the ground floor in the corridor which communicates with No. 3 of the old building are being laid, and there are also two large rooms, on the same floor, as well as bath rooms, lavatory, and closets, still in the hands of the workmen. One of these rooms could be conveniently turned into a day and dining room, and the other into a kitchen, if the Visitors would consent to appropriate the new wing to a class of patients above paupers, at a charge of a pound or a guinea a week. By the profits so accruing the building fund might be increased, and the expense of the new chapel repaid.

The conversion of the vacant space in the roof into dormitories which has been approved of on the female side, could be carried out in the same way on the male side, and additional room for 186 patients be thus made at a small cost, so that the new west wing might be used for a middle class of patients above the rank of paupers, and yet not sufficiently rich to be sent to private asylums.

If the proposed attics or dormitories should not prove sufficient for the pauper lunatics of the county, there now remains the raising of the two back, or north wings only one story high, by which room for 90 more, 45 of each sex, 16 in single rooms, and 74 in dormitories, with two day rooms may be made at a little cost. The asylum would then be sufficient for about 800 pauper lunatics; the number at present 523, 186 in dormitories in the attics and 90 by raising the north wing to the same height as the rest of the building, and about 140 of a

class above paupers in the additional wings. A third medical officer would then be required. The profits to the institution from such an arrangement would probably amount to more than £3000 a year. How far this large annual saving might in the course of years be made available for the repayment of the original cost of the asylum, is a question suggested for the consideration of County financiers.

The limestone rock at the east wing, on the female side, is gradually being removed and burned for the lime used in the buildings, so that a similar extension to that on the male side may be made, and the uniformity of the asylum preserved.

An airing court has been made in front of the new hospital, for which it was necessary to divert the road leading to the farm yard.

An epileptic patient has planned and constructed an ornamental basin of brick work for a fountain in front of the house on the female side. In case of fire the ready supply of water might be found very serviceable for the fire engine.

The principal male airing ground has by the removal of a bank of earth (a work of great labour, and done by patients) been extended to the western road, and a building along the boundary wall, 66 feet long, and $13\frac{1}{2}$ feet wide is nearly finished, which will be fitted up, lighted by gas, and heated, to be partly appropriated to the purpose of a skittle alley, and partly as a lavatory and place for changing the shoes and jackets of working patients before going into the dining hall. Along the inner side of the wall between the back road and the new wing a shed supported on the iron pillars which belonged to the old gasometer can be put up, for the masons to dress stones in for the new chapel, the foundation of which is now in process of excavation.

In the farm yard a building 45 feet long by 22 feet wide has been constructed, which affords space for a large quantity of roots below, and has coach house, harness room, and granary above.

In addition to the enlargements and improvements in the asylum and offices appertaining thereto, paid out of the building fund, the Chaplain's residence has also been enlarged, the cost for which will be paid out of the same fund.

PRIVATE PATIENTS.

The necessity for some public provision for a class of patients above the rank of paupers has long been felt, and the attention of Visitors has frequently been directed to the subject. The Lunacy Acts (16 & 17 Vic. c. 97, s. 43) empower the Committee of Visitors to admit patients at their discretion whether paupers from other counties, or persons not paupers, and the only limitation is, that there must be room for the paupers of the county. Some kind of an agreement with the friends or the parish officer is required, and persons not paupers must be admitted under an order from two medical practitioners. There appear to be only two exceptions to this; *wandering* lunatics, and lunatics *not under proper care and control*, are from the necessity of the case, to be sent to the asylum at once whether paupers or not, the former under the same order as pauper lunatics sent from a parish, and the latter under an order from two magistrates and one medical man. If a wandering lunatic cannot be made chargeable to any Union, the county maintains him; a lunatic not under proper care and control must be maintained out of his own property or that of his friends, or from the Union as the case may be.

Frequent applications are made for the admission of private patients, and I am inclined to think that if sufficient room could be found in the county asylum, and proper accommodation provided, the friends of the insane of the middle classes would largely avail themselves of it.

In support of these views, the following appears in the third annual report, p. 9. "No accommodation was intended here for any but paupers, nor could it be made without materially interfering with their proper treatment and comfort. The advantages of a separate institution for those who are able to contribute something towards their own support, has been ably advocated, would tend greatly to their benefit, and would be a humane act towards numerous respectable families who are burdened with the charge of such afflicted relatives, which they can ill afford, but who are unwilling (it being at the same time illegal) to make them chargeable as paupers".

In the twelfth report p. 16, the following statement is made in further reference to this subject.—"Numerous applications have been made since the opening of this asylum, by persons of the middle class, for the reception of friends unable to pay the charges of private asylums, and for others possessing small means of their own. The Visitors of the Gloucester asylum some time ago abolished the wards for private patients in the county asylum, and have since provided a separate hospital for their use at Barnwood. There is very little doubt that if an hospital for private patients should be established by the Visitors in this county, it would soon become self-supporting.

IDIOTS.

By the seventh annual report, it appears there were in the county, in addition to those in the asylum, 170 idiots chiefly living with their friends, periodically visited as paupers by the parochical medical officers. A separate establishment for such cases, where the younger idiots could be educated, is suggested in that report. In the parishes of Chiselborough, Barrington, and Stoke-under-Hamdon idiocy manifests that endemic character called cretenism which is so well known in Switzerland. The removal of such cases at an early age, to an open and elevated situation has been attended with the most beneficial effects. A visit to

the idiot asylum at Earlswood in Surrey, is sufficient to show the wonderful results that may be achieved by proper care and training of boys and girls of this class. Besides school teaching and out of door occupations, the boys are taught tailoring, and shoemaking, and cocoa nut matting is also made in the establishment.

It is stated that in the five counties which form the South Western Division, there are 534 male and 624 female pauper idiots confined in the Union Workhouses, making a total of 1158, distributed as follows:—

	Population.	Males.	Females.	Total.
Cornwall... ..	362,409	51	66	117
Devonshire ...	595,317	183	190	373
Dorsetshire ...	182,193	34	60	94
Somersetshire	457,128	160	177	337
Wiltshire ...	236,027	106	131	237
Total number	...	...	...	1158

From these it would be desirable to separate the children, and for the counties to unite in establishing schools for educating the boys and girls. There would be no object in removing, nor would it be desirable to remove the adult idiots, as they may be allowed to remain with the chronic and incurable insane, in their own counties; and from the high estimate of the number of idiots, as shown in the above figures, it is very likely that chronic cases of dementia in Unions are not distinguished from idiocy.

That public attention has been already awakened to the necessity of increasing the number of such institutions is evidenced by the resolution passed by the Board of Guardians of the Clutton Union, 6th Dec. 1867; a copy of which was sent to the Chairman and is published with the report of the Visitors.

SICK AND INFIRM PATIENTS

With regard to the removal of such cases to the Asylum, it is stated in the report for 1852 that several patients having died within a short time of their reception, "your committee feel called upon to animadvert upon the practice of deferring till so late a period to send such persons to the asylum. It is frequently an unjustifiable infliction of pain to remove them in so weak a condition; it is imposing an unnecessary charge upon unions to subject them to the costs of the removal, when death may be expected so soon to ensue; and it is unjust to the medical officers of your asylum to swell the number of deaths by the transmission of patients, of whose recovery in many instances so little hope can have existed".

It is stated in the report for 1853 that three patients—very infirm, and quite harmless—discharged to the Workhouse were soon sent back again to the asylum and one since died.

By the 8 & 9 Vic. c. 126, sec. 8, 16 & 17 Vic. c. 97, sections 64 & 66, sched. D, also 25 & 26, Vic. c. 111, sec. 8, the retaining of harmless lunatics in workhouses appears to be sanctioned. If any arrangement were made in workhouses, many of which are half empty, it would be necessary to have the lunatics separated from the other inmates, with experienced paid nurses, and a liberal scale of dietary; in fact they would have to be placed under different management, which appears to be the great difficulty in retaining them in the workhouse.

The same arguments for an improved management would equally apply to those requiring *medical relief* for bodily disease as for mental disorder; as has been stated in the 8th report, pages 14 & 15. "Medical relief often comes too late; in some cases from the ignorance, or indifference of the poor themselves, and in others from their

unwillingness to apply as paupers'. Medical relief, separated altogether from *poor relief*, might, under proper management, be granted to the *working classes*, who could not pay for it, in continued illness".

In the 9th report page 7. "Your committee have again to regret that many harmless patients are still sent to the Asylum. Many such are necessarily detained who might be discharged, removed to, and kept at a smaller cost in union houses if proper means were provided in them for their care and treatment. County asylums are gradually becoming places of detention for confirmed lunatics rather than hospitals for the cure of the insane which they were intended to be". In the same report, pages 11 & 12, this subject is entered into more in detail.

In the 15th report, page 24, it is stated "It would be very desirable if the whole of the sick poor could be placed under Visitors, and the contract system for medical relief abolished. No expensive drugs, such as ether, quinine, or cod liver oil—so essential in many diseases—can be afforded, or are generally given under the contract system, and Unions should be bound to supply them. It is a delusion to suppose that the diseases of the poor can be properly treated without such drugs. Surely a sick pauper is as much an object for care as an insane pauper—his life is equally valuable, or more so. A sick man by proper treatment may be restored to health, and his services become at once valuable to the public; this cannot be so strictly applied to insane persons, who when once afflicted, are more or less liable to relapse. It has been stated that the death of a young agricultural labourer at the age of 25, involves a national loss of £246 7s.*

Insanity is often the result of bodily illness, and the disorders of the mind would be mitigated, and the pressure on county asylums lessened, if proper nursing, and medical

* Fourth Report of Medical Officer of the Privy Council.

necessaries were liberally provided at every Union Workhouse. A more liberal provision for the poor in sickness would diminish the number of candidates for the asylum. It should always be remembered that the sick ward of the union is the proper basis of all cure for the sick poor. The question may now be considered in what light is insanity to be regarded, whether altogether as a speciality, or as it more frequently appears to be, merely a symptom of physical disease. The most experienced medical men are of the latter opinion. Our knowledge of the nervous system is still incomplete. Upwards of 900 cases that have died in this institution have been examined by me, besides a considerable number previously in the St. Marylebone infirmary; no special changes were detected to account for the disorder of the mind, but it was generally associated with bodily disease. Insanity may therefore be considered as more sympathetic, or as it is commonly termed functional, than organic, according to my experience. General paralysis of the insane, is, however, an exception, as I shall point out in the second part.

Mr. Hardy's Act of last session is a most hopeful measure for the sick poor in the metropolis. The noble President of the Poor Law Board has signified his intention of speedily introducing a Bill for a better system of medical relief in the provinces. The late inquiries relative to the state of some workhouses in the country, have prepared the public for an entire change in the system.

There are very strong reasons, whilst legislative measures relative to the sick poor are in progress, for directing the attention of Visitors and others to the state of the law regarding the insane poor. Since this asylum has been opened, several Lunacy Acts have been passed, embodied in 3 vols. 1st Lumley's, 2nd Archbold's, and 3rd Fry's. The necessity for all this legislation for insane paupers is not very obvious; they have no property to protect, and as for their personal liberty, the question has not been how to retain them in the asylum, but how to provide for them when there. Any one who has ever visited a county lunatic

asylum and a workhouse would readily perceive why the one is over-crowded and the other comparatively empty, when they compared the cheerful, well furnished apartments of the one, with the dismal bare walls, high windows, and comfortless aspect of the other. Then, as regards the dietary, the contrast between that of the asylum and the union workhouse is not less striking, the former being double that of the latter, (vide 6th annual report, p. 14,) and it has been observed that paupers sent from the unions in a noisy and restless state, frequently recover without any other treatment than good and sufficient diet. A remarkable instance of this occurred recently in an aged man admitted in a very feeble state though noisy; after a few weeks' residence in the infirmary he became quiet and is now recovered. As more than one-fourth of the insane poor are still in workhouses, and there is no room for them in county asylums it will be strange if the law should remain as it is; one proportion of the insane poor under the Poor Law Board, the other under the Commissioners in Lunacy, and each governed by separate Acts of Parliament.*

Visitors have been called upon to build, build, build, until every asylum in the kingdom has been added to, and in some counties enormously increased.

Visitors are aware of the difficulty there is sometimes, in deciding whether the person of unsound mind be strictly a pauper or one not under proper care and control:

* The return which has been issued by the Poor Law Board giving an account of pauperism in England on 1st July, 1867, shows that at that date there were 41,513 insane persons in receipt of relief from the poor rates, of whom as many as 13,103 were in the workhouses. Four years' previously, on 1st July, 1863, the total was only 36,212; the number in both instances being a little below the truth in consequence of the absence of returns from parishes not under Boards of Guardians, containing nearly one per cent. of the population. The increase, more than 14 per cent. in four years, seems large; but many who were formerly regarded as ordinary paupers, and some probably as recently as four years since, are now classed as insane, and the improved treatment of the insane prolongs life. The distribution of the insane is a subject of considerable interest. The return shows the largest proportion of insane paupers in the metropolis, their numbers on the 1st July last amounting to 24

this point must however be settled, as the forms of admission for the one and the other materially differ; the latter requires the signature of two magistrates which it is often difficult or impossible to obtain, and the relieving officer has frequently to travel many miles, and lose much valuable time, perhaps of the greatest importance to the patient's case. The safety of the patient has always been here the first consideration, let the order be ever so informal; 14 days are allowed by law for the correction of such orders, notwithstanding which, it has happened that the time has not been sufficient, and a female patient E. C. admitted in April, 1862, was discharged by order of the Commissioners in Lunacy, removed, and soon after committed suicide. The orders as to the admission of lunatics might be simplified, and the direction of public establishments for the relief of the poor placed more under medical and less under legal control with advantage.

At the annual meeting in 1866 of the Medico-psychological Association, which includes almost all the superintendents of asylums in the United Kingdom, it was unanimously resolved, "that in the opinion of the meeting, the treatment of the insane now in workhouses is not satisfactory, and it is desirable to have the care of all the insane poor of the counties transferred to the Visitors and superintendents of county asylums". The mover of that resolution sent another resolution to be brought forward at the annual meeting the following year, approving of Mr. Hardy's Bill, and praying that it

per 10,000 of population as enumerated at the census of 1861 (or 21·81 on the estimated population of July, 1867); the south-midland and south-eastern divisions of England come next, with more than 23 insane paupers per 10,000 of census population; then the eastern, south-western, and west-midland divisions, with more than 22 per 10,000; next, the north-midland, with more than 20 per 10,000, and the Welsh with almost exactly 20. The north presents very different figures. In the north-western division (Lancashire and Cheshire) the ratio is only 17·54 per 10,000, in Yorkshire only 15·96, and in the northern division only 16·15. But that part of the kingdom has a small proportion of its population of all classes upon the rates. The number of paupers of all classes receiving relief on the 1st of July last was as follows:—In the metropolis, 4·50 per cent. of the population as enumerated at the census in 1861; in

might be extended to the provinces, but as he was unable to attend it was, through some informality, not brought before the meeting. The subject has been so actively taken up by the *Lancet* commissioners, the Association for the improvement of workhouse infirmaries, as well as by the press, and has been so well received by the public, that there can be but little doubt of the ultimate success of so just and humane a measure as a fair and sufficient provision for the poor in sickness, especially now that the Government has taken it up.

CORONER'S INQUESTS.

Coroner's inquests were held on two cases, one, on a man who had been suffering from diarrhoea, and was feeble and very restless; in a struggle with another patient he had his elbow injured, which it was supposed accelerated his death. The second, on an aged woman who had been sent from a distant workhouse in a feeble state, and died in a few days. The Coroner considered such cases improper for removal.

ACCIDENTS.

Two fractures of the arm occurred, one in an obstinate female in a struggle with another patient, and the second, in an old man whose foot caught in the floor matting; in both the bones united. One man engaged in the farm yard deliberately cut off the first joint of his great toe, and flung

the south-midland division, 5.79 per cent.; south-eastern, 5.19; eastern, 6.50; south-western, 5.91; west-midland, 4.32; north-midland, 4.17; Welsh 6.12; north-western, 3.29; Yorkshire, 3.38; northern, 4.26. The insane paupers of England on the 1st of July last were one in 22 of the whole number of paupers. It is hardly necessary to say that the insane in England, or of any class in England, are not one in 22. A very large proportion of the insane paupers are paupers because they are insane, being dragged down by this misfortune into a class to which they did not belong. The Poor Law Board, giving an account of the insane paupers as a body, speak of their pauperism as "ascribable to insanity." In fact, the insane paupers of England who on the 1st of July last were one to 516 of the estimated population of England, may be taken to comprise the great majority of all the insane in the

it over the hedge, where it was found in the next field ; he seems quite regardless of pain, and if he had an opportunity, it is very likely he would use the hay knife again in cutting off part of the next toe to make it even with the other.

Dr. Madden-Medlicott met with a severe accident during his summer holiday. He was returning from a tour in the north of Europe, where he had visited the principal lunatic asylums, when the carriage he was in was thrown off the line ; he was rendered insensible, and suffered severely for some time afterwards from the shock ; subsequently he was recommended by his medical advisers to take a sea voyage, and is now on leave of absence for three months, Dr. Bath having undertaken his duties during that period.

AMUSEMENTS.

Theatricals.—Mainly through the kindness of my friend Mr. Balderson, under whose superintendence the portable theatre was erected, at a comparatively small expense of material supplied from stores, and the cost of carriage to and fro, a very beautiful and valuable stock of scenery has been obtained, and painted by eminent artists ; amongst them Mr John Absolon, who furnished a picturesque drop scene, Mr. F. Fenton, who contributed largely to other scenery, particularly last year when Charles XII was played, and Mr. Hicks and Mr. Homan who also painted some very effective scenes. Messrs. Graves of Pall Mall presented some engravings for interior decoration. To some London tradesmen we are indebted for their contributions to the

kingdom. The Lunacy Commissioners report 49,082 insane persons in England on the 1st of January last, which would be one in 434 of the estimated population. There are private cases that do not come under their cognizance ; an estimate allowing for these would be confirmed by the report on the Irish census of 1861, which, including the result of an inquiry on this particular, shows the whole number of insane in Ireland one in 411 of the population. It will be understood that in the term "insane" the idiot as well as the lunatic is included.

wardrobe and properties, which are usually found adequate for ordinary pieces, but when numerous and expensive dresses have been required, the application has been met in the most prompt manner, and always gratuitously by Mr. May, costumier, of Bow Street, Convent Garden, and Mr. Clarkson, Wellington Street, Strand.

The uniform tunics worn by the Band were presented by a lady in London, and Messrs. Jones & Co. of Regent Street, made the caps. The Band still continue twice a week to play for the patients. Upon one occasion during the Assizes in Wells they played at the Palace, at Lady Auckland's "at home." They have latterly been practising glee singing under Mr. Bristow, and with the aid of a lady who played the concertina, another the piano and Dr. Bath the violin, a first concert was given which afforded so much satisfaction that it is hoped this variation in the amusements will be persevered in during the winter.

The dramatic corps has been much weakened by the absence of Dr. Madden-Medlicott and of a male attendant, who resigned for a better appointment.

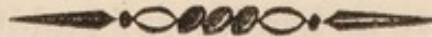
OFFICIALS.

The officers have as heretofore in addition to their ordinary duties very kindly devoted a portion of their time to afford amusement to the inmates and to relieve the monotony of asylum life.

The attendants have performed their responsible duties generally with forbearance and kindness to the helpless beings under their charge; they have also done much in aiding and encouraging the working patients, to carry on the necessary work connected with the building operations, and general improvements in progress: several of them have also as bandsmen contributed to the amusement of the patients. For the aid so willingly afforded by the officers and attendants I feel grateful.

In conclusion, the Superintendent has considered it his duty after twenty years service to the County to tender his resignation to the Visitors. At the same time he begs them to accept his best thanks for the uniform support he has received, and for the courtesy with which they have invariably listened to his recommendations, and to assure them that he still feels the same interest in the institution which he has superintended from its commencement.

When the new chapel is built, and the additional accommodation now required for females made in the way already pointed out, the establishment will be second to none, and under the same judicious management, its benefits may be more widely extended by accommodation being provided for patients who are not paupers, and for whom such a provision is extremely desirable.



PART II.

General paralysis, or an incomplete and peculiar form of palsy, not mentioned by the older writers, was first noticed by Esquirol in 1805, who directed the attention of physicians to it, as a frequent and fatal complication in insanity. It is described as consisting of a general and gradual loss of power in the voluntary muscles, a tremulous motion of the tongue and lips, with indistinct articulation or a faltering in the speech, and a difficulty often in pronouncing the letter R. A similar embarrassment is observed in the gait, and lastly in all the muscular system. In attempting to run, his course is like a drunken person. A state of morbid tension exists in all the muscles, he comes awkwardly down on the soles of his feet, his arms are extended, the eyelids are widely open, the jaws firmly closed, sensibility becomes blunted. The paralysis is often more marked on one side of the body than the other. At first it is partial, it then invades a greater number of muscles and becomes general. Its progress is regular, it goes on constantly increasing, while the understanding grows weak, and Prichard states that whatever character the disorder of the mind may have presented, it soon passes into a state of chronic dementia. Digestion is disordered and constipation is usually a most persistent symptom. Three distinct stages have been recognised by writers. In the first there is rigidity of action, the movements although uncertain retain a certain vigor. In the second stage there is a relaxation or a state of resolution always increasing of the muscular structure. The patient at last lies prostrate; the parts pressed upon become excoriated and ultimately gangrenous. The excretions are involuntary, convulsions and coma supervene, which continue for many hours and are frequently repeated for several successive

days. After these seizures the malady usually proceeds rapidly to its fatal termination.

In the majority of these cases the paralysis succeeds the intellectual disorder; in some the insanity and palsy appear simultaneously; in a few the paralysis precedes the mental derangement. It should, however, be kept in mind that a general paralysis similar in all respects to that now described, occurs sometimes without being followed by insanity, as has been observed by Delaye & Foville, who saw induration of spinal cord with effusion of serum in two cases of general paralysis unattended by insanity. A case occurred within my own knowledge of an officer retired from the army, after 35 years' service, who for several years pursued country sports, riding, shooting, fishing, at length, when about 70, he was attacked with what was termed creeping palsy, ushered in by faintings; he was for some months confined to bed, pulse feeble; he soon got bed sores and gangrene; his intellect remained clear to the very last; he died very slowly. The disease in the above case followed an upset from a conveyance. Railway accidents, causing concussion to the spine, are likely to be followed by general paralysis. General paralysis is supposed to be more frequent in Paris than elsewhere because it has been more accurately observed there, the proportion 1 in 4 according to Bayle, 1855; whilst Baillarger states it to be at Bicêtre and Salpêtrière 1 in 16. In Vienna 12 per cent. and at Florence 18 per cent. of the admissions, have this complication (Vid. p. 401 Griesinger on Mental Diseases.)

