

**Forty-first annual report of the directors of the Glasgow Royal Asylum for Lunatics, submitted, in terms of their charter, to general meeting of contributors, 13th January, 1855.**

**Contributors**

Glasgow Royal Asylum for Lunatics.  
Mackintosh, Alexander.

**Publication/Creation**

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(11)

FORTY-FIRST  
ANNUAL REPORT  
OF  
THE DIRECTORS  
OF THE  
GLASGOW ROYAL ASYLUM

For Lunatics,

SUBMITTED, IN TERMS OF THEIR CHARTER,  
TO  
GENERAL MEETING OF CONTRIBUTORS,

13TH JANUARY, 1855.

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GLASGOW:  
PRINTED BY JAMES HEDDERWICK & SON,  
Printers to the Queen.  
1855.

FORTY-FIRST

ANNUAL REPORT

THE DIRECTORS

GLASGOW ROYAL ASYLUM

FOR 1881



REPORT OF THE

GENERAL MEETING OF DIRECTORS

1881

GLASGOW

PRINTED BY JAMES BRADBURY & CO.

Printed in Glasgow

1881

# LIST OF DIRECTORS, &c.

FOR 1855.

The LORD PROVOST, President, *ex-officio*.

Mr. David Mackinlay,	}	from Town Council.
Mr. Andrew Galbraith,		
The Dean of Guild,	}	from Merchants' House.
Mr. William Bankier,		
Mr. Archibald M. Boyd,	}	from Trades' House.
Mr. John Orr,		
Dr. A. D. Anderson,	}	from Physicians and Surgeons.
Dr. Charles Ritchie,		
Rev. Dr. Runciman,	}	from General Session.
Mr. George Young,		
Sir James Anderson, M. P.	}	from General Body of Contributors.
Mr. William M'Lean,		
Mr. Robert Findlay,		
Mr. David Hope,		
Mr. John Smith,		
Mr. John Brown, Jun.		
Dr. John M. Pagan,		
Mr. Robert Aitken,	}	<i>ex-officiis</i> .
The Chief Magistrate of Paisley,		
Dr. Allen Thomson, Professor of Anatomy,		
Dr. John M'Farlane, Professor of Medicine,		
Dr. Alexander Mackintosh, Physician to the Asylum,		

## Weekly Committee.

Mr. Mackinlay,		Mr. Bankier,		Mr. Smith,
Mr. M'Lean,		Mr. Findlay,		Mr. Brown.

## Committee on Accounts.

Mr. Hope,		Mr. Smith,		Mr. Aitken.
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## Visitors.

The Lord Provost,		Dr. Ritchie,
The Dean of Guild,		Rev. Dr. Runciman,
Sir James Anderson, M. P.		Mr. Young,
Mr. Galbraith,		Mr. Hope,
Mr. Boyd,		Dr. Pagan,
Mr. Orr,		Mr. Aitken.
Dr. Anderson,		

OFFICERS OF THE ASYLUM.

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**RESIDENT.**

Physician Superintendent,  
ALEXANDER MACKINTOSH, M. D.

Medical Assistants,  
ROBERT KIRKWOOD, M. D. AND JOHN FERGUSON, M. D.

Superintendent of Ladies,  
MRS. MAPLESON.

Steward,  
MR. JOHN ARTHUR.

Master of Works,  
MR. DAVID WATSON.

Gardener and Farm - Overseer,  
MR. JAMES DUTHIE.

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**NON-RESIDENT.**

Surgeon,  
JOHN G. FLEMING, M. D.

Treasurer & Secretary,  
DONALD CUTHBERTSON, LL. B.

Chaplain,  
REV. J. R. RUSSELL.

FORTY-FIRST ANNUAL REPORT  
 OF  
 THE DIRECTORS  
 OF THE  
 Glasgow Royal Asylum for Lunatics.

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THE DIRECTORS, in this their Forty-first Report, take leave to submit to the Subscribers and the Public, the following *resumé* of their proceedings for the year 1854.

