

Annual report of the Royal Edinburgh Asylum for the insane : For the year ending 31st December, 1863.

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ANNUAL REPORT

OF THE

ROYAL EDINBURGH ASYLUM

FOR




THE INSANE.

FOR THE YEAR ENDING 31ST DECEMBER, 1863.

EDINBURGH:

PRINTED AT THE ROYAL ASYLUM PRESS.

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ROYAL EDINBURGH ASYLUM.

Patroness—The Queen.

OFFICE-BEARERS FOR 1864.

GOVERNOR—

THE DUKE OF BUCCLEUCH AND QUEENSBERRY.

DEPUTY-GOVERNORS.

Sir GEORGE CLERK, Bart.
Sir JOHN S. FORBES, Bart.

CHAS. COWAN, Esq.
JAMES MACKENZIE, Esq.

EXTRAORDINARY MANAGERS.

Lord Provost of the City of Edinburgh.
Lord President of the Court of Session.
Lord Justice-Clerk of the Court of Justiciary.
Lord Advocate of Scotland.
Solicitor-General of Scotland.
Dean of the Faculty of Advocates.
Deputy-Keeper of Her Majesty's Signet.
Members of Parliament for the City.
Member of Parliament for the County.

Sheriff of the County of Edinburgh.
Principal of the University of Edinburgh.
President of the Royal College of Physicians.
President of the Royal College of Surgeons.
Senior Minister of Edinburgh.
Master of the Merchant Company.
Preses of the Society of Solicitors.
Dean of Guild of the City.
Deacon Convener of the Trades.

ORDINARY MANAGERS.

The Lord Provost (*ex-off.*)
G. A. M'Laren, Esq.
J. Scott Moncrieff, Esq.
Major Petley.
James Pears, Esq.
Rev. George Smith, D.D.
William Brown, Esq.
George Cairns, Esq.

David Dickson, Esq.
Christopher Douglas, Esq.
Bailie Auchie.
Sir J. G. Baird, Bart.
James Blackadder, Esq.
Charles Cowan, Esq.
Dr John Balfour.

MEDICAL BOARD.

President of the Royal College of Physicians.
President of the Royal College of Surgeons.

Dr Simpson.
James Syme, Esq.
Dr David Maclagan.

Dr SKAE, *Resident Physician.*

Dr FREDERICK SKAE, Dr TUKE, and Dr HAYNES, *Medical Assistants.*

Mr Andrew Leslie, *House Superintendent.*

J. Scott, W.S., and D. S. Moncrieff, W.S., *Conjunct Treasurers and Secretaries.*

ROYAL EDINBURGH ASYLUM

REPORTS—1884

REPORTS FOR 1884

REPORTS—

THE LATE OF HUNTER AND GREENHAY

REPORTS FOR 1884

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REPORT

BY

THE ORDINARY MANAGERS

OF THE

ROYAL EDINBURGH ASYLUM FOR THE INSANE.

*Presented to the Annual General Meeting of the Corporation,
held on 29th February, 1864.*

It is now the duty of the Ordinary Managers of the Asylum, in terms of the Statute, to present to the General Meeting of the Corporation the Report of their Proceedings during the past year.

The average daily number of Patients in all departments of the Institution, during the year ending the 31st December 1863, was 680, being a decrease of 9 from the average number of Patients during the preceding year. The actual number of Patients in the Asylum on 31st December 1862 was 686, and the number of Patients on 31st December 1863 was 661, shewing a decrease of 25 during the course of the year.

The Ordinary Receipts by the Treasurers during the year, from all sources were£22,549 0 6

And the Ordinary Expenditure, including the

Statutory Instalment in payment of Debt 21,873 8 7

Surplus Revenue..... £675 11 11

This surplus is considerably less than that for the year ending 31st December 1862, a circumstance attributable in some degree

to the falling off in the number of Patients above noticed, and the consequent diminution of Revenue, without a corresponding reduction in Expenditure, the amount of which, so far as regards Interest of Debt, Feu Duties, &c., is independent of the number of the Inmates.

It is to be observed that the decrease in the number of Patients is mostly confined to the Pauper Department; and that the Patients who have been removed are generally Paupers from other Lunacy Districts whose rate of board was £30 per annum, being the most remunerative class of Patients. Many of these Patients are now accommodated in District Asylums in other parts of the country, and as the number of such Asylums throughout Scotland increases, the Patients from other Districts boarded in the Royal Edinburgh Asylum must necessarily diminish.

The Managers are at present engaged in negotiations with the Lunacy Board of the Metropolitan District, whereby it is hoped that arrangements will ultimately be made for replacing by Paupers from the Metropolitan District the Patients from other Districts removed from the Asylum.

Pending the result of these negotiations, the Managers do not propose that any immediate change be made upon the boards payable for the Patients in any departments of the Institution.

During the past year the Managers have expended the sum of £1654 5s. 6d. in extraordinary disbursements, including the furnishing of the dwelling-house lately built for the Resident Physician, and the erection of the new lodge and gate at Tipperlinn. Dr Skae having in the early part of the year removed to his new residence, the house previously occupied by him has become available for the reception of Patients paying a high rate of Board, from which source it is hoped that a considerable increase of Revenue will be derived.

The Managers have made Payments of the Statutory Installments for the past year towards the liquidation of their Original Debt. In consequence, however, of the extraordinary disbursements above alluded to, the Unsecured Debt of the Corporation has been necessarily increased. The following statement shews the amount of Secured and Unsecured Debt at the close of

the past year, as contrasted with the amount at 31st December 1862 :—

The total amount of Debt at 31st December 1862, was—

Statutory Debt	£25,918	0	11
Other obligations	3,749	4	10
	<hr/>		
	£29,667	5	9

Statutory Debt at 31st Dec.

1863,.....	£24,618	0	11
Other obligations.....	5,263	11	11
	<hr/>		
	29,881	12	10

Increase of Actual Debt,..... £214 7 1

The Managers cannot but regret that the Debt of the Corporation should have been thus increased. They are satisfied, however, that the money has been well expended, and there is no prospect of any further extraordinary disbursements being required for some time to come.

The Annual Report and Account of the Charity Committee, together with the Physician's Report, are herewith submitted to the Corporation.

(Signed) JOHN DRYBROUGH.

REPORT
OF THE
CHARITY COMMITTEE OF MANAGERS
OF THE
ROYAL EDINBURGH ASYLUM FOR THE INSANE,
FOR THE YEAR ENDING 31ST DECEMBER, 1863.

The Committee appointed under the Act of Incorporation of the Royal Edinburgh Asylum, to administer the Charitable Funds of the Institution, beg leave herewith to submit to the Managers the Account of the Intromissions with the Funds for the Year ending 31st December 1863. The average number of Patients receiving Relief from the Income of the Fund has been 15, involving an Expenditure of £190. The Amount of Capital Funds, as at 31st December 1863, was £7654 14s. 2d., being an increase of £558 14s. 5d. over the preceding year, arising from a Legacy of £500 left by the late Mrs Douglas, of Orbiston Park, and Surplus Revenue.

GEO. SMITH.

ABSTRACT

OF THE

TREASURERS' ACCOUNT

FOR THE YEAR 1863.

I. CHARGE.

Years of Boards given up in last Account,	L.87 18 9
Patients' Boards,	21,874 0 9
Furnishings made to Patients, &c.,	175 15 10
Produce sold,	499 3 11
Balance due to Treasurers at 31st December, 1863,	2,463 11 11
Amount of Charge,	<u>L.25,100 11 2</u>

II. DISCHARGE.

Balance due to Treasurers at 31st December, 1862, L.949 4 10
Ordinary Expenditure.

Annual Disbursements for the Institution—

(1.) Provisions,	L.9465 15 9
(2.) Repairs and Furnishings, including those for Grounds,	5549 13 4
(3.) Public and Parochial Burdens,	133 19 11
(4.) Interests,	1346 17 0
(5.) Feu-Duties,	393 0 4
(6.) Insurance against Fire,	36 13 7
(7.) Water-duty,	103 14 0
(8.) Miscellaneous Payments,	279 15 11½
	<u>17,309 9 10½</u>
Carry forward,	<u>L.18,258 14 8½</u> L.25,100 11 2

		Amount of Charge brought forward,		L.25,100 1
II. DISCHARGE— <i>Continued.</i>		Brought forward,		L.18,258 14 8½
2. Salaries, &c :—				
1. Resident Physician,	. . .	L.610	0 0	
2. Assistant ditto,	. . .	80	0 0	
3. Second Assistant ditto,	. . .	60	0 0	
4. Third Assistant ditto,	. . .	24	2 6	
5. Matrons, . . .	. . .	116	5 0	
6. Chaplain, . . .	. . .	80	0 0	
7. House Superintendent,	. . .	125	0 0	
8. Gardener, . . .	. . .	52	10 0	
9. Honorarium to Visiting Committee,	110	0 0		
10. Conjt. Treasurers and Secretaries,	380	0 0		
11. Attendants, &c., . . .	2244	3 1½		
			3882	0 7½
III. Expense of New Buildings, . . .			1654	5 6
IV. Arrears of Boards outstanding, . . .			105	10 4
V. Bonds paid up, . . .			1200	0 0
		Amount of Discharge,		<u>L.25,100 1</u>

A B S T R A C T

OF THE

ORDINARY INCOME AND EXPENDITURE.

I. INCOME.

1. Boards,	. . . . .	L.21,874
2. Furnishings to Patients, &c.,	. . . . .	175
3. Produce,	. . . . .	499
Amount of Income,		<u>L.22,549</u>

II. EXPENDITURE.

I. Ordinary—

1. Disbursements and Annual Payments, exclusive of interest,	L.15,962	6 10
2. Salaries,	3,882	0 7
3. Instalment in Sinking Fund,	1,810	0 0
4. Interest on Unsecured Debt,	219	1 2
		<u>21,873</u>

Surplus of Ordinary Income over Ordinary Expenditure,	<u>L.675</u>
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STATE OF FUNDS AT 31ST DECEMBER, 1863.

I. DEBTS.

1. Amount of Debts on Bonds and Dispositions in Security,	L.24,718	0	11
2. Additional Sum borrowed on Promissory Note of Treasurers,	400	0	0
3. Additional Loan from Charity Committee secured over Tipperlinn Property,	2,400	0	0
4. Accounts for the Quarter ended,	3,486	14	2
5. Outstanding Accounts, and proportion of current Feu-duty, Interest, Taxes, &c., say	350	0	0
6. Balance due to Treasurers,	2,463	11	11
	<u>L.33,818</u>	7	0

II. ASSETS.

1. Arrears of Boards, as before, . . .	L.105	10	4
2. Provisions and Stock on hand, . . .	1714	12	1
	<u>1,820</u>	2	5
Deficiency, . . .	<u>L.31,998</u>	4	7

ABSTRACT

OF THE

TREASURERS' INTROMISSIONS

WITH THE

FUNDS OF THE CHARITY COMMITTEE,

FOR THE YEAR 1863.

I. CHARGE.

1. Balance due by Treasurers at 31st December, 1862, per last Account,	L.395 19 9
2. Donation received from the Trustees of the late Mrs Douglas,	450 0 0
3 Do. do. from the Earl of Stair,	2 0 0
4. Interests,	308 12 2
Amount of Charge,	L.1156 11 11

II. DISCHARGE.

1. Sum lent N. A. Quiddington, Esq.,	L.1000 0 0
2. Sum paid to account of Patients' Boards,	199 0 0
3. Expense of Discharge to Mrs Douglas' Trustees,	1 15 0
4. Interest paid,	1 2 9
	<u>1201 17 9</u>
Balance due to Treasurers at 31st December, 1863,	<u>L.45 5 10</u>

STATE OF FUNDS AT 31st DECEMBER, 1863.

