

Seventeenth annual report of the Suffolk Lunatic Asylum : December, 1854.

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SEVENTEENTH ANNUAL REPORT
OF THE
SUFFOLK LUNATIC ASYLUM.

~~~~~  
DECEMBER 1854.  
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Woodbridge:
PRINTED BY J. LODER.

1855.

Visiting Magistrates.

APLIN, R. ESQ.	GOOCH, SIR E. S. M.P.
ANDERSON, THOMAS, CLK.	GORTON, R. C. CLK.
ALDERSON, S. H. CLK.	HEIGHAM, J H. ESQ.
BENCE, H. B. ESQ.	HILL, C. CLK.
BEDINGFIELD, J. CLK.	IRELAND, T. J. ESQ.
BROOKE, F. C. ESQ.	KERRICH, JOHN, ESQ.
BERNERS, J. ESQ.	LOVE, E. M. CLK.
CHEVALLIER, B. ESQ. M.D.	OWEN, H. CLK.
CORRANCE, F. ESQ.	PRATT, JERMYN, CLK.
COLVILLE, WILLIAM, CLK.	ROWLEY, R. C. ESQ.
CASBORNE, W. J. S. CLK.	SHEPPARD, J. G. ESQ.
COOKE, J. T. CLK.	SCHREIBER, F. W. ESQ.
DOUGHTY, F. G. ESQ.	WALFORD, CHARLES, ESQ.
DE GREY, HON, AND REV. F.	WESTERN, T. B. ESQ.
	WILSON, H. ESQ.

Report.

It is with pleasure that we recur to our annual privilege of stating simply the condition and satisfactory progress of this Institution; though after so long a series of years, it is in particular details, rather than in any notices of a general character, that much variation can be expected. Still, those dictates of propriety and amelioration which are recognised by general consent, as rising into peculiar energy and exercise at these divisions of time, may be regarded as pausing for a reply to the enquiry, whether we are keeping pace with the actual demands, (to say nothing of the artificial requirements) of the age. It is to be feared that the latter are too often exalted almost into a level with the former, and that which is really conducive to the patient's welfare, is made in a measure subservient to circumstances which can only bear very indirectly upon it. It is not necessary to particularize those minute enquiries, which are being made a prominent part of Asylum investigation; the broad principle is, that all that elevates the *moral*, must aid in the treatment of the *physical*, and to this every other consideration must and will yield, when that

morbid desire for novelty which we see now dominant, dwindles away, and the undue exaltation of trifles ends. In order to substantiate this contrast with trifles, we need only venture the observation that Asylums are repositories of extraordinary realities; the aberrations even of the patients must be studied and treated as such; and there is also a large amount of knowledge especially relating to each one's particular trade, which is often undisturbed even by the prevailing disorder of the other functions of the mind. Insanity is in fact a deviation from reason, quite distinct from loss of knowledge.

	M.	F.	Total.
There have been admitted in the year—	34	47	81
Discharged—cured —	22	24	46
" relieved	3	2	5
Died —————	15	15	30

The admissions and the deaths have been fewer than usual, and the discharges *cured* more.

There has been no sickness throughout the year beyond that of the most ordinary occurrence; and it is a matter for thankful record, that in a season of great and peculiar mortality throughout the country, to which Asylums and such establishments must be from their nature particularly liable, we have been kept free from *infectious* or epidemic diseases. Every precaution was taken to guard against cholera. There was an old cesspool on the outside of the boundary wall on the men's side, which was occasionally offensive; it has been removed and carried down by extension of drainage, to the extremity of the Asylum lands on the side meadow. This we believe will form a precaution additionally valuable to those already taken against the inroads of *zymotic* diseases. As far as human power can be effective in prevention of cholera, or any prevailing epidemic, it is only by *combined* means of resistance that success may be obtained. It is of little use to contend with one defensive weapon against an unseen and mysterious enemy, whose advance is irresistible, and whose inroads are

made with the virulence of a death-mist, surrounding every particle of the atmospheric current. There must be a conjunction of defensive weapons used. Ordinary cleanliness is an insufficient guard, without warm clothing, generous diet, tonic treatment, the encouragement of cheerfulness, and the absence of fear.

