

Annual report of the Royal Edinburgh Asylum for the insane. 1876.

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ANNUAL REPORT
OF THE
ROYAL EDINBURGH ASYLUM
FOR
THE INSANE.

1876.



MORNINGSIDE:
PRINTED AT THE ROYAL EDINBURGH ASYLUM.



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ROYAL EDINBURGH ASYLUM.

Patroness—The Queen.

OFFICE-BEARERS FOR 1877.

GOVERNOR—

THE DUKE OF BUCCLEUCH AND QUEENSBERRY.

DEPUTY-GOVERNORS.

THE EARL OF STAIR.
CHAS. COWAN, Esq.

DUNCAN M'LAREN, Esq., M.P.
LORD GORDON.

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Lord Provost of the City of Edinburgh.	Sheriff of the County of Edinburgh.
Lord President of the Court of Session.	Principal of the University of Edinburgh.
Lord Justice-Clerk of the Court of Justiciary.	President of the Royal College of Physicians.
Lord Advocate of Scotland.	President of the Royal College of Surgeons.
Solicitor-General of Scotland.	Senior Minister of Edinburgh.
Dean of the Faculty of Advocates.	Master of the Merchant Company.
Deputy-Keeper of Her Majesty's Signet.	Preses of the Society of Solicitors.
Members of Parliament for the City.	Dean of Guild of the City.
Member of Parliament for the County.	Deacon Convener of the Trades.

ORDINARY MANAGERS.

The Lord Provost (<i>ex off.</i>)	John Pringle, Esq., M.D.
George A. M'Laren, Esq.	David Kinneir, Esq.
Hugh Rose, Esq.	Thomas Swanston, Esq.
William Sibbald, Esq.	Peter Miller, Esq.
James Colston, Esq.	Thomas Rowatt, Esq.
James Turner, Esq.	Henry Duncan Littlejohn, Esq., M.D.
George Macmillan, Esq.	John Smith, Esq.
Duncan Grant, Esq.	

MEDICAL BOARD.

President of the Royal College of Physicians—President of the Royal College of Surgeons—Professor Sir Robert Christison, Bart.—
Professor MacLagan—Dr Alexander Wood.

David Scott Moncrieff, W.S., *Clerk and Treasurer.*

Officers of the Institution.

PHYSICIAN-SUPERINTENDENT.

T. S. CLOUSTON, M.D., F.R.C.P.

ASSISTANT PHYSICIANS.

JOSEPH J. BROWN, M.B., F.R.C.P.

THOMAS INGLIS, M.R.C.P.

A. R. TURNBULL, M.B., C.M.

CHAPLAIN.

The Rev. A. B. M'CULLOCH.

HOUSE SUPERINTENDENT.

MR ANDREW LESLIE.

MATRONS.

MISS SHEARER.

MRS MACDOUGALL.

REPORT

BY

THE ORDINARY MANAGERS

OF THE

ROYAL EDINBURGH ASYLUM FOR THE INSANE.

*Presented to the Annual General Meeting of the Corporation,
held on Monday, 26th February 1877.*

In reviewing the history of the Royal Edinburgh Asylum during the past year, the Managers are glad to be able to report that in general it has been a period of prosperity to the Institution under their charge.

The average daily number of Patients accommodated in both departments of the Asylum during the year was ... 740·240
The average during the year ending 31st December 1875

was 723·713

Shewing an increase of ... 16·527

Of this gross increase, four belong to the East House, and twelve to the West House.

The Managers beg to refer to the Report of Dr Clouston, the able and indefatigable Physician-Superintendent of the Asylum, for all information in regard to the Patients, the nature of their complaints, the treatment pursued, and the cures effected.

The accounts of the Treasurer's intromissions for the year 1876 are herewith submitted.

The Charge amounts to	...	...	...	£43,332	10	4½
The Discharge amounts to	...	...	...	41,225	4	1½
And the Balance due by the Treasurer is				£2,107	6	3
The Ordinary Income during the year,	...	...	...	£32,751	17	3
The Ordinary Expenditure,	...	...	...	28,312	0	9½
Shewing a Surplus Revenue of				£4,439	16	5½

During the year there was expended in additions to buildings, and in painting and furnishing the new apartments, the sum of £10,980 8s. 11d. The surplus revenue was applied in meeting *pro tanto* the above extraordinary expenditure, the deficit of £6,540 12s. 5½d. being provided for by new loans.

The total amount of Debt secured upon the property of the Corporation at 31st December 1876 was	...	...	...	£31,225	0	0
Deducting the Balance due by the Treasurer,				2,107	6	3
The Indebtedness at that date was				£29,117	13	9
The Indebtedness at 31st December 1875, after deducting the balance then on hand, was	...	...	...	22,568	18	11½
				£6,548	14	9½
Less increase of Arrears during 1876,	...	...	...	8	2	4
Shewing an increase of Debt of				£6,540	12	5½
equivalent to the above deficit.						

The provisions of the Act of Parliament in regard to the progressive liquidation of the Statutory Debt have been complied with, by payment during the past year of Bonds amounting to £1763 9s., and the Statutory Debt has now been reduced from the original amount of £30,000 to £13,525. In consequence of the large amount of extraordinary expenditure during the year, the above payment to account of this debt could only be made out of money borrowed on the postponed security of the Asylum property.

During the year considerable progress has been made in the additions to the Asylum buildings, and in the reconstruction of large parts both of the Eastern and Western departments.

In the East House elegant suites of rooms for the accommodation of the ladies and gentlemen respectively have been added to the building; the apartments designed for the purposes of seclusion, which were at one time considered necessary in Asylums, have been altered or done away with, and two dining-rooms of a very handsome kind are being constructed. The new bed-rooms are completed, and have been for some time in use, and the dining-rooms will soon be ready for occupation.

In the West House the structural alterations referred to in former Reports have been nearly completed. For the prison-like cages which so long disfigured the north-east and south-east wings have been substituted light and airy apartments, with every modern comfort and convenience. The common dining-hall has been completed, and it is believed, that for spaciousness and elegance it may challenge comparison with any saloon of a similar kind in Scotland. The Managers regret that, owing to the internal reconstruction of the house not being completed, the Patients are not able regularly to use this apartment as a dining-room. It has, however, been sometimes made use of on festive occasions, and has been found admirably adapted for such purposes.

With the view of at once providing suitable employment for a number of the inmates, and supplying the wants of the house, a Bakehouse has been erected in connection with the Western department.

It is believed that the cost of the alterations and additions above referred to, with contingencies, will amount to not less than £24,000 0 0
Whereof there has been already expended ... 19,267 2 7

Leaving still to be provided for ... £4,732 17 5

At 31st December 1873 the total amount of debt due by the Corporation was £21,800 16s. 8d.; and it is satisfactory to note, that notwithstanding the large expenditure upon the new works which has since taken place, amounting, as above, to £19,267 2s. 7d., the liabilities now amount to no more than £29,117 13s. 9d. It thus appears that during the last three years the property of the Corporation has been permanently improved by the amount of

£19,267 2s. 7d., while the debt has only increased £7,316 17s. 1d., the balance, amounting to £11,950 5s. 6d., having been wholly defrayed out of surplus ordinary income.

The Managers trust that they will be able, out of surplus ordinary income of the current year, to pay the amount still to be expended, without having to add farther to their debt.

The Managers have long felt that it would be a convenience to consolidate the debt of the Corporation, and they beg leave to request from the Corporation special powers to apply to Parliament for an act with this object in view. The Managers further propose to take advantage of the occasion of their being before Parliament at any rate, to apply for such other modifications and amendments on their Act of Incorporation as circumstances may seem to call for.

Looking to the probable continuance of the present high prices, and the rates of wages, the Managers regret that they cannot advise any reduction in the boards.

The Managers will conclude their remarks by quoting the following passages from the Official Report of Dr Mitchell, one of Her Majesty's Commissioners in Lunacy, on the occasion of his last visit to the Asylum, which took place on 30th and 31st ult., and 1st inst. :—

“It appears that this Asylum gives accommodation to a very large number of private patients. Many of these pay high rates of board, and they have comforts and advantages in return such as few Asylums supply. A large proportion of the private patients, however, pay low rates of board, and, in reference to them, it is felt that this Institution discharges a very humane and charitable function. They are most liberally treated, and to their history and habits a very kindly consideration is given. The same liberal dealing is extended to some patients who are actually paupers, but who belong socially to a class above that from which pauper lunatics are ordinarily drawn. In carrying out these benevolent objects, the Institution must frequently suffer a loss far beyond any possibility of recoupment from the small Charitable Fund which it possesses. It is a question whether, in those circumstances, an appeal to increase this Fund should not be made

to the public, who are in ignorance of what is being done, and who are, besides, little aware of the importance of providing for all private patients, who can only pay low rates of board, in public instead of in private Asylums."

"The structural changes in the East House are approaching completion. They are of a most satisfactory character, and will, no doubt, add as much to the prosperity as to the usefulness of the Asylum. The changes in the West House, which are also far advanced, cannot be spoken of in less commendatory terms. They have been well considered and executed, and their effect will certainly be highly beneficial to the patients."

"It is almost unnecessary to say, in concluding this Report, that the impression left by the visit, as to the management of the Asylum and the treatment of the patients, was in a very high degree favourable."

The Annual Report of the Charity Committee is herewith presented, and the Managers take the opportunity of pressing the claims of this Fund upon the attention of the benevolent. Looking to the large amount of debt presently owing by the Corporation, the Managers regret that they cannot advise any contribution from the general funds of the Institution to the Charity Fund for the past year.

(Signed) DAVID J. BRAKENRIDGE.

REPORT

OF THE

CHARITY COMMITTEE OF MANAGERS

FOR THE YEAR ENDING 31ST DECEMBER 1876.

The Account of the Treasurer's Intromissions with the Charity Fund during the past year is herewith submitted, showing an

Ordinary Income of	...	...	...	...	£358 9 4
And an Expenditure of	...	...	...	...	396 0 3

Excess of Expenditure over Ordinary Income	...	...	...	...	£37 10 11
But during the year Donations were received to the amount of	275 0 0

Thus leaving a Surplus of	£237 9 1
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The amount of the Fund at 30th December last was £9382 19s. 1d.

The total number of Patients who have derived benefit from the Fund during the year was 34, the average number on the roll each quarter being 29, and the average allowance to each Patient £11 12s. 11d.

(Signed) DAVID J. BRAKENRIDGE.

PHYSICIAN-SUPERINTENDENT'S

ANNUAL REPORT

FOR THE YEAR 1876.

I have the honour to submit the following Report of the Royal Edinburgh Asylum for the Insane for the year 1876.

In the beginning of the year there were 709 patients in the Asylum, and on the 31st of December the number was 726.

There were 360 patients admitted during the year, of whom 180 were men, and 180 women.

The total number of patients under treatment during the year was therefore 1076.

There were 260 patients discharged during the year, of whom 146 were men, and 114 women.

There were 82 deaths, of whom 39 were men, and 43 women.

The average number of patients resident during the year was 740, viz., 352 men, and 388 women.

ADMISSIONS.

The number of patients admitted (360) this year has been considerably the largest in the history of the institution, and an increase has taken place in both the private and rate-paid classes of patients. A comparison of the admissions of each class, however, shows that, while the number of private patients admitted was 50 per cent. above the average of the last three years, the number of paupers had only increased by 13 per cent. The actual number of the former was 125, and of the latter 235. The Report of the Commissioners in Lunacy for Scotland shows that during the last ten years the average number of private patients placed in Scotch Asylums each year is a little less than one-third of the paupers,

while in the case of this Asylum we had during 1876 more than one private patient for every two of the other class. Not only was our proportion of private patients admitted during the year thus greater than the average proportion for Scotland as compared with the rate-supported class; but if we compare the number of private patients resident here at the end of the year with the number of paupers, it is seen that, while we have 235 to 491, or about one to two, the proportion in Scotland generally at the end of 1875 was 1287 to 5274, or one to four. The institution, therefore, provides accommodation and treatment for private patients in double the proportion it does for paupers taking into consideration the number of each class in Scotland. In fact, one-fourth of all the private patients in Scotland sent to Asylums each year are sent here, while only one-eighth of the rate-supported class are sent. In the case of the latter, we receive all the patients from Edinburgh, Leith, and Orkney, and no more; in the case of the private class, we receive all those who are sent to us from any part of the world.

One reason why the number of admissions of private patients exceeds that of previous years is, no doubt, the fact, that our new wings at the East House were finished and occupied during the year, so that I had not to refuse admission to so many patients who could pay the higher rates of board, as had been the case in former years.

Of the private patients, 140 pay the intermediate and lower rates of board. There is no doubt that this is probably the most philanthropic department of the institution. The law makes stringent provision for the accommodation of the insane poor. If we did not provide accommodation for them, it would be at once provided out of the public rates. The class of patients, again, who can afford to pay the higher rates of board would soon find institutions, private or public, into which they could be received. But the intermediate classes have not as yet found in Scotland any places so good as the great chartered public Asylums; and ours provides for a larger number than any of the others. I trust that very soon, when some of our present heavy outlay is paid, we shall be able to do still more for this class of patients at

still lower rates of board than we charge at present. Few schemes would have more of real charity in them, or would be so potent for good, as one by which any person mentally afflicted could be able at once to receive suitable treatment in association with persons of his own rank of life for the payment of any sum he could afford, without going on the rates. If our Charity Fund was raised to such an amount that it would yield an income of a L.1000 a year, we should be able to take in fifty such patients at L.15 or L.20 a year, and provide them with suitable accommodation, food, and medical treatment. I am satisfied, from my experience, that the early treatment of a disease, which must be treated early in most cases to be treated effectually, would thus be provided for a class of persons in whom at present it is often too long delayed, on account of the want of means, and reluctance to apply to the parish authorities. It ought, in my opinion, to be one of the first aims of this institution to supply this want in the future, as it has done in the past, only more perfectly and more widely.

