

Report of the directors of the Royal Lunatic Asylum, infirmary and dispensary of Montrose, for the year ending 1st June, 1856.

Contributors

Royal Lunatic Asylum, Infirmary, and Dispensary of Montrose.
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REPORT
OF
THE DIRECTORS
OF THE
ROYAL LUNATIC ASYLUM,
INFIRMARY AND DISPENSARY,
OF MONTROSE,
FOR THE YEAR ENDING 1ST JUNE, 1856.

INSTITUTED 1782.

MONTROSE:
PRINTED BY JAMES WATT,
35 HIGH STREET.

MDCCCLVI.

House Committee of Asylum.

PROVOST MACKIE.

MESSRS ALEXANDER COWIE,

ROBERT SMART.

WILLIAM BEATTIE.

C. H. MILLAR.

PROVOST MACKIE, *Convener.*

Infirmary Committee.

MESSRS ROBERT MILLAR.

ALEXANDER COWIE.

JOHN GORDON.

REV. WILLIAM MACDERMOTT.

MR ROBERT COWIE.

MR MILLAR, *Convener.*

Royal Lunatic Asylum, Montrose.

INSTRUCTION AND AMUSEMENT.

OUR SUMMER ARRANGEMENTS, 1856.

- Feb. 22—CONCERT.—Total Abstinence Society's Flute Band.
„ 29—LECTURE.—A Botanical Tour—its objects, accidents, and incidents.....*Dr. Gilchrist.*
March 7—LECTURE.—First Principles of Matter.....*D. Low, Esq.*
„ 14—LECTURE.—The Rainbow—its physical and moral aspects.....
Rev. Alex. Anderson.
„ 21—CONCERT.—The Montrose Choral Society.
„ 28—LECTURE.—Montrose Bay—its Geology.....*Dr. Gilchrist.*
April 4—LECTURE.—Music, with illustrations of its national peculiarities.....*J. H. Donnan, Esq., Ed. Review.*
„ 11.—LECTURE.—The Botany of the Breakfast Table.....
W. L. Lindsay, Esq., M.D., Perth.
„ 18.—CONCERT.—Total Abstinence Society's Vocal Choir.
„ 25.—LECTURE.—Montrose Bay—its Botany.....*Dr. Gilchrist.*
May 2.—LECTURE.—Moss and the Microscope.....*A. Croall, Esq.*
„ 9.—LECTURE.—Palestine.....*Rev. Robert Smith.*
„ 16.—CONCERT.—The Asylum Band.
„ 23.—LECTURE.—Montrose Bay—its Zoology.....*Dr. Gilchrist.*
„ 30.—LECTURE.—The South Seas.....*Rev. Marshall Randles.*
June 6.—LECTURE.—The Philosophy of Breathing. *S. Lawrence, Esq. M.D.*
„ 13.—CONCERT.—The Band of Hope Juvenile Flute Band.
„ 20.—LECTURE.—A Geological Trip—its objects, accidents, and incidents.....*Dr. Gilchrist.*
„ 27.—LECTURE.—The Bible—its national influence. *Rev. W. MacDermott.*
July 4.—LECTURE.—Development of Art—with illustrations of its national peculiarities.....*G. R. Marshall, Esq., Oxford.*
„ 11.—CONCERT.—As a Finale, a grand Vocal and Instrumental Concert, by an Amateur Choir and Orchestra.

The Lectures will begin each evening at half-past Six o'Clock; and such as admit of it, will be illustrated by means of Specimens, Diagrams, Microscopes, Phantasmagoria, &c.

[ALEX. DUNN, PRINTER, MONTROSE.]

INSTRUCTION AND AMUSEMENT.

OUR SUMMER ARRANGEMENTS, 1886.

The Lectures will begin each evening at half-past six o'clock; and such as will be illustrated by means of specimens, Diagrams, Microscopes, lanterns, &c.

[ALEX. DUNN, PRINTER, MONTREAL.]

11.—CONCERT.—As a Finale, a grand Vocal and Instrumental Concert, by an Amateur Choir and Orchestra.	
4.—LECTURE.—Development of Art—with illustrations of its national peculiarities..... G. R. Marshall, Esq., Oxford.	
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20.—LECTURE.—A Geological Trip—its objects, accidents, and incidents..... Dr. Gilchrist.	
13.—CONCERT.—The Band of Hope Juvenile Flute Band.	
6.—LECTURE.—The Philosophy of Bread-making. St. Lawrence, Esq., M.D.	
30.—LECTURE.—The South Seas..... Rev. Marshall Randles.	
23.—LECTURE.—Montrose Bay—its Zoology..... Dr. Gilchrist.	
16.—CONCERT.—The Asylum Band.	
9.—LECTURE.—Palestine..... Rev. Robert Smith.	
2.—LECTURE.—Moss and the Microscope..... A. Crook, Esq.	
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7.—LECTURE.—First Principles of Matter..... D. Loze, Esq.	
incidents..... Dr. Gilchrist.	
29.—LECTURE.—A Botanical Tour—its objects, accidents, and incidents.....	
22.—CONCERT.—Total Abstinence Society's Flute Band.	

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LIST OF DIRECTORS OF THE ROYAL LUNATIC ASYLUM, &c.

June, 1856.

- The PROVOST and ELDEST BAILIE of MONTROSE.
 The FIRST and SECOND MINISTER of the parish of Montrose.
- 5 PATRICK ARKLEY, Esq. of Dunninald.
 DAVID SCOTT, Esq. of Brotherton.
 W. MACDONALD MACDONALD, Esq. of Rossie.
 The Right Hon. EARL of SOUTHESK.
 WILLIAM FORSYTH GRANT, Esq. of Ecclesgreig.
- 10 Sir JAMES CAMPBELL of Stricathro.
 ALEXANDER PORTEOUS, Esq. of Lauriston.
 THOMAS RENNY TAILYOUR, Esq. of Newmanswalls.
 JOHN DUNCAN, Esq. of Sunnyside and Parkhill.
 DAVID LYALL, Esq. of Gallery.
- 15 The Rev. JOHN EADIE, Minister of Dun.
 THOMAS HILL, do. Logie Pert.
 ROBERT MITCHELL, do. Craig.
 THOMAS MACINTOSH, do. St. Cyrus.
 JAMES HAY, do. Lunan.
- 20 WILLIAM NIXON, do. St. John's, Montrose.
 PATRICK CUSHNIE, do. Scots Episcopal Church, do.
 THOMAS C. SOUTHEY, do. St. Mary's Episcopal Chapel, do.
 WILLIAM MACDERMOTT, do. St. Peter's Episcopal Chapel, do.
- Messrs. JOHN ABERDEIN, Montrose.
- 25 WILLIAM JAMIESON, do.
 ROBERT MILLAR, do.
 ARCHIBALD FOOTE, do.
 DAVID BIRNIE, do.
- Captain ARCH. MACNEIL do.
- 30 Messrs. ROBERT TRAIL, do.
 GEORGE SMART, do.
 ROBERT BURNES, do.
 DAVID MACKIE, do.
 ALEXANDER COWIE, do.
- 35 DAVID WALKER, do.
 THOMAS BARCLAY, do.
 ROBERT WALKER, do.
 JAMES SMITH, R.N. do.
 JAMES M. PATON, do.
- 40 FRANCIS B. PATON, do.
 JAMES GORDON, do.
 ROBERT COWIE, do.
 ROBERT SMART, do.
 THOMAS NAPIER, do.
- 45 JOHN BOYD, do.
 JAMES BIRNIE, do.
 C. H. MILLAR, do.
 WILLIAM BEATTIE, do.
 JOHN GORDON, do.
- DAVID HILL, & GEORGE C. CHALMERS, Bankers, Joint-Treasurers.
 JAMES GILCHRIST, M.D., Medical Superintendent.
 DAVID JOHNSTON, M.D., Consulting Physician.
 WILLIAM COWAN, Medical-Assistant.
 JAMES NIDDRIE, Master.
 Mrs. WRIGHT, Matron.

