

Thirty-third annual report of the directors of the Dundee Royal Asylum for Lunatics : submitted, in terms of their charter, to a general meeting of the directors, 20th June, 1853 with the report of the medical officers.

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THIRTY-THIRD
ANNUAL REPORT
OF THE
DIRECTORS
OF THE
DUNDEE ROYAL ASYLUM
FOR
LUNATICS;

SUBMITTED, IN TERMS OF THEIR CHARTER, TO A GENERAL MEETING OF
THE DIRECTORS, 20TH JUNE 1853.

WITH THE
REPORT OF THE MEDICAL OFFICERS.

DUNDEE:
PRINTED AT THE ADVERTISER OFFICE.

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REPORT BY THE DIRECTORS
OF THE
DUNDEE ROYAL LUNATIC ASYLUM,
TO THE
ANNUAL GENERAL COURT,
20TH JUNE 1853.

THIS being the close of the thirty-third year of the Dundee Royal Lunatic Asylum, the time has now arrived, when, agreeably to invariable custom, the Directors have to submit to their constituents and the public an account of their proceedings during the past year ; and, in doing so, it is exceedingly gratifying to them to be able to state that the Institution continues to enjoy a large measure of prosperity. Though the history of the period over which their present report extends presents little more than a repetition of the events of preceding years, yet, by a steady and zealous perseverance in the application of the system of operations hitherto pursued, such has been the amount of success which has attended their endeavours for the alleviation of human suffering, and for restoring the use of reason to those unfortunate individuals whom God in his sovereign but all-wise providence has seen

meet to deprive of it, that the Directors feel convinced that this Institution has fully maintained the high character which it has so long held, and sufficiently attested its claim to the large and increasing share of public confidence which it now enjoys.

At the date of the last annual report 199 patients remained in the Asylum. Since then, there have been admitted 43 ; there have been discharged 32 ; and 9 have died, thus leaving 201 at present under care. The total number of patients during the year has been 242. The daily average number under treatment during this period has been 205. Of the 32 patients discharged there were 23 cured, 7 were improved, and 2 were withdrawn without any observable change having been effected.

Notwithstanding that the admissions for the past year exceed, in point of number, those of its immediate predecessor, the Directors have been reluctantly constrained to refuse admission to 23 applicants, in consequence of the want of adequate accommodation for their reception. They regret this all the more deeply, as many of the cases were extremely urgent, and the friends of the patients were thus thrown into serious difficulty. But the Directors find it impossible for them to act otherwise, without at the same time endangering the health and comfort of those already entrusted to their care ; and they have no hesitation in saying, that to their thus avoiding, on all occasions, the overcrowding of the establishment, is to be attributed, in a great measure, the immunity of the inmates from those epidemic scourges which have occasionally visited the town and its vicinity.

From the preceding statement it will be observed that the total number of patients discharged cured, 23, is in the ratio of 53.49 per cent. to the admissions, or 11.21 per cent. to the mean number resident in the Asylum. This ratio is considerably above the average of former years, 45.59, and of the average of the public Asylums of the United Kingdom (21.26).

The result, therefore, is in the highest degree gratifying, affording, as it does, the best evidence of the success of the Institution, and of the general soundness of those principles upon which the management and treatment of the inmates continues to be conducted.

While nothing can communicate greater satisfaction to the Directors than the restoration of reason to so many of those unfortunates who have been entrusted to their care, a very extensive field for the exercise of benevolence and humanity has been found in the protection, comfort, and guidance of those whose sufferings, it is to be feared, admit of no radical cure. A very large proportion of the inmates of this Institution, as of every other of the kind, necessarily belong to this latter class ; but there is, at least, good reason for gratulation in the fact, that all have been more or less benefited and improved. Their residence in the Asylum has not only protected the public from such outrages as even the most quiet and harmless of them are apt to commit when under the influence of those paroxysms of excitement and violence to which they are occasionally subject, but has also removed the patients themselves from many sources of irritation and annoyance to which they were constantly exposed when at large, and placed them in a position ensuring the greatest amount of happiness compatible with their mental condition.

In adverting, however, to such cases, the Directors cannot but express their deep regret that the friends or curators of the patients have, in many instances, too long delayed in subjecting them to proper remedial treatment. In consequence of this, each successive year of the establishment has beheld a gradual accumulation of uncured and incurable inmates. But it should never be forgotten that the greatest number of cures takes place among such cases as are early placed under treatment, and that delay not only diminishes the curability, but prolongs the duration of the confinement of those who may be ultimately cured. An eminent writer on insanity (Burrows)

reports, from his own experience, a proportion of 91 per cent. of recoveries in recent cases. This is an unusually high rate ; but the history of all Asylums distinctly proves that the curability of insanity is in an inverse ratio to the duration of the disease. The Directors would, therefore, urge upon the friends of the insane the importance of placing the patient, as soon as possible, under the most favourable circumstances for arresting the development of the malady. More particularly would they seek to impress this on Parochial Boards and Inspectors of the Poor. By not securing for a pauper, or what is equally important, by not securing for one likely to become a pauper, early and proper treatment, when afflicted with any form of mental aberration, the rates are increased and the interests of the industrious classes of the community are affected ; for, even in the most favourable circumstances, not only is the treatment of the patient prolonged, and the expense consequently augmented, but there is great risk that one, who might have been only an occasional recipient of parochial relief, may become a burden on the community for the remainder of his life. The Directors have been the more urgent on this subject, because all parties are interested in it. To the community at large it is important in a pecuniary point of view ; to the Directors of an Asylum it is scarcely less important, as it enables them to diffuse the benefits of the institution over a greater number, and in a more satisfactory manner, than they possibly could if the Wards were filled with incurable patients. From the minds of the medical officers it would remove a great source of regret, finding, as they often do, that their efforts are in many cases useless, and their exertions rendered more anxious and prolonged than they would have been had they been called into requisition at an earlier period. Nor must the condition of the unfortunate patient be forgotten. At the best, he is subject to a longer continuance of the malady, while he runs the risk, by the neglect of his friends or the authorities, of falling into a condition of confirmed and hope-

less insanity. The Directors, therefore, feel assured that they have only to point to these evils of delayed or imperfect treatment, to show the fallacy of the prevalent opinion, "that there is no harm in keeping lunatics at home so long as they are not dangerous." A little extra prudence on the part of the friends and guardians of the insane will, without fail, ensure a very decided increase in the proportion both of speedy and permanent cures.

The state of the financial affairs of the establishment will be best understood by referring to the abstract of the Treasurer's accounts, appended to this report. It will be seen that the amount of his receipts during the year was £4678 14 9
 And of his disbursements, 4017 18 2

Thus leaving, on the whole, a surplus income of £660 16 7
 By comparing this statement with those of former years, it will be seen that the amount of expenditure has been considerably increased. This, however, may be explained by the circumstance, that several important improvements and alterations have been effected during the course of the year. Among these may be mentioned the erection of four new sheds in the southern airing courts, for the higher classes of male and female patients. These buildings have lately been completed, and are found to be of great convenience to the patients, who, being thus protected from both sun and rain, are enabled at all times to enjoy the benefit of active exercise in the open air. In the northern gallery, on the female side, a superior Arnot stove has been erected; and the mound in the small airing court has been considerably elevated, and otherwise improved. All the windows and doors of the Asylum have been painted; and a variety of other improvements have been introduced, all tending to the increased comfort and convenience of the inmates. But while the expenditure has thus been somewhat greater than in former years, the Directors are much gratified to find that there has been, notwithstanding, a surplus revenue;

and this result is all the more encouraging, seeing that but few legacies or donations have been received.

