

Twenty-second annual report of the Suffolk Lunatic Asylum : December, 1859.

Contributors

Suffolk Lunatic Asylum.
Kirkman, John.
Pizey, Henry.
Durrant, George.
Campbell, W. G.
Gaskell, S.

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TWENTY-SECOND ANNUAL REPORT

OF THE

SUFFOLK

LUNATIC ASYLUM.

DECEMBER 1859.

1860.



Visiting Magistrates.

F. G. DOUGHTY, Esq. *Chairman.*

APLIN, R. ESQ.	HILL, C. CLK.
ANDERSON, THOMAS, CLK.	IRELAND, J. T. ESQ.
ALDERSON, S. H. CLK.	KERRISON, SIR E. BART. M.P.
BENCE. H. B. ESQ.	KERRICH, JOHN, ESQ.
BEDINGFIELD, J. CLK.	LOVE, E. M. CLK.
BERNERS, J. ESQ.	OWEN, H. CLK.
BINGHAM, P. CLK.	PRATT, JERMYN, CLK.
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COOKE, J. T. CLK.	WALFORD, CHARLES, ESQ.
GORTON, R. C. CLK.	WESTERN, T. B. ESQ.
HEIGHAM, J. T. ESQ.	WILSON, H. ESQ.

REPORT.

It has been suggested that it might not be considered out of place in presenting this annual Report, if we attempted shortly to introduce it by a retrospective view of the gradually progressive stages by which the Asylum has been brought to its present condition. The past may in some measure have been forgotten, and the present be but imperfectly known, while each must have their bearings on the future. Whether opinions held and acted on for the best portion of life, will warrant the value that we may be disposed ourselves to place personally upon them we will not inquire. All we are anxious to convey is the assurance that the condition of the Asylum as it at present appears, has not been obtained without such anxieties as have upset in much shorter periods some stronger minds than our own. It was stated decidedly in 1853 that not more than one superintendent in *ten* had held his office for a period of ten years. Prolonged continuance in asylum life is of very rare occurrence, and though we may have failed to profit as we ought by this experience, we have what may not in all respects be very consolatory to feel, the standing of the oldest medical superintendent in England in years, and the longest in Asylum management.

In the year 1829, when the Suffolk Lunatic Asylum was opened there were only *nine* county asylums in England; the practice in lunacy was comparatively speaking very little understood, and a compulsory system was generally adopted in the treatment of the insane poor. Diffidence and fear

those great drawbacks to the progress of all free inquiry tended very much to keep all improvement in abeyance, and the madhouse with its governor and "*keepers*," had a very terrific sound. What was then denominated the *mild* system in the treatment of insanity was generally coercive, and a gloomy repulsiveness marked the abodes, a terror and alarm were impressed upon the inmates, and the feelings of those who were anxiously interested in the welfare of the insane were harassed and perplexed. Though these times were times of *talk*, they were also *years* of propitious *omen*, and frequent whisperings were heard of the *demands* of humanity, with reverberating echos from the hearts of those genuine philanthropists who *resolved* that those whispers should not die away. Their determination was to make the *acting* of humanity respond to the call of humanity. The magistrates of Suffolk urged by these feelings which had been more or less pressing upon them for some years, determined to purchase a large building in 1827 which was then on sale and which offered considerable eligibilities for the purpose of converting it into a Lunatic Asylum. It was a house of Industry erected under an Act of Parliament of about 1760, incorporating the hundreds of Loes and Wilford for the better management of their poor. The hundreds were disincorporated by Act of 1825 and 26. The House had been calculated to accommodate between 300 and 400 paupers. It was substantially constructed, healthy, and pleasantly situated, well supplied with water, standing in the midst of about 30 acres of good pasture with a large productive garden. The whole estate was purchased by the county for £8,000.

Much pains was taken by gentlemen whose names must always continue in thankful remembrance by all who have felt interested in, or profited by, the blessings which have resulted from their labours in the adaptation of the house for the purposes of an Asylum. They procured the best plans then obtainable for altering and completing their building,

but they soon realized the truth that "to search was not always to find, and to find not always to be informed." Really practical information at this early period was indeed very scanty. The Metropolitan Asylums were not then built; and in the provinces there was scarcely any person to be found whose attention had been devoted either architecturally or structurally and still less medically to the peculiar requirements of a County Asylum, and without this practical knowledge we believe it to be quite impossible properly to construct a new Asylum, or to improve by alterations an old one. The architect whose services were engaged on the first contract for the alterations in the building and the new work, became before its completion very ill; and the anxieties attending so weighty an undertaking produced that state of nervous susceptibility which ended in maniacal exhaustion. He became hopelessly insane before the works he had begun were finished; and he afforded a lamentable proof, by his own death in an Asylum, of that peculiar tension of mind, beyond the energy of the body which terminates in fatuity.

At this early period very few of the existing Asylums County or Private were presided over by regularly educated medical men; there were not many practising as *Alienist* Physicians, and the theory of the human mind was truly said to be more assiduously cultivated than the treatment of its wanderings. We could not then boast of the names of such masters of mind as Conolly, Bucknill, and others, who now adorn our *public* ranks. The superintendent however selected at the outset, had devoted much time and attention to the best plans for Asylums of variable extent, and had constructed some valuable models at considerable expense which were recommended to the notice of the Government by the chairman of the committee. He had been for some years the Steward of Bethlehem hospital and had obtained much practical information from Dr. Haslam. He was aided in his early labours by a Steward of most unflinching integrity, and whose

services the present Superintendent desires to keep in remembrance as having been a stay and support to his hands under the daily pressures of 17 years. Mr. Head retired after 20 years' faithful service on his well earned pension liberally granted by the committee of visiting justices to the fullest extent of Legislative allowance. He was succeeded by Mr. Durrant, the present upright Steward.

It will be evident from these facts, that at this very early period every one connected with the Suffolk County Asylum was actuated by one feeling of kindness and consideration. Neither the Visiting Magistrates, the Superintendent, or his subordinates, would have sanctioned any thing but extreme kindness in the treatment of the inmates. But at this time to restrain violence by mechanical means was considered to be the mildest method, and those means which were *then* thought to be the mildest were adopted. We look back on these means now with wonder. A yard or airing court was used exclusively for one violent patient and it bore the fantastic appellation "Queen's Yard." Iron palisading separated the more quiet from the more excitable inmates, and ringlets were fastened to the bedsteads and the seats in the airing courts, that the destructive might be kept from injury to themselves or others. All the single-bedded rooms as well as the galleries and day rooms had stone floors in the lower parts of the House. Every front window was boarded up every table and form fixed stoutly into the floor, the boundary walls were raised from 10ft. their original height to 14ft. on the male side and 12ft. on the female. A little delicate woman, a game-keeper's wife in the neighbourhood was frequently kept in a strait waistcoat during the day, and confined to her bedstead by her feet at night. We are constantly in the habit of meeting an old patient an inmate in 1831 who remembers perfectly well the night when his instruments of restraint were cut into pieces by the present Superintendent who found him on his nocturnal visits confined by them to

the iron ringlet on his bedstead. This man still lives in Melton and he frequently refers to this memorable night with gratitude.

The difficulty at this early period of carrying out a mild and indulgent system was very much increased, by the numbers resident at that time of most objectionable inmates called criminal lunatics. There were eleven of these whose continued acts exhibited too plainly the source, that of radical corruption from which they sprung. These patients sadly interfered with the mild means which were demanded for the welfare and the cure of the insane. It was impossible to *associate* with such men, and that power which was being gradually brought to bear on the really afflicted and distressed, was looked upon with jealousy and ill feeling by those who as unworthy of it were not disposed to value it. For some years these inmates were alarming and perplexing: some of them aware of their position were disposed on the slightest check to act on their known irresponsibility; and one man who had obtained a provision for life by what might almost bear the term of legal (as it *did* that of pious) fraud, secreted a knife three days in a corner of one of the airing courts underground, that he might "DO FOR" the Superintendent on his rounds. The cause of this man's anger was that he was prevented from going to a public house in the village professedly under the care but too often under the neglect of an attendant. The withdrawal of this hazardous privilege was construed into a wrong received, and he and his companions became the source of continued disturbance. This class of patients was gradually removed after repeated representations to the Home Office, and it is to be hoped that a proper abode large enough to admit all such, will at length be obtained in the place of safe keeping now in the course of completion at Bagshot.

If it is still found to be a subject of difficulty to detect feigned insanity and to deal justly humanely and kindly with patients whose symptoms present obscurity in these

days of ample experience, it is not to be wondered at, that occasionally actual insanity was exposed thirty years ago, to that treatment which resulted from the boldness of ignorance. Our early case-book contains some illustrative examples to which it may at some future period be desirable to refer.