Amongst our daily labourers are two suicidal melancholics, both re-admissions within the year, and both from very similar causes. Each of them went home well, the one to find his daughter just dead, of whose previous illness he had no knowledge; and the other to learn that his son whom he expected to find contentedly at work, had suddenly absconded from home only a few days before his return. Such events as these, are more than enough to shake stronger minds than theirs—a relapse in each case took place; but a short time after their re-admission, they joined their fellow labourers again, and they are now very actively engaged with twenty-two other patients with whom they had formerly worked, and so lately left, in the necessary preparations for the completion of the new laundry and wash-house. Seven rods of brick-work for these buildings have been finished in a workmanlike manner.

It is most desirable to encourage the out-door employment of suicides; it does not only tend to unravel those mazes of darkness and error in which the patient is involved, but removes that seeming suspicion which only keeps the wound open, and in itself adds to that already crushing pressure which too readily suggests the alternative of relief in the act. We have been much favoured of late years by the absence of suicides, and we can express with some confidence the opinion that betraying undue anxiety may lead to the very act which one would struggle to prevent. We have known very few instances which could have been prevented by *ordinary* care, while *extraordinary* watching may be in itself hazardous. A female with suicidal tendency, and the subject of a *good deal*

of discourse about it, was admitted a short time back—if an *apparent* interference had been used to prevent it, she would in the dislike of being watched, very probably have accomplished her object. The subject was never mentioned to her, and the cautious oversight resorted to, was unseen and unknown to her. And to this absence of intrusion both by word or deed, she owes in all probability, her perfect restoration. There must be *constant watchfulness* and care of course, but that should be adopted in a manner very cautious and very unobtrusive. None but those who are constantly associated with such patients, can tell what a source of mental anxiety they prove; and whenever the act does take place, as it will indeed sometimes notwithstanding the most vigilant oversight, whether in a single room or in an associated dormitory, there should be that indulgent consideration which the peculiarly harassing position of the attendant demands. It is only due to our own servants, to state their continued anxiety on this point; and to it may be attributed that exemption which of late years we have enjoyed.

A patient whose determined propensity to suicide was detailed last year, has since left the Asylum well. “Considering,” says the able Editor of one of the most valuable of our Journals,* “the degree of indulgence and liberty extended towards the insane, in all well conducted Asylums, as well as the cunning, ingenuity, and cleverness, frequently manifested by such patients, we are astonished that accidents of this kind do not more frequently occur.” We question very much if even a night watch really affords any additional security.

Amongst the discharged patients this year, there has been one of special interest, from the unfavourable prognosis which we were led to form on his admission, and the gratifying results which most unexpectedly followed.

* The Psychological Journal.

A. B., Æt. 53, was admitted in May, suffering from acute mania, under a very aggravated form. He had been somewhat of an irregular liver, and the immediate cause of his attack was alleged to be intemperance. He was a strong powerful man, acting with great violence, talking rapidly, making the most extravagant demands on the attendants, and threatening their lives if his wishes were not immediately complied with. He made several attempts to injure others, and to destroy himself; and it required the most constant vigilance to escape the one, and to prevent the other. For three months he continued with slight intermissions extremely violent, during which time he was ceaselessly watched, soothed by every possible means, and had large doses of anodynes administered with variable effect. In August he began to shew symptoms of depression, consequent on his long maniacal excitement, and notwithstanding a liberal allowance of wine, porter, &c. &c. his appetite failed, and his depression increased. An abscess formed beneath the flexor tendons of the fore finger, which produced sloughing, and the whole of the first joint of the finger ulcerated. He also suffered from retention from calculus, and required the use of the catheter twice a day. Under this combination of ills, he appeared rapidly sinking, but by dint of *care*, watching, and the administration of stimulants in food and drink, in the beginning of October, to the surprise of every one, he rallied, the slough separated from the finger, healthy granulations sprang up, and his general health very slowly improved. He continued to progress very satisfactorily till the spring, when a slight relapse took place, from which however, he very soon recovered, under stimulants and tonic diet, and after the completed establishment of his health, by air, and exercise beyond the garden, he left the Asylum in September, WELL; and he remains a truly grateful and most interesting correspondent.