In consequence of letters from the Inspectors of Poor from the parishes of Dundee and Liff, requesting a reduction of the charge of pauper lunatics from privileged parishes, the subject was brought under the consideration of the Directors at their Quarterly Court, held within the Town Hall on the 10th day of January last. The meeting was of opinion that, in present circumstances, it would not be expedient to make any change in the rates charged. The reasons which led to this conclusion were drawn up in the form of a report, which has since been published, and the directors have no hesitation in stating that these reasons are such as must ensure the approval of every unprejudiced mind. They readily admit that it is incumbent upon them to provide for pauper lunatics at the lowest possible charge ; but, at the same time, they are convinced that a reduction in the rates cannot at present be effected without seriously impairing the interests of the Institution. A glance at the Abstract will show that the Asylum is still burdened with a debt of £4786 13s. 5d., for which, interest, at the rate of 4 per cent. per annum, is paid ; and there appears no other way by which this debt can possibly be liquidated than by such savings as may annually be effected. Besides, the original extended plan of the Asylum is not nearly completed. The east wing requires to be elevated so as to render it conformable to the one on the opposite side ; and, it has been calculated, that, to accomplish this, £5000 will be required. The chapel also in which the patients and servants assemble for worship is far from being sufficiently large ; and the Superintendent has never had accommodation suitable to his situation in the Asylum, there being no dwelling house for that officer, though a site for one was pointed out by the architect some years ago. Now, the Directors are of opinion that, having reference to these wants and liabilities, and also to the prospective increased price of provisions, it would not

be prudent to make any reduction at present in the rates of board for pauper patients. They feel confident, however, that the present income, if permitted to continue, will not only remove the heavy amount of debt that hangs over the Institution, but enable them to complete the buildings in conformity with the original plan. This being effected, about 60 additional patients could be accommodated without requiring many additional attendants ; and thus the Directors would be enabled to extend the blessings which this Institution is so well fitted to confer, while at the same time the management would be rendered still more economical. Not until these results have been brought about do they consider that they would be justified in reducing the rates of board for pauper patients, from privileged parishes ; but, in justice to themselves, they may be permitted to add, that the rate actually charged at present is lower than that charged by any similar Institution in Scotland, excepting Aberdeen Asylum, where the rate is a small shade lower. That Institution, however, is free of debt ; all its buildings, it is believed, are completed ; and, what is more important still, it is largely endowed.

The Directors would take this opportunity to advert to the charitable character of the Institution, of which the public do not seem to be sufficiently aware. From the circumstance of board being charged in the Asylum, it has come to be regarded very much in the light of a self-supporting institution ; and the Directors have good grounds to believe that, for this reason, it has not received the contributions of the benevolent to such an extent as it indubitably deserves. There is, however, a numerous class of persons, not properly belonging to the ordinary rank of paupers, whose circumstances render it impossible for them to pay for their insane relatives, even the lowest rate of board, and whose feelings yet revolt from the idea of resorting to a parochial board for assistance. To meet cases of this painful description, which are by no means uncommon, the Directors would have great pleasure in reduc-

ing the charge to the lowest possible amount, but, for the reasons specified above, they feel that this cannot be accomplished at present without danger to the Institution. They would, therefore, urge upon those in opulent circumstances the strong claims which this Institution has on their charity. It is, indeed, most awful to think of the necessity which everywhere exists for a perpetual and active display of that compassion by which man is most assimilated to his Maker. It is melancholy to contemplate the incessant claims on philanthropy preferred by the wants and miseries of every crowded population, and more especially by the swarming pauperism of this large and increasing town. It is, however, an encouraging consideration, that the principle of benevolence seems ready to multiply itself in all directions to meet the exigency ; and that scarcely a week elapses without some call being made upon the rich of this world to lend their support towards some one of the many institutions which it has reared. The frequent occurrence of such occasions, therefore, by no means impairs the confidence with which the Directors advance the claims of an institution that embraces all the most legitimate objects of Christian munificence. It is designed to administer relief to those of our fellow-creatures who are labouring under one of the heaviest calamities to which human nature is subject. It offers an occasion of doing good in the most unexceptionable manner. It proposes to itself the cure, or at least the alleviation of a malady which poverty often produces and always aggravates. And while it thus seeks to benefit the afflicted themselves, no small part of its benevolent object is attained by the consolation which it conveys to the minds of their relatives and friends. These have the satisfaction of knowing that the unfortunate objects of their solicitude are living in the enjoyment of every comfort to which their social position in life entitles them, and have every thing done for them which science or benevolence can suggest. It is on these grounds that the Directors would appeal to the liberality

of the public ; and they shall rejoice to learn that ere long they shall find themselves put in possession of the means of accomplishing an object so well fitted to ameliorate the condition of their afflicted brethren. Assuredly, such an object cannot but receive the approbation of Him who regards the wretched and the helpless with especial attention and care ; nor can we act more suitably to our condition as frail and fallen creatures, than by zealously and faithfully striving to imitate the compassion of Him who hath done so much to lighten the burdens under which we all labour.

The House Visitors, consisting of Dr Robert Bell, George Thoms, Esq., and Charles Smith, Esq., Dean of Guild, have been most regular in their visitations throughout the year ; and on every occasion have recorded the high satisfaction which they experienced from witnessing the unremitting endeavours, manifested in all the departments, so to administer the details of management as most effectually to promote the well-being of the patients, and the lasting prosperity of the institution. The Sheriffs also have visited as formerly, and borne testimony to the order, cleanliness, and contentment which prevail throughout the establishment, as well as to the correctness of the warrants and the accuracy of the registers.

The general treatment of the patients has not differed materially from that hitherto pursued, either in principle or detail. Every means, medical and moral, which the most enlightened views of the history of mind and its diseases suggests, is adopted in practice ; and although, in many cases, all hope of a final cure may be said to be in vain, yet no effort is spared which can in the least degree contribute to the comfort and well-being of all within the walls of the establishment. One of the most successful remedial and comforting measures is the occupation of the mind in work or amusement. This serves to carry the mind, as it were, away from the contemplation of its own ills, and for a time, at least, to afford a salutary relief from "the moody influences which gnaw within." In

this institution the employment is generally adapted to the former habits of the patients. Among the male paupers there are many who ply their respective handicrafts almost as industriously as they were wont to do at home ; while the females of the same class are not less industriously occupied in performing tasks fitted for their various conditions in life. On no occasion, however, are any of the patients set to work contrary to their own wish, or kept longer employed than seems beneficial to them. As the intention of all such measures should be purely for the benefit of the individual, quite irrespective of any remuneration to the institution wherein he may be placed, the extent of its employment is regulated not so much by the wants of the establishment, as by the physical and mental condition of the patients themselves. Those to whom manual occupation would be unsuitable, are generally employed in walking in the open air for several hours daily. The Airing Courts are of great utility for this purpose ; and the fine view of the River Tay and surrounding country obtainable from the elevated mounds which they contain, is a source of never-failing pleasure to the patients. Among other means of occupation and amusement, may be mentioned games of chess, dancing, hearing music, walks and drives in the country, some of the inmates having, during the past season, been permitted to proceed, under the care of an attendant, as far as Glammiss, Dunkeld, and Kirkmichael. A constant source of enjoyment also is afforded the higher class of patients by the perusal of the literary and political periodical publications, with which they are regularly furnished. It may not be uninteresting to add, that a school has been established, which is conducted by one of the patients, a former schoolmaster, under the care of an attendant. There, for several hours a day, may be seen about fifteen of the patients going through the usual tasks of reading, spelling, &c., with much the same order and decorum as exists in any educational establishment without the walls.