	Males.	Females.	Total.
According to the records, there remained			
in the Asylum on the 1st January 1854,	248	224	472
And there were admitted since,.....	123	117	240
	—	—	—
Making a total of.....	371	341	712
	==	==	==
Of these numbers, there were dismissed			
cured,.....	60	56	116
Dismissed relieved,.....	56	54	110
Died,.....	32	30	62
	—	—	—
Total,.....	148	140	288
Remaining on 31st December 1854,.....	223	201	424
	—	—	—
Total treated,.....	371	341	712
	==	==	==
Average daily number,.....	226	218	444
	==	==	==

In the Report for the previous year, the Directors stated that their attention had been earnestly directed to the precautionary measures of a sanitary character, which ought to be adopted in anticipation of an attack of cholera, and detailed some of the arrangements which they had succeeded in effecting.

With the commencement of the year now ended, came urgent demands for increased exertion. The mysterious plague was spreading rapidly and widely in almost every direction, and had appeared in the immediate vicinity of the Asylum. The efforts of the Directors, therefore, which had never been relaxed, were now redoubled. Regardless of expense, everything was done which experience and the most anxious forethought could suggest to meet the threatened danger; and to these efforts, under the blessing of a kind Providence, they attribute the almost perfect immunity enjoyed from this terrible pestilence.

At the beginning of the year, the East House, the division containing the great majority of the inmates, or those at the lower rates of board, was so unhealthily full for some time, that, with a few exceptions, the Directors were compelled for a period to refuse every Patient presented to them. An additional Physician, who had been appointed solely in consequence of the epidemic, began his duties in the East House in the beginning of January. This made three Physicians to about 346 Patients, or one Medical Officer to every 115, or thereabouts. Since the reduction of the medical staff, the proportion is one to 148 nearly. Efforts were made to isolate the Institution as much as possible from external influences; all visiting by strangers and friends was discouraged; and callers at this division were generally excluded.

The dietary of the Patients also was revised, and such changes were made, as circumstances and the occasion seemed to require. The use of pea-soup was discontinued, and boiled rice, with milk, substituted. On five days of the week, animal food formed part of the ordinary dinner. Bread and boiled rice were given in lieu of potatoes; and each Patient upon ordinary diet had an extra allowance of eight ounces of the finest wheaten bread, baked as usual on the premises, from flour purchased by the Directors themselves; and this dietary was continued for a long period. The worn-out, feeble, and invalid Patients are always liberally supplied with all the extras requisite for each individual case, such as animal and farinaceous food of different kinds, prepared in various ways with alcoholic agents; and on this occasion these were given with increased liberality for several months before and after the appearance of cholera, and to a greater number of Patients—to very many, indeed, who, under ordinary circumstances, would not have been regarded as standing in need of such special dietary.

While these precautionary arrangements were made with respect to the matter of diet, the clothing and bedding needful for prevention were by no means neglected; for every Patient was furnished with large comfortable flannels and other warm clothing, and additional blankets were issued to the various dormitories. With regard to details of this sort, nothing is ever taken for granted, as the Physician Superintendent and his Assistants take care to ascertain constantly, by personal inspection of the Patients and their beds, that these articles are actually upon them. Much care and attention were also bestowed in maintaining an equable temperature, both by night and by day, in the different galleries, dormitories, and



other apartments, by means of fires and heated air, and in securing cleanliness, with thorough ventilation. Drs. Kirkwood and Ferguson, the two able and indefatigable Medical Assistants in the East House, whose conduct deserves high commendation, acting under the orders of the Physician Superintendent, made a point, in addition to all their other visitations, of seeing the whole of it periodically, beginning at four o'clock in the morning, in company with Miss Henderson, who also exerted herself greatly in the female department, and with the principal Male Attendant in the other department; because at that early hour it was supposed there was the greatest likelihood of the disease exhibiting itself, the atmosphere being then in its most impure and vitiated state; so, with thermometers in hand, these Medical Officers noted the temperature and the state of ventilation as they passed along, reporting the facts afterwards in writing for the information of the Directors. The mean temperature thus obtained was  $60\frac{1}{3}^{\circ}$  F. on the male side, and  $60\ 1-23^{\circ}$  on the female side of this house. Chlorinated lime was also extensively used in the galleries, water-closets, and urinaries, and served admirably as a deodorising agent.