*Annual General Meeting 2d Tuesday of June ; Monthly Meeting 1st
 Tuesday of each Month at 12 o'clock noon.*

ADAM BURNES, *Secretary.*

LUNATIC ASYLUM.

Abstract of the Treasurer's Accounts for the Year ending 1st June, 1856.

<i>Charge.</i>		<i>Discharge.</i>	
Interest Received	£207 10 11	Furniture and repairs	£304 10 11
Boards for Patients received	4815 3 5	Deterioration allowance	415 0 0
Received for Patients' clothing	61 1 7	Fen-duty, Taxes, &c.	170 15 6
		Salaries and servants' wages,	686 0 0
		Provisions, medicines, &c., as per detailed list,	2882 6 3
		Subscription to Infirmary,	150 0 0
		Gratuities, and expenses incurred on growing crop	15 11 7
		Carried to new account	449 11 8
	£5073 15 11		£5073 15 11

Montrose, 1st June, 1856.

(Errors Excepted.)

DAVID HILL, Treasurer.

INFIRMARY.

Abstract of the Treasurer's Accounts for the Year ending 1st June, 1856.

<i>Charge.</i>		<i>Discharge.</i>	
Interest Received	£78 17 10	Furniture and Repairs	£14 14 5
Annual Donations	£275 5 8	Deterioration, Fen Duty, Taxes, &c.	159 14 0
From Asylum funds	150 0 0	Salary to Medical Officers, and Servants' Wages	125 2 0
Board of Patients	£425 5 8	Provisions, Medicines, &c., as per Detailed List	£299 10 5
	17 1 6		432 12 0
Deficiency for past year	£521 5 0		
	210 17 5		
	£732 2 5		£732 2 5

Montrose, 1st June, 1856.

(Errors Excepted.)

DAVID HILL, Treasurer

Royal Lunatic Asylum, Montrase.

MEDICAL SUPERINTENDENT'S REPORT.

For the Year ending 1st June, 1856.

TABLE SHOWING THE GENERAL RESULTS OF THE YEAR.

	Admitted.		Cured.		Improved.		Unimproved.		Dead.		Under treatment.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	TOTAL
1855													
May 31											94	124	218
June 30.....	4	7	0	1	2	1	0	0	1	1	95	128	223
July 31.....	3	8	1	2	1	0	0	0	0	0	96	134	230
August 31.....	5	2	1	4	0	1	0	0	1	0	99	131	230
September 30	3	5	0	4	2	1	0	0	1	0	99	131	230
October 31	5	4	1	3	0	0	0	0	1	3	102	129	231
November 30	5	5	1	2	0	0	0	6	1	3	105	129	234
December 31	3	4	0	0	0	2	1	0	1	2	106	129	235
1856													
January 31	3	6	2	0	1	2	0	0	0	3	106	130	236
February 28.....	3	7	4	2	0	1	1	0	0	2	104	132	236
March 31.....	2	5	5	1	1	0	1	0	1	3	98	133	231
April 30.....	3	5	0	2	2	0	0	1	1	1	98	134	232
May 31	3	5	0	7	0	1	0	0	1	1	100	130	230
	42	63	15	28	9	9	3	1	9	19			
Total.....	105		43		18		4		28		100	130	230

DURING the past year there have been admitted into the house, 105 patients ; discharged, 65 ; and died, 28 ;—leaving, under treatment, on the 31st of May, 230 patients, of whom 100 are males, and 130 females.

The admissions, 105 in number, are 14 in excess of those admitted last year ; and 46 above, or nearly double, the number admitted the year previous.

The disproportion between males and females, 42 of the former to 63 of the latter, is still greater than was noticed last year ; so that the preponderance of females seems to be increasing.

Other details regarding the admissions will be found in the following tables.

TABLE I.—Shewing the ages of patients on admission.

	Males.	Females.
10 to 20 years.....	3	1
20 to 30 years.....	9	12
30 to 40 years.....	8	18
40 to 50 years.....	9	15
50 to 60 years.....	7	9
60 to 70 years.....	3	6
70 to 80 years.....	2	2
80 to 90 years.....	1	0
Total,.....	42	63—105.

TABLE II.—Shewing the number of attacks previous to admission.

	Males.	Females.
1st attack.....	23	28
2d attack.....	9	12
3d attack.....	8	11
4th, or more.....	2	10
Not known.....	0	2
	42	63—105

From this table it appears that about one-half of those admitted have had one or more previous attacks—a proportion, we believe, higher than is found in Asylums generally, and proportionally affecting our curative and mortality tables.

TABLE III.—Showing the time intervening between the incursion of insanity and the admission of the patient.

	Males.	Females		Males.	Females.
17 years.....	1	0	9 months.....	1	0
15 years.....	2	1	8 months.....	2	0
11 years.....	1	0	7 months.....	1	0
10 years.....	1	1	6 months.....	0	3
9 years.....	0	1	4 months.....	2	2
6 years.....	1	0	3 months.....	1	4
5 years.....	1	5	2 months.....	7	5
4 years.....	2	0	1 month.....	2	6
3½ years.....	0	1	5 weeks.....	1	0
3 years.....	1	0	3 weeks.....	4	6
2 years.....	0	2	2 weeks.....	4	6
1½ years.....	1	1	1 week.....	4	12
1 year.....	2	5	Not known....	0	2
	13	17—30		42	63—105

This table shows that nearly one-third of the patients had not been placed under treatment until periods varying from 1 to 17 years. This, however, only reveals half the truth; as every one acquainted with the subject knows well that relatives usually date the invasion of the disease from the period at which the symptoms become distinctly obvious, whereas weeks, months, in many cases years, have to be added in order to reach the time of its real origin.

TABLE IV.—Showing the forms of disease under which the patients laboured on admission.

	Males.	Females.
Acute mania.....	11	26
Chronic „	11	11
Epileptic „	2	0
Periodic „	0	4
Puerperal „	0	3
Melancholia.....	8	10
Imbecility.....	3	1
Acute dementia.....	1	0
Pyromania.....	0	1
Monomania of pride.....	2	2
Monomania of suspicion...	2	3
Monomania of ambition...	2	0
Monomania of superstition,	2	2
	42	63—105

TABLE V.—Showing the Causes of Disease of those admitted :

	Males.	Females.
Not known,	12	22
Intemperance,	6	8
Hereditary predisposition,	3	8
Disappointed affections,	1	4
Bodily diseases,	3	4
Bodily injuries,	3	1
Mental anxiety from bad conduct of relatives,	3	4
Mental anxiety on account of illness or death of relatives,	1	4
Adversity,	3	2
Fright,	3	0
Over study,	1	0
Lactation,	0	2
Religious doubts,	0	1
Mental agitation,	2	1
Solitary life,	0	1
Too early removal from Asylum,	1	1
	42	63—105

This table is confessedly imperfect, as all such tables are. Relatives frequently cannot assign any cause, and the one assigned is very seldom the right one. Hereditary predisposition has been indicated as the cause in those cases where it is known to exist, and to which no other cause has been assigned. It exists, however, in a number of other cases, as a predisposing influence in which other agencies have acted as exciting causes.

The discharges this year have been 65. Last year there were 55, and the year previous 34. The proportion of discharges to admissions is this year much the same as last, being about 61 per cent. In the previous year it was only $57\frac{1}{2}$.

There were 27 males to 38 females—the disproportion in the

discharges being less than in the admissions, but this may be accounted for by a large number of deaths amongst the females.