A large majority of the patients have been employed throughout the year; the work they have completed has been as much or perhaps more than in any previous years. They commenced their labours by removing the partition walls of several of the single bedded rooms on the third story of the building, and converting them into an open dormitory, now holding eighteen female patients. This relieved the inconvenience under which we laboured in this department at the beginning of the year, and was an advance in that course of alteration, (if not of improvement) to which it seems necessary to yield. Our preference however is still given to single rooms, most of the patients select them if the offer is proposed; and though this alteration *has* been and may be made additionally advantageous in the upper story, where the rooms are close and confined as being built in the roof, it will never be advisable to extend it to other parts of the building. They then proceeded to remove an old unsightly wall on the female side, and with the bricks thus obtained they constructed an additional building for winter stores, and a very complete larder, the want of which we had long felt.

✱ It cannot, we trust, be necessary to recur to the treatment of the patients by *non-restraint*. The subject from untoward urgency has become so thoroughly "flat, stale, and unprofitable," that we would only repeat, without enlargement, that from a very short period subsequent to the opening of the Asylum in 1829, it has been unequivocally and universally carried out.

It may appear strange to those who have not witnessed it, to observe those happy effects that mutual co-operation in labour really produces. There are very few patients who will work well alone; they join others, and fall in with others, in their own individual engagements, with the knowledge that it is to promote the common interests and comforts of the whole:

indeed the House presents the features of a large partnership concern, though free from that legal responsibility which makes one member amenable for the defaults of another.

One patient, a *Carpenter*, has been employed throughout the year with scarcely a day's interruption. His work in general repairs has been unceasing. He has fitted up a convenient room for the clerk, converted a great many old forms into comfortable settees, and new panelled many of the doors with perforated zinc. We have lately substituted *glass* for some of the old door panels which affords a very cheerful pleasing appearance: and although we have introduced it into the most refractory wards, we have only had three panes broken throughout the year, affording a very *clear* proof that within proper limits the more latitude the less danger.

A *Painter* for a great part of the year has been busy, beginning early in the morning and going on till night, working with his paint brush in one hand and his candle in the other. This patient commenced his work while he was under treatment, and continued it after his discharge; he was very tenacious of his own capabilities, and would work unaided by the rest. He went over an enormous quantity of painting in the body of the House, by measurement 600 square yards, with three coats of paint, and 300 additional grained and varnished.

An inventive *Joiner* whose ingenuity was noticed by the Commissioners in Lunacy at their last visit, is still at work, copying antique models from the Illustrated London News, and the specimens on the table are a sample of his powers.*

The case of a *Shoemaker* was so unfavourable in expectation, and so satisfactory in its results as to warrant a special reference.

J. S.—Æt. 38 years. Shoe-maker. Both parents living and in good health. Is married and has had two children,

* A few articles were shewn at the moment.

both of which are dead. After the death of his second child (two years ago) he was for several weeks very much depressed, but recovered under ordinary medical treatment. He has since had a great deal of domestic trial, his wife having almost constant ill health, and he himself having been out of employment thirteen weeks, in consequence of thecal abscesses, through which he has permanently lost the use of two fingers. About two months before his admission, his temper became very variable, and he frequently destroyed his work as soon as he had completed it. He consequently lost his employment and was removed to the workhouse, where he speedily became morose, sullen, and excessively dirty in his habits. He was admitted in April, in such a state of debility that it was necessary to *carry* him into the House. This case was one apparently of hopeless dementia. He remained in a very weak and feeble state till the middle of August, when he began to shew signs of re-action, which were by every means encouraged, and from this time he steadily improved, though for nearly four months after his admission, he was in such a wretched condition, that no hope was entertained of his recovery. The treatment consisted of Ether washes applied frequently over the head and chest, with Bark and Ammonia internally. As soon as he began to improve, he was encouraged to join in the out-door amusements of the patients, from which he derived much benefit. When he had sufficiently recovered his strength, he was at his own request allowed to work in the shoe-makers' shop, where for two months he was regularly employed, the only difficulty being to prevent his over exerting himself. At the end of this time he left us, thoroughly re-established in mental and bodily health, and exceedingly grateful.