Only about one-half of the private patients came from Edinburgh (66 of the 125), the remainder coming from all over Scotland, England, and Ireland.

Turning now to the pauper patients, the chief fact about whose statistics, as distinguished from the private patients, is this, that they are all from a definite district year after year, and represent the production of lunacy in all but the better-off classes in that area. There were 235 in all, only 4 of whom were from parishes beyond our district (though 25 were afterwards made chargeable to other parishes, and transferred to other Asylums). We may regard the remaining 231 as the fresh production of pauper lunacy requiring Asylum treatment in Edinburgh, Leith, Portobello, and the Orkney Islands for this year. This is 17 cases more than last year, 55 more than the average of the five years 1869-73, and 97 more than the average of the five years preceding that, viz., 1864-68. This does seem at first a most alarming yearly increase of fresh cases in so short a time; but if the matter is considered, the shortness of the time altogether precludes the very idea of its being entirely due to a real increase of mental disease in the community. If insanity doubled itself every fifteen years, it would be a very

simple arithmetical problem to determine the question of how long any sanity would continue to exist. Without saying that there may not be some little real increase in certain forms of disease of the brain that affect the mind, I think the increase of cases sent to Asylums every year is due to many other causes, of which the following are the chief :—1. The importance of early and suitable treatment is now more recognised, our statistics showing that many more cases are now sent in at an early stage of the disease than formerly. 2. Short transient cases, especially those due to bouts of alcoholic excess, are now sent here in greater numbers than formerly. 3. Cases of slighter mental disturbance, the result of old age, of paralytic attacks, of bodily diseases affecting the brain, and of general breaking down of the bodily powers, that formerly would not have been reckoned as insanity at all, are now sent here to be nursed and cared for. 4. The country is richer, and the parochial officers hesitate much less about charging the rates with the cost of providing for an insane person in an Asylum. 5. The capitation grant of 4s. a patient from the imperial exchequer greatly aids the last reason. A distinguished writer on insanity has put this perhaps in rather a strong light when he said, “The Government has, in fact, said to parish officials, We will pay you a premium of 4s. a head on every pauper whom you can by hook or crook make out to be a lunatic, and send into the Asylum. And just as in olden times a reward of so much for each wolf’s head led to the rapid extinction of wolves in England, so we may expect that this premium on lunacy will tend to diminish materially, and perhaps to render gradually extinct, the race of sane paupers in England.” 6. The ideas of repulsion attaching to an Asylum formerly are now much less strong. 7. When it is becoming a general custom to send persons mentally affected to Asylums, the facilities for this being great, and the objections less, it is obviously much easier for the relatives to do this, and so get rid of the trouble of nursing and caring for the patient. 8. The present tendency of society is to be intolerant of mental peculiarities and idiosyncrasies. It will rather pay for their absence than see them in its midst.

The number of broken down cases sent here this year was more marked than had ever been the case before. This is best seen

from the fact, that in the returns of the bodily and mental condition of each patient which I make to the Commissioners in Lunacy within the first fortnight after admission, I find that in no less than 100 of the cases were serious bodily diseases mentioned as distinctly existing, in addition to the mental disease.

The question of sending a patient to an Asylum is undoubtedly a most difficult one to determine in very many cases. It involves so many considerations—family, social, pecuniary, legal, and medical—that this is not wonderful. The medical profession, on which rests the chief responsibility, as a general rule, finds few more grave matters to decide than whether a man is to be kept at home or sent to an Asylum, in certain cases. And no definite rules can be laid down in regard to this matter by even those who know most about it. I am very far from saying that every person who manifests any derangement of mind should be removed to an Asylum. It is as much the duty of the relatives and medical attendant of a patient suffering from mental derangement to try every means for his recovery at home and out of an Asylum, while there is a fair chance of these means being effectual, as it is for them to lose no time in sending him away, when his life or his recovery is in danger through want of the special care and appliances which an Asylum alone provides. There are certain considerations for the determination of this question which common sense and medical experience equally approve of. If a patient refuses food, and this cannot be overcome at home, it is, above all things, necessary to send him to an Asylum before his strength gets so exhausted as to interfere with his recovery. The brain is far too delicate an organ to stand for long both over-action and starvation. There are certain most pitiable cases, where the love of life, that strongest instinct in man, is so entirely lost, nay, even where the craving for death is as strong as ever the desire to live was in any man, for whom no watching in a private house is at all sufficient, and who should therefore be at once sent to an institution. Where there is present any strong tendency to do harm to others, the same course must be adopted. Sometimes the two things are combined in the same patient; and we have those shocking stories of murder and suicide by the same person, the

murder being usually committed on those nearest and dearest to the unhappy person. Usually such cases occur when a man's brain has been upset by alcoholic poisoning, or when it has been exhausted by illness, over-work, sleeplessness, or worry, or when a woman, after confinement, or during nursing, has become upset mentally, and has lost the strongest instincts of her nature; not only forgetting her sucking child, but wishing to take away its life. No woman should be allowed the charge of her child who shows signs of becoming insane after confinement or during nursing. Most cases of the disease called General Paralysis require Asylum management, and the sooner the better for them. Where there are unfounded insane suspicions, or hatred of near relatives, the patient needs to be sent away from them, and where can a patient be sent to, if he is not rich, but to an Asylum? The mental disturbance that is sometimes caused by epileptic fits very often indeed requires Asylum treatment, because such patients are dangerous in the extreme; and in any kind of mental disturbance of the circumstances of the patient, are such, that they manifestly aggravate it; if no proper attendance, or nursing, or food, can be got at home; if the symptoms threaten to become chronic; if no impression is made on the symptoms by the treatment adopted, then there can be but little question, that in such circumstances Asylum treatment is needful. On the other hand, Asylum treatment is usually not needed in the mental disturbances following a drunken bout, or the transitory delirium seen in growing boys and girls, or the milder mental disturbances following childbirth, or in that occurring during nursing if plenty of food can be given and the children removed, or in the mere aggravated dotage of old age, or in hysterics, or climacteric disturbances of the milder type; and, in fact, in very many other cases where treatment can be adopted in time, and where the symptoms are mild and not dangerous. Our present facilities for travel and change of scene and fresh air are unmixed blessings in the early treatment of mental disorders, helping us to break up morbid ideas and associations before they have taken root, and to restore the normal working of the brain. Those good effects are a clear set-off to some of the evils of our modern restless life, and travelling is now so cheap that a working-man

can change his whole surroundings for a shilling. I have seen many a patient saved both from falling into insanity, and from being sent to an Asylum, after the first symptoms of the disease had appeared, by being sent away for a change. There are exceptions to all rules, however, and in some cases travel and bustle help to aggravate the symptoms.

The causes of the insanity in the cases admitted have not been this year of an unusual character. Intemperance stands, as it always does, at the head of the list of causes, and in nearly one-fourth of all the cases was put down as having had more or less to do with the coming on of the mental disease. The habit of taking chloral in one case undoubtedly brought it on. It is satisfactory to find that this cause is so infrequent, for there is a prevailing idea that this drug is self-prescribed regularly in many cases. As to the extreme danger to brain and mind, as well as to life, of such a practice, I have not the slightest doubt, from my own observation. Mental and moral causes are put down in 43 of the cases as the cause why the reason was upset. And as one looks over the list of these, and tries to realize the mental suffering in the five cases where grief alone, or in the 22 cases where domestic and business anxieties and afflictions produced at length mental disorder requiring Asylum treatment, one feels that there are unrecorded tragedies going on every day around us that would call forth the sympathy of all men, could they be fully known. Cases characterised by depression of mind were exceedingly common this year, no less than 118 of the patients suffering from Melancholia, and 95 had threatened or attempted to take away their own lives.

There is a well known tendency, at the beginning of an attack of insanity, for the delusions of the patient to be influenced by the public events of the time, or by any sensational news of the day. Just after news of two of the murders of the year had appeared in the papers, we had two patients sent here who had given themselves up to the police as the murderers. One case happened while the notorious Glasgow murderer Barr was at large, and while exciting details of how he was being tracked were appearing day by day in the papers. A poor man who, up to that time, had

been a most steady hard-working tradesman, and whom his wife says she never suspected of mental disturbance, left his work for dinner, and went quietly up to the Police Office, delivering himself up as the murderer Barr. The tragedy seemed to have so excited his nerves, that an attack of incurable insanity which, I have no doubt, was then coming on in him, was precipitated and probably aggravated by it. Another of my patients, just before admission, somewhat staggered a bank clerk in an English town, by presenting a cheque in due form for £120,000,000, and demanding instant payment.

DISCHARGES.

Of the total number of 260 patients discharged, 160 were recovered. This is the largest number of recoveries we have ever had, though the per centage on admissions ($44\frac{1}{2}$) is not the largest. In 85, or more than one-half of all those who recovered, the patients had been sent into the Asylum within a month of the coming on of the attack, and about one-half of them got over their malady within three months, while only 28 recovered after it had existed for periods over a year.

DEATHS.

The rate of mortality has been somewhat high this year, being 11 per cent. on the average numbers resident, $7\frac{1}{2}$ per cent. on the total numbers under treatment, and $22\frac{1}{2}$ on the number of admissions. This is slightly above our own average rate (the excess being 1·7, ·7, and 1·5 on average numbers, total numbers, and admissions respectively), and that of the Asylums of Scotland during the past ten years. Nothing calls for greater vigilance on the part of its medical officer than a scrutiny of the death-rate of any institution at the end of each year. He should look on every death as a discredit to himself, and an affront to his profession. He should trace out the causes of each, remote and near, and not rest satisfied till he can discover good evidence that there are no preventible conditions that in any one case have tended towards death.

Going on those principles, I have gone carefully over the list

of our 82 deaths individually, and have also, by a comparison of their ages, diseases, and time of residence here, endeavoured to discover why we had more than usual this year. In regard to the ages of the patients, I don't find that the average age at death (50) or the number of individuals over 60 (17), was greater than in other years. Looking at the list of diseases which caused death (Table V.), almost all of which are ascertained by *post mortem* examinations, I do not find any epidemic form at all; and there is no single cause standing out very prominently except one, and that is General Paralysis, which carried off 22 cases instead of the usual average of 11. Now this, at all events, cannot be put down to any unhygienic or unfavourable conditions in the institution, for it was precisely because all those 22 patients had this dreadful disease that they were sent here at first; and, as yet, no remedy has been devised that has ever proved successful in any one case, or any means of mitigation of the slowly creeping palsy that seizes on every muscle of the body, destroying motion, abolishing speech, and soon extinguishing life. It is the one absolutely hopeless disease of Asylums, which, being once recognised, the patient's doom is held to be sealed, without a chance of respite. During its whole course, the treatment is attended with danger, anxiety, and trouble. The only good things about the disease are, that the patient is almost never conscious of his condition or his prospects, but is usually preternaturally happy and exalted, and that its duration seldom exceeds two or three years. It is a curious fact, that this disease was either not known or not recognised till about fifty years ago. It is now common enough in our city, our mining, and our manufacturing population, while it is still almost unknown in our entirely rural districts; and Irish Physicians tell us that in that country it is so exceedingly rare, as practically to be absent. Medical statistics say that it is proved to be increasing yearly in France, and there is but little doubt that it is increasing here too.

Heart diseases carried off 6 of the patients, which is an unusual number, 2 being the usual average. These, too, may be put down as inevitable, and the number accidental for this year. Inflammation of the lungs is the only preventible disease which stands

high, viz., 5 cases, in our list; but I find, on an examination of those cases, that four of the five had the disease on admission, and died at periods of from twelve to thirty-nine days after coming into the institution.

Apoplexy was unusually common (4 cases), and I need scarcely say that this was unpreventible. Consumption was less common (8 cases) than it used to be.

It is by an examination of the length of time the patients who died had been in the house before death, that most light is thrown on the mortality. I find that 42 out of the 82 died within six months of admission. Now, our admissions this year were unusually numerous, and, as I mentioned, 100 of them had distinct bodily diseases of a serious nature when they arrived. A comparison with the three previous years shows, that only an average of 20 patients died within the first six months of admission, so that the extra mortality of this year is seen to have taken place entirely among the patients who had been in the Asylum less than six months. This, taken along with the previous fact of so many of the new admissions of the year suffering from those serious bodily diseases, makes it quite certain that the explanation and cause of the excess of death of this year was the fact of the great number of patients admitted in such a condition, that they must die soon.

I find that 12 of the 22 cases of General Paralysis died within six months of admission, 4 of the 8 deaths from Consumption, 3 of the 6 from Heart Disease, and 2 of the 4 from Apoplexy within that time; showing clearly that this year we have not only had sent to us more than the usual number of cases with fatal diseases or their seeds, but that in many of these patients the diseases had advanced so far, or were so severe in their character, that death resulted very quickly.

It may seem unnecessary to have taken up so much time to discover the reason why our per centage of deaths was slightly over the average, but I am quite sure of the importance of a question of this kind.

A survey of the ages of the patients left in the Asylum at the end of the year is interesting, not only as bearing on the probable

future mortality in the institution, but also from a general point of view. We have only 10 inmates under twenty years of age, while we have no less than 126, or about one-sixth of our whole population, over 60. This is in very marked contrast indeed to the general population, where there is nearly one-half under 20, and less than one-twelfth part over 60 years of age. We have more persons over 70 than we have under 25.

GENERAL HISTORY OF THE INSTITUTION.