Of the whole number, 43 were cured—15 males and 28 females : 18 were improved—9 males and 9 females : and 4 were unimproved—3 males and 1 female.

During last Winter, our attention having been called to several disastrous results arising from the too early or unadvised removal of patients from the house, an analysis was made of all the patients discharged during our officiate, which, with its results, is here inserted :—

“ Analysis of patients discharged from the Asylum during 23 months, from 26th December 1853 to 30th November 1855 :—

“ During the above period, the patients in this Asylum had increased from 204 to 234, and there had been discharged 45 males and 50 females, in all 95 patients, of these 26 males and 29 females, 55 patients, were removed in accordance with the advice of the Medical Superintendent, while 19 males and 20 females, 40 patients, were taken away contrary to his advice.

“ Of the former class, 55 in number, 6 were removed to other Asylums who were only improved, whereas, the remaining 49 were cured. The results of those cured are as follows : not known 9, returned to the house 3—these are mostly patients who have had previous attacks, some of them having been in the house more than once. Two males are marked as doubtful, leaving 14 males and 17 females who continue well up to December 1st 1855, that is 31 out of 38 whose history can be traced, or 81 per cent.

“ Of the 40 who are said to have been removed contrary to advice, 13 were discharged under protest, and 27 under the influence of persuasion.

“ Those indicated as discharged under the influence of persuasion were mostly patients who were either convalescent, but not sufficiently tested, or patients who, from the form of their disease, were manageable and safe. With reference to many of these cases, the entreaties of relations or inspectors of poor, were the more readily listened to in order to diminish overcrowding during cholera, or to make room for more clamant cases.

“ Of the 27, 12 were males and 15 females, 10 were convalescent and 17 in various stages of improvement. Of the whole, 6 are unknown, 6 remain unimproved, amongst whom is one of the convalescents, 3 are doing well all convalescent, 8 have become worse, of whom 3 still retain their liberty, 2 have returned to the Asylum, and 3 have died.

“ Of the 13 discharged under protest, only one could be said to have been convalescent, the rest, except one, had made more or less improvement, 3 are male and 6 females. The results are as follows : None have improved, 2 are unknown, 4 remain the same and 7 have become worse, including the case approaching con-

valescence. Of these, 2 are still detained at home, one of which, at least, is gradually getting worse, 2 died a few months after liberation, one of them becoming gradually worse till death, the other died of delirium tremens. This was a case of dipsomania in a well educated young man, who came under treatment as a suicidal melancholic, and yet was removed in a month against the most earnest entreaties and warning as to consequences. Three have returned to the house, one in two months somewhat worse, a second in three weeks very considerably worse. This patient was subsequently discharged cured after three months treatment, though still suffering under bodily disease.

"The third also returned in three weeks. The removal of this patient was twice successfully resisted, but the third time failed. The case was hopefully approaching convalescence. The patient returned in a most deplorable condition; and, after three months' treatment, remains one of the worst cases in the House.

"Thus, of the 11 discharged contrary to advice, whose history is known, none have improved, 4 remain the same, and 7 have become worse.

"The removal of many other cases has been successfully resisted by urgent entreaties; besides, many of the cases ultimately removed, had their stay prolonged, else, there is reason to believe, the results we have had to deplore would have been more extensive.

"The following table will show the general results—the calculation being based on the cases whose history is known:—

	Continued well.	Remained unimproved.	Became worse.
1. Discharged with propriety.....	82 per cent.	6 per cent.	18 per cent.
2. Discharged with doubtful propriety.	26 per cent.	22 per cent.	30 per cent.
3. Discharged with impropriety.....	0 per cent.	36 per cent.	64 per cent.

"A similar analysis has been made of the patients discharged since that period, and of which it is enough to say that it entirely confirms the results already obtained."

TABLE VI.—Showing the ages of those cured—

		Males.	Females.
16 years,	....	0	1
19 years,	.....	0	1
20 to 30 years,	.....	2	4
30 to 40 years,	.....	2	7
40 to 50 years,	.....	6	7
50 to 60 years,	.....	3	5
60 to 70 years,	.....	1	2
72 years,	.....	0	1
75 years,	.....	1	0
		15	28—43

TABLE VII.—Showing the time they were under treatment—

		Males.	Females.
1 month,	.....	0	1
2 months,	.....	2	0
3 months,	.....	1	4
4 months,	.....	3	5
5 months,	.....	1	4
6 months,	.....	2	3
7 months,	.....	3	3
8 months,	.....	0	1
10 months,	.....	0	4
11 months,	.....	0	1
1 year,	.....	2	0
1½ years,	.....	1	0
2 years,	.....	0	1
2½ years,	.....	0	1
		15	28—43

TABLE VIII.—Indicating the form of disease—

	Males.	Females.
Acute Mania,	10	16
Chronic Mania,	4	6
Peurperal Mania,	0	2
Dipsomania,	1	2
Melancholia,	0	1
Monomania of Suspicion, ..	0	1
	15	28—43

There have been 28 deaths this year, to 21 last, and 22 the previous year. Compared with admissions, they are this year 28 deaths to 105; last year, 21 to 91; and the previous year, 22 to 59. Compared with the numbers under treatment, they are this year, 28 to 323; last, 21 to 294; and the year previous, 22 to 259. The percentage on admissions for the three years are 26, 23, and 37. The percentage on the number under treatment for the same periods are $8\frac{3}{4}$, $3\frac{1}{4}$, and $8\frac{1}{2}$ —clearly showing that there is this year a slight increase in our mortality. We are glad to be able to state that there is a corresponding increase in our curative tables. Some consideration must also be extended to our large increase of admissions during the last 2 years, the natural result of which is to raise our mortality list.

Of the 28, 8 were under 12 months in the house, and of these 4 were under 4 weeks, all of whom were in a dying condition when they reached the house. In addition to these 4, we have to record one death from small pox, and 4 from dysentery. One of the cases of dysentery succeeded small-pox as did several others, which however did not terminate fatally. One of two cases of consumption also followed small-pox. Other details are indicated by the tables.

TABLE I.—Shewing the time the patients who died had been in the house—

	Males.	Females.
32 years,	0	1
21 years,	0	1
18 years,	0	1
10 years,	0	1
7 years,	0	1
5 years,	0	1
4 years,	2	2
3 years,	2	1
2 years,	2	2
1 year,	1	2
10 months,	0	1
8 months,	0	1
7 months,	0	1
5 months,	0	1
4 weeks,	0	1
3 weeks,	1	0
1 week,	1	1
	9	19—28

As appears from this table the preponderance of deaths among the females is very great, being over 10 per cent. on the numbers under treatment, while, with respect to the males, it is only $6\frac{1}{2}$.

TABLE II.—Shewing the ages of those who have died—

	Males.	Females.
73 years,	0	1
60 to 70 years,	2	5
50 to 60 years,	2	4
40 to 50 years,	2	5
30 to 40 years,	2	3
20 to 30 years,	0	0
19 years,	1	0
18 years,	0	1
	9	19—28

TABLE III.—Shewing the form of disease.

