

# **The twenty-sixth report of the director of the West-Riding of York Pauper Lunatic Asylum.**

## **Contributors**

West Riding Pauper Lunatic Asylum.  
Corsellis, C. C.

## **Publication/Creation**

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THE TWENTY-SIXTH

R E P O R T

OF THE DIRECTOR

OF THE

WEST-RIDING OF YORK

P A U P E R

LUNATIC ASYLUM.

For 1844

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Wakefield :

ROWLAND HURST, PRINTER, CORN-MARKET.

—  
1845.

R E P O R T

REPORT OF THE DIRECTOR

Tax statistics of the past year present no important variation from those of the preceding, except that from the crowded state of the house many applications for admission were necessarily been refused. Whilst urging the necessity of early application, that the insurance on the first manifestation of the disease, secures the benefit of suitable treatment, it is greatly to be regretted that waters than commended to persons suffering from such a tendency occur. This necessity admits of no delay, and the early and judicious treatment shall be completed. A

Five patients whose throats were in a dangerous condition, which excluded them, in some measure, to relieve the pain, by conducting a series of the water. This has been directed to take from the throat, which is a most valuable remedy. The water is very useful in the treatment of the throat, and must be repeated every day, and the amount of the water should be increased as the throat improves. This report agrees with other wisdom or humanity.

Amongst the labouring classes are thousands of families who by industry and frugality maintain themselves just above poverty, and who, if a relative be afflicted with insanity, may, by self sacrifice, be enabled to pay a portion, or even the whole of the annual charges for maintenance of the Asylum, but when finances with every exertion they can make are quite insufficient to afford the cost of maintenance in the lowest private Asylum.

It is ROWLAND NURSE, M.D. who writes this report. Let not the legislative enactment in making provision for the insane—medical, moral and pecuniary—parents alone be left to be employed within the purview of the Asylum. There are at this

## REPORT.

THE statistics of the past year present no important variation from those of the preceding, except that from the crowded state of the house, many applications for admission have unavoidably been refused.

Whilst urging the necessity of early application, that the insane may, on the first manifestation of the disease, receive the benefit of suitable treatment, it is greatly to be regretted that we are often compelled to postpone receiving them until a vacancy occurs. This necessity admits of no remedy until the projected enlargement shall be completed. A detached building, adapted for the reception of epileptic and idiotic patients, is in progress; a covered way connecting it with the Asylum, will bring both buildings under the supervision of the same executive staff, a means of more perfect classification will be afforded, and great benefit will arise from the abstraction of such cases as present no reasonable prospect of more than alleviation, from those of a nature more hopeful as to ultimate cure.

Five patients whose friends were in circumstances which enabled them, in some measure, to relieve the parish, by contributing a part of the weekly charge, have been discharged, to make room for others wholly dependent on parish relief. The necessity which places the industrious poor in a worse situation than their improvident neighbours, must be regarded as an evil, and the "rigour of the law" does not in this respect, appear consistent with either wisdom or humanity.

Amongst the labouring classes are thousands of families, who by industry and frugality maintain themselves just above pauperism, and who, if a relative be afflicted with insanity, may, by self sacrifice, contrive to pay a portion, or even the whole of the amount charged for maintenance in this Asylum, but whose finances, with every exertion they can make, are quite insufficient to afford the cost of maintenance in the lowest private Asylums.

In a letter addressed to the Magistrates of a distant county, the writer says,—“Let not the legislature suppose that in making provision for the insane—medical, moral and pecuniary—paupers alone ought to be embraced within the purview of its compassion. There are at this

and *dejected*, then it is that solace has been sought from a source which in the mind's health had been neglected, and as religion abstractedly, has no more beneficial influence on insanity, than on gout or fever, the delusion arising from functional disturbance of the brain, merely assumes a religious form. After recovery the most valuable information may be obtained from the patients themselves.

A restoration to health inspires gratitude and cheerfulness, and induces candour and confidence. We generally find the first symptom is loss of sleep, experienced weeks, perhaps months before an idea of insanity is entertained, either by the patient or his friends. This sleeplessness is accompanied by a morbid restlessness, or irritability of manner, which, as it increases, is too often treated by means the most absurd and contradictory.