Dr. Burrows has stated it to be a comparatively rare disease in England. Out of 924 deaths in the County Somerset Asylum 162, or nearly 18 per cent. have had this disease, and the proportion of males to females was above $4\frac{1}{2}$ to 1. The youngest was 26 and the oldest 68; the age at which it was most frequent was 40; in the decennial period from 30 to 40 there were 42, from 40 to 50 there were 53, from 50 to 60 there were 23, from 60 upwards only 6 cases. The married exceeded greatly the single.

In cases of general paralysis some obvious disease of the cerebro-spinal organs is invariably found to exist. In the first and several succeeding annual reports attention was particularly directed to changes observed in the spinal cord, as will be shown by extracts from these reports from 1849, downwards. At that time, the examination of the spinal cord was not so frequent, and the importance of it not so fully recognised as it is now. At the St. Marylebone Infirmary the writer had latterly been in the habit of examining the spinal cord, and no examination, in an asylum especially, should be considered complete without it. As a rule a *post mortem* examination is invariably made here, and the state of the spinal cord observed. The cause of death is frequently obscure, and without a *post mortem* examination cannot be certified with accuracy; if it be done carefully, as a rule no objection is ever made. In every public institution a post-mortem examination should be imperative, as it is the only way in which the diagnosis of the disease, can be established or corrected, and it is by such means our knowledge of disease is to be extended. The public equally with the medical profession are interested. All workhouse infirmaries, for instance, should be conducted in such a way as to be made useful as places of medical education for the study of disease and morbid appearances; this would no doubt be the case if workhouse infirmaries were not under the sole control of selected boards of Guardians, who have power to close them against pupils. The medical profession have been forced to provide other and less adequate means for the instruction of their pupils to those which workhouse infirmaries so abundantly afford, by the establishment of hospitals, which only partially provide for the wants of the poor, for the most part being confined to a few medical and surgical wards for adults; children are not received, or aged or insane persons, so that the pupils have not the advantage of witnessing the treatment of such cases, which form so large and important a share of their attention when in practice, and which workhouse infirmaries would so amply afford. The mortality from disease in hospitals is found

to be higher than where people are attended at their homes. The proper and most beneficial succour to the working classes would be to improve their dwellings.

Prichard states that general paralysis in some instances precedes, and in others supervenes on mental derangement. Esquirol states that sometimes it is the result of cerebral congestions, fevers, epilepti-form, convulsions, &c. Calmeil agrees with Foville and has enumerated the changes in the encephalon observed by him. Injections of the bony structures of the dura mater, fluid in the arachnoid, false membranes, cysts, hæmorrhage, thickening of membranes, adhesions, disappearance of grey substance, softening induration and discoloration of this substance, hardening and injection of white or fibrous structure, fluid in ventricles, erosions, softening of brain and spinal cord. In addition to the changes enumerated Griesinger p. 434 adds, atrophy of the brain or convulsions, increase of cellular tissue, meningeal apoplexy, degeneration of cerebral arteries, and of the nerve structure which may extend to the spinal cord—important in regard to the symptoms during life. The anatomical changes are more evident in this than in any other form of insanity, still they are not always identical, but constantly present certain varieties. Occasionally no palpable changes exist appreciable to the naked eye; the microscope reveals important anatomical changes.

The following summary or recapitulation of the cases and remarks in the preceding 19th annual report, bearing on the subject of general paralysis will show that the peculiarity of its symptoms were from the first recognized as likely to be dependent on organic disease of the cerebro-spinal centre, and that expectation was fully verified by further research. Previous experience in a very extensive and varied field of observation at the St. Marylebone Infirmary, and with the co-operation of some very able and accurate inquirers led the writer to the conclusion, which remains unchanged, that so far as our means of observation have existed, we have been unable to detect any special disease in the brains of the insane.

With respect to the *general paralysis of the insane*, however, the author in 1848 made this statement, in the first annual report, p. 16, for that year: this disorder, "has been found here to have been in fatal cases dependent on or accompanied by inflammation of the spinal cord." The symptoms of general paralysis or progressive palsy have been described by various writers; some affirm that patients affected with the malady continue to increase in weight. Although in some cases it has been so here, they have in most instances fallen off in weight before death; one man lost so much as 39 lbs. in weight the six weeks preceding his decease.

It is again stated in the 2nd annual report of this asylum, 1849, that subsequent post-mortem examinations have confirmed the observations in the previous report, that fatal cases of *general paralysis or palsy*, were found to be accompanied by and probably dependent on softening of the spinal marrow, and frequently combined with inflammation of the membranes and fluid in the ventricles of the brain. The attention of pathologists is called to this important subject, as in no English writer has any allusion to it been found. The report goes on to state; although so little seems to be known respecting the pathological anatomy of general paralysis which has only of late years been recognised as a distinct, frequent, and most fatal disease of the insane, it results from my observation that there is no affection of the nervous centres occurring in insanity which presents so well marked and constant morbid changes; and these are seated in the spinal cord, although the brain or membranes are commonly implicated. These changes are chiefly, inflammation of the cord itself or its membranes, (meningo-myelitis,) thickening and preternatural adhesions of the arachnoid; softening, induration, enlargement or atrophy of the spinal cord itself. In the brain, thickening of the arachnoid membrane, with fluid at the base of the skull, and in the ventricles and spinal canal, with a roughness from crystals, as if minute particles of sand were sprinkled on the floor of the 4th, and sometimes to a slighter extent also in lateral ventricles. It may

further be observed that general paralysis or palsy sometimes precedes the mental derangement. This would occur where the spinal cord first became diseased, and disease afterwards attacked the brain; such cases originating in the spinal cord, are most likely to be checked if detected early. The application of warmth to the spine caused manifestation of pain here in some patients when percussion failed to do so. General paralysis is, however, most frequently preceded by some form or other of insanity; and is commonly in such cases the certain forerunner of a more or less speedy and fatal termination; unless a more precise knowledge of its true nature should lead us to a corresponding improvement in its medical treatment.

The acute cases of palsy, or those in which this disease was of short duration and death ensued quickly, were distinguished by softening of the spinal cord, and in one, by enlargement of it. In the last of these cases, in the obituary, the symptoms of palsy only existed for four or five weeks; death occurred rather suddenly after a fit: there was softening of the spinal cord, and a considerable quantity of fluid in the ventricles of the brain. I believe that many cases of sudden death have been wrongly attributed to what has been commonly termed serous apoplexy, where fluid has been found in the cerebral ventricles, (a very frequent and common occurrence in old people) and in which the fatal event, if the spinal cord had been regularly and carefully examined, would have been found to have been caused by softening in it.

The chronic cases of palsy, those in which the fatal termination did not occur for several months, were distinguished by induration, sometimes by atrophy of the spinal cord, and by thickening of its membranes.

In 1850 there were seven fatal cases of general paralysis in males and four in females. In one female the disease appeared to be caused by a fibrous and fatty tumour proceeding from the upper part of the spinal cord. In the other cases, the morbid changes were wasting of the spinal

cord, inflammation with softening and induration of its substance, as well as inflammation, preternatural adhesions, and thickening of its membranes. These changes were generally connected with similar changes in the brain and its membranes. A striking example of general paralysis occurred in the last male but one who died. He was a weaver, aged 48, and was admitted into the asylum last June, until which time he had worked at his trade, but had recently spoiled forty yards of cloth, and had become violent in his conduct. His wife stated, that for six months previous to his mental derangement she observed he rather tottered in walking, that his lips and tongue quivered, and his articulation became indistinct; afterwards he was wont to laugh at trifles, and had the appearance altogether of an intoxicated person. The symptoms gradually increased after he was placed under my care. He was of a ruddy complexion, very cheerful, and in the habit of doing some light out door work, such as hoeing turnips occasionally. A month before his death he had an attack of diarrhœa, of which he soon got better; but ever afterwards his strength failed, and he was confined entirely to the house. Early on the 12th December, he was seized with violent convulsions, principally affecting the right side; these continued without abatement or relief from treatment for four hours, when he died. On examination after death, there was found abundant evidence of chronic inflammation of the membranes of the brain, and of chronic inflammatory softening of the brain and spinal cord. It was observed that the inflammation appeared to have been more intense in the ventricles of the brain. The primary symptoms, as stated by his wife, would indicate that in this case the disease had commenced in the spinal cord and extended to the brain. I find the statements in my former reports with regard to general paralysis have since been corroborated from other sources. The essential morbid changes occurring in this disease have been overlooked on account of the difficulty of exposing the spinal cord so as to admit of its examination; the instruments in common use not being suitable for the purpose. Those I have been in the habit of using for dividing the spinal column are a common tenon

saw, a mallet, and chisel, all the same as I use in opening the skull; and both operations can be performed with equal facility after a little practice.

In the year 1851 there were several cases of general paralysis accompanied by the usual inflammatory softening and sometimes induration of the spinal cord, and generally of a part of the brain itself. In most cases the disease appeared to have originated in the brain, the mental faculties having been observed to be weakened before the paralytic symptoms manifested themselves: in some instances, the paralytic symptoms were first observed and the mental weakness succeeded. The last of the female cases but one, in the obituary, is singular. She had been a cripple for several years, her knees firmly contracted; when sitting up they were on a level with her chin, and her heels close to the backs of the thighs. The lower portion of the spinal cord, to the extent of $1\frac{1}{2}$ inch just above the tail continuation, was dark coloured and softened: a portion of it was submitted to microscopical observation by Mr. Gulliver, who, without knowing anything whatever of the case, described it as differing from the inflammatory softening most commonly occurring with the characteristic exudation corpuscles in the cases of general paralysis. He found that the ultimate nervous structure was merely disintegrated or broken down—a simple solution of continuity of which Dr. Bennett has described examples in the brain.

In the report for 1852 it is stated that the fatal cases in which *general paralysis* was the diagnostic symptom were found on examination after death to be accompanied by disease of the spinal cord, the result of inflammation in which the ventricles and membranes at the base of the brain were generally implicated. Further experience corroborates this statement; and it has rarely happened that there could not be detected a sufficient amount of disease in the spinal cord or base of the brain to lead to the fair presumption that the symptoms were to some extent dependent on this cause. In addition to the evidence afforded by a post-mortem examination, a portion of the diseased parts

was in most instances subjected to a microscopical examination by Mr. Gulliver, who found that the "exudation corpuscles" were most frequently present in the spinal cord itself, and were similar to those delineated and described by Dr. Bennett in his paper on inflammation of the nervous centres.*

In 1853 there were several fatal cases of general paralysis accompanied by inflammation of the spinal cord as more particularly pointed out in former reports.

From the report of 1854, it appears that ten of the deaths, eight males and two females, being 17 per cent. of the mortality for that year, were from *general paralysis*. The dura mater was firmly adherent to the skull in 1 male, the arachnoid membrane was thickened in 1 male, the cerebral ventricles contained an unusually large quantity of fluid in 4 males, there was congestion of blood in the brain in 2 males, and in one of these the brain was very large, weighing 57 ounces. Disease of the spinal cord, which appeared to be the result of inflammation was found in all the cases; the spinal cord was unusually red in one case, softening in 4, preternaturally firm in 3, and in 1 the spinal canal contained a large quantity of fluid. In the 2 females, the spinal cord was softened, and in one, which was subjected to microscopical examination, "exudation corpuscles", such as delineated by Dr. Bennett in his paper on inflammation of the nervous centres, were evident in the spinal cord and also in the brain; in this case too, the brain was wasted and nearly $\frac{1}{2}$ lb. below the average weight. In the other female there was effusion of blood on the brain, and atheroma of the cerebral arteries, and it was $\frac{1}{4}$ lb. above the average weight. In those cases which were of longest standing, the brain was usually wasted and below the average weight, in two cases weighing less than 41 ounces; whereas, in some cases of a few months duration, the brain was considerably above the average weight of 46 ounces;

* Edin. Med. and Surg. Journ., vol. lviii, p. 36.

in the cases collectively the average weight of the brain was $\frac{1}{4}$ ounce in the males and $1\frac{3}{4}$ ounce in the females below the average weight in the sane. Hence, it appears that in general paralysis of long standing, the brain is below the average weight in the sane, and in some cases of idiocy likewise, the brain is below the average weight. For it may here again be remarked that in the total average, the weight of the brain, this year, exceeds the average weight in the sane by $2\frac{3}{4}$ ounces in the male, only by 1.10 of an ounce in the female.

In 1855 the mortality from general paralysis alone was 13 per cent of that for the year; it included 7 males and 1 female. In 3 males and 1 female the spinal cord was softened, there was central softening also of the brain in the female; in two of the males the dura mater was adherent, and in one, there was inflammation of the arachnoid and pia mater; in 1 male there was a large quantity of fluid in the arachnoid on the right cerebral hemisphere and in the spinal canal; in 1 male a small portion of the spinal cord was disintegrated; in 1 male the spinal cord was unusually firm; in 1 male, in whom the symptoms of general paralysis were strongly marked, following an injury to the spine, no post mortem examination was made. In 1 male idiot, who had also general paralysis, the dura mater was adherent, and the lower end of the spinal cord softened; the brain weighed $39\frac{1}{4}$ ounces. In the six males the weight of the brain varied from $35\frac{3}{4}$ to 52 ounces, the mean weight being just the usual average of 46 ounces; in the female the weight of the brain was $41\frac{3}{4}$ ounces. As observed in the report of last year, in those cases in which the brain was smallest the disease was of longest standing. In the total average, the *weight of the brain*, this year, has only exceeded the average weight in the sane by about half an ounce, in males as well as females.

In the report of 1856, no special observation is made respecting general paralysis but from the obituary for that year it appears there were 3 cases in males being nearly 19 per cent, and in one there was no post mortem

examination, the mortality was unusually low in that year amongst the males.

From the obituary for 1857 it appears that 7 males and 2 females died of general paralysis making the mortality 19 per cent, the same as in the preceeding year, from that disease.

Again in the obituary of 1858, there are five cases in males, and 1 female specified as being affected with this disease. Nearly 17 per cent of the mortality.

In the 12th annual report for 1859, there were eight cases of general paralysis in males and three in females, being upwards of 23 per cent for the year, a very large proportion of the mortality.

In 1860 there were five cases of general paralysis in males, but in two, there were no post mortem examinations.

From the obituary of 1861, it appears that there was the very large proportion of 13 out of 29 males affected who died in that year with general paralysis, and no female. This would be 30 per cent of the whole mortality, and nearly 45 per cent of the males for that year.

In the report for 1862, an analysis is given of the first thousand male, and first thousand female cases, and it is stated at page 40 and 41, that "*general paralysis of the insane* was first described by Esquirol; it is distinct from ordinary paralysis and from insanity. The paralytic symptoms sometimes precede those of mental disturbances which is to be accounted for by the spinal marrow being frequently the seat of the disease. When inflammation first occurs in the spinal marrow, the paralytic symptoms manifest themselves first, and when the inflammation extends to the brain, the mental derangement follows; generally the mental derangement first appears, and the paralytic symptoms follow, in which cases the inflammation of the cerebral membranes precedes that of the spinal

cord, as frequently observed in this institution, and stated in the earlier reports. Writers have stated that general paralysis is often the result of intemperance, and seldom occurs in females. It is stated to be incurable, and speedily fatal, seldom of longer duration than two or three years.

Calmeil observed three degrees in the general paralysis of the insane; in the first an impediment in the articulation in the movement of the tongue, a sort of mumbling and stammering in speaking, the mobility of the limbs not impaired. In the second degree, the symptoms of the first period are increased in intensity; scarcely a word is pronounced distinctly. When he attempts to walk he raises himself slowly, and like a child, seems to balance himself before he moves off, and has a tottering gait. The upper extremities display less the effects of paralysis, and when in bed he is able to move all the extremities. In the third stage nothing is more deplorable, he can neither feed himself nor answer the calls of nature, neither can he articulate; in the last stage he is reduced to a state of mere vegetation, his existence being a kind of slow death.

Amongst the two thousand cases, under consideration, the earliest period at which general paralysis occurred was from 25 to 30, and three males died. From 30 to 40, there were 27 males and 7 females, of whom 23 males and 5 females died. From 40 to 50, there were 31 males, and 7 females, of whom 25 males and 7 females died. From 50 to 60 and upwards, there were 11 males and 3 females, of whom 9 males and 3 females died. The total numbers were 72 males and 17 females, and the deaths 60 males and 15 females. The head is generally large and well formed in the cases." There were seven cases, 6 males and 1 female, being $17\frac{1}{4}$ per cent. of the mortality for the year 1862.

The deaths in 1863 were 41 and of these 10 males or nearly a fourth had general paralysis.

In 1864 it appears that there were from general paralysis 8 males and 1 female being $12\frac{1}{4}$ per cent. of the mortality in that year.

In 1865 there were six fatal cases from general paralysis, 4 males and 2 females, being 10 per cent of the mortality in that year.

In the year 1866 there were 4 males and 2 females who died from general paralysis being nearly 10 per cent. of the mortality.

In the last year 1867 the mortality from general paralysis was 5 males and 1 female.

At the commencement of 1868 there were remaining under treatment the following cases.

CASE I.

A draper's assistant, aged 33, married; first attack; duration 2 months; was admitted to this asylum, May 1864, in a state of melancholia. The cause unknown.

Previous history.—Father dead, mother alive; youngest of 10 children; disposition affable, temper cheerful, habits industrious; education good; religion Church of England.

Present state.—(Physically) general health bad, pulse 66, tongue clean, skin warm, appetite ravenous, bowels costive, sensations dull, expression dejected, dark irides and hair. (Morally) conduct dangerous to others, silent generally; ideas that people wish to poison him; memory indifferent, affections changed, propensities to strip himself.

Additional particulars.—Very obstinate could not be managed at home, mopes about, sleepless. Placed in the infirmary, ordered an aperient; four days afterwards, it is reported that he required to be fed once, has since taken food. At the end of two months, in July, there was no improvement; he was confined to bed for a burnt foot contracted in the Turkish bath. In September he was dirty in his habits; blistered on nape, In Octo-

ber; he was improved; assisted the infirmary nurse. Nov. appeared quite rational, in good bodily health, anxious to go home. Discharged on probation. December, discharged off books, recovered. Two years afterwards in December, 1866. Re-admitted, second attack, duration 9 months; transferred from another asylum; health indifferent, in a state of melancholia. January 11. In No. 1, idle; takes his food well. Jan. 27, sent to the infirmary, has retention of urine; catheterism, blister ordered to nape. Feb. 10. Able to come down stairs; palid, ordered citrate of iron and ammonia. July 15. Has been out playing cricket; medicine suspended. Dec. 24. Convulsed; ice applied to the head which was hot, extremities cold, hot bottles to feet, blister to nape; catheterism required, croton oil given. Dec. 30. Able to sit up in No. 4 corridor; he has generally a book before him, unable to take exercise, appetite good. Hair rapidly getting grey.

1868, Feb. 1. Had another fit, was comatose for 48 hours, blister to nape, croton oil given. Feb. 9. Is able to sit up in the corridor. Feb. 16. Very stubborn, unwilling to be dressed or undressed, has not spoken since his attack in December; stares at anyone who speaks to him; pupils dilated, appetite good, dirty, will not go to the closet, staggers in walking, becoming feeble and emaciated. Feb. 18. Has a vacant look; more helpless; temperature low, bulb of thermometer in axilla 96 deg., in mouth between cheek and teeth, lips closed, 97 deg.; felt point of a pencil drawn along the soles of his feet. March 6, unable to sit up.

CASE II.

H. C. a tailor, aged 30, single, 1st attack, duration 11 months, was admitted in July 1866, suffering from mania and general paralysis. *Previous history.*—Father dead, mother alive, disposition stubborn, temper irritable; education, can read only; religion, Church of England. *Present state.*—(Physically) general health bad, pulse

54, tongue white, skin cool, appetite good, motion imperfect. (Morally) conduct dangerous to others, conversation unconnected, ideas wandering, memory bad, propensities to expose his person. *Additional particulars.*—Two months in the workhouse, speech thick, totters in walking. Aug. 3. In the infirmary helpless and irritable, has a difficulty in coming down stairs. Aug. 25. Is improved and working in the tailors' shop. Five months subsequent to this date the paralysis became more marked, though he was still able to assist in the tailors' shop; gradually getting worse he had to be removed to the infirmary. Has been taking medicine but seems to have derived no benefit from it.

1868, Feb. 4. Pulse 56, appetite good, tongue white and tremulous like the lips; speech muffled and indistinct. Unable to feed himself or to walk without assistance; passes his feces and urine involuntarily; sometimes he cries when he wets the floor; is in a state of dementia; blisters applied to hollow of the loins; destroys his clothing. Feb. 10. Blistered surfaces have healed; still dirty in his habits; he has another blister applied to nape of neck, and is taking bichloride of mercury, cod liver oil. Temperature in axilla 94 deg., under tongue 95 deg., is very feeble. Pulse 84 and intermittent. March 2. Has had a severe attack of convulsions which left him in a comatose state for 24 hours; was almost pulse-less; surface of body and extremities very cold; pupils contracted to a size of small pin's head. Ordered wine, hot bottles to sides and feet, and blister to nape of neck. He rallied. March 9. Confined to bed; cannot keep the bed clothes on, but kicks them about; grinds his teeth. Is still taking wine.

CASE III.