The first object of the present Superintendent on his appointment in 1831 was to domesticate the household, and to obtain by continued intercourse and identity of feeling that control which the law of reciprocity imperatively demands. He found that by speaking *truth* always, even in some instances unpalatable truth, he was trusted; and he endeavoured to establish that basis from which alone moral good can arise. The danger of deceit has in the course of years been acknowledged, and exposed. Reference has again and again been made to this custom in earlier reports, and it cannot be too frequently repeated or too constantly brought under the notice of all connected with the removal of patients to the Asylum, that mistrust is engendered which acts most unfavourably upon the patient, upon the knowledge which he is *sure* to obtain of his having been the subject of falsehood or deceit. He is very slow to trust the word of any body after this discovery. We are aware that Paley in his *Moral Philosophy*, affirms it to be *morally* right to tell a lie to a madman.* Our view however has reference rather to the *treatment* as erroneous than to the falsehood as immoral.

* *Paley's Moral Philosophy*.—Book 3. chap. 15. *On Lies*.

“There are falsehoods which are not lies; that is, which are not criminal, as,—

1.

2. Where the person to whom you speak, has no right to know the truth; or, more properly, where little or no inconveniency results from the want of confidence in such cases; as where you tell a falsehood to a madman for his own advantage; to a robber, to conceal your property; to an assassin, to defeat or divert him from his purpose. The *particular* consequence is, by the supposition, beneficial; and, as to the *general* consequence, the worst that can happen is, that the madman, the robber, the assassin, will not trust you again; which (beside that the first is incapable of deducing regular conclusions from having been once deceived, and the last two not likely to come a second time in your way) is sufficiently compensated by the immediate benefit which you propose by the falsehood.”

As we felt our way, and in the progressive course we adopted, we were enabled to introduce great and valuable changes in the social and domestic arrangements with the patients and the household. We gradually abolished all personal restraint, and we are in possession of documents testifying to an earlier introduction of the principle of non-coercion, than some to whom it has been attributed, and when it was meeting with only very qualified approbation, and in some instances decided objection from the official authorities.* We have now lived to see a hope realized which we expressed in a report of this House in 1839, "that the *test* of good management in all our Asylums would be, the non-restraint system entirely carried out, constant employment actively promoted, and a *liberal* diet universally secured."

We forbid all work upon the Sabbath, stopped the clatter of the steam engine, and to the no small provocation of some laundry women, urged their attendance at church in the place of their labours in the wash-house. We refused to allow Sunday as the day for holiday visits, as we found that too often the patients became the objects of mere curiosity, and some susceptible minds were hurt. The establishment of family prayer, at which any of the patients who wished to join were welcomed, did vast good; it promoted a feeling of unity which to this hour has never been disturbed.

At this early period to which we are adverting, the subject of religious instruction to the insane was a controversial theme, and the Legislature had only just sanctioned (in 1831) the appointment of Chaplains to Asylums. This step led to much discussion, which was carried on for some time with undue zeal upon the one hand, and undue fear upon the other. Religious duties had been heretofore confided to the governor or *master* as he was then called, whose education was certainly not such as lead to much advantage. When

* Commissioners Report, 1843-44, page 143, 155.

better selected appointments were made and well educated gentlemen engaged in Psychological pursuits, they felt that their appointments involved weighty duties far above and beyond the *routine* of inspection. They could not separate temporal concerns from spiritual, and they felt that to treat the wandering mind successfully they must possess a knowledge of the causes and the occasions which led to its erring state. These were frequently to be traced to the want of proper religious training in early life, and to the injudicious mode of promulgation of extreme views in later life. As Christian Physicians they found themselves from this state of things in possession of a very powerful agent of restoration, as opportunities presented themselves of combating theological errors which their patients very frequently had imbibed. We can speak most unhesitatingly upon this point as daily observation has taught us; and continued acknowledgements from discharged patients early and late testifies to the value of leading the disturbed and the distracted mind from its divergencies to the centre of Eternal Truth, which is inseparably also, the centre of health and peace, "and power and love, and of a *sound* mind."* It is in the sudden and perhaps unexpected periods only probably of a few minutes lucidity, that the word may be spoken in season which shall carry the conviction home and shew how good it is. Such periods and such a season can only be known to the Christian Physician in his daily intercourse with his afflicted charge. We have a copy of a letter by us with an approving answer, from the President of the Lunacy Board, when we addressed him on this subject in 1843.

Many patients melancholics with suicidal tendencies, patients with peculiar idiosyncracies, and others whose minds are most susceptible of religious impressions, require most cautious treatment in discourse.

* 2 Tim, i, 7.

A woman who has been in the House more or less for the last twenty years, whose mind is always as she expresses it "under a cloud," is a case in point; he that would shew mercy to her must do so with *cheerfulness*; an opposite mode or a sermon on reprobation, would heighten her present qualified symptoms of disordered brain, to the immeasurable, and fatal madness of despair. The promulgation of extreme views of election and reprobation, and discourses on "the unpardonable sin," we consider to be the most fertile religious causes of insanity, to be estimated as such, not only Psychologically, but Theologically, as reflex proof, that those views cannot be right which produce such erroneous results. Truth rightfully estimated, and simply represented cannot *upset* the mind, but must surely tend to restore it to peace.

In one of the most glorious prophecies of Our Lord, we are told that the tongue of the learned was especially bestowed that the word of comfort might be spoken to him that was *wearry*,* and when the unrivalled qualifications of this great Teacher sent from God, are taken as the sole standard of the *manner* of conveyance, and the encouraging tendency of *His* doctrines solely enforced, the most consolatory effects may be looked for, and the happiest results may be obtained.

As this House was in working order, and we trust in satisfactory advance, in regard to the care and comfort of its inmates, 15 years before the Lunacy Commission had any Legislative cognizance of County Asylums; it will not be necessary to refer to those alterations and suggestions, proposed in what we may call the middle ages between the establishment of that commission and our present position. Some propositions were very valuable, some unimportant, and some so objectionable, that shortly after their adoption they were condemned. It was officially suggested in 1843, that additional sub-division walls should be built in the airing

* Isaiah 50. 4.

courts; their erection met with the like approval in 1846, but their subsequent condemnation was written in 1850, and they were taken down again and the bricks advantageously used in some of the later improvements.

The number of patients on the opening of the Asylum in 1829, in nearly equal division of sexes, was.....	150
By increased extension of the wings, accommodation was obtained for.....	20
By enlargement in 1844 for	70
By subsequent alterations with home labour, throwing single rooms into associated dormitories, devoting fever wards to general use as bed rooms, and other gradual improvement since 1844	60
TOTAL.....	300

This is the number for whom comfortable accommodation is provided, it has been obtained at the following expenditure:—

	£.
The original purchase of the House of Industry (in 1829) with 30 acres of land	8000
Expense of conversion into an asylum, furniture, &c. &c. &c.	22,000
Extension of the wings, <i>about</i>	2000
Enlargement in 1844 for 70 patients, furniture, &c. &c. &c. <i>about</i>	7000
TOTAL.....	£39,000

Looking at these estimates, and remembering Lord Bacon's axiom, "that experience is the test of truth in all matters *capable* of experience," we think we may confidently look back on a very early origin, and trace through successive stages a satisfactory course, which this expenditure has enabled us to pursue, in the restoration of 14 *hundred* patients to the comfort and enjoyment of their homes.

By comparing the tables of this concluding year with the last, we find a diminution in the numbers of admissions, discharges, and deaths; the comparison eliciting the following proportions:—

Admissions in 1858	118	
Discharges "	63	
Deaths "	38	
Per centage of discharges on admissions.....	53 $\frac{23}{100}$	Per cent.
Ditto of deaths	32 $\frac{12}{100}$	

Admissions in 1859	108
Discharges ,,	55
Deaths ,,	31
Per centage of discharges on admissions	51 $\frac{43}{107}$
Ditto of deaths	28 $\frac{104}{107}$

	Males.	Females.	Total.
Patients in the House, Dec. 31, 1858 ~~~~~	130	164	294
Admitted in 1859	45	64	109

	175	228	403
Discharged—cured ~ 22 34 56	45	48	93
,, relieved 2 1 3			
,, died 21 13 34			
In the House, Dec. 23, 1859 ~~~~~ Total.	130	180	310

It may be seen on comparison that the admissions last year were numerically larger than they had ever been since the Asylum opened. From 96 in 1857, they rose to 118 in 1858: and in this, the proportion of females from 56 to 72. Among the males there was only the trifling addition of 6. The unusual and sudden crowding thus brought on the female side of the House occasioned great perplexity and inconvenience; and as this continued throughout the whole of the year just closed, it necessarily became the cause of general anxiety and concern. One contrivance after another was adopted, one expedient after another carried out, to secure for each patient as she came in, the required accommodation of *bed* as well as board: and the feeling was encouraged, that if the urgency had been less for the admission of Borough patients, what was requisite might have been secured for those patients who were chargeable to County parishes. No patient however was refused; but to obtain a bed for each, we were obliged to increase the number in the associated dormitories in the upper story of the building, where there are now 72 women sleeping in this open space, under the care of three female attendants. They were crowded, but no great inconvenience resulted from the condensation. Still it did not meet the demand. 3 female patients were admitted in 1 day, 9 in 1 week. It

necessarily taxed our ingenuity to provide for them; and as the most ready means, and the easiest of accomplishment, we enclosed two of the covered ways (or sun-shades) in the airing courts, and obtained extra accommodation for 14 patients, making the increased number of beds on the female side equal to 182.