If on the first complaints of loss of sleep, a course of soothing sympathizing treatment were adopted by the patient's friends, with the moderate use of anodynes, regular hours, and nutritive, but not stimulating diet, instead of the change from place to place, opposition in trifles, and reproof for deviations from ordinary conduct, many attacks of mental alienation might be prevented, and thus many inmates consigned to these Institutions for life, might have continued to fill their stations in society.

Parents who have themselves been the subjects of insanity, or who are conscious of an hereditary tendency, would do well in the education of their children, to avoid excessive exercise of the mental powers; to choose, when possible, those situations least subject to the vicissitudes of life, to cultivate the physical and moral, rather than the mental faculties, in fact, to warn the young that there is such a disease as insanity, and that by care, even with the strongest hereditary taint, it may be averted.

Tranquillity at night, and improved and refreshing sleep, are amongst the first symptoms of convalescence; it is to obtain these that sedatives and those parts of the house least subject to disturbance, are employed. At first the sleep is short, and disturbed by dreams, but as convalescence progresses, sleep becomes sound and natural.

Dormitories, except for idiotic, epileptic, and chronic cases, are not desirable; in a pecuniary point of view, they effect a material saving in the cost of building, by diminishing the number of small separate rooms, but the wakeful habits of the insane require the use of every means conducive to repose. They are not often at the same time sleepless and silent—one talks—another sings—a third swears, and though none of these may be in a very loud tone, but more after the manner of wakeful wayward children, yet one of them, only, is sufficient to deprive all in the same room of sleep.

In a large Lunatic Asylum, some patients may be selected, who can be placed in dormitories without creating disturbance ; but minute enquiry as to their state, and a suitable care for their comfort, shows that dormitories should be the *exception*, not *the rule*. They are economical as regards the county funds, but in promoting cure can never be regarded as auxiliary, and should, therefore, be sparingly employed. Neither are they always a preventive of suicide, as a case which occurred many years since, in this Institution, may tend to prove.

J. S., a middle-aged respectable female, occupied a bed in a dormitory containing twelve patients ; after midnight they were alarmed by hearing an unusual noise made by J. S., and supposing her to be in a fit, one of them aroused the nurse, who found the patient weltering in blood, with her throat severely cut. No knife, or any sharp instrument could be found ; the Director and Matron were immediately summoned, when it was ascertained that she had not only made a large opening into the windpipe, through which the noise made by the passing of the air to and from the lungs, had alarmed the other patients, but she had also attempted to open the abdomen, and to divide one of the large veins of the left arm. The wound in the throat was examined and dressed ; but she endeavoured to conceal the abdominal wound, hoping to effect self-destruction by letting out the intestines. Finding no chance of success, she confessed the whole of her plan. The day before, one of the patients had broken a pane of glass, parts of which had fallen into the airing court, these she found and concealed about her person, and commenced after she had got to bed, about eight o'clock ; thus, she must have been occupied, at least, four hours, in the work of self mutilation. Notwithstanding the slight hope that was left of preserving life, she perfectly recovered ; and, a few months since, accidentally meeting the Director, made herself known to him, and with many expressions of thankfulness for having saved her life, said, " she often thought what a deal of trouble she gave, but hoped they would all forgive her."

Crowding together large numbers in our day rooms, brings the patients too closely in contact with each other, and is attended with a bustle, very much the reverse of beneficial ; but the sleeping in crowded rooms is even worse, and neutralizes to a greater or less extent, the soothing tranquillizing treatment now generally adopted.

Eighty-nine patients have been discharged the past year ; seventy-five as cured, fourteen relieved.

Some have quitted the Asylum with apparently more regret than pleasure, and to a few the necessity of " trying the world once more," has required to be urged upon them with perseverance and decision.

A more common symptom of morbid feeling, is found in an excessive anxiety for liberation, urged, it may be, without visible manifestations of disordered intellect; the close observer knows the dangerous propensity or incurable disease of the patient, but the casual and uninformed spectator, is sometimes almost persuaded, that an individual who can *speak so rationally*, must be improperly detained. From this cause alone, an injudicious visitor, may (even when actuated by benevolent motives) effect extensive mischief in these Institutions. The patient, who, though he admits the insanity of all around him, rejoices in his own happy exemption, and is indignant at the supposed injustice of his detention, may contrive to deceive an imprudent or inexperienced visitor, but he sustains a most injurious confirmation of his delusions, by finding a listener believes him sane. The most clamorous advocates of liberty, rank, in a Lunatic Asylum, amongst those least fitted to enjoy it, with safety to themselves or others. There are, in all such establishments, some who, although the subjects of confirmed disease, and actuated by dangerous propensities, are yet, by their freedom from the business and cares of the world, and by treatment adapted to their condition, kept in a state of comparative serenity and comfort; to such, a too sympathizing visitor may do an irreparable injury.