1. Amount held in Loan by the Managers of the Asylum,	L.5700 0 0
2. On Bond by Caledonian Railway Company,	1000 0 0
3. Do. N. A. Quiddington, Esq.,	1000 0 0
	<u>L.7700 0 0</u>
Deduct balance due to Treasurers, as above,	45 5 10
Amount of Funds,	<u>L.7654 14 2</u>

PHYSICIAN'S ANNUAL REPORT

OF THE

ROYAL EDINBURGH ASYLUM FOR THE INSANE,

FOR THE YEAR 1863.

*Read at the Annual Meeting of Contributors, held on the
29th day of February, 1864.*

I have now the honour to submit to you my eighteenth Annual Report. This Report can differ but little from that of any previous year, consisting mainly of a series of Tables, illustrating in a statistical form the medical records of the Institution, accompanied by a brief commentary in explanation or amplification of the facts.

The first Table exhibits the general results of the past year.

The average number of patients resident in the Asylum during the year was 678, being 10 fewer than the daily average of the previous year. This is the first occasion within my knowledge in which there has been a decrease instead of an increase in our numbers. This diminution is partly owing to the smaller number *admitted* during the year, and partly to the greater number of recoveries; but mainly, I think, to the greater number of those who were removed uncured either to the lunatic wards of Poor-houses, to Private Asylums, or the District Asylum lately opened for Argyllshire. The completion of other District Asylums, in course of building, will soon have the effect of still further reducing our numbers, and cutting off the sources from which many of the inmates are now usually sent.

The total number under treatment was 907. Of this number 220 were admitted, and 235 were removed. Of the removals 77 were recovered, 24 improved, 66 unimproved, and 68 were removed by death.

TABLE I.—*General Results of the Year.*

	Males.	Females.	TOTAL.
Number of inmates at the close of 1862,	357	330	687
Admitted during the year 1863, . . .	104	116	220
Total number under treatment, . .	461	446	907
Discharged, $\begin{matrix} \text{M.} & \text{F.} & \text{T.} \\ 70 & 97 & = 167.. \end{matrix}$			
Of whom were Recovered, $\begin{matrix} \text{M.} & \text{F.} & \text{T.} \\ 26 & 51 & = 77 \end{matrix}$			
... .. Relieved, $\begin{matrix} 7 & 17 & = 24 \end{matrix}$			
... .. not Improved, $\begin{matrix} 37 & 29 & = 66 \end{matrix}$			
Deaths, $\begin{matrix} 44 & 24 & = 68 \end{matrix}$			
	114	121	235
Total number at the close of 1863, .	347	325	672
Average number daily resident during the year 1863.			
	Males.	Females.	Total.
	$348\frac{29}{365}$	$330\frac{353}{365}$	$678\frac{191}{365}$

The recoveries were in the ratio of 35 per cent. to the admissions, or 11·5 per cent. to the average number resident. The proportion of recoveries is above that of the previous two years, and above that of the general average of Public Asylums, and is therefore a source of congratulation.

Since the commencement of the Asylum 5770 cases have been admitted, and 2199 cases have been removed cured. The total recoveries are therefore in the ratio of 39 per cent. to the admissions, or upwards of 43 per cent., deducting those who remain under treatment.

The mortality was in the ratio of 7 per cent. to the total number under treatment, which is also a favourable result compared with former years, and the experience of other large Asylums, similarly situated as regards the nature of the cases admitted.

A considerable number of patients spontaneously applied for admission. Of these, three were admitted as voluntary residents in the Asylum. For two who also applied in this way, the usual warrant was obtained. Two who were sent away from the Asylum came back immediately and insisted on remaining, as they felt assured they were unsafe to be at large; one of them feared he

would commit suicide, and the other that he would commit a homicidal act. Two patients who applied for admission, in a distressing state of morbid terror, were furnished with letters to the inspectors of poor of their respective parishes, in order that they might be returned under the usual warrant; but of these I heard no more—possibly they were detained in the workhouse.

I have adverted in previous Reports to improper methods of bringing patients to the Asylum, and to the unnecessary use of restraint often employed. One female was brought from the extreme north of Scotland under charge of a male attendant only. Two men, who were perfectly quiet and harmless when relieved from their fetters, were brought to the Asylum in manacles, one of whom had also his arms pinioned and his legs tied, and was accompanied by two powerful men and the Inspector of Poor. Another patient, a female, for whom I sent a nurse to fetch her to the Asylum, was found shut up in a box, with spars nailed across it to prevent her exit. Another female was admitted who had not been washed for many years, and whose finger-nails projected upwards of an inch beyond her fingers. It would appear that notwithstanding all that has been done of late years for the improved management of the insane, and all that has been made known, there still exists a lamentable amount of ignorance and fear in the mode the insane are treated, especially in remote districts, and amongst the poor.

Table II. shews the duration of residence in the Asylum of those who were removed uncured, or only partially relieved.

Of those included in this Table, the first was a patient discharged on the day following his admission. He was admitted on a certificate of emergency; but the medical men who visited him on the following day, failing to satisfy themselves as to his insanity, he was discharged. He bore his temporary detention with perfect calmness. On one occasion, about fifteen years ago, a young gentleman was admitted under a regular warrant from the Sheriff, in whom I could discover no insanity, and I requested his friends to remove him on the following day. In his case also, although a young man of very ardent passions, he conducted himself with perfect calmness and self-possession.

TABLE II.—*Period of Residence of those Relieved and Not Improved at their Removal.*

PERIOD OF RESIDENCE.	RELIEVED.			NOT IMPROVED.		
	Males.	Fem.	TOTAL.	Males.	Fem.	TOTAL.
Under 1 week, . .	1	0	1	2	0	2
" 2 " . .	0	0	0	1	0	1
" 1 month, . .	0	1	1	1	0	1
" 2 " . .	0	1	1	1	2	3
" 3 " . .	0	1	1	4	0	4
" 4 " . .	1	5	6	2	1	3
" 5 " . .	1	0	1	2	0	2
" 6 " . .	0	0	0	2	1	3
" 7 " . .	1	0	1	2	0	2
" 8 " . .	0	0	0	1	1	2
" 9 " . .	0	1	1	1	1	2
" 10 " . .	0	0	0	1	0	1
" 12 " . .	1	0	1	1	3	4
" 18 " . .	1	2	3	3	4	7
" 2 years, . .	0	1	1	1	0	1
" 3 " . .	1	1	2	2	3	5
" 4 " . .	0	2	2	3	1	4
" 5 " . .	0	0	0	2	2	4
" 6 " . .	0	1	1	3	3	6
" 7 " . .	0	0	0	1	0	1
" 8 " . .	0	0	0	0	1	1
" 9 " . .	0	0	0	1	1	2
" 10 " . .	0	1	1	0	1	1
" 11 " . .	0	0	0	0	1	1
" 14 " . .	0	0	0	0	1	1
" 18 " . .	0	0	0	0	1	1
" 19 " . .	0	0	0	0	1	1
Total, . .	7	17	24	37	29	66

Of more than 4000 cases admitted during my residence, I have never seen any one goaded into uncontrolled anger by the fact of his reception into an Asylum. A great many, on the contrary, who have been very violent and excited, become immediately comparatively calm when they see their violence has been deliberately deemed insanity, and they exercise all the powers of self-control they possess. In most instances, the patients, being received and treated uniformly with candour and kindness, at once recognise that they are among friends who are anxious only to soothe and protect them. One of the patients admitted during the year was sent by the Procurator Fiscal as a dangerous lunatic, and was described as very violent, and to have threatened the lives of his

wife and others. He immediately became perfectly tranquil on admission, and exhibited no symptoms of insanity during his residence in the Asylum.

Of the other cases, fifteen were transferred to the lunatic wards of workhouses, and fourteen to District Asylums. Some of these patients had been inmates of the Institution for a considerable number of years, and left it with much regret.

The remainder were mostly removed by their own relatives—in not a few instances very injudiciously, and contrary to advice. Several so removed were soon afterwards brought back to the Asylum in a worse condition than on their first admission. One married during his temporary absence, and soon after his return here he had a child born to him. In cases such as this, which was that of a pauper inmate, the result was vexatious, especially to the rate-payers; but there seems to be a great difficulty in preventing such occurrences,—the friends go to the Inspector of Poor and represent (however wrongfully) that they are able to support the patient; he is then taken off the poor-roll, and his relative now has the power, which he forthwith exercises, of removing him from the Asylum at all hazards, and in not a few instances, as has happened, in a very dangerous state both to himself and others.

The next Table shews the ages of the patients admitted, of those who were discharged cured, and of those who died.

TABLE III.—*Ages of those Admitted, Discharged Recovered, and Dead.*

AGE.	ADMITTED.			DISCHARGED RECOVERED.			DEAD.		
	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.
From 10 to 20, .	12	3	15	5	3	8	0	1	1
„ 20 „ 30, .	31	37	68	8	15	23	4	3	7
„ 30 „ 40, .	22	28	50	3	12	15	6	3	9
„ 40 „ 50, .	21	27	48	7	13	20	16	1	17
„ 50 „ 60, .	10	15	25	2	7	9	5	6	11
„ 60 „ 70, .	5	4	9	1	1	2	11	4	15
„ 70 „ 80, .	3	1	4	0	0	0	2	6	8
„ 90 „ 100, .	0	1	1	0	0	0	0	0	0
Total, . .	104	116	220	26	51	77	44	24	68

It shews the relative frequency of the disease at different ages, its greater curability at earlier periods of life, and the mortality of cases occurring in old age.

The following Table exhibits the forms of insanity, according to the usual method of classification, of those admitted.

TABLE IV. No. I.—*Form of Disease in those Admitted.*

FORM OF DISEASE.	Males.	Females.	TOTAL.
Mania,	23	30	53
„ Acute,	15	23	33
„ Chronic,	2	0	2
„ Puerperal,	0	4	4
„ Epileptic,	1	3	4
„ Senile,	1	2	3
Melancholia,	25	33	58
Dementia, Acute,	10	8	18
„ Chronic,	1	0	1
„ Epileptic,	2	0	2
Monomania of Suspicion,	3	1	4
„ „ Unseen Agency,	0	2	2
Moral Insanity,	2	4	6
„ in form of Dipsomania,	1	2	3
General Paralysis,	18	4	22
Total,	104	116	220

The results differ from those of the two preceding years in shewing a larger number of cases of Melancholia, and a fewer number of those affected with Mania or general insanity. The number of persons labouring under that curious but hopeless disease, General Paralysis, was nearly the same as some years past, but included, out of twenty-four cases, the unusually large number of four females.

Two of the males affected with this form of disease had been Kleptomaniacs. The one had suffered from epileptic fits when a boy, and from that period was weak-minded and a Kleptomaniac up to the accession of the attack of General Paralysis. In the other the disease was caused, as it often appears to be, by a great mental shock.

To this Table I add another illustrative of the forms of insanity in those admitted according to a new and more practical form of classification, which I have lately recommended for the consideration of Asylum Physicians. It is an attempt to group the different forms of insanity into natural families or classes, not

distinguishing the peculiar *mental features* or symptoms of each, which, in fact, vary at different times in almost every case, or merge insensibly into each other; but referring the cases, either by means of their history or the cause which has conditioned the mental derangement, to certain groups or natural families.