G. G. a shoemaker, aged 40, married, has 2 sons; second attack, was admitted for the first time in June 1866, suffering from melancholia caused by destitution. *Previous history.*—Father alive, mother dead, eldest of

four children, disposition quiet, temper good, habits industrious; education, can read only; religion, Church of England. *Present state*.—(Physically) health indifferent, pulse 96, tongue clean, skin hot, appetite indifferent. (Morally) conduct dangerous to himself and others, conversation threatening, propensities to be indolent and to ramble about at night. He was inclined to be noisy at first but after a little time he altered in this respect and was sent out to work. In August he was much improved in body and mind, and was recommended for discharge in September following. He was discharged recovered, Oct. 1866. He was re-admitted in November 1867 in a state of melancholia and general paralysis. He walks with difficulty; tremulous voice; reported not dirty in his habits; appetite good; silly laugh; pulse 72; tongue clean; skin cool. Has a large scar in his throat where he had attempted to cut it.

1868, Jan. 23. In the infirmary, very helpless; cannot go to bed without assistance. Feb. 6. Tongue clean and tremulous; pulse 96; appetite good; has to be assisted in walking; getting worse; can feed himself, though his hand is very unsteady; spills fluids; passes his motions involuntarily; speech imperfect; lips tremulous; pupils unequally dilated, right more so than the left; sight gradually failing. Ordered a blister to neck which did not act. Feb. 18. Temperature under tongue 100 deg., in the axilla 95, temperature of room 65; pulse 120; has sensation perfect in the soles of his feet and when tickled with a feather he felt it at once. Is still in bed in the infirmary; feces and urine involuntary; takes his food well. Is gradually getting worse. Taking bichloride of mercury; he had blistering fluid applied to bottom of loins. Is extremely dirty in his habits; is occasionally very noisy at night, shouting, blaspheming and preventing the other patients from sleeping.

CASE IV.

A. L. a labourer, aged 24, single, first attack, duration 6 months, was admitted March 29, 1867. He was then

suffering from mania due to hereditary predisposition. *Previous history.*—Parents alive, third of nine children, stubborn, temper irritable, habits idle; education, can read and write; religion, Church of England. *Present state.*—(Physically) general health good, pulse quiet, tongue clean, skin cool, appetite good. (Morally) conduct violent to others, conversation connected, memory good, affection changed, propensities to wander. *Additional particulars.*—Has been violent to his father and attempted his life. April 5. Is quiet, appetite good, sleeps well. May 31. Is out at work and improved. In July his walk was lamer and in the following month he had to be sent to the Infirmary as he was getting quite helpless. Aug. 21. His spine has been blistered and he required croton oil, the bowels having become confined. His mother visited him but he did not speak to her. The bowels still continuing obstinate he was ordered some more croton oil.

1868. Feb. 6. Pulse 96, appetite good, tongue clean; is able now to walk and feed himself. Dirty in his habits, his motions pass involuntarily. Spine has been blistered and he is taking bichloride of mercury. If not prevented he is in the habit of constantly kneeling on the floor, and his knees have become very sore thereby. Feb. 18. Feels the point of a quill when applied to the soles of his feet. Temperature under tongue 98; in axilla 96; in the room 65 deg.; face flushed.

CASE V.

Wm. L. a pensioner aged 56, married, has 1 son; 1st attack, duration 2 weeks, was admitted July 15, 1867, suffering from mania and general paralysis. *Previous History.*—Parents dead, disposition stubborn temper violent, habits dirty; religion, Church of England, *Present state.*—(Physically), general health indifferent, pulse feeble, tongue white, skin cool, appetite good, sensations, blind and deaf, motion perfect, expression dull. (Morally): Conduct violent to others, conversation obscene, ideas exalted, affections altered, propensities

to swear. *Additional particulars.*—Has been blind for some years. Noisy at night. July 19. Cannot walk without assistance. Ordered a Turkish bath and was afterwards sent to the Infirmary. Is gradually become more helpless, and he is reported as being in Nov. confined to bed in the Infirmary with well marked symptoms of paralysis. Dec 28. Is very feeble and gradually getting worse; obstinate and abusive when requested to do anything. 1868, Feb. 8. Still in bed in much the same state, temperature of room 65 deg.; would not allow the thermometer to be placed in his mouth or axilla and became excited and violent, when an attempt was made to do so. March 10. Still bedridden, passes his feces and urine involuntarily and unconsciously. Is able to feed himself, takes his food heartily; had his neck blistered and is taking bichloride of mercury.

CASE VI.

S.B. a stableman aged 46, married, 1st attack, duration 5 months. Admitted Jan. 1868 in a state of general paralysis and dementia, caused by a bullet rebounding from a target and striking him on the head when employed as a marker at a rifle range. *Previous History.*—Parents alive, only child, disposition quiet, temper good, habits intemperate; education can neither read or write. *Present state.*—(Physically); general health bad, pulse 90, tongue clean, skin cool, appetite good, sensations dull, motion imperfect, staggers about, expression silly, hazel irides, black hair, sallow complexion. (Morally); Conduct violent to others, conversation about his wealth incoherent; ideas that he is rich; memory lost; affections not changed; propensities to destroy clothing &c. *Additional Particulars.*—Staggers in walking. Feb. 3. Very noisy and violent, had to be placed in the strong room. Feb. 6. Pulse 108, appetite good, bowels regular, utterance thick and indistinct, speaks as if he had a plum in his mouth. Walks with his legs wide apart, does not stagger, not dirty, has control over sphincters. Feb. 18. Seems to have more difficulty in walking. Is very obstinate; it

was quite impossible to take the temperature of axilla and mouth as he struggled directly the attempt was made and almost broke the thermometer. Pulse 96. No sensation in soles of the feet. March 11. Staggers in waking. Is unable to lift a cup of water to his mouth without spilling it. Quite unable to protrude his tongue. Is becoming emaciated. Wets the bed occasionally. Appetite still good. Lisps a little when he speaks. Speech almost unintelligible due perhaps to loss of control over the tongue. Cannot keep his eyes closed very long. Pulse 84.

CASE VII.

W. B. an artist, aged 54, married; admitted in May, 1863: he had been ill one month; two years previous he was in Paris, and under treatment for one month at Charenton; form of disorder on admission, general paralysis combined with mania; bodily health bad; appetite, good; expression silly; conduct violent to others; conversation incoherent; ideas exalted; memory bad; affections lost; propensities destructive. He was suffering from diarrhœa, hemorrhoids and stricture of the urethra, for which he was at once placed under medical treatment. On the 4th June, reported as still in a very feeble state, mischievous and quarrelsome, had picked sores on his face and hand, dirty in his habits; ordered bichloride of mercury, and iodide of potassium, which he continued to take until December, a period of six months; his bodily health improved. February, 1865. His mental state not improved; very dirty in his habits, and indolent. In May, reported as more tranquil. In October, very feeble and ordered stimulents; in the infirmary. January, 1864. Health better, removed from infirmary; quiet; still very slovenly; ideas exalted; employs himself in drawing. January, 1866. Health good; no mental improvement. In October, reported as cheerful, reads and writes a good deal. January, 1867. In good bodily health; habits slovenly; cannot be induced to wear stockings and prefers lying on the floor to his bed. In April, painting portraits; very quiet

and cheerful; dirty habits not improved; writes letters to great people, his ideas still exalted. February, 1868. Health good; no improvement in his mental condition or slovenly habits. In this case the paralytic symptoms have gradually disappeared, leaving the mental disorder less acute, but still deranged, the ideas continue exalted, he is in the habit of writing to Government Ministers and officials in a grandiloquent style. Other cases have been benefited for a time by similar treatment, long continued use of alterative doses of mercury and iodide of potassium.

A case of general paralysis without mental disorder, remarkable for the want of power to raise the foot over the slightest obstruction, and which continued for fifteen years, is the case of a gentleman engaged in an arduous profession, until the last three years before his death under the care of a practitioner, who prescribed a generous diet, tonics, ammonia and "Liquor secale cornuti" ten drops three times a day, from which the general system derived benefit.

In the 20 years, from the opening of the asylum, the 1st of March 1848, to the 29th February 1868 inclusive, the cases of general paralysis amounted to $8\frac{1}{2}$ per cent. in the males and 2 per cent in the females, on the total admissions for that period. The proportion of males to females was as 9 to 2; there are 7 males still under treatment, 133 have died, and in 126 of these post-mortem examinations have been made. An analysis of these examinations have been tabulated according to age, in decennial periods, the results are, shortly as follows:—Under 30 years, 4 cases the youngest 26, one single and three married; average duration of illness 15 months. The form of the disorder in 2 was mania, in both the ideas were exalted; dementia in 2, and the ideas obscured or lost; Cause assigned, intemperance in 1, cerebral disease in 2 and spinal in 1. Treatment, counter irritants, blisters, moxa and seton in three, bichloride of mercury in two, strychnine in one, cod liver oil for restoration of general health in one.

Cause of death, softening in brain and spinal cord, and pulmonary tubercles in 1, fluid in spinal cord in 2, with pneumonia in 1 and pleuro-pneumonia in the other, fluid in the cerebral ventricles, bronchitis and dysentery in 1.

Head: circumference $21\frac{3}{4}$; antero-posterior from root of nose to occipital protuberance 13, and transverse from one external auditory foramen over vertex to the other $13\frac{1}{4}$ ins. Cerebrum; opacity of arachnoid membrane in two and 8 ozs. of fluid in one. There was congestion of cerebral vessels in one, softening in cerebrum in one, excess of fluid in ventricles in one, brain appeared natural in one; the average weight of right hemisphere 18.4, in one case it was $4\frac{1}{2}$ ounces lighter than left; average weight of left hemisphere 19.4; cerebellum large in one case, average weight of encephalon 46.6 ounces. There was an unusual quantity of fluid in the spinal canal in two cases, in 1 there was congestion of blood, and in 1 softening in the spinal cord, average weight $1\frac{1}{4}$ ounce. There was congestion of blood in right lung in 2, bronchitis in 1 and pleuro-pneumonia in 1, average weight 33.5; pleuro-pneumonia of left lung in 2, bronchitis in 1 and tubercles in 1, average weight $26\frac{1}{2}$ ounces; heart natural, average weight 10 ounces. Intestines ulcerated in 2; mucous membrane of stomach discoloured by taking infusion of logwood in 1, average weight 6 ounces; liver congested in 1, weight 58; spleen 6.4; pancreas 3.2; right kidney 4.5; left kidney 5; renal capsules .9; weight of the body 107lbs; length 5 feet $6\frac{1}{4}$ inches.

From 30 to 40 years, there were 42 cases, of these 10 were single, 31 married and 1 widowed; only 12 were remarkable for extravagant ideas, in the great majority the ideas were wandering, the mind was quite lost, in one there was great despondency; one case was combined with idiocy, 1 with melancholia, 17 with dementia, and 3 with mania. The causes were from disease of the nervous centres in 22, from injuries or blows on the head in 5, from intemperance in 5, after fever in 5, hereditary and other causes in 5. The treatment varied according to the symptoms and was

generally the same as that stated in the previous cases. The assigned cause of death was from disease of brain and membranes in all the cases, with disease of spinal cord or membranes in 32, there was cerebral apoplexy in 1. and spinal apoplexy in 2; the cerebral was combined with pulmonary disease in 15, bronchitis in 1, pleurisy in 3, pneumonia in 8, and phthisis in 3, diarrhœa in 1.

Head: the skull was unusually dense and thick in 2; the circumference of the head varied from 21 to 23 inches, the average 22.1; the antero posterior measurement varied from 11 to $14\frac{1}{2}$ inches, the average 12.8; the transverse measurement varied from $10\frac{1}{2}$ to 14, the average 12.6 inches. The cerebral membranes were natural in 10 cases; the dura mater was preternaturally adherent in 8; a quantity of fluid beneath it in 1; the arachnoid thickened and opaque in 12; fluid on sac of arachnoid in 6; mixed with pus in 1; congestion of blood in the veins in pia mater in 7. The structure of cerebral hemispheres unusually congested in 3; the grey matter unusually dark in 1, and the white matter in 1; fluid in the ventricles in preternatural quantity in 20; structure soft in 3; cerebral structure remarkably tough and firm in 6; roughness or deposits in 4th ventricle in 2; inequalities in size and weight of cerebral hemispheres in 9 cases, from 1 to $3\frac{1}{4}$ ounces; the variation has been in favor of the right hemisphere in a majority of 3 cases; the right cerebral hemisphere varied in weight from $15\frac{1}{2}$ to $24\frac{1}{4}$, the average weight 19.2 ounces; the left cerebral hemisphere varied from $14\frac{1}{2}$ to $24\frac{1}{4}$, the average weight 19 ounces. The cerebellum was unusually firm in 2; above the usual size in 6 cases; the weight varied from $4\frac{1}{4}$ to $6\frac{1}{4}$, the average weight 5.1 ounces. The medulla oblongata and "pons varolii" varied in weight from $\frac{3}{4}$ to $1\frac{3}{4}$, the average weight 1.6 ounce. The encephalon varied in weight from $35\frac{1}{4}$ to $55\frac{1}{2}$, the average weight 45 ounces. The spinal cord varied in weight from 1 to $1\frac{3}{4}$, the average weight 1.2; there was blood effused in spinal canal in 5, congestion of blood in vessels of cord in 2, fluid in canal 6, there was more or less softening in the cord in 14, the cord was unusually firm and white in 4, corpuscles

were found by microscopical examination in 2, white specks on spinal arachnoid in 1.

Chest; the right lung was healthy in 8; there was congestion of blood in 6, bronchitis in 4, pleuritis in 5, pneumonia in 8, pleuro pneumonia in 6, tubercles in 3, it varied in weight from 11 to 52, average weight 26.5 ounces. The left lung was natural in 13, congested with blood in 4, there was emphysema and bronchitis in 2, pleuritis in 4, with effusion in 1, pneumonia in 9, pleuro pneumonia in 5, and tubercles in the lung in 4, it varied in weight from $9\frac{3}{4}$ to 66, the average weight 23.3 ounces. The heart was enlarged in 5, below average size in 5, fatty in 1, flabby in 1, valves thickened in 1, it varied in weight from $7\frac{1}{2}$ to $16\frac{1}{2}$, the average weight 10 ounces.

The intestines were for the most part in a healthy state; tubercles in the mesentery in 1, redness or inflammation of colon and ileum in 6, tapeworm in 1, fatty omentum in 1. There was melanosis of stomach in 2 cases, it was enlarged in 7 cases, it varied in weight from 4 to $9\frac{1}{4}$, average weight 5 ounces. The liver was congested and enlarged in 6 and atropied in 3, it varied in weight from 36 to 72, the average weight 53.1 ounces. The spleen was soft in 2, enlarged in 6, below the average in 10, it varied in weight from $2\frac{1}{2}$ to 11, the average 4.8 ounces. The pancreas varied in weight from 2 to 4 ounces, the average weight 3.1 ozs. The kidneys were united forming "horse shoe kidney" which weighed 6 ounces in one case, each kidney had an abscess containing blood and pus, and double the usual weight being above 10 ounces in 1 one case, the right kidney was enlarged in 1, and the left in 8 cases, the right varied in weight from 3 to $10\frac{1}{4}$ and the left from $3\frac{1}{2}$ to $10\frac{1}{2}$ ounces, the average weight of the right was 5.2 and the left 5.3 ounces. The renal capsules varied from $\frac{3}{4}$ to 1 ounce; in one instance there was softening, the average weight .8 ounce.

The body was emaciated in 10, it varied in weight from 71 to 154 lbs, the average weight was $107\frac{3}{4}$ lbs; the length

of the body varied from 5 to 6 feet, the average length was 5f. 7·3 inches.

In the decennial period from 40 to 50, there were 51 cases, 8 single 40 married and 3 unknown; the ideas were exalted in 9, wandering in 22, religious in 4, suicidal in 1, acquisitive in 1, in the others appeared to be quite lost, as far as regards the state of the mind; the duration of the disease averaged $20\frac{1}{4}$ months in 50 cases; the form of the disorder was dementia in 24, mania in 17, melancholia in 8, and in 2 epilepsy was combined with the general paralysis. The causes were apparently from disease of the nervous centres: cerebro-spinal in 21, from intemperance in 11, from fright, grief, religious excitement, and other emotionary causes in 19. As regards treatment, blisters were used in 24, the bichloride of mercury in 15, strychnine in 2, cupping or venesection in 5, and tartar emetic in 2 cases, anodynes and hypodermic injection in 5. The cause of death was from cerebral-spinal disease including that of the membranes in all the cases; combined with pulmonary disease in 26, cardiac in 1, with disease of the intestines in 2, of the kidneys in 3, and with erysipelas in 3.

The circumference of the head varied from 21 to 24 inches, the average was 22·4; the antero posterior varied from $10\frac{1}{2}$ to $14\frac{1}{2}$, the average was $12\frac{1}{2}$ inches; the transverse varied from $10\frac{1}{2}$ to $14\frac{1}{2}$, the average was 12·2 inches. The average weight of each cerebral hemisphere was 19·2, of the cerebellum 5·2, and of the medulla and pons 1; the average weight of the encephalon 45·6 ounces. The dura mater was preter-naturally adherent in 10; there was pus in the arachnoid sac and bloody serum over left cerebral hemisphere in 1, fluid in the arachnoid in 4, opacity and thickening of arachnoid in 17, congestion of cerebral vessels in pia mater in 2, bony deposit in falx in 1. The cerebral vessels were congested in 4, more fluid than natural in the cerebral ventricles in 12, the structure was unusually pale and firm in 4 and soft in 2, the grey matter unusually dark in 2; the brain

was above the average weight in 15, and below it in 12. There was fetid pus in the spinal arachnoid in 1, the arachnoid was thickened or adherent in 6, fluid in the spinal canal in 4 and blood in 3, there was congestion of the spinal cord in 1, it was softer than natural in 21 and firmer than natural in 7, the weight of the cord varied from $\frac{3}{4}$ to $1\frac{1}{2}$, the average weight was 1.1 ounce.

Chest: pleuritic adhesions of right lung in 4, of left in 2; congestion of blood in right lung in 8, in left lung in 8, œdema of right in 2, of left 3; pleuritis of right in 2, of left in 2; pneumonia of right lung in 16, of left in 12; turbercles in right in 2, in left in 3; the lungs were natural in 9 cases of right and 15 of left lung. The right lung varied in weight from 11 to $58\frac{1}{2}$ and the left from $10\frac{1}{2}$ to 47 ounces, the average weight of the right 28.3 and of the left 24.5 ounces. The heart was enlarged in 15 and smaller than usual in 13, it varied in weight from $7\frac{1}{2}$ to $14\frac{1}{2}$ ounces, the average weight was 11.1 ounces. Abdomen: there were peritoneal adhesions in 2, redness of intestinal mucous membrane in 4, natural in the remainder. The stomach varied in weight from $4\frac{1}{2}$ to 8, the average was 6.2 ounces. The liver varied in weight from 40 to 72, the average weight 58.9 ounces. The spleen varied from $2\frac{1}{2}$ to 11, average 5.4 ounces. The average weight of the pancreas 3.5 ounces. The right kidney was diseased in 3 and the left in 6, in one from a large abscess, it varied in weight from $3\frac{1}{2}$ to 7, and the left from $3\frac{1}{2}$ to 8, the average weight of the right was 5.1, and of the left 6.1 ounces. The body varied in weight from 61 to 157 lbs, the average weight 119 lbs.; the length varied from 5 to 5 feet 11 inches, average length 5 feet $7\frac{1}{4}$ inches.

In the decennial period from 50 to 60 there were 23 cases. It is hardly necessary to go over the particulars as it would be little more than a recapitulation of the foregoing; the brain was somewhat smaller, the average weight of right cerebral hemisphere was 18.2, of the left 18.5 and of the encephalon 45 ounces; the body 115.8 lbs. At the

decennial period 60 to 70 there were only 5 cases. One case reached the age of 75 years.

There were during the same period of 20 years, 29 deaths from general paralysis in females; 2 were under 30 years of age, 9 from 30 to 40 years, 11 from 40 to 50 years, 4 from 50 to 60 years, and 3 from 60 to 70 years; the youngest was 29 the oldest 68 years of age.

The ideas were exalted in 2, desponding in 1, silly in 1, wandering in 13, suicidal in 3, taciturn in 1, lost in 8. The average duration of illness was 38 months. The form of the mental disorder was mania in 10, melancholia in 5, dementia in 13, and epilepsy in 1. The causes as far as ascertained were, from disease of the nervous centres, chiefly or primarily affecting the cerebrum, judging from the degree and duration of the aberration of mind, in 7; spinal in 2, judging from the degree and duration of the paralysis of speech and voluntary motion in walking; cerebro spinal, in 8, where a distinction between the intensity of the cerebral and spinal symptoms could not be made; emotional as from domestic grief, religious despondency in 5, from intemperance in 3, from hereditary predisposition in 1; injury to head in 2. The treatment was general, for the improvement of the bodily health in 7; for the specific disease in 17, by blisters to spine, seton in nape, the solution of the bichloride of mercury, by stimulants in a few cases and in one by opiates. The assigned cause of death was difficult to ascribe to any organ exclusively, the brain or investing membranes were diseased in 24, the spinal cord or membranes in 25; the lungs in 10; the intestines in 2; and the kidneys in 1.

The skull was unusually thick in 4; and the diploe injected with blood in 1; the average circumference was 21.8, the antero posterior 12.5, and the average transverse measurement 12 inches. There were preternatural adhesions of the dura mater, or opacity and thickening of the arachnoid, fluid in the sac and congestion of blood in

vessels in pia mater in 14. There was fluid in the cerebral ventricles in unusually large quantity in 12; there was roughness on the lining membrane on "corpora striata" observed in 2, there was cerebral softening in 3, with an offensive odour in one of them; the cerebrum was unusually firm in 3; congestion of blood in 2; clot of blood in right lateral ventricle in 1; a tumour size of a pigeons egg in right hemisphere in 1; the cerebral hemispheres natural in 1; atheroma of arteries in 1. In 9 cases from 30 to 40 years of age, the average weight of the right cerebral hemisphere was 17.5 and of the left 17.5, the average weight of the encephalon 40.9 ounces. In 11 cases from 40 to 50 years of age, the average weight of the right cerebral hemisphere was 17.7, the left 17.6, the average weight of the cerebellum 4.9 and the medulla 1; at both periods, the average weight of the encephalon 40.7 ounces, at the last period from 40 to 50 years, the spinal arachnoid was adherent in 2; pus in spinal canal in 1, fluid in spinal canal in 4, *cartilaginous* specks on spinal arachnoid in 1; blood in canal in 1. There was congestion of blood in the spinal cord in 1; softening to a greater or lesser extent in 13; the cord was unusually firm in 2; the average weight of spinal cord 1.3 ounce.