When an hospital for mental diseases has had within its walls in one year about 1100 patients of all classes, 360 of whom were new admissions, with the troubles and risks of the symptoms of recent insanity; when 160 patients have left it recovered, and 75 relieved of the worst symptoms of their malady; when there have been no preventible deaths, no epidemics, no suicides, and no accidents implying risk to the lives of patients or officials, I think it may be congratulated on having served the purposes for which it is provided fairly well. To be able to make such a record at the end of the year is the best reward for the troubles and responsibilities inevitable to the carrying on of its affairs, and is an encouragement to our officials to renewed exertion for the future.

Much progress has been made in the completion and occupation of the re-constructed wards for men in the West House. After completion otherwise, they were painted and papered in a tasteful and cheerful manner, and the new furniture got for them brought into use. Their general aspect is now exceedingly light and comfortable, and sanitarily they are also a great success, being easily warmed by the open fires, and yet not subject to get over-heated, like the old day-rooms. The great space allowed for the patients, too, prevents over-crowding at any one part, and so lessens the risk of collisions. Their large bow-windows, and the new plate-glass in the windows at the end of the corridors, admit about four times as much light as formerly. The new lavatories and bath-rooms answer their purpose admirably; and the water-closets, both in their arrangement and their position in the new towers projected from the building, with a cross current of air between

them and the wards, are all that could be desired. The addition of fire-places to all the dormitories has also been a very great comfort and improvement. The new dining-halls are now painted, and will be brought into use as soon as their furniture is ready. The new shoe-house, tool-houses, and sheds for the patients who go out to work on the farm, are also approaching completion.

In the East House the two new buildings, one for ladies, and the other for gentlemen, are now furnished and occupied. They have been painted and furnished elegantly and comfortably, having nothing about them to suggest confinement or gloom, and their general aspect is most home-like and bright. Already they are both about fully occupied. The new dining-rooms for the ladies and gentlemen are well under way, and will, I hope, soon be in occupation. The new kitchen-range, the cost of which was about L.400, has been an immense boon to the East House, the kitchen of which was formerly most inadequate, but is now equal to the demands on it. It will be no longer the fault of the kitchen, but of the cook, if the contentment that flows from a good dinner is not enjoyed by our East House ladies and gentlemen.

The high-walled airing-courts of the East House, and of the male division of the West House, have now been disused and abolished for over two years, and certainly with advantage. For the treatment of certain individual patients, as individuals, an enclosed space in the open air is useful; but it is better not to treat parties of patients in this way. They derive more benefit from walking or working in the open grounds. To occupy some of the worst class of men, we have been raising the level of the low ground near Myreside about three feet, with great advantage both to the ground and the patients. Work on the land, digging mother earth, is, after all, perhaps the simplest and most healthful toil for restoring the tone to exhausted human brains. It is, at all events, the most accessible way of going back to nature for restorative work. I set a party of gentlemen to work in that way in a retired corner of orchard with markedly good results to their health; but unfortunately a man who is in the position of a gentleman can seldom be got to do a thing so good for him. His

wits must be far gone before he will do it; and the moment they come back again, his prejudices also return.

I endeavour to allow as much liberty to the patients as each one can use properly. The deprivation of liberty, though necessary at first in most cases of mental disease, is undoubtedly very hard to bear, and in many cases itself acts as a cause of increasing some of the nervous symptoms of the patient. Our sea-side house, at which one-half of our East House ladies and gentlemen, as well as some of the inmates of the West House, spent about a month each, did very great good to many of them, gave enjoyment to all, and was altogether a success this year. Many of those who cannot be trusted here enjoyed the fullest liberty there with the best results.

In the cases of some patients, I think that a thorough change at a certain stage of recovery is most beneficial, and completes the cure, when nothing else would. It is a great pity that a ready transference of patients from one public Asylum to another for this purpose could not be more easily effected than is the case at present. I have often heard of sudden improvement in chronic lingering cases through removal to another institution, and have observed the same result to follow the transference here of such cases from other institutions.

The position of our attendants has been in many respects improved, but still the best of them are underpaid. Their duties are trying and irksome, and to do them well requires the exercise of some of the best qualities of human nature. I am sure that the Managers will see it to be their interest to go on making their position and that of all the resident officials as comfortable as they can. It would be a great gain if we had a few more houses for married attendants.

During the year the institution suffered the loss of the services of Dr Maclaren, who had been for three years a most zealous and able Assistant Physician, and who received the well-earned promotion to the Superintendency of the Stirling District Asylum. The Medical Staff perform their duties in all respects satisfactorily. The Rev. Mr M'Culloch, Mr Leslie, Miss Shearer, and Mrs Macdougall, co-operate with me in their several departments most

heartily. Of Messrs Gray, Gregory, Lindors, and Crombie, I cannot speak too highly; while Miss Massey, the new head female attendant, justifies her promotion by her efficiency.

In conclusion, let me thank the Managers, and more especially those of them who have served on the Visiting Committee, for their consideration, help, and support during the year.

T. S. CLOUSTON, M.D., F.R.C.P.,
Physician-Superintendent.

STATISTICAL TABLES
OF THE
MEDICO-PSYCHOLOGICAL ASSOCIATION.

TABLE I.
General Results of the Year.

	Males.	Females.	TOTAL.
Number of Patients, January 1, 1876...	335	374	709
Absent on Probation, January 1, 1876...	4	3	7
	339	377	716
	M.	F.	T.
Admitted for the first time			
during the year ...	134	136	270
Re-admitted during the year	46	44	90
Total admitted	—	—	—
	180	180	360
Total number under treatment ...	519	557	1076
Number of Patients discharged or removed	146	114	260
	M.	F.	T.
Of whom were Recovered	82	78	160
„ Relieved	46	29	75
„ Not Improved	18	7	25
Died ...	39	43	82
Total Discharged and Died			
during the year ...	—	—	—
	185	157	342
	M.	F.	T.
Absent on Probation Jan. 1,			
1877 ...	1	7	8
Number of Patients at the			
close of 1876...	...	...	...
	333	393	726
Average daily number resident during 1876	352·3	388	740·3
Number of Patients chargeable to District			
(the five City Parishes and Orkney) at			
close of 1876 ...	204	263	467
Number of Patients chargeable to Parishes			
beyond District at close of 1876 ...	11	9	20
Private Patients do. ...	118	121	239
	333	393	726

TABLE III.—*The Admissions, Discharges, and Deaths, with the mean Annual Mortality and Proportion of Recoveries per cent. on the Admissions for each Year since the Opening of the Asylum.*

YEARS.	Admitted.			Discharged.			Died.			Remaining December 31.			Per Centage of Recoveries on Admissions.			Per Centage of Deaths on all under Treatment.		
	Males.	Females.	Total.	Recovered.		Total.	Not Recovered.		Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
				Males.	Females.		Males.	Females.										
From Oct. 17, 1813, to Dec. 31, 1831,	..	..	265	..	..	102	..	..	118	..	..	36	..	..	38.4	..	..	1
From January 1, 1832, to December 31, 1836,	49	31	80	16	13	29	16	7	23	11	7	18	25	21	46	32.6	41.9	36.2
1837,	7	6	13	2	2	4	3	4	7	4	1	5	23	20	43	28.5	33.3	30.7
1838,	12	11	23	6	7	13	2	2	4	2	2	4	25	18	43	50	63.6	56.5
1839,	4	5	9	2	2	4	4	2	6	2	1	3	21	18	39	50	40	44.4
1840,	4	8	12	2	1	3	1	2	3	3	3	6	19	20	39	50	12.5	25
1841,	28	13	41	5	11	16	1	3	4	1	0	1	40	19	59	17.8	84.6	39
1842,	73	81	154	19	13	32	3	7	10	6	3	9	85	77	162	26	16	20.7
1843,	104	108	212	26	24	50	8	12	20	10	10	20	146	138	284	25	22.2	23.5
1844,	83	79	162	33	52	85	21	12	33	11	9	20	159	144	303	45.7	65.8	55.5
1845,	123	180	303	36	45	81	18	14	32	20	18	38	208	197	405	29.2	34.6	32
1846,	107	90	197	62	39	101	17	22	39	25	19	44	211	207	418	57.9	43.3	51.2
1847,	134	117	251	51	47	98	23	14	37	36	32	68	235	231	466	38	40.1	39
1848,	126	120	246	68	61	129	20	22	42	44	24	68	228	245	473	33.9	50.8	52.4
1849,	109	156	265	42	77	119	29	35	64	42	37	79	224	252	476	38.5	49.3	44.8
1850,	126	127	253	47	65	112	31	24	55	26	38	64	246	272	498	37.3	51.1	44.2
1851,	132	116	248	52	67	119	35	26	61	31	19	50	260	256	516	39.3	55	47.9
1852,	129	118	247	58	43	101	26	29	55	30	34	64	275	268	543	44.9	36.4	40.8
1853,	103	133	236	58	50	108	21	28	49	36	41	77	263	282	545	56.3	37.5	45.7
1854,	98	114	212	28	66	94	47	26	73	24	27	51	262	277	539	28.5	57.8	44.3
1855,	109	114	223	46	49	95	44	42	86	24	38	62	257	262	519	42.2	42.9	42.6
1856,	117	141	258	42	66	108	29	47	76	20	23	43	283	267	550	35.8	46.8	41.8
1857,	178	130	308	49	61	110	32	21	53	33	23	56	347	292	639	27.5	46.9	35.7
1858,	118	117	235	47	44	91	29	38	67	48	26	74	342	300	642	39.8	37.6	38.7
1859,	118	98	216	28	40	68	34	23	57	43	17	60	355	318	673	23.7	40.8	31.4
1860,	108	150	258	36	62	98	45	50	95	45	25	70	337	331	668	33.3	41.3	37.9
1861,	120	121	241	39	40	79	37	49	86	37	28	65	344	335	679	32.5	33	32.7
1862,	125	121	246	27	43	70	43	51	94	42	32	74	357	330	687	21.6	35.5	28.4
1863,	104	116	220	26	51	77	44	46	90	44	24	68	347	325	672	25	43.9	35
Totals and Averages from 1832 to 1864,	2648	2671	5319	938	1141	2099	663	660	1323	700	561	1261	..	..	..	36.1	42.7	39.4
													7.8	6.1	7			

TABLE III. (Continued.)—The Admissions, Discharges, and Deaths, with the mean Annual Mortality and Proportion of Recoveries per cent. on the Admissions for each Year during the Thirteen Years 1864—76.

YEARS.	Discharged.						Died.			Remaining Dec. 31.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Nos. Resident.			Percentage of Deaths on Total Nos. under Treatment.								
	Admitted.			Recovered.			Relieved.			Not Improved.			Males.			Females.			Total.			Males.			Females.			Total.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
1864	109	115	224	47	58	105	18	21	39	26	20	46	43	19	62	322	322	644	325.9	321.7	647.6	43.2	50.4	46.8	13.2	5.9	9.5	9.4	4.3	6.9
1865	122	144	266	37	54	91	26	20	46	17	14	31	28	25	53	333	343	676	317.3	330.9	648.7	30.3	37.5	34.2	8.8	7.5	8.1	6.3	5.3	5.8
1866	155	175	330	48	63	111	21	37	58	44	41	85	37	26	63	342	351	693	341.3	343.9	685	30.9	36	33.6	10.8	7.5	9.1	7.5	5	6.2
1867	129	146	275	39	65	104	20	8	28	16	30	46	44	27	71	348	368	716	348.8	376.1	718.9	30.2	44.5	37.8	12.8	7.1	9.1	9.3	5.4	7.3
1868	133	146	279	43	78	121	14	15	29	19	22	41	45	30	75	355	365	720	345.1	366.5	711.7	32.3	53.4	43.3	13	8.2	10.5	9.3	5.8	7.5
1869	140	147	287	55	65	120	9	19	28	13	14	27	53	40	93	364	375	739	361.8	370.8	732.6	39.2	44.2	41.8	14.6	10.7	12.6	10.7	7.8	9.2
1870	121	144	265	58	60	118	13	20	33	32	46	78	37	30	67	353	367	720	346	370	716	47.9	41.6	44.5	10.6	8.1	9.3	7.6	5.7	6.6
1871	124	145	269	37	43	80	13	14	27	25	34	59	37	39	76	365	377	742	360.7	373.4	734.1	29.8	29.6	29.7	10.2	10.4	10.3	7.7	7.6	7.6
1872	130	122	252	45	46	91	14	16	30	21	9	30	47	30	77	363	391	754	370	383	753	34.6	37.7	36.1	12.7	7.5	10.2	9.4	6	7.7
1873	107	153	260	61	84	145	22	30	52	18	13	31	40	25	65	335	404	739	347	400	747	57	54.9	55.7	11.5	6.2	8.7	8.5	4.5	6.4
1874	151	157	308	64	85	149	29	55	84	25	18	43	27	30	57	340	374	714	348.6	389.6	738.2	42.3	54.1	48.3	7.7	7.7	7.7	5.5	5.3	5.4
1875	148	162	310	68	85	153	37	37	74	10	8	18	36	29	65	335	374	709	338.6	384.3	722.9	45.9	52.4	49.3	10.6	7.5	9	7.3	5.4	6.3
1876	180	180	360	82	78	160	46	29	75	18	7	25	39	43	82	333	393	726	352.3	388	740.3	45.5	43.3	44.4	11	11	11.1	7.5	7.7	7.6
Totals and Averages,	1749	1936	3685	684	864	1548	282	321	603	284	276	560	513	393	906	...	...	...	346.4	369	715	39.1	44.5	41.9	11.3	8.1	9.6	8.1	5.8	6.9

TABLE IV.—*Shewing the History of the Annual Admissions since the Opening of the Asylum, with the Discharges and Deaths, and the Numbers of each Year, for the last Thirteen Years, remaining on the 31st December 1876.*