TABLE IV. No. II.—*Forms of Insanity in those Admitted.*

FORMS OF INSANITY.				Males.	Females.	TOTAL.	
Moral Idiocy,	.	.	.	3	3	6	
Intellectual Idiocy,	.	.	.	2	1	3	
Insanity with Epilepsy,	.	.	.	3	4	7	
Insanity of Masturbation,	.	.	.	10	1	11	
Insanity of Pubescence,	.	.	.	0	0	0	
Satyriasis,	.	.	.	0	0	0	
Nymphomania,	.	.	.	0	1	1	
Hysterical Mania,	.	.	.	1	1	2	
Amenorrhœal Mania,	.	.	.	0	8	8	
Post-connubial Mania,	.	.	.	0	0	0	
Puerperal Mania,	.	.	.	0	6	6	
Mania of Pregnancy,	.	.	.	0	4	4	
Mania of Lactation,	.	.	.	0	4	4	
Climateric Mania,	.	.	.	7	16	13	
Ovario Mania,	.	.	.	0	9	9	
Mania of Atheroma,	.	.	.	6	7	13	
Mania of Tuberculosis,	.	.	.	13	7	20	
Metastatic Mania,	.	.	.	0	0	0	
Traumatic Mania,	.	.	.	3	1	4	
Syphilitic Mania,	.	.	.	0	0	0	
Delirium Tremens,	.	.	.	0	0	0	
Dipsomania,	.	.	.	3	2	5	
Mania of Alcoholism,	.	.	.	7	0	7	
Post-febrile Mania,	.	.	.	1	2	3	
Oxaluria,	.	.	.	2	0	2	
Phosphaturia,	.	.	.	0	0	0	
General Paralysis,	.	.	.	18	5	23	
Epidemic Mania,	.	.	.	0	0	0	
Idiopathic Mania,	{	Sthenic,	{	Mania,	0	0	0
				Melancholia,	9	13	22
				Monomania,	3	2	5
	{	Asthenic,	{	Mania,	5	8	13
				Melancholia,	6	8	14
				Monomania,	0	1	1
				Dementia,	2	2	4
Total,				104	116	220	

This method appears to me of great practical value in reference to the diagnosis and treatment of all cases of insanity, and is, in point of fact, the way in which all cases are looked at by a psychologist in trying to form an opinion as to the cause, probable termination, and treatment of any case. I cannot illustrate the

subject more fully in this place. I submit this Table, however, as an instalment of what may in future be more fully developed. The Table is far from perfect, being constructed from data which were recorded without reference to such a method of classification.

TABLE V.—*Illustrations of Suicidal Tendency in those Admitted.*

	Males.	Females.	TOTAL.
Had attempted Suicide,	11	23	34
Had meditated Suicide,	10	13	23
Total,	21	36	67
<i>Form of Insanity during which Suicide was attempted—</i>			
Acute Mania,	0	4	4
Mania,	2	5	7
„ Puerperal,	0	3	3
Melancholia,	8	10	18
Dipsomania,	0	1	1
Dementia,	1	0	1
Total,	11	23	34
<i>Form of Insanity during which Suicide was meditated—</i>			
Mania,	2	2	4
Melancholia,	6	8	14
Dipsomania,	1	1	2
General Paralysis,	1	0	1
Moral Insanity,	0	1	1
Epileptic Mania,	0	1	1
Total,	10	13	23
<i>Means used in attempts made—</i>			
Strangulation,	1	3	4
Precipitation,	2	3	5
Drowning,	0	5	5
Starvation,	0	1	1
Burning,	0	1	1
Suffocation,	0	1	1
Cut Throat,	2	1	3
Poison,	1	1	2
Stabbing and Hanging,	1	2	3
Insertion of Needles into Neck, Suffocation, and Strangulation,	0	1	1
Drowning and Suspension,	0	1	1
Hacquering, Cut Throat, and Starvation,	1	0	1
Not stated,	3	3	6
Total,	11	23	34

The preceding Table illustrates the frequency of the suicidal impulse among those admitted.

I have constructed a Table of this kind for a number of years, partly to illustrate the subject itself, but with a view also to ascertain whether, as has been often alleged, the suicidal impulse ever exhibits itself as an epidemic. As far as the experience of this Asylum extends, this does not appear to be the case, as the numbers threatening and attempting suicide have been remarkably uniform during each succeeding year. The results exhibited in this Table, however, differ in one remarkable fact from those of previous years, namely, in this, that the attempts *actually made* to commit suicide largely exceed those of any year during the last ten years.

The attempts at self-destruction by inmates after their admission were numerous, and in some instances very persistent and ingenious, evincing great cunning and secrecy. One female, who had repeatedly attempted strangulation, tried to poison herself by inhaling the gas from a gas-pipe, after blowing out the flame. She afterwards secreted a few sewing and darning needles, five of which she buried deeply in her neck. Although one of them passed through the larynx, and others were embedded in the neck close to the large arteries, they were all fortunately removed without any bad effects, and the patient recovered. Another female, who was very closely watched and frustrated in numerous attempts to effect her purpose, ultimately tore a large portion of her tongue out; the injury, although a serious one, seemed to conduce to her speedy recovery.

In one instance, a deliberate intention of committing suicide was betrayed by a letter to a near relative, bidding him farewell, as he never would see him again. It has been long observed that the *letters* of patients in many instances betray their insanity and morbid impulses much more frequently than their *conversation*. Hence the great necessity of perusing the letters of all patients who may harbour suicidal or homicidal impulses, or who may exercise sufficient reticence and cunning to conceal their delusions in conversation. I lately discovered, by the perusal of a letter addressed to the Lord Advocate, that one of the patients had

formed a deliberate intention of murdering me, which he communicated in this letter to the Advocate. This patient was so well conducted at the time, to all appearance, that he was permitted to walk into town frequently to visit his friends, and might at any time have provided himself with the means of carrying out his purpose.

Many of the letters of the patients contain harassing and unfounded statements, degrading and obscene language, alarming threats, incoherent babbling, and could not be forwarded with any propriety to the parties to whom they are addressed.

Not unfrequently the letters addressed to the patients by their friends and others contain statements calculated to irritate and aggravate their illness, of which no one can properly judge but those in daily and familiar converse with them. Hence it is not less necessary, in a great many cases, especially recent ones, to see the letters sent to the patients, as well as those sent by them.

I take the liberty of making these statements in justification of one of the rules your Directors have imposed upon me in the printed regulations of the Asylum, viz., that the Physician shall "inspect all letters written by Patients, and shall withhold such as appear to him objectionable," and that all letters so withheld shall be laid before the Visiting Committee. This statement is, I think, called for by the remarks which recently appeared on this subject in one of the Edinburgh papers; and in order that the public may know, and the patients under my charge who have access to the papers, may know my practice in reference to the correspondence of the inmates, I think it right to add, that letters, if not forwarded to the friends of the inmates, are either returned to the writers, or they are told frankly and truthfully the fact that they have not been forwarded, and the reason of their being withheld; and that all letters sent to patients by their friends, if they are not delivered, as they almost uniformly are, are returned to the friends, pointing out the clause which appears objectionable. The same rule applies to letters to the authorities, such as the Sheriff, the Lord Advocate, or the Lunacy Board, or the Home Secretary, which are uniformly forwarded, whatever nonsense they may contain; and all letters from those authorities to the patients are as uniformly in the

same way delivered; and such letters are very rarely indeed inspected, and only if there are special reasons, such as I have alluded to, for doing so.

I may also add, that a large number of the patients enjoy the privilege of writing and receiving letters from their friends without any inspection at all. This has always been done if desired by the friends. When a patient's letters are inspected, they are made aware of the fact, by being told that they must be left open, perfect frankness and truthfulness being found to be essential to any cordial relation between the Officers of the Asylum and those under their charge, and the basis of all good that can be derived from their moral treatment of the insane.

Table VI. (p. 24) shews the causes assigned for the disease in those admitted.

The great frequency of relapses, or the predisposition engendered by the disease itself, is shewn by the fact that, of the cases included in this Table, sixty-five had suffered from previous attacks of insanity. A hereditary predisposition was ascertained in forty-seven cases, but, I have no doubt, existed in a great many more, for this fact is very often ignored or concealed by the relatives.

The most frequent exciting cause was, as usual, intemperance, being the cause assigned in ten per cent. of those admitted.

The next most frequent single cause of insanity would appear from the Table to arise out of bodily ailments.

By far the most frequent of all causes, however, are those of a moral kind, proceeding from distress, anxiety, grief, fear, horror, excitement, the results respectively of domestic afflictions and disagreements, disappointments in business, reverses of fortune, loss of friends, unrequited love, and sudden and violent shocks to the mind. If the cases arising from such causes are added together, they will be found to constitute nearly one-half of all those contained in the Table where the cause was ascertained.

It is not a little curious that that form of insanity in which there is the greatest amount of organic disease in the brain, namely, General Paralysis, or, as it is vulgarly called, softening of the brain, is very frequently occasioned by mental shocks. One

well-marked case of this was brought on in a male patient by seeing his own child burnt to death. He soon afterwards stole some lead, for which he was sent to jail. There it was soon discovered that his stealing was only one of the symptoms of his utterly hopeless disease.

TABLE VI.—*Causes of Disease in those Admitted.*

CAUSES OF DISEASE.	Males.	Females.	TOTAL.
Congenital,	6	3	9
Anxiety,	8	3	11
Terror,	0	2	2
Disappointed Affection,	0	6	6
Over-work,	2	0	2
Over-study,	2	2	4
Domestic Disagreements,	0	5	5
Domestic Affliction,	1	7	8
Religious Excitement,	4	9	13
Intemperance,	17	5	22
Disappointment in Business,	7	0	7
Destitution,	6	3	9
Change of Life,	0	6	6
Child-bearing,	0	10	10
Sun-stroke,	3	0	3
Injury to Head,	4	1	5
Old Age,	5	2	7
Bodily Ailments,	3	12	15
Epilepsy,	4	3	7
Over-lactation,	0	4	4
Destitution and Intemperance,	0	1	1
Fever,	1	2	3
Prostitution,	0	1	1
Excitement after attending a Marriage,	0	1	1
Secret Vice,	10	1	11
Railway Travelling,	0	1	1
Solitude,	1	0	1
Excess in Opium,	1	0	1
Reverse of Fortune,	0	1	1
Causes unknown,	19	25	44
Total,	104	116	220
Of these there had been Previous Attacks in	35	28	65
Hereditary Predispositions known to exist in	21	26	47

Thirteen of the cases were ascribed to religious excitement, most of them having originated after attendance at revival meetings. In one of these cases, the additional cause was added of an attempt at seduction of the young woman by one of the police.

In six females the insanity was traced to disappointments in love, and in one of these the calamity had been aggravated by the evil prognostications of a "spae wife," consulted by the unhappy victim.

Of the cases of disease induced by physical causes, eight were traumatic, five of them resulting from direct injuries to the head, and four from sun-stroke. Several of these cases presented points of great interest to the physician. I notice only one, in illustration of the general ignorance and deplorable neglect, which guides the common mind in regard to the unhappy subjects of mental disease. An officer in H.M.S., serving in India, suffered from sun-stroke, in consequence of which his mind became affected, and he imagined his food was poisoned. His frequent complaints and accusations, instead of leading to the natural and proper result of his being invalided and sent home on leave under charge of an orderly, led to his being advised to sell his commission; this he was permitted to do. He then took his passage home from Calcutta; but his mental aberration being detected by his fellow-passengers, they became alarmed and refused to sail with him; and the captain, at their solicitation, landed this helpless and friendless gentleman at Madras, with half of his passage money returned. After hanging about Madras for some time, the young gentleman took his passage on board a sailing vessel for England; and during the voyage home, influenced by the delusion regarding his food, he felled the mate with an iron bar. He was placed in irons, and on his arrival in England was handed over to the authorities, and sent to Newgate to stand his trial. A notice of this occurrence, which appeared in the *Times*, was the first intimation which reached his friends of his having left India, and of the manner in which one of Her Majesty's officers could be treated in these days of civilisation, while labouring under the effects of brain disease, caused by exposure to an Indian sun.

In my last Annual Report, I alluded to the fact that in almost every sensation play or novel which has been produced for some years past, the plot is made to turn on the unjust confinement of the hero or heroine in some Asylum on the pretext of insanity,

although quite sane, as one explanation of the frequency of tragical homicides, which every day appear in our newspapers, committed by insane persons allowed to be at large. And this I ascribed partly to the current of popular feeling such fictions had engendered, and the fear imparted to the relatives of the insane and their medical attendants, that they would incur the odium of public opinion, and the vexatious losses and anxieties attendant upon law suits for illegal confinement, if they took the step, dictated by humanity and science, of placing persons so affected under proper treatment in Asylums.