On the visits of the "Commissioners in Lunacy," the advantages of the tact acquired by experience in mixing with the insane, were particularly observed. An absence of all official ostentation and parade, their unexpected arrival, and the easy quiet manner in which they examined each patient, were so managed, that an inspection of many hours produced no more excitement, and little more curiosity, in the Institution, than the ordinary visits of its appointed officers.

The supposition that large meetings for the transaction of business, held within the precincts of the establishment, and, therefore, open in a great measure to the observation of a large number of patients, are unattended with disadvantage, is a serious error; such assemblies produce more or less disturbance, an undefined sensation of "something going on" prevails. Some patients expect liberation, others fear it, and almost all are anticipating something, they know not what; hence a night of sleeplessness and noise frequently ensues.

An observation of the real state of the Institution, is better and more correctly obtained, by visits unannounced and unexpected, and, therefore, such as preclude the possibility of any preparation. It is, however, not so much the frequency or manner of the visitations to which these houses are subject, that should be matter of enquiry, as the amount of *good* done by them. Improper visitation, may be fully as injurious, as the neglect of it.

In this Institution, Sunday has always been observed as a day of rest, visits of all kinds have, as far as possible, been discountenanced; in the case of patients labouring under serious illness, who may be visited by relatives, or any peculiar circumstances by which the visits of friends at other times are rendered impossible, an exception has been made: but as little deviation from the ordinary observances of life, as is consistent with the welfare of the Insane, ought to be observed in a Lunatic Asylum.

The argument used by the Commissioners, in favour of Sunday visits, "that unless they are allowed, many poor people from their daily avocations, are prevented from seeing their insane relatives," has in it more apparent, than real force. There are many holidays in the course of the year, of which the working classes avail themselves to come to the Asylum. Mondays also, and a great part of Saturdays, are days of leisure to a considerable portion; and the parties of curious relatives and friends, who throng the waiting rooms of the Institution on the great festivals are a too sure indication, of the holiday making, and sight seeing which would inevitably result from opening the doors of an Asylum on Sundays. The facilities now afforded by railroads still further diminish the necessity for Sunday travelling: and we look upon such an arrangement as would encourage visits or journies on that day, as altogether subversive of the sacred rest, and perverting the sacred duties in which the patients are so beneficially employed on that day.

A greater tranquillity pervades the wards throughout the whole of Sunday; the patients during the intervals of public worship, may be seen dressed in their neatest manner, sitting in groups conversing with each other, or listening to one of their number who is reading the Bible. In the evening they frequently sing in concert, or discuss according to their several powers of understanding, the subject of the Sermons they have heard.

The employment of mild mechanical restraint, in cases which, from their violence, would have required the force of many attendants, and also others, in which treatment rendered the recumbent posture essential, have been followed by the most salutary results. Some effort is required to perform an act of duty to the patients, which subjects a responsible individual to unworthy suspicion, or unfounded prejudice, but so long as it is an act of duty, it must be performed, and to time must be left the vindication of those, who are conscious, that what they have done, and are doing, is right. It is not uncommon to hear of patients who, having been violent, and for a long period used to restraint, have by its removal become quiet, and useful; these may be instances,



not of the use, but the abuse of restraint; but close enquiry, would very probably afford another explanation, namely, that the removal of restraint, has been not cause, but effect; that the symptoms of disease have assumed a mild form, thereby rendering restraint useless.

Occupation, whether as labour or recreation, will materially diminish the necessity for restraint, whenever it can be employed. The labours of the farm, garden, and fields, by calling into exercise the healthy functions of the mind, and improving the general tone of the constitution, are infinitely preferable to all others, but circumstances both as regards the extent of ground under cultivation, and the ever varying condition of the Insane, prevent their universal applicability.