	Males.	Females.
Chronic Mania,	3	8
Acute Mania,	1	1
Melancholia,	2	4
Imbecility,	2	4
General Paralysis,	1	0
Monomania,	0	1
Puerperal Mania,	0	1
	9	19—28

TABLE IV.—Shewing the causes of death—

	Males.	Females.
Vital exhaustion, with diarrhoea, paralysis, and bed sores,.....	2	5
Maniacal exhaustion,	1	1
Exhaustion from necrosis of elbow joint,	0	1
General Paralysis,	1	0
Apoplexy and Paralysis,	1	3
Gastro-enterite,	1	0
Small-pox,	0	1
Dysentery,	0	4
Pneumonia,	2	1
Chronic Bronchitis	0	2
Consumption,	1	1
	9	19—28

An epidemic of small-pox existed in the House from the middle of November last, till the middle of April. As there have been no new cases since that period, it is supposed to have exhausted itself. It was introduced by a female patient, who was admitted on the 13th November 1855, and who had been exposed to the virus, previous to admission, there being a few cases in the village whence she had been brought. During the five months it lasted, there were brought under its influence, on the female side, 10 patients, and 2 servants, and on the male side, 5 patients, and one of the officers, in all 15 patients and 3 residents. Only one case was fatal—a female, which was hopeless from the first. Several of the other cases were severe, and some of them very slight. It was entirely confined to the House, there being none in the town or neighbourhood.

We have had recently what may with all justice be called an epidemic of abstinence. It may be said to have been introduced by a patient who was admitted on the 25th of February, and who required to undergo the process of artificial feeding, immediately on his arrival. It still continues, though somewhat mitigated in its character. During the intervening period of three to four months, 11 females, and 5 males, have persisted in their refusal to take food, until coercive measures were rendered necessary. Of the 16, 2 males and 5 females have had food administered more or less frequently by artificial means, the others having yielded to the promptings of hunger, or influence of fear. One patient was fed for several weeks, a second for about 10 days, and a third for a week, the others less frequently. One of the cases terminated fatally, the patient having come to the House in a state of complete exhaustion, and lived only a few days.

This epidemic has given us the opportunity of testing the suitability of our new feeding chair. Though requiring some modification in detail, it has accomplished all that was expected of it.

The feeding apparatus used, was the ordinary feeding syringe,

with the œsophageal tube, on other occasions we have used the naso-œsophageal, but have no hesitation in deciding, as far as our experience goes, that the former is greatly preferable to the latter, and that this mode of feeding is vastly better in every respect, than any of the older systems. With the feeding-chair and syringe, Newington lever, and tongue regulator, we have never met with any difficulty which could not be overcome with perseverance. One of our recently fed patients—a female, was so exhausted when she reached the House, the pulse so small, and the respiration so embarrassed, as to render it a matter of doubt whether she ought to be allowed to assume the semi-erect position in the feeding-chair, yet this patient was fed three times a day, for several successive days, without any difficulty. We give it as our humble opinion, that no Hospital for the insane, should be without a complete set of feeding apparatus, whether as regards the comfort of the physician, or the welfare of his patients.

Of treatment, we have little to say. A large proportion of recent cases, especially among the poorer classes, rapidly improve under a carefully regulated abstraction from exciting causes, a liberally nutritious diet, and strict attention to general cleanliness and comfort. With these may be combined, various medicines, properly so called, according to the nature, or stage of the disease.

The varied mechanism of classes, lectures, concerts, amusements, &c., will indicate our intentions, at least, with reference to moral treatment.

During the year, no patient has been placed under restraint, properly so called. One patient, recently dead, manifested a strong tendency to injure her head, by knocking it against any object within reach, not violently but incessantly, day and night. This tendency continued unabated during the entire two years she was in the House, and what rendered her case an object of greater anxiety and interest, was an accompanying tendency to erysipelatous inflammation, often lighted up by the slight injuries thus sustained. The patient,—an infirm and pthysical female, was placed in an arm-chair padded all round. She was attached to it by a light and loosely fitting apparatus, so arranged as to prevent her reaching the floor, or leaving her chair without the permission of her attendant. There she sat comparatively in contentment, knitting her stocking, except when taking her accustomed walk along the gallery, or in the airing-court. A special bed was also provided for this patient, stuffed throughout, and possessed of a girth cover, which, while it allowed free circulation of air, prevented the egress or injury of its occupant.

This case has often suggested itself to us as a sufficient test of the universal applicability of non-restraint. How could an attendant, or any number of attendants, have prevented this patient from injuring herself, during two entire years, or, if they could, would their incessant interference have been either more agreeable or less injurious!

IMPROVEMENTS. — The preliminary arrangements for the new Asylum are slowly but steadily approaching completion. The working plans have been finished and contractors for the work advertised for, so that the whole may be expected to be completed and building operations commenced within the shortest possible period. The chief cause of delay has been the difficulty of fixing upon a satisfactory plan for heating and ventilating the building. This is so important a matter to the success of the House, as well as health of its community, as to justify almost any amount of delay which may be thought necessary for a satisfactory solution of the problem.

The near prospect of possessing a new and perfect Establishment, has of necessity led to the cessation of all further efforts to improve the old, so far, at least, as its structure is concerned. This, by relieving our labours in one direction, has enabled us to make more vigorous and successful efforts in others.

The entire bedding of the rooms, in the pauper department, at least, is being overhauled, and made, or re-made in accordance with a uniform pattern. The clothing of the patients has undergone similar treatment. For dirty patients, canvas-bottomed beds, special dresses, and patent sheeting have been provided. For the destructive, strong durable dresses, and bedding of a similar character, have been furnished.

For the denuders, dresses, strong and warm, and locked so that they cannot be removed from the person, have been provided. Similar provision is made for the protection of the feet, in the shape of locked boots, &c. Special provision also has been made for the sick and dying, and other peculiar cases.

The great object in furnishing these appliances, has been to have a stock in store, so that we may be able to treat every case, at a moment's notice, with the greatest possible efficiency. Though several of these arrangements had been commenced at the date of last Report, they have not yet all reached completion, but are rapidly approaching it. There cannot be a doubt that when completed, they will contribute greatly to diminish expenditure, to increase the efficiency of treatment, to improve the appearance of the house, and to contribute to the comfort of the patients. We regret, however, to be obliged to add, that the completion, or carrying out of these arrangements, is impossible, so long as that anomaly exists in the house, in virtue of which certain parochial boards are allowed to supply their patients with bedding and clothing, while the House supplies others. Another anomaly, equally vexatious and annoying, is the arrangement with reference to the bedding of private patients. This, though it has been referred to in two former Reports, and often made the subject of just and severe complaint, by the relatives of patients, still exists. As the House Committee have, however, taken up the matter in earnest—have, in fact, pledged themselves to

the removal of these anomalies—we need not insist farther on their evils.

INSTRUCTION AND AMUSEMENT.—Our instruction and amusement list presents the same variety as on former occasions—balls, concerts, tea-parties, lectures, classes, recitations, pic-nics, bagatelle, billiards, cards, quoits, bowls, &c., constitute the staple commodities of such a list.

To extend and improve it, special efforts have been made during the year, which have not been without success. The first step was the establishment of a bazaar, and, in connection with it, a fancy-work class, which was, for several months, under the unassisted direction of a patient. It has excited general interest, and been entirely successful. Since its opening in November last, 31 pupils have attended it; and have produced, working from one to two hours per day, 138 useful or fancy articles; and this, too, notwithstanding its having suffered considerably, from the loss of its previous energetic conductor.

Lately an appeal was made to the class, on behalf of the Bazaar, recently held in Town, which, although no reward was held out, was heartily responded to, each pupil producing something, nor did they do so unrewarded, for by the kindness of the Bazaar committee, the entire class was allowed to visit the Bazaar, on the morning of its opening, an act of liberality, which many of the patients duly appreciated. We mention this as an illustration of the practical application of a now well known principle in treatment, the occasional and judicious association of the patients with events of interest in the outer world.

It may be proper here to state, that the Bazaar, by the occasional sale of work, is intended not only to be self-supporting, but to yield a surplus fund, which is to be devoted to furthering the instruction and amusements, of the patients. Though only in existence for seven months, it has not only done all that was expected of it, but has left a surplus sufficient to warrant expectations of its permanent success.