Admitted.				Of each Year's Admissions Discharged and Died in 1876.										Total Discharged and Died of each Year's Admissions.										Remaining of each Year's Admissions 31st Dec. 1876.	
Years.	New Cases.		Relapsed Cases.		Recovered.		Relieved.		Not Improved.		Died.		Recovered.		Relieved.		Not Improved.		Died.		Males.	Females.	Total.		
	Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
1813 to 1832	..	..	..	..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
1832 to 1864	..	..	..	..	3	0	3	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1486
1864	66	68	43	47	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	5		
1865	88	95	34	49	1	0	1	0	0	1	0	1	1	43	55	98	18	22	34	56	29	10	7		
1866	116	115	39	60	0	0	0	0	0	0	0	0	0	49	71	120	29	16	45	41	28	8	13		
1867	104	95	25	51	0	0	0	1	0	1	0	2	0	43	69	112	13	13	22	45	36	27	63		
1868	105	96	28	50	0	0	0	1	0	1	0	1	1	49	66	115	13	20	33	22	38	14	15		
1869	106	108	34	39	0	0	0	1	0	1	0	1	1	62	64	126	16	15	31	20	33	16	15		
1870	84	106	37	38	1	0	1	1	0	0	1	0	1	45	59	104	16	27	43	19	39	11	17		
1871	89	100	35	45	2	0	2	2	1	0	0	1	1	48	44	92	23	30	53	29	35	10	24		
1872	102	93	28	29	2	4	5	1	0	1	2	0	2	50	53	103	14	18	32	17	28	14	35		
1873	74	106	33	47	2	6	8	3	0	0	1	3	4	42	83	125	16	30	46	12	35	14	21		
1874	98	96	53	61	4	9	13	7	4	0	1	3	7	63	70	133	32	23	55	15	13	15	29		
1875	89	100	59	62	18	6	24	5	4	3	5	9	14	64	69	133	19	26	45	6	17	20	31		
1876	113	109	67	71	50	53	103	16	17	33	21	20	41	50	53	103	16	17	33	7	13	14	41		
Totals *	1294	1287	515	649	79	78	157	40	29	69	35	40	655	810	1465	247	276	523	210	429	362	307	669		
Totals †	..	..	..	..	82	78	160	46	29	75	39	43	..	..	..	..	..	..	..	..	333	393	726

Summary of the Total Admissions 1864-76.				Males.		Females.		TOTAL.	
Per Centage of Cases Recovered	..	..	..	37.4	41.3	39.7	89.7	..	..
" Relieved	..	..	..	14.1	14.2	14.1	14.1	..	..
" Not Improved	..	..	..	12	11.3	11.6	11.6	..	..
" Died ..	..	..	..	21.3	16.8	18.7	18.7	..	..
" Remaining ..	..	..	..	15.6	16.9	15.9	15.9	..	..

* Numbers for Thirteen Years.

† Since Opening of Asylum.

TABLE V.—*Causes of Death.**

	Males.	Females.	Total.
<i>Cerebral Disease.</i>			
Atrophy and Softening of Brain ...	1	2	3
Locomotor Ataxy and General Paralysis	3	0	3
General Paralysis ...	14	5	19
Spinal Disease and Atrophy of Brain ...	0	1	1
Softening of Brain ...	2	2	4
Exhaustion after Mania ...	2	2	4
Epilepsy and Phthisis ...	1	0	1
Epilepsy and Exhaustion ...	1	0	1
Exhaustion from Melancholia ...	0	1	1
Apoplexy ...	1	3	4
Tumour of Brain ...	0	1	1
Tumour of Brain and Pneumonia ...	1	0	1
<i>Thoracic Disease.</i>			
Morbus Cordis ...	1	5	6
Gangrene of Lung ...	1	0	1
Phthisis ...	5	3	8
Bronchitis ...	1	1	2
Pneumonia ...	0	5	5
Laryngitis ...	1	0	1
<i>Abdominal Disease.</i>			
Cancer of Stomach ...	1	0	1
Renal Disease ...	0	1	1
Peritonitis and Enteritis ...	0	2	2
Disease (Waxy) of Liver ...	1	0	1
Cancer (Scirrhus) of Abdominal Wall ...	0	1	1
Enteritis and Ulceration of Bowel ...	0	1	1
Diarrhoea ...	0	1	1
Aneurism of Abdominal Aorta ...	1	0	1
Gastric Ulcer ...	0	1	1
<i>General Disease.</i>			
Senile Exhaustion ...	1	5	6
Total ...	39	43	82

TABLE VI.—*Period of Residence of those Discharged Recovered, Not Recovered, and Died.*

			Recovered.			Not Recovered.			Died.		
			M.	F.	T.	M.	F.	T.	M.	F.	F.
Under	1 Month	...	6	8	14	6	1	7	4	11	15
From	1 to 3 Months	...	31	32	63	10	12	22	8	4	12
"	3 to 6 "	...	18	16	34	6	10	16	8	7	15
"	6 to 9 "	...	5	6	11	2	4	6	1	2	3
"	9 to 12 "	...	5	4	9	3	1	4	1	2	3
"	1 to 2 Years	...	6	7	13	3	2	5	5	4	9
"	2 to 3 "	...	3	4	7	7	3	10	3	4	7
"	3 to 5 "	...	3	1	4	4	1	5	3	2	5
"	5 to 7 "	...	1	0	1	4	2	6	1	1	2
"	7 to 9 "	...	0	0	0	3	0	3	1	1	2
"	9 to 11 "	...	1	0	1	4	0	4	0	2	2
"	11 to 13 "	...	0	0	0	2	0	2	0	0	0
"	13 to 15 "	...	0	0	0	4	0	4	0	0	0
"	15 to 17 "	...	1	0	1	2	0	2	1	1	2
"	17 to 19 "	...	1	0	1	1	0	1	0	0	0
"	19 to 21 "	...	1	0	1	1	0	1	0	0	0
"	21 to 23 "	...	0	0	0	0	0	0	1	1	2
"	23 to 25 "	...	0	0	0	1	0	1	0	1	1
"	27 to 29 "	...	0	0	0	0	0	0	1	0	1
"	31 to 33 "	...	0	0	0	1	0	1	0	0	0
"	33 to 35 "	...	0	0	0	0	0	0	1	0	1
Total	...	...	82	78	160	64	36	100	39	43	82

* Ascertained in 71 cases by *Post-mortem* examination.

TABLE VIII.

Ages of those Admitted, Discharged, and Dead.

	Admitted.			Discharged Recovered.			Removed.			Dead.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
From 5 to 10	0	0	0	0	0	0	0	1	1	0	0	0
„ 10 to 15	3	1	4	1	0	1	0	0	0	0	0	0
„ 15 to 20	3	8	11	4	6	10	2	3	5	1	0	1
„ 20 to 30	49	33	82	15	12	27	21	12	33	5	2	7
„ 30 to 40	48	46	94	21	21	42	19	6	25	4	6	10
„ 40 to 50	42	38	80	18	21	39	15	7	22	15	10	25
„ 50 to 60	21	33	54	12	12	24	5	5	10	10	12	22
„ 60 to 70	10	13	23	6	5	11	1	0	1	3	7	10
„ 70 to 80	3	8	11	3	1	4	1	2	3	1	5	6
„ 80 to 90	1	0	1	2	0	2	0	0	0	0	1	1
TOTAL ...	180	180	360	82	78	160	64	36	100	39	43	82
Mean Age ...	39·1	42·6	40·9	42·2	40·8	41·5	36·9	37·3	37	46	53·6	50

TABLE IX.

Condition as to Marriage in the Admissions, Discharges, and Deaths.

Condition as to Marriage.	Admissions.			Discharges.						Deaths.		
				Recovered.			Not Recovered.					
	M.	F.	T.	M.	F.	T.	M.	F.	F.	M.	F.	T.
Single ...	82	82	164	36	32	68	44	20	64	12	20	32
Married ...	83	69	152	38	38	76	17	13	30	22	13	35
Widowed ...	15	29	44	8	8	16	3	3	6	5	10	15
TOTAL ...	180	180	360	82	78	160	64	36	100	39	43	82

TABLE X.—*Assigned Causes of Insanity.*

					Males.	Females.	TOTAL.
Physical.	{	Intemperance ... ..	...	...	53	28	81
		Excesses ... ..	...	...	7	0	7
		Falls on the Head ... ..	...	...	3	0	3
		Disease of Lungs ... ..	...	...	0	1	1
		Disease of Lungs and Heart ... ..	...	...	0	1	1
		Phthisis ... ..	...	...	3	4	7
		Syphilis ... ..	...	...	1	0	1
		Congenital Defect ... ..	...	...	1	5	6
		Masturbation ... ..	...	...	12	0	12
		Epilepsy ... ..	...	...	5	5	10
		Paralysis ... ..	...	...	0	2	2
		Want of Proper Nourishment ... ..	...	...	0	7	7
		Over-Indulgence ... ..	...	...	0	1	1
		Chorea ... ..	...	...	0	1	1
		Severe Illness ... ..	...	...	0	1	1
		Fever ... ..	...	...	1	3	4
		Change of Life ... ..	...	...	0	14	14
		Over-Lactation ... ..	...	...	0	4	4
		Old Age ... ..	...	...	6	13	19
		Childbirth ... ..	...	...	0	5	5
		Derangement of Female Health ... ..	...	...	0	1	1
		Desertion by Husband ... ..	...	...	0	2	2
		Erysipelas ... ..	...	...	0	1	1
		Rheumatism ... ..	...	...	0	1	1
		Brain Disease ... ..	...	...	8	3	11
		Pregnancy ... ..	...	...	0	2	2
		Habit of taking Chloral ... ..	...	...	1	0	1
Moral.	{	Grief ... ..	...	...	0	5	5
		Over-Excitement ... ..	...	...	0	2	2
		Domestic Anxiety ... ..	...	...	1	9	10
		Disappointment in Love ... ..	...	...	0	1	1
		Business Anxieties ... ..	...	...	9	1	10
		Over-study ... ..	...	...	0	2	2
		Remorse ... ..	...	...	0	1	1
		Religious Excitement ... ..	...	...	0	2	2
		Over-work ... ..	...	...	5	2	7
		Quarrels ... ..	...	...	0	2	2
		Domestic Affliction ... ..	...	...	2	0	2
Predis- posing.	{	Previous Attacks ... ..	...	...	59	68	127
		Hereditary Predisposition ... ..	...	...	39	31	70
		Unknown ... ..	...	...	32	19	51

TABULI III

Table with 4 columns and 15 rows. The text is extremely faint and mostly illegible. The columns appear to contain numerical data and descriptive text.

ADDITIONAL MEDICAL TABLES.

TABULI IV

Table with 4 columns and 15 rows. The text is extremely faint and mostly illegible. The columns appear to contain numerical data and descriptive text.

TABLE XI.

Forms of Insanity in those Admitted—Dr Skae's Classification.

	Males.	Females.	TOTAL.
Congenital Insanity	1	5	6
Epileptic Insanity	5	4	9
Insanity of Pubescence	1	0	1
Insanity of Masturbation	11	0	11
Amenorrhœal Insanity	0	2	2
Puerperal Insanity	0	5	5
Insanity of Lactation	0	5	5
Insanity of Pregnancy	0	2	2
Climacteric Insanity	8	23	31
Ovarian Insanity	0	2	2
Senile Insanity	6	16	22
Phthisical Insanity	4	8	12
Dipsomania	3	2	5
Insanity of Alcoholism	27	16	43
General Paralysis	22	6	28
Hereditary Insanity of Adolescence	11	9	20
Idiopathic Insanity	19	36	55
Post-Febrile Insanity	0	2	2
Choreic Insanity	0	1	1
Insanity from Brain Disease	6	7	13
Anæmic Insanity	1	3	4
Metastatic Insanity	0	1	1
Traumatic Insanity	2	0	2
Syphilitic Insanity	1	0	1
Delirium	1	1	2
Unknown	51	24	75
TOTAL	180	180	360

TABLE XII.

Forms of Mental Disease in those Admitted.

	Males.	Females.	TOTAL.
Acute Mania	13	24	37
Mania	73	76	149
Epileptic Mania	5	4	9
Melancholia	61	57	118
General Paralysis	22	6	28
Dementia	4	2	6
Congenital	1	5	6
Puerperal Mania	0	4	4
Puerperal Melancholia	0	1	1
Delirium	1	1	2
TOTAL	180	180	360

TABLE XIII.

Number of Previous Attacks in those Admitted.

				Males.	Females	TOTAL.
Cases of First Attack	...	...		104	100	204
„ Second Attack	...	...		30	40	70
„ Third Attack	...	...		6	16	22
Had several Attacks	...	...		23	12	35
Congenital	...	...	...	0	5	5
Unknown	...	...	...	17	7	24
TOTAL				180	180	360

TABLE XIV.

State of Bodily Health and Condition of those Admitted.

				Males.	Females	TOTAL.
In Good Health and Condition	...			30	23	53
In Average Health and Condition	...			85	71	156
In Indifferent Health and Reduced Condition	...	...	...	54	69	123
In Bad Health and very Exhausted Condition	...	...	...	11	17	28
TOTAL				180	180	360

TABLE XVI.—*Religious Persuasion of those Admitted.*

				Males.	Females	TOTAL.
"Protestants"	...	...	...	82	88	170
Established Church	...	...	...	24	17	41
Free Church	...	...	...	12	22	34
Roman Catholic	...	...	...	15	11	26
United Presbyterian	...	...	...	12	12	24
"Episcopalian"	...	...	...	12	4	16
"Presbyterian"	...	...	...	7	6	13
Church of England	...	...	...	4	8	12
Baptist	...	...	...	1	1	2
Congregational	...	...	...	1	0	1
Methodist	...	...	...	0	1	1
Not Known	...	...	...	9	8	17
No Religion	...	...	...	1	2	3
TOTAL	...	...	...	180	180	360

TABLE XVII.—*Admissions, Discharges, and Deaths, each Month.*

		Admissions.			Discharges.			Deaths.		
		M.	F.	T.	M.	F.	T.	M.	F.	T.
January	...	21	12	33	3	8	11	2	3	5
February	...	7	11	18	4	6	10	3	4	7
March	...	12	9	21	12	2	14	0	0	0
April	...	17	12	29	14	5	19	4	2	6
May	...	18	22	40	7	8	15	7	4	11
June	...	12	15	27	13	12	25	3	4	7
July	...	18	16	34	11	5	16	1	5	6
August	...	16	20	36	10	22	32	4	5	9
September	...	11	20	31	8	10	18	4	5	9
October	...	19	14	33	11	8	19	1	8	9
November	...	12	14	26	14	13	27	3	1	4
December	...	17	15	32	39	15	54	7	2	9
TOTAL	...	180	180	360	146	114	260	39	43	82

TABLE XVIII.