I took that opportunity of remarking that I believed such cases were entirely fictitious, and that the only case which had occurred of late years, and which had excited such wholesale abuse of private Asylums, and the present state of the law, on the part of the public press, afforded, on the contrary, an ample proof of the efficient manner in which the securities of the subject against improper confinement were guarded by existing statutes, as in that case the alleged lunatic was discharged within twenty-four hours after his confinement.

This incidental remark was through some misapprehension misconstrued by a number of the periodicals and papers of that date; and I was represented as saying, that the sensation novels alluded to were a *frequent cause* of insanity. It may be so, but I never said so. It happens, however, that during the past year a case was admitted in which these sensation novels appear to have played no small part in the development of morbid impulses and overt acts of the most dangerous kind. A young gentleman was admitted, who, although possessed of intellectual powers considerably above the average, evidently laboured under a natural or congenital defect of the moral sense, and of all correct appreciations of right and wrong. The education of this part of his mental nature may have been neglected, or misdirected, but there could be no doubt as to the fact that his appreciations of the rightness or wrongness of any action were totally different from those of others. He appears to have lived for several years upon a literary diet, composed exclusively of sensation novels and "dustmen of

destiny" periodicals, under the influence of which he ultimately concocted and actually attempted to carry into execution a romantic and insane plot for the assassination of a relative whose heir he was.

Six of the cases tabulated in Table IV. are entered as cases of Dipsomania. It is proper I think that I should state, in reference to them, that none of them are cases of mere drunkenness. They are cases in which an incontrollable craving for stimulants formed one of the more prominent symptoms, or cases in which habits of intemperance may have brought on the insanity, but they are all cases in which there were well-marked symptoms of mental aberration existing at the time of their admission. I am frequently asked for advice in regard to persons of intemperate habits, and have been frequently asked if such cases could be admitted into the Asylum for their cure. But in no instance have any such cases been admitted. There is a wide difference between mere drunkenness, and that form of insanity where the craving for stimulants is one only of the symptoms of mental and moral perversion. This will be readily appreciated by all those who have had the calamity of having had one of their own family under the influence of that diseased condition in which one drinks to excess and constantly under the influence of disease, and because he cannot help it; and can by them be readily distinguished from those cases where one drinks to excess from choice, even although he should be carried to bed drunk every night of his life. No such case was ever admitted into this or any other well-regulated Asylum. Hard words have been used against Asylums as being converted into reformatories for vice and crime; but I think the charge may be safely answered by the statement, that no such cases are admitted into Asylums unless they are cases of real disease. If, as may often happen, the disease has been induced by the vice of self-indulgence, it is not less the duty of an Asylum Superintendent to receive the sufferer, upon whom Providence has already inflicted His punishment, under his care and protection, and afford him all the means which such an institution gives for his restoration to sanity and society. If any one is prepared to assert, that such a patient

has been screened from justice or ecclesiastical censure by his seclusion in an Asylum, he must be prepared to shew, that judicial interference was not delayed until vice had ended in disease,—or the hardihood to maintain that the consequences of vice should pursue the victim after they had culminated in insanity.

The following Table shews the form of insanity of those who were removed, and illustrates the curability of the more acute forms of the disease.

TABLE VII.—*Diseases of those Recovered, Relieved, and Not Improved at their Removal.*

FORM OF DISEASE.	RECOVERED.			RELIEVED.			NOT IMPROVED.		
	Males.	Fem.	TOTAL.	Males.	Fem.	TOTAL.	Males.	Fem.	TOTAL.
Mania,	3	10	13	1	7	8	12	8	20
„ Acute, . . .	6	11	17	1	2	3	3	1	4
„ Chronic, . .	0	1	1	0	0	0	1	0	1
„ Puerperal, .	0	3	3	0	2	2	0	0	0
„ Epileptic, .	1	0	1	0	0	0	1	0	1
Demonomania, .	0	0	0	0	0	0	1	0	1
Melancholia, .	11	20	31	2	4	6	4	2	6
„ Religious, .	0	1	1	0	0	0	0	0	0
Dementia, . . .	0	0	0	0	2	2	5	13	18
„ Senile, . . .	0	0	0	0	0	0	1	0	1
Monomania of Pride, .	0	0	0	0	0	0	0	1	1
„ Suspicion, . .	1	0	1	0	0	0	0	1	1
„ Of Unseen Agency, .	1	2	3	1	0	1	0	1	1
Moral Insanity, . .	0	3	3	0	0	0	1	0	1
Dipsomania, . . .	1	0	1	2	0	2	1	0	1
Congenital Imbecility, .	0	0	0	0	0	0	2	0	2
„ Idiocy, . . .	0	0	0	0	0	0	0	1	1
General Paralysis, .	2	0	2	0	0	0	6	0	6
Total,	26	51	77	7	17	24	38	28	66

Next follows a Table shewing the duration of residence in the Asylum of those who recovered. Three-fourths of the recoveries took place within one year. It is gratifying, however, to know that one-fourth recovered, after periods of eighteen months, two and three years, and that five recoveries occurred after a residence

of nearly five, seven, eight, nine and fourteen years respectively,—a result which shews how unwise it is to regard almost any case as absolutely hopeless, and to treat it accordingly.

Two cases of General Paralysis are entered among the recoveries. They were apparently well, at least mentally; but I fear afforded illustrations only of the remarkable remissions which are sometimes met with in this disease, and which prove only of short duration.

TABLE VIII.—*Period of Residence of those Discharged Recovered.*

PERIOD OF RESIDENCE.	Males.	Females.	TOTAL.
Under 4 weeks, . .	1	1	2
" 6 " . .	0	2	2
" 2 months, . .	2	3	5
" 3 " . .	5	7	12
" 4 " . .	5	3	8
" 5 " . .	2	4	6
" 6 " . .	2	4	6
" 7 " . .	3	7	10
" 8 " . .	1	3	4
" 10 " . .	1	3	4
" 18 " . .	1	3	4
" 2 years, . .	2	4	6
" 3 " . .	1	2	3
" 5 " . .	0	1	1
" 7 " . .	0	1	1
" 8 " . .	0	1	1
" 9 " . .	0	1	1
" 14 " . .	0	1	1
Total, . .	26	51	77

The following Table shews the duration of disease previous to admission in the cases which were sent to the Asylum during the year.

A probable estimate is formed in this Table of their curability and incurability. In this estimate several cases of very short duration are classed among the incurable. These were mostly cases where there had been previous attacks, and where the disease had assumed a permanently remittent or periodic form. Several of them were well marked cases of General Paralysis.

TABLE IX.—*Duration of Disease previous to Admission, and Condition of those Admitted.*

DURATION OF DISEASE.	INCURABLE.		CURABLE.		ALREADY DIS-MISSED CURED.	
	Males.	Females.	Males.	Females.	Males.	Females.
Under 1 week, .	2	5	10	11	6	6
" 2 " .	3	5	11	10	7	6
" 3 " .	1	0	8	1	3	1
" 1 month, .	2	3	3	9	2	5
" 6 weeks, .	1	0	4	0	3	0
" 2 months, .	2	3	6	11	2	8
" 3 " .	3	3	1	7	0	5
" 4 " .	0	0	0	3	0	3
" 5 " .	1	0	0	0	0	0
" 6 " .	0	4	4	1	1	1
" 8 " .	1	1	2	0	0	0
" 9 " .	0	1	0	1	0	1
" 10 " .	0	2	0	0	0	0
" 12 " .	4	1	1	1	0	0
" 18 " .	4	0	0	0	0	0
" 2 years, .	2	1	1	2	0	1
" 3 " .	3	5	1	3	0	0
" 4 " .	1	2	0	0	0	0
" 5 " .	0	0	0	1	0	0
" 6 " .	0	1	0	0	0	0
" 7 " .	0	1	0	0	0	0
" 9 " .	1	0	0	0	0	0
" 13 " .	0	1	0	0	0	0
" 15 " .	0	1	0	0	0	0
" 16 " .	0	1	0	0	0	0
" 20 " .	1	0	0	0	0	0
" 30 " .	0	2	0	0	0	0
Congenital, .	4	3	0	0	0	0
Unknown, .	6	9	10	0	1	0
	42	55	62	61	25	37
Total, . . .	97		123		62	

Note.—Of the 37 females dismissed as cured, 2 were discharged relieved, and 6 were liberated on the sanction of the Board of Lunacy—leaving 29 females discharged as completely recovered.

Next follows an enumeration of the causes of death. A large number of the patients died from the direct effects of the brain disease, and a considerable number of Phthisis, one of the most common complications of Insanity.

Two deaths were caused by Typhoid Fever. Fever is rare in Asylums. This is the first time it has occurred within the walls,

as far as I know. Eleven persons were affected. Of these four were attendants, and the remainder patients. Two of the attendants died, and one, a female, who was sent to the Infirmary, returned from it after her convalescence, labouring under Post-febrile Insanity. Two of the patients also died from this epidemic.

TABLE X.—*Causes of Death.*

CAUSES OF DEATH.	Males.	Females.	TOTAL.
General Paralysis, . . .	10	4	14
Ramollissement, . . .	2	0	2
Apoplexy,	0	1	1
Epilepsy,	2	1	3
Exhaustion after Mania,	1	1	2
Meningitis,	1	0	1
Cerebral Effusion, . . .	0	1	1
Tabes Dorsalis,	1	0	1
Phthisis Pulmonalis, . .	10	7	17
Bronchitis,	1	0	1
Pneumonia,	2	0	2
Gangrena Pulmonia, . . .	1	0	1
Pleuritis,	2	0	2
Morbus Cordis,	1	1	2
Chronic Gastritis, . . .	1	0	1
Hæmatemesis,	1	0	1
Enteritis,	1	0	1
Typhoid Fever,	1	1	2
Dysentery,	0	1	1
Obstruction-intestinal, .	1	0	1
Pyæmia,	0	1	1
Lumbar Abscess,	1	0	1
Gleuteal Abscess,	0	1	1
Gradual Decay,	4	2	6
General Debility,	0	2	2
Total, ,	44	24	68

The Institution also suffered from an epidemic, affecting those seized, with sore throat and general fever, terminating on the fifth day. A large number both of patients and attendants were attacked, but all recovered.

The last Table exhibits the period of residence in the Institution of those who died.

One aged female was admitted in a moribund state, and died in three days; another died on the thirteenth. Several of them had been inmates of the Asylum for a number of years, some of whom had been very active and industrious members of the community,

and were missed by not a few. Two of the males had spent nearly forty-five years in the Asylum, both of them had been officers in the army.

TABLE XI.—*Period of Residence of those Deceased.*

PERIOD OF RESIDENCE.	Males.	Females.	TOTAL.
Three Days, . .	0	1	1
Thirteen " . .	0	1	1
Under 1 month, . .	1	0	1
" 2 " . .	3	2	5
" 3 " . .	1	3	4
" 4 " . .	0	1	1
" 5 " . .	2	0	2
" 6 " . .	1	2	3
" 7 " . .	4	0	4
" 9 " . .	1	0	1
" 12 " . .	5	0	5
" 18 " . .	2	5	7
" 2 years, . .	4	2	6
" 3 " . .	3	1	4
" 4 " . .	2	0	2
" 5 " . .	1	1	2
" 6 " . .	2	1	3
" 7 " . .	2	0	2
" 8 " . .	1	2	3
" 9 " . .	0	1	1
" 11 " . .	1	0	1
" 12 " . .	1	1	2
" 14 " . .	1	0	1
" 19 " . .	1	0	1
" 20 " . .	1	0	1
" 21 " . .	1	0	1
" 22 " . .	1	0	1
" 45 " . .	2	0	2
Total, . .	44	24	68

The morbid appearances found in those cases where examinations were permitted will be found detailed in an Appendix to this Report.