With these few exceptions almost all work together; it is not isolated dull drudgery, but active, cheerful, and mutual co-operation, which produces such gratifying results.

When to this retrospective summary is added the ordinary and constantly required husbandry, regular hay-making, farming and gardening, as in previous years, it will be seen that no trifling amount of work has been done, or of money saved by it to the County. It is not however, in the quantity of labour done, but in the motives which actuate these patients in doing it, that the great value consists. *Motive* is always the test of action. It is true that they obtain additional comforts, but these rewards are honest earnings, not extra stimulants to industry; and independently of their influence altogether we can point to their works as most disinterested labour; it is never compulsory, it is never for pay; the willing mind is apparent enough in the promptitude and energy of their bodily exertions.

All functions of the system should have their fair proportion of exercise; none should be overworked either in the individual or in the mass, either in the body or in the mind. It has been remarked by Drs. Arnold and Pinel that most mathematicians and philosophers have not only lived to an advanced age, but that they have enjoyed good health, and have been exempt from mental diseases. Perhaps the number of such men vouchsafed to the world, has been too inconsiderable to enable us to form any correct estimate between them and the rest of mankind; yet reason alone would proclaim the probability of its truth, and medical statistics furnish us with facts which tend to confirm it. Certain it is that nothing conduces to health, equal to a mind preserved in a state of intellectual calmness; and this equilibrium is a necessary attainment, for all those especially who have to act as responsible agents in the cure of others, who from whatever cause may have had the correct balance disturbed. To exercise the heart by reciprocal affection, the conscience by corrected thoughts, and the body by labour

according to its strength, is the highest object of attainment. To do this in a right manner, and in due proportion, is the whole science of physiology, as applicable to health. For want of this, the mind is thrown into a distracted state, destructive of its own peace, and of those social and domestic bands which bind family to family, and man to man. All that can be said on the art of preservation of, or restoration to, mental sanity, is included in this principle of conjunction; and as we never can separate the corporeal from the mental, so neither can we dissever the secular from the spiritual: there need be no such thing in any sense, as profitless occupation. "In all labour there is profit." Every employment may be made to bear a sacred character, and every honest pursuit tend in its measure to christianize the mind of that man that follows it.

JOHN KIRKMAN, M.D.

Appendix.

No. 1.

PATIENTS ADMITTED, DISCHARGED, AND DIED,

From 1st. of January to 31st. December, 1854.

	Males.	Females	Total.
Patients in the House 31st. December, 1853	117	144	261
Admitted in 1854	34	47	81
	151	191	342
	Males.	Females.	Total.
Discharged—cured ..	22	24	46
————— relieved	3	2	5
Died	15	15	30
	40	41	81
Remaining in the House 31st. December, 1854.....	111	150	261

No. 2.

ASCERTAINED AND SUPPOSED CAUSES OF IN-
SANITY IN THE 81 PATIENTS ADMITTED
DURING THE YEAR 1854.

	Males.	Females.	Total.
Destitution	2	3	5
Death of Wife	1		1
„ Children		3	3
Disappointed Affections.....		3	3
Epilepsy	4	2	6
Fright		1	1
Hereditary	6	10	16
Hæmoptysis	2		2
Husband's Misconduct		1	1
Idiocy (Congenital)	1	3	4
Injury to Head	3		3
Intemperance	4	1	5
Mental Anxiety	2	5	7
Reverses of Fortune	3	1	4
Religious Excitement	1	3	4
Solitary Confinement	1		1
Typhus Fever.....		1	1
Unknown	4	10	14
Total.....	34	47	81

TABLE OF ADMISSIONS, DISCHARGES, AND DEATH.