On the establishment of our bazaar, simultaneous efforts were made to extend the library and found a museum. To enable us to accomplish, or rather to initiate, these objects, an appeal was made, by printed circular, to a few private friends and others, the answers to which, though thus limited, have been so liberal and satisfactory, as not only to justify our undertaking, but to render its success a matter of certainty.

To the Bazaar, 57 articles, useful or fancy, as patterns, and 14 lots of materials have been presented.

For the Library, cash, books, and prints have been received.

Our Museum, which has scarcely yet obtained a name or habitation, has not been forgotten, as several lots of curiosities, already received, will testify, and a larger number of promises, which have

not had time for fulfilment, will in due time give proof of its success. To the few friends in Montrose, and the fewer at a distance, who have thus encouraged us, we give, for ourselves and the patients, our hearty thanks, assuring them that their kindness is duly appreciated, and not less their intelligence. For it is still, unhappily, a rarity to find any one who thinks such efforts, made in behalf of the insane, any thing better than a species of trifling.

A reading and writing class, has also been opened, for females, under the superintendence of a patient, and under whose zealous instructions several of the pupils made the most marked improvement in both these branches of education. Similar classes for reading, writing, and arithmetic, were opened on the male side of the House, which was under the guidance of a convalescent teacher. Indeed, though each of them was in operation only for a few months, the educational improvement, as well as the curative benefit, was so marked and obvious, as to make it a matter of decided regret that circumstances render it impossible for us to make them permanent. 35 pupils attended these classes.

By the success of these partial efforts, our previous convictions of the vastness of educational resources, in the moral treatment of insanity, have been confirmed. It is our firm belief, that they are very partially understood, very imperfectly appreciated, and as yet almost wholly undeveloped.

In addition to our Bazaar, Library, Museum, and classes, a series of lectures and concerts was arranged for the summer months, which have undoubtedly afforded both pleasure and profit to the patients. The getting up a course, instead of a succession of isolated or occasional lectures, was grounded on the conviction, that when recurring at fixed periods, in regular succession, they are much better fitted to secure the objects intended in moral treatment, than in any other mode. In this way there is secured, not merely the beneficial influence produced by impressions made at the moment of delivery, or by reflection afterwards, but also, what is of equal, if not greater importance than either, that produced by anticipation. This was sufficiently obtained, by distributing over the House, programmes of the entire series, a few days before each lecture.

In addition to our classes, courses of lectures and concerts, and other means of instruction and amusement provided in the House, similar provisions in town have been repeatedly visited and shared by the patients. In this way, lectures, concerts, panoramas, flower shows, menageries, legerdemain, ventriloquial and other exhibitions, have been frequently visited. A party of ladies and gentlemen, also attended regular courses of lectures, on botany and geology, given in the Museum, in connection with the Natural History Society.

During last summer, 13 pic-nics were made to various interesting localities in the neighbourhood, a privilege extended to the pauper, as well as private patients.

At the Highland games, which took place on the links, we erected and occupied our own "grand stand," thus demonstrating to the world, that whatever senses we have lost, we still retain that of self-importance.

OUR ATTENDANTS.—Another step indicative of progress, and improvement, was an attempt to improve the character of the attendants, and to secure a more careful and efficient performance of their duties. During the last two years, the attendants have been nearly doubled, and their wages have not only been raised, but so arranged as to allow of some reward, to length of service, or goodness of character. To secure a more efficient performance of duty, the plan adopted was to meet the attendants, on stated occasions, to instruct them in the nature and principles of their duty; to point out the deficiencies and imperfections which existed, and to show how these deficiencies and imperfections, might best be obviated. All this however, met with marked opposition, and on the part of some of the attendants, with decided hostility. We had expected this, and were prepared for it. Our own experience, much more that of others, had taught us to do so. In the belief that our motives were pure, our principles correct, and our ends desirable, we pursued the course we had entered upon, quietly, steadily, and perseveringly, and had the satisfaction of securing ultimate success. It is but due to the attendants to state, that much of their opposition, was based on a mis-apprehension of the nature of the object contemplated. It is also fair to notice that the true nature of the object, once understood, considerable improvement followed, which would undoubtedly have been greater, but for the want of time to follow up by a vigorous practical application, our indicated arrangements—an objection which, now that an assistant has been obtained, no longer exists.

The subject of attendants, is one of great importance, perhaps not less so than any other connected with the treatment of the insane. It may appear an exaggerated, if not a harsh statement, to affirm, that a farmer may discharge a servant, as unfit to feed his pigs, and on his next visit to the Asylum, find that servant the attendant and companion of his insane daughter; or a country gentleman may discharge his servant, as unworthy to take care of his dogs, and on his first visit to the Asylum, find that servant the attendant and companion, of his refined and accomplished son. It is nevertheless a possibility, if not a probability, that such might be the case, and being so, points out very clearly that things are not as they should be. The statement is made not to depreciate the class, but to indicate the defects of the system. Attendants upon the insane, ought at least to be the best of their class, whether as regards mental ability, or physical developement. They ought to be of high principle, of earnest character, with great self-devotion, well-educated, and regularly trained in their peculiar duties; but

then they ought to be better paid, and more respected; have more time, greater liberty, and higher privileges. Happily there are symptoms of improvement. It is now generally admitted, that a person of respectable character and education, in any rank of life, may become an attendant upon the insane, without the necessity of supposing himself degraded thereby. Some go farther than this, and even claim consideration and respect, for one who occupies such a position, and do so, we think, with all justice. In rarer instances, the "high born," and "well bred," the refined and educated, are applying themselves with singular self-devotion, to remedy, as far as they can, acknowledged defects, by their own personal service and sacrifices. All honour to such. Efforts are being made in other directions; for example, in one Institution a complete course of lectures was delivered, during last winter, for the benefit of the attendants. We are glad to say that a Scotch Asylum, in this as in many similar improvements, has taken the lead. What Miss Nightingale has done, or is about to do for the sane, is equally, nay, is more peremptorily required, for the insane. Surely Scotland can and will produce, for the one, what England has done for the other.

As further indications of improvement, perhaps we may be permitted to cite the diminution of numbers, on our escape, and dirty-patients lists. Our escape list of this year contains only three patients, one of whom only got a few yards beyond the walls. Although two of these were distinctly traceable to the carelessness of attendants, the numbers are considerably fewer than on former years, and indicate, we hope, increasing care and efficiency on their part.

Two years and a half ago, there were on our list of patients, inattentive to cleanliness 44, in a population of 204, or $21\frac{1}{2}$ per cent. At the present moment, with a population of 230, there are, on that list, only 28 or 12 per cent. This is an amount of improvement which we had not dared to anticipate in so short a period, and as regards the patients, indicates an increase of comfort, which no words can express. While it reflects credit upon all, it is especially due to improved arrangements, with respect to bedding and clothing, to an increased number of attendants, and in no small measure, we believe, to their increasing care and attention.

OCCUPATION.—Our occupations are of the usual character—amongst the males, garden and field labour, tailoring, shoemaking, joinering, cabinet making, turning, net making, and oakum picking, are the principal employments. Several besides, are engaged at the pump, the laundry, the piggeries, and in the galleries.

On the female side of the House, the kitchen, laundry, and galleries, employ a considerable number. In the work-room, sewing, and knitting, are the chief occupations. Among the private patients, are to be found several engaged in fine sewing, knitting, netting, crochet work, and Berlin-wool work. Our fancy-work class, already al-

luded to, has greatly extended and improved the taste for this kind of work. Variety of occupation is still a desideratum. A new house will afford facilities for improvement in this respect, which we hope to profit by.