In-door occupation is more easily found for females; the habits of women are almost exclusively domestic, and they seem to prefer household work, in the wards, laundry, kitchen, &c., or the lighter and more tasteful works, pursued in the bazaar. Here may be found a specimen of almost every article that female ingenuity can invent; elaborately embroidered scarfs, dolls in every variety of costume, knitting of various patterns and texture, from thick lamb's wool stockings, to the delicate Shetland shawl, counterpanes of various materials and patterns, children's apparel and toys, and poetry composed, though not printed, in the wards of the Asylum.

At the last annual sale, the industrious patients were rewarded by an unusual attendance of kind visitors; and the sum of £35 was paid into the Savings' Bank, and added to the fund already in hand.

So prosperous an undertaking, has led to a more extensive liberality in the donations from "Harrison's fund," and a corresponding degree of comfort and happiness has been restored, to many a distressed and deserving family.

On the Friday following Christmas day, the patients, to the number of three hundred, partook of their annual entertainment of tea and cakes. A more than ordinary emulation was excited, in the decorations of the respective apartments for males and females; a temporary arch of evergreens, and wreaths of the same interspersed with flowers made of different coloured papers, and tastefully arranged, would have done no discredit to a more courtly scene, or a company of more polished guests. The evening passed in cheerfulness and amusement, and without any exhibition of immoderate hilarity.

It is satisfactory to state, that the usual healthy condition of the whole household, has undergone no change throughout the past year; the general appearance of the patients, is such as will bear ample testimony to this fact, as also to the wholesomeness of their diet, and the

care and cleanliness observed in their accommodation. In this, and in some other important points, it is hoped, the Institution has been subjected to no material deterioration.

The financial state of the Institution will again justify the recommendation of continuing the weekly charge at 5s. 6d.

C. C. CORSELLIS, M.D.

DIRECTOR.

December 31st, 1844.

At a meeting of the Visiting Magistrates, held at the Asylum this day, it was ordered, that the weekly charge be continued at 5s. 6d.

January 29th, 1845.

T. H. MARSHALL

## CASH ACCOUNT.

DR.	£	s.	d.
To Balance of last Account .....	2419	12	0
Amount received for Butter .....	0	14	7
Calf .....	1	6	0
Fruit and Vegetables .....	36	3	1
Pigs .....	1	0	0
Bones .....	4	19	7
Eggs .....	0	4	6
Pigeons .....	1	6	2½
Dripping .....	4	19	0
Cows' Hides and Tallow .....	5	0	3
Suet .....	8	11	3
Cocoa Nut Fibre .....	8	8	3
Wood .....	5	7	6
Lard, &c.....	7	4	4
Discount .....	0	11	7
Discount on Wheat.....	2	5	6
Banker's Interest .....	19	8	7
From Ellis Hodgson, Esq. for Patients chargeable to the } Riding as Vagrants ... ..	164	10	10
Ditto from Townships .....	6293	12	4
	<hr/>		
	£8985	5	4½
	<hr/>		
Balance .....	1518	17	8
Amount of Accounts due from different Townships .....	2771	15	4
	<hr/>		
	£4290	13	0
	<hr/>		
1 Cow killed and used in the Establishment, valued at....	18	1	6
6 Calves                      ditto                      ditto                      ditto	15	18	6

Lunatic Asylum, 28th January, 1845.

Examined and audited by us,

J. HOLDSWORTH.

T. H. MARSHALL.

} AUDITORS.

## CASH ACCOUNT.

CONTRA, CR.	£	s.	d.
By Amount paid for Clothing and Bedding .....	223	16	4
Coals .....	281	17	0
Cotton and Linen Yarn .....	57	6	0
Cows .....	48	0	0
Fodder.....	1	5	0
Drugs .....	71	3	8½
Leeches .....	3	10	3½
Earthenware .....	9	10	9
Brushes .....	48	17	6
Freight and Carriage .....	12	5	10
Groceries .....	380	7	8
Hops.....	60	6	0
Ironmongery .....	45	3	2
Incidentals .....	103	12	1
Funeral Expences .....	91	8	0
Leather, Hemp, &c.....	99	18	1
Malt .....	605	2	0
Meat.....	1369	9	10
Manure .....	4	10	0
Rates and Taxes.....	24	6	9½
Rent of Land to Harrison's Fund, &c.	56	0	0
Salaries and Wages .....	1889	3	3
Seeds .....	9	13	6
Stationery and Postages .....	49	2	2
Straw .....	149	14	0
Wheat, Meal, &c. ....	1599	9	9
Wine and Spirits .....	26	4	0
Wool .....	145	5	0
	7466	7	8½
Balance .....	1518	17	8
	£8985	5	4½
Tradesmen's Accounts owing .....	874	3	9
Balance in favour of the Institution .....	3416	9	3
	£4290	13	0