The Directors have great pleasure in renewing their testi-

mony to the important services rendered to the institution by its office-bearers. Dr Wingett, the Resident Physician and Superintendent, continues to devote his high talents to the benefit of the patients; and the eminent success which has attended his treatment of them, as well as his unceasing endeavours to inspire all around him with happiness, have been such as to merit their unqualified approbation. To the matron, Mrs Kilgour, the Directors desire to return their warmest thanks, for the assiduity and kindness with which she has uniformly discharged her important duties. They feel that they cannot express in too strong terms the sentiments of approbation with which they regard her exertions in promoting the comfort of the inmates and the success of the institution. The thanks of the Directors are also due to Dr Nimmo, the Consulting Physician, for the enlightened and judicious manner in which he discharges his difficult and delicate duties. The Rev. Thomas Stirling continues to officiate as chaplain with commendable prudence and zeal. His ministrations have been regularly attended throughout the year, and have proved a powerful auxiliary in the moral management of the patients. The thanks of the Directors are also due to Mr Sturrock, for his diligence and fidelity as Treasurer; to Mr Robertson for his conduct as Secretary; and to the subordinate officials and attendants for their humane and kindly treatment of the patients committed to their charge.

The Directors would also offer their warmest thanks to their respected chairman, whose voluntary labours for the welfare of the institution have ever been most valuable. It is their fervent prayer, that he may be long spared to carry on that good work in which he has been so unweariedly and faithfully engaged; and that, when he shall at length be called to give in an account of his stewardship, he may hear the Judge of all acknowledge, as he pronounces upon him his sentence and his blessing, "Inasmuch as ye have done it unto one of

the least of these, my brethren, ye have done it unto me." They beg also to present their respectful acknowledgments to the Messrs Mills for furnishing employment to some of the patients.

Lastly, they would gratefully acknowledge receipt of the following sums:—from Mrs Jean Maxwell or Knight, of Halkerton, £89 9s; and, from Miss Stirling Graham, £4; the former being a legacy of £100, after deducting legacy duty and expense of discharge; and the latter, two annual subscriptions of £2.

And now, having given this brief account of the events which have transpired while discharging their trust during the bygone year, the Directors would, in conclusion, acknowledge, with gratitude and praise, the goodness of Almighty God in thus far prospering their efforts in behalf of the unfortunate and the miserable. They are deeply sensible that, without his blessing, the tenderest care, the maturest experience, and the most consummate skill, may all be applied in vain. On that blessing, therefore, they desire still to place their dependence; and, while as instruments in his hands, they continue to strive for the good of all entrusted to their care, they fondly cherish the hope, that, in the case of many of them, reason shall again ascend her throne, and wield her sceptre, and shed her light upon the benighted mind.

ABSTRACT OF THE AFFAIRS
OF THE
DUNDEE LUNATIC ASYLUM,

For the Year ending 31st March, 1853.

INCOME.

Board from Patients,	£4463	13	3	
Patients' Labour,	134	18	7	
Profit on Store,	80	2	11	
	£4678	14	9	

EXPENDITURE.

SALARIES—

Superintendent,	£200	0	0	
Matron,	100	0	0	
Physician,	100	0	0	
Chaplain,	40	0	0	
Secretary,	30	0	0	
Treasurer,	75	0	0	
	£545	0	0	
Less Fees from Patients,	43	11	6	
	£501	8	6	
Interest,	£281	4	10	
Servants' Wages,	505	3	0	
Soap,	29	14	6	
Taxes,	13	3	11	
Advertising, Printing, Stationery, Books, &c.,	33	5	11	
Coals and Firewood,	146	19	9	
Fire Insurance,	13	19	6	
	£1023	11	5	
Carry forward,	£501	8	6	

	Brought forward, .	£1023	11	5	£501	8	6
Feu-duty,		52	4	6			
Gas,		29	0	0			
Incidents,		33	10	8			
Patients' Extras,		30	3	2			
Straw,		4	1	4			
					1172	11	1
Butcher Meat,		458	6	11			
Butter,		78	4	7			
Beer,		82	18	6			
Bread,		302	5	8			
Barley and Pease,		36	3	1			
Cheese,		11	0	6			
Eggs,		2	17	9			
Fish,		29	7	0			
Groceries,		33	6	4			
Milk,		255	11	2			
Meal,		201	15	9			
Medicines,		25	5	7			
Potatoes,		43	14	3			
Sugar,		58	10	0			
Tea,		68	1	4			
Water,		40	13	0			
					1728	1	5
Furniture,		85	7	11			
Grounds,		20	14	1			
Mason Work,		41	7	1			
Plumber Work,		64	3	0			
Plaster Work,		17	14	9			
Painter Work,		85	4	4			
Slater Work,		66	12	9			
Smith Work,		48	17	3			
Wright Work,		185	16	0			
					615	17	2
					£4017	18	2
Excess of Income from Patients,					660	16	7
					£4678	14	9

ABSTRACT VIEW OF THE AFFAIRS OF THE ASYLUM

From 1820 to 1853.

Amount of Income from 1821 to 1853, .	£108,184	19	0	
Amount of Expenditure from 1820 to 1853,	92,323	11	7½	
Excess of Income, .	£15,861	7	4½	
Add Donations and Legacies				
from 1820 to 1852, .	£13,015	12	3½	
Do. from 1852 to 1853, .	93	9	0	
	13,109	1	3½	
	£28,970	8	8	
Amount of Debt at 31st March,				
1852, ,	£5540	19	0	
Deduct, 1st, Excess of Income				
from the Patients for the				
year ending 31st March,				
1853,	£660	16	7	
And, 2d, Amount of				
Donations during				
the year,	93	9	0	
	754	5	7	
Amount of Debt due by Asylum at				
31st March, 1853,				
	4786	13	5	
Total expenditure on Building and Furniture, £33,757 2 1				
Deduct sum written off for Depreciation, . 455 18 0				
Amount of Expenditure in General Balance Sheet, <u>£33,301 4 1</u>				

AT THE
ANNUAL COURT OF DIRECTORS
OF THE
DUNDEE ROYAL LUNATIC ASYLUM,
HELD IN THE TOWN HALL OF DUNDEE,

On Monday the 20th June 1853,

PATRICK SCOTT, Esq., in the Chair,—

The Rev. Mr GRANT, of St John's, Dundee, read the Annual Report of the Directors.