We have at work, on the male side, 1 shoemaker, 2 tailors, 3 to 4 joiners, 4 to 6 net-makers, and 12 to 20 oakum-pickers. There are employed in the kitchen 1, in the laundry 2, in the garden 6, in the field 12 to 15, in the galleries 6 to 10.

On the female side, there are engaged, in the kitchen 4, in the laundry 8, in the galleries 12, in the work-room about 25, while others, in various parts of the House, are occupied in knitting, netting, crotchet work, &c.

List of work done, on female side of the House :—

	Made.	Repaired.		Made.	Repaired.
Bed Covers . . .	40	48	Stockings, . . .	215	2086
Pairs of Blankets, .	148	113	Socks, . . .	113	67
Sheets, . . .	72	265	Gowns, . . .	114	226
Bed-ticks, . . .	94	70	Bed-gowns, . . .	26	128
Pillows, . . .	116	10	Aprons, . . .	77	118
Pillow-cases, . . .	234	149	Day-caps, . . .	156	120
Quilted Sheets, . .	9	0	Night-caps, . . .	51	73
Quilted Coverlets, .	15	0	Stays, . . .	14	48
Straw Mattresses, .	6	4	Stocks, . . .	48	95
Canvas Beds, . . .	14	9	Polkas, . . .	7	6
Canvas Dresses, . .	7	13	Bonnets trimmed, .	35	0
Feeding Aprons, . .	18	5	Handkerchiefs hemmed	381	160
Smock Frocks, . . .	6	23	Towels hemmed, . .	145	75
Shirts, . . .	132	218	Window-blinds, . .	46	38
Shifts, . . .	146	237	Table-cloths, . . .	15	22
Flannel Shirts, . .	102	315	Habit Shirts, . . .	12	30
Petticoats, . . .	84	216	Binding Shoes, . .	34	0
Drawers, . . .	22	102	Toilet Covers, . . .	32	18

List of work done, in Tailors' work-room, &c.

	Made.	Repaired.		Made.	Repaired.
Coats, . . .	1	134	Straw Seat, . . .	1	0
Jackets, . . .	16	261	Hemp Nets, . . .	54	8
Waistcoats, . . .	13	329	Cotton Nets, . . .	19	0
Trousers, pairs, . .	11	534	Sheep Nets, . . .	6	2
Drawers, pairs, . .	30	222	Shoes, pairs, . . .	1	15
Patent Dresses, . .	4	24	Slippers, pairs, . .	34	73
Braces, pairs, . . .	18	78	Oakum picked, 19 cwt. 1 qr. 24 lbs.		
Stocks . . .	6	136			

OUR CHAPLAINCY.—Except, perhaps, in special circumstances, the importance and usefulness, whether for purposes of instruction or consolation, of allowing the insane to participate in the ordinary services of the church, seems now generally admitted.

Where care is shewn, in selecting the appropriate cases, the tendency of religion thus curatively applied, is beneficial, whether with reference to its direct or collateral influence. It imparts instruction, and affords consolation. It soothes the irritable, and represses the wayward. It inspires new energies, and kindles new hopes. The ministrations of Mr Smith, have been received with increasing satisfaction. The earnestness of his manner, the simplicity of his style, the clearness of his diction, and the appropriateness of his subjects, with the shortness and variety of the service, seem especially calculated to secure the objects contemplated in such labours.

We regret, on our own account, not on his, that we are about to lose his valuable services. We believe the prayers of many in the House, will follow him to a higher and more important sphere of duty.

VISIT OF COMMISSIONERS.—During the Autumn of last year, our unvarying uniformity was somewhat chequered, by a visit from the "Commissioners of Lunacy." Perhaps we ought rather to confess, that our equanimity was somewhat disturbed by that visit. Two circumstances will serve to explain the source of that disturbance. There was an old house, now condemned, as no longer fit for its purpose, and about to be abandoned in consequence, a determination which necessitated the cessation of even temporary improvement in its structure or arrangements. It had, besides, the disadvantage of being seen at a transition period. Various improvements were going on, as to beds, bedding, clothing, and other arrangements, having in view the improvement of the personal appearance, and comfort of the patients; but none of these had yet been completed, so that the patients, as well as House, had to be seen in a sort of half-dress condition. We neither anticipate praise, nor fear censure from the report of the Commissioners. We believe it will be faithful, and that is enough. A consciousness of sincerity and earnestness, in the discharge of our duty, will, we trust, prevent us being either too much elated by the one, or too much depressed by the other.

OUR STAFF APPOINTMENTS.—The commencement of our official year, will, on this occasion, be signalised by two important additions to our medical staff—a Medical Assistant, and Assistant Physician. The former appointment has been conferred upon Mr Cowan of Edinburgh, the latter upon Dr Johnston of Montrose.

The appointment of a medical assistant, is a matter of importance to the entire staff, but especially to the Medical Superintendent, as, by relieving him of a great number of minor, yet essential duties, it will enable him to devote his undivided time and attention, to the higher and more important functions of his office.

The possession of a substitute will also tend greatly to lessen anxiety during the pressure of temporary sickness, or on occasions of unavoidable absence, while, on ordinary occasions, it will

secure a more satisfactory division of labour, which, in a large establishment, is an important element of success.

The appointment of a consulting physician is, in many respects, not less important than that of a medical assistant. The fact that on some occasions during the past year, there have been upwards of 240 patients in the House, and that the numbers permanently under treatment, are not many fewer, is a sufficient proof of itself, of the necessity for some one to participate in the anxieties and responsibilities, and share the labours of the Medical Superintendent.

A source of satisfaction to ourselves, it cannot be less so to those whose sad interest in the House is necessitated by their imprisoned relatives. We are sure that an intelligent and discerning public, will not fail to appreciate the liberality and zeal thus shewn by the Directors, in making the necessary provision, when propriety requires, or necessity demands, and that it will in due time testify the sincerity of its judgement, by yielding a larger amount of confidence to the Institution, and feeling a warmer interest in its improvement and success.

OUR IMBECILES.—In recent years, the treatment of insanity, has made rapid progress, has undergone great improvements, and has excited more marked attention. That department of the profession which has devoted itself to its special cultivation, is becoming inspired with a noble enthusiasm, suited to its vast importance, its exciting interest, and its acknowledged difficulties; an inspiration, which is gradually extending itself to the profession in general, and under whose influence, its faith in the propriety of the condition, hitherto acquiesced in, if not maintained, that the most difficult part of its work, should be the worst prepared for, and least known, begins to waver. The interest of even the general public begins to be excited, and will, we hope, contribute to accelerate the speed of its still tardy progress.

Much has been done, but more remains to do. In this transitional condition, and where all cannot be accomplished at once, there is always danger of overdoing some portions of the work, while other parts of it, not less pressing or important, are left underdone. We speak of course comparatively. In later years much has been done, is doing, and we hope will continue to be done, for the idiot. Large and expensive establishments, have or are being built for his reception. Skilful physicians are provided to care for, or cure the imperfect developement, or morbid condition of his physical frame, while the transforming, and improving influence of mental and moral training, is brought to bear upon its appropriate objects—the mental faculties, and the moral powers, with efficiency and success. All this has not been done in vain.

The highest expectations have been more than realized. It is a great and noble work—God speed it.

But while these praiseworthy efforts have been making for the idiot, there are other classes not less worthy or necessitous, for whom little or nothing has been done. Take, for example, our imbeciles and incurables. On the part of any one practically acquainted with a Hospital for the Insane it requires no great expenditure of thought, to produce the conviction, that for this large and important class, little has been done compared with what might be done, were all the moral and medical appliances efficiently employed for its improvement. Can we point to a single Institution where this is done as it might be, as it should be.