In the whole Twenty-six Years since the Asylum opened.

Years.	MALES.				FEMALES.				TOTAL.				In the House at the end of each year.				
	Discharged.			Admitted.	Discharged.			Admitted.	Discharged.			Escaped.	Total.				
	Cured.	Relieved.	Total.		Cured.	Relieved.	Total.		Cured.	Relieved.	Total.						
1829	72	11			70	9	2	11	4	142	20	2	22	15	50	55	105
1830	48	12	9	21	11	34	12	3	15	7	82	24	12	36	66	67	133
1831	42	8	4	12	16	45	19	3	22	10	87	27	7	34	80	80	160
1832	42	21	4	25	17	25	20	2	22	8	67	41	6	47	78	73	151
1833	34	18	4	22	14	1	31	14	5	19	8	65	32	9	75	79	154
1834	38	16	7	23	9	32	18	5	23	8	64	34	12	46	75	80	155
1835	39	18	9	27	8	40	15	8	23	6	79	33	17	50	79	91	170
1836	30	11	13	24	7	26	11	16	27	9	56	32	29	51	78	81	159
1837	30	13	5	18	11	46	17	1	18	16	76	30	6	36	79	93	172
1838	35	16	2	18	13	1	31	21	2	23	7	66	37	4	82	94	176
1839	29	15	5	20	10	53	27	9	36	13	62	42	14	56	80	105	185
1840	31	14	1	15	7	38	23	3	26	6	89	37	4	41	89	104	193
1841	35	16	2	18	13	29	16	1	17	9	64	32	3	35	93	107	200
1842	27	10	2	12	10	34	14	2	16	11	61	24	4	28	98	114	212
1843	53	9	6	15	13	34	17	5	22	16	67	26	11	37	103	110	213
1844	36	19	2	21	3	30	13	9	30	13	62	32	2	34	109	115	224
1845	42	22	3	25	13	1	40	16	1	16	12	82	38	3	112	127	239
1846	37	19	1	19	16	44	16	4	25	15	81	43	1	44	114	131	245
1847	44	16	1	17	24	1	42	13	2	15	84	29	3	32	116	134	250
1848	31	13	1	13	11	51	26	2	28	18	82	39	2	41	123	139	262
1849	27	10	11	21	9	55	34	5	39	21	82	44	16	60	119	134	253
1850	36	21	4	25	17	47	29	1	30	14	83	50	5	55	113	137	250
1851	36	23	3	28	20	55	26	6	32	14	91	51	9	60	101	143	244
1852	51	22	2	24	17	47	22	8	36	13	98	50	10	60	111	144	255
1853	49	22	2	24	19	44	20	7	27	17	93	42	9	51	117	144	261
1854	34	22	3	25	15	47	24	2	26	15	81	46	5	51	111	150	261
Total.	982	419	104	523	335	8	1070	456	101	607	310	2052	925	205	1130	651	8

No. 5.

TABLE SHEWING THE NUMBER OF MONTHLY ADMISSIONS

Through the Twenty-six Years since the Asylum opened, with a Total of each Twelve Months, ending 31st. December, 1854.