Illustrations of Suicidal Tendency in those Admitted.

	Males.	Females	TOTAL.
Have attempted Suicide	31	24	55
Have meditated Suicide	17	23	40
Total Suicidal	48	47	95
<i>Forms of Insanity in which Suicide was attempted—</i>			
Acute Mania	1	2	3
Mania	5	3	8
Epileptic Mania	1	0	1
Melancholia	23	17	40
General Paralysis	1	0	1
Puerperal Mania	0	1	1
Puerperal Melancholia	0	1	1
Total	31	24	55
<i>Forms of Insanity in which Suicide was meditated—</i>			
Acute Mania	0	1	1
Mania	7	7	14
Melancholia	10	14	24
General Paralysis	0	1	1
Total	17	23	40
<i>Nature of the attempt—</i>			
Cutting Throat	11	6	17
Precipitation	4	5	9
Drowning	6	3	9
Poison	2	5	7
Starvation	4	1	5
Strangulation	0	5	5
Knocking Head against Wall	3	0	3
Wounding Veins of Arm	1	1	2
Burning	0	2	2
Hanging	1	0	1
Choking	1	0	1
Not stated	1	1	2

TABLE XIX.

Form of Insanity in those Discharged Recovered, Relieved, and Not Improved.

	Recovered.			Relieved.			Not Improved.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
Mania	46	33	79	19	8	27	6	1	7
Acute Mania	7	9	16	1	6	7	1	0	1
Epileptic Mania	2	1	3	1	0	1	0	0	0
Senile Mania	0	0	0	0	2	2	0	0	0
Puerperal Mania	0	4	4	0	2	2	0	0	0
Dipsomania	1	0	1	0	0	0	0	0	0
Monomania	1	0	1	2	0	2	0	0	0
Melancholia	25	31	56	11	7	18	1	3	4
General Paralysis	0	0	0	0	1	1	3	2	5
Dementia	0	0	0	9	1	10	3	0	3
Congenital Imbecility	0	0	0	3	2	5	1	0	1
Epileptic Imbecility	0	0	0	0	0	0	2	0	2
Delirium of Fever	0	0	0	0	0	0	1	0	1
Idiocy	0	0	0	0	0	0	0	1	1
TOTAL	82	78	160	46	29	75	18	7	25

TABLE XX.—*Form of Insanity in those Deceased.*

	Males.	Females	TOTAL.
Mania	3	18	21
Acute Mania	4	0	4
Epileptic Mania	3	0	3
Senile Mania	0	2	2
Choreic Insanity	1	0	1
Chronic Mania	0	1	1
Monomania	1	0	1
Monomania of Suspicion	0	1	1
Melancholia	5	9	14
Epileptic Imbecility	1	0	1
Dementia	4	2	6
Epileptic Dementia	0	2	2
Senile Dementia	0	1	1
Coma	0	1	1
General Paralysis	17	5	22
Idiocy	0	1	1
TOTAL	39	43	82

TABLE XXI.

The Number of Pauper Lunatics chargeable to Parishes that have Rights of Presentation to the Royal Edinburgh Asylum, that were not in that Asylum on the 1st January 1877.

PARISHES, &c.				Number of Patients.
City Parish, Edinburgh	...	...	...	196
St Cuthbert's and Canongate	...	...	...	23
South Leith	...	...	...	21
North Leith	...	...	...	3
Duddingston	...	...	...	2
County of Orkney	...	...	...	28
TOTAL	...	...	...	273

REPORTS

OF THE

COMMISSIONERS IN LUNACY.

ROYAL EDINBURGH ASYLUM,
14th, 15th, and 16th March 1876.

The number of patients at present on the Asylum registers is as follows :—

			Males.	Females.	Total.
In East House	...	...	41	39	80
In West House	...	...	309	338	647
On Pass	...	...	1	1	2
On Probation	...	...	3	1	4
Total			354	379	733

Since the date of last visit the following changes have taken place :—

			Private.		Pauper.		
			M.	F.	M.	F.	T.
Admissions	...	...	25	11	31	28	95
Discharges	...	...	8	14	22	29	73
„ Recovered	...	...	7	8	18	22	55
Deaths	...	...	6	2	4	9	21

Three voluntary patients are included in the admissions, and one is included in the discharges.

Of the patients discharged, 3 men and 6 women were transferred to other Asylums, leaving no fewer than 27 men and 37 women who were transferred to private care.

The mortality has not been high, and the existing health condition is good. Phthisis appears of late to have been less frequently a cause of death than it was formerly. In nearly every case of death a *post mortem* examination has been made.

There are only 4 entries in the Register of Restraint and Seclu-

sion. They refer to the seclusion of 4 patients for periods varying from five to six hours.

Five accidents are recorded. Three of them were trifling. Two were burns of some severity. No patient was found wearing any special contrivance of dress.

The number of patients usefully employed is considerably increased. This is as apparent among the women as among the men. As regards the out-door workers, there is not only an increase of their number, but they show a greater interest and activity in their occupations.

In consequence of the extensive structural changes which the Asylum is undergoing, it has been for nearly six months practically without walled airing-courts. This has not led to any increase in the number of escapes or accidents, nor has it rendered the management more difficult. There is less lounging, but there is no reduction of the amount of active open-air exercise.

Visitors to patients are very numerous, and interviews are nearly always allowed.

Many patients are on parole, both beyond and in the grounds. Absences from the Asylum on pass for periods of more than one day are frequent. During 1875, 64 patients were thus allowed to visit their friends, and the whole number of days of absence was 923, or about a fortnight each. This is exclusive of the summer change to North Berwick, in which 31 patients participated—the average stay of each patient being five weeks.

Unusual quiet and contentment prevailed among the patients, and scarcely any complaints were made.

Enough has now been done in carrying out the structural changes to make it possible to realise the thoroughness of their character, and to see how much they will add to the well-being of the patients, and the efficiency of the Institution as an hospital for the care and treatment of the Insane.

It is not so well known as it should be that in this Asylum there are not a few unfortunate persons belonging to the educated classes who are either actually paupers or pay a pauper rate of board, but who are treated as private patients, and are brought into association with those in their own rank of life. It would be difficult to over-estimate the beneficence of this; and it is to be

wished that the charitable public would put the Directors in a position to extend this blessing to a larger number.

In the treatment and management of the patients, many things were seen which indicated that the condition of each patient had been carefully and minutely studied both by the Physician and the Assistant-Physicians.

The Books and Registers were, as usual, found in excellent order.

ARTHUR MITCHELL, *Commissioner in Lunacy.*

EDINBURGH ROYAL ASYLUM, *November 15, 1876.*

The following are the changes which have taken place among the patients since the visit of 16th March :—

	Private.		Pauper.		Total.
	Males.	Females.	Males.	Females.	
Admissions ...	39	43	80	89	251
Discharges ...	28	20	59	58	165
Deaths ...	11	15	14	18	58

These figures show an increase of 32 in the numbers on the Registers. Of voluntary inmates there have been 1 admission and 4 discharges. Of the numbers at present on the Registers, 87 are resident in the East Division, and 661 in the West Division; 1 is absent on pass; 2 have escaped; and 11 are absent on probation.

Of those discharged, 114 had recovered, 39 were relieved, and 12 were not improved. Of the non-recovered, 24 were transferred to other Institutions.

Of the 58 patients who died, 45 were admitted in 1874, 75, and 76, and the rest in earlier years. The main causes of death were consumption and chronic affections of the nervous centres; the former accounting for 8, and the latter for 29, of the fatal cases.

The transition state in which the establishment was found at the last three visits still continues; but in the East Division the new wings in the rear of the original buildings have been completed, and are being taken into occupation. The accommodation they furnish is of a most comfortable description, and will afford the means of conducting the treatment of the patients in a much more satis-

factory manner than has hitherto been possible. The furniture and fittings are such as are seen in the best appointed private dwellings, and nothing presents itself which could be set down as characteristic of an Asylum. In the main building many improvements have been already effected, and others are in process of being carried out. The old airing-courts are being converted into open flower-gardens; and altogether the establishment, both within and without, is being brought into accordance with the most advanced views of the day.

In the West Division considerable progress has been made in the radical changes which have been there undertaken, and the result is exceedingly satisfactory. But the full advantage of them will not appear until the new dining-hall has been taken into occupation, and until the disturbing influence of extensive operations in wards all having their full complement of patients, comes to an end.

Making due allowance for the confusion which is thus necessarily produced, the condition of the establishment must be regarded as very satisfactory. No patient was found in seclusion; and from the Registers it appears that only on seven occasions, and in the cases of four individuals, has seclusion been had recourse to since last inspection. In one case restraint by the polka has been occasionally required. Owing to the inclement state of the weather, exercise out-of-doors has recently been much restricted; and on this account some of the females were inclined to be noisy. A large proportion of them, however, were industrially employed; and the arrangements recently made for the classification of the female patients, are regarded as giving very satisfactory results. The recent cases are thereby brought under more constant and more efficient observation; and from being at once associated with industrial patients, they are more readily led to engage in work than when they were less concentrated. Altogether 214 female patients are registered as industrially employed. Of the men, 238 are workers; and of these 163 are gardeners and labourers, and about 30 artizans. The new workshops for the tailors and shoemakers are large, well-lighted, and well-ventilated.

In connection with the structural alterations, the walls of several of the airing-courts have been taken down, and extended exercise

in the general grounds is now the general rule. So far from any evil effects having been experienced from the want of airing-courts, their abolition is regarded as having had a very beneficial influence on the community. Liberty on parole is extensively granted, and many patients are allowed to be absent for several days "on pass." During the summer a house was rented by the sea-side, and in this way 13 males and 24 females had the benefit of change for an average period each of 33 days. These details are given as indicating the spirit in which the establishment is conducted.

The bedding and day-clothing were in a satisfactory state; and the use of hair mattresses will soon be universal, except for the patients who are habitually wet. The number of broken-down decayed cases is at present unusually large, partly from the progress of age and disease in those patients who have been long resident, and partly from the increasing practice of making the Asylum a receptacle for old persons, who, from irritability or the decay of their faculties, have become troublesome at home.

The various Registers are neatly and carefully kept. Altogether the impressions produced by the visit were very gratifying, and the future of the establishment is regarded with confidence.

JAMES COXE, *Commissioner in Lunacy.*

ROYAL EDINBURGH ASYLUM,
30th and 31st January, and 1st February 1877.

The following statement shows the number of patients at present on the Registers:—

			Males.	Females.	Total.
In the East Division	...		47	47	94
In the West Division	...		295	350	645
	Resident	...	342	397	739
	On Pass	...	2	0	2
	On Probation	...	1	6	7
	On the Registers	...	345	403	748

In these numbers two voluntary patients are included.

The changes which have taken place since the date of last visit are as follows :—

	Private Patients.		Pauper Patients.		Total.
	Males.	Females.	Males.	Females.	
Admissions ...	16	9	32	29	86
Discharges ...	5	10	49	21	85
Deaths ...	3	1	8	3	15

These figures indicate a large and active movement in the population. The number of admissions has been very great, being 36 for the month of January, and about one daily for the whole of the year 1876. Among those admitted there have been many in a very feeble and broken down condition of health. In view of these facts, the mortality must be regarded as low. As causes of death, General Paralysis appears with increasing, and Phthisis with decreasing, frequency. The average age at death was about 54. The medical treatment of the patients continues to be conducted in a painstaking and efficient manner, and the Case Books are very satisfactorily kept. In nearly every instance of death, a *post mortem* examination is made, and the results are carefully recorded.

Of the 85 patients discharged, 37 were recovered, 35 relieved, and 13 not improved. The numbers of the relieved and unimproved include 38 patients transferred to other Institutions or to Ireland. The large number of transferences is due to the opening of wards for male lunatics in the Edinburgh City Poorhouse.

On the 1st of January 1877 the population was made up of the following elements :—

1. Pauper Lunatics chargeable to the Edinburgh District and Orkney	...	...	...	...	...	467
2. Pauper Lunatics chargeable to the Parishes beyond the District	...	...	...	...	...	20
3. Private Patients	...	...	...	...	...	239
Total						726

It thus appears that this Asylum gives accommodation to a very large number of private patients. Many of these pay high rates of board, and they have comforts and advantages in return such as few Asylums supply. A large proportion of the private

patients, however, pay low rates of board; and in reference to them, it is felt that this Institution discharges a very humane and charitable function. They are most liberally treated, and to their history and habits a very kindly consideration is given. The same liberal dealing is extended to some patients who are actually paupers, but who belong socially to a class above that from which pauper lunatics are ordinarily drawn. In carrying out these benevolent objects, the Institution must frequently suffer a loss far beyond any possibility of recoupment from the small Charitable Fund which it possesses. It is a question whether, in these circumstances, an appeal to increase this fund should not be made to the public, who are in ignorance of what is being done, and who are besides little aware of the importance of providing for all private patients, who can only pay low rates of board, in public instead of in private Asylums.