Though these additions have afforded chamber room, and thus far have answered their purpose, they have not tended to lessen the inconvenience of the overpressed galleries in the day, and especially in these winter months when the women cannot avail themselves of the airing courts. When the Commissioners in Lunacy inspected these rooms a fortnight ago, they saw that this temporary expedient only partially supplied our want; and that the day rooms were much too full to allow of securing quietude and order. "Some more comprehensive system of enlargement will soon become a necessity" is their written observation. A residence in these rooms (which may perhaps bear an analogy to what the American Journals describe as "*Satellite Cottages*") is sought after by the patients; who are pleased with the more apparent liberty they afford. This *kind* of addition is indeed to a great extent that which the Commissioners generally recommend as the most eligible mode of making provision for increasing numbers. They say in their Report for 1859, "As a rule we have suggested the erection of detached buildings of a simple and inexpensive character, rather than additions to the main structure. We have invariably found that patients removed to the more home-like apartments of a detached building, have not only presented a more cheerful and comfortable appearance, but have themselves expressed their satisfaction at the change." We can echo the truth of this statement from experience: and we believe that the more an asylum partakes of the *appearance*, of the *character*, and conduct of a domestic dwelling, the better. The conversions that we were enabled

to effect from (not to give these buildings undue nominal importance) *covered-ways* to cottages, was at the most trifling expense, and they afford a proof of how much may be accomplished by willing labourers at the expressed wish of those who have gained a friendly ascendancy over them. We do not remember to have met with a refusal when any REAL work was to be done: and we have never forgotten the readiness with which they worked at the new buildings which were erected in 1844. They saved by their labour then, 200£. to the County, and this sum was deducted in consequence, from the general estimate then taken. In our alterations this year they have been constantly at work, and by furbishing up some old circular windows, which had been put aside, as much rubbish is in any house with a very indefinite anticipation that any future contingency would arise to redeem them from the condemnation of uselessness, they have made by joining them together, a lighted dormitory by no means unsightly in appearance. The money that has been saved by this arrangement is *palpable* to any one who will be kind enough to inspect them: and we may very safely add it to that amount of economy which has always been increasing from home labour. There has been in addition to these works a great deal of internal improvement effected, the large galleries have been papered and painted by the patients, and they are now very handsome halls. The single-bedded rooms have been papered also, and fitted up with looking-glasses, dressing tables, wash-stands, carpets, and curtains: and a person must be more than ordinarily fastidious who would object to sleep in any one of them.

In noticing these decorative indulgencies, little extra folds of home drapery, we cannot avoid the expression of some fear, lest in these matters there should be an undue exaltation of trifles. If we can obtain the supply of *real* wants, we feel quite adequately disposed to consider artificial ones as secondary. No one conversant with insanity, or engaged in its delicate and scientific treatment, would disregard minutiae, knowing

how frequently a mere trifle becomes a golden pivot on which a successful issue turns. But we have lived too long in an Asylum, and mixed ourselves up too closely with its inmates, to recognize every *trivial* suggestion as an improvement. Whatever tends to place the patients in a false position, or to divert their minds from the state of future usefulness in that station in which they are called upon to move, may be showy, but it cannot be healthy; and peremptorily to urge it, or to *test* efficiency by it, we believe to be below the dignity of true science: and we cannot avoid the expression of a fear lest notwithstanding our vast improvements, our patients should suffer from the display of external trivialities while realities may escape. We would never relax one single effort while strength was bestowed on us to exert it, in the promotion of the *cure*, if possible, and if not, in the *real* comfort of our inmates. But we cannot join in praise of all recent recommendations; we never can place upon an equality the decoration of a room with the diet of an inhabitant of it. All true work begins *within*, and develops *outwards*, as the roots grow first and then the branches and the leaves. The exaltation of trifles will tend we fear to a retardation of *cure*, as we think it *has* already operated to some extent in a diminution of *comfort*. The old fashioned comfortable crib bedsteads were displaced for the more fashionable substitution of light birch ones. We find the uniform expression of those who have slept upon both, "the old is better." "I can't tuck myself up in this new thing," was a complaint to us from an old patient in the infirmary, and at his own wish he retains his old one. Every patient in the House has a good bedstead, with a straw mattress, a flock bed with 28lbs. weight of picked flock in it, three blankets, two sheets, a bolster, pillows, and a counterpane. With these *real* comforts, we can enter into the feeling of that love of antiquity, which can make a patient sleep easily and softly, even on a bedstead bearing the opprobrious designation recently given to it, of a tub. The *old* tub bedstead has comfortable sides

to it, the new birch bedstead has *none*. We confess to a fear of externals. Our Houses should not be curiosity shops. We would equally reject funereal gloom, and meretricious gaudiness; and avoid what according to the *late* Dr. Southey, are the two great evils of general society, in our intercourse with, and care for the insane, "a trifling with any thing serious as the first evil, and a seriousness in any thing trifling as the second."

Our patients have little notion of the "*majesty* of silence," and we are not very solicitous to enforce it. We have frequently been able to obtain an insight and to trace a genuineness of character in vociferous exhibition. At one time it is the utterance of unsubdued temper, at another of honest conviction; but always the most undisguised display of some element of character, which has to be either fostered or repressed. We can well bear with the *noise* of *earnestness*, when we can learn something of advantage by enduring it. We were completely silenced ourselves a short time ago in an endeavour to quiet two energetic women. One of them, on failing to convince her opponent, tore her cap, and our interference was stopped by the charge of shameful inconsistency in allowing any one who was taught "rend your hearts and not your garments" to shew so destructive a propensity. The woman who was the sufferer in this loss, was disposed to support a strong argument, on the ground that if she was forbidden to destroy her own garments, she was "a fortiori" to be condemned for destroying another's. These women in a few hours became friends, having given us an instructive incident for reflection. We were reproving an old man for noise, and *he* furnished us with a convincing proof of our error: "You call that making a noise do you?" said he "all these people here have just been calling *encore*." Notwithstanding this noisy irregularity, we repeated the *encore*, having learned the lesson that young ignorance may condemn what old knowledge will applaud.

The invention of imaginary wants must tend to produce restlessness : and we are not certain whether a counteraction of this feeling may not by indirect influence act unfavourably on the minds of our attendants. Whatever may be the cause, we have lately experienced more than ordinary difficulty in obtaining persons fitted for such responsible positions. There is no class of greater worth and importance to the welfare of the insane, than men and women of character and trust ; and such will value the word of approval and profit by it more than from enforced obedience trammelled by rigid rules. No attendant should be trusted with any power beyond that of persuasion, in regard to those under his charge : but in the exercise of that, there should be the remembrance by their employers, that they have ceaseless demands upon their energies, constant trial of their tempers, and occasional exposures of their persons to injury. These to a susceptible mind will produce *very great exhaustion*, a state which needs continued encouragement and forbearance. We believe that our attendants do their duty, their service is heartily rendered, and their co-operation cordial for the welfare of their charge. We have had the children of some, whose parents (still in the House) we have taught and trained : our senior attendant on the male side, has been with us 20 years, another 16 years, and a nurse on the female side 25 years. Such lengthened services are neither to be obtained or estimated by money. The patients themselves feel and acknowledge their value ; and having learned by our own experience, we have always urged in regard to their's, how supporting an encouraging, and how depressing a discouraging word is.

Opposite opinions are held in regard to the supposed advantages or otherwise from having a night watch, and a head attendant : our experience does not lead us to estimate the value of either very highly, unless indeed the higher position has been gained by length of service. The very

questionable advantage of the one, and the very expensive addition of the other, does not according to our experience, and would not according to our arrangements, do good. We have gone through the *night* watches ourselves in earlier years; the assistant medical officer is still constantly up in the night, and the senior attendants always on the watch, and no patient bodily ill is ever left. In some large institutions a night watch is said to be valuable; we only speak from our experience *here*, and for the sake of obtaining cleanliness of habits (which is the great advantage alleged) in a few, we think it unphilosophical and impolitic to disturb a great many. To keep pace with the prevalent growth of Asylums, to what are we getting? asks the talented and experienced Superintendent of the Kent asylum, Dr. Huxley, "A system of management by *deputy*, in the persons of junior officers and head attendants. Surely this is an inferior alternative, which has sprung up merely from the necessity of dividing labours that have grown too great." We have ourselves been pained to see that men elevated to the distinction of head attendants, have received larger salaries than some assistant medical officers, regularly educated Physicians possessing triple professional qualifications.