Years.	1829.	1830.	1831.	1832.	1833.	1834.	1835.	1836.	1837.	1838.	1839.	1840.	1841.	1842.	1843.	1844.	1845.	1846.	1847.	1848.	1849.	1850.	1851.	1852.	1853.	1854.	TOTAL.																																																						
Mons.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.																																																			
Jan.	26	39	65	4	10	14	3	13	16	1	6	7	1	4	5	1	7	8	4	4	8	5	5	10	4	4	8	104	115	219																																																			
Feb.	5	8	13	4	7	11	4	7	11	1	8	9	1	8	9	1	8	9	4	4	8	5	5	10	4	4	8	65	77	142																																																			
Mar.	4	3	7	5	3	8	4	7	11	1	8	9	1	8	9	1	8	9	4	4	8	5	5	10	4	4	8	71	77	148																																																			
April	8	6	14	5	3	8	4	7	11	1	8	9	1	8	9	1	8	9	4	4	8	5	5	10	4	4	8	102	112	214																																																			
May	3	3	6	4	2	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	104	75	179																																																			
June	8	3	11	5	5	10	1	3	4	5	3	3	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	95	92	187																																																			
July	3	1	4	9	1	10	4	6	10	3	3	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	10	4	14	151																																																			
Aug.	3	5	8	5	1	6	7	7	14	4	6	10	1	3	4	5	3	3	6	1	3	4	5	3	3	6	10	4	14	151																																																			
Sep.	4	2	6	4	3	7	4	1	5	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	1	3	4	11	5	16																																																			
Oct.	5	7	12	1	5	6	2	8	10	3	3	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	10	4	14	151																																																			
Nov.	1	1	2	3	3	6	3	3	6	3	3	6	1	3	4	5	3	3	6	1	3	4	5	3	3	6	10	4	14	151																																																			
Dec.	2	3	5	3	4	7	5	5	10	7	7	14	1	3	4	5	3	3	6	1	3	4	5	3	3	6	10	4	14	151																																																			
	72	70	142	48	34	82	42	45	87	42	25	67	34	31	65	32	32	64	39	40	79	30	26	56	30	46	76	35	31	66	29	53	82	31	38	69	35	29	64	27	34	61	33	34	67	36	30	66	42	40	82	37	44	81	44	42	86	31	51	82	27	55	82	36	47	83	36	55	91	51	47	98	49	44	93	34	47	81	983	1069	2052

No. 6.

OCCUPATIONS OF THE 81 PATIENTS ADMITTED
IN THE YEAR 1854.

	Males.	Females.	Total.
Agricultural Labourers	9		9
„ Labourers' Wives.....		18	18
„ Labourers' Son	1		1
„ Labourers' Daughters		9	9
„ Labourers' Widows ..		6	6
Blacksmith	1		1
Bricklayers	3		3
„ Wife.....		1	1
Butcher	1		1
Carpenter's Wife		1	1
Chimney-sweep	1		1
Domestic Servants.....	1	5	6
Drayman's Wife.....		1	1
Gardener's Wife.....		1	1
Hawker	1		1
Infirmity Nurse		1	1
Jobber.....	1		1
Malsters	2		2
Millwright	1		1
Pensioner	1		1
Pilot	1		1
Policeman's Wife		1	1
Rag Packer	1		1
Ropemaker's Wife.....		1	1
Shoemakers	2		2
„ Wife		1	1
Shopkeepers	1	1	2
Tanner	1		1
Tailor	1		1
Watchmaker	1		1
Woodman	1		1
None	2		1
Total.....	34	47	81

*No. 7.*RELIGIOUS DENOMINATION OF THE 81 PATIENTS
ADMITTED 1854.

	Males.	Females.	Total.
Church of England	24	35	59
Protestant Dissenters	3	4	7
Independents	1	2	3
Baptists	2	1	3
Wesleyan Methodists	1	1	2
Unknown	3	4	7
Total	34	47	81

*No. 8.*DEGREE OF EDUCATION OF THE 81 PATIENTS
ADMITTED 1854.

	Males.	Females.	Total.
Able to Read and Write	20	20	40
„ Read only	10	16	26
Unable to Read	4	11	15
Total	34	47	81

No. 9.

FROM THE 81 PATIENTS ADMITTED IN 1854.

	Males.	Females.	Total.
Discharged, cured.....	12	16	28
„ relieved.....	2	2	4
Died	2	4	6
Total.....	16	22	38

No. 10.

DOMESTIC CONDITION OF THE 81 PATIENTS
ADMITTED 1854.

	Males.	Females.	Total.
Married	13	25	38
Single	13	15	28
Widowed	8	7	15
Total.....	34	47	81

No. 11.

AGES OF PATIENTS ON ADMISSION IN 1854.

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.	TOTAL.
4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	4	3	7	11	5	12	5	5	10	7	2	7	1	2	81

AGES OF PATIENTS DIED IN 1854.