Chest: The right lung in a healthy state in 10, the left in 8; there were pleuritic adhesions in 4; emphysema and bronchitis in 5, congestion of blood in lungs in 5; pneumonia in 3; pulmonary tubercles in 1; the average weight of the heart was 8.6 ounces.

Abdomen: There were peritoneal adhesions in 2; more or less redness and inflammation of mucous membrane of intestines in 3. The average weight of the stomach was 5.4; of the liver 42.7; of the spleen 4, of the pancreas 3; of the right kidney 4.2, of the left kidney 4.3; of the renal capsules; the average weight of the body was 91.5 lbs. and the length 5 feet 3 inches.

The total number of patients admitted from the opening

of the asylum 1st March 1848 to 29th February 1868, a period of 20 years has been 3284 of these 1649 have been males and 1635 females. The discharges in the same period have been 1817 of these 1384 have recovered, 285 have been relieved, 148 not improved, and 938 have died, leaving 542 remaining under treatment of whom 20 are out of the asylum on probation.

The percentage of discharges recovered and relieved has been 50 per cent, not improved $4\frac{1}{2}$ and the mortality $28\frac{1}{2}$ per cent.

EPILEPSY.

The total number of Epileptics during 1867 was 91 ; of these 46 were males and 45 females. In the tables are shown the number of fits, monthly, in each case, by day and by night, and the age of each individual. The total number of fits by day in the males amounted to 4094, and in the females to 4387 ; the total number of fits by night in the males amounted to 2431, and in the females to 1810. The fits by day therefore were more than double those by night. The fits were most frequent in the month of January in both males and females ; next in frequency in March for the males, and July for females. Compared with the preceding years there was an increase of 3 in the total number of epileptics, 1 male and 2 females ; the total number of fits in 1866 was 6784 in males and in 1867 it was 6525 ; in females 8696 in 1866 and in 1867 it was 6197, which is barely an average of 142 for each male and 138 for each female, being an average of 8 less in males and 62 less in females than in the preceding year ; the greatest number of fits in any individual was 710 in one male idiot. One male and one female were discharged relieved, and 3 males and 2 females, epileptics, died during the year : these are noted in italics and the letter D in the table.

The bromide of potass has been given to a larger number of cases. The girl mentioned in the last report to whom this drug was given has not had a return of the epileptic seizures ; when the slightest indication of her attacks occurs she resumes the use of it. A man employed in the establishment had a very severe epileptic seizure in the spring, which rendered him unconscious for the time, he had the same drug in doses of from 20 to 30 grains and has had no return of the attack since. None of the confirmed cases in the house to whom it was given have recovered, but in most the fits have been less severe and less frequent, and from the experience in this place, it is the drug of all others upon which greatest reliance may be placed. Tincture of "Sumbul" has in a few instances afforded a very considerable relief. Many other drugs have been tried as stated in former reports in cases of epilepsy without any permanent benefit as "Digitalis", "Belladonna", "Cotyledon umbilicus" artemisia vulgaris, or mug wort, all of which were supposed to have specific effects ; in some cases aperients were given with temporary benefit, as sulphate and carbonate of magnesia combined ; also tonics, as codliver oil, cinchona and nitric acid, and various preparations of iron, strychnine and phosphates.

The case of *chorea* of long continuance mentioned in previous reports has been slowly and gradually improving, there is no mental derangement at present and he may soon be discharged. The recovery in this case is attributable to daily perseverance in the shower bath, the judicious use of which is most beneficial in many cases. The turkish bath is useful sometimes in melancholia, and in cases of rheumatism which not unfrequently occur amongst the inmates. The hypodermic injection of about half a grain of acetate of morphia in ten minims of distilled water has been useful in cases of maniacal excitement with sleeplessness. Alterative doses of mercury have been given with advantage in cases of cerebro-spinal inflammation ; blisters have also been freely used in such cases. The pulmonary diseases have been as usual very frequent for which the

usual remedies have been prescribed, and cod liver oil especially in pulmonary phthisis as well as in strumous affections generally. Some cases of dropsy have been treated with bitartrate of potass in half drachm and with very favourable results. In cases of cachexy, anemia, and amenorrhœa, preparations of iron were given with benefit. A very severe carbuncle was opened by caustic potass as recommended by Mr. Prichard, on a very unpromising subject, an aged man in indifferent health, the discharge was profuse and it healed quickly.

The following table records the diseases occurring in each quarter. The first quarter is January, February, and March; the second quarter is April, May, and June; the third quarter is July, August, and September; and the fourth quarter is October, November, and December.

Diseases.	1st Quarter.		2nd Quarter.		3rd Quarter.		4th Quarter.			
	M.	F.	M.	F.	M.	F.	M.	F.		
Nervous.	Maniacal excitement...	0	3	2	5	1	2	1	1	
	Apoplexy	1	0	0	0	0	1	0	0	
	Arachnitis	0	0	0	1	3	0	0	0	
	Chorea	2	0	2	0	2	0	2	0	
	Epilepsy	6	8	9	12	8	9	10	3	
	General Paralysis	8	4	8	3	5	0	6	0	
	Delirium Tremens	0	0	0	0	1	1	0	0	
Total	17	15	21	21	20	13	19	14		
Respiratory.	Pleuritis	0	1	0	0	1	0	0	0	
	Asthma	1	2	1	2	1	6	1	3	
	Bronchitis	1	1	2	6	2	3	1	4	
	Influenza	6	2	2	1	0	0	0	0	
	Phthisis	7	3	6	5	4	3	5	1	
	Pneumonia	0	0	1	1	1	0	2	1	
Total	15	9	12	15	9	12	9	9		
Circulatory.	Menorrhagia	0	1	0	0	0	0	0	0	
	Scrofula	1	5	3	4	0	0	2	2	
	Amenorrhœa	0	2	0	1	1	1	0	3	
	Dropsy	0	1	0	1	1	1	1	1	
	Anemia	0	0	1	0	0	0	1	0	
Total.. ..	1	9	4	6	2	2	4	6		
<i>Feeding Cases</i>										
		0	0	3	3	1	8	2	3	
Digestive.	Gastritis	0	1	0	0	1	0	1	0	
	Diarrhœa	2	0	2	0	0	0	0	0	
	Dysentery	0	0	0	0	1	0	0	0	
	Icterus	1	0	0	0	0	0	0	1	
	Dyspepsia	0	2	0	1	2	5	4	1	
	Painters' Colic	0	0	1	0	2	0	2	0	
Total	3	3	6	4	7	13	9	5		
Urinary	Nephritis and Ischuria		1	0	1	0	1	0	2	0
Locomotive organs, skin, and cellular tissue.	Cancer	0	2	1	2	0	1	0	2	
	Lepra	1	0	0	0	2	0	0	0	
	Fractures	1	0	2	0	1	1	1	1	
	Wounds	0	0	0	0	2	1	4	1	
	Fever	0	0	1	0	1	2	0	1	
	Ophthalmia	0	0	1	0	0	1	0	0	
	Rheumatism	2	0	1	0	0	0	3	0	
	Carbuncle	1	0	2	1	0	0	1	0	
	Erysipelas	1	1	1	1	0	0	1	3	
	Urticaria	0	0	0	1	0	3	0	1	
	Psoriasis	0	0	0	2	0	0	0	0	
	Eczema	1	0	3	3	0	0	0	0	
	Ulcers	2	1	2	1	3	1	3	1	
	Abscess	2	1	0	0	0	0	2	0	
Porrigo	0	1	0	1	0	0	0	0		
Total	12	6	15	12	10	10	17	10		
Gross Total.. ..										
		48	42	58	58	48	50	58	44	

ANALYSIS OF THE TABLES IN APPENDIX.

Table I shows the recoveries in 1867 to be 79; males 31, females 48: the admissions during the year being 65 males and 101 females, would make the recoveries amount to 47·8 per cent. in males, and 47·6 per cent. in females, which was the same as in 1866. The average duration of the treatment in the males was 13·4 months, and in the females 10·8 months. Considerably more than half were cases of mania: more than a third were cases of melancholia; and the larger proportion amongst females. Hereditary predisposition, previous bodily illness, and intemperance were the prevailing causes.

The admissions as shown in Table II were 166, which is 8 less than 1866, the falling off was greatest amongst males, amounting to 13; of the 65 males admitted 52 were from their homes direct, 9 from workhouses, and 4 from asylums or gaols; of the 101 females, 76 came from their homes, 22 from workhouses, and 3 from asylums or gaols. The recoveries within the year amongst these admissions, were in both sexes 21·7 per cent. and the mortality 12·5 in the males, and 12·8 in the females; remaining in the asylum 61·5 of the males 53·6 per cent of females.

Table III, which is a monthly record of the following occurrences, shows that the greatest number of patients was in December, amounting to 228 males and 286 females; the greatest number of admissions was in November (20); the recoveries were most numerous in May (14) and the deaths (10) in March, there were amongst the males no deaths in the months of August, September, and October. The number of patients remaining at the end of the year 513; being 26 more than in the preceding year. There is an increase of 5 in the number of epileptics, now 85, the aggregate number of fits is less than in the preceding year by 239 in males and 2381 in females. The average number of violent patients was less amongst males; the average number of dirty and destructive patients was less; the

seclusion was also less than in the previous year. The number under medical treatment, attending divine service are much the same; upwards of 30 of each sex attend school; there was a slight increase in the number employed.

Table IV. shows the admissions to be 66 males and 101 females, 29 males and 42 females single, 34 males and 39 females married, 3 males and 20 females widowed; of these 35 males and 60 females laboured under a first attack, 19 males and 31 females under a second, and 7 males and 7 females under three or more attacks, and in 5 males and 2 females the number was not ascertained. The admissions were most numerous between 20 and 60 years of age.

The occupations are shown in Table V; the admissions were from the agricultural class. The bodily health on admission was indifferent in the great majority as shown in Table VI, and improved in those remaining. The great majority were members of the Church of England as shown in Table VII; nearly a half could read and write, and one fourth could read only, and one fourth had received no education.

The physical causes as usual greatly predominated and were twice as numerous as the moral causes, as shown in Table VIII; hereditary predisposition was the most frequent cause assigned, previous illness and disease of nervous centres were next in frequency, in 27 instances no cause was assigned. Mania as usual is shown in Table IX to be the most frequent form of the disorder including nearly half the cases, next melancholia which was most frequent in females and included more than a fourth, there were 16 cases of epilepsy and 12 of idiocy which is a larger proportion than usual of these incurable cases.

The duration of the existing attack is shown in Table X. 89 of the 167 admissions were of three months duration and under, of these 25 were discharged, 10 died, and 54 remain under treatment; of the 78 of more than three months

duration, 16 were discharged, 11 died, and 51 continue under treatment.

The admissions in each year distinguishing the cases of relapse since the opening of the asylum are shown in Table XI; the discharges, classifying them as recovered, relieved, not improved, dead, showing the numbers remaining of each year. The number admitted from 1st March 1848 to 31st December 1867, has been 3239; of these, 84.3 was the percentage of new and 15.7 of relapsed cases, the recoveries amounted to 42.4, the relieved to 8.7, the not improved to 4.6, the mortality to 28.5 and the remaining to 15.8 per cent of these cases.

The causes of death as ascertained from post mortem examination in every instance, classified, at three periods of life, in both sexes, are shown in Table XII, from which it appears that pulmonary diseases have been the most frequent, including above half the cases; diseases of the nervous system were next in frequency especially amongst males.

Table XIII is a classification of the patients remaining in the asylum at the end of the year and contrasts unfavourably with that of 1866, as it leaves only 15 instead of 20 per cent curable cases; there is an increase of $3\frac{1}{2}$ per cent of idiots and epileptics, the incurable quiet and harmless amount to 22, and the troublesome and incurable to 24 per cent.

SUMMARY OF THE OBITUARY FOR 1867.

The mortality was much less, being 48; in 1866 it was 61; the falling off was in males, being 15 less. The average mortality was about 10 per cent. for the year in each sex; the mortality has usually been much higher in males than females, in preceding years.

In the first three months 9 males and 10 females died, in the second three months 5 males and 7 females died, in the

third quarter 5 males and 6 females died, and in the fourth quarter 2 males and 4 females died, the highest mortality was in the first quarter of the year. In the forenoon 21 died, 7 males and 14 females; at noon 1 female; and in the afternoon 26 died, 14 males and 12 females. This is the reverse of the preceding year when the largest number died in the forenoon.

The time under treatment varied in the males from 9 to 3770 days, and in the females from 12 to 6875 days; the average time for males was 465 and for females 1345 days, some of the latter were very old cases, one admitted in 1848.

Age and civil state.—Under 30 years of age there were 1 male and 2 females; from 30 to 40, 6 males and 5 females; from 40 to 50, 3 males and 6 females; from 50 to 60, 4 males and 5 females; from 60 to 70, 3 males and 6 females; from 70 to 80, 4 males and 2 females; from 80 and upwards 1 female. As regards the civil condition, 6 males and 13 females were single, 12 males and 8 females married, and 3 males and 6 females widowed.

The *occupations* of the males and females were as follows:—

MALES.	FEMALES.		
Agricultural Labourers.....	6	Charwoman	1
Butcher	1	innkeepers	2
Carpenters	2	Labourers	4
Fisherman.....	1	Needlewomen	2
Harness maker	1	Paupers	7
Painter	1	Shopwomen	2
Pauper	1	Servants ..	5
Police Constable	1	No occupation.....	4
Plasterer	1		
Servant	1		
Shoemaker	1		
Stonebreaker	1		
Tailor	1		
Thatcher	1		
Turnpike keeper	1		
Total	21	Total	27

Form of mental disorder, on admission, 2 males and 9 females were in a state of mania, 1 male and 3 females in recurrent mania; 3 males and 5 females suffered from melancholia; 3 males and 2 females from dementia; 2 males and 4 females from fatuity; 4 males and 1 female from general paralysis; 5 males and 2 females from epilepsy; 1 male and 1 female were idiots.

The bodily condition was good on admission, in 2 males and 5 females, bad in 10 males and 13 females, and indifferent in 9 males and 9 females.

The number of the attack was in 12 males and 18 females the 1st.; in 3 males and 5 females the 2nd.; and in 2 males and 3 females the 3rd.; in 4 males and 1 female not known.

Duration of the disorder was under 3 months, in 2 males and 3 females; from 3 to 6 months, in 4 males and 1 female; from 6 to 12 months, in 2 males and 2 females; from 1 to 2 years, in 3 males and 4 females; from 2 to 4 years, in 5 males and 4 females; from 4 to 15 years, in 2 males and 8 females; from 15 to 30 years, in 3 females; from birth, in 2 males and 2 females; the duration not ascertained, in 1 male.

The causes ascribed were, disease of the cerebral membranes in 4 males and 2 females; injury from a fall in 1 male; disease of spinal cord in 1 male; cerebro-spinal disease in 2 males and 1 female; pulmonary disease in 4 males and 5 females; loss of property in 1 male; grief in 2 females; ill-treatment in 3 females; epilepsy in 2 males; hereditary in 1 male and 1 female; enteritis in 1 male and 1 female; bodily illness in 3 females; old age in 2 females; congenital in 2 males and 2 females; intemperance in 1 female; cause not known in 2 males and 4 females.

The assigned cause of death was in 1 male meningitis;

cerebral apoplexy in 2 females, blood in spinal canal in 2 males; myelitis in 3 males and 2 females; cerebritis in 2 males and 1 female; pleuritis in 2 males and 2 females; pleuro-pneumonia in 1 male and 3 females with hydrothorax; broncho-pneumonia in 1 male; pneumonia in 4 males and 3 females; emphysema in 3 females; pulmonary phthisis in 2 males and 9 females; pericarditis in 1 male; enteritis in 1 female; Bright's disease in 1 male; erysipelas in 1 male; cancer in 1 female.

APPEARANCES AFTER DEATH, AND WEIGHT OF THE
BODY AND PRINCIPAL ORGANS IN 21 MALES AND
27 FEMALES.

Head and Spine.—Pus under the scalp in 1 male, the skull was unusually thick in 3 females, one was an idiot with an exceedingly small brain; the dura mater preternaturally adherent in 5 males and 2 females, opacity of the arachnoid in 3 males and rough in 1 male; an unusually large quantity of fluid in 13 males and 7 females, cerebral apoplexy in 2 females, congestion of blood in cerebral vessels in 5 males and 3 females, and in 1 female cysts in the choroid plexus; the right cerebral hemisphere was heavier than the left in 2 males, cerebellum and spinal cord covered with recent lymph in 1 female; the weight of the encephalon varied in the males from 39 to 56 ounces and in the females from $19\frac{1}{2}$ to $50\frac{1}{2}$ ounces, the average weight in the males was 47.2 and in the females 4.12; in the males 6 were above and 5 below the average weight, and in the females 5 were above and 9 below the average weight.

The spinal cord was natural in 12 males and 21 females, it was unusually pale and firm in 1 male and 1 female, soft in 6 males and 2 females, the spinal canal contained blood in 3 males and 1 female, recent lymph on the spinal cord in 1 female; the spinal cord varied in weight in 18 males from 1 to $1\frac{1}{2}$ ounces, and in 21 females from

$\frac{3}{4}$ to $1\frac{1}{2}$ ounces. The average weight of the cord in the males was 1.3 and in the females 1.1 ounce.

Thorax.—Old pleuritic adhesions existed in 4 males and 14 females, on both sides recent pleuritic adhesions in 1 male and 1 female, on the right side in 2 males and 1 female, on the left side only in 2 males and 4 females. Hydrothorax was found in 2 males and 2 females on the right side, in 1 male on the left side, and in 1 female on both sides; emphysema and bronchitis in 5 males and 4 females; congestion of blood in the lungs in 2 males and 1 female; pleuro-pneumonia in 1 male and 3 females; pneumonia in 3 males and 3 females on the right side, and on both sides in 3 males and 4 females; the average weight of the right lung in males was 39.2 and in females 29.5, the average weight of the left lung in males was 37.5 and in females 28.5; there were pulmonary tubercles in 1 male and 1 female on the right side, and in 1 male and 6 females on both sides; the average weight of the right lung was 28.9 in males and 21.3 ounces in females, the average weight of the left lung in males 25.5 and in females 20.6; the lungs were natural in 6 males and 9 females; the average weight of the right lung in males was 19.3 and in females 14.6, the average weight of the left lung 18.1 in males and in females 14 ounces. There was pericarditis in 1 male; the heart was enlarged above 10 ounces in 8 males and above 8 ounces in 9 females, the heart was atrophied below 8 ounces in 2 males and below $6\frac{1}{2}$ ounces in 6 females; the average weight of the heart in 21 males was 11 ounces and in 27 females 7.8 ounces.

Abdomen.—The omentum was fatty in 1 female, a cartilage the size of a marble attached to the omentum in 1 male, clots of blood in peritoneum in 1 male, old peritonitis in 1 female, and recent peritonitis in 1 male, tubercles on peritoneum in 1 female; the stomach was thickened in 1 male, enlarged and contained a shaving of wood in 1 male, gastritis in 1 female; an ulcer the size of a halfpenny with open mouth of an artery in it at cardiac end of stomach in 1 male; ulceration of the ileum in 2 females, thickening

in 1 female, discoloured in 1 female, stricture and ulceration in 1 female, and in 2 females ulceration of cœcum ; in 5 males the lower portion of the colon was thickened, in 3 males and 1 female there was enteritis, the mesenteric glands enlarged in 1 female ; the liver much enlarged in 1 male and 2 females, soft in 1 female ; gall bladder excessively distended in 1 female, ; cartilaginous deposits on capsule of spleen in 1 female, spleen enlarged in 1 male and 2 females, softened in 1 male ; kidneys granular in 1 male, cysts on surface in 1 female, congested with blood in 1 male, left kidney atrophied in 1 male, and enlarged in 1 male ; uterus filled with cheesy matter in 1, and schirrhous and, ulceration in 1, fibrous tumour the size of a marble on right side in 1 ; abdominal organs generally enlarged in 1 male, unusually pale in 1 male, and unusually small in 3 females, The body emaciated in 1 male and 6 females bedsores in 1 female.

The weight of the body varied in 20 males from 86 to 144 lbs., and in 27 females from 51 to 120 lbs., the average weight in the males was 116.1 and in the females 82lbs ; the length of the body varied in 20 males from 5 ft. 1 in. to 6 feet, and in 27 females from 4ft. 5 in to 5 ft. 6 in, the average length in the males was 5ft. 6 $\frac{3}{4}$ in. and in the females 5 feet 1 $\frac{1}{2}$ inches. The stomach varied in 21 males in weight, from 4 to 9 ounces and in 27 females from 2 $\frac{1}{2}$ to 6 ounces, the average weight in the males was 5 $\frac{3}{4}$ and in the females 4 $\frac{3}{4}$ ounces ; the liver varied in 21 males from 35 to 70 ounces and in 26 females from 25 to 72 ounces, the average in the males was 52 and in the females 42 $\frac{1}{2}$ ounces ; the spleen varied in males from 2 $\frac{1}{2}$ to 8 and in the females from 1 $\frac{3}{4}$ to 8 $\frac{1}{4}$, the average in males was 5 $\frac{1}{2}$ and in females 4 $\frac{1}{2}$ ounces ; the pancreas varied from 2 $\frac{1}{2}$ to 3 $\frac{1}{2}$ in the males and in females from 1 $\frac{1}{4}$ to 3 $\frac{1}{4}$, the average weight in males was nearly 3, and in females nearly 2 $\frac{1}{2}$ ounces ; the right kidney varied from 3 $\frac{1}{2}$ to 7 in males and from 2 $\frac{1}{2}$ to 6 $\frac{3}{4}$ in females, the average weight in males was nearly 5 and in females nearly 4 ounces ; the left kidney varied from 2 $\frac{1}{2}$ to 8 $\frac{1}{4}$ in males and from 2 $\frac{1}{4}$ to 7 in females, the average weight in males was above 5 and in females above

4 ounces; the renal capsules varied in males from $\frac{1}{2}$ to 1, and same in females; the average weight in males was 8 and in females 6 ounces; the uterus varied from $\frac{3}{4}$ to 3 ounces; the average weight in 25 cases was nearly 2 ounces.