Provost THOMS moved that the Report be approved of and printed, as the Thirty-third Annual Report of the Directors, and that the thanks of the Meeting be tendered to Mr Grant for drawing it up, which was agreed to.

Dr WINGETT read the Medical Report; the thanks of the Meeting were voted to the Doctor for drawing it up.

The following parishes, having contributed twenty pounds or upwards to the funds of the Asylum, are entitled to have their pauper patients admitted into class first, and are charged the lowest rate of board; but no other parish, since 1824, can claim this privilege. The parish of St Andrews was privileged in 1837, and the parish of Kingsbarns in 1852, to have each one patient only in the Asylum at the lowest rate of board.

Airlie.	Kettins.
Alyth.	Kingsbarns, one patient only.
Arbroath.	Liff and Benvie.
Auchterhouse.	Longforgan.
Brechin.	Mains and Strathmartine.
Dundee.	Monifieth.
Dunnichen.	Monikie.
Forfar.	Murroes.
Glammiss.	Newtyle.
Guthrie.	Rescobie.
Inverarity.	St Andrews, one patient only.
Kirriemuir.	Tannadice.
Kinnettles.	Tealing.

MEDICAL REPORT TO THE DIRECTORS,

20TH JUNE 1853.

AN Annual Statement, such as the present, epitomizes details of affliction, with their antagonistic remedial measures, involving some of the most interesting questions attaching to humanity. Numerical results are set forth which cannot fail to arrest serious attention, inasmuch as they point out the common liability to one of the saddest and dreariest calamities, and illustrate how much can be done either to avert or to remove it. Such a statement can, however, communicate only an imperfect outline of the arrangements and efforts which have been made to palliate the affliction which could not be eradicated; and cannot attempt to indicate the never ending, constantly recurring, difficulties and anxieties which are encountered by those charged with the management.

The main principles of the regime of this Institution have been established for many years; and the efforts of every succeeding year have been directed to their more complete and extended application. Since 1842 there has been an entire disuse of all articles for mechanically restraining the limbs of patients; and every available and justifiable method has been adopted for making the contrast between the customs and amenities of ordinary society, and the discipline established, as narrow and as little irksome as possible. This regime has been examined by the present illustrious Chairman of the Lunacy Commission of England, the Earl of Shaftesbury, who expressed his approbation of what he characterized as the "humane system" pursued.

This regime recognizes the fact that, when an individual crosses the threshold of an Asylum, he does not necessarily surrender all his freedom of action, nor is he expected to renounce all the tastes

and habits which have ministered to his happiness in other days. His freedom and his pleasures are curtailed only in that precise measure which are imperatively demanded as essential to safety or cure. The inmate of an Asylum has his recognized and legitimate rights, and his curator has corresponding duties, and if these rights are unrecognized and these duties neglected the patient is persecuted or tyrannized over. If a wish be expressed or a demand made, either the point at issue must be conceded, or the refusal must be based upon reasonable and conscientious considerations. Arbitrary authority must be scrupulously prevented from assuming the position of necessary and judicious treatment and discipline. It is the minority only of the inmates of an Asylum in whom the mind is totally wrecked or obscured. The majority can think, and feel, and act, within a limited sphere, precisely as they were accustomed to do before infirmity assailed them. The extraordinary and multifarious statements which are heard in an Asylum, during a casual visit, are apt to be considered as the common and only characteristic of the minds of the inhabitants. If such were really the case the labours of those upon whom devolves the management would be immensely simplified, and they would be delivered from many embarrassing and painful positions. There are, however, tongues which the casual visitor never hears; individuals whose sensitive feelings induce them to shrink away from the observation of the stranger and the inquisitive, whose perception of rectitude and honour is unimpaired, who require our attention, and whose treatment must receive the greatest delicacy, tact, and judgment, at our hands. To distinguish between the real and the simulated improvement; to detect the cunning and dexterous manœuvre under the guise of the honourable and sincere pledge; to define the limits of safety in order to the prevention of unnecessary irritation, discomfort, and severity of discipline, are constant problems for our solution. As in society at large, so also in an insane community, duplicity in some, and truth and elevated sentiment in others are to be found, and it is one of the charms of the modern ameliorations in the management of the insane that this fact has been recognized. Routine, cold, and unsympathizing methods of management are

condemned as intolerable, and the benevolent rule has been established that the insane must be treated, as nearly as is possible, like rational and responsible beings. That occasionally events will occur to disappoint and discourage is to be expected, but it is consolatory and cheering to be assured that the abolition of the late prison-like and unconciliating discipline, which was prompted by a mistaken and exaggerated idea of danger, has not the effect of multiplying these. They rarely follow the scrupulous observance of the instructions and rules prescribed.

The total number of patients in the Institution during the year has been 242. The average number under treatment has been 205.

The number discharged recovered during the year has been 53.4 per cent. of the cases admitted. This proportion is somewhat above the average. The total number discharged cured during the whole career of the Asylum is 45.59 per cent. of the total admissions.

The general health of the patients has been remarkably good during the year, with an exemption from every kind of epidemic disorder. The mortality during the year has been 4.3 per cent. of the daily average number of patients resident. If the proportion be calculated upon the total number of patients in the Institution during the year, the mortality is shown to have been 3.7 per cent. If it be recollected that all lunatics are in a state of disease; that they are rarely sent until all active measures have been applied in vain, and it is found impossible to treat or manage them at home; and that the two prevailing conditions of the nervous system, viz., prolonged excitement in some cases, and loss of tone in others, weaken the powers of vital resistance to morbid impressions, and predispose to the incursion of other maladies, it is matter for thankfulness that among individuals so circumstanced the proportion of deaths should have been so small. How low this rate really is will be best judged of by comparing it with the rate ascertained for the general population. A recent report of the Registrar-General states that the mortality for a period of ten years has averaged annually $3\frac{1}{4}$ per cent.

Four males and five females have died during the year. Of these deaths, one resulted from apoplexy; two from general paralysis;

one from pulmonary consumption ; one from phlegmonous erysipelas ; one from dysentery ; two from marasmus ; and one resulted from a self-inflicted cause.