The various Tables appended, shewing the amount of work executed by the inmates, will sufficiently testify to the efficiency with which that part of the treatment has been carried out, which consists in the industrial occupation of the patients. In addition to the ordinary gardening and farming operations, the laying out of the garden of the new dwelling-house of the Physician, and the making of new roads, afforded ample daily work for about 100 of

the inmates. The house has been kept in repair as usual, and many additional articles of furniture added by the operations of our own tradesmen. The Cottage lately occupied by me was repainted and papered by our own hands, as well as large portions of the Eastern and Western main buildings. The Cottage, after being nicely furnished, has been occupied by three ladies paying high rates of board, and their several attendants.

The whole clothing of the pauper department has been executed, as usual, by the inmates.

All the means formerly in use, and as many more as could be added, for the recreation and amusement of the inmates and their intellectual culture, have been carried out with unabated activity. The supply of newspapers and periodicals and books has been considerably augmented, and many additions made to the pictures, statuettes, birds, and other objects of interest or ornament throughout the house. The out-door games, bowls, cricket, foot-ball, croquet, and curling have been a source of great enjoyment and healthy exercise. Pic-nic, walking, bathing, and driving parties, visits to "the sights" of interest for the time, such as the Illumination, the Channel Fleet, the Exhibitions of Paintings, Dr Pepper's Ghost, Pantomimes, &c., have all afforded to those fit to be entrusted their quota of enjoyment.

Our Literary Club and *Mirror* continue to flourish and do good. A series of lectures has been continued at fortnightly intervals, for which I take this opportunity of thanking the kind friends who contributed in this manner to our happiness. Of these I may mention Dr Clouston, Charles S. Inglis, Esq., the Rev. Dr Nisbet, the Rev. William Robertson, A. M. Edwards, Esq., J. Harper, Esq., George M'Ewan, Esq., A. M. Bell, Esq., Dr Tuke, Alexander Smith, Esq., George Seton, Esq., and Dr Bedford.

In addition to our usual weekly ball and concert, we have had many special meetings and occasional concerts, dramatic entertainments, and various other sights and merry-makings, all calculated to distract the mind from unhappy thoughts, to inspire old and natural feelings, cheerfulness, and hope.

During the past year you have lost two very valuable medical officers in Dr Clouston and Dr Yellowlees—the former of whom

was appointed Superintendent of the County Asylum, near Carlisle, and the latter to the Glamorgan County Asylum at Bridgend. They left the Institution with regret, and were not less regretted by many they left behind, to whom they had become endeared by three years of unwearied kindness and attention.

In conclusion I beg to thank the Managers, with all sincerity and gratitude, for the confidence they have continued to extend to me, and for the generous manner in which they have seconded and carried out all my plans for the good of the inmates and the improvement of the Institution, and to express my fervent hope that it may continue to grow in usefulness and efficiency.

DAVID SKAE, M.D.

ARTICLES.	WESTERN DEPARTMENT.					EASTERN DEPARTMENT.					TOTAL FOR BOTH DEPARTMENTS.	
	FOR QUARTERS ENDING—					FOR QUARTERS ENDING—					TOTAL IN E. D.	lbs. oz.
	Mar. 31.	June 30.	Sept. 30.	Dec. 31.	TOTAL IN W. D.	Mar. 31.	June 30.	Sept. 30.	Dec. 31.	TOTAL IN E. D.		
Roasting Meat . . .	1002 8	938 4	936 8	1007 . .	3834 4	2474 12	2395 . .	2398 8	2412 . .	9680 4	13564 8	Roasting Meat . .
Boiling Meat . . .	7171 . .	6890 . .	6890 . .	7085 . .	28036 . .	2106 . .	2116 . .	2106 . .	2106 . .	8434 . .	36470 . .	Boiling Meat . .
Houghs . . .	10920 . .	11290 . .	10753 . .	11120 . .	44083 . .	614 12	586 8	634 8	645 12	2481 8	46564 8	Houghs . . .
Necks, . . .	1820 . .	3890 . .	3774 . .	3969 . .	13453 . .	.. . .	95 12	64 4	.. . .	160 . .	18453 . .	Necks, . . .
Ox Heads . . .	8670 . .	4420 . .	4240 . .	4480 . .	21810 . .	.. . .	110 3	137 . .	109 8	455 3	21970 . .	Ox Heads . . .
Ham, . . .	58 14	74 11	75 13	40 10	250 . .	98 8	.. . .	.. . .	10 . .	10 . .	705 3	Ham, . . .
Suet . . .	180 . .	156 . .	156 . .	174 . .	666 . .	.. . .	.. . .	.. . .	.. . .	.. . .	676 . .	Suet . . .
Oatmeal . . .	12628 . .	12740 . .	12880 . .	12150 . .	50398 . .	579 . .	560 . .	560 . .	575 . .	2274 . .	52672 . .	Oatmeal . . .
Flour . . .	2290 . .	2183 . .	2042 . .	1972 . .	8487 . .	209 . .	210 . .	232 . .	294 . .	945 . .	9432 . .	Flour . . .
Barley . . .	5330 . .	6040 . .	5862 . .	4014 . .	21246 . .	324 . .	326 . .	338 . .	328 . .	1316 . .	22562 . .	Barley . . .
Split Pease . . .	2340 . .	2340 . .	2588 . .	4340 8	11608 8	198 . .	252 . .	253 . .	250 . .	953 . .	12561 8	Split Pease . . .
Whole Rice . . .	732 . .	965 . .	1030 . .	971 . .	3698 . .	130 . .	132 . .	145 . .	140 . .	547 . .	4245 . .	Whole Rice . . .
Ground Rice . . .	.. . .	.. . .	1 . .	8 . .	9 . .	94 . .	85 . .	78 . .	100 . .	357 . .	366 . .	Ground Rice . . .
Sago . . .	55 . .	131 . .	134 . .	134 . .	454 . .	65 . .	65 . .	65 . .	65 . .	280 . .	714 . .	Sago . . .
Arrow Root . . .	680 . .	686 8	685 . .	679 . .	2730 8	74 . .	65 . .	80 . .	65 . .	284 . .	3014 8	Arrow Root . . .
Tea . . .	389 2	399 9	406 6	404 7	1599 8	192 14	196 10	199 12	205 . .	794 4	2393 12	Tea . . .
Coffee . . .	918 4	930 11	939 14	864 10	3633 7	95 12	84 4	79 12	79 8	339 4	3992 11	Coffee . . .
Raw Sugar . . .	3594 10	3632 12	3729 2	3599 12	14556 4	1229 . .	1215 8	1244 8	1211 8	4900 8	19456 12	Raw Sugar . . .
Loaf Sugar . . .	.. . .	110 8	353 4	110 . .	573 12	.. . .	199 . .	526 8	242 . .	967 8	1541 4	Loaf Sugar . . .
Fresh Butter . . .	58 8	58 8	58 8	58 8	234 . .	247 . .	247 . .	247 . .	234 . .	975 . .	1209 . .	Fresh Butter . . .
Salt Butter . . .	1144 . .	1166 . .	1194 . .	1243 . .	4747 . .	707 . .	681 8	682 8	589 8	2660 8	7407 8	Salt Butter . . .
Cheese . . .	392 . .	471 12	592 . .	513 . .	1968 12	384 . .	349 4	359 8	332 8	1425 4	3394 . .	Cheese . . .
Common Salt . . .	4032 . .	2800 . .	3024 . .	3248 . .	13104 . .	560 . .	560 . .	448 . .	448 . .	2016 . .	15120 . .	Common Salt . . .
Mustard . . .	74 . .	77 . .	67 . .	94 . .	312 . .	36 . .	21 . .	18 . .	40 . .	115 . .	427 . .	Mustard . . .
Pepper . . .	53 . .	46 . .	39 . .	60 . .	198 . .	20 . .	12 . .	10 . .	20 . .	62 . .	260 . .	Pepper . . .
Currants . . .	155 . .	106 . .	107 . .	133 . .	561 . .	52 . .	20 . .	37 . .	20 . .	129 . .	630 . .	Currants . . .
Candles . . .	101 . .	72 . .	54 . .	101 . .	328 . .	70 . .	39 . .	18 . .	47 . .	174 . .	502 . .	Candles . . .
Starch . . .	132 . .	124 . .	188 . .	102 . .	546 . .	140 . .	10 . .	14 . .	10 . .	174 . .	720 . .	Starch . . .
Soda . . .	5438 . .	5640 8	4575 . .	3702 . .	19255 8	193 . .	174 . .	153 . .	161 . .	681 . .	20036 8	Soda . . .
White Soap . . .	165 8	113 . .	119 8	92 8	490 8	4 8	4 8	4 8	9 8	23 . .	513 8	White Soap . . .
Yellow Soap . . .	3057 . .	3518 . .	3045 . .	2717 8	12337 8	270 . .	328 8	324 . .	345 8	1268 . .	13605 8	Yellow Soap . . .
Soft Soap . . .	1600 . .	1664 . .	1728 . .	1536 . .	6528 . .	256 . .	256 . .	256 . .	128 . .	896 . .	7424 . .	Soft Soap . . .
Current Loaves . . .	39 . .	.. . .	.. . .	109 . .	148 . .	10 . .	.. . .	.. . .	40 . .	50 . .	198 . .	Current Loaves . . .
Cakes Short Bread . . .	.. . .	.. . .	.. . .	70 . .	70 . .	.. . .	.. . .	.. . .	52 . .	52 . .	122 . .	Cakes Short Bread . . .
4 lb. Loaves Bread . . .	4360 . .	4438 . .	4527 . .	4627 . .	17932 . .	2490 . .	2435 . .	2540 . .	2485 . .	9950 . .	27902 . .	4 lb. Loaves Bread . . .
6 oz. Loaves Bread . . .	136300 . .	133200 . .	158000 . .	127200 . .	554700 . .	.. . .	.. . .	.. . .	.. . .	.. . .	554700 . .	6 oz. Loaves Bread . . .
Rolls and Biscuit . . .	2232 . .	1467 . .	1488 . .	1482 . .	6669 . .	7452 . .	4872 . .	4944 . .	4964 . .	22232 . .	28901 . .	Rolls and Biscuit . . .
Sweet Milk, gals. . .	1755 . .	1774 1/2 . .	1848 . .	1840 . .	7217 1/2 . .	810 . .	819 . .	828 . .	828 . .	3285 . .	10502 1/2 . .	Sweet Milk, gals. . .
Skimmed Milk, do. . .	3240 . .	3276 . .	3312 . .	3312 . .	13140 . .	.. . .	.. . .	.. . .	.. . .	.. . .	13140 . .	Skimmed Milk, do. . .
Eggs, doz. . .	589 . .	659 . .	806 1/2 . .	796 . .	2850 1/2 . .	.. . .	.. . .	.. . .	610 . .	2274 . .	5124 1/2 . .	Eggs, doz. . .
Table Salt, packets . . .	25 . .	24 . .	35 . .	27 . .	111 . .	535 . .	544 . .	585 . .	42 . .	136 . .	247 . .	Table Salt, packets . . .
Vinegar & Ketchup . . .	26 . .	11 . .	24 . .	22 . .	83 . .	28 . .	37 . .	38 . .	34 . .	151 . .	234 . .	Vinegar & Ketchup . . .
Beer, gals. . .	2220 . .	2355 . .	2565 . .	2415 . .	9555 . .	1330 . .	1360 . .	1540 . .	1430 . .	5660 . .	15215 . .	Beer, gals. . .
Porter, doz. pints, . . .	464 6	533 6	592 10	619 8	2209 14	85 7	100 . .	84 10	86 2	356 3	2566 1	Porter, doz. pints, . . .