The visit of the Commissioners in Lunacy was so recently made, that their report may well supersede our lengthened observations. It may be seen that they refer favourably to the subject of *seclusion*. This is a word of variable interpretation; we have carried our own expansion of the term perhaps beyond logical limits. Persons happily ignorant of asylum language may wonder what it means, and we will give just two instances in illustration. A woman sitting quietly at the dinner table suddenly jumped up and dashed her plate into pieces: the attendant quietly put her into her room, and she finished her dinner *there*: when she had dined she came out: this was seclusion in *her* case. A violent patient suddenly attacked the Superintendent's wife without the

slightest apparent cause or provocation, knocked her down, and endangered a most valuable life. *She* was taken by an attendant, and placed in *her* room for one afternoon, and this was seclusion in *her* case; the only difference between the two, being the locked door in the last, and the door left open in the first. They are both entered as seclusion: thus this word may sound *formidable* when really in many cases it signifies nothing. We have frequently expressed our disapproval of its adoption; long solitary separation we absolutely abhor: and are very thankful to say that we are outliving the boasted advantage of padded rooms. We have two, but we class them amongst our ordinary rooms, and use them as such: they are very comfortable, so comfortable indeed, that the propriety of decorating and painting one of them was suggested to us, as an improvement, by a high authority.

A very large proportion of the orders of admission of patients this year has been returned to the clerk from the Commissioners' office for informality, the medical certificates reported 'vague.' We question very much if it is possible to avoid this charge of vagueness. Some of our best informed medical men have declared their inability to alter their certificates. No fact according to the wording of the schedule has come actually before them. You cannot always arrive at something *done*, a *fact* upon which to build an opinion. We suggested some years ago the substitution of the word *symptoms*. If one could always obtain clear proofs of existing insanity, it would be different; but very often the *most convincing proofs of its existence* to the experienced medical examiner, cannot be presented in a palpable form for unprofessional minds, still less in the obtuse outline required for official apprehension. In the report of the Asylum for Montrose, the superintending Physician goes so far as to say, that in his belief "one half of the certificates at present signed for the purpose of sending persons to Asylums, would not stand the scrutiny of a court of law, if

their validity depended on the value of *facts* alleged as proofs of insanity." We credit this to the full extent. Cases do not always present themselves so clearly as that of one of our patients with whom we were discoursing the other day, on the justice and propriety of his personal detention. After protesting vehemently against the restrictions on British liberty, he declared he would settle the dispute by writing at once to the king of *Oude*. We urged him *to do so*, and he did it: this *was a fact*, something *done*; his detention is legal.

It is somewhat curious to note the causes assigned on the papers of admission of some of the patients. One comes with the remark that the patient has "no sense of religion or arithmetic." Another because she *supposes* "she has sinned against God," and others with symptoms equally questionable and *vague*, are repeatedly sent back for correction: and indeed if such could be construed into *facts* indicative of insanity, we must probably look for a much larger increase, than it is contemplated *now* to provide for.

Several patients have been admitted in an exhausted state, and have died within very short periods. An old woman 75, lived only a fortnight; another 26 days; another 11 days another 8; and another only 5. We have to add to this unfavourable list the reception of a patient who came in, from an attack of puerperal mania, her hands having unhealed sores from the restraint ropes by which she had been confined during her paroxysm of violence. If any cases need early removal from home, they are these of puerperal mania: they generally get well if depleting measures have not been taken, or the violence of exhaustion treated by debilitating remedies. There is one point to which we would draw special notice in regard to the admission of women. We have had several brought this year, and from long distances, attended only by one *man*. The indelicacy of this will, if noticed, we trust in some measure prevent its recurrence.

There have been several patients of interest who have been discharged this year. A very modest well conducted young woman was when admitted in a very ungovernable state; and from her destructive propensities there was great difficulty in keeping any clothes upon her. On her recovery she remembered this perfectly well. "I recollect," she said, "all the destructive acts I did, and I tore the clothes off my back under the conviction that I was in Paradise before the fall." For some time before the entire removal of this impression, she needed constant watching, to prevent an exhibition of paradisaical nudity. She got well and was thankful.

One criminal patient has been discharged by order of the Secretary of State, on the sanction of two medical certificates. His case was not a very aggravated one, though he came with this unpleasant designation, and under an alias. His offence was striking a policeman, which according to *his* statement he deserved; and this was his only criminal act. He was a crafty man, and did some mischief. He had been in the Crimean war, and was capable of active service, with the hope of obtaining which he left us. There are now five males of this class still in the House, but they are inoffensive patients, and will in all probability be shortly removed to Bagshot. There are some patients coming nominally within this repulsive category, to whom so opprobrious a term as criminal lunatic will not apply. A patient of this class with us now, is taken up as a *vagrant*; he becomes insane in gaol. Neither the act of vagrancy nor the attack of insanity, should subject him to so ill favoured a cognomen. We associate the idea of criminal lunacy with irresponsible crime. *Lunatic* criminal would be more correct, but the term "state patient" is better. These patients are admitted under the Secretary of State's warrant, without any assignable *cause* for the charge of criminality: they are removable by that

warrant on the sanction of two medical certificates. We have in the House five under this class from the following causes :—

- 1 Manslaughter.
- 1 Vagrancy.
- 1 Petty Larceny.
- 2 Want of Sureties.

Amongst the great number of patients whose admission papers declare *suicidal*, there have been three very formidable attempts made to effect this fearful end. *Two* of these occurred in the same individual within a fortnight of each other. This patient is now in the House; he is better: the other went home well in April. If any thing can repay the anxiety attendant on such cases, it is the satisfaction of watching the early glimmerings of returning reason, and ultimately witnessing cheerful features which had long been stricken by stupefaction and distress.

The patients have been healthy throughout the year: they have enjoyed as usual extended liberty, including a very pleasurable visit of many of the females to the sea-side. In addition to their usual Christmas festivities, a Lecture on Elemental Philosophy and Chemistry, accompanied by instructive experiments, was given to them by the assistant medical officer, Dr. Wm. P. Kirkman. Their undivided attention and after expressions proved their capability of receiving and enjoying intellectual pursuits. It is proposed to repeat these lectures occasionally, and to establish reading and singing classes.

In some valuable suggestions in the report of Dr. Huxley for the adoption of a plan to avoid as he expresses it, "burying the efficiency of County asylums under their own growth," he observes that the most striking fact in the last report of the Commissioners in Lunacy, is the allusion to enlargement. "Additional accommodation is either recommended and urged, or spoken of as being just completed or in progress, in no less than 21 instances out of 33; that is in two-thirds

of all the established County asylums. The 21 asylums may be classed thus. Present size of asylums, undergoing, or to undergo enlargement :—

1	asylum	containing	159 patients.
4	”	”	from 267 to 297.
5	”	”	from 303 to 333.
6	”	”	from 401 to 505.
5	”	”	from 723 to 1295.
<hr/>			
21			
<hr/>			

It may be held that, except the first, there is not one of these asylums but is already as large as can consist with the best management, while all those receiving more than 300 patients may be deemed to have exceeded the limit of highest efficiency. Wherever the work to be done exceeds the direct capacity of one head, and the personal supervision of one pair of eyes, then the consistent and harmonious idea of a perfect management cannot be so well executed. The division of labour may serve indefinitely in a field of operations where human feelings have no concern; but in a community of insane persons, there can seldom, if ever, be more than one director to exercise beneficially the authority, and to have the experience and mental adaptation necessary to conduct every thing *well*.”

At the suggestion of the House Committee, we have extracted the published opinion of the Commissioners on this point, from their report to the Lord Chancellor in 1844, repeated in 1857, and confirmed by Lord Shaftesbury’s report before the Committee of the House of Commons in 1859.*

* *Extracts from the Commissioners’ Report to the Lord Chancellor. 1844.*

“From the best opinions which we have been able to collect, and from the result of our own observations and experience, we think it is desirable that no asylum for curable lunatics, should contain more than 250 patients, and that 200 is perhaps as large a number, as can be managed with the most benefit to themselves and the public, in one establishment.”—p. 23, 1844.