The ages of the forty-three individuals admitted during the past year varied from fourteen to seventy. The duration of their maladies previously to admission varied from one week to ten years. This group of patients presented all the marked forms and features of the disease, and in varying degrees of intensity or aggravation. If we regard them as arranged into four classes, according to the more prominent characteristics presented at the time of admission, we shall find the first class to comprise ten individuals, who were in a state of maniacal excitement ; regardless of all the proprieties of humanity, and of all consequences ; impelled by indiscriminate and ungovernable passion ; rarely sleeping ; loudly declaiming ; their ideas flowing in a confused and incoherent stream ; and possessing astonishing powers of muscular activity, endurance, and energy. The second group comprises nine individuals, in whom melancholy and despair are the distinguishing features ; incapable of hope and social enjoyment ; who are absorbed in the contemplation of impending and unavoidable ruin ; have lost all sympathy with the world and its aspirations ; regarding life as an intolerable burden ; themselves as the ministers and workers of the direst iniquity, and the heirs of perdition ; and who anxiously and perseveringly seek for the means summarily to extinguish a state of anguish unparalleled perhaps in the category of suffering. Some accuse themselves of having held a real and personal communication with evil spirits ; in obedience to whose promptings they maintain that they have perpetrated all manner of abominations, and are destined to scatter still more mischief and misery in the world. These afflicted persons represent the class of demoniacs and sorcerers of former times. They will not hesitate to affirm themselves to be the cause of any unavoidable suffering or disappointment they may see around them ; an epidemic, the toothache, the potato disease, all originated in the malevolence with which they imagine themselves to be endowed. It is a point of the deepest interest to remember that in times when mental disease was little understood, the morbid confessions of similarly afflicted persons were taken cognizance of by the magistrat ,

and treated as punishable realities. The third division of the cases admitted comprises five individuals, who are monomaniacs; whose characteristic feature is the partial and circumscribed nature of their maladies: who think logically within certain limits, but who display incapacity and delusion when a certain sentiment is appealed to, or a given series of ideas is suggested. All these individuals imagined themselves the victims of plots, either for the destruction of life, or for ruining their fortunes or characters. They were dangerous on account of the extreme measures to which they were prepared to resort in order to defend themselves from their imaginary foes. The fourth and largest division numbers eighteen individuals. A general intellectual impairment or decay, technically termed dementia, is the distinguishing character. The individuals thus afflicted number two-fifths of the cases admitted. This is the most intractable form of the disease. It usually betokens grave disease of the nervous centres, and is frequently accompanied by a prostration of the vital energies, and imperatively demanding the generous and invigorating regimen which a well-appointed Asylum secures. This class comprises all shades and degrees of incapacity and dependence. In some the wreck of mind is complete, and the voluntary powers are suspended; in others there are the remains of former capabilities and capacities for enjoyment, which it is a duty carefully to cherish and invigorate. Many of them have been reduced prematurely to the state of second childhood; and the nature of their habits depends very much upon the care and watchfulness bestowed upon them. To such individuals an Asylum becomes a school for moral and physical culture; the attempt is made to raise up and strengthen faculties and powers which have been broken down and prostrated, and to supply that occupation and those means of enjoyment which are suited to the peculiar conditions present. The results following the judicious treatment of this class of patients affords an illustration of the leading principle in the social reform movements of the present day,—that in order to the moral elevation of a community, it is absolutely necessary to improve and cultivate its physical condition.

These general and prominent features of the individuals received into our community, during the past year, present an outline of

the mass of affliction to which the Institution has administered assistance. Among individuals so variously afflicted, tortured in many instances by tendencies and impulses so desperate and impatient of control, it seems at first view difficult to imagine how order and system can be sufficiently introduced to permit the application of the necessary medical treatment. The sources of failure and disappointment are numerous; and success in the work demands all the patience and watchfulness which a sense of the sacredness of the duty can alone call forth. It is, moreover, essential to success, that these sentiments should be communicated to the attendants and servants. It is not enough that the heads of an Asylum concentrate their whole attention upon the peculiar maladies of their charges, believing that their duty is fully and conscientiously discharged after they have issued a given number of orders and prescriptions. The subordinates, to whom the execution of these directions are entrusted, require to be watched and trained with the utmost care. The responsibility imposed upon them is of the highest possible moment; and in proportion to its gravity is the necessity for cultivating and subjecting to discipline those habits of thought and behaviour which are requisite. The Attendant occupies the double office of a custodier and a companion of his charges. It is of consequence that a feeling of confidence and friendliness should be established, but if these feelings be carried beyond certain limits, and indulgently exercised there is danger of abuse from misplaced confidence. To keep this danger ever in view whilst inculcating kind, forbearing, and gentle intercourse requires reiterated injunctions and admonitions. If, on the other hand, becoming prudence and conciliation are allowed to degenerate into stern reserve and asperity of manner, the comfort and happiness of the patients are compromised, and the object in view again frustrated. Tact, with much of the "*suaviter in modo et fortiter in re,*" are required in an attendant. Tact in acquiring the confidence and respect of his charges, and in detecting their motives and tendencies; active benevolence, giving a readiness to improve every opportunity for ministering to their comfort; and a conscientious firmness in exacting a scrupulous performance of the treatment prescribed. The position frequently becomes most trying.

The condition upon which he holds his situation is the control and subjugation of his own feelings and temper when assailed with unreasonable antipathies, deception, and violence; the repetition of kind offices and attentions which are received by ingratitude and misrepresentation; and the extinction of the temptation to retaliation in the midst of reiterated occasions calculated to excite it. Failure to fulfil these conditions is denounced as a proof of incapacity, and visited by immediate dismissal. To secure the maintenance of such services requires constant surveillance. It is obvious that the individuals bearing this strain upon the mind and feelings require to be followed, instructed, cautioned, and encouraged at every step of their progress. This becomes a most onerous duty for those entrusted with the management, and demands their most anxious attention.

A Report such as this cannot be expected to embody a detail of all the remedial measures pursued, in addition to a statistical compilation of the results which have followed their application. The purely medical treatment is only one division of the series of measures essential in the curative process. All the items of this series are mutually dependent, and each one indispensable. Insanity is not cured by the unaided exhibition of medicaments. The resources of the *materia medica* must be assisted by careful arrangements for moral treatment,—comprising occupation, instruction, and amusement, together with the securities for perfect cleanliness, judicious dietary, clothing, exercise, and many other requisites which combine to form a perfectly organized system. If, unfortunately, it cannot be asserted that the adoption of the numerous expedients invariably leads to the restoration of reason, it can undoubtedly be said that in all cases the misery of the morbid mind can be softened and palliated by them. To make the utmost possible use of the faculties which remain unclouded; to provide those means of enjoyment which are still available; and to endow an Asylum with as many of the characters and comforts of home as is consistent with the end in view, are duties equally due to the incurable as to the curable. And if this boon is to be procured simply by the expenditure of a small additional outlay upon the arrangements, how ungenerous and indefensible would it be to withhold those appliances

from the poverty-stricken insane. It is, nevertheless, thought by many whose views regarding this class of individuals are governed by considerations of economy rather than by the dictates of a benevolent propriety, that much of this machinery partakes of the nature of luxury and is superfluous, and that there is room for retrenchment. The class of lunatics to which this statement is usually applied is that composed of those unfortunates the majority of whom, in point of mental capacity, are only partially separated from the men of the world, while the others are almost totally bereft of the features of humanity. They are regarded as the incurable class. It is imagined that there is little difference between the requirements of these gravely afflicted persons, and those of the poverty-stricken individuals who seek the shelter of a poor's-house. If there be error or inhumanity in such an opinion it is not irrelevant, it is, in fact, a duty to allude to it in this place. When an individual is crushed by the conjoined operation of poverty and insanity, the quality of the relief afforded by the public is a matter for serious consideration. Is it incumbent to minister consolation and healing influences to such distress, or is it enough simply to give bread to eat? Consider the difference in the condition of the sane and insane pauper. The one enjoys freedom of action, and is always encouraged by the prospect of future comforts as the reward of exertion. A temporary physical aid is all he requires. The other loses almost everything that makes life agreeable—his liberty, his hopes, and capabilities of enjoyment. The one is made dissatisfied with his lot as a security against idleness and abuse. To apply the same rule to the other unfortunate, which is virtually done when it is attempted to curtail the moral and physical influences essential to the palliation of his affliction, is in reality to "bruise the broken reed," and to commit an error fraught with inhumanity. It is no justification to affirm that the extra advantages of a good Asylum fail in the majority of instances ultimately to remove the fatuity or delusion of the class of patients in question, and that the benefit derived is merely partial or temporary. Charity suggests, however, that if we have the power only partially or temporarily to strengthen the weak, to soothe the deluded and hopeless, to enlighten the frenzied, and cherish a feeling of

resignation to the will of God, we "cannot pass by upon the other side."