APPENDIX.

TABLE I. (1867.)

Showing the time that each of 79 cases required for its treatment to effect recovery, with the length of time the disease existed before admission.

Duration of the Disease prior to Admission.	No. of Cases.		Time occupied in the Treatment to effect Recovery.														
			Months.														
	M.	F.	MALES.						FEMALES.								
1 Week	7	8	7	5	6	4	15	5	3	6	9	5	9	6	3	6	21
2 Weeks	7	5	9	4	9	8	12	6	5	9	5	6	26	19			
3 Ditto	3	3	8	4	17	5				20	8	4					
4 Ditto	2	4	3	4	7					17	5	6	13	5			
5 Ditto	1	2	2	2						9	5						
6 Ditto	1	3	1	2						5	3	3					
7 Ditto .....	..	2								4	2	9				
8 Ditto	1	4	4							15	3	2	4	5			
12 Ditto	1	2	3	0						2	1	1					
14 Ditto	1	1	6							6							
4 Months .....	..	2								7	4					
6 Ditto	1	3	3							9	8	1	4				
7 Ditto	1	2	9							6	1	9					
9 Ditto .....	..	4								6	9	4	3			
24 Ditto	2	2	2	0	10					3	2	4					
60 Ditto	1	..	1	9													
Several years.....	2	1	3	1	4					6							
Total	31	48															

Of these 79 Recoveries the form of the Disorder had been :—

	M.	F.
Mania.....	15	16
Ditto Recurrent	5	9
Ditto Puerperal	0	3
Monomania	0	1
Melancholia	9	18
Delirium Tremens	1	1
Epilepsy and Mania	1	0
Total	31	48

The Causes were :—

	M.	F.
Hereditary Predisposition...	8	14
Grief and over anxiety	2	3
Love and Jealousy	0	3
Fright	0	1
Ill-treatment and destitution	1	1
Previous Illness	9	6
Injury to head	0	1
Intemperance	5	2
Unknown	6	7
Religious Delusions	0	5
Critical Period	0	5

Total **31** **48**

TABLE II.

Showing the Number of Patients admitted from each Union, distinguishing between those brought from their own homes, the Workhouses, and Asylums, with the results in 1867.

UNIONS.	Homes.		Workhouses		Gaols and Asylums		Total		Recovered		Relieved not Improved		Died		Remaining		Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Axbridge	7	5	0	3	2	0	9	8	2	1	0	0	0	2	7	5	17
Bath	8	12	0	2	0	0	8	15	1	5	0	0	0	2	5	9	28
Bedminster	3	3	1	3	0	0	4	6	0	0	1	0	0	0	3	3	10
Bridgewater	3	4	1	0	0	0	4	5	1	0	0	0	1	0	2	4	9
Chard	1	3	0	1	0	0	1	4	0	0	0	0	0	0	1	3	5
Clinton	7	9	1	1	0	0	8	10	4	4	1	0	1	0	0	5	18
Dulverton	1	2	0	0	0	0	1	2	0	1	0	0	0	0	1	1	3
Frome	3	4	0	1	1	0	4	5	1	2	0	1	0	0	1	2	9
Keynsham	2	1	0	0	0	0	2	1	0	0	0	0	0	0	1	1	3
Langport	2	3	0	0	0	0	3	3	2	0	0	0	0	0	1	1	16
Shepton Mallet ..	3	5	1	3	0	0	4	8	0	2	0	0	0	2	4	2	10
Taunton	1	4	2	1	1	0	4	6	0	1	0	0	0	0	0	0	9
Wellington	1	6	0	2	0	0	1	8	1	1	0	0	0	0	0	3	10
Wells	4	4	0	0	0	0	4	4	1	1	0	0	0	0	2	3	9
Wincanton	2	0	0	3	0	0	2	3	0	0	0	0	0	0	0	3	5
Williton	0	3	0	0	0	0	0	3	0	0	0	0	0	0	0	3	8
Yeovil	4	8	2	2	0	0	6	10	0	1	0	0	2	3	7	16	
Total	52	76	9	22	4	3	65	101	14	22	3	2	8	13	40	64	167

TABLE IV.

Showing in quinquennial periods, the ages of those admitted, the sexes, the civil condition, and the number of the attacks of Insanity.

QUINQUENNIAL PERIODS.	NUMBER OF ADMISSIONS.			CIVIL CONDITION.						NUMBER OF ATTACK.								
	M.	F.	Tot.	SINGLE.		MARRIED.		WIDOWED.		1st.		2nd.		3rd or more.		UNKNOWN.		
				M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
Under 15 years.	1	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
From 15 to 20 years	6	2	8	0	0	0	0	0	2	6	0	0	0	0	0	0	0	0
" " 25 "	11	11	22	8	3	0	0	0	8	8	2	3	1	0	0	0	0	0
" " 30 "	5	13	18	9	3	3	1	1	5	7	2	7	0	0	0	0	0	0
" " 35 "	4	9	13	6	3	2	0	0	7	8	2	3	0	0	0	0	0	0
" " 40 "	6	10	16	5	3	5	0	0	2	8	3	2	0	0	0	0	0	0
" " 45 "	7	10	17	2	3	7	0	1	5	5	2	2	1	0	0	0	0	0
" " 50 "	4	11	15	3	2	6	0	1	7	3	2	2	0	1	0	0	0	0
" " 55 "	8	6	14	1	7	4	1	1	6	7	2	2	0	1	0	0	0	0
" " 60 "	4	10	14	0	4	3	0	0	4	4	2	1	0	0	0	0	0	0
" " 65 "	4	6	10	0	4	3	0	0	4	5	2	2	0	0	0	0	0	0
" " 70 "	2	6	8	1	2	2	0	1	3	2	0	2	0	2	0	0	0	0
" " 75 "	3	2	5	0	2	1	0	1	0	2	1	0	1	0	0	0	0	0
" " 80 "	1	3	4	0	1	0	0	0	1	2	0	0	0	0	0	0	0	0
" " 80 and upwards	0	2	2	0	0	0	0	0	2	2	0	0	0	0	0	0	0	0
Total	66	101	167	29	42	34	3	20	35	60	19	32	7	7	5	2		

TABLE V.

Showing the occupation of Patients admitted in 1867.

MALES.			FEMALES.		
Labourers ...	25	No occupation ...	4	Agricultural servants	8
Masons, do. ...	1	Printer ...	1	Beerhouse keepers...	3
Bakers ...	2	Sadler ...	1	Factory hands ...	3
Carpenters ...	2	Short hand writer...	1	Glovers & Milliners	8
Edge tool grinder ...	1	Tailors ...	4	Charwomen...	7
Farmers ...	2	Sawyer ...	1	Household work ...	24
Fishermen ...	2	Shoemakers ...	3	Paupers ...	14
Gardener ...	1			servants ...	20
Blacksmiths ...	2			Shopkeepers ...	5
Pensioner ...	1			Tripe dresser ...	1
Mason ...	1			Umbrella mender...	1
Miners ...	3			Hawkers ...	2
Painter ...	1			No occupation ...	5
Paupers ...	3				
		Total ...	62	Total ...	101

TABLE VI.

Showing the bodily health of 167 patients on admission, as contrasted with the present condition of those remaining.

	Bodily Health on Admission.				Present Bodily Health of those remaining.		
	Good.	Bad.	Indifferent.		Good.	Bad.	Indifferent
Males ...	19	19	28	Males ...	20	10	11
Females	29	27	45	Females	34	9	21
Total ...	48	46	73		54	19	32

TABLE VII.

Showing the religion, and the degree of education with reference to the admissions.

	RELIGION.					DEGREE OF EDUCATION.				
	Church of England	Wesley-ans.	Other Dissen-ers.	Roman Catholics.	Not Known.	Good.	Read and Write.	Read only.	Neither Read nor Write.	Not Known.
Males ...	51	5	6	1	3	5	25	16	16	4
Females	73	8	14	1	5	6	37	26	26	6
Total...	124	13	20	2	8	11	62	42	42	10

TABLE VIII.

Showing the probable Cause of the Disorder in the admissions in 1867.

MORAL.	M.	F.	Total	PHYSICAL.	M.	F.	Total
	Fright, Superstition	1	3		4	Accidental Injury ..	6	..	2
Disappointment ..	3	..	3	Congenital.. ..	2	3	9
Ill-treatment	1	2	3	Disease of nervous centres	8	10	18
Overwork	2	1	3	Critical Period.. ..	..	7	7
Religious excitement	1	3	4	Hereditary predisposition	15	27	42
Poverty	1	1	2	Intemperance	5	2	7
Remorse and Grief ..	2	8	10	Old age	1	6	7
				Previous illness ..	8	10	18
				Sunstroke .. ..	..	1	1
Total	11	18	29				
No cause assigned ..	10	17	27	Total	45	66	111

TABLE IX.

Showing the Forms of the Disorder in the admissions in 1867.

FORMS OF THE DISORDER.	Males.	Females.	Total.
Mania	18	30	48
Ditto Recurrent	9	16	25
Ditto Puerperal .. ..	..	2	2
Monomania .. ..	..	2	2
Dementia	5	6	11
Melancholia	14	2	43
Congenital Idiocy	6	6	12
Epilepsy	10	6	16
General Paralysis	3	1	4
Fatuity	1	3	4
Total.. ..	66	101	167

TABLE X.

Showing the duration of the existing attack in those admitted with reference to the result in 1877.

Duration of the existing attack.	Admitted.			Recovered.			Relieved.			Not Improved.			Died.			Remaining.		
	M.	F.	Tot.	M.	F.	Tot.	M.	F.	Tot.	M.	F.	Tot.	M.	F.	Tot.	M.	F.	Tot.
Under 1 Month	24	25	49	6	7	13	1	0	1	0	0	0	3	5	8	14	13	27
" 2 Months	5	18	23	1	6	7	0	0	0	0	0	0	1	1	2	3	11	14
" 3	4	13	17	1	2	3	0	1	1	0	0	0	0	0	0	3	10	13
" 4	6	4	10	2	0	2	0	0	0	0	0	0	1	0	1	3	4	7
" 5	2	3	5	0	2	2	0	1	1	0	0	0	0	0	0	2	0	2
" 6	7	4	11	2	1	3	0	0	0	0	0	0	1	0	1	4	3	7
" 9	0	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
" 10	0	1	1	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0
" 12	0	4	4	0	1	1	0	0	0	0	0	0	0	2	2	0	0	1
" 18	1	2	3	0	1	1	0	0	0	0	0	0	1	1	2	0	0	0
" 2 Years.	0	4	4	0	1	1	0	0	0	0	0	0	0	1	1	0	0	1
" 3	1	3	4	1	0	1	0	0	0	0	0	0	0	1	1	0	0	0
" 4½	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
" 10	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
" 12	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
" 15	2	0	2	1	0	1	0	0	0	0	0	0	0	0	0	1	0	1
" 20	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
From Childhood	6	9	15	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
Unknown ...	7	4	11	0	0	0	1	0	0	0	0	0	1	2	3	6	9	15
Total ...	66	101	167	14	22	36	2	2	4	1	0	1	8	13	21	41	64	105

TABLE XI.

Showing the annual admissions since the opening of the Asylum 1st March 1848, with the discharges, & the number of each year remaining 31st Dec, 1867.

	ADMITTED.										TOTAL DISCHARGES										Remaining 31st Dec 1867											
	1867					1866					1865					1864																
	New Cases		Re-admissions		Recovered		Relieved		Not Improved		Died		Recovered		Relieved		Not Improved		Died													
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F								
1848	140	142	2	..	284	1	34	32	65	44	6	4	10	59	62	121	24	19	43								
1849	63	73	5	7	148	1	27	24	55	21	3	6	9	28	28	25	53	2	7	9								
1850	53	63	10	5	131	..	..	..	..	..	..	22	23	45	17	5	15	27	19	46	4	4	8			
1851	54	55	10	3	122	..	..	..	..	..	..	25	22	47	9	4	7	28	18	50	4	6	10			
1852	57	56	5	10	123	..	..	..	..	..	..	25	30	55	8	4	2	27	21	45	3	5	8			
1853	62	52	7	12	133	..	..	..	..	..	..	24	25	50	5	4	3	31	23	54	4	7	11			
1854	50	55	8	10	123	..	..	..	..	..	..	25	35	63	6	11	9	16	17	33	3	3	6			
1855	65	65	13	4	147	37	20	68	7	13	2	3	26	20	45	7	10	17								
1856	61	49	12	11	133	..	..	..	..	..	..	29	30	55	8	13	9	24	17	41	9	3	12			
1857	74	65	19	9	167	..	..	..	..	1	33	33	71	3	6	7	13	34	25	59	7	6	13					
1858	69	61	11	10	151	..	..	..	..	..	2	39	35	74	6	4	9	22	18	40	8	8	16				
1859	65	52	12	23	152	..	..	..	..	2	37	43	80	6	2	5	8	26	17	43	3	10	13					
1860	62	49	14	15	140	..	..	..	..	1	33	37	70	8	5	3	8	25	8	33	5	9	14					
1861	94	73	14	12	193	1	47	5	99	9	17	5	1	32	17	49	16	12	28								
1862	71	70	18	9	168	2	42	18	90	5	6	11	6	1	22	14	36	15	10	25								
1863	54	69	16	17	156	..	..	..	..	..	..	24	54	73	9	6	5	25	14	39	7	12	19			
1864	97	73	22	25	217	..	..	..	..	..	1	60	40	109	5	6	5	30	17	47	19	25	45				
1865	71	81	21	23	196	3	6	9	1	2	5	38	52	88	7	4	2	24	17	4	21	26	47									
1866	66	78	12	28	184	11	18	29	2	4	6	31	42	75	6	1	3	20	9	29	20	42	62									
1867	47	73	19	28	167	15	23	38	1	3	8	12	25	38	1	2	1	8	12	20	41	64	105									
Total ..	1375	1354	250	261	3240	32	21	53	5	4	9	2	0	2	21	17	38	647	727	1374	120	152	231	93	5	148	534	390	924	242	291	513

ADMITTED.		DISCHARGED.		REMARKS.	
Males.	Females.	Total.	Males.	Females.	Total.
817	84	901	398	45	443
158	16	174	79	94	173
Per centage of new cases					
Ditto readmissions		15.8	Ditto recovered ...		39.8
			Ditto relieved ...		7.9
			Ditto not improved ...		5.8
			Ditto		3.4
			Ditto		4.6

TABLE XII.

Causes of Death at three periods of life 60 cases, in 1867.

Causes of Death.	Under 40 years.		From 40 to 60 years.		From 60 and Upwards.		Total.		
	M.	F.	M.	F.	M.	F.	M.	F.	
Cerebro-spinal System.	Epilepsy... ..	0	1	0	0	1	0	1	1
	Cerebral Apoplexy	0	0	0	1	0	2	0	3
	Spinal ditto	0	0	2	0	0	0	2	0
	Meningitis	1	1	0	0	2	0	3	1
	Myelitis	1	1	0	0	0	0	1	1
	General Paralysis	1	0	1	0	0	0	2	0
Total... ..	3	3	3	1	3	2	9	6	
Respiratory System.	Hydrothorax	0	1	1	0	0	0	1	1
	Emphysema	0	0	0	1	0	1	0	2
	Pneumonia	2	0	1	1	1	2	4	3
	Pleuro-pneumonia	0	2	2	1	1	0	3	3
	Pulmonary Phthisis	2	4	0	1	0	1	2	6
Total... ..	4	7	4	4	2	4	10	15	
Circulatory System.	Cancer	0	0	0	2	0	0	0	2
	Enlarged Heart	0	0	0	0	0	0	0	0
	Dropsy	0	0	0	1	1	0	1	1
Total.. ..	0	0	0	3	1	0	1	3	
Digestive Organs.	Ulcer in the Stomach	1	0	0	0	0	0	1	0
	Enteritis	0	1	0	0	0	1	0	2
	Icterus	0	0	0	1	0	0	0	1
Gross Total.. ..	8	11	7	9	6	7	21	27	

TABLE XIII.

Showing the classification of the Patients remaining in the Asylum at the end of the year 1867.

	Males.	Females.	Total.	Average.
Idiots.....	28	20	48	9.4
Epileptics	42	43	85	16.6
Sick	30	31	61	11.9
Aged	6	12	18	3.5
Incurable, quiet and harmless ...	50	46	96	18.7
" not quiet and harmless	40	86	126	24.5
Curable	27	52	79	15.4
Total	223	290	513	100

OBITUARY.—MALES.—1867.

Date of Death 1867.		Date of last Admission	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		
							HEAD AND SPINE.	THORAX	ABDOMEN.
Jan. 4, 6 a.m. 1867.	July 21, 1866	71. Single. Stone- breaker.	Epilepsy, con- bined with dementia and Leinple- gia right side ; bad health.	Ten months; meningitis.	Erysipelas, epilepsy, asthma.		<p>A quantity of pus escaped when the scalp was cut ; brain large more fluid than natural in the cerebral ventricles, encephalon 56.</p> <p>Lateral ventricles dilated and distended with fluid, brain usually firm 10; spinal cord rather soft 14.</p>	<p>Old pleuritic adhesions on both sides, upper lobes of lungs emphysematous, each lung 20 ; heart large 13.</p> <p>No pleuritic adhesions. emphysema of the upper lobes of both lungs, right 17½, left 16½ ; heart 10.</p>	<p>Stomach 4, liver 44, spleen ½, pancreas 3, right kidney 4½ left 4½, renal capsules ½ weight of body 117 lbs length 5 feet 2 inches.</p> <p>Stomach weighed 5½, liver 46 spleen 2½, pancreas 2½, right kidney 4½, left 4½, renal capsules ½, surface of both kidneys granular ; body 97 lbs length 5 feet 1 inch.</p>
Jan. 22, 5 a.m. 1867.	April 18, 1864	67. Widowed. Plais- terer.	Melancholia ; second attack ; bad health.	Four years ; from a fall ; suicidal.	Asthma, Bright's dis- ease of kid- neys,anasarca		<p>Dura mater strongly adherent to the skull, more fluid than natural in the lateral ventricles, right cerebral hemisphere 1 oz. heavier than the left, brain large and soft 5½, spinal canal filled with blood, spinal cord soft 14.</p>	<p>Congestion of blood in lower lobe of right lung, which was in the first stage of pneumonia, 29, left 17, upper lobes of both lungs emphysematous, heart very large 17.</p>	<p>Stomach large 7½, liver 51, spleen large 7½, pancreas 2, kidney large, right 7, left 7½ renal capsules ; weight of body 142 lbs., length 5 feet 7 inches.</p>
Jan. 23, 8.30 p.m. 1867.	June 19, 1865	55. Single. La- bourer.	Mania com- bined with general pa- ralysis ; first attack ; indif- ferent health	Twenty one months ; cerebro-spi- nal disease ; dangerous to others.	Softening of spinal cord and blood in spinal canal, pneumonia, enlarged heart				

POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		HEAD AND SPINE.		THORAX.		ABDOMEN.		
Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	HEAD AND SPINE.	THORAX.	
Jan. 31, 11.45 p.m. 1867.	Nov. 26, 1866	75, Widowed. Servant.	Mania, fatuity first attack; bad health.	Four months; asthma; sleepless; dangerous to others.	Emphysema and pneumonia, right.	Dura mater preternaturally adherent to skull, the brain torn in removal 48; spinal cord natural 1¼.	Old pleuritic adhesions upper lobes, of both lungs emphysematous; pneumonia lower lobe right 28, left 16; heart 10.	Stomach 5½, liver large 70, spleen 5½, pancreas 3½, right kidney 6 left 6¼, ren. capsules ¾; intestines natural; body 132 lbs; length 5ft. 10 inches
Feb. 10, 9.45 p.m. 1866.	Dec. 12, 1866	40, Married. Carpenter.	Acute mania; first attack; indifferent health.	Three months; pulmonary phthisis; violent and noisy.	Pulmonary phthisis, meningitis, cerebritis.	Brain rather soft. Large. 52, about 4 ounces of fluid in the ventricles which were distended; spinal cord natural 1¼.	Old pleuritic adhesions, a tubercular cavity in the apex of right lung, pneumonia in lower lobe 33, left natural 20; heart 9½.	Stomach 6, liver 62, spleen 7, pancreas 3, kidneys congested with blood right 4½, left 7, ren. capsules 1 mucous membrane of colon thickened; body 100 lbs; length 5 ft. 8 inches.
March 5, 5 a.m. 1865.	April 18, 1865	45, Married. Painter.	Epilepsy combined with general paralysis; second attack; bad health.	Twenty-seven months; arachnitis; ill health, restless.	Pleuro pneumonia.	Cerebral structure natural, right hemisphere 1 oz. heavier than left, the ventricles distended with fluid 46½; spinal cord soft and pale 1¼.	One pint of fluid by measure on the right side, double pneumonia, lower lobe right in 2nd stage, 46, left 37½; heart 9½.	Stomach large 7 a shaving of wood in it 3 inches long and ½ inch wide, liver 57, spleen 4½ pancreas 3, right kidney ¾, left 4 ¾, ren. capsules ¾; body 117 lbs; length 5ft. 7 inches.

OBITUARY, continued.—MALES.—1867.

Date of Death 1867.	Date of last Admission.	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.	
						HEAD AND SPINE.	THORAX, ABDOMEN.
March 17, 2 p.m. 1867. 1564.	Feb 9, 1867	74, Married. Fisherman.	Dementia, fatuity; first attack; in different health.	Four months; asthma; restless.	Emphysema; meningitis.	Dura mater preternaturally adherent, more fluid than natural in the ventricles, encephalon 39½.	Mucous membrane of large intestines thickened stomach 4½, liver 44, spleen 4, pancreas 2½, each kidney 3½.
Mar. 26, 5 p.m. 1867. 1570.	Mar. 6, 1867	64, Married. Labourer. Inquest case.	Mania; first attack; in different health.	One month; loss of property; violent to others.	Diarrhoea, pneumonia, fracture right arm.	Brain natural. 48½; spinal cord rather soft 1½.	Redness of five inches of mucous membrane of ileum, the lower portion of colon, thickened stomach 6, liver 52, spleen 5½, pancreas 3, right kidney 4½ left 5½ capsules ¾; body 116 lbs; length 5ft. 3 inches.
Mar. 28, 7.15 p.m. 1865. 1405.	Mar. 23, 1865	72, Widowed. Pauper.	Dementia; first attack; good health.	Two and half years; meningitis; restless.	Meningitis cerebritis, pneumonia.	Dura mater adherent to the skull, from 4 to 5 ounces of fluid in the brain which escaped when membranes were divided, the lateral ventricles distended and the interior softened, encephalon large 53½; spinal cord 1½.	Marks of old ulcers in the ileum, size of a split pea, stomach 7, liver 50, spleen 8½, pancreas 3, right kidney 6½, left atrophied 2½; ren. capsules ¾, cartilage size of a boys marble in omentum.