ARTICLES.	EASTERN DEPARTMENT.					WESTERN DEPARTMENT.					TOTAL FOR BOTH DEPARTMENTS.		
	FOR QUARTERS ENDING—				TOTAL IN E. D.	FOR QUARTERS ENDING—				TOTAL IN W. D.			
	Mar. 31.	June 30.	Sept. 30.	Dec. 31.		Mar. 31.	June 30.	Sept. 30.	Dec. 31.				
Apples,.....	...	...	12	10	22	...	...	10	7	17	39 gallons at 3s.	6d.	1.6 16 6
Artichokes.....	86	...	...	76	162	38	...	...	...	38	200 gallons "	1s.	15 0 0
Beans, .....	...	...	77	52	129	...	...	98	76	174	303 pecks "	0s.	7 11 6
Do. Kidney, .....	...	...	12	...	12	...	...	...	...	...	12 gallons "	3s.	2 2 0
Beetroot,	48	96	...	56	200	40	24	...	36	100	300 dozen "	0s.	7 10 0
Brocoli,.....	36	138	...	27	201	...	...	...	...	...	201 dozen "	1s.	10 1 0
Brussels Sprouts,...	88	...	...	64	152	25	248	...	...	273	425 gallons "	1s.	21 5 0
Cabbage,	72	148	336	296	852	312	166	590	548	1616	2468 dozen "	0s.	92 11 0
Do. Red, .....	...	...	...	9	9	...	...	...	6	6	15 dozen "	1s.	1 2 6
Carrots,	144	164	248	133	689	154	73	220	163	610	1299 bundles "	0s.	32 9 6
Cauliflower, .....	...	...	128	67	195	...	...	64	34	98	293 dozen "	1s.	18 6 3
Celery,	98	62	...	44	204	28	...	...	...	28	232 dozen "	1s.	14 10 0
Cherries, .....	...	...	18	...	18	...	...	...	...	...	18 pints "	1s.	0 18 0
Cress, .....	...	156	78	...	234	...	36	54	...	90	324 bundles "	0s.	1 7 0
Currants, Black, ...	...	...	76	...	76	...	...	38	...	38	114 pints "	0s.	4 15 0
Do. Red,.....	...	...	22	...	22	...	...	...	...	...	22 pints "	0s.	0 9 2
Gooseberries, .....	...	44	166	...	210	...	...	256	...	256	466 pints "	0s.	5 16 6
Greens, German,...	250	266	...	55	571	286	654	...	68	1008	1579 dozen "	0s.	32 17 11
Leeks,	292	248	...	89	629	200	552	...	...	752	1381 bundles "	0s.	14 7 8½
Lettuce, .....	...	266	152	...	418	...	144	88	...	232	650 dozen "	0s.	13 10 10
Onions,.....	56	88	...	200	344	134	24	...	66	224	568 pecks "	1s.	35 10 0
Do. Bundles, ...	166	243	498	52	959	...	168	572	110	850	1809 bundles "	0s.	11 6 1½
Parsley,	280	324	406	410	1420	86	286	386	402	1160	2580 bundles "	0s.	10 15 0
Parsnip,	168	42	...	117	327	112	32	...	84	228	555 dozen "	0s.	9 5 0
Pears,.....	...	...	14	6	20	...	...	8	6	14	34 gallons "	3s.	5 2 0
Pease, .....	...	...	246	133	379	...	...	388	256	644	1023 pecks "	0s.	42 12 6
Potatoes,	1220	1208	1274	1230	4932	4526	4674	2854	4838	16892	682 bolls "	22s.	750 4 0
Radishes, .....	...	166	72	...	238	...	84	52	...	136	374 bundles "	0s.	1 11 2
Raspberries,.....	...	...	21	...	21	...	...	7	...	7	28 pints "	0s.	0 14 0
Rhubarb, .....	...	382	280	...	662	...	206	193	...	399	1061 bundles "	0s.	13 5 1
Savoy,	286	66	...	86	438	260	64	...	212	536	974 dozen "	0s.	24 7 0
Spinach, .....	...	150	26	...	176	...	...	...	...	...	176 gallons "	0s.	4 8 0
Strawberries, .....	...	...	245	...	245	...	...	246	...	246	491 pints "	0s.	12 5 6
Turnip	362	218	400	428	1408	346	438	610	624	2018	3426 dozen "	0s.	64 4 9

STATEMENT OF WORK

DONE AT

THE ROYAL EDINBURGH ASYLUM

During the Year ending 31st December, 1863.

The Work is estimated by charging Journeymen's wages only.

I. TAILORS.

Making 107 jackets, at 3s. 6d.,	.	.	.	.	L.18	14	6
... 125 vests, at 1s. 6d.,	.	.	.	.	9	7	6
... 164 pairs trousers, at 1s. 6d.,	.	.	.	.	12	6	0
... 421 flannel jackets, at 1s.,	.	.	.	.	21	1	0
... 515 pairs drawers, at 1s.,	.	.	.	.	25	15	0
... 459 bonnets, at 5d.,	.	.	.	.	9	11	3
... 245 stocks, at 5d.,	.	.	.	.	5	2	1
... 14 tweed suits, at 15s.,	.	.	.	.	10	10	0
... 5 do. bonnets, at 1s.,	.	.	.	.	0	5	0
Bed sheets, quilts, canvass dresses,	.	.	.	.	11	5	3
Repairs,	.	.	.	.	98	15	5
New work and repairs for private individuals,	.	.	.	.	5	0	1
						<hr/>		
						L.227	13	1

II. SHOEMAKERS.

Making 150 pairs men's shoes, at 4s., . . .	L.30	0	0
... 1 " " boots, at 5s., . . .	0	5	0
... 190 " women's shoes, at 2s. 6d., .	23	15	0
... 9 " " lacing shoes, at 3s., .	1	7	0
... 14 " " boots, at 3s. 3d., .	2	5	6
... 7 " men's canvass shoes, at 1s. 9d.,	0	12	3
... 114 " braces, at 3d., . . .	1	8	6
... 74 key belts, at 2d, . . .	0	12	4
... 2 body belts, at 1s., . . .	0	2	0
... 18 knee-pads, at 3d., . . .	0	4	6
Repairing 992 pairs of men's and women's boots and shoes,	51	7	10
	<hr/>		
		L.111	19 11
Carry forward, .	<hr/>	L.339	13 0

Brought forward, L.339 13 0

III. ENGINEERS AND BLACKSMITHS.

Amount of engineer and blacksmith work for Western

Department,			L.88	17	5	
Do.	do.	for Eastern Department,	19	5	10	
Do.	do.	for workshops and garden,	10	14	3	
Do.	do.	for miscellaneous buildings,	10	9	3	
						129 6 9

IV. CARPENTERS.

Making and fitting up tables, presses with shelving, water closet, seats, &c.; boxes, stands for sinks, bath covers, bed stretcher frames, window frames and shutters, picture frames, ventilators, new doors and standards, cistern covers, pailings, linings, flooring, cornices, window blind rollers, &c.; also cleaning, altering, and repairing furniture, meat hoists, &c., in Western Department,

			L.84	6	4	
Do.	do.	for Eastern Department,	32	2	6	
Do.	do.	for workshops and garden implements,	18	10	9	
Do.	do.	for miscellaneous buildings,	48	3	10	
Do.	do.	amount for coffins,	7	4	0	
						190 7 5

V. UPHOLSTERERS.

Making new hair and seaweed mattresses and pillows, straw palliasses, covering chairs, canvass frames, strapping, &c.; also altering, stuffing, twilting, and repairing old ditto for Western Department,

			L.97	6	10	
Do.	do.	for Eastern Department,	38	13	1	
Do.	do.	for Myreside and Cottage,	6	13	9	
Do.	do.	for Dr Skae's house,	1	18	6	
						144 12 2

VI. PLUMBERS AND GASFITTERS.

Plumber and gasfitter work for Western Department,

			L.58	7	10	
Do.	do.	for Eastern Department,	20	13	1	
Do.	do.	for garden and miscellaneous buildings,	24	8	9	
						103 9 8

Carry forward, L.907 9 0

Brought forward, L.907 9 0

VII. GLAZIERS, PLASTERERS, & SLATERS.

Putting in 1625 panes in Western Department, .	L.17	2	0	
Do. 287 „ in Eastern Department, .	6	1	6	
Do. 264 „ in miscellaneous buildings, .	2	6	0	
Plasterer and slater work,	18	17	6	
				<u>44 7 0</u>

VIII. PAINTERS.

Painting and papering in Western Department, .	L.3	8	4	
Do. do. in Eastern Department, .	82	11	0	
Do. do. in miscellaneous buildings, .	17	13	11	
				<u>103 13 3</u>

IX. MASONS.

Building, cutting, slapping, altering and repairing sundry places ; also altering, lifting, and relaying pavement in Western Department,	L.19	11	6	
Do. do. in Eastern Department, .	7	15	6	
Do. do. in miscellaneous buildings, .	8	8	6	
				<u>35 15 6</u>

X. PRINTERS.

Notices of discharge, cards and bills for lectures, circulars for board, provision journal, laundry lists, club proceedings, circulars for Treasurers, passes for attendants, order books, ball orders, contracts for wines and spirits, &c.,	L.32	0	6	
Annual Report, monthly Mirror, &c.,	34	17	10	
				<u>66 18 4</u>
				<u>L.1158 3 1</u>

ANDREW LESLIE, *House Superintendent.*

ARTICLES MADE BY FEMALES IN WESTERN DEPARTMENT.

		L.	s.	d.		L.
263 Printed gowns . . . at 1s 8d	21	18	4		Brought forward,	56 1
12 Merino do. . . 1s 8d	1	0	0	12 Yards muslin flowd. at 0s 6d	0	
8 Muslin do. . . 2s 6d	1	0	0	6 Worsted caps knitted	0s 6d	0
338 Chemises . . . 0s 6d	8	9	0	1 Footstool sewed . . . 5s 0d	0	
191 Flannel do. . . 0s 4d	3	3	8	3 Pair shoes sewed . . . 1s 0d	0	
259 Plaiding petticoats . . . 0s 4d	4	6	4	496 Blue shirts . . . 0s 4d	8	
176 Wincey do. . . 0s 4d	2	18	8	14 White do. . . 2s 0d	1	
20 Flannel do. . . 0s 4d	0	6	8	134 Pair blankets . . . 0s 4d	2	
4 Silk aprons . . . 0s 6d	0	2	0	30 Bed covers . . . 0s 4d	0 1	
168 Check do. . . 0s 4d	2	16	0	485 Pillow cases . . . 0s 2d	4	
207 Coloured napkins				765 Sheets . . . 0s 2d	6	
hemmed . . . 0s 1d	0	17	3	191 Pair shoes bound . . . 0s 3d	2	
36 White pocket napkins	0s 1d	0	3	570 Towels . . . 0s 1d	2	
4 Cambric napkins				30 Rollers . . . 0s 1d	0	
flowered . . . 1s 6d	0	6	0	374 Pair stockings . . . 0s 6d	9	
30 Slip bodices . . . 0s 6d	0	15	0	6 Pair socks . . . 0s 6d	0	
20 Bonnets made . . . 0s 6d	0	10	0	114 Pair stockings footed	0s 3d	1
40 Dressed caps . . . 0s 3d	0	10	0	12 Knitted small shawls	0s 9d	0
302 Night caps . . . 0s 4d	5	0	8	2 Sett Curtains for		
12 Pair cotton drawers . . . 0s 3d	0	3	0	French beds . . . 6s 6d	0 1	
6 Pair stays . . . 1s 0d	0	6	0	14 Window blinds . . . 0s 6d	0	
12 Tidies knitted . . . 0s 9d	0	9	0	3 Sett window curtains	9s 0d	1
12 Crinolines . . . 1s 6d	0	18	0	1 Hearth rug . . . 1s 0d	0	
12 Polkas . . . 0s 9d	0	9	0	2 Sofa cushions . . . 3s 0d	0	
40 Yards lace knitted . . . 0s 1d	0	3	4	1 Sett window drapery	1s 6d	0
16 Collars knitted . . . 0s 3d	0	4	0	2 Sofa covers . . . 0s 9d	0	
6 Collars flowered . . . 0s 6d	0	3	0	2 Mattresses . . . 1s 0d	0	
Carry forward,	L.56	17	11		L.99	1

ARTICLES REPAIRED BY FEMALES IN WESTERN DEPARTMENT.