An idea of the relative curability of the different forms of insanity will be gained by comparing the number and characters of the cases admitted, with those of the cases discharged recovered during the past year. Ten patients have been admitted in a state of mania; and ten such individuals have recovered and been discharged, being cent. per cent. of recoveries for this form of the malady during the year. The recoveries among the class of monomaniacs have been 60 per cent. of the admissions. Those afflicted with melancholia have recovered in the proportion of 44 per cent. And, in the class of sufferers from dementia, the recoveries have amounted to 31 per cent. of the cases admitted during the year.

The medical treatment which has been followed has been governed by those principles which the advancing science of the present day has announced and established. Next in importance to the removal of the cause and local complications, as steps in the treatment stand the sedative agents or calmatives of the nervous system. The most valuable of these, in the treatment of mania, has been found to be a combination of the bath proposed by Briere de Boismont of Paris, along with leeches applied over the surface of the shaved head. The efficacy of the bath has been found to be increased by the simultaneous application of leeches. The patient is placed in a warm bath at 90 degrees, and, while there, one, two, or three dozen leeches are applied over the surface of the head. When these are removed the blood is allowed to flow, while the individual is still in the bath, and a stream of water at 65 degrees is kept flowing over the head. The effect of these measures is to allay excitement, and to induce sleep. Another method of inducing the same result in certain cases is to administer grain doses of tartar emetic every three hours, to keep up evident nausea and depression of the circulation for some time, and then to commence the exhibition of the solution of hydrochlorate of morphia, beginning with half-drachm doses, and increasing them gradually to a drachm and a half, given with a frequency graduated according to the powers of the patient.

All medical men, accustomed to observe the progress and nature of mental disease, are unanimous in the opinion that removal to an Asylum is an important auxiliary to the remedial measures demanded; and that, in many instances, it is the leading and most potent measure in determining recovery. Still, some inexperienced persons hold the opinion that, however calculated such establishments may be to treat the diseased mind, during the period when it is engrossed by frenzied passion, and while the intelligence is incapable of appreciating external realities, they must be baneful in their operation during convalescence, and when the mind has begun to emerge from the delirium or utter darkness in which it was obscured. It is thought by these inexperienced persons that the shock to the opening consciousness upon finding itself in the presence of misery, similar to that from which it has just escaped, has a tendency to induce a renewal and confirmation of the original excitement. Experience proves this opinion to be utterly unfounded and gratuitous. The transition state from delusion and excitement to accuracy and calmness is always accompanied by a series of painful impressions and misgivings, leading the individual to conjecture the actual nature of his unfortunate condition. At such a moment it is not the misery of others which attracts and absorbs his attention. His thoughts are engrossed by painful reminiscences of the ordeal through which he has passed. The painful impressions come from within, not from objects surrounding him. And, instead of suffering injury from the moral atmosphere of such a residence, he finds himself provided with that support, protection, and assistance of which he feels the necessity at such a crisis. The sufferings are frequently so great while the disease is running its course, and the feeling of joy and thankfulness so vivid when the sad burden has been removed, that the place in which, and the persons among whom, this happy and momentous change has been determined are regarded by the convalescent with feelings of which the inexperienced have no idea. A lady recently recovered, and left the Institution after a short residence. Her malady, at the time of her admission was marked by deep despondency, disgust at life, a suicidal impulse, with delusions in regard to her present and future conditions. Her sufferings were obviously

of the saddest nature. Gradually, reason, hope, and love of life, brightened upon her. After convalescence was fully established, and while still an inmate, she spontaneously referred, during conversation, to her late career of misery which had terminated so happily. She went on to state that, previously to her removal from home, her hopelessness and carelessness were so profound that she was quite inadequate to the performance of a single duty. The necessity for exertion on her part, yet without the capacity to act, was a source of constant reproach to her, and aggravated her other torments. She described the removal from her home as having been accompanied by a feeling of relief at finding herself freed from the responsibility of duties which she was perfectly powerless to discharge. The most important of her remarks were those bearing upon the question we have been considering, viz,—the feelings of the convalescent insane while resident among the insane. She stated that during the progress of convalescence, instead of being depressed or disturbed by the many forms of affliction coming under her observation, she was buoyed up by feelings of deep gratitude that her lot was so much better than that of others whom she saw yet struggling with many sorrows. These she assisted and consoled, and found much happiness in the charitable task. Such confessions are not uncommon. It is a mental process of this kind which prompts that reluctance to leave the Asylum after recovery which is so often observed. Facts and testimonies such as these afford a conclusive refutation of an error assigned by the inexperienced for deferring or refusing the adoption of a measure frequently of great power in determining the successful issue of treatment.

Among other expedients adopted occupation and amusement must ever hold a prominent place. By combining muscular exertion with judiciously selected mental exercise, it is possible to soothe or suspend morbid feelings, and to abate the vividness of delusion; in this way the double advantage is achieved of giving tone to the body, and bringing about a lucid interval. The Institution is admirably provided with means for affording exercise in the open air. These have been recently increased by the erection of four extensive covered promenades in the grounds appropriated to the higher class of patients. An additional one is also in course of erection in the air-

ing grounds of the poorer classes. A corps of the patients is daily engaged in the garden and agricultural operations, by whom the Institution has been supplied with vegetables, fruit, and flowers, and much ornamental work completed. Nineteen weavers' looms have been kept in action by male and female patients, who have manufactured 31,025 yards of sheeting, and 17,545 yards of bagging during the year. Tailoring, shoemaking, road-metal making, weft winding, various kinds of needle-work and knitting, and much other remunerative labour, has been done by the patients. Carriage drives and excursions into the country are the favourite recreations of the higher classes of inmates. Balls and soirees have been held occasionally. Groups of patients have also attended concerts and lectures, and a variety of other public entertainments in the town. The most popular scheme of the Institution for affording a combination of healthy out-of-door exercise with beneficial amusement, is the *fête-champêtre* held in the grounds of the Asylum three afternoons in the week, when the weather will permit. The dancing, promenading, and music, engaged in upon these occasions, is a constant source of enjoyment for both sexes. The numbers joining in this recreation seldom fall below one hundred. The music is supplied by insane musicians. The combination of instruments is sufficiently incongruous, but wonderfully effective in giving the Scotch reels and strathspeys, as is abundantly evidenced by the active heels and pleased countenances of the dancers. A school for instruction in reading, spelling, and arithmetic, is daily open, conducted by an insane schoolmaster, who engages in the occupation with alacrity, and seems to forget at the moment that he is George the Fifth, the rightful heir to the throne of Britain. Such is an outline of the efforts by which the year has been marked, with the results which have followed them. And if these results have not in all cases corresponded with the hopes and expectations entertained, the system pursued must still be regarded as the sincere attempt to embody and apply all the suggestions of science and humanity.