OBITUARY, continued.—MALES.—1867.

POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		HEAD AND SPINE.		THORAX.		ABDOMEN.							
April 1, 3-30 a.m. 1421.	May 6, 1865	Date of last Ad- mission.	55, Married. Thatcher	Age at Death. Civil State.	Mania with general para- lysis; first attack; indifferent health.	Mental State and Bodily Condition on Admission.	Two years; cerebro-spi- nal disease.	Duration and Cause of Disorder.	Myelitis, pneumonia.	Assigned Cause of Death.	More fluid than natural in the cerebral ven- tricles, brain small 39; spinal cord soft 14.	Right lung 21, lower lobe of left lung in first stage of pneu- monia 32; heart enlarged 15,	Stomach 5, liver 53, spleen 5, pancreas 3½, right kidney 5½, left 6¼, ren. cap. 1; body 102 lbs; length 5ft. 6 inches.
April 4, 2.45 p.m. 1547.	Nov. 10, 1866	Date of last Ad- mission.	30, Married. Police consta- ble.	Age at Death. Civil State.	Mania with general pa- ralysis; first attack; bad health.	Mental State and Bodily Condition on Admission.	Three years; cerebro-spi- nal disease.	Duration and Cause of Disorder.	Arachnitis, myelitis, pneumonia,	Assigned Cause of Death.	A large quantity of fluid in the lateral ventricles, encephalon 45½; the lower por- tion of spinal cord softened, 1½.	Pleurotic adhesions on both sides, right lung 26, left in the third stage of pneumonia an abscess size of a pigeon's egg in the apex filled with inodorous matter, 66; heart 10¼.	Stomach 5½, liver 63, spleen 6½, pancreas 3 ½, each kidney 6½, ren. capsules ¾, body 115 lbs; length 5ft. 10 inches.
May 25, 11 p.m. 1106 and 1408.	Oct. 9, 1865.	Date of last Ad- mission.	33, Single; turnpike keeper.	Age at Death. Civil State.	Dementia; 1st attack bad health.	Mental State and Bodily Condition on Admission.	Ten years, pulmonary phthisis	Duration and Cause of Disorder.	Pulmonary phthisis, arachnitis, myelitis.	Assigned Cause of Death.	The ventricles distended with fluid arachnoid lining rough, cerebral structure pale, encep- halon 46; lower portion of spinal cord soft 1.	Old pleuritic adhesions on the left side, tubercles in the right lung, upper lobe em- physematous 23, left lung full of tubercul- ous cavities 25½, heart small 6.	The mucous membrane of a portion of the large intestine thick- ened, stomach 5, liver 41½, spleen 4, pancreas 2½, right kidney 2¾, left 3¼, ren. capsules 1; body weighed 79 lbs., length 5 feet 10 ins.

OBITUARY, continued.— MALES.—1867.

Date of Death 1867.	Date of last Admission.	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.	
						HEAD AND SPINE.	THEORAX. ABDOMEN.
May 30, 5 p.m. 1858 and 1819.	July 10, 1866.	33. Married, Tailor.	Mania recurrent; third attack; bad health.	Thirteen months meningitis, excited and restless.	Meningitis, fluid in the brain, pneumonia.	Cerebral vessels congested with blood, the ventricles distended. above 2 ounces of fluid escaped when dura mater was divided, brain 47½ spinal cord natural 1½	The lower lobes of both lungs hepaticized right 33, left 25½; heart 8½. Stomach 5, liver 50, spleen 5, pancreas 2½, each kidney 3½. ren. capsules 1; body 140 lbs., length 5ft. 10ins.
June 25, 2.30 a.m. 1888.	June 16, 1867.	36. Single, Carpenter.	Epilepsy combined with mania; first attack; indifferent health.	Six months epilepsy violent.	Arachnitis, enteritis, broncho pneumonia.	The cerebral ventricles congested with blood. from 5 to 6 ounces of fluid in the cerebral ventricles encephalon 46½, spinal cord natural 1½.	Redness of bronchial lining membrane the lower lobe right lung in the 1st stage of pneumonia 32, left 13; heart 10½. Redness of mucous membrane of lower portion of the ileum, some small ulcers in the descending colon, stomach 5½, liver 46, spleen 5, pancreas 3, each kidney 4½, ren. capsules 1; body 105 lbs., length 5ft. 8 ins.
July 1, 8 p.m. 1884.	May 20, 1867.	67. Married, Harness Maker.	Epilepsy combined with mania; first attack; indifferent health.	Arachnitis, epilepsy; violent.	Arachnitis, pleuritis.	Opacity of the arachnoid, about 5 ounces fluid in the cerebral ventricles, encephalon 44½; spinal cord natural 1.	Two and quarter pints of fluid by measure in the left side, left lung compressed 19, right natural 22; heart 10½. Some dark clots of blood in the abdomen, no disease in arteries, intestines natural, stomach 4½, liver 55, spleen 5½, right kidney 3, left 3½, renal capsules 1, pancreas 3; body 110 lbs., length 5 feet 4 ins.

OBITUARY, continued—MALES.—1867

Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		
						HEAD AND SPINE.	THORAX.	ABDOMEN.
July 4, 4.45 p.m. 1522 and 1590.	June 25, 1867.	44. Married La-bourer.	Melancholia; second attack bad health refuses food.	Three weeks gastro enteritis.	Spinal apoplexy, gastro enteritis.	Congestion of blood in the cerebral vessels, the ventricles contained about 2 ounces of fluid. 51; the spinal canal filled with blood and the membranes red 1.	The lower lobes of both lungs congested with blood, right 20½, left 22; heart 11.	Mucous membrane of stomach dark and thickened 6, the mucous membrane of colon also in a similar state; liver 54, spleen 5½, pancreas 3, right kidney 5½, left 5¾, ren. capsules ¾; body 117 lbs, length 5 feet 7 ins.
July 4, 9.45 p.m. 692.	March 6, 1857.	34. Single La-bourer.	Imbecility congenital; good health.	Birth, hereditary.	Hæmatemesis, ulcer in stomach, pericarditis.	Brain unusually pale 45½ cord pale 1¼.	Pleuritic adhesions on left side only, right side 17, left lung 21; heart and pericardium adherent 11.	Ulcer size of a half-penny at cardiac end of the stomach in which was opening of an artery; stomach large and thickened 9, intestines natural, liver 57, spleen 8, pancreas 3, each kidney 5½, ren. capsules ¾; body 144 lbs, length 5 feet 6 inches.
July 5, 2 p.m. 1568.	Feb. 23, 1857.	23. Single La-bourer.	Epilepsy combined with mania: in different health.	From Childhood.	Cerebritis and myelitis, coma.	Red softening in the interior of ventricles, base of brain covered with recent lymph, as well as the spinal cord which was soft 1½, encephalon 49.	Pleuritic adhesions on left side only, right lung 20, left 19; heart enlarged 14½.	Weight of stomach 6½, liver 52, spleen 7, pancreas 3, each kidney 5½, ren. capsules ¾; body 135 lbs, length 5 feet 4 ins.

OBITUARY, continued—MALES.—1867.

POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		HEAD AND SPINE.		THORAX.		ABDOMEN.		
Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	HEAD AND SPINE.	THORAX.	
July 14, 1 p.m. 1867.	May 18, 1867.	55, Married, Labourer.	Dementia; first attack; in different health	Fourteen months; cerebral disease.	Pneumonia.	Brain appeared natural; 45; spinal cord natural 1½.	Lower lobes right lung 1st stage pneumonia 36, left 20; heart 10.	Intestines natural, stomach 5, liver, 51, spleen 4, pancreas 2, right kidney 4½, left 5, renal capsules ¾ body wasted 107 lbs. length 5 feet 6 ins.
Nov. 29, 4.45 a.m. 1867 and 421	Sep. 5, 1867	51, Married, Shoemaker.	Melancholia, 3rd attack; bad health, refused food, suicidal.	3 months; hereditary on Father's side.	Cachexy, pleuritis meningitis.	Dura mater unusually adherent, arachnoid opaque, cerebral vessels congested with blood, brain firm, each cerebral hemisphere 21, cerebellum 14, medulla and pons 14, encephalon 48½; spinal cord rather soft 14.	Old pleuritic adhesions, 2 pints of fluid by measure in right pleura, the lung covered posteriorly with recent lymph, a small abscess on surface of lung, lung compressed 10, left lung 15; heart small 7.	Intestinal mucous membrane dark, stomach 6½, liver 35, spleen 3½, pancreas 3, each kidney 3¾, renal capsules ¾; body emaciated 86 lbs., length 5 feet 8 ins.
Dec. 12, 11.15 p.m. 1867	April 24, 1866	37, Married, Butcher.	Mania combined with general paralysis.	2 years; cause not ascertained.	Spinal apoplexy, pneumonia, right.	Opacity of the arachnoid congestion of blood in the cerebral vessels, encephalon 47½; the spinal canal filled with dark blood, cord rather soft 14.	The lower lobe of right lung infiltrated with blood, dark red, 1st stage pneumonia 38, left 21; heart 10.	Intestines natural, the stomach 6½, liver 48, spleen 5½, pancreas 2½, kidneys large right 7 left 8½, ren. capsules ½; body 114 lbs. length 5 feet 5 ins.

OBITUARY.—FEMALES.—1867.

POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.									
Date of Death 1867.	Date of last Admission.	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	HEAD AND SPINE.	THORAX.	ABDOMEN.	
Jan. 1, 10-30 p.m. 1402	Oct. 23, 1865	33, Single, Servant.	Dementia; first attack; bad health.	Three years; cerebritis, paralysis	cerebritis, myelitis, pleuro-pneumonia.	The brain unusually firm the ventricles distended with fluid 40½; spinal cord soft 1¼.	Two pints of fluid by measure on the right side, the pleura covered with recent lymph, right 19, lower lobe left lung, in first stage of pneumonia 25; heart 9.	Intestines natural, stomach 5, liver 53; spleen large 8, pancreas 2¼, right kidney 3½, left 3¾, renal capsules ¾. uterus 2; body 120 lbs., length 5 feet 5 inches.	
Jan. 6, 1-30 a.m. 879	Oct. 18, 1859	43, Married, Straw bonnet maker.	Mania; first attack; indifferent health.	Thirteen years; no cause assigned.	Pulmonary, phthisis.	Brain pale, firm, 44½; spinal cord natural 1¼.	Pleuritic adhesions on both sides, a tubercular cavity and numerous tubercles in the upper lobe of left lung; some tubercles also in the right 20½, left 30; heart small 5,	Extensive ulceration around the ileo caecal orifice, stomach 4, liver 35, spleen 4½, pancreas 3, right kidney 3¾, left 2¾, renal capsules ½, uterus 3½, body emaciated 64 lbs.; length 5ft. 2 inches.	
Feb. 16, 5-15 a.m. 1338	April 17, 1865	54, Widow, Pauper.	Epilepsy combined with mania; second attack; indifferent health.	Twelve years; no cause assigned.	Pulmonary tubercles and pneumonia.	Structure of brain appeared natural, rather more fluid than natural in the lateral ventricles 43¼; spinal cord natural 1¼.	Dense pleuritic adhesions on both sides, both lungs studded with tubercles pneumonia in evening, each lung 38; heart 6¾.	Peritoneum studded with tubercles some white and as large as a split pea; stomach 5, liver large, yellow, 72, spleen 5, pancreas 3, right kidney 5½ left 5¾, renal capsules 1; uterus 2½, body 190 lbs., length 5 feet 5 inches.	

OBITUARY, continued.—FEMALES.—1867.

Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.	
						HEAD AND SPINE.	THORAX. ABDOMEN.
Feb. 17, 3.15 p.m. 815	Dec. 18, 1858	24, Single, Servant.	Idiocy; indifferent health.	Birth; hereditary on mother's side	Pulmonary phthisis.	Small head, the skull unusually thick posteriorly, brain very small, structure appeared natural, only 19½; the spinal cord ¾.	<p>Pleurotic adhesions on both sides, tubercles and tuberculous cavities in both lungs, right 17½, left 11½; the heart exceedingly small 13,</p> <p>A circular ring of ulceration in the lower portion of the ileum, the organs small, stomach 2¼, liver 37, spleen 3¾, pancreas 1½, right kidney 2¼, left 2¼, renal capsules ½ uterus 1½, body small 51 lbs, length 4ft. 5 ins.</p>
March 3, 9 a.m. 939	Sep. 18, 1860	32, Single.	Melancholia: first attack; indifferent health: refuses food.	Seven years; no cause assigned.	Pulmonary phthisis.	Brain appeared natural rather small, 39¼; spinal cord natural 1¼	<p>Intestines dark coloured stomach 5, liver, 40, spleen 3½, pancreas 2¼, each kidney 3¾, renal capsules ¾, uterus 1½; body wasted 73 lbs. length 5 feet 6 ins.</p> <p>Intestines natural, mucous membrane of stomach red 5¾, liver 40, spleen 4½, pancreas 3¼, right kidney 4¾, left 5, ren. capsules ¾, uterus 2¼; body 110 lbs. length 4ft. 10 inches.</p>
March 14, 3.40 a.m. 1222 and 766	March 7, 1866	32, Single, sempstress.	Mania: recurrent; second attack; bad health; dorsal curvature.	Three and half years; after fever; pulmonary disease.	Gastritis, hydrothorax.	Brain appeared natural. 46; spine distorted, cord not examined.	<p>Pleurotic adhesions on both sides 2 pints by measure in the chest, lungs compressed, each 9; heart 10½.</p>

OBITUARY, continued—FEMALES.—1867.

Date of Death 1867.	Date of last Admission.	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		
						HEAD AND SPINE.	THORAX. ABDOMEN.	
March 19 11-30 a-m 1508	Nov. 16, 1866	24, Single, Servant.	Epilepsy combined with mania; first attack; good health.	Birth; violent to others.	Epilepsy, and myelitis.	The right cerebral hemisphere $\frac{1}{4}$ ounce heavier than the left, the cerebral structure appeared natural $35\frac{3}{4}$; lower half spinal cord in a pulpy state, $1\frac{1}{4}$ white l.	Pleuritic adhesions on left side, cadaveric congestion of lower lobe of right lung $18\frac{1}{2}$, left $15\frac{1}{2}$, heart 8.	Intestines healthy, stomach $4\frac{1}{2}$, liver 35, spleen $3\frac{1}{2}$, pancreas $2\frac{1}{2}$ right kidney $4\frac{1}{2}$, left $2\frac{1}{2}$, renal capsules $\frac{3}{4}$, uterus $1\frac{1}{2}$; body $1\frac{1}{3}$ lbs, length 5 feet.
March 23 10-45 a-m 822	Feb. 10, 1859	46, Married.	Mania; first attack; bad health.	Nine years; fright from fire.	Hemorrhage cancer of uterus.	Brain unusually pale, 44 ; spinal cord also pale l.	Old Pleuritic adhesions both sides, upper lobes lungs emphysematous, right 15 , left 11 ; heart 10 .	Intestines natural, organs pale, stomach $4\frac{1}{2}$, liver 45 , spleen 8 , pancreas 2 , each kidney 4 , ren. capsules $\frac{3}{4}$; body of uterus white firm, enlarged ulcerated $5\frac{1}{2}$. Body pale wasted 80 lbs length 5 feet.
March 29 noon, 1510	Nov. 24, 1866	79, Single.	Fatuity; indifferent health; restless.	Six years; asthma,	Emphysema, pneumonia, enteritis.	More fluid than natural in the cerebral ventricles, a dark ciratrix remains of an apoplec-tive clot in right cerebral hemisphere, brain small 37 ; spinal cord soft l.	Recent pleuritic adhesions on both sides emphysema of upper lobes, lower lobes in first stage of pneumonia, right $2\frac{1}{2}$, left 24 ; heart $9\frac{1}{2}$.	Mucous membrane of intestines thickened and red patches in the ileum, stomach $5\frac{1}{2}$, liver 40 , spleen $4\frac{1}{2}$, pancreas $2\frac{1}{2}$, right kidney $4\frac{1}{2}$, left $5\frac{1}{2}$, ren. capsules 1 ; uterus $2\frac{1}{2}$; body 82 lbs, length 5 feet.

OBITUARY, continued—FEMALES.—1867

		POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.						
Date of Death 1867.	Date of last Admission.	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	HEAD AND SPINE.	THORAX.	ABDOMEN.
March 31 7.30 a.m. 5.50 and 7.56	Feb. 19, 1858	38, Single, Servant.	Melancholia; second attack; good health.	Nine years; hereditary on mother's side.	Cerebritis, myelitis, paralysis.	The brain soft especially towards the centre, the base of the brain covered with recent lymph which exten- ded throughout the spinal canal covering the cord, 1½; encep- halon 4½.	Pleuritic adhesions on the right side only. right lung 12½. left 9; heart small 6½.	A stricture and slight ulceration about the middle of the small intestines, stomach 6, liver 5¼, spleen 5½, pancreas 2½, right kid- ney 3½. left 4½, ren- capsules 1; a round tumor size of a marble on right side uterus 2¼; body 77 lbs, length 5 feet 4 inches.
April 6, 12.30 a.m. 1523.	Feb. 9, 1867	35, Single, pauper Servant.	Dementia combined with general para- lysis; first attack; bad health.	Four years; cerebro-spi- nal disease.	cerebritis, myelitis, emphysema.	Lateral ventricles dis- tended with fluid, cerebral softening of the brain, 40½; spinal cord also soft, 1.	Slight pleuritic adhes- ions on both sides, emphysema of both upper lobes of lungs, right 10, left 13; heart 7.	Lower portion of in- testines thickened, stomach 6, liver 60, spleen 4, pancreas 2½, right kidney 4, left 4½, ren. cap. ¾, uterus 2; body 94 lbs; length 5ft. 4.
April 18, 5.10 a.m. 15.4.	April 4, 1867	68, Widow. Pauper.	Melancholia; refuses food; third attack; bad health.	Some weeks; cerebral apoplexy.	cerebral apoplexy, pneumonia.	Dark fluid blood in the sac of the arachnoid and base of the brain, structure of the heart natural 45; spinal cord natural 1.	Old pleuritic adhesions on right side, the lower part of both lungs dark, hepatized right 22, left 17; heart 7½.	Organs natural, dark fluid in stomach 4½, liver 38, spleen 3½, pancreas ½, each kid- ney 3½. ren. capsules ¾, uterus 1; body wasted 77 lbs, length 5ft. 4 ins.

OBITUARY, continued—FEMALES.—1867

POST-MORTEM APPEARANCES, and weight of the various Organs in Ounces Avoirdupois.		HEAD AND SPINE.		THORAX.		ABDOMEN.	
Date of Death 1867.	Date of last Admission.	Age at Death. Civil State	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	Brain rather pale, in other respects natural	Intestines natural, organs small. stomach 5, liver 25, spleen 14, pancreas 14, right kidney 24, left 24, renal capsules 14, uterus 14; body 79 lbs., length 5 feet 3 inches.
April 25, 5.30 a.m. 1867.	April 13, 1867	54, Widow. Pauper	Mania; first attack; bad health.	Five weeks; bodily illness	Pneumonia.	Brain rather pale, in other respects natural 454; spinal cord natural 14.	Intestines natural, organs small. stomach 5, liver 25, spleen 14, pancreas 14, right kidney 24, left 24, renal capsules 14, uterus 14; body 79 lbs., length 5 feet 3 inches.
May 22, 3.30 p.m. 1860.	June 25, 1862	50, Widow. Inn-keeper.	Mania; first attack; good health.	Five years; ill usage.	Pulmonary phthisis	Brain pale and small in other respects natural 264; spinal cord natural 14.	Intestines natural, stomach 44, liver 38, spleen 34, pancreas 14, each kidney 34, renal capsules 4, uterus 24; body 83 lbs., length 5ft. 3ins.
June 7, 11.30 p.m. 1865.	Aug. 10, 1848	52, Single. La-bourer.	Melancholia; 1st attack; indifferent health	Twenty-nine years; disappointment.	Gangrene and pneumonia.	Brain natural 444; spinal cord natural 1.	Intestines natural, stomach 54, liver 44, spleen 2, pancreas 14, right kidney 34, left 34, uterus 14; renal capsules 1; body emaciated 73 lbs., length 5 feet.

OBITUARY, continued—FEMALES.—1867.