			L.	s.	d.				L.
300 Gowns	at	2d	2	10	0			Brought forward,	82
387 Chemises . . . . .	... 1d		1	12	3	53 White shirts	at	6d	1
342 Night gowns . . . . .	... 1d		1	8	6	70 Collars . . . . .	... 1d		0
360 Plaiding petticoats . . . . .	... 1d		1	10	0	382 Blankets . . . . .	... 1d		1
40 Flannel do. . . . .	... 1d		0	3	4	312 Pillow cases . . . . .	... 1d		1
90 Coloured do. . . . .	... 1d		0	7	6	20 Table cloths . . . . .	... 1d		0
336 Check aprons . . . . .	... 1d		1	8	0	39 Quilts . . . . .	... 1d		0
314 Caps . . . . .	... 1d		1	6	2	20 Toilet covers . . . . .	... 1d		0
12364 Pair stockings . . . . .	... 1d		51	10	4	26 Rollers . . . . .	... 1d		0
218 Bed covers . . . . .	... 1d		0	18	2	36 Towels . . . . .	... 1d		0
653 Pair drawers . . . . .	... 1d		2	14	5	10 Crumb cloths . . . . .	... 2d		0
448 Jackets . . . . .	... 1d		1	17	4	6 Carpets	1s 0d		0
3764 Blue shirts . . . . .	... 1d		15	13	8	302 Sheets . . . . .	... 1d		1
Carry forward,			L.82	19	8				L.89

MRS JACK, Matron

ARTICLES MADE BY FEMALES IN EASTERN DEPARTMENT.

84 Gowns.	45 Aprons.	1 Smoking cap.
4 Shawls.	5 Slip bodices.	49 Quilts.
15 Night gowns.	5 Habit shirts.	45 Blankets marked.
12 Night caps.	7 Muslin sleeves.	7 Pillow slips.
2 Pair drawers.	15 Pair slippers sewed.	20 Towels.
2 White petticoats.	3 Cushions sewed.	54 Dusters.
5 Flannel do.	4 Cushions embroidered.	12 Toilet covers.
1 Do. underdress.	24 Pair slippers do.	4 Dozen table napkins hemmed.
10 Pair cotton stockings.	35 Trimming sewed.	2 Do. table cloths do.
68 Pocket handkerchiefs hemmed.	28 Crotchets.	12 Window blinds.
	12 Artificial flowers.	

ARTICLES REPAIRED BY FEMALES IN EASTERN DEPARTMENT.

24 Gowns.	14 Flannel underdresses.	26 Pillow slips.
99 Night gowns.	149 Worsted stockings.	17 Window blinds.
54 Night caps.	98 Cotton do.	3 Tidies.
98 Chemises.	15 Slip bodices.	6 Veils.
29 Pair drawers.	24 Habit shirts.	6 Knitted frills.
14 White petticoats.	20 Collars.	4 Embroidered dresses.
13 Coloured do.	16 Muslin sleeves.	6 Coseys.
2 Flannel do.	69 Shirts.	172 Sundries.

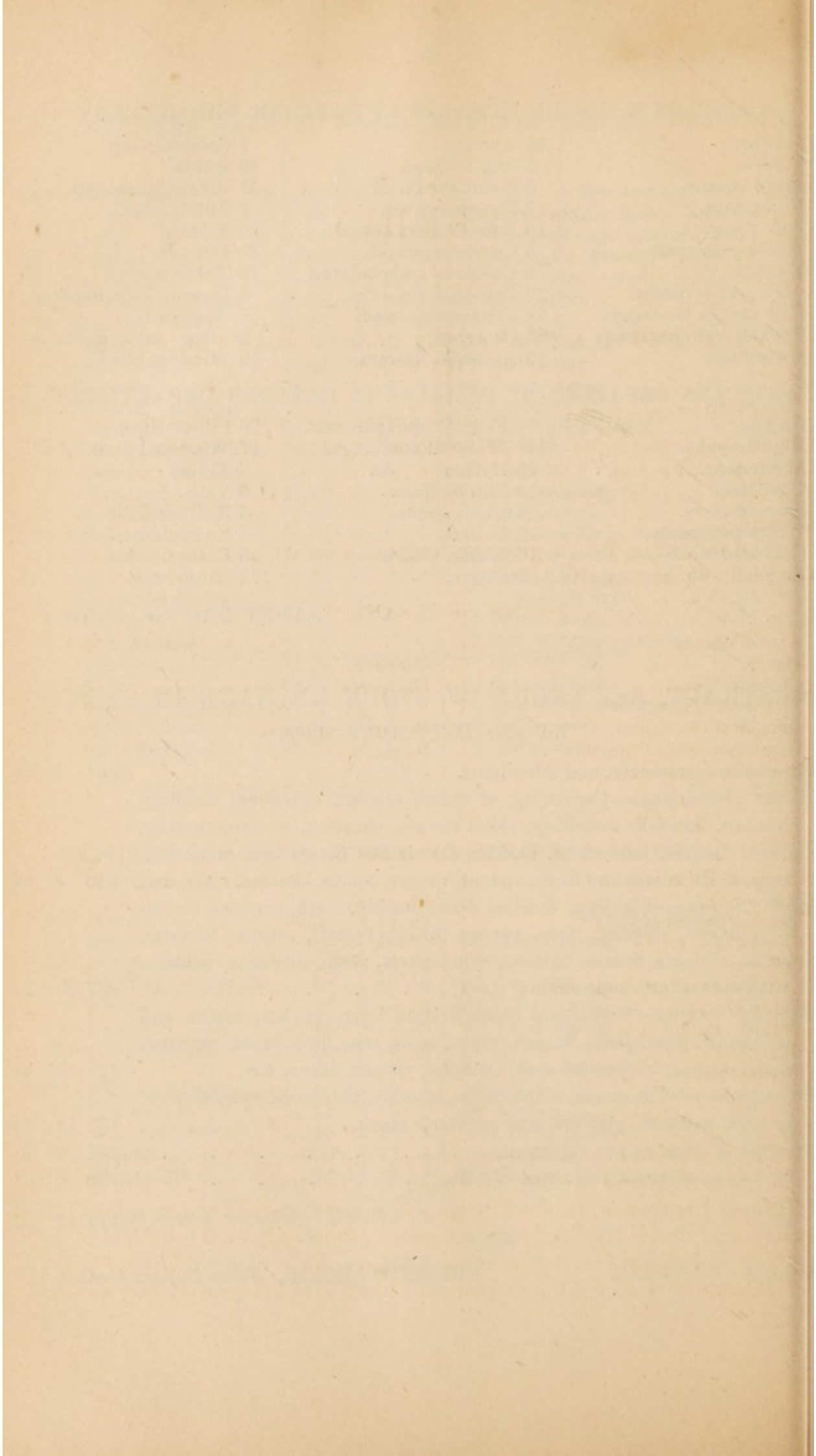
JANET BROWN, *Matron*.

ABSTRACT, &c., VALUE OF STOCK ON HAND IN STORES

AT 31st DECEMBER, 1863.

1. Provisions, groceries, and stimulants,	£464	9	7½
2. <i>House Furnishings</i> —Consisting of china, crystal, crockery, bedding, hessian, damask, towelling, toilet covers, sheeting, coffin mounting, cord, dusters, hair cloth, packsheets, window blinds and mounting, tubs, pails, knives and forks, spoons, razors, combs, brushes, mats, &c.,	289	9	8½
3. <i>Male Clothing</i> —Plaiding, dowlas, duck, lasting, cloth, canvass, corduroy, tweed, shirting, hose, aprons, handkerchiefs, stocks, bonnets, shoes, slippers, braces, buttons, blue jackets, vests, corduroy trousers, with tailors' and shoemakers' stock,	357	17	2
4. <i>Female Clothing</i> —White and black cotton, linen, shawls, muslin and prints, drugget, jane, flannel, stays, reels, tape, boot laces, worsted, needles, pins, hooks and eyes, thimbles, thread, shoes, &c.,	153	1	4½
5. <i>Ironmongery</i> —Tin goods, blacksmiths, masons, plumbers, upholsterers, joiners, painters, glaziers, and printer's stock,	192	14	3½
6. Amount of pigs, as per valuation,	157	0	0
7. Four stacks of wheat and three of oats,	100	0	0
	£1714	12	1½

ANDREW LESLIE, *House Superintendent*.



APPENDIX.

PATHOLOGICAL APPEARANCES OBSERVED IN THE BRAIN DURING THE YEAR 1863.

Of the 68 deaths which occurred during the year, autopsies were made in 41 cases, and the pathological changes were carefully recorded. The lesions of the Encephalon are noted below, and are arranged so as to show their relations to the various forms of mental disorder.

The following Tables give the forms of insanity and the causes of death in those examined.

FORMS OF INSANITY.

Acute Mania,	1	Brought forward,	20
Mania,	5	Melancholia,	4
Chronic Mania,	1	Monomania of Unseen Agency,	1
Epileptic Mania,	1	„ Suspicion,	2
Dementia (1 Senile),	9	General Paralysis,	12
Dementia, with Paralysis,	1	Imbecility,	2
Epileptic Dementia,	2		—
	—	Total,	41
Carry forward,	20		

CAUSES OF DEATH.

Cerebral Effusion,	1	Brought forward,	29
Meningitis,	1	Pleuritis,	2
Rammollissement,	1	Cardiac Disease,	1
General Paralysis,	11	Chronic Gastritis,	1
Epilepsy,	3	Typhoid Fever,	1
Exhaustion after Acute Mania,	1	Intestinal Obstruction,	1
Tabes Dorsalis,	1	Pyæmia,	1
Phthisis Pulmonalis,	7	General Debility,	2
Bronchitis,	1	Senile Decay,	3
Pneumonia,	2		—
	—	Total,	41
Carry forward,	29		

The Calvarium was unsymmetrical, the left side being flatter than the right, in 1 case of Epileptic Dementia, and 1 case of General Paralysis. In the former case it was dense, irregular internally, and decidedly thickened anteriorly, especially on the left side.

The Calvarium was of unusual thickness in 1 case of Mania, 2 of Dementia, 1 of Epileptic Dementia, and 2 of General Paralysis.

Exostoses on internal surface of Calvarium—small, flattened, and irregular in form and size, were found in 1 case of Melancholia.

The Calvarium was thinner than usual in 4 cases of Dementia, 1 of Epileptic Dementia, and 1 of General Paralysis. In one of the cases of Dementia it was of irregular thickness.

The Dura Mater was very adherent to the Calvarium in 1 case of Mania, 3 of Dementia, 2 cases of Epileptic Dementia, 1 of Senile Dementia, 1 of Monomania of Suspicion, 1 of Imbecility, and 3 cases of General Paralysis.

The Dura Mater was thickened in 1 case each of Dementia and of General Paralysis.

The Dura Mater contained an osseous plate in 1 case of Epileptic Dementia. It was half an inch long, and situated close to the side of the superior longitudinal sinus, at the vertex.

The Superior Longitudinal Sinus contained a clot in 1 case of Chronic Mania.

The Dura Mater and Arachnoid were adherent to the Pia Mater in 1 case of Epileptic Dementia.

The Arachnoid was much thickened in 2 cases of Monomania of Suspicion, 1 of Senile Mania, 1 of Melancholia, 4 cases of Dementia, 1 of Imbecility, and 5 cases of General Paralysis.

False Membrane existed in the Arachnoid sac in 1 case of General Paralysis.

There was Pus between the layers of the Arachnoid in 1 case of Dementia.

There was a quantity of fluid between the Encephalon and its Membranes in 2 cases of Mania, 1 of Chronic Mania, 2 of Melancholia, 3 of Dementia, 1 of Epileptic Dementia, and 1 case of General Paralysis.

Extravasation of Blood under the Arachnoid was found in 1 case of Monomania of Suspicion, 1 of Epileptic Dementia, and 1 of General Paralysis.