PATRICK NIMMO, M.D.

T. T. WINGETT, F.R.C.P.E.

STATISTICAL TABLES

FOR THE

YEAR ENDING 20TH JUNE 1853.

(The Year ending on the 3d Monday of June, agreeably to Charter.)

TABLE I.

YEARLY STATEMENT.

From 21st June 1852, to 20th June 1853.

		Males.	Females.	Total.
Remained 21st June 1852,	-	101	98	199
Admissions during the above period,	-	22	15	37
Re-admitted,	- - -	1	5	6
Total,	- - -	124	118	242
<i>Discharges and Deaths—</i>				
Discharged cured,	- - -	10	13	23
Do. improved,	- - -	2	5	7
Do. by desire,	- - -	2	0	2
Died,	- - -	4	5	9
Total,	- - -	18	23	41
Remaining 20th June 1853,	-	106	95	201
Total,	-	124	118	242
Daily average number of patients in the House,	- - -	107	98	205

II.—TABLE OF CAUSES OF DISEASE OF PATIENTS ADMITTED DURING
THE YEAR.

	Males.	Females.	Total.
Disappointment, - - -	4	2	6
Grief, - - - - -	0	5	5
Fright, - - - - -	1	0	1
Intense mental exertion, - - -	1	1	2
Solitude, - - - - -	1	0	1
Drunkenness, - - - - -	4	2	6
Puerperal state, - - - - -	0	3	3
Uterine disease, - - - - -	0	1	1
Suppression of discharge from Ear, -	1	0	1
Spermatorrhæ, - - - - -	1	0	1
Epilepsy, - - - - -	1	0	1
Unknown, - - - - -	9	6	15
Hereditary predisposition was ascertained in	6	3	9

III.—ADMISSIONS RELATIVE TO AGES.

	Males.	Females.	Total.
From 10 to 15 years of age, - - -	1	0	1
15 to 20 ... - - -	1	0	1
20 to 25 ... - - -	4	2	6
25 to 30 ... - - -	3	2	5
30 to 35 ... - - -	1	2	3
35 to 40 ... - - -	3	2	5
40 to 45 ... - - -	2	2	4
45 to 50 ... - - -	2	4	6
50 to 55 ... - - -	4	4	8
55 to 60 ... - - -	1	2	3
60 to 65 ... - - -	1	0	1
	—	—	—
	23	20	43

IV.—FORMS OF DISEASE OF PATIENTS ADMITTED DURING THE YEAR.

						Males.	Females.	Total.
Mania,	-	-	-	-	-	5	5	10
Dementia,	-	-	-	-	-	10	9	19
Monomania,	-	-	-	-	-	4	1	5
Melancholia,	-	-	-	-	-	4	5	9
						—	—	—
						23	20	43

V.—ADMISSIONS RELATIVE TO THE CIVIL CONDITION.

						Males.	Females.	Total.
Married,	-	-	-	-	-	10	6	16
Unmarried,	-	-	-	-	-	13	9	22
Widows,	-	-	-	-	-	0	5	5
Widowers,	-	-	-	-	-	0	0	0
						—	—	—
						23	20	43

VI.—DURATION OF DISEASE PREVIOUSLY TO ADMISSION.

						Males.	Females.	Total.
Not exceeding 1 month,			-	-		5	8	13
... 3 ...			-	-	-	5	4	9
... 6 ...			-	-		5	1	6
... 9 ...			-	-	-	0	1	1
.. 1 year,			-	-		1	0	1
... 2 ...			-	-	-	3	2	5
... 3 ...			-	-		1	1	2
... 6 ...			-	-	-	2	0	2
... 10 ...			-	-		0	2	2
Unknown,			-	-	-	1	1	2
						—	—	—
						23	20	43

VII.—TIME OF TREATMENT OF THE 23 PATIENTS DISCHARGED CURED.

					Males.	Females.	Total
Not exceeding 1 month,		-	-	-	0	0	0
... 3 ...		-	-	-	3	3	6
... 6 ...		-	-	-	2	4	6
... 9 ...		-	-	-	1	2	3
... 1 year,		-	-	-	2	1	3
... 2 ...		-	-	-	1	0	1
... 3 ...		-	-	-	0	2	2
... 4 ...		-	-	-	1	0	1
... 11 ...		-	-	-	0	1	1
					<hr/> 10	<hr/> 13	<hr/> 23

VIII.—CAUSES OF DEATH.

					Males.	Females.	Total.
Apoplexy,	-	-	-	-	1	0	1
General Paralysis,		-	-	-	1	1	2
Marasmus,	-	-	-	-	1	1	2
Pulmonary Consumption,	-	-	-	-	1	0	1
Dysentery,	-	-	-	-	0	1	1
Phlegmonous Erysipelas,	-	-	-	-	0	1	1
Suicide,	-	-	-	-	0	1	1
					<hr/> 4	<hr/> 5	<hr/> 9

IX.—TABLE OF CURES AT DUNDEE ASYLUM FROM 1820 TO 1853.

Admissions from 1st April 1820, to 20th June 1853.			Cured.	Per Cent.
Number admitted, 1498,	-	-	683	45.59

X.—RETURN OF PATIENTS ADMITTED ANNUALLY INTO THE DUNDEE LUNATIC ASYLUM ESTABLISHMENT,

FROM ITS OPENING UPON THE 1ST APRIL 1820, TO THE 20TH OF JUNE 1853, INCLUDING RE-ADMISSIONS, TOGETHER WITH THE CURES, DISCHARGES, AND DEATHS.