There are no doubt weighty reasons for this. Perhaps in no single Institution is the medical staff, or other agents in the work, in so efficient a condition as to enable its superintendent to carry out improvements with reference to this class, or indeed any other, to an extent commensurate with his knowledge or wishes, while, in some at least, the means at command are so obviously deficient, as to render it a matter of the greatest difficulty to overtake, with anything like efficiency, the more pressing and necessitous cases. There are other causes of a more special character. Acute cases, from their greater novelty, interest, hopefulness, or necessity, naturally secure the special attention, or enlist the special sympathies of the medical superintendent. When a patient has passed this stage, and has reached that of incurability or imbecility, he is too often consigned to hopeless neglect. Incurability is for all practical purposes, confounded with unimprovability, and the patient is thought of and treated accordingly. He may share indeed, with others, the ordinary provision made for the care and comfort of all, but from that moment, for him no special efforts, are thought of or made. Can it be doubted that were the same efforts put forth, the same means employed for the improvement of this class, as for that of the idiotic, the same cheering and gratifying results, or rather results still more surprising, would follow. We earnestly believe that such would be the case, and our hope, grounded on this belief, is that for this as for many other classes, better things are yet to come.

In reviewing the history of the past year, there is, happily, little to disturb or depress, and much to gratify and encourage. The evils complained of are neither numerous, serious, nor irremediable; only some of them were anticipated, but all of them, perhaps, might reasonably have been so, and with increased care and experience, their recurrence may in a great measure be prevented. On the other hand, we are entitled to say, that the good greatly predominates over the evil, a result which, while it forms a suitable reward to past exertion, will afford an additional stimulus to further efforts. Virtue, here, if any where, is its own reward. And here, we may

add, it has seldom any other. Should merit be thought of, then it is due not to one, but to all. The House Committee, our Colleagues in office, and the Attendants, are each entitled to their respective share. A due appreciation of the importance of the work to be done, a sufficient knowledge of the means to be used, and earnestness, and self-devotion, in the performance of it, are the grand elements of success. We gladly and gratefully acknowledge their increased diffusion amongst us. When these exist, are brought into action, and combined in a harmonious system of co-operation, success is certain. With these, an improved and improving class of attendants, a better understood system, more perfect arrangements, a completed set of appliances, and an increased medical staff, securing for us a better division of labour, we think we may fairly anticipate for the coming year, a due measure of success.

JAMES GILCHRIST.

Report of the House Committee.

Your Committee, in again presenting their Annual Report, have nothing of very great importance to notice. They have, during the past year, weekly visited the Asylum, and have always found everything conducted in a manner to merit their highest approbation. Notwithstanding the crowded state of the House, they have observed, with much pleasure, the great order, cleanliness, and comfort which prevail throughout the Institution.

In regard to alterations, with a view to extra and better accommodation, your Committee, in the prospect of very soon seeing a new Asylum erected, have confined themselves to mere temporary improvements, and these to a limited extent.

The occupations and recreations, noticed in former Reports, have been, during the past year, continued, with many additional amusements, introduced by the Medical Superintendent, which have proved a source of much pleasure to the inmates.

Dr. Gilchrist, the Medical Superintendent, merits your Committee's highest approbation, for the able way in which he has conducted the onerous and important duties entrusted to him. Mrs. Wright, the Matron, continues to give the greatest satisfaction; and Mr. Niddrie, the Principal Keeper, still deserves their entire commendation.

D. MACKIE,

Chairman of the House Committee.

Montrose, June 10, 1856.

Report of the Royal Infirmary & Dispensary,

For the Year ending 31st May, 1856.

FROM a review of these tables, it will be seen that there has been a marked diminution in the number of admissions for contagious diseases during the year which has just terminated. During the period embraced by the last Report, the numbers admitted for fever and scarlatina, were respectively 124 and 4, while this year, the numbers are only 55 and 2. Small-pox, which, during the former year, was unusually prevalent and fatal, has this year afforded only two patients.

In consequence of the want of Military Hospital accommodation, a considerable number of the F. & K. Militia have been admitted as patients into the Infirmary. The usual rate allowed by government for soldiers in a Civil Hospital, viz. 10d a day, being paid for them.

The number of cases treated at the Dispensary and patients houses during the year has been 1177.

Dr Lawrence has, as formerly, rendered his valuable aid and co-operation in the Management of the Hospital and Dispensary throughout the year.

DAVID JOHNSTON, M.D.

TABLE I.

SHOWING THE GENERAL RESULTS OF THE YEAR.

					M.	F.	Total.
June 1st, 1855—Remained in House ...					16	24	40
Admitted during year ...					140	130	270
					156	154	310
Discharged Cured ...					M. 111	F. 135	Total. 246
" Improved ...					12	8	20
" Incurable ...					2	1	3
" Unfit ...					2	1	3
" Dead ...					12	2	14
" for Improper Conduct 1					0	1	1
					140	147	287
June 1st, 1856—Remained in House ...					16	7	23

TABLE II.

CLASSIFICATION OF DISEASES UNDER WHICH THE PATIENTS LABOURED
WHEN ADMITTED INTO THE INFIRMARY.

					M.	F.	Total.
Fever ...					25	20	45
Scarlatina ...					1	2	3
Small Pox ...					2	1	3
Cutaneous Diseases ...					8	6	14
Venereal Diseases ...					17	3	20
Diseases of Lungs and Air Passages (including Phthisis) ...					15	20	35
" of Brain and Nervous System ...					2	9	11
" of Digestive Organs ...					18	12	30
" of Eye ...					2	2	4
" of Heart ...					2	1	3
" of Bones and Joints ...					2	11	13
" of Urinary and Generative Organs ...					3	4	7
Rheumatism ...					13	7	20
Fractures ...					7	1	8
Wounds and Injuries ...					23	2	25
Tumors and Ulcers ...					25	18	43
Dropsies ...					10	8	18
Burns ...					5	3	8
Total ...					180	130	310

TABLE III.

OPERATIONS PERFORMED DURING THE YEAR.

			M.	F.	Total.
Removal of Tumours,	...	...	1	4	5
Strangulated Femoral Hernia,	...	...	0	1	1
Removal of Cancerous Lip,	...	...	3	0	3
Puncture of Bladder,	...	...	1	0	1
Amputation of Thigh,	...	...	2	0	2
„ of Fore Arm,	...	...	1	0	1
„ of Arm,	...	...	0	1	1
Total,	...	...	8	6	14

TABLE IV.

CAUSES OF DEATH IN FOURTEEN FATAL CASES.

				M.	F.	Total.
Fever,	...	...	...	4	1	5
Scarlatina,	...	...	...	0	1	1
Bronchitis,	...	...	...	0	1	1
Dropsy,	...	...	...	1	0	1
Injury to Chest,	...	...	...	1	0	1
Diseased Knee-joint,	...	...	...	1	0	1
Disease of Kidnies and Brain,	...	...	...	1	0	1
Lacerated Wound of Thigh,	...	...	...	1	0	1
Cerebral Congestion,	...	...	...	1	0	1
Retention of Urine,	...	...	...	1	0	1
Total,	...	...	...	11	3	14

TABLE V.

REPORT OF PATIENTS TREATED AT THE DISPENSARY AND AT THEIR OWN
HOUSES.

1855—June	.	.	.	.	.	.	.	132
July	.	.	.	.	.	.	.	132
August	.	.	.	.	.	.	.	121
September	.	.	.	.	.	.	.	104
October	.	.	.	.	.	.	.	108
November	.	.	.	.	.	.	.	105
December	.	.	.	.	.	.	.	85
1856—January	.	.	.	.	.	.	.	74
February	.	.	.	.	.	.	.	61
March	.	.	.	.	.	.	.	73
April	.	.	.	.	.	.	.	84
May	.	.	.	.	.	.	.	98
Total	.	.	.	.	.	.	.	1177

Report of the Infirmary Committee,

10th June, 1856.