It is beyond our limits to comment further upon these records ; but our *very* long experience may perhaps plead our excuse for the suggestion, that the absence of *recommendation* does not necessarily forbid *acquiescence*. There may be *acquiescence* in what might not be recommended. Whether this would be the case or not, if an enlargement *here*, were brought forward as the best means for securing the desired aid now in contemplation, it is not for us to say. We are strongly convinced that *any* plan would of course be well digested ; and would obtain, to be advantageous, the concurrent approval of those who may have to work the machinery. None but *experienced* men can tell what is needed, and under this conviction we are thankful to see that the medical appointments for the new asylums are made before the adoption of the plans or the completion of the works. We have known what it has been to work with imperfect machinery, and to experience the harassing perplexity and the stretch of anxiety necessarily resulting from large bodies of workmen being engaged about a household, and coming in contact with such inmates as ours. We may, with some impropriety of expression perhaps, but in words which will convey the truth, say that, what with additions and alterations, we have

“ It has always been the opinion of this Board, that asylums beyond a certain size are objectionable, they forfeit the advantage which nothing can replace, whether in general management, or the treatment of disease, of individual and responsible supervision. To the cure or alleviation of insanity, few aids are so important as those which may be derived from vigilant observation of individual peculiarities ; but where the patients assembled are so numerous that no medical officer can bring them within the range of his personal examination and judgment, such opportunities are altogether lost ; and amid the workings of a great machine, the physician as well as the patient loses his individuality. The more extended asylums are, the more abridged becomes their means of cure.—*Report, 1857, p. 10 and 11.*”

“ We think that a medical man can manage, as we said in 1844, 250 patients, and it might go as far as 300, but beyond 300 I am perfectly convinced that it is impossible for any medical man to pay adequate attention to every case ; for unless in the management of lunatics, you have what the Germans call, the individualizing system, *viz.*—that the medical man should know every patient, and be constantly directing attention to him, you cannot effect any great or permanent cure.”

been mixed up with bricks and mortar for more or less than 25 years. *Still* if any thing can be done, or any additions made, to improve or to enlarge our present sphere of usefulness, on our own part and that of a willingly laborious household under us, we promise our ablest exertions. We cannot but feel that there must be from increasing years, less *personal activity*, but there will be undiminished zeal in the cause of the Institution, and the welfare of the patients. Our hope is that *this* and all our philanthropic objects may become more attractive ones; and that we may live to express the assurance in regard to those who may in *future* interest themselves by their guardian oversight, as we know we may of those who have gone before and of those who are active now, "great is your reward in Heaven."

JOHN KIRKMAN, M.D.

Commissioners' Report.

SUFFOLK COUNTY ASYLUM, 8th. December, 1859.

WE have visited the Asylum this day, and have personally examined all the patients. There are 130 men and 183 women. On the womens' side the wards are crowded, but no patients have yet been refused admission, and fourteen additional beds have been provided by converting two of the sun-shades in the airing courts, into dormitories, each containing seven beds. Some more comprehensive system of enlargement will however soon become a necessity, and we are glad to learn that the subject is under consideration.

Of course should the accommodation be increased on this site, it will be necessary that additional land should also be procured.

We notice that since our last visit all the circular windows have been removed, and that more of the bed rooms have been boarded and papered, and others are in progress. The halls also have been papered.

All the benches have had backs fixed to them and additions have been made to the number of birch bedsteads. More wash stands, looking-glasses, pictures, hair brushes, combs, towels, &c. have also been supplied.

We are assured that the water of the baths is now changed more frequently when the patients are bathed, but some of the baths are not in a very efficient state.

We found the wards clean, and the bedding was abundant and in good order. The personal condition of the patients was good, and they are generally in good bodily health, only one patient of each sex was in bed.

The number of patients who are employed has we understand been increased, and Dr. Kirkman is of opinion that this number might be augmented were proper work-shops provided.

In this opinion we entirely concur, and we think that if a shoe-maker and a tailor were engaged to work on the premises, and instruct some of the patients. the whole of the clothing and shoes might be made here.

The manufacture of cocoa matting and mats is also easily learnt when proper machines are provided.

The church service is read on Sunday by the chaplain, in the room which now serves as a chapel. This apartment is by no means large enough to accommodate the number of patients who could and ought to attend.

Family prayers are read daily by Dr. Kirkman, and Mrs. Kirkman has a school, and reads to the patients.

We find from the records that there has been no instance of instrumental restraint. Seclusion has been resorted to principally on the female side, but the duration of each instance of seclusion has for the most part been very short, and we find that the record is very minute, and that even when a patient is placed in a room and the door shut but not locked, the fact is entered as seclusion.

There have been 118 admissions since the last visit, and 61 patients have been discharged, and 38 have died.

We are glad to be enabled once more to report very favourably as to the condition of the Asylum and its inmates, who evidently continue to profit by the kindness and attention shewn them by Dr. and Mrs. Kirkman.

W. G. CAMPBELL } Commissioners
S. GASKELL } in Lunacy.

Appendix.

No. 1.

PATIENTS ADMITTED, DISCHARGED, AND DIED,

From 1st. of January 1859, to 31st. December.

	Males.	Females	Total.
Patients in the House 31st. December, 1858	130	164	294
Admitted in 1859	47	65	112
	177	229	406
Discharged—cured ..	22	34	56
—— relieved....	2	1	3
Died	22	13	35
	46	48	94
Remaining in the House 31st. Dec. 1859	131	181	312

No. 2.

ASCERTAINED AND SUPPOSED CAUSES OF IN-
SANITY IN THE 112 PATIENTS ADMITTED
DURING THE YEAR 1859.

	Males.	Females.	Total.
Anxiety about Business	2	3	5
" Child	1	2	3
Bodily Illness		1	1
Desertion by Husband		1	1
Domestic Afflictions	1	3	4
Disappointed Affections	2	5	7
Death of Mother	1		1
" Child		1	1
" Husband		1	1
Decay of Old Age	2	4	6
Epilepsy	4	2	6
Fright		2	2
Hereditary Predisposition (sole cause)*	9	6	15
Imprisonment	2		2
Injuries to the Head	1	1	2
Intemperance	4		4
Irregular Life (Prostitution)		2	2
Jealousy		3	3
Natural Deficiency (2 Congenital Idiots)	4	2	6
Puerperal State		9	9
Reduced Circumstances and Desti- tution	4	6	10
Religion	3	2	5
Unknown	7	9	16
Total	47	65	112

* Hereditary Predisposition traced in 21 cases.

No. 3.

OF THE 112 PATIENTS ADMITTED IN THE
YEAR 1859.

	Males.	Females.	Total.
Discharged, cured	10	19	29
" relieved	2	1	3
Died	7	5	12
Remaining	28	40	68
Total.....	47	65	112

No. 4.

DOMESTIC CONDITION OF THE 112 PATIENTS
ADMITTED IN THE YEAR 1859.

	Males.	Females.	Total.
Married	20	25	45
Single	22	27	49
Widowed	5	13	18
Total.....	47	65	112

No. 5.

RELIGIOUS DENOMINATION OF THE 112 PATIENTS
ADMITTED IN THE YEAR 1859.

Religious Denomination.	Males.	Females.	Total.
Church of England	39	52	91
Baptists	1	5	6
Wesleyan Dissenters	2	3	5
Independents	1	3	4
Primitive Methodists.....	1	2	3
Roman Catholic	1	0	1
None (Idiots)	2	0	2
Total.....	47	65	112

No. 6.

DEGREE OF EDUCATION OF THE 112 PATIENTS
ADMITTED IN THE YEAR 1859.

Degree of Education.	Males.	Females.	Total.
Able to Read and Write	24	27	51
Able to Read	13	25	38
Unable to Read	10	13	23
Total.....	47	65	112

TABLE OF ADMISSIONS, DI

In the whole Thirty-one Years

Years.	MALES.						FEMALES.			
	Admitted.	Discharged.			Died.	Escaped.	Admitted.	Discharged.		
		Cured.	Relieved.	Total.				Cured.	Relieved.	Total.
1829	72	11		11	11		70	9	2	1
1830	48	12	9	21	11		34	12	3	1
1831	42	8	4	12	16		45	19	3	2
1832	42	21	4	25	17		25	20	2	2
1833	34	18	4	22	14	2	31	14	5	1
1834	32	16	7	23	9	1	32	18	5	2
1835	39	18	9	27	8		40	15	8	2
1836	30	11	13	24	7		26	11	16	2
1837	30	13	5	18	11		46	17	1	1
1838	35	16	2	18	13		31	21	2	2
1839	29	15	5	20	10	1	53	27	9	3
1840	31	14	1	15	7	1	38	23	3	2
1841	35	16	2	18	13		29	16	1	1
1842	27	10	2	12	10		34	14	2	1
1843	33	9	6	15	13		34	17	5	2
1844	36	19	2	21	9		30	13		1
1845	42	22	3	25	13		40	16		1
1846	37	19		19	16	1	44	24	1	2
1847	44	16	1	17	24		42	13	2	1
1848	31	13		13	11	1	51	26	2	2
1849	27	10	11	21	9		55	34	5	3
1850	36	21	4	25	17	1	47	29	1	3
1851	36	25	3	28	20		55	26	8	3
1852	51	22	2	24	17		47	28	8	3
1853	49	22	2	24	19		44	20	7	2
1854	34	22	3	25	15		47	24	2	2
1855	43	10	2	12	17		40	28	3	3
1856	42	21	2	23	16		47	18	5	3
1857	40	27	2	29	17		56	27	7	3
1858	46	19	1	20	18		72	39	5	3
1859	47	22	2	24	22		65	34	1	3
Total.	1200	518	113	631	430	8	1350	652	117	7

Average number of Patients for the Thirty-one Years,—

GES, AND DEATH,

sylum opened.