No. Years	Remained.			Admitted.			Total.			Discharged.						Died.			Remaining 20th June, 1853.					
	M.		T.	M.		F. T.	M.		F. T.	Cured.			Relieved.			M.		F. T.	M.		F. T.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1	1820	22	28	50	22	28	50	3	5	8	1	1	2	2	2	1	0	1	1	0		
2	1821	16	37	12	24	36	28	33	61	5	8	13	4	4	8	1	1	0	1	1	0	1		
3	1822	19	38	19	32	51	38	32	70	4	4	8	2	5	7	0	1	1	2	0	0	2		
4	1823	32	54	17	20	37	49	42	91	8	5	13	1	2	3	0	1	1	0	0	0	0		
5	1824	40	74	28	24	52	68	58	126	14	15	29	8	2	10	4	2	6	1	3	4	4		
6	1825	43	88	28	29	57	71	67	138	15	13	28	3	7	10	1	2	3	2	0	2	2		
7	1826	51	98	24	10	34	75	57	132	10	11	21	4	6	10	3	2	5	1	2	3	3		
8	1827	59	96	20	15	35	79	52	131	8	3	11	9	6	15	2	0	2	3	1	4	4		
9	1828	60	43	103	17	14	31	57	134	10	9	19	5	3	8	6	4	10	1	0	1	0		
10	1829	56	41	97	15	18	33	71	130	8	7	15	6	4	10	2	2	4	0	0	0	0		
11	1830	55	46	101	15	18	33	70	134	8	8	16	5	3	8	2	1	3	0	1	1	0		
12	1831	55	52	107	21	16	37	76	144	2	4	6	5	5	10	2	5	7	2	0	2	2		
13	1832	67	54	121	23	24	47	90	168	11	13	24	7	4	11	7	3	10	2	2	3	5		
14	1833	65	58	123	22	18	40	87	163	9	8	17	2	6	8	6	4	10	2	1	3	3		
15	1834	70	58	128	19	21	40	89	168	9	13	22	6	3	9	4	4	8	0	1	1	1		
16	1835	70	59	129	20	18	38	90	167	7	4	11	7	7	14	6	2	8	2	3	5	3		
17	1836	70	64	134	24	16	40	94	174	8	8	16	9	8	17	5	5	10	3	0	3	5		
18	1837	72	59	131	30	12	42	102	173	13	3	16	2	3	5	7	1	8	2	3	5	5		
19	1838	80	64	144	26	27	53	106	197	14	9	23	4	7	11	6	5	11	3	2	5	5		
20	1839	82	70	152	29	28	57	111	209	23	20	43	3	5	8	5	2	7	2	3	3	5		
21	1840	80	71	151	33	25	58	113	209	6	16	22	4	3	7	5	5	8	3	1	4	4		
22	1841	98	74	172	34	19	53	132	225	16	11	27	8	2	10	8	2	10	1	2	3	8		
23	1842	100	78	178	29	32	61	129	239	21	10	31	9	7	16	5	4	9	2	5	7	7		
24	1843	94	89	183	25	22	47	119	230	6	14	20	8	7	15	10	2	12	1	3	4	4		
25	1844	95	88	183	34	26	60	129	243	9	9	18	7	8	15	8	6	14	7	8	15	8		
26	1845	105	91	196	24	26	50	129	246	15	15	30	8	7	15	6	2	8	5	2	7	7		
27	1846	100	93	193	28	29	57	128	250	7	19	26	10	11	21	5	2	7	7	6	13	13		
28	1847	106	90	196	23	29	52	129	248	13	13	26	1	6	7	14	5	19	5	4	9	9		
29	1848	101	95	196	22	24	46	123	242	11	14	25	3	7	10	7	5	12	5	5	10	10		
30	1849	102	93	195	30	32	62	132	257	13	15	28	4	10	14	8	3	11	7	7	14	14		
31	1850	107	97	204	32	25	57	139	261	11	13	24	10	11	21	12	2	14	11	7	18	18		
32	1851	106	96	202	19	21	40	125	241	16	8	24	3	6	9	5	5	10	8	9	17	17		
33	1852	101	98	199	23	20	43	124	242	10	13	23	4	5	9	4	5	9	15	12	27	27		
				787	711	1498				343	340	683	172	181	353	168	93	261	106	95	201			

XI.—THE TIMES OF THE PATIENTS' DEATH AFTER THEIR ADMISSION INTO
THE ASYLUM FROM THE OPENING OF THE INSTITUTION
TO JUNE 20, 1853.

Times of Death.				Males.	Females.	Total.
Within 1 fortnight,	-	-	-	10	8	18
... 1 month,	-	-	-	8	2	10
... 3 ...	-	-	-	19	10	29
... 6 ...	-	-	-	11	5	16
... 9 ...	-	-	-	10	4	14
... 1 year,	-	-	-	7	2	9
... 2 ...	-	-	-	27	14	41
... 3 ...	-	-	-	12	3	15
... 4 ...	-	-	-	14	5	19
... 5 ...	-	-	-	4	4	8
... 6 ...	-	-	-	7	4	11
... 7 ...	-	-	-	6	3	9
... 8 ...	-	-	-	2	6	8
... 9 ...	-	-	-	4	4	8
... 10 ...	-	-	-	1	3	4
... 11 ...	-	-	-	1	2	3
... 12 ...	-	-	-	2	2	4
... 13 ...	-	-	-	1	1	2
... 14 ...	-	-	-	6	1	7
... 15 ...	-	-	-	3	0	3
... 16 ...	-	-	-	2	1	3
... 17 ...	-	-	-	0	3	3
... 18 ...	-	-	-	2	0	2
... 19 ...	-	-	-	2	1	3
... 20 ...	-	-	-	0	0	0
... 21 ...	-	-	-	0	1	1
... 22 ...	-	-	-	1	0	1
... 23 ...	-	-	-	0	2	2
... 24 ...	-	-	-	1	1	2
... 25 ...	-	-	-	0	0	0
... 26 ...	-	-	-	1	0	1
... 27 ...	-	-	-	0	0	0
... 28 ...	-	-	-	0	1	1
... 29 ...	-	-	-	1	0	1
... 30 ...	-	-	-	2	0	2
... 31 ...	-	-	-	0	0	0
... 32 ...	-	-	-	0	0	0
... 33 ...	-	-	-	1	0	1
				168	93	261

II.—ANNUAL PERCENTAGE OF DEATHS,

From 16th June 1830, to 20th June 1853.

Years.	Average number of Patients.			Number of Deaths.			Percentage of Deaths.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1830	57	44	101	2	2	4	3.51	4.52	3.95
1831	55	48	103	2	1	3	3.63	2.08	2.91
1832	61	52	113	2	5	7	3.27	9.61	6.19
1833	65	59	124	7	3	10	10.76	5.08	8.06
1834	70	58	128	6	4	10	8.57	6.89	7.81
1835	68	58	126	4	4	8	5.88	6.89	6.34
1836	70	59	129	6	2	8	5.57	3.39	6.20
1837	74	61	135	5	5	10	6.75	8.19	7.48
1838	77	60	137	7	1	8	9.09	1.66	5.53
1839	84	66	150	6	5	11	7.19	7.57	7.83
1840	87	70	157	5	2	7	5.74	2.85	4.45
1841	89	75	164	5	3	8	5.61	3.99	4.87
1842	102	77	179	8	2	10	7.84	2.59	5.58
1843	96	84	180	5	4	9	5.20	4.80	5.00
1844	97	90	187	10	2	12	10.31	2.22	6.41
1845	100	90	190	8	6	14	8.00	6.66	7.37
1846	105	96	201	6	2	8	5.70	2.08	3.90
1847	105	95	200	5	2	7	4.70	2.01	3.05
1848	103	94	197	14	5	19	13.61	5.30	9.60
1849	104	94	198	7	5	12	6.70	5.30	6.00
1850	107	93	200	8	3	11	7.47	3.02	5.05
1851	108	96	204	12	2	14	11.00	2.00	6.85
1852	107	99	206	5	5	10	4.67	5.00	4.85
1853	107	98	205	4	5	9	3.73	5.10	4.39
	2098	1816	3914	149	80	229			

Average annual mortality from 1830 to 1853, inclusive.

Males.

Females.

Total.

7.1

4.4

5.85