Date of Death 1867.	Date of last Admission.	Age at Death. Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.	
						HEAD AND SPINE.	THORAX. ABDOMEN.
June 25, 8.30 p.m. 1867.	Mar. 6, 1867	85, Widow. Char-woman.	Fatuity; 1st attack; bad health.	Eighteen months: old age.	Asthma, paralysis, bed sores.	Cerebral ventricles dilated and filled with fluid, about 2 ounces escaped; encephalon wasted 39, a depression size of a split pea on side of corpus striatum; the spinal cord natural 1.	Pleuritic adhesions on left side, emphysema of upper lobes, congestion of blood in lower lobe right 22, left 10; heart 8.
June 28, 8.30 p.m. 1867.	June 28, 1865	67, Single. Pauper.	Fatuity; dementia; first attack; indifferent health.	Twenty-five months. cause not known.	Asthma. fluid in ventricles, cerebral softening	About three ounces of fluid in the cerebral ventricles, the brain rather softer than natural 38½; spinal cord natural 1.	The upper lobes of both lungs emphysematous cadaveric congestion in the right 20, left 10; heart 7.
Augt. 1, 1 p.m. 1867.	Jan. 25, 1849	65, Married. Labourer.	Mania; recurrent; fifth attack; good health.	Nineteen years: ill treatment.	Pulmonary phthisis, cerebral apoplexy.	A thin layer of coagulated blood over the right cerebral hemisphere, brain natural 48½; spinal cord natural 1½.	Stomach 4½, liver soft, nutmeg colour 4½, specks of cartilage on capsules of spleen 4½, pancreas 2, each kidney 3½, ren. capsules 1; body 80 lbs. length 5ft. 2 ins
June 28, 8.30 p.m. 1867.	June 28, 1865	67, Single. Pauper.	Fatuity; dementia; first attack; indifferent health.	Twenty-five months. cause not known.	Asthma. fluid in ventricles, cerebral softening	About three ounces of fluid in the cerebral ventricles, the brain rather softer than natural 38½; spinal cord natural 1.	Intestines dark coloured the stomach 5, liver 33, spleen 2½, pancreas 2, right kidney 3½, left 3½, ren. capsules ½. uterus 2½; body 77 lbs. length 5 feet 3 inches.
Augt. 1, 1 p.m. 1867.	Jan. 25, 1849	65, Married. Labourer.	Mania; recurrent; fifth attack; good health.	Nineteen years: ill treatment.	Pulmonary phthisis, cerebral apoplexy.	A thin layer of coagulated blood over the right cerebral hemisphere, brain natural 48½; spinal cord natural 1½.	Stomach 4½, liver soft, nutmeg colour 4½, specks of cartilage on capsules of spleen 4½, pancreas 2, each kidney 3½, ren. capsules 1; body 80 lbs. length 5ft. 2 ins.

POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.									
Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	HEAD AND SPINE.	THORAX.	ABDOMEN.	
Aug 6, 1 p.m. 1867.	Jan 9, 1867	40, Married. Beer-house keeper.	Mania; first attack; bad health.	Seven months; grief; asthma.	Bronchitis, and emphysema.	Brain rather pale, in other respects natural 41½, a small quantity of blood in spinal canal, spinal cord 1.	The upper lobes of both in a state of emphysema, large bull at the anterior edges, right 10, left 16, congestion of blood in lower lobe; heart 9.	A small ulcer in cœcum, the stomach 3½, liver 44, spleen 5½, each kidney 3½, pancreas 2½, ren capsules ½; uterus 2; body 75 lbs. length 5ft. 5ins.	
Augt. 21, 12.45 p.m. 1867.	July 24, 1867	50, Married Labourer.	Mania; first attack; bad health.	Six weeks; remorse; refused food.	Meningitis, pleuro-pneumonia.	Skull thick, dura mater firmly adherent, encephalon 44; spinal cord natural 14.	About two pints of fluid in the right side and recent lymph on pleura covering lung, the lower lobe in first stage of pneumonia 24, a small abscess in under surface of lower lobe, 17½, heart 8½.	Stomach 5, liver 48, spleen 4, pancreas 2½, kidneys large; right 6½, left 7, ren capsules ½, uterus 2½; body 92 lbs. 5ft. 4 ins.	
Sept. 17, 6.30 p.m. 1867.	May 23, 1867	40, Married Labourer.	Mania; first attack; bad health.	Four months previous illness.	Pulmonary phthisis, enteritis, ulcers legs.	Brain pale, 41½.	Old pleuritic adhesions mostly on left side tubercles in the apex of each lung, lower lobe left carnified red, right 11, left 13; heart small only 5½.	Mucous membrane of colon red, stomach 3½, liver 41, spleen 5, pancreas 2½, right kidney 4½, left 5, ren capsules ½, uterus 1½; body emaciated, bed sores on hips, 62 lbs. length 5 feet.	

OBITUARY, continued.—FEMALES.—1867.

Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		
						HEAD AND SPINE.	THORAX. ABDOMEN.	
Sept. 19 3.15 p.m. 1463.	June 26, 1866	61, Single, Shop- woman.	Mania ; first attack ; indifferent health.	Three years ; intemper- ance.	Hydrothorax, asthma, anasarca, fluid in brain.	HEAD AND SPINE. Dura mater adherent to skull, the brain unusually pale and firm more fluid than natural in the cerebral ventricles, 43 ; spinal cord was also pale and firm like the brain, 14.	THORAX. Two pints of clear fluid by measure on right side, pleuritic adhesions on left side only, emphysema of upper lobes both lungs, right 11, left 10; heart rather large 11.	ABDOMEN. Mucous membrane of ileum dark coloured, old peritoneal adhesions to surface of liver, the organs pale, stomach 4½, liver 36½, spleen 2½, pancreas 1½, right kidney 4½, left 4½, ren. capsules 3, uterus 3 it contained cheesy matter ; body 36 lbs., length 5 feet.
Sept. 27, 10.30 a.m. 1535 and 368	April 5, 1867	58, Single,	Mania recurrent ; fourth attack ; bad health.	Six months ; pulmonary disease.	Pulmonary phthisis ; enteritis ; cerebral apoplexy.	A few small clots of blood on the right cerebral hemisphere, brain 35½ ; spinal cord 1.	Pleuritic adhesions, tubercles and a small cavity in apex, right lung 24, a cavity size of an orange filled with pus in left apex 20, heart small 6.	Ulceration at ileo caecal opening, organs small, stomach 4, liver 26, spleen 3½, pancreas 2½ right kidney 3½ left 3½ renal capsules 3, uterus 3 ; body emaciated 55 lbs, length 4 ft. 9 inches
Oct. 6, 8.15 a.m. 1079	June 21, 1862	67, Single, pauper	Dementia ; Fatuity ; first attack ; bad health.	Many years ; pulmonary disease.	Asthma, pulmonary tubercles, meningitis.	An unusual quantity of fluid in the arachnoid and pia mater between the cerebral convolutions, the brain atrophied 59 ; spinal cord softened ;	Old pleuritic adhesions on both sides, especially on the left, emphysema and tubercles in apex of right 30, tubercles throughout left 30 ; heart 8.	Stomach 4½, liver 35, spleen 3½, pancreas 3, right kidney 3½, left 3½, renal capsules 3, uterus 1½, body 72 lbs, length 5 feet.

OBITUARY, continued—FEMALES.—1867.

POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.												
Date of Death 1867.	Date of last Admission.	Age at Death Civil State.	Mental State and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.							
Oct. 6, 12.20 p.m. 1866	July 18, 1867	46, Married; trades- man's wife.	Mania; first attack; good health.	Fourteen months; previous illness.	Pleuro-pneu- monia, gangrene of right lung.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">HEAD AND SPINE.</th> <th style="width: 33%;">THORAX.</th> <th style="width: 33%;">ABDOMEN.</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Cerebral vessels con- gested with blood, bloody specks in cerebral substance when divided, cysts in choroid plexus, encephalon 42½; spinal cord natural 1.</td> <td style="vertical-align: top;">Upper lobe of right lung contained a dark gangrenous slough, which would fill an egg cup, recently lymph externally, lower lobe in 2nd stage of pneu- monia, 40, the lower lobe of left lung con- gested with blood and recent lymph on surface 19; heart 10½.</td> <td style="vertical-align: top;">Intestines natural, mesenteric glands enlarged stomach 4½, capsule of spleen strongly adherent to diaphragm and peri- toneum, large soft and dark coloured, 8½ pancreas 3½, right kidney 5, left 5½, ren. capsules ¾, uterus 3; body 82bs., length 5 feet 2 inches. Fatty omentum, in- testines natural, in- stomach 5, liver en- larged, gall bladder distended green, size of a goose egg, liver 66, spleen 4½, pan- creas 3½, right kid- ney 4½, left 5½, renal capsules ¾, uterus 2; body 87 lbs., length 5 feet.</td> </tr> </tbody> </table>	HEAD AND SPINE.	THORAX.	ABDOMEN.	Cerebral vessels con- gested with blood, bloody specks in cerebral substance when divided, cysts in choroid plexus, encephalon 42½; spinal cord natural 1.	Upper lobe of right lung contained a dark gangrenous slough, which would fill an egg cup, recently lymph externally, lower lobe in 2nd stage of pneu- monia, 40, the lower lobe of left lung con- gested with blood and recent lymph on surface 19; heart 10½.	Intestines natural, mesenteric glands enlarged stomach 4½, capsule of spleen strongly adherent to diaphragm and peri- toneum, large soft and dark coloured, 8½ pancreas 3½, right kidney 5, left 5½, ren. capsules ¾, uterus 3; body 82bs., length 5 feet 2 inches. Fatty omentum, in- testines natural, in- stomach 5, liver en- larged, gall bladder distended green, size of a goose egg, liver 66, spleen 4½, pan- creas 3½, right kid- ney 4½, left 5½, renal capsules ¾, uterus 2; body 87 lbs., length 5 feet.
HEAD AND SPINE.	THORAX.	ABDOMEN.										
Cerebral vessels con- gested with blood, bloody specks in cerebral substance when divided, cysts in choroid plexus, encephalon 42½; spinal cord natural 1.	Upper lobe of right lung contained a dark gangrenous slough, which would fill an egg cup, recently lymph externally, lower lobe in 2nd stage of pneu- monia, 40, the lower lobe of left lung con- gested with blood and recent lymph on surface 19; heart 10½.	Intestines natural, mesenteric glands enlarged stomach 4½, capsule of spleen strongly adherent to diaphragm and peri- toneum, large soft and dark coloured, 8½ pancreas 3½, right kidney 5, left 5½, ren. capsules ¾, uterus 3; body 82bs., length 5 feet 2 inches. Fatty omentum, in- testines natural, in- stomach 5, liver en- larged, gall bladder distended green, size of a goose egg, liver 66, spleen 4½, pan- creas 3½, right kid- ney 4½, left 5½, renal capsules ¾, uterus 2; body 87 lbs., length 5 feet.										
Oct. 11, 3.30 a.m. 1877.	Aug. 21, 1867	46, Married, labourer	Melancholia; ind attack; indifferent health.	Fifteen months; ill-treatment.	Congestion of blood in the brain, en- larged liver, fever.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">HEAD AND SPINE.</th> <th style="width: 33%;">THORAX.</th> <th style="width: 33%;">ABDOMEN.</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Skull unusually thick; cerebral vessels con- gested with blood and more fluid than na- tural in the cerebral ventricles, encephalon 44; spinal cord na- tural 1½.</td> <td style="vertical-align: top;">Lungs natural, right 13½, left 13; heart 9.</td> <td></td> </tr> </tbody> </table>	HEAD AND SPINE.	THORAX.	ABDOMEN.	Skull unusually thick; cerebral vessels con- gested with blood and more fluid than na- tural in the cerebral ventricles, encephalon 44; spinal cord na- tural 1½.	Lungs natural, right 13½, left 13; heart 9.	
HEAD AND SPINE.	THORAX.	ABDOMEN.										
Skull unusually thick; cerebral vessels con- gested with blood and more fluid than na- tural in the cerebral ventricles, encephalon 44; spinal cord na- tural 1½.	Lungs natural, right 13½, left 13; heart 9.											

OBITUARY, continued—FEMALES,—1867

Date of Death 1867.	Date of last Admission.	Age at Death. Civil State	Mental and Bodily Condition on Admission.	Duration and Cause of Disorder.	Assigned Cause of Death.	POST-MORTEM APPEARANCES, And weight of the various Organs in Ounces Avoirdupois.		
						HEAD AND SPINE.	THORAX.	ABDOMEN.
Dec. 11, 7.44 a.m. 1867.	Nov 2, 1867	79, Widower labourer	Fatuity; first attack; bad health.	Two years; decay.	Pneumonia, wasted kidney.	The brain large, cerebral vessels congested with blood 50½ spinal cord natural 1¼.	Old Peuritic adhesions on left side, lower lobe of right lung in 1st stage pneumonia red, 25, left 18; heart large 12, interior lining membrane of aorta unusually red,	Intestines natural, stomach 5½, liver, 33½, spleen 6, pancreas 2½, kidneys rough, small cysts on surface filled with brown gelatinous matter, right 3, left 3½, renal capsules ½, uterus 1½; body 88lbs. length 5 feet 5 ins.

ORDINARY DIETARY.

For Breakfast.

Coffee, or broth, † 1½ pint for males, 1 pint of coffee for the females; bread 8 oz. for the males, 7 oz. for females, and ½ oz. of butter is allowed for each patient; those who have broth have no butter.

For Dinner.

On Mondays, Wednesdays, Thursdays, Fridays, and Saturdays, ½ pound of uncooked meat, including bone, with one pound and a half of vegetables for the males and one pound for the females; and a half pint of beer or cider is allowed for each patient. On Sundays, a pound of suet pudding or rhubarb pie. On Tuesdays one pint and a half of stew ‡ and 4 oz. of bread, and a half pint of cider or beer.

For Supper.

The same as for breakfast, substituting tea and milk for broth or coffee.

For Lunch.

The working patients have each, at 11 o'clock, 2 oz. of bread and three-fourths of an ounce of cheese, and half a pint of beer, or cider, and the same allowance of beer or cider in the afternoon; about oz. of rag tobacco is distributed each week amongst the working male patients.

|| The coffee is made by boiling 6 lbs. of ground coffee with 6 lbs. of sugar in 32 gallons of water for ten minutes, to which is added 2½ gallons of new milk. The tea is made by substituting 2 lbs. of tea for 6 lbs. of coffee.

† The broth is made from 32 gallons of the water in which the meat had been boiled the previous day, 8 gallons of milk, 10 lbs. of onions, 1 lb. of salt, 20 lbs. of flour, and 4 ounces of pepper.

‡ The stew is made by boiling the bones (which are pounded) for seven hours in 36 gallons of water with the addition of five shins and 16 lbs. of stickings of beef, 12 lbs. of rice, ½ lb. pepper, 2½ lbs. of salt, 6 sticks of celery, a bunch of sweet herbs, 8 pecks of onions, some white cabbages, and a few potatoes, or Jerusalem artichokes; occasionally 30 lbs. of flour is added.

This quantity is sufficient for 400 persons.

RATIONS FOR THE ATTENDANTS AND SERVANTS
WEEKLY ALLOWANCE FOR EACH.

MALES.				FEMALES.			
Meat	...	...	7 lbs.	Meat	...	...	5½ lbs.
Flour	...	...	1 "	Flour	...	...	1 "
Vegetables	...	...	14 "	Vegetables	...	...	10½ "
Bread	...	...	7 "	Bread	...	...	7 "
Butter	...	...	½ "	Butter	...	...	½ "
Cheese	...	...	½ "	Cheese	...	...	½ "
Tea	...	...	8 oz.	Tea	...	...	3 ozs.
Sugar	...	...	8 "	Sugar	...	...	8 "
Mustard	...	...	½ "	Mustard	...	...	¼ "
Pepper	...	...	¼ "	Pepper	...	...	¼ "
Vinegar	...	...	¼ pint.	Vinegar	...	...	¼ pint
Milk	...	...	3½ "	Milk	...	...	3½ "
Porter	...	...	1C½ "	Porter	...	...	7 "

STOREKEEPER'S RETURN OF TAILOR'S AND UPHOLSTERER'S WORK FOR 1867.

Months.	MADE.				REPAIRED.			
	Trousers	Vests	Trousers	Braces	Coats	Vests	Trousers	Australian Shirts.
January	6	5	7	12	21	16	98	0
February	6	10	7	4	17	21	113	0
March	11	13	26	21	23	30	138	0
April	9	8	14	6	18	21	118	31
May	10	5	9	9	32	29	114	32
June	2	7	16	6	42	29	179	37
July	8	8	10	10	26	29	160	33
August	8	8	8	12	26	30	179	24
September	6	6	16	12	24	18	147	20
October	8	10	22	10	16	19	146	13
November	11	12	12	10	22	25	167	4
December ...	9	8	5	18	16	23	141	5
Total	94	99	152	130	283	290	1700	209

There were 4 Strong Dresses made in June, and 1 in August, and 1 in September.—Total 6.

WORK DONE BY SHOEMAKERS IN 1867.

Mens' Boots	96 pairs
.. Shoes	78 ..
.. Brown and Black Slippers.. .. .	239 ..
.. Boots Shoes and Slippers repaired	509 ..

Women's Boots	68 pairs.
.. Cloth ditto	144 ..
.. Shoes ditto	115 ..
.. Brown Slippers	140 ..
.. Boots Shoes and Slippers Repaired.. .. .	441 ..
.. Carpet Shoes	28 ..
.. Canvas Boots	41 ..

HEAD ATTENDANT'S RETURN OF MALE

WORKING PATIENTS FOR THE YEAR 1867

No. of Patients, and how employed.	January	February	March	April	May	June	July	August	September	October	November	December	Total Weeks
<i>Artisans.</i>													
In Bakehouse & Cellar	4	4	4	3	3	3	3	3	3	3	3	3	39
As Carpenters	5	4	4	4	4	4	4	4	4	4	4	4	49
At Furnaces	2	2	2	2	2	2	2	2	2	2	2	2	24
As Masons	9	8	10	10	10	10	8	10	10	10	10	8	113
As Painters & Glaziers	2	2	2	2	1	2	2	2	2	2	2	2	23
In Smith's Shop	2	2	2	2	2	2	2	2	2	2	2	2	24
As Shoemakers	5	5	5	5	5	5	5	5	4	5	5	5	59
As Tailors	1	4	4	4	4	4	2	4	4	4	4	4	43
Total	30	31	33	32	31	32	28	32	31	32	32	30	374
<i>Labourers.</i>													
Assisting Attendants...	16	18	18	18	16	16	18	18	17	17	16	18	206
On Roadways	4	4	4	4	4	4	3	4	4	4	4	4	47
In removing Earth	0	3	3	0	4	4	4	5	4	4	4	0	35
On Farm	26	26	26	22	26	25	22	23	21	22	21	22	282
In Foul Linen House	3	3	2	2	3	3	2	3	3	2	3	3	32
In Garden	10	11	10	10	10	9	9	9	10	10	10	10	118
In Kitchen	2	2	1	1	1	1	1	1	1	1	1	2	15
At Lime Kiln	4	2	3	3	3	3	3	4	4	4	4	4	41
As Quarrymen	4	6	6	6	4	6	6	6	6	6	6	6	68
In Stone Shed	0	0	0	0	1	1	1	1	1	1	0	1	7
As Coir Pickers	3	4	5	5	5	4	4	4	4	7	7	7	59
In Store Room	1	1	1	1	1	1	1	1	1	1	1	1	12
Total	73	80	79	72	72	78	77	74	79	76	77	78	922

Value of Artisans labour at £1 a week would amount to £312 12s. 6d., and of Labourers at 12s. a week £551 12s.—Total mens' labour £864 4s. 6d. for the year.

RETURN BY THE WORKMISTRESS OF THE EMPLOYMENT OF FEMALE PATIENTS FOR THE YEAR 1867.

No. of Patients, and how employed	January	February	March	April	May	June	July	August	September	October	November	December
Laundry	26	25	30	23	29	27	30	26	25	30	28	29
Kitchen....	4	7	6	5	3	8	7	4	3	6	7	8
Dress-making	3	2	0	8	6	9	11	12	7	5	8	3
Fancy Work	1	2	3	1	4	2	1	1	1	2	1	1
Plain Work	42	39	40	32	35	27	41	24	25	29	31	42
Upholsterv...	3	2	1	4	0	0	2	6	0	0	1	0
Shoe-binding	1	1	1	1	1	1	0	2	1	1	1	1
Knitting	2	1	1	2	3	2	1	2	1	2	1	2
Mending	9	6	10	8	5	4	3	11	9	8	7	11
Coir Picking	12	13	9	7	14	13	10	8	16	8	17	15
Assisting Attendants	14	17	12	16	15	13	17	14	11	20	15	19
Out of Doors	0	0	10	10	10	16	18	22	10	10	0	0
In the Dining Hall	6	7	5	6	8	5	4	6	6	5	4	6
Total	123	122	118	123	133	127	145	135	115	127	121	137

LIST OF CLOTHING MADE AND REPAIRED BY FEMALE PATIENTS

1867.

Aprons...	450	Towels (hand)...	...
Bed Ticks	80	Pillow Ticks	...
Caps	70	Pillow Slips	...
Gowns	350	Night Gowns...	...
Skirts	90	Drawers (pairs)	...
Flannel ditto	80	Bonnets (made)	...
Shifts	216	Bonnets (trimmed)	...
Flannel ditto	48	Dusters	...
Shrouds	50	Shirts (repaired)	...
Shirts	250	Gowns	...
Sheets	212	Stockings	...
Stockings (knitted pairs)	10	Shifts	...
Stays (made pairs)	30	Flannels	...
Towels (round)	90		

Value of labour of females at 10d. a day amounts to £448 for the year,

FINANCIAL STATEMENTS

PREPARED BY

THE COMPANY

INCORPORATED IN THE STATE OF NEW YORK

FINANCIAL STATEMENTS

PREPARED BY

THE CLERK,

Pursuant to the 16th & 17th Vic., chap. 97, sec. 5

STATEMENT

NAME OF AND OF	Quarter Ending		Day	Amount	Day	Amount
	March	1871				
BRIDGES	11	249	2	3885		
...	12	205	8	4022		
...	13	5	11	281		
...	14	192	18	2291		
...	15	180	25	2030		
...	16	5	31	281		
...	17	103	1	2488		
...	18	183	8	2309		
...	19	28	15	271		
...	20	287	22	2028		
...	21	27	29	2028		
...	22	202	5	2382		
...	23	5	12	281		
...	24	11	19	2172		
...	25	18	26	272		
...	26	230	3	2204		
...	27	5	10	281		
...	28	5	17	281		
...	29	158	24	2890		
...	30	151	31	1890		
...	31	184	7	1832		
...	1	187	14	2042		
...	2	88	21	1772		
...	3	5	28	281		
...	4	5	4	281		
...	5	5	11	281		
...	6	5	18	281		
...	7	5	25	281		
...	8	5	1	281		

THE CONSUMPTION OF PROVISIONS AND NECESSARIES
Between 1st of January and 1st December 1867.

CONTRACT PRICES.

For the year ending December 31st 1867.