THE Committee have the pleasure to report a considerable reduction in the House expenses as compared with last year. This has arisen principally from the decrease of admissions,—the number being 270 in the present, against 466 in the previous year, and from no extra expenditure having been incurred. The charge for the Dispensary patients is gradually lessening, medicines being now supplied on more favourable terms than formerly. The sum of £150 was voted from the General Fund at the last annual meeting of the Asylum; in addition to which there has been received from—

Churches and Parochial Boards	£94	3	2
Private Individuals	135	5	6
Banks and Millowners	28	7	0
Shipmasters and their friends	9	8	6
Police fines	8	1	6
	£275	5	8

The Committee have held regular weekly meetings; and in their visits to the wards, have always found the Establishment in good order, and all care and attention given to the patients.

ROBT. MILLAR,

Chairman of the Infirmary Committee.

Montrose, June 10, 1856.

Donations to the Montrose Infirmary,

For the Year ending 2d June, 1856.

PUBLIC BODIES, BANKS, AND MILLOWNERS.

Mr Brownlee, Superintendent of Police—Part of Fines,	£0	12	6
The Bank of Scotland	3	3	0
The National Bank of Scotland	3	3	0
Messrs. John and George Paton, Montrose	5	5	0
Aberdeen, Gordon, & Co., do.	5	5	0
Richards & Co., do.	5	5	0
The Western Bank of Scotland	3	3	0
The British Linen Co.	3	3	0
Mr Brownlee, Superintendent of Police—Moiety of a Fine	1	11	6
Do. do. do.	1	15	0
Do. do. do.	0	12	6
Do. do. do.	3	10	0
The Managers for Lunatic Asylum, Montrose	150	0	0
The Shipmasters of Montrose and their Friends	9	8	6
The Montrose Foundry Co., Montrose	2	2	0
	<hr/>		
	£197	19	0

PARISHES, CONGREGATIONS, AND PAROCHIAL BOARDS.

The Kirk Session of Montrose—a Collection in Parish Church	£18	0	0
The Parish of Lunan—Collection in Parish Church	2	6	4
The Parish of Maryton do. do.	2	7	9
The Free Church Craig	3	3	0
The Parish of Dun—a Collection	5	0	3
The Parish of Farnell do.	1	10	0
	<hr/>		
Carried Forward,	£32	7	4
	£197	19	0

	Brought Forward,	£32	7	4	£197	19	0
The Parish of Arbuthnott do.		3	0	0			
The Parish of Logie Pert, do.		5	0	0			
The Parish of Marykirk, do.		5	2	0			
The Parochial Board of Marykirk,		3	0	0			
The Parish of Kinnell—a Collection		4	17	10			
The Free Church of Benholm do.		3	1	0			
The Parochial Board of Laurencekirk		4	0	0			
The Parochial Board of St Cyrus		3	0	0			
The Parish of Aberlemno		2	0	0			
The Kirk Session of Craig		3	10	0			
The Parish of Garvock—a Collection		2	6	0			
The Parochial Board, Fettercairn		3	0	0			
The Parochial Board, Montrose		15	0	0			
The Free Church of Craig		3	4	0			
The Parish of Lethnot		1	15	0			
					£94	3	2

INDIVIDUALS.

Alexander Cowie, Esq., Montrose	£1	1	0
Robert Cowie, Esq., do.	1	1	0
George Neill, Esq., Borrowfield	1	1	0
Commander Lysaught, Coast Guard, Montrose	1	0	0
Thomas Napier, Esq., Montrose	1	11	6
Robert Trail, Esq., do.	1	1	0
The Right Hon. Lord F. G. Hallyburton, Dun House	2	2	0
Mrs Duncan, Minto Street, Edinburgh	2	0	0
John Duncan, Esq., of Parkhill	1	1	0
John Gordon, Esq., of Charleton	2	2	0
Sir Thomas Gladstone of Fasque, Bart.	5	0	0
Thomas Carnegie, Esq., of Craigo	5	0	0
John Boyd, Esq., Montrose	1	1	0
John Aberdein, Esq., do.	1	1	0
Arch. Foote, Esq., do.	1	1	0
Francis Aberdein, Esq., do.	0	10	6
John Gordon, Esq., do.	0	10	6
William Jameson, Esq., do.	1	1	0
David Walker, Esq., do.	1	1	0
Alex. Lindsay, Esq., do.	1	1	0
Robert Walker, Esq., do.	1	1	0
Misses Renny, do.	1	1	0
W. S. Whimster, Esq., do.	1	0	0
James Beattie, Esq., do.	1	1	0
David Smith, Esq., do.	1	1	0
John Guthrie, Esq., do.	1	1	0
James Salmond, Esq., Newbigging	1	1	0
Robert Cook, Esq., Montrose	1	1	0
James Henderson, Esq., do.	1	1	0
Mrs Arkley, Inchbrayock	1	0	0
Miss Arkley, do.	1	0	0
The Rev. Robert Smith, Montrose	1	1	0
James Inverarity, Esq., of Rosemount	2	0	0
Robert Smart, Esq., of Cononsyth	1	1	0
Mrs Alexander Valentine, Montrose	1	1	0
David Henderson, Esq., do.	1	0	0
Carried Forward,	£48	18	6
	£292	2	2

Brought Forward,		£48	18	6	£292	2	2
Robert Millar, Esq.,	do.	1	1	0			
Christian H. Millar, Esq.,	do.	1	1	0			
Edward Millar, Esq.,	do.	1	1	0			
William Millar, Esq.,	London	1	1	0			
Adam Norrie, Esq.,	New York	20	0	0			
William Beattie, Esq.,	Montrose	1	0	0			
Robert Burness, Esq.,	do.	1	1	0			
A Lady, per the Rev. Dr. Paterson,	do.	2	0	0			
Thomas Middleton, Esq.,	do.	1	0	0			
A Friend at the Shore	do.	1	1	0			
Miss Lyell, of Gardyne,	do.	1	0	0			
Thomas Renny Tailyour, Esq.,	of Borrowfield	5	0	0			
The Misses Walker,	Montrose	1	1	0			
Mrs George Paton,	do.	1	0	0			
Mr Thomas More, West Quay,	Montrose	0	10	0			
Messrs David & James Birnie,	do.	2	2	0			
David Mitchell, Esq.,	Contractor, do.	2	0	0			
David Lyall, Esq.,	of Gallery	1	0	0			
Mr Charles Brand,	Montrose	1	0	0			
Francis B. Paton, Esq.,	Turin House	2	0	0			
Mrs Keith of Usan,	Langley Park	1	1	0			
James Mudie, Esq.,	Montrose	1	1	0			
Robert H. Arkley, Esq.,	Dunninald	1	0	0			
Sir John Stuart Forbes of Fettercairn,	Bart.	1	0	0			
Lady Harriet Stuart Forbes,	Fettercairn	1	0	0			
Miss Shand,	Montrose,	20	0	0			
Mr William Moir,	Kirk Treasurer, Montrose	1	0	0			
A Friend under Cover,	bearing Fettercairn Post Mark	5	0	0			
Mrs William Gordon,	Montrose	1	1	0			
Thomas Napier, Esq.,	do.	1	1	0			
George C. Myers, Esq.,	Town Clerk, Montrose	2	2	0			
Captain Archibald Macneill,	Montrose	1	0	0			
Mrs Macneill,	do.	1	0	0			
					£133	3	6
					£425	5	8

(E.E.)

 DAVID HILL, }
 G. C. CHALMERS, } *Joint Treasurers.*

Montrose, 2d June, 1856.