Such remedies as experience had proved to be the most suitable in the diarrhœa, which is so generally prevalent where cholera is epidemic, were distributed, with directions for use, throughout the various galleries, so that not a moment might be lost in the case of any one being attacked; and the Attendants were particularly instructed to watch most sedulously the Patients under their care, and, so soon as the slightest bowel affection was observed, to administer a dose of medicine immediately, and then to report to the Medical Officers, one of whom was and is constantly present in case of his services being required.

Notwithstanding, however, all the precautions that were employed, diarrhœa prevailed, but fortunately, in the great majority of cases, it was of a mild and tractable type; and it was not until the 9th of March that the pestilence made its appearance in this Institution. The first case was that of a female pauper, about forty-five years of age, labouring under dementia, who was immediately separated from the others, and removed to the suite of apartments previously set apart for a Cholera Hospital, and adequately furnished for the purpose. Everything was done to arrest the progress of the disease, but all the care and skill that were employed proved of no avail, and, in about fourteen hours from the time of seizure, she expired. The clothing and bedding of the Patient were then placed under water without loss of time, and kept carefully separated until thoroughly cleansed.

The next case, that of a male Patient, occurred on the 26th of the same month of March, seventeen days after the preceding, and the circumstances were such as to preclude the possibility of communication by contagion. Only two other cases, the Directors are happy to say, occurred, although one of these, the fourth, might with greater propriety be placed under the head of "Choleraic Diarrhœa;" and the Patient in each case was feeble in body, and very weak in mind,—in short, destitute of sufficient stamina, or vital energy, to resist the effects of the attack. These Patients were stricken down at once, and were hopeless cases from the beginning of the seizure to the end.

It may be mentioned, that when cholera formerly appeared, the West House, or that appropriated to ladies and gentlemen, wholly escaped; the amount of diarrhœa

also being there, during this epidemic, comparatively trifling.

Such, then, was the result of this visitation of cholera to the Institution, and the Directors presume to think that the smallness of the number of cases, and the mildness of the attacks of diarrhœa, were owing, in some measure, to the anxiety, labour, and expense which were previously bestowed in preparing for the approach of this fearful scourge of humanity. Everything was done by the Directors to ward off the impending blow, or to rob it of its force, if fall it must, and they rejoice to find that their efforts were not made in vain.

While these are the facts in connection with the visitation of cholera, it ought not to be forgotten that in the district around the Asylum the mortality from the epidemic was very great.

The Directors cannot leave this subject without stating their conviction that all the Officers and Servants did their utmost for the Patients, and performed their duty, not merely without the semblance of fear, but with the most devoted fidelity. It is at the same time gratifying to report, that none of the Servants or Officers were attacked by the disease, although several of them suffered from the prevailing diarrhœa.

While thus recording the good conduct of the Servants, the Directors think it proper to notice generally the duties and emoluments of the Attendants, premising that, as is well known, the price of labour is high in Glasgow. The male Attendants in the East House are in the proportion of one to every seventeen Patients, and the female Attendants are in the proportion of one to nearly every seventeen.

The men have from £28 to £42 per annum each,

besides bed, board, and washing; and the women from £12 to £18, with the same additions. They are generally young, strong, good-looking, and well fitted for their trying duties. The Attendants in the West House are equally respectable, and well qualified for their work, having about the same wages as those in the East House. The proportion of Attendants to Patients in the former, however, cannot well be given, because several ladies and gentlemen have attendants exclusively for themselves.

In resuming the subject from which the Directors have for a moment diverged to conclude it, they would now, at the end of the year, beg leave to say, that the most delightful feature they have to notice is the great healthiness of the entire establishment—the East House as well as the West; both of which just now, and for several months past, have been in the most satisfactory condition. The very aged, including one poor man of 88, the infirm, the paralytic, and otherwise diseased Patients who had been long ailing with local and other affections, have recovered wonderfully, and are to be seen sitting at the fireside in large easy chairs, as comfortable as it is possible for them to be made. At least two of these were snatched from the very jaws of death.