ARTICLES	1st Quarter.			2nd Quarter.			3d Quarter			4th Quarter		
	£	s	d	£	s	d	£	s	d	£	s	d
Beef, at per score (20 lbs)	0	9	6	0	9	3	0	8	4	0	8	4
Mutton	0	9	6	0	9	3	0	7	11	0	7	11
Flour, at per sack (280 lbs)	2	6	6	2	5	0	2	8	0	2	10	0
Ditto (one-way)	2	4	6	2	3	0	2	6	0	2	8	0
Butter, lb	0	1	0 $\frac{1}{2}$	0	1	0	0	0	11	0	0	9 $\frac{3}{4}$
Vinegar	0	1	4	0	1	2	0	1	2	0	1	0
Sugar, cwt.	1	16	6	1	16	6	1	16	6	1	16	0
Ditto, Lump, lb	2	6	8	2	6	0	2	6	0	2	6	0
Treacle, lb	0	0	2	0	0	1 $\frac{3}{4}$	0	0	1 $\frac{3}{4}$	0	0	1 $\frac{3}{4}$
Tea, dust, lb	0	0	0	0	0	0	0	0	0	0	1	4
Congo, "	0	1	10 $\frac{1}{2}$	0	1	10 $\frac{1}{2}$	0	1	10 $\frac{1}{2}$	0	2	0
Coffee "	0	1	3	0	1	2	0	1	2	0	1	2
Pepper "	0	0	5 $\frac{1}{2}$	0	0	5 $\frac{1}{2}$	0	0	5 $\frac{1}{2}$	0	0	5
Snuff "	0	3	9	0	3	9	0	3	9	0	3	9
Tobacco "	0	3	6	0	3	6	0	3	6	0	3	6
Soft soap lb	0	0	3 $\frac{1}{2}$	0	0	3 $\frac{1}{2}$	0	0	3 $\frac{1}{2}$	0	0	3 $\frac{1}{2}$
Hard ditto, cwt.	1	4	0	1	4	0	1	4	0	1	4	0
Soda "	0	7	3	0	7	3	0	7	3	0	7	3
Starch lb	0	0	3 $\frac{3}{4}$	0	0	3 $\frac{3}{4}$	0	0	3 $\frac{1}{2}$	0	0	4
Composites, per doz. lbs	0	7	6	0	7	6	0	7	6	0	7	9
Dips "	0	6	0	0	6	0	0	6	0	0	6	0
Salt, per cwt	0	2	3	0	1	10	0	1	11	0	1	10
Coals (hard) per ton	0	13	6	0	13	6	0	12	6	0	12	3
Ditto small "	0	7	6	0	7	6	0	6	6	0	6	3
Coke "	0	13	6	0	14	6	0	12	6	0	12	7
Cider, per hogshead	1	5	0	1	5	0	1	9	0	1	10	0
Porter, per gallon	0	0	0	0	1	3	0	1	3	0	1	3

THE CONSUMPTION OF PROVISIONS AND NECESSARIES

Between 1st of January and 1st December 1867.

ARTICLES	QUANTITY.
Bread	195,860 lbs
Flour for puddings	22,660 "
Beef	52,384½ "
Mutton and Veal	26,458 "
Pork and Bacon	9,565½ "
Cheese	8,553 "
Butter	8,583 "
Cream	442 pints
Milk	9,411 gallons
Tea	1,754 lbs
Coffee	894 lbs 4 ozs
Treacle	2,101½ lbs
Sugar moist	6,046 "
Ditto (lump)	273 lbs 8 ozs
Yeast substitute	238 lbs
Rice	7,280 "
Scotch barley	20 "
Pepper	231 "
Salt	62 cwt
Vinegar	83½ gallons
Raisins	338 lbs
Currants	60 "
Buns (Good Friday)	53 doz
Peas	9 sacks
Tobacco	205 lbs
Snuff	48 "
Cider	15,117 gallons
Fish	14,522 lbs
Eggs	2,932 doz
VEGETABLES.	
Potatoes	3,985 pecks
Parsnips	651 "
Carrots	809 "
Turnips	1,277 "
Onions	435 "
Cabbage	9,512 nos
Brocoli	800 "
Peas (green)	177 pecks
Beans (broad)	638 "
NECESSARIES.	
Candles (dips)	354 "
Composites	252 "
Soap (hard)	74 cwt
Ditto (soft)	2,598 lbs
Soda	4,153 "
Starch	392 "
Blue	28 "
Coal (hard)	19,930 cwt
Ditto (small)	1,643 "
Ditto (Gas)	1,487 "
Coke	2,023 "

ACTUAL CASH RECEIPTS AND PAYMENTS FROM JANUARY 1ST TO DECEMBER 31ST, 1867.

DE.	£	s.	d.	£	s.	d.	£	s.	d.	CR.
To Balance at the Bank..				1,141	11	6				
" " in Clerk's hands				24	1	6				
				<hr/>			1,165	13	0	
By Cash from Unions, &c., for Maintenance of Patients—										
Arrears from Oct, 1st, 1865	0	0	2							
Due Dec. 31st, 1866	2633	4	6							
March 31st, 1867	2723	3	9							
June 30th, 1867	2754	0	0							
Sept. 30th 1867	2803	8	9							
Less Arrears	40	19	9							
	<hr/>			2762	9	0				
Received for Funerals and conveyance of Patients, due Dec. 31st, 1866..				10,872	17	5				
March 31st, 1867	30	19	2							
June 30th, 1867	25	15	6							
Sept. 30th, 1867	14	11	0							
	17	11	0							
	<hr/>			88	16	8				
Building and Repairs, excess charge, due Dec. 31st, 1867	116	6	1							
March 31st, 1866	113	1	3							
June 30th, 1867	137	8	5							
Sept. 30th, 1867	118	11	8							
	<hr/>			485	7	5				
Interest for the Year				4	7	0				
Received from County Treasurer.....				400	0	0				
	<hr/>			12	0	3				
Old Iron Sold	3	15	5							
" Rags "	8	4	10							
	<hr/>			10,000	15	7				
By Salaries and Wages.....	1931	8	11							
Provisions and Necessaries	5951	2	2							
Surgery and Dispensary.....	248	6	2							
Clothing.....	666	13	0							
Furnishing and Bedding	901	1	11							
Miscellaneous, Books, Advertising, Printing Stationery, &c.	302	3	5							
	<hr/>			10,000	15	7				
Accounts paid.....	521	15	8							
Wages ditto.....	146	0	0							
	<hr/>			667	15	8				
Funerals and Fetchings				50	15	10				
Building and Repairs Account										
Accounts paid.....	1,327	14	0							
Wages ditto.....	217	12	11							
	<hr/>			1545	6	11				
Balance at the Bank	730	9	10							
in Clerk's hands.....	33	17	11							
	<hr/>			764	7	9				
	<hr/>			£13029	1	9				

STATEMENT SHOWING LIABILITIES AND ASSETS OF THE SOMERSET LUNATIC ASYLUM On the 31st December, 1867.

Dr		C.	
	£	s.	d.
To Salaries and wages due to Officers and Servants—			
Farm Account	36	6	3
Building ditto	45	0	0
General ditto	472	19	9
General Account for Goods supplied	1,786	2	0
Farm Account	26	9	4
Building ditto	182	11	11
		554	6 0
		1,995	3 3
By Balance at the Bank..	730	9	10
Ditto in Clerk's hands..	33	17	11
Ditto Bailiffs Ditto.....	1	10	3
Union Accounts, &c., due 31st December, 1867, for the Maintenance of Patients—			
General Charge	2879	10	0
Excess ditto.....	136	9	1
Funerals and Fetchings	9	2	0
Ditto Arrears due Sept. 30th.....	40	19	9
Farm Valuation— (Vide sheet No. 4)..	3066	0	10
Goods in Store—(Vide sheet No. 7)	1046	8	0
	471	4	11
	765	18	0
Balance.....	2,800	2	6
	£5,349	11	9

FARM AND GARDEN ACCOUNTS FROM JANUARY 1ST TO DECEMBER 31ST, 1867.

	£	s.	d.	£	s.	d.
DR.						
To estimated value of Stock on Farm, 1st January, 1867, viz.—						
Live Stock	428	4	0			
Wagons, Carts, Tools, and sundry Farm Implements.....	139	1	0			
Mangold & other Roots, Seeds, Hay, &c.	449	0	0			
Purchase of Live Stock.....	152	4	6			
Corn, Straw, Potatoes, Grain, Seeds, &c.	286	14	5			
Rent, Rates, and Taxes.....	114	11	1			
Improvements to Farm Yard	47	6	3			
Salaries and Wages, viz.—						
Balliff, Carter, Gardeners, Yard-man and attendants on Dairy.....	146	5	0			
Tools, Manure, &c	58	14	2			
Sundry small accounts.....	48	18	1			
	854	13	6			
Credit of Establishment, viz.—						
Estimated Rent in lieu of interest, of 60 acres of Land in cultivation, with Farm Buildings, the Chaplain's Residence, Lodge and Cottage	150	0	0			
Balance in favor of Farm	219	15	7			
	369	15	7			
				1,016	5	0
CR.						
By Live Stock sold.....	230	3	0			
Sundries ditto.....	2	14	0			
Produce of Farm supplied to the Establishment, viz—						
Pork, Butter, Milk, &c.	386	6	2			
Produce of Garden, viz:—						
Potatoes, other Vegetables and fruit.....	487	13	11			
Estimated value of labour of Horse and Man unconnected with Farm						
Estimated value of Stock, Live and Dead on Farm, December 31st 1867,						
14 Milch Cows	196	0	0			
4 Horses.....	65	0	0			
1 Colt	10	0	0			
25 Fat Sheep	65	0	0			
48 Fat Pigs.....	67	7	0			
10 Fowls.....	1	0	0			
	404	7	0			
150 Tons Mangolds, at 14s.....	105	0	0			
28 Ditto Sweeds, at 14s.....	19	12	0			
8 Carrots, at 40s.	16	0	0			
12 Parsnips, at 45s.....	27	0	0			
40 Cabbage, at 15s.....	30	0	0			
50 Sacks of Eating Potatoes, at 10s. ...	25	0	0			
30 Ditto Seed Ditto, at 12s.....	18	0	0			
160 Pecks of Onions, at 1s.....	8	0	0			
4 Bushels of Broad Beans, at 8s.	1	12	0			
8 Sacks of Horse Ditto, 24s.....	9	12	0			
8 Ditto Peas, at 24s.....	9	12	0			
10 Ditto Barley, at 20s.....	10	0	0			
38 Tons Hay, at £4	152	0	0			
2 Ditto Straw, at 50s.	5	0	0			
61 Sacks Italian Kye Grass Seed.....	0	16	0			
Wagons, Carts, &c., &c.	437	4	0			
	204	17	0			
	£2,240	14	1			

(NO 5.)

AVERAGE WEEKLY COST OF MAINTENANCE, MEDICINE, CLOTHING, AND CARE OF PATIENTS FOR THE YEAR 1867. AGGREGATE NO. OF DAYS 178-562. DAILY AVERAGE OF PATIENTS 489.

	£	s.	d.	£	s.	d.	£	s.	d.	s.	d.
Provisions and Necessaries	Remaining in Store January 1st, 1867			150	14	11					
	Tradesmen's Accounts for the Year.....	6,164	13	11							
	Clerk's Petty Disbursements	48	2	7							
	Farm and Garden.....	874	0	1	7,086	16	7				
				<u>7,237</u>	<u>11</u>	<u>6</u>					
				103	11	5					
	Remaining in Store January 1st, 1868			182	7	2	7,134	0	1	5	7.16
Clothing.	Remaining in Store January 1st, 1867.....	836	10	4							
	Tradesmen's Accounts for the Year	6	9	9							
	Clerk's Petty Disbursements.....				843	0	1				
					<u>1,025</u>	<u>7</u>	<u>3</u>				
	Rags sold during the year.....	6	5	10							
	Remaining in Store January 1st, 1868.....	223	10	5	234	16	3	790	11	0	7.43
Salaries and Wages.	For the Year	236	12	11	2305	13	6				
	Less Amount Debited to Building Account...	146	5	0	382	17	11				
	Ditto Farm Account ..							1,922	15	7	1 0.09
Surgery and Dispensary.	Tradesmen's Accounts for the Year.....				236	11	8				
	Clerk's Petty Disbursements.....				5	16	5				
					<u>117</u>	<u>19</u>	<u>1</u>	243	8	1	2.28
Furnishing and Bedding.	Remaining in Store January 1st, 1867	650	11	11							
	Tradesmen's Accounts for the year.....	75	14	9	726	6	8				
	Clerk's Petty Disbursements.....										
	Remaining in Store January 1st, 1868.....				844	5	9	705	2	8	6.63
					139	3	1				
Miscellaneous.	Tradesmen's Account for the year.....	200	0	8							
	Clerk's Petty Disbursements	84	18	3							
	Stamps charged by Treasurer	2	0	0							
					<u>286</u>	<u>18</u>	<u>11</u>	282	11	11	2.65
	Less Interest from Treasurer	4	7	0							
	Less Farm Account				11,077	9	4				8 8.24
					369	15	7				3.47

From January 1st to December 13st, 1867.

Dr.	£	s.	d.	Cr.
To Balance from 1867	168	5	6	
Cash from non-contributing Places and Patients, over and above the charge belonging to the County, as per sheet				1330 18 10
No. 1	505	10	6	
Half-pence not paid	—		1	
Amount drawn on County Treasurer..	400	0	0	
Old Iron Sold	3	15	5	
Balance	490	0	5	
	£1567	11	9	£1567 11 9

By Sundry Bills for Materials..
Wages

(No. 7.)
**BALANCE SHEET, OR GENERAL STATEMENT OF RECEIPTS AND EXPENDITURE OF THE SOMERSET
 COUNTY LUNATIC ASYLUM FOR THE YEAR ENDING DEC. 31ST, 1867.**

DR.	£ s. d.		£ s. d.		CR.	
To Balance as per Ledger, <i>vide</i> No. 7					£	s. d.
of last year's Account—					5	3 8
Building Account	168	5 6			10,707	13 9
General ditto	1,430	8 0			1,567	11 9
			1,598	13 6		
Balance in Clerk's hands.....			24	1 6	45	14 4
Provisions and Necessaries in					1,046	8 0
Store January 1st, 1867 ..	150	14 11			87	9 0
Clothing, ditto ditto	182	7 2				
Furnishing and Bedding ditto	117	19 1				
			451	1 2		
Farm Valuation, Jan. 1st, 1867			1016	5 0		
From Unions, &c., including					471	4 11
Arrears from 1866, as shown						
by sheet No. 1	11,757	14 9				
Less Arrears,	178	19 10				
	11,578	14 11				
Less Half-pence not Paid.....		1				
Cash from County Treasurer..	400	0 0				
" Old Iron Sold.....	3	15 5				
			11,578	14 10		
			403	15 5		
			£15,072	11 5		

R. B. COLES, {
 E. H. CLERK, {
 Visiting Justices
 and Auditors.

BENJAMIN THOMAS DUKE,
Clerk.

INDEX

TO ALL THE REPORTS OF THE

Somerset County Pauper Lunatic Asylum,

published since the opening of that Institution viz., from 1848, to 1867.

	1848	1849	1850	1851	1852	1853	1854	1855	1856	1857
Admissions	12	17	17, 18	19, 20	25, 26	13, 55, 56	16, 45, 46	9, 26, 27	8, 11, 24, 25	8, 11, 26, 27
Accidents... ..	...	..	..	..	9	9, 12, 16	..	10, 11	11, 12	12, 13
Accommodation	39	19	19	21	27	57	47	29	26, 33	28
Age of Patients admitted	21	10	..	12	12	19	..	18	16	16
Amusements	38	24, 25	25	33, 34	63, 64, 65	53, 54	35, 36, 37	33, 34	35, 36, 37
Analysis of Tables	50, 51	50, 51, 52	39, 43	50, 53	47, 49	57, 60
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Brain average weight of	9	20	12	15, 16	13	15
Building account	16, 21	18, 23	24, 29	54, 59	16, 44, 49	26, 31, 36	23, 28	25, 30, 36
Casualties	14	21	10, 11	10	8, 12	15
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Chronic cases...	27	57	47	29	26	28
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Clerk's financial state-	50, 51	48, 51	50, 51, 52	47, 51	56, 60	59, 65	57	56, 61	52, 58	62, 69
ments	18	75	55, 56	55	51	62
Clothing ... ..	..	..	..	..	..	..	57	58	55	62
Consumption of provi-	46	43	53	49	59	71	56	57	54	63
sions	52	53	..	43	55	73	..	..	..	..
Contract prices ... ..	..	..	..	..	..	18, 73	..	..	51	16
Cost for maintenance ...	38	18, 23	18, 23	20	26, 31	56, 61	48, 51	28, 33	15, 31	27, 33
Discharges	40	20	20	22	28	58	15, 48	30, 36	27	29
Degree of education ...	36, 41	21	..	..	..	..	..	..	..	..
Delirium Tremens... ..	41	21	..	..	..	..	..	..	..	..
Dementia and Fatuity	42	16, 22	16, 22	18, 22	24, 30	54, 60	14, 44, 50	26, 32	23, 29	25, 31
Disorder, duration of ...	46	10, 43	15, 43	42	22, 23, 52	14, 66	50, 39	23	22	24, 63
Dietary	42, 45	22, 37	22, 39	24, 39	30, 49	60, 48	..	27, 32, 48	24, 29, 46	26, 31, 54
Deaths ... ..	..	21	11, 12, 21	15, 16, 23	19	26, 30, 59	20, 24, 49, 19	22, 24, 25	19, 20, 21	12, 22, 21, 23

Age of patients admitted	49																		
Amusements	27, 37	37	16, 39, 50	31, 58	31, 50	22, 32, 44	43, 54	20, 60	65, 76										
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Brain, average weight of .. .	30	30	31, 42	51	43	36, 37	47	52, 57	..										
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Clothing .. .	63	67	71	79	70	71	79, 81	87, 89	..										
Consumption of provisions .. .	65	70	74	77	94	..										
Contract prices .. .	66	71	75	..	78	..	37, 88	93	..										
Cost for maintenance .. .	14, 69	74	78	87	15, 49, 54	13, 43, 48	5, 42, 53, 58	3, 4, 14, 93	108										
Discharges .. .	36, 41	36, 40	36, 40, 49, 54	57, 62	57, 62	13, 43, 48	5, 42, 53, 58	5, 59, 63	13, 61, 66										
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Epilepsy .. .	22, 23	24, 26	33, 36	41, 46	35, 39	28, 29	40	63, 66, 85	60, 61										
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Financial statements ..	71. 79	64. 72	69. 78	73. 82	82, 88	71, 80	74, 80	84, 90	90; 100	—
General paralysis ..	51	26	31	30	40, 41	—	30, 46	—	52	33, 60
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Insanity, forms of ..	15. 51	28. 39	39	20	33	52	46	51, 56	62	65. 63
Lunatic Asylums visited ..	—	—	—	—	—	—	—	9, 32	8, 11	—
Mania ..	20. 46	26. 39	39	20	35, 36	39	14. 16	39, 51, 56	52	—
Maintenance cost for ..	76	14. 69	74	78	87	78	—	37, 88	3, 4, 14, 98	108
Medical treatment ..	22. 27. 36. 33	19	22	36, 38	42, 46,	27, 28	29, 30	40	45, 46, 47	45. 52, 61, 62
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Occurrences in each month ..	48	36	36	49	57	49	43	42, 43, 53	48, 49, 59	64, 65, 75
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Re-admissions ..	53. 55	41	21. 40	40, 54	31, 62	54	34, 48	44, 58	50, 63	66, 80
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General paralysis ..	41	13-14	17	19	30	19	21	28	—
Improvements and additions ..	—	—	—	—	—	—	—	—	—
Income ..	50	50	48	10	9. 16. 17. 18. 8.	10. 11. 13	17. 18	13	12. 13
Insanity, forms of ..	41. 15	21	23	58	70	61. 62	61	56	66. 68
Lunatic Asylums visited ..	—	—	—	24	59	49	31	28	30
Mania ..	21	21. 40	23	—	—	—	—	—	—
Maintenance cost for ..	—	—	23	29	59	49	26. 31	23	25
Medical treatment ..	—	11	—	—	18. 73	—	—	51	16
Mortality ..	6	7	15	19	25	17	20	17	17
Number of Inmates ..	6	5. 6. 7	9	9	48	12. 30	9. 48	8. 46	12. 54
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Occupation of patients admitted ..	—	—	39-41	49-51	48-52	39-43	48-53	46-49	54-59
Occurrences in each month ..	40	20	22	28	58	15. 48	30	27	29
Office buildings ..	38	18	20	26	56	46	28	25	27
Readmissions ..	—	—	—	18	18	13	17	13	13
Recoveries ..	—	10	27	31	61. 62	51. 52	33. 34	31. 32	33. 34
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	—	39-42	39-41	49-51	48-52	39-43	48-53	46-49	54-59

	1848	1849	1850	1851	1852	1853	1854	1855	1856	1857
Unions, sums received from ...	50	50	50	48	58	70	45	59	56	66
Visitors, list of ...	1	3	4	5	5	3	3	5	5	5
Ventilation ..	..	14	..	..	14	..	..	..	13, 14	..
Water supply ..	..	..	..	..	..	..	..	7, 18	..	..
Weekly charge ..	..	53	9	15	11	18	16	18	16	16
Windows ..	..	14	..	..	15	..	..	..	1, 14	..
Work done by patients—females..	..	54	54	44	53	75	56	55	51	62
Work done by patients—males ..	..	55	55	45	54	75	55	54	50	61
Workhouse infirmaries..	..	..	..	..	..	..	..	10, 11	11, 12	15

	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
Unions, sums received from ..	77	70	75	79	88	77	74	84	92	107
Visitors, list ..	5	5	3	3	3	3	1	1	1	3
Ventilation ..	..	..	..	..	..	..	..	33	..	..
Water supply ..	14	12, 13	..	..	..	..	..	3, 33	..	..
Weekly charge ..	11, 76	69	14	5, 6, 11, 78	..	77	74	84	92	..
Windows ..	..	..	..	..	..	..	..	33	..	..
Work done by patients—females..	70	63	67	71	79	69, 70	71	81	89	100
Work done by patients—males ..	69	62	67	70, 71	78, 79	68, 70	70	80	88	101
Workhouse infirmaries..	..	..	..	..	..	..	..	6	8-10	24-29