# P A T I E N T S .

	MALES.	FEMALES.	TOTAL.
In the Asylum on the 1st of January, 1844 .....	219	214	433
Admitted since .....	75	71	146
<hr/>			
	294	285	579
<hr/>			
	68	78	146
<hr/>			
	226	207	433

  

	MALES.	FEMALES.	TOTAL.
Discharged .....	36	53	89
Dead .....	32	25	57

Remaining in the Asylum on the 31st of December, 1844 .....

## A D M I T T E D .

46	26	4	48
Cases not exceeding three months' duration, and first attack.	Cases not exceeding twelve months' duration, and first attack.	Cases not exceeding two years' duration, and first attack.	Cases of more than two years' duration.
			Cases of those who have had previous attacks.

**DISCHARGED.**

Cases not having been insane more than three months before admission, and discharged within six months.	Cases not having been insane more than twelve months before admission, and discharged within two years.	Cases not having been insane more than two years before admission and discharged within three years.	Cases having had previous attacks.	Cases not cured, discharged by desire of their friends and by order of the Magistrates.
19	24	6	26	14

Admitted since the Asylum opened .....	MALES.	FEMALES.	TOTAL.
Discharged.....	877	1046	1923
Dead .....	654	475	1129
MALES. FEMALES. TOTAL.			
	1757	1728	3485
MALES. FEMALES. TOTAL.			
	1531	1521	2052
Remaining .....			
	226	207	433

Number of Patients discharged:—Cured .....

MALES.	FEMALES.	TOTAL.
715	818	1533
Relieved....	162	228
		390

Average Number of Patients during the year, 438.

*Number of Patients admitted in each Year, from 1st January, 1820, to 31st December, 1844.*

1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
76	89	109	118	122	143	122	114	119	123	113	143	149	143	127	147	147	155	183	159	140	127	171	162	146

*Number of Patients admitted in each Month.*

January.	February.	March.	April.	May.	June.	July.	August.	Sept.	Oct.	Nov.	Dec.
264	224	266	259	344	332	319	290	254	270	260	265

*Number of Patients discharged in each Year, from 1st January, 1820, to 31st December, 1844.*

1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
35	46	49	54	89	85	68	64	81	70	74	72	66	93	80	81	89	85	97	94	91	71	96	76	89

*Number of Patients dead in each Year, from 1st January, 1820, to 31st December, 1844.*

1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
12	19	19	23	30	53	45	42	42	50	47	49	53	52	43	60	56	62	37	60	41	57	53	53	57

*Different Ages at which Patients have been admitted.*

From 5 to 10 years.	From 15 to 20 years.	From 20 to 30 years.	From 30 to 40 years.	From 40 to 50 years.	From 50 to 60 years.	From 60 to 70 years.	From 70 to 80 years.	From 80 to 90 years.
4	92	414	468	<b>MALES,</b> 438	203	112	26	5
1	90	393	261	<b>FEMALES,</b> 476	373	105	25	3

*Statement of Patients re-admitted,*

Patients re-admitted who had not been discharged three months.	Patients re-admitted who had been discharged between three and six months.	Patients re-admitted who had been discharged between six and nine months.	Patients re-admitted who had been discharged between nine and twelve months.	Patients re-admitted who had been discharged between one and two years.	Patients re-admitted who had been discharged between two and three years.	Patients re-admitted who had been discharged between three and ten years.
37	27	16	<b>MALES,</b> 18	53	21	82
31	21	23	<b>FEMALES,</b> 19	43	31	79
						<i>Total</i>
						247
						<i>Total</i>
						254



*Statement of the Admissions, Discharges, and Deaths of  
all the Patients in the Asylum, since its Opening, on  
the 23rd of November, 1818.*

A D M I S S I O N S .

Patients admitted within three months after the first attack . . . . .	1073
Patients admitted within twelve months after the first attack . . . . .	608
Patients admitted who had been insane from one to thirty years..	739
Patients admitted who have had previous attacks, and have been confined before in this Asylum . . . . .	500
Patients admitted who are stated to have had previous attacks, but who have not been confined here . . . . .	565
	<hr/>
	3485

D I S C H A R G E S   A N D   D E A T H S .