Admitted.	TOTAL.				Escaped.	In the House at the end of each year.		
	Discharged.			Died.		Males.	Females.	Total.
	Cured.	Relieved.	Total.					
42	20	2	22	15		50	55	105
82	24	12	36	18		66	67	133
87	27	7	34	26		80	80	160
67	41	6	47	25		78	75	153
65	32	9	41	22	2	75	79	154
64	34	12	46	17	1	75	80	155
79	33	17	50	14		79	91	170
56	22	29	51	16		78	81	159
76	30	6	36	27		79	93	172
66	37	4	41	20		82	94	176
82	42	14	56	16	1	80	105	185
69	37	4	41	20	1	89	104	193
64	32	3	35	22		93	107	200
61	24	4	28	21		98	114	212
67	26	11	37	29		103	110	213
66	32	2	34	21		109	115	224
82	38	3	41	25		112	127	239
81	43	1	44	31	1	114	131	245
86	29	3	32	48		116	134	250
82	39	2	41	29	1	123	139	262
82	44	16	60	30		119	134	253
83	50	5	55	31	1	113	137	250
91	51	9	62	35		101	143	244
98	50	10	60	27		111	144	255
93	42	9	51	36		117	144	261
81	46	5	51	30		111	150	261
83	38	5	43	32		125	144	269
89	39	7	46	31		128	153	281
96	54	9	63	36		122	156	278
18	58	6	64	38		130	164	294
12	56	3	59	35		131	181	312
550	1170	237	1407	823	8			

Daily Average for the Year 1859,—306.

No. 8.

OCCUPATIONS OF THE 112 PATIENTS ADMITTED
IN THE YEAR 1859.

Occupations.	Males.	Females.	Total.
Agricultural Labourers	19		19
" " Wives		21	21
" " Widows ..		2	2
" " Daughters		3	3
Blacksmith	1		1
" Wives		2	2
Bookbinder's Widow		1	1
Bricklayer	1		1
Carpenter's Wife		1	1
Charwoman		1	1
Coachman	1		1
Domestic Servants	2	14	16
Drayman's Wife		1	1
Dress-makers		4	4
Farmer	1		1
Glover		1	1
Grooms	2		2
Harness-maker	1		1
House Keepers		3	3
Inn Keeper	1		1
Miller's Widow		1	1
No occupation (3 Idiots)	4	3	7
Organ Player	1		1
Porter	1		1
Printer's Wife ..		1	1
Sailors	2		2
Soldier	1		1
Shoe-binder		1	1
Shoe-makers	4		4
" Wives		4	4
Stock Dealer	1		1
Tailors	2		2
Thatcher	1		1
Weaver		1	1
Wheelwright	1		1
Total	47	65	112

No. 9.
AGES OF PATIENTS ON ADMISSION IN 1859.

Under Ten.		From Ten to Twenty.		Twenty to Thirty.		Thirty to Forty.		Forty to Fifty.		Fifty to Sixty.		Sixty to Seventy.		Seventy and upwards.		TOTALS.		
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	TOTAL.
2	0	3	2	10	13	7	14	14	17	5	11	2	4	4	4	47	65	112

AGES OF PATIENTS DIED IN 1859.

From Ten to Twenty.		Twenty to Thirty.		Thirty to Forty.		Forty to Fifty.		Fifty to Sixty.		Sixty to Seventy.		Seventy and upwards.		TOTALS.				
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	TOTAL.
1	1	1	2	5	2	0	4	2	2	4	2	2	2	22	13	35		

No. 10.

TABLE EXHIBITING THE CAUSES OF DEATH, FORM OF INSANITY, DURATION OF MENTAL MALADY, AND PERIODS OF RESIDENCE IN THE ASYLUM, IN THE CASES WHICH TERMINATED FATALLY DURING THE YEAR 1859.

Nos.	Age.	Sex.	Cause of Death.	Residence in Asylum.			Total Duration of Insanity.			Form of Insanity.
				Yrs.	Mos.	Dys.	Yrs.	Mos.	Dys.	
1	74	M.	Paralysis	3	6	0	3	7	21	Mania
2	34	M.	Phthisis	3	23		6	23		Ditto
3	42	M.	Maniacal Exhaustion	5	0		1	5	0	Ditto
4	50	M.	Chorea	1	5	4	2	7	4	Imbecility
5	48	M.	Phthisis	11	8	15	12	1	15	Ditto
6	62	M.	Ditto.....	22	0	21	22	1	21	Mania
7	25	F.	Puerperal Mania (Exhaustion)		11			17		Puerperal Mania
8	32	F.	Phthisis	10	22		11	1		Mania
9	39	M.	Epilepsy	14	11	21	15	0	0	Epileptic Mania
10	26	F.	Exhaustion	9	2	4	10	0	4	Mania
11	50	M.	Maniacal Exhaustion	8	0	26	8	2	26	Ditto
12	74	M.	Cardiac Disease	1	15		2	1	15	Senile Imbecility
13	58	F.	Exhaustion	2	9		5	2		Melancholia
14	18	F.	Exhaustion Cachexia		9			23		Acute Mania
15	55	M.	General Paralysis.....	4	2	15	6	2	15	General Paralysis
16	49	M.	Phthisis	3	11	20	3	11	23	Mania
17	57	M.	Ditto.....		4			11		*
18	38	M.	General Paralysis.....	3	10		2	3	10	General Paralysis
19	31	M.	Epilepsy	7	12		8	12		Epileptic Mania
20	69	M.	Senile Exhaustion	3	0	18	5	0	18	Mania
21	62	F.	Intestinal Obstruction, Peritonitis.....	20	0	9	21	0	9	Ditto
22	40	M.	Paralysis		26		1	8		Ditto
23	71	F.	Gradual Exhaustion.....	1	3	6	1	7	13	Ditto
24	25	M.	Acute Bronchitis	1	9	17	1	9	25	Epileptic Mania
25	75	F.	Senile Exhaustion	3	3		1	3	3	Mania
26	62	M.	Cardiac Disease, Gangrene of Leg	1	8	9	1	9	23	Melancholia
27	34	F.	Cardiac Disease	1	1	9	4	1	9	Mania
28	72	F.	Senile Exhaustion.....	18	0	15	18	1	1	Ditto
29	63	F.	Apoplexy, Paralysis.....	6	2		6	23		Ditto
30	71	M.	Senile Exhaustion	6	25		1	1	25	Ditto
31	50	F.	Cardiac Disease	1	1	21	1	4	21	Ditto
32	37	M.	Apoplexy	6	4		6	14		Ditto
33	69	M.	Phthisis	6	26		7	26		Ditto
34	75	F.	Senile Exhaustion	16			Unknown			Ditto
35	17	M.	Epilepsy	8	0	22	8	0	22	Epileptic Mania

* This poor man was admitted in articulo mortis, and required restoratives in the Porter's Lodge before he could be carried up to the House. He was in such an exhausted condition that we could form no opinion as to the state of his mind.

In drawing attention to the Obituary, the following facts appear worthy of notice:—

No. 17. Was a man admitted in the last stage of Pulmonary Consumption: for upwards of twenty minutes we feared he would be carried in a corpse. He survived his admission only four days.

No. 14. Was a young woman only 18 years of age. A case of Acute Mania in a Cachectic constitution. She was much exhausted on admission and died after nine days' residence. It is much to be regretted that this patient was not brought to us earlier, she having been insane a fortnight.

No. 7. A woman with Puerperal Mania (of which class we have had nine admissions in the year) died from exhaustion after being in the Asylum eleven days. She was very weak on admission, and a delay of six days had taken place in bringing her here.

No. 34. An old woman of 75, admitted in a failing condition. and died in sixteen days.

No. 22. A man of about 40 years of age, sank in twenty-six days; he was in a state of partial coma from the period of his admission.

Eleven patients were so reduced and debilitated, that they died within five months of their admission.

Seven deaths occurred from Pulmonary Consumption and three from Cardiac Disease, and in No. 31. there was very considerable disorganization of the semilunar valves.

No. 11.
DIET TABLE OF THE SUFFOLK LUNATIC ASYLUM.

December 31, 1859.