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.	TOTAL.
—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	0	0	2	2	4	1	2	1	0	6	3	2	15	15	30

No. 12.

TABLE EXHIBITING THE CAUSES OF DEATH, FORM OF INSANITY, DURATION OF THE MENTAL MALADY, AND PERIODS OF RESIDENCE IN THE ASYLUM, IN THE CASES WHICH TERMINATED FATALLY DURING THE YEAR 1854.

No.	Age.	Sex.	Cause of Death.	Period of Residence in the Asylum.			Total Duration of Insanity.			Form of Insanity.
				Yrs.	Mos.	Dys.	Yrs.	Mos.	Dys.	
1	33	M.	General Debility ~~~~~	8	4	0	5	4	0	Imbecility
2	52	M.	Phthisis Pulmonalis ~~~~~		5	0	2	0	0	Melancholia
3	42	M.	Paralysis ~~~~~	1	0	14	1	2	14	Mania
4	66	F.	General Visceral Disease ~~~~~		4	0		10	0	Mania
5	80	F.	Old Age ~~~~~	22	2	0	40	2	0	Mania
6	32	M.	Phthisis Pulmonalis ~~~~~	5	7	0	7	1	0	Melancholia
7	35	F.	Gradual Exhaustion ~~~~~	6	2	0	18	2	0	Mania
8	40	F.	Maniacal Exhaustion ~~~~~		6	0		7	0	Mania
9	44	M.	Apoplexy ~~~~~	1	1	0	1	10	0	Mania
10	36	M.	Phthisis Pulmonalis ~~~~~	6	2	0	14	2	0	Mania
11	29	M.	Diseased Lungs ~~~~~	5	0	0	10	0	0	Mania
12	30	M.	Chorea ~~~~~		11	0		11	7	Imbecility
13	40	M.	Maniacal Exhaustion ~~~~~	6	4	0	7	4	0	Mania
14	23	F.	Phthisis Pulmonalis ~~~~~	5	9	0	6	3	0	Mania
15	80	M.	Senile Exhaustion ~~~~~	2	4	0	3	2	0	Senile Imbecility
16	62	F.	Gradual Exhaustion ~~~~~	10	11	0	11	0	7	Melancholia
17	75	F.	Senile Infirmary ~~~~~	5	8	0	6	2	0	Senile Imbecility
18	84	M.	Senile Infirmary ~~~~~		3	0	10	3	0	Senile Imbecility
19	36	F.	General Visceral Disease ~~~~~	1	5	0	1	8	0	Mania
20	48	M.	Gradual Exhaustion ~~~~~	2	9	0	2	9	21	Mania
21	68	F.	Schirrous of the Stomach ~~~~~	25	9	0	34	9	0	Mania
22	22	M.	Epilepsy ~~~~~		11	0	10	11	0	Imbecility Epilepsy
23	36	F.	Paralysis ~~~~~		1	9	2	1	9	Mania
24	64	F.	Gradual Exhaustion ~~~~~		6	14	1	4	14	Mania
25	50	M.	Gradual Exhaustion ~~~~~		7	9		10	9	Dementia
26	67	F.	General Debility ~~~~~		1	4		5	4	Melancholia
27	78	M.	Senile Infirmary ~~~~~	15	11	0	15	11	21	Mania
28	59	F.	Cardiac Disease ~~~~~	9	3	14	14	3	14	Mania
29	25	F.	Gradual Exhaustion ~~~~~	2	6	18	5	6	18	Imbecility
30	67	F.	Paralysis ~~~~~		11	2	1	1	23	Mania

No. 13.
DIET TABLE OF THE SUFFOLK LUNATIC ASYLUM.
December 31, 1854.

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 Tea. 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 sub-division.

No. 14.

FARM AND GARDEN ACCOUNT,

For the year 1854.

Dr.		1854.		Cr.	
1854.		£.	s. d.	£.	s. d.