Only two accidents are recorded—a fracture of the bones of the arm, and a dislocation of a rib from its cartilage. There is good reason, however, to doubt whether the last accident really occurred after the patient's admission.

The Register of Restraint and Seclusion for the East Division contains no entry, and that for the West Division only seven entries, referring to four patients. At the time of the visit only one patient was found wearing any special contrivance of dress.

Notwithstanding the taking down of the airing-court walls, the greater occupation of the men out of doors, the increased liberty accorded to the patients, and the confusion attending the extensive building operations, there has been no increase of the number of escapes. *Passes* are frequently given to the patients, who are thus enabled to visit their friends in town, unaccompanied by attendants. In the case of convalescents this is often productive of much benefit; but it adds also to the contentment of many whose lunacy is confirmed, but who are trustworthy and capable of appreciating such a privilege.

The industrial occupation of the patients has undergone further extension, but it is thought that a still larger number of the women might with advantage be usefully employed.

The structural changes in the East House are approaching completion. They are of a most satisfactory character, and will;

no doubt, add as much to the prosperity as to the usefulness of the Asylum. The changes in the West House, which are also far advanced, cannot be spoken of in less commendatory terms. They have been well considered and executed, and their effect will certainly be highly beneficial to the patients.

It is a question whether some new arrangement in regard to the Infirmary wards, both for men and women, is not desirable. The wards at present in use for the sick are too small, and it is suggested that the propriety of converting into an Infirmary the whole one story block, hitherto known under the objectionable name of the *Separate Wards*, should be taken into consideration. It would not be difficult to convert these buildings into an admirable hospital; and if their accommodation is somewhat in excess of what would be needed for the more actively sick, that would scarcely be a fault, as it could easily and advantageously be occupied by suitable patients chosen from the other wards of the Asylum. It is believed, however, that the number of strictly proper occupants of a sick ward would be found to increase, if the accommodation of that ward were greater.

The Books and Registers were, as usual, in excellent order.

It is almost unnecessary to say, in concluding this Report, that the impression left by the visit, as to the management of the Asylum and the treatment of the patients, was in a very high degree favourable.

ARTHUR MITCHELL, *Commissioner in Lunacy.*

A B S T R A C T

OF THE

T R E A S U R E R ' S A C C O U N T S ,

F O R T H E Y E A R 1 8 7 6 .

C H A R G E .

I. Balance of last Account closed 31st December 1875	£7419	10	0½
II. Arrears of Board given up in last Account	£167	19	9
<i>Less</i> written off	6	16	8
	<hr/>		
	161	3	1
III. Patients' Boards per Board-books—			
	<i>Males.</i>		<i>Females.</i>
Quarter ending 31st March 1876	£3547	5 1	£3795 0 9
Do. do. 30th June 1876	3549	15 5	3899 17 11
Do. do. 30th Sept. 1876	3602	17 5	4016 14 2
Do. do. 31st Dec. 1876	3728	5 2	4043 9 6
	<hr/>		<hr/>
	£14,428	3 1	£15,755 2 4
			14,428 3 1
			<hr/>
			£30,183 5 5
<i>Add</i> —Received from St. Cuthbert's Parish amount recovered by them from other Parishes liable for a higher rate of Board	£10	10 3	
Received from City Parish, do.	24	2 6	
	<hr/>		34 12 9
Carry forward	£30,217	18 2	£7580 13 1½

Brought forward	£30,217	18	2	£7580	13	1½
<i>Deduct</i> —Sum paid to Charity Committee, in terms of Minute of Managers, dated 24th Feb. 1876	£250	0	0			
Repaid for Patients last year	6	2	0			

256 2 0

29,961 16 2

IV. Accounts due by Patients for clothes and extraordinary furnishings of various kinds supplied through the House Superintendent and Matrons at the expense of the institution, and charged against the recipients—

	<i>Males.</i>			<i>Females.</i>		
Quarter ending 31st March 1876	£371	9	3	£350	15	7
Do. do. 30th June 1876	261	15	1	253	10	10
Do. do. 30th Sept. 1876	310	0	9	285	12	2
Do. do. 31st Dec. 1876	288	18	1	262	4	7
	£1232	3	2	£1152	3	2
				1232	3	2

2384 6 4

V. Price of Crop, Pigs, and Sundries disposed of—

1. Price received for Pigs sold	£277	11	10
Less paid for Pigs bought	17	8	7
	£260	3	3
2. Price received for Wheat and Oats sold	74	3	6
3. Price received for Bones, old Iron, &c.	57	15	0
4. Price received for Sundries	13	13	0

405 14 9

VI. Sums borrowed to meet Expense of Additions and Alterations

3000 0 0

Amount of the Charge £43,332 10 4½

DISCHARGE.

			East House.			West House.			TOTALS.		
APPENDIX I.			£	s.	d.	£	s.	d.	£	s.	d.
I.	Expenses of Provisions	.	2709	16	5	8706	0	5½	11,415	16	10½
II.	Do.	Clothing, Bedding, Napery, &c.	234	11	10	2347	14	10	2582	6	8
III.	Do.	Fuel	198	15	3	626	14	5	825	9	8
IV.	Do.	Lighting	111	10	3	299	8	3	410	18	6
V.	Do.	Water and Washing Materials	109	13	5	302	18	2	412	11	7
VI.	Do.	Medical and Surgical Outlay	31	18	0	139	0	3	170	18	3
VII.	Do.	Books & Stationery	72	1	1	154	9	2	226	10	3
VIII.	Do.	Tobacco and Snuff	16	17	10	162	18	8	179	16	6
IX.	Do.	Sundry Furnishings and Repairs	199	17	11½	1631	4	5	1831	2	4½
X.	Do.	Garden & Grounds	.....			305	2	7	305	2	7
XI.	Public and Parochial Burdens		69	13	1	149	0	2	218	13	3
XII.	Interests on Loans paid		.....			1054	5	10	1054	5	10
XIII.	Feu-duties and Stipend		157	10	0	337	15	11	495	5	11
XIV.	Insurance Premiums		9	18	10	21	4	5	31	3	3
XV.	Salaries and Wages		1703	11	6	4101	1	11	5804	13	5
XVI.	Miscellaneous Payments		116	15	0½	334	2	9½	450	17	10
XVII.	Accounts paid on behalf of Patients charged against them		1592	10	6	303	17	6½	1896	8	0½
Amount of Ordinary Disbursements			7335	1	0	20,976	19	9½	28,312	0	9½
XVIII.	Special Expenditure								10,980	8	11
XIX.	Statutory Debt paid off								1763	9	0
XX.	Arrears of Board and Extras at 31st December 1876								169	5	5
	Balance of this Account at do.								2107	6	3
Amount of the Discharge									£43,332	10	4½

DETAILS OF EXPENDITURE

DURING THE YEAR 1876.

I. PROVISIONS—

Loaves	69,011	...	£1,709	15	5
Rolls	36,363	...	75	16	1
Biscuits	992 doz.	...	17	9	0
Short Bread & Currant Loaves . . . . .	.....	...	55	6	2
Butcher Meat	8,527 stones	...	2,941	17	6
Extract of Meat	494 lbs.	...	184	15	0
Preserved Meat	8,018 „	...	229	5	3
Fish	15,656 „	...	161	17	10
Game and Fowl . . . . .	.....	...	92	10	2
Milk and Cream	21,533 gals.	...	795	7	1
Fresh Butter	458 lbs.	...	38	3	4
Tea	4,834 „	...	507	12	11
Coffee and Chicory	3,130 „	...	164	17	6
Raw Sugar	231½ cwt.	...	284	6	1
Loaf Sugar	24¼ „	...	38	5	10
Salt Butter	120¼ „	...	870	16	2
Rice	50 „	...	46	0	0
Cheese	141¼ „	...	223	6	2
Currants	10 „	...	16	10	3
Arrowroot	5½ „	...	16	4	0
Sago	2½ „	...	2	16	3
Pepper	2½ „	...	7	1	2
Herrings	22 brls.	...	38	19	0
Ham and Bacon	2,397 lbs.	...	108	10	2
Mustard	378 „	...	21	5	3
Ketchup	20 doz.	...	14	0	0
Treacle	254 lbs.	...	1	7	3
Fruits, &c. . . . .	.....	...	37	0	0
Flour	30 bags of 280 lbs.	...	54	6	8
Oatmeal	153 „	...	312	14	0
Barley	58 „	...	87	15	0
Pease	36 „	...	53	8	5
Eggs	5541 doz.	...	331	5	6
Salt	145 cwt.	...	19	14	2
Potatoes	1,737 „	...	507	18	11
Carrots	46¼ „	...	8	7	3
Beer	16,959 gals.	...	309	1	10
Porter	61 brls.	...	172	1	0
Ale	44 „	...	98	3	6
Potash, Lemonade, &c.	747 doz.	...	58	15	7
Wine	5 casks	...	283	14	0
Whisky	222¼ gals.	...	172	4	10
Brandy	44½ „	...	55	12	8
Gin	34 „	...	23	16	0
Rum	4 „	...	2	15	0
Vinegar	118½ „	...	11	17	0
Sundries (being petty disbursements by House Superintendent and Matron) . . . . .	...	...	151	4	8½
Carry forward			£11,415	16	10½

			Brought forward	£11,415 16 10
II. CLOTHING, BEDDING, NAPERY, &c.—				
Wincey	939 yds.	£59 7 2		
Flannel	1,324 „	80 4 4		
Cotton	8,966 „	241 18 4		
Muslin	48 „	1 8 0		
Shawls	12 doz.	21 12 0		
Dowlass	1,641 yds.	69 6 2		
Corduroy	505 „	44 3 9		
Shirting	406 „	10 15 9		
Tweeds	868 „	100 4 11		
Worsted	31½ spindles	51 11 11		
Socks	74 doz.	44 10 4		
Plaiding	625 yds.	68 7 2		
Blankets	202 pairs	119 3 0		
Sheeting	3,308 yds.	206 10 9		
Quilts	35 „	9 2 6		
Bed Tick	2,250 „	79 3 5		
Linen	492 „	36 7 9		
Towelling	1,621 „	48 7 6		
Carpet Covers	38 „	16 12 6		
Canvas	1,580 „	51 2 11		
Table Damask	50 „	5 0 0		
Toileting	119 „	10 6 1		
Toilet Covers	2 doz.	2 0 0		
Tray Cloths	10 „	4 5 6		
Handkerchiefs	7 „	1 9 9		
Stays	12 „	16 5 6		
Boots, Shoes, and Slippers	436 pairs	132 8 5		
Leather for Shoes, &c.	1,298 lbs.	136 8 4		
Straw for Beds	5,568 stones	144 1 4		
Hair for do.	90 cwt.	633 19 0		
Waterproof Sheeting	24 yds.	7 14 6		
Coffin Cloth	125 „	16 4 8		
Suit for Gatekeeper . . . . .	.....	6 15 10		
Thread, Buttons, Needles, Trimmings, and Sundries		105 7 7		
				2,582 6 8
III. FUEL—				
Coal	1,652 tons	.....		825 9 8
IV. LIGHTING—				
Gas	1,744,630 feet	£398 2 7		
Candles	37 stones	12 15 11		
				410 18 6
V. WASHING MATERIALS—				
Water	12,710,000 gals.	£203 10 0		
Soap	137 cwt.	152 15 0		
Soda	133 „	33 13 4		
Starch	9½ „	22 13 3		
				412 11 7
VI. MEDICAL AND SURGICAL EXPENSES—				
Drugs		£140 17 5		
Surgical Instruments		14 5 10		
Medical Fees		15 15 0		
				170 18 3
Carry forward				£15,818 1 6½

	Brought forward		£15,818	1	6½
VII. BOOKS AND STATIONERY—					
Books	£35	11	0		
Stationery	91	15	6		
Bookbinding	33	1	6		
Newspapers, Periodicals, and Amusements	66	2	3		
				226	10 3
VIII. TOBACCO AND SNUFF				179	16 6
IX. FURNISHINGS FOR HOUSE AND REPAIRS—					
Ironmongery	£98	14	0		
Furniture (Chairs, Tables, &c.)	103	18	0		
Crockery	127	15	0		
Carpets, Matting, &c.	247	14	2		
Brushes and Door-Mats	68	10	6		
Cutlery, Combs, &c.	59	0	11		
Glass	36	17	4		
Oils and Varnish	41	0	10		
Corks	31	16	0		
Metal Castings	3	5	4		
Wood for Repairs	109	6	8		
Painter Work	254	3	0		
Plumber do.	132	9	3		
Tinplate, Wire, &c.	28	3	5		
Lime	1	19	1		
Rope and Twine	18	17	10		
Tiles and Bricks	2	5	6		
Baskets, &c.	46	17	0		
Repairs to Boilers, Hot-water Apparatus, &c.	71	15	0		
India-rubber Goods	11	18	2		
Philosophical Instruments	7	2	0		
Sundries disbursed by House Superintendent	327	13	4½		
				1831	2 4½
X. GARDEN AND GROUNDS—					
Bran for Horses	£2	2	0		
Plants, Seeds, &c.	80	16	0		
Manure	19	8	8		
Pigs' Meat	102	13	8		
Garden Implements, and Repairs to do.	100	2	3		
				305	2 7
XI. PUBLIC AND PAROCHIAL BURDENS—					
County Rates	£10	18	9		
Property Tax	19	13	11		
Land Tax	0	4	4		
House Duty	16	6	3		
Police and Prison Rates	56	5	0		
Poor Rates	78	15	0		
Road Assessment	25	0	0		
Assessed Taxes, &c.	11	10	0		
				218	13 3
XII. INTEREST ON DEBT				1054	5 10
XIII. FEU-DUTIES AND STIPEND—					
Feu-duties	£478	3	5		
Stipend	17	2	6		
				495	5 11
Carry Forward				£20,128	18 3

	Brought Forward		£20,128	18	3
XIV. INSURANCE			31	3	3
XV. SALARIES AND WAGES—					
Physician Superintendent	£800	0	0		
Three Assistant Physicians	300	0	0		
Chaplain	130	0	0		
House Superintendent	200	0	0		
Gardener	100	0	0		
Storekeeper	100	0	0		
Treasurer and Clerk	500	0	0		
Honorarium to Visiting Committee	110	0	0		
Matron of East House	80	0	0		
Do. of West House	70	0	0		
Auditor	50	0	0		
Attendants' Wages	3364	13	5		
				5804	13 5
XVI. MISCELLANEOUS—					
Advertising	£34	14	6		
Cab Hires	37	19	0		
Rent of Elizabethan Cottage	42	17	6		
Freight of Tea	3	9	5		
Law Expenses	157	18	1		
Postages, Porters, Telegrams, Bank Ex- changes, &c.	93	18	2		
Rewards to Patients, Attendants, &c.	64	0	11		
Sundries	16	0	3		
				450	17 10
XVII. ACCOUNTS PAID and MONEYS ADVANCED on behalf of indi- vidual Patients, against whom same are charged			1896	8	0½
			£28,312	0	9½

ABSTRACT OF INCOME AND EXPENDITURE

FOR THE YEAR ENDING 31ST DECEMBER 1876.