DAY.	BREAKFAST.	DINNER.	SUPPER.
SUNDAY.	Each Patient, 6ozs. of Bread with Gruel made of 10lbs. Groats and 8galls. of Milk.	Males, 8ozs. Bread, $1\frac{1}{2}$ oz. Cheese, and $\frac{3}{4}$ -pint Beer. The Females the same, except 1oz. Bread.	Males, 8ozs. Bread, $\frac{3}{4}$ oz. Butter, $\frac{3}{4}$ pint 'ea. Females, the same, except 1oz. Bread.
MONDAY.	Ditto.	Suet Dumplings and Rice Puddings. Males, 1lb. each. Females $\frac{3}{4}$ lb. ditto, and $\frac{3}{4}$ -pint Beer.	Males, 8ozs. Bread, $1\frac{1}{2}$ oz. Cheese, $\frac{3}{4}$ pint Beer. Females, the same, except 1oz. Bread.
TUESDAY.	Ditto.	Males, 6ozs. Meat, 4ozs. Bread, and Vegetables. Females, the same, with $\frac{3}{4}$ -pint Beer each.	The same as Sunday.
WEDNESDAY.	Ditto.	Soup from Tuesday, with 2ozs. additional Meat. Males, 7ozs. and the Females, 6ozs. Bread.	The same as Monday.
THURSDAY.	Ditto.	The same as Monday.	The same.
FRIDAY.	Ditto.	The same as Tuesday.	The same as Tuesday.
SATURDAY.	Ditto.	The same as Wednesday.	The same as Wednesday.

The simplest calculation is 2lbs. of uncooked Meat with bone, for each Pauper Patient weekly, subject to discretionary addition, and sub-division.

No. 12.

FARM AND GARDEN ACCOUNT,

In the year 1859.

Dr. 1859. Jan 1.	£. s. d.	£. s. d.	Cr.
To Live and Dead Stock, valued at - - -	143 0 0	Dec. 31. By Amount of Produce supplied to the Asylum, <i>viz.</i> —Milk, Butter, Veal, Pork, Potatoes, and other Vegetables, valued at wholesale prices - -	224 2 0
Paid for Labour - - -	35 0 0	Cash received for 4 Calves	16 0 0
Rates and Taxes - - -	7 12 8	Hay Stack—about 5 Tons	22 10 0
Tithe - - -	10 0 4	Live & Dead Stock, valued at - - -	153 10 0
Paid for Corn, Meal, and sundry expenses - - -	85 12 1	50 Sacks of Potatoes -	12 10 0
Estimated Rent of Land	58 10 0	180 Bushels Carrots and Parsnips - - -	4 10 0
Balance - - -	106 2 11	300 ditto Mangold-wurzel	5 0 0
		4 ditto Onions - -	16 0
		2 Acres of Vegetables on the Land - - -	7 0 0
	<u>£ 445 18 8</u>		<u>£ 445 18 0</u>

No. 13.

CONTRACT PRICES,

For the year ending 25th. December, 1855.

	1st Quarter		2nd. Quarter.		3rd. Quarter.		4th. Quarter.	
	s.	d.	s.	d.	s.	d.	s.	d.
Beef, good Steer, by side cwt.	48	0	50	0	50	0	50	0
Wether Mutton, by side or carcaselb.		6 $\frac{1}{2}$		7		7		7
Bread, per loaf, 4lb. 4oz. 18 hours baked		5		5		5 $\frac{1}{4}$		4 $\frac{3}{4}$
Flour, secondssack	30	0	30	0	37	0	30	0
Maltcoomb.	29	6	31	0	32	0	33	0
Hops, genuine English growthcwt.	70	0	84	0	88	0	72	0
Sugar, loaflb.		6		6		6		5 $\frac{1}{2}$
„ soft, good ..cwt	36	0	36	0	36	0	35	0
Molasses or Treacle, cwt.	12	0	12	0	12	0	12	0
Vinegargallon	1	6	1	6	1	6	1	6
Soap, goodcwt.	28	0	28	0	28	0	28	0
„ soft, firkin 64lbs. net	14	6	14	0	14	0	13	6
Cheese, Edam, good, cwt.	45	0	50	0	50	0	50	0
„ Derbycwt.	66	0	66	0	66	0	72	0
Groatscwt.	14	0	14	0	15	0	15	0
Peas, boilersbushel	5	6	5	3	5	6	5	0
Best Firkin Butter of 56 lbs. net firkin.....	50	0	49	0	51	0	52	0
Tobacco, shaglb.	3	2	3	2	3	2	3	2
Snufflb.	3	0	3	0	3	0	3	0
Candlesdozen	5	9	5	9	5	9	6	3
Pearl Ashcwt.	35	0	35	0	36	0	33	0
Soda, goodcwt.	7	6	7	6	7	0	6	6
Best Stone Bluelb.	1	0	1	0	1	0	1	0
Best Starchlb.		4 $\frac{1}{2}$		4 $\frac{1}{2}$		4 $\frac{1}{2}$		4 $\frac{1}{2}$
Pepperlb.	1	0	1	0	1	0	1	0
Mustardlb.		6		6		6		6
Carolina Ricecwt.	20	0	20	0	20	0	20	0
Wheat Straw in Trusses cwt.	2	6	2	6	2	6	2	0
Brush Wood Fagots, 60 fagots to the load	18	6	18	6	18	6	18	6
Coals, best Newcastle, ton	17	9	17	9	17	6	16	6
Ditto Blythton	17	9	17	9	16	6	16	6
Welsh Stoneton	28	0	28	0	28	0	28	0
Cinderschal.	18	0	18	0	17	6	15	0

No. 14.

TABLE SHEWING THE WEEKLY AND ANNUAL CHARGE FOR EACH PATIENT, SINCE THE ASYLUM OPENED.

Years.	1st. Quarter. Per Week.		2nd. Quarter. Per Week.		3rd. Quarter. Per Week.		4th. Quarter. Per Week.		Annual Charges.		
	<i>s.</i>	<i>d.</i>	<i>s.</i>	<i>d.</i>	<i>s.</i>	<i>d.</i>	<i>s.</i>	<i>d.</i>	£.	<i>s.</i>	<i>d.</i>
1829	12	2	8	2	7	0	8	2	22	19	10
1830	7	7	6	5	5	3	7	0	17	1	3
1831	7	0	7	7	5	10	7	0	17	16	5
1832	6	5	5	10	5	10	5	10	15	10	11
1833	5	10	5	10	5	3	5	10	14	15	9
1834	5	10	5	3	5	10	5	10	14	15	9
1835	7	0	5	3	4	8	5	10	14	15	9
1836	5	10	5	3	5	10	5	10	14	15	9
1837	7	0	5	10	5	10	5	10	15	18	6
1838	6	5	5	10	5	10	6	5	15	18	6
1839	7	0	6	5	5	10	6	5	16	13	8
1840	7	0	6	5	6	5	7	0	17	8	10
1841	7	0	6	5	6	5	7	0	17	8	10
1842	7	0	6	5	5	10	6	5	16	13	8
1843	6	5	5	10	5	10	6	5	15	18	6
1844	6	5	6	5	6	5	6	5	16	13	8
1845	7	0	6	5	5	10	6	5	16	13	8
1846	7	0	7	0	6	5	7	7	18	4	0
1847	7	7	8	2	8	9	7	7	20	17	1
1848	8	2	8	2	8	2	8	9	21	12	3
1849	7	7	5	3	5	10	6	5	16	6	1
1850	7	0	5	10	5	10	6	5	16	6	1
1851	5	10	5	3	5	3	6	5	14	15	9
1852	6	5	6	5	6	5	6	5	16	13	8
1853	7	0	7	0	7	0	7	10 $\frac{1}{2}$	18	15	4 $\frac{1}{2}$
1854	8	6	8	0	8	0	8	9	21	12	3
1855	8	9	8	9	8	9	8	9	22	15	6
1856	8	9	8	9	8	0	7	6	21	9	0
1857	8	3	8	0	8	3	8	6	21	9	0
1858	8	3	8	0	7	6	7	6	20	6	3
1859	7	6	7	6	7	6	8	6	20	3	0

No.

AN ACCOUNT OF THE RECEIPTS AND

Under 16 and 17 Vic. c. 97. sec. 38 from

RECEIPTS.

		£.	s.	d.
1859.	To Balance brought forward		7	5
Jan. 8.	„ Beccles	40	9	0
10.	„ Ipswich	60	13	6
13.	„ Woodbridge	33	14	2
19.	„ Bury	67	8	4
		£ 202 12 5		

15.

DISBURSEMENTS FOR REPAIRS, &c.

January, 1859, to December, 1859.

		DISBURSEMENTS.		
		£.	s.	d.
1659.				
Jan.	Borton, Insurance	26	0	0
	$\frac{1}{4}$ Salary	12	10	0
		<u>38</u>	<u>10</u>	<u>0</u>
	Cook, Bricks and Tiles	7	13	8
	Grimwood, Deals, Slate, &c.	26	15	5
	Clarke, Carpenter's Work	8	5	0
	Silver, Ironmongery	5	12	1
	Thompson & Bennington, Lime	8	18	6
	Allen, Plumbing, Glazing, &c.	13	9	5
	Chaplain's Clerk and Rat-catcher	1	5	0
	Land Tax	2	4	0
	Page & Girling, Ironfoundery Work	25	10	1
	Loder, Printing and Stationery	14	10	7
	Gall, B. D. Paint, &c.	7	10	0
	Chaplain	15	0	0
	Fisher, Gravel and Carting	10	2	6
	Smith, Bricklayer's Work	9	7	0
	Dale, Stonemason's Work	7	11	9
		<u>£ 202</u>	<u>5</u>	<u>0</u>

RECEIPTS.