There were transparent Cysts in the Pia Mater, causing absorption of the brain substance, in 1 case of Melancholia, and 1 of Dementia (with Hemiplegia).

The Pia Mater was unusually adherent to the Brain in 3 cases of General Paralysis.

Marked Atheroma of the Arteries was found in 1 case of Senile Mania, 1 of Dementia, and 1 case of Senile Dementia.

The Brain was Hypertrophied in 1 case of Melancholia.

The Brain and its Membranes were congested in 1 case of Melancholia, 3 of Epileptic Dementia, and 2 of General Paralysis.

An Anæmic state of the Brain was found in 1 case each of Mania, Imbecility and Dementia.

General Atrophy of the Convolutions existed in 1 case of Imbecility, and 1 of Dementia.

Limited Atrophies of the Convolutions occurred in 1 case of Melancholia, and 2 cases of Dementia.

The Cerebral Hemispheres were unsymmetrical in 3 cases. In 1 case of Epileptic Dementia, the right hemisphere was $1\frac{1}{2}$ ounce heavier than that of the left; in 1 of Mania the left was the heavier by half an ounce; and in 1 of Epileptic Dementia the left exceeded the right by $1\frac{1}{2}$ ounce.

The Brain was Œdematous, in 1 case each of Mania, Monomania of Suspicion, Melancholia, and Imbecility, in 2 cases of Dementia, and in 2 cases of General Paralysis.

General softening of the Brain was found in 2 cases each of Dementia and General Paralysis.

The Brain substance was hardened in 1 case of Melancholia and 2 cases of General Paralysis.

Rammollissement in both Hemispheres existed in 1 case of Senile Dementia.

A softening in the Corpus Striatum (in the left) was found in 1 case of General Paralysis.

The Fornix alone was softened in 1 case each of Dementia and of Epileptic Dementia.

The Medulla Oblongata was shrivelled and atrophied in 1 case of Epileptic Dementia.

The Spinal Cord was very soft in 1 case of Epileptic Dementia.

There was considerable Dropsy of the Ventricles in 1 case of Senile Mania and 2 cases of General Paralysis. In the General Paralytics the quantity of fluid was $1\frac{1}{2}$ and 1 ounce respectively.

The Lining Membrane of the Ventricles was granular in 1 case of Melancholia, 1 of Imbecility, and 8 cases of General Paralysis. That of the *fourth Ventricle only* was granular in 1 case of Melancholia and 2 cases of General Paralysis.

The Membrane of the Ventricles was thickened, but not granular, in 1 case of Dementia, 1 of Imbecility, and 3 cases of General Paralysis.

The Choroid Plexus was very Cystic in 2 cases of Dementia and 1 of General Paralysis.

Calcareous Deposit was found in 2 cases. One was in a General Paralytic, and was situated in the velum interpositum, being about the size of a pea; the other was between the nates of the corpora quadrigemina, and occurred in a case of Mania.

The Cerebellum was unsymmetrical in 3 cases. In one of these (a case of Melancholia) the right lobe was rather smaller than the left, and the posterior surfaces of both lobes were very soft; at these parts the arachnoid was gelatinous. In another (Dementia with Hemiplegia of the right side), the left lobe of the cerebellum was slightly smaller than that of the right. In the other (a case of Chronic Mania), the change was very remarkable: the whole of the

left lobe, and the inner half of the right, was in a state of complete atrophy, the convolutions being destroyed, and the arbor vitæ indistinguishable. It consisted of one hard mass, almost cartilaginous in consistence. The left lobe was about one-half the size of the right. There had not been any paralysis or deficiency of nervous power, and there was nothing which would have led one to suppose that there was any such structural change.

In a case of Melancholia there was an interesting change of structure in the spinal cord, the posterior columns of which were atrophied, and the space was occupied by two wedge-shaped columns of a firm gelatinous substance, one on each side of the posterior fissure. This substance was opaque, and greyish-looking, and homogeneous in structure, and extended along the entire length of the cord, which appeared to be small. The double wedge of neuroglia (of Virchow) was large and very distinct below the medulla oblongata, less distinct at the upper part of the brachial swelling, very marked at its lower part, small and indistinct opposite the upper dorsal vertebræ, and very distinct and marked at the lumbar bulge. The dura mater of the cord was very full of fluid, and adherent to the cord at intervals by semi-gelatinous semi-fibrous tissue. The arachnoid was very much thickened, and was strongly adherent to the pia mater and the cord. In December 1862 (when the case was admitted), both the patient's eyes were exophthalmic, and the right pupil was more dilated than the left. When he walked he straddled slightly, and there was an uncertainty in the mode in which he put down his feet that resembled a general paralytic's gait. He had no hesitation in his speech. In February 1863 he had twitchings all over his body—these became worse on his being spoken to, and were most evident in the right arm and leg; his left arm and leg were œdematous and dark-coloured. He laid in a half-sleepy state, started, and muttered in a confused manner. The exophthalmos was increased, and the pupils were quite insensible to light. Micturition was infrequent. He complained of intense pain in the dorsal and cervical regions; this pain was aggravated by pressure. When asked to put out his tongue, he could not do so at first, but after a time extruded it with a jerk; his mouth opened and shut frequently afterwards. Later in the same month both feet were very much swollen and getting black, and the cuticle was coming off, and had a dark fluid under it. The left hand and foot were warmer than the right. The other symptoms continued until his death on the 16th February.

In another case (one of Imbecility, and in which the patient was 73 years old) a similar semi-fibrous semi-gelatinous dirty greyish-looking mass, which replaced the brain substance, and which gradually merged into it, occupied the position of the upper and inner part of

the left optic thalamus. In the posterior part of the left corpus striatum there was found a cavity (the size of a pea) containing a dirty brownish fluid, and a little below and behind this there was another the size of a bean: these cavities had a lining similar to the dirty greyish-looking matter found in the optic thalamus. In the centre of the right optic thalamus there was a granular cavity (the size of a bean), the brown lining membrane of which was extremely distinct, making the cavity closely resemble a cyst. In the white matter of the right middle lobe, near the convolutions, and on the level of the corpus callosum, there were two other pea-sized cavities. The arteries were somewhat atheromatous. There was hemiplegia (it is not recorded of which side) for a month previous to death.

In one of the cases of Mania the calvarium was extremely thick and dense, and so closely was the dura mater adherent to it, that it was with the greatest difficulty that the skull-cap could be removed: the depressions for the meningeal arteries were extremely well marked, and in some places almost canalicular. In the right middle cerebral fossa three or four prominent pointed osseous projections were felt very distinctly through the dura mater, and corresponded with the normal ridges between the convolutions: they projected upwards a quarter of an inch. In the left middle cerebral fossa there were five or six of these sharp, prominent, long and rough projections. The dura mater was leathery, and contained in the course of the superior longitudinal sinus several small nodules and spiculæ of bone varying from the size of a pea to that of a pin's head: some of these were in contact with, and loosely adherent to, roughened surfaces in the calvarium.

In a General Paralytic (aged 50) both the optic nerves, but more especially the left, presented on section an appearance as if there was a thick ring of tough semi-transparent substance surrounding an inner spot of normal nerve structure. This degeneration (? hypertrophied neurilemma) seemed to occupy about two-thirds of the bulk of the nerves, though their general size was not increased. The optic commissure was firm and changed in the same way as the nerves, but the degeneration gradually disappeared in the optic tracts. There was a dense layer of this translucent substance forming the floor of the third ventricle. The patient's sight began to fail four months previous to his death: a month before it he was almost entirely blind, and both pupils were widely dilated, and almost insensible to light.

Table of Weights of Organs, and Causes of Death.

SEX.	AGE.	FORM OF INSANITY.	CAUSE OF DEATH.	Encephal.	Cerebell., Pons, and Medulla.	Heart.	Right Lung.	Left Lung.	Liver.	Spleen.	Right Kidney.	Left Kidney.	Stature, ft. in.
MALES.	23	Mania,	Phthisis Pulmonalis,	56	6½	12	35	23	40½	5	4	4	5
	34	Do.	Do. Do.	55	6½	10½	28	30	50	4	6½	6½	5
	68	Do.	Senile Decay,	49	7½	16	33	32	50	4	5	6	9
	48	Epileptic Mania,	Epilepsy,	55	7½	18	29	20½	66	7	5½	5½	0
	66	Dementia,	Pneumonia,	54	6½	23½	31	38	62	4½	8	8	8
	60	Do.	Meningitis,	51	7	11½	28	23	57	10½	5	5	5
	52	Do.	Pneumonia,	54	7	16	59	44	54½	7½	12½	12½	10
	58	Do.	Typhoid Fever,	51½	6½	10½	24	27½	46	9½	6½	7	9
	45	Do.	Phthisis Pulmonalis,	55	7	10½	39	31	56	4	6	6	7
	60	Do.	Bronchitis,	44	5½	10½	35	26	59	7	5½	4½	5
	59	Do. with Paralysis,	Pleuritis,	50½	7	14	34	18	45	6½	4	5	5
	20	Epileptic Dementia,	Epilepsy,	51½	6	8	32½	32½	34½	5	3½	3	8
	41	Melancholia,	Tabes Dorsalis,	55½	6	8	16	20	56	3½	4½	5½	3
	66	Do.	Phthisis Pulmonalis,	44	6½	8½	17	..	30	4½	3	3½	6
	40	Do.	Morbus Cordis,	..	..	..	..	..	..	..	..	..	..
	33	Mono. of Unseen Agency,	Phthisis Pulmonalis,	51½	6½	14	27	22½	69	14	5½	5½	..
	63	Do. Suspicion,	Chronic Gastritis,	52	6	12	4½	47	44	2	6½	6½	9
	46	Do.	Intestinal Obstruction,	59½	7½	11	29	23½	58	4	5	5	10
	45	General Paralysis,	General Paralysis,	52	7	10½	34	29½	64	4	6	6	0
	33	Do.	Do. Do.	50½	7	10½	28½	44	55	4½	5	5½	10
	50	Do.	Pleuritis,	57	7	12½	26	24	73	14	5	7	8
	59	Do.	General Paralysis,	54	6	10	35	22½	50	3½	5	5	10
	33	Do.	Do.	44	6	9	23	17	50	2½	4½	4½	6
	36	Do.	Do.	52	7	12	41	33	58	7	6½	6	8
	48	Do.	Do.	..	5	9½	31½	..	56	3½	..	..	..
	30	Do.	Do.	41½	7	12	30	22	79	7	4	4	3
	40	Do.	Do.	50	7	..	..	..	..	..	6½	8	10
	73	Imbecility,	Rammollissement,	..	..	..	..	..	..	..	..	..	..
FEMALES.	26	Acute Mania,	Pyæmia,	42	5½	8	16½	14	44	7	4½	5½	..
	73	Mania,	Senile Decay,	49	5½	7½	21	24½	32	3	3½	3½	4
	31	Do.	Cerebral Effusion,	..	..	..	..	..	..	..	..	..	..
	50	Chronic Mania,	General Debility,	48	5	10	21½	15½	30	2	3	3	11
	53	Dementia,	Phthisis Pulmonalis,	42	5	6½	30	28	50	3½	15	15	..
	21	Do.	Do.	48	6	7	17	26	37	3	4	4	..
	74	Senile Dementia,	Senile Decay,	42	6½	17½	22	22	38	3½	4½	4½	5
	19	Epileptic Dementia,	Epilepsy,	43	5½	..	20½	12½	32	4	3½	3½	4
	54	Melancholia,	Exhaustion from Acute Mania,	49½	6½	..	16	15	42	3	4	4	8
	51	General Paralysis,	General Paralysis,	43½	5½	6½	21	16	71	4	7½	8	..
	36	Do.	Do.	36½	5½	9½	16½	14	58	5½	5½	6½	4
	60	Do.	Do.	36	5½	10½	14½	13	36	4	4½	4½	..
	50	Idiocy,	General Debility,	35	4½	6½	9½	13½	34	4½	..	..	..