INCOME—	
I. Boards	£29,961 16 2
II. Extra Accounts due by Patients	2,384 6 4
III. Produce and Sundries sold	405 14 9
EXPENDITURE—	
Amount of Ordinary Disbursements, as stated in Discharge of preceding Account*	£32,751 17 3
	28,312 0 9½
Surplus Ordinary Income	<u>£4,439 16 5½</u>

ABSTRACT OF INCOME AND EXPENDITURE

AT THE

EAST AND WEST HOUSES RESPECTIVELY.

Year to 31st December 1876.

I. EAST HOUSE.

INCOME—	
I. Boards	£9,596 18 2
II. Extra Accounts.	1,592 10 6
EXPENDITURE—	
Amount thereof chargeable against East House, as stated in foregoing Discharge	£11,189 8 8
Add—	
Value of Vegetables, &c., furnished from Garden	741 1 6
Value of Work performed by Mechanics assisted by Patients	325 2 8
	<u>8401 5 2</u>
Surplus Income of East House	£2,788 3 6

II. WEST HOUSE.

INCOME—	
I. Boards	£20,364 18 0
II. Extra Accounts	791 15 10
III. Produce sold	405 14 9
IV. Vegetables supplied to East House	741 1 6
V. Work performed at East House	325 2 8
EXPENDITURE—	
Amount thereof chargeable against West House, as stated in foregoing Discharge	£22,628 12 9
	20,976 19 9½
Surplus Income of West House	<u>1,651 12 11½</u>
Total Surplus as before	<u>£4,439 16 5½</u>

* The instalment to the Sinking Fund is not included in the amount of ordinary disbursements.

TABULAR VIEW of the Cost per Head per Annum of the undernoted Items allocated upon Patients, of whom 83 represents the Daily Average of the East House, and 657 the Daily Average of the West House.

	East House.	West House.
I. Provisions (including share of Attendants' Provisions)	£32 13 0	£13 5 0
II. Clothing, Bedding, Napery, &c.*	2 16 6	3 11 5
III. Fuel	2 7 11	0 19 1
IV. Lighting	1 6 10	0 9 1
V. Water and Washing Materials	1 6 5	0 9 2
VI. Medicines and Surgical Apparatus	0 7 8	0 4 2
VII. Books, Stationery, &c.	0 17 4	0 4 8
VIII. Tobacco, Snuff, &c.	0 4 1	0 4 11
IX. Furnishings and Repairs	2 8 1	2 9 8
X. Garden and Grounds . . . . .	...	0 9 3
XI. Public Burdens and Stipend	0 17 9	0 4 10
XII. Insurance	0 2 1	0 0 8
XIII. Salaries and Wages	20 10 0	6 4 11
XIV. Estimated value of Fruit, Vegetables, and Labour supplied by West to East House.	12 16 11	...
XV. Miscellaneous Payments	1 8 0	0 10 2
	<hr/>	<hr/>
	£80 2 7	£29 7 0
<i>Deduct</i> —Value of Produce sold, and Supplies furnished to East House . . . . .	...	1 12 6
Total Cost of Maintenance of each Patient during the Year, exclusive of House Rent, Interest of Debt, Feu-Duty, and Instalment to Sinking Fund	<hr/>	<hr/>
	£80 2 7	£27 14 6

The average number of Patients, Officers, and Domestics during the year ending 31st December 1875, was	854
Do., ending 31st December 1876,	870
	<hr/>
Increase in 1876	16

The average cost of Provisions per head of the whole inmates during the year ending 31st December 1875, was	£12 3 10
Do. do. 31st December 1876	13 2 5
	<hr/>
Increase in 1876	£0 18 7

* The greater number of the West House patients are clothed by the Asylum, the cost being included in the board.

CONTRAST of INCOME and EXPENDITURE for the Year 1876 with the
previous Year.

1875.	INCOME.	1876.	Increase.	Decrease.
£ s. d.		£ s. d.	£ s. d.	£ s. d.
29,205 6 7	I. Boards	29,961 16 2	756 9 7	...
2,455 10 6	II. Extra Accounts due by Patients	2,384 6 4	...	71 4 2
	III. Produce and Sundries sold—			
403 4 6	1. Price received for Pigs	260 3 3	...	143 1 3
80 15 0	2. Do. for Wheat, Oats, etc. . . .	74 3 6	...	6 11 6
68 12 1	3. Do. for Sundries	71 8 0	2 15 11	...
32,213 8 8	Total Income for 1876 .	32,751 17 3	759 5 6	220 16 11
	Do. for 1875 .	32,213 8 8	220 16 11	
	Increase for 1876 . .	538 8 7	538 8 7	

1875.	EXPENDITURE.	1876.	Increase.	Decrease.
£ s. d.		£ s. d.	£ s. d.	£ s. d.
1,639 4 11	I. Provisions—	1,858 6 8	219 1 9	...
3,701 19 5	1. Baker	3,464 7 11	...	237 11 6
317 16 11	2. Butcher Meat . .	248 10 2	...	69 6 9
	3. Fish and Poultry			
895 15 10	4. Milk and Fresh Butter	833 10 5*	...	62 5 5
1,639 8 8	5. Groceries	1,788 12 11	149 4 3	...
374 6 0	6. Tea and Tea Duty	507 12 11	133 6 11	...
984 16 3	7. Meal, Flour, Bar- ley, Pease, &c. . .	859 3 9	...	125 12 6
394 6 3	8. Potatoes, Carrots, &c. . . .	516 6 1	121 19 10	...
672 7 9	9. Beer, Porter, and Ale	638 1 10	...	34 5 11
499 18 9	10. Wines and Spirits	549 19 6	50 0 9	...
	11. Sundries paid by House Super- intendent and Matron	151 4 8½	96 4 5½	...
1,859 17 9	II. Clothing, Bedding, Napery, etc. . . .	2,582 6 8	722 8 11	...
13,034 18 9	Forward	13,998 3 6½	1492 6 10½	529 2 1

* A sum of £67, 12s. 10d. applicable to 1876 was paid in 1875.

CONTRAST of INCOME and EXPENDITURE—*continued.*

1875.	EXPENDITURE— <i>continued.</i>	1876.	Increase.	Decrease.
£ s. d.		£ s. d.	£ s. d.	£ s. d.
13,034 18 9	Forward .	13,998 3 6½	1,492 6 10½	529 2 1
980 17 4	III. Fuel . . .	825 9 8	...	155 7 8
511 13 11	IV. Lighting . . .	410 18 6	...	100 15 5
467 14 4	V. Water and Wash- ing Materials .	412 11 7	...	55 2 9
164 14 10	VI. Medical and Sur- gical Expenses .	170 18 3	6 3 5	...
207 1 8	VII. Books & Stationery	226 10 3	19 8 7	...
187 19 11	VIII. Tobacco and Snuff	179 16 6	...	8 3 5
2,271 4 1½	IX. Sundry Furnish- ings and Repairs .	1,831 2 4½	...	440 1 9
265 7 9	X. Garden & Grounds	305 2 7	39 14 10	...
164 0 4	XI. Public and Paro- chial Burdens .	218 13 3	54 12 11	...
949 14 0	XII. Interest on Loans paid . . .	1,054 5 10	104 11 10	...
497 11 5	XIII. Feu - duties and Stipend . . .	495 5 11	...	2 5 6
31 16 3	XIV. Insurance Premiums	31 3 3	...	0 13 0
	XV. Salaries and Wages as follows :—			
	1. Salaries—			
700 0 0	Physician Super- intendent .	800 0 0	100 0 0	...
300 0 0	Three Assistant Physicians .	300 0 0	...	...
130 0 0	Chaplain . .	130 0 0	...	...
200 0 0	House Superin- tendent . .	200 0 0	...	...
100 0 0	Gardener . .	100 0 0	...	...
80 0 0	Storekeeper .	100 0 0	20 0 0	...
500 0 0	Treasurer and Clerk . . .	500 0 0	...	...
100 0 0*	Auditor . . .	50 0 0	...	50 0 0
110 0 0	Honorarium to Visiting Com- mittee . . .	110 0 0	...	...
80 0 0	Matron of East House . . .	80 0 0	...	...
70 0 0	Do. of West House . . .	70 0 0	...	...
3,165 10 1	2. Wages—	3,364 13 5	199 3 4	...
268 16 2½	XVI. Miscellaneous Pay- ments . . .	450 17 10	182 1 7½	...
2,041 0 9	XVII. Accounts paid on behalf of Patients	1,896 8 0½	...	144 12 8
27,580 1 8	Total Expenditure for 1876	28,312 0 9½	2,218 3 5	1486 4 3½
	Do. for 1875	27,580 1 8	1,486 4 3½	
	Increase for 1876 . . .	731 19 1½	731 19 1½	

* Two years' salary.

CONTRAST of TOTAL PROVISIONS, &c., supplied from Store for the
Year 1876 with the previous Year.

1875.	PROVISIONS, &c.	1876.	INCREASE.	DECREASE.
99,007 lbs.	Butcher Meat . . .	99,117 lbs.	110 lbs.	...
11,196 lbs.	Australian Meat . . .	8,966 lbs.	...	2230 lbs.
21,090 lbs.	Oxheads . . .	19,558 lbs.	...	1532 lbs.
2,297 lbs.	Ham . . .	2,001 lbs.	...	296 lbs.
1,154 doz.	Biscuits . . .	912 doz.	...	242 doz.
69,093	Loaves . . .	67,612	...	1481
34,532	Rolls . . .	37,272	2740	...
42,787 lbs.	Oatmeal . . .	43,212 lbs.	425 lbs.	...
9,624 lbs.	Flour . . .	8,748 lbs.	...	876 lbs.
16,294 lbs.	Barley . . .	16,168 lbs.	...	126 lbs.
9,796 lbs.	Pease . . .	9,642 lbs.	...	154 lbs.
2,713 lbs.	Whole Rice . . .	5,565 lbs.	2852 lbs.	...
3,938 lbs.	Tea . . .	3,904 lbs.	...	34 lbs.
2,967 lbs.	Coffee . . .	3,071 lbs.	104 lbs.	...
23,623 lbs.	Raw Sugar . . .	25,482 lbs.	1859 lbs.	...
2,408 lbs.	Loaf Sugar . . .	2,656 lbs.	248 lbs.	...
859 lbs.	Fresh Butter . . .	611 lbs.	...	248 lbs.
12,555 lbs.	Salt Butter . . .	12,799 lbs.	244 lbs.	...
11,966 gals.	Sweet Milk . . .	12,895 gals.	929 gals.	...
10,515 gals.	Skimmed Milk . . .	10,621 gals.	106 gals.	...
14,481 lbs.	Cheese . . .	15,406 lbs.	925 lbs.	...
4,497 doz.	Eggs . . .	5,667 doz.	1170 doz.	...
18,622 lbs.	Salt . . .	16,800 lbs.	...	1822 lbs.
1,044 lbs.	Currants . . .	1,067 lbs.	23 lbs.	...
1,186 lbs.	Starch . . .	1,052 lbs.	...	134 lbs.
14,334 lbs.	Soda . . .	14,160 lbs.	...	174 lbs.
23,245 lbs.	Soap . . .	23,300 lbs.	55 lbs.	...
16,151 gals.	Beer . . .	17,523 gals.	1372 gals.	...
699 bolls	Potatoes . . .	454 bolls	...	245 bolls

CONTRAST of VALUE OF STOCK on Hand in Stores at 31st December 1876
with previous Year.

1875.		1876.	Increase.	Decrease.
£ s. d.	Provisions—	£ s. d.	£ s. d.	£ s. d.
601 12 5 $\frac{1}{4}$	Groceries and Stimulants	708 13 2	107 0 8 $\frac{3}{4}$	...
335 6 4 $\frac{3}{4}$	House Furnishings . . .	530 16 1 $\frac{1}{2}$	195 9 8 $\frac{3}{4}$	...
202 8 9	Male Clothing . . .	216 13 7 $\frac{1}{4}$	14 4 10 $\frac{1}{4}$	...
156 11 0 $\frac{1}{2}$	Female do. . .	183 4 6 $\frac{3}{4}$	26 13 6 $\frac{1}{2}$	...
146 2 6 $\frac{1}{2}$	Ironmongery . . .	294 13 6	148 10 11 $\frac{1}{2}$	...
130 0 0	Pigs, as per valuation . . .	160 0 0	30 0 0	...
100 0 0	Wheat, Oats, and Hay . . .	100 0 0	...	...
1672 1 2	Total for 1876 . . .	2194 0 11 $\frac{1}{2}$	521 19 9 $\frac{1}{2}$	...
	Total for 1875 . . .	1672 1 2		
	Increase . . .	521 19 9 $\frac{1}{2}$		

STATEMENT OF WORK.