Patients discharged cured who had not been insane more than three months before admission . . . . .	517
	Dead.. 253
Patients discharged cured, who had not been insane more than twelve months before admission . . . . .	372
	Dead.. 228
Patients discharged cured, who had been insane from one to many years before admission . . . . .	90
	Dead.. 408
Patients discharged cured, who have had previous attacks..	553
	Dead.. 240
Patients not cured, discharged by desire of their friends, and and others by order of the Magistrates . . . . .	391
	<hr/>
	1129 1923

*Occupations of 146 Patients admitted during the year  
1844.*

<b>MALES.</b>			
Weavers.....	11	Potter.....	1
Wool Combers.....	2	Boatman .....	1
Warper .....	1	Mariner .....	1
Woolsorter .....	1	Carter.....	1
Cloth Dresser .....	1	Joiner.....	1
Cloth Drawer .....	1	Shuttle Maker .....	1
Presser .....	1	Shoemaker .....	2
Flax Dresser .....	1	Tailors .....	2
Stocking Weaver .....	1	Hatter .....	1
Warehouseman .....	1	Hairdresser .....	1
Silversmiths .....	2	Butcher .....	1
Cutlers .....	5	Grocer .....	1
Grinder .....	1	Draper .....	1
Iron Turner .....	1	Hawking Jeweller .....	1
Fitter .....	1	Attorney .....	1
Farmers .....	4	Professor of Languages .....	1
Farm Labourers .....	4	Surveyor .....	1
Labourers .....	5	No trade.....	5
Grooms .....	2		75
Colliers .....	3		
Stone Mason .....	1		
Bricklayer .....	1		
<b>FEMALES.</b>			
Housewifery .....	24	Spinners.....	2
Domestic Servants .....	12	Straw Bonnet Maker .....	1
Cook .....	1	Field Labourers .....	2
House Keepers.....	5	Green Grocer .....	1
Governess .....	1	Washerwoman .....	1
Lady's Maid .....	1	Publican .....	1
Sempstress .....	1	Rag Picker .....	1
Milliner .....	1	No employment .....	4
Weavers .....	2	Not stated.....	8
Bobbin Winder .....	1		71
Comber .....	1		

*Degree of Education of 146 patients admitted during  
the year 1844.*

	<i>Males.</i>	<i>Females</i>	<i>Total.</i>
Well educated .....	10	6	16
Can read and write .....	32	24	56
Can read.....	18	18	36
No education .....	6	9	15
Not stated .....	9	14	23
	75	71	146

*Social state of the 146 patients admitted during the year  
1844.*

	<i>Males.</i>	<i>Females</i>	<i>Total.</i>
Married .....	42	39	81
Widowers .....	9		9
Widows .....		10	10
Single .....	24	22	46
	75	71	146

*Religion of the 146 patients admitted during the year  
1844.*

	<i>Males.</i>	<i>Females</i>	<i>Total.</i>
Church of England .....	32	21	53
Roman Catholics .....	2	2	4
Wesleyans .....	13	28	41
Independants.....	4	2	6
Calvinist.....	1		1
Baptists .....	2	1	3
Primitive Methodists .....	1	2	3
Not stated .....	5	7	12
None .....	15	8	23
	75	71	146

**APPENDIX TO THE REPORT OF THE VISITING JUSTICES OF THE WEST-RIDING PAUPER LUNATIC ASYLUM FOR THE YEAR 1844.**

**PATIENTS.**

	MALES.	FEMALES.	TOTAL.
In the Asylum on the 1st of January, 1844 .....	219	214	433
Admitted since .....	75	71	146
	294	285	579
Discharged .....	36	53	89
Dead .....	32	25	57
	68	78	146
Remaining in the Asylum on the 31st of December, 1844 .....	226	207	433

**ADMITTED.**

Cases not exceeding three months' duration, and first attack.	Cases not exceeding twelve months' duration, and first attack.	Cases not exceeding two years' duration, and first attack.	Cases of more than two years' duration.	Cases of those who have had previous attacks.
46	26	4	22	48

**DISCHARGED.**

Cases not having been insane more than three months before admission, and discharged within six months.	Cases not having been insane more than twelve months before admission, and discharged within two years.	Cases not having been insane more than two years before admission and discharged within three years.	Cases having had previous attacks.	Cases not cured, discharged by desire of their friends and by order of the Magistrates.
19	24	6	26	14

	MALES.	FEMALES.	TOTAL.
Admitted since the Asylum opened .....	1757	1728	3485
Discharged .....	877	1046	1923
Dead .....	654	475	1129
Remaining .....	226	207	433

	MALES.	FEMALES.	TOTAL.
Number of Patients discharged:—Cured .....	715	818	1533
Relieved .....	162	228	390

Average Number of Patients during the year, 438.