Jan.	1. To Live and Dead Farming Stock, valued at.....	138	9 0	By Amount of Produce supplied to the Asylum, viz.— Milk, Butter, Pork, Potatoes, and other Vegetables, valued at wholesale prices Cash received for old Cow and Calf	
Dec.	31. Paid for Labour.....	35	0 0		
	Rates and Taxes	8	19 5		
	Tithes	8	13 6		
	Paid for Cow	14	10 0		
	Paid for Corn, Meal, and sundry expenses.....	46	1 2		
	Estimated Rent of 25 Acres of Land	58	10 0		
	Balance	39	3 5		
				at	
				50 Sacks Potatoes	
				1 Acre of Vegetables on the Land.....	
				6 Coombs Winter Beans....	
				10 Bushels Parsnips and 9 Bushels Onions	
				£ 349 6 6	

No. 15.

CONTRACT PRICES,

For the year ending 31st. December, 1854.

	1st Quarter.		2nd. Quarter.		3rd. Quarter.		4th. Quarter.	
	s.	d.	s.	d.	s.	d.	s.	d.
Beef, good Steer, by side cwt.	47	0	47	6	64	4	52	0
Wether Mutton, by side or carcase lb.		6 $\frac{1}{2}$		7		7		7
Bread, per loaf, 4lb. 4oz. 18 hours baked		8		9 $\frac{3}{4}$		8 $\frac{1}{2}$		6 $\frac{1}{4}$
Flour, seconds sack	55	0	63	0	55	0	40	0
Malt coomb.	33	0	33	0	37	0	37	0
Hops cwt.	252	0	196	0	196	0	196	0
Sugar, loaf lb.		5		5		5		0 5
„ good soft cwt.	30	0	30	0	32	0	32	0
Molasses or Treacle, cwt.	16	0	16	0	16	0	16	0
Vinegar gallon	1	6	1	6	1	6	1	6
Soap, good cwt.	36	0	36	0	36	0	36	0
„ soft, firkin 64lbs. net	14	0	14	0	14	0	15	0
Cheese, Edam cwt.	50	0	54	0	52	0	40	0
Groats cwt.	18	0	18	0	20	0	18	0
Peas, boilers bushel	7	0	7	6	7	6	5	6
Butter firkin 56lbs. net	53	0	50	0	46	0	52	0
Tobacco, shag lb.	3	2	3	2	3	3	3	3
Snuff, Scotch lb.	3	2	3	2	3	2	3	2
Candles dozen	6	6	6	6	6	6	7	6
Pearl Ash cwt.	30	0	30	0	31	0	31	0
Pepper lb.	11		1	0	1	0	1	0
Mustard lb.	6		6		6		6	
Carolina Rice cwt.	20	0	20	0	20	0	20	0
Wheat Straw in Trusses cwt.	2	6	2	6	2	6	2	3
Coals, best Newcastle, ton	17	0	17	0	21	0	21	0
„ Blyth ton	16	0	16	0	20	0	20	0
Welsh Stone ton	24	0	24	0	24	0	24	0
Cinders chal.	16	0	16	0	16	0	16	0

No. 16.

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

No. 17.

HEADS OF EXPENDITURE.

Ending December 1854.

		£.	s.	d.
Meat, lbs.	38381	935	18	7
Bread, loaves $4\frac{3}{4}$ lbs. each.	30996	1055	16	11
Flour, sts.	960	129	3	0
Butter, lbs.	3180	138	2	0
Oatmeal, lbs.	5030	42	11	6
Tea, lbs.	471	96	13	11
Cheese, lbs.	8428	206	11	11
Soap, Pearlash, Starch, and Blue, lbs.	9587	135	0	2
Grocery		188	10	7
Candles, lbs.	1425	49	2	5
Coals, tons	330	302	9	0
Wood, loads	24	24	0	0
Medicines, Wine, and Spirits		92	18	4
Table Beer and Porter.		470	9	0
Clothing and Linen		570	13	8
Sundries		131	8	11
Salaries and Wages.		1093	7	2
Total.	£	5662	17	1

GEORGE DURRANT, *Steward.*HENRY PIZEY, *Clerk.*