1859.		£.	s.	d.
	To Amount forward	202	12	5
March 9.	„ Beccles	33	6	0
	„ Woodbridge	27	15	0
	„ Bury	55	10	0
	„ Ipswich	49	19	0

* Orders on County 1*d.* Short.

£ 369 2 5

continued.

DISBURSEMENTS.

1859.		£.	s.	d.
	Amount brought forward .	202	5	0
April.	Borton, Extra Attendance 10 10 0			
	$\frac{1}{4}$ Salary 12 10 0			
		23	0	0
	Chaplain	15	0	0
	Clarke, Carpenter's Work	8	14	0
	Gall, Oil, Paint, &c.	11	17	9
	Culham, Braziers, &c.	3	6	2
	Silver, Ironmongery	5	16	6
	Fisher, Carting	5	11	0
	Pizey, Postage and Receipt Stamps, for Reports, &c.	6	8	6
	Smith, Bricklayers Work	6	1	10
	Page & Girling, Ironfounders	25	12	6
	Loder, Printing, Stationery, &c.	20	11	6
	Allen, Plumbing, Glazing, &c.	14	1	9
	Grimwood, Deals, &c.	19	3	7
	Chaplain's Clerk, &c.	1	5	0
		£ 368	15	1

No. 15.

RECEIPTS.

		£.	s.	d.
July 1.	To Amount forward	369	2	5
	„ Beccles	46	3	1
	„ Woodbridge	38	9	3
	„ Bury	76	18	6
	Ipswich	69	4	8

 £ 599 17 11

continued.

DISBURSEMENTS.

1859.		£.	s.	d.
July.	Amount brought forward	368	15	1
	Grimwood, Deals	26	17	0
	Clarke, Carpenter's Work	12	4	6
	Silver, Ironmongery	6	1	2
	Blowers, Whitening	3	6	0
	Dr. Kirkman, Travelling Expenses	29	0	0
	Hubbuck, Paint	5	12	8
	Chaplain's Clerk, &c.	1	5	0
	Allen, Plumbing, Glazing, &c.	27	6	6
	Allen, Paint,	11	0	9
	Thompson & Bennington, Lime	3	18	9
	Smith, Bricklayer's Work	12	13	4
	Page & Girling, Ironfounders	35	7	9
	Land Tax	2	4	0
	Fisher, Carting Gravel	3	16	0
	Loder, Printing and Stationery	13	5	2
	Chaplain	15	0	0
	Dale, Stonemason	9	6	11
	Borton, Quarter's Salary	12	10	0
		£ 599	10	7

RECEIPTS.

		£.	s.	d.
1859.	To Amount forward	-	-	-
		599	17	11
Oct.	„ Beccles	-	-	-
		77	7	7
	„ Woodbridge	-	-	-
		36	18	8
	„ Ipswich	-	-	-
		66	9	6
	„ Bury	-	-	-
		73	17	2

 £ 854 · 10 9

continued.

DISBURSEMENTS.

1859.		£.	s.	d.
	Amount brought forward	599	10	7
	Borton, Quarter's Salary	12	10	0
	Silver, Ironmongery	5	13	0
	Cook, Bricks, Pipes, &c.	18	10	3
	Page & Girling, Ironfounders	42	0	7
	Loder, Printing and Stationery	10	13	1
	Smith, Bricklayer's Work	12	6	8
	Chaplain - - - - -	15	0	0
	Chaplain's Clerk, &c. - - - - -	1	5	0
	Clarke, Carpenter's Work - - - - -	18	18	0
	Fisher, Gravel and Carting - - - - -	7	19	0
	Grimwood, Deals, &c. - - - - -	41	0	9
	Allen, Plumbing, Glazing, &c. - - - - -	32	19	4
	Pizey, Postage and Receipt Stamps, Check Books - - - - -	2	16	0
	Balance due to County - - - - -		7	4
	Overpaid by Beccles Division - - - - -	33	1	2
		£ 854	10	9

No. 16.
**GENERAL STATEMENT OF RECEIPTS AND EXPENDITURE BY THE HOUSE COMMITTEE
 OF THE SUFFOLK COUNTY LUNATIC ASYLUM,**
 For the year ending December 31st. 1859.

Dr. 1859.	£. s. d.	£. s. d.	Cr. £. s. d.
Jan. 1st. To Balance at the Bank of Messrs. Alexanders	1397	19	1
Receipts from Unions:—			
Cosford	393	19	0
Wangford	452	3	0
Sudbury	548	9	0
Samford	199	17	6
Thetford	66	7	0
Hoxne	305	11	0
Blything	690	3	0
Mutford	250	2	6
Plomesgate	504	16	0
Newmarket	112	16	0
Bury St. Edmund's	28	12	0
Bosmere	450	14	6
Ipswich	28	12	0
Risbridge	182	11	0
Hartismere	367	8	6
Woodbridge	518	8	0
Thingoe	309	8	6
Mildenhall	191	6	6
Stowmarket	248	3	6
J. H. Borton, Esq. for County Pauper	9	15	0
1 Second Class Boarder	5859	2	6
Sale of 4 Calves	59	0	0
	16	0	0
	£7312	1	7
Jan. 1st. Superintendent and Matron	464	18	6
House Surgeon	52	10	0
Steward	43	0	0
Assistant Engineer	25	0	0
Attendants, Nurses, and Servants	466	18	0
	1052	6	6
Meat	1032	19	9
Groceries, &c	842	2	5
Beer, Malt, and Brewing	397	6	0
Bread and Flour	753	10	3
	3025	18	5
Clothing	731	2	3
Coals	301	12	9
Wood	16	13	0
Medicines, Wine, and Spirits	132	0	1
Sundries	135	2	4
Tradesmen's Bills	913	1	11
Clerk to House Committee	60	0	0
Rev. Watson, Tithe	10	0	4
Clarke, for Coffins and Funeral Expenses	32	2	0
Balance at Messrs. Alexanders' Bank	902	2	0
	£7312	1	7

No. 17.

HEADS OF EXPENDITURE.

Ending December 1859.

		£.	s.	d.
Meat, lbs.....	46681	1032	19	9
Bread, loaves $4\frac{1}{4}$ lbs. each....	32505	{ 665	4	3
Flour, sts.	1120	{ 88	6	0
Butter, lbs.	2747	{ 124	17	9
Oatmeal, lbs.	8131	{ 63	7	3
Tea and Coffee, lbs.....	507	{ 97	0	8
Cheese, lbs.	8058	{ 185	10	3
Soap, Pearlash, Soda, and Blue, lbs.	14845	{ 142	17	10
Grocery		{ 191	10	11
Candles, lbs.	1249	{ 36	17	9
Coals, tons	348	{ 301	12	9
Wood, loads	18	{ 16	13	0
Medicines, Wine, and Spirits		{ 132	0	1
Table Beer and Porter.....		{ 397	6	0
Clothing and Linen		{ 731	2	3
Sundries		{ 135	2	4
Salaries and Wages		{ 1112	6	6
Tradesmen's Bills.....		{ 913	1	11
Total.....	£	6367	17	3

AN ACCOUNT OF DEBT OF COUNTY RATE,

From Michaelmas, 1858, to Michaelmas, 1859.

RECEIPTS.		PAYMENTS.	
	£. s. d.		£. s. d.
1858.		1859.	
Oct.	43 0 7	Jan. 6.	Interest on £3200 at 4½ per cent 72 0 0
1859.			Bonds discharged, Moor 200 0 0
Jan.	277 16 5		Treasurer 25 0 0
	<u>£ 320 17 0</u>		Balance in hand 23 17 0
			<u>£ 320 17 0</u>
February 28th. 1859. Laid before the Quarterly Meeting this day, audited and allowed.		FRED. G. DOUGHTY, <i>Chairman.</i>	
1859.		1859.	
March.	23 17 0	July.	Interest on £3,000. at 4½ per cent. 67 10 0
July.	277 16 5		Bond discharged, Nunn 100 0 0
	<u>£ 301 13 5</u>		Treasurer 25 0 0
			Balance 109 3 5
			<u>£ 301 13 5</u>
September 30th. 1859. Laid before the Quarterly Meeting this day, audited and allowed.		FRED. G. DOUGHTY, <i>Chairman.</i>	
J. H. BORTON, <i>Clerk of the Peace.</i>		HENRY PIZEY, <i>Clerk.</i>	
		GEORGE DURRANT, <i>Steward.</i>	