*Number of Patients admitted in each Year, from 1st January, 1820, to 31st December, 1844.*

1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
76	89	109	118	122	143	122	114	119	123	113	143	149	143	127	147	147	155	183	159	140	127	171	162	146

*Number of Patients admitted in each Month.*

January.	February.	March.	April.	May.	June.	July.	August.	Sept.	Oct.	Nov.	Dec.
264	224	266	259	344	332	319	290	254	270	260	265

*Number of Patients discharged in each Year, from 1st January, 1820, to 31st December, 1844.*

1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
35	46	49	54	89	85	68	64	81	70	74	72	66	93	80	81	89	85	97	94	91	71	96	76	89

*Number of Patients dead in each Year, from 1st January, 1820, to 31st December, 1844.*

1820	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
12	19	19	23	30	53	45	42	42	50	47	49	53	52	43	60	56	62	37	60	41	57	53	53	57

*Different Ages at which Patients have been admitted.*

From 5 to 10 years.	From 15 to 20 years.	From 20 to 30 years.	From 30 to 40 years.	From 40 to 50 years.	From 50 to 60 years.	From 60 to 70 years.	From 70 to 80 years.	From 80 to 90 years.
4	92	414	468	<b>MALES.</b> 438	203	112	26	5
1	90	393	261	<b>FEMALES.</b> 476	373	105	25	3

*Statement of Patients re-admitted.*

Patients re-admitted who had not been discharged three months.	Patients re-admitted who had been discharged between three and six months.	Patients re-admitted who had been discharged between six and nine months.	Patients re-admitted who had been discharged between nine and twelve months.	Patients re-admitted who had been discharged between one and two years.	Patients re-admitted who had been discharged between two and three years.	Patients re-admitted who had been discharged between three and ten years.
37	27	16	<b>MALES.</b> 18	53	21	82
31	21	23	<b>FEMALES.</b> 19	43	31	79
						<b>Total Total</b> 247

*Statement of the Admissions, Discharges, and Deaths of  
all the Patients in the Asylum, since its Opening, on  
the 23rd of November, 1818.*

A D M I S S I O N S .

Patients admitted within three months after the first attack.....	1073
Patients admitted within twelve months after the first attack ....	608
Patients admitted who had been insane from one to thirty years..	739
Patients admitted who have had previous attacks, and have been confined before in this Asylum .....	500
Patients admitted who are stated to have had previous attacks, but who have not been confined here.....	565
	3485

D I S C H A R G E S   A N D   D E A T H S .

Patients discharged cured who had not been insane more than three months before admission .....	517
Dead..	253
Patients discharged cured, who had not been insane more than twelve months before admission .....	372
Dead..	228
Patients discharged cured, who had been insane from one to many years before admission .....	90
Dead..	408
Patients discharged cured, who have had previous attacks..	553
Dead..	240
Patients not cured, discharged by desire of their friends, and and others by order of the Magistrates.....	391
	1129
	1923

Statement of the Admissions, Discharges,  
and the Patients in the Asylum, since  
the 23rd of November, 1818.

ADMISSIONS.

Patients admitted within three months after the first  
Patients admitted within twelve months after the first  
Patients admitted who had been insane from one to  
Patients admitted who have had previous attacks, and  
confined before in this Asylum, .....  
Patients admitted who are stated to have had previous  
but who have not been confined here, .....

DISCHARGES AND DEATHS.

Patients discharged cured who had not been insane  
than three months before admission, .....  
Patients discharged cured, who had not been insane  
than twelve months before admission, .....  
Patients discharged cured, who had been insane for  
many years before admission, .....  
Patients discharged cured, who have had previous  
Patients not cured, discharged by desire of their friends  
and others by order of the Magistrates, .....