DONE AT

THE ROYAL EDINBURGH ASYLUM

During the Year ending 31st December 1876.

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

I. TAILORS.

Making 131 jackets, at 3s. 6d.,	L.22 12 6	
„ 188 vests, at 1s. 6d.,	14 2 0	
„ 199 pairs trousers, at 1s. 6d.,	14 18 6	
„ 18 flannels, at 1s.,	0 18 0	
„ 356 pairs drawers, at 1s.,	17 16 0	
„ 183 bonnets, at 5d.,	3 16 3	
„ 180 stocks at 5d.,	3 15 0	
„ 6 tweed suits, at 16s.,	4 16 0	
Bed sheets, quilts, canvass dresses, bags, &c., .	1 19 3	
Repairs,	100 0 0	
New work and repairs for private individuals, .	1 18 0	
	<hr/>	L.186 11 6

II. SHOEMAKERS.

Making 134 pairs men's boots, at 5s. 6d., . .	L.36 17 0	
„ 186 „ women's shoes, at 3s.,	27 18 0	
„ 16 „ locked boots, at 3s. 6d.,	2 16 0	
„ 152 „ braces at 4d.,	2 10 8	
„ 74 key belts, at 3d.,	0 18 6	
Repairing men and women's boots and shoes, .	76 5 6	
	<hr/>	147 5 8

III. ENGINEERS AND BLACKSMITHS.

Amount of engineer and blacksmith work for Western Department,	L.101 17 9	
Do. do. for Eastern Department,	21 11 9	
Do. do. for workshops and garden,	35 15 3	
Do. do. for miscellaneous buildings,	6 5 8	
	<hr/>	165 10 5
Carry forward,	L.499 7 7	

Brought forward, L.499 7 7

IV. UPHOLSTERERS.

Making new hair mattresses and feather pillows, straw palliases, covering chairs, canvass frames, strapping, &c.; also remaking altering, stuffing, twilting, and repairing old ditto for Western Department,							L.67	13	3
Do.	do.	for Eastern Department,				26	2	0	
Do.	do.	for Myreside,				1	6	0	
							<hr/>		
							95	1	3

V. PRINTERS.

Receipt book for wages, contracts for provisions, butcher meat, milk, &c.; inventories, attendants' pass cards, night attendants' returns, laundry lists, daily record, cards and bills for concerts, warrants, annual report, &c.,							84	10	6
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VI. PLUMBERS, GASFITTERS, AND TINSMITHS.

Plumber, gasfitter, and tinsmith work for Western Department,	L.59	10	2	
Do. do. for Eastern Department,	.	.	.	.	.	.	.	15	0	1
Do. do. for garden and miscellaneous buildings,								3	14	6	
Tin goods made for store,	.	.	.	.	.	.	.	12	10	2
									<hr/>		90 14 11

VII. CARPENTERS.

Making and fitting up tables, dining and drawing-room chairs, wardrobes, presses with shelving, &c., boxes, wash-hand stands, mantelpieces, glass doors, pailings, shelving, laying new flooring, linings, fitting up theatre, &c.; also cleaning, altering, and repairing furniture, &c., in Western Department,			L.179	15	2
Do.	do.	for workshops and garden implements,	22	4	6
Do.	do.	for Eastern Department,	37	15	0
Do.	do.	for miscellaneous buildings,	5	13	2
Amount for Coffins,			9	10	0
			<hr/>		
			254	17	10

VIII. MASONS, GLAZIERS, PLASTERERS, AND SLATERS.

Mason, glazier, plasterer, and slater work in Western Department,	.	.	.	.	.	.	L.97	8	9
Do.	do.	in Eastern Department,	.	.	.	.	16	8	6
Do.	do.	in miscellaneous buildings,	.	.	.	.	27	8	1
							<hr/>	141	5	4	
								<hr/>	L.1165	17	5

ANDREW LESLIE, *House Superintendent.*

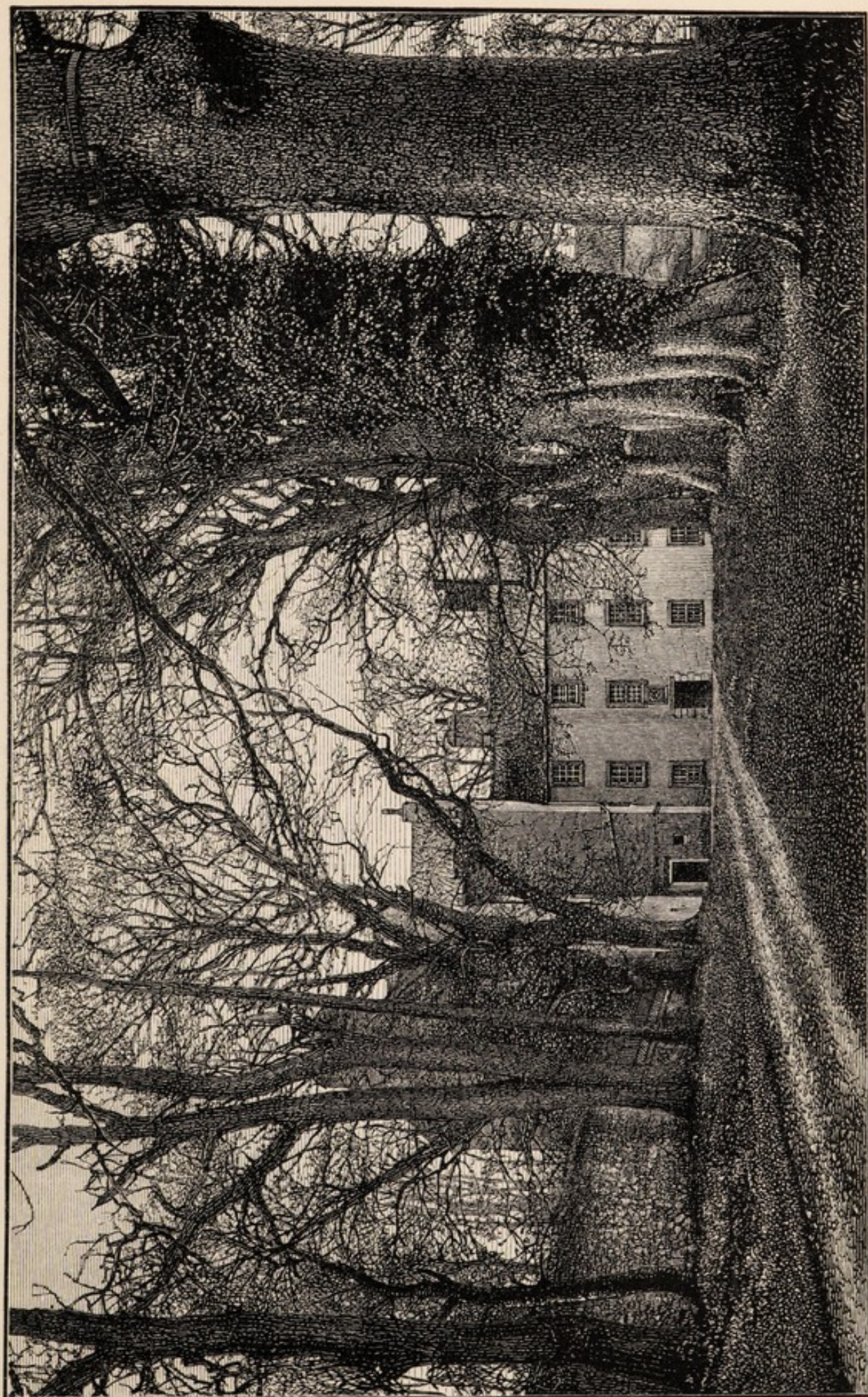
Articles Made by Females in Eastern Department.

8 Shawls.	200 Aprons.	100 Crotchet.
12 Night gowns.	12 Neckerchiefs.	100 Quilts.
18 Night caps.	50 Pocket handkerchiefs.	150 Towels.
10 Chemises.	10 Habit shirts.	200 Dusters.
6 Pairs drawers.	18 Collars.	6 Sofa covers.
6 White petticoats.	3 Pairs slippers sewed.	12 Chair do.
20 Coloured do.	4 Pairs do. embroid.	30 Table cloths.
8 Flannel do.	50 Worsted work.	18 Table napkins.
6 Flannel underdresses.	12 Knitting.	36 Window blinds.
12 Pairs worsted stockings.	18 Trimming sewed.	330 Sundries.
4 Pairs cotton do.		

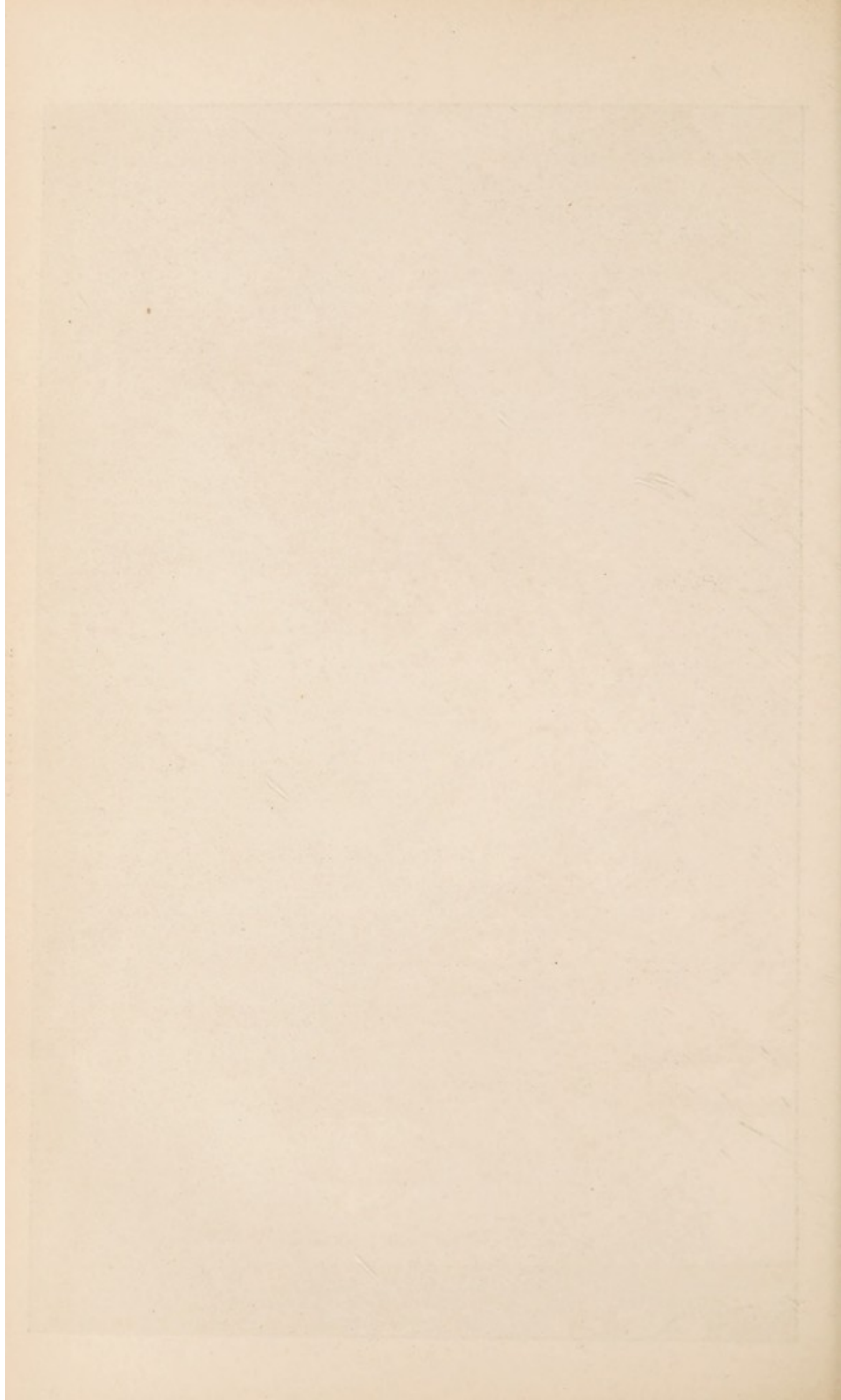
Articles Repaired by Females in Eastern Department.

60 Gowns.	100 Aprons.	73 Quilts.
5 Shawls.	18 Neckerchiefs.	58 Pairs blankets.
100 Night gowns.	12 Pocket handkerchiefs.	107 Pillow slips.
24 Night caps.	50 Slip bodices.	98 Towels.
105 Chemises.	32 Pairs stays.	23 Sofa covers.
58 Pairs drawers.	8 Habit shirts.	19 Chair do.
24 White petticoats.	55 Collars.	40 Table cloths.
50 Coloured do.	24 Muslin sleeves.	53 Toilet covers.
35 Flannel do.	59 Linen do.	65 Table napkins.
200 Flannel underdresses.	8 Knitting.	32 Window blinds.
2090 Pairs worsted stockings	25 Crotchet.	730 Sundries.
98 Pairs cotton do.	276 Shirts.	

A. M. SHEARER, *Matron.*



CRAIG HOUSE.



PLAN OF GROUNDS AND ESTATE BELONGING TO THE
 ROYAL EDINBURGH ASYLUM FOR THE INSANE
 shewing the Old Estate & the Craig House Estate, newly purchased.