The Directors will now notice briefly some of the other matters which have engaged their attention during the year. And first, as to accommodation: while, as already stated, the East House was inconveniently crowded, the male division of the West House was so full, that for some time gentlemen of the higher classes could not be received into it; and, with the exception of a small portion of the female division of the West House, it has also been entirely filled.

For several years past the Asylum has been very inadequately supplied with that essential of life—water; and in such an Institution as this, where an unlimited supply is so necessary both for the health and improvement of the inmates, in fact, as one of the principal means of cure, the Directors need scarcely point to the great hardships and inconvenience which must be and is felt from the want of it. The Glasgow Water Company undertook to supply the Institution, but this incorporation, somehow or other, has, over and over again, times without number, failed to implement their agreement; indeed, had the Directors of the Asylum not been able to collect the rain water, which fell upon the roof of the West House in wet weather, the Institution would have frequently been in a sorry plight; as it was, the officials had often to cart a supply in barrels from the rivulet near the Institution, and from the river Kelvin, behind the Botanic Garden, which is more than a mile from the Asylum, at considerable expense. It was feared that disease might arise, and be aggravated by this imperfect and expensive supply; but the Directors did their utmost to remedy such a state of things, by direct as well as by indirect means, and in this they were ably seconded by Mr. Smith, one of their number, who is also a Director of the Water Company, and latterly the Asylum has been somewhat better off with regard to water.

This serious deficiency caused the Directors to take into their consideration the necessity of saving the rain-water which falls on the roof of the East House, by means of a filtering tank, to be erected in the court situated between the male division and the wash-houses. The want of the necessary pecuniary means had alone prevented them from having this work executed long before it was done;

but, as the matter had become exceedingly urgent—more so than ever—in short, a question almost of life and death, they determined to proceed with it, after consulting with Mr. Mackain, Engineer; and having before them plans and specifications from Mr. Watson, their own able Master of Works, the reservoir, or tank, was finished at the end of November, at a cost of £312, and is capable of containing not less than thirty-one thousand gallons of water. It has been in constant use ever since, and has already done good service to the House; but the Directors cannot, even with this important adjunct, depend upon the Water Company for what is still absolutely required. The supply in the tank is, as it were, only a “drop in the bucket,” compared to the requirements of this large Institution, and when the Glasgow Water Company fails—as it very frequently does—for two, or three, or more days at a time, to send any supply, and no rain falls, the carts and barrels have again to be brought into requisition, and the servants are obliged to fetch it from a distance. But, before concluding this subject, the Directors must add that they see from the Parliamentary notices, with peculiar pleasure, that there is every probability of Glasgow being soon put upon the same footing, in regard to water, as Dundee and other large towns, where the public has taken this matter into its own hands, and where now, instead of great scarcity as before, there is not only an abundant but an overflowing supply of the best water.

The Directors, at their visitations to the Institution, and looking to its requirements, also authorised other important works to be executed. The depôts for the coal, straw, &c. being found too small for the purpose, they ordered plans and specifications to be prepared, in order to carry out the necessary improvements; and, being satis-

fied with these, the whole were finished under the eye of the Master of Works, and in a tradesman-like manner. These plans, it may be explained, also included a Dead-house, which has been erected upon the most convenient spot for the purpose. The total cost of the whole was £171.

In consequence of the faulty construction of a smoke-flue, proceeding from one of the boilers in the West House, and a likelihood of fire being the result, the whole was taken down, and properly and substantially rebuilt at a cost of £59. The Directors also ordered expensive and important alterations upon the interior of the house itself, so that a greater number of Patients of a particular class might be better accommodated, and each have a separate sleeping-room. Easy chairs, for invalids and others, sofas, presses, &c. &c. were also ordered to be made by the Asylum joiners, and are now in constant use. They also caused all the window-frames of the Institution to be painted; and several of the rooms and galleries in the West House were repapered and repainted, and the carpeting renewed. It need scarcely be remarked that, from the window-frames having been repainted, a much more cheerful aspect is given to the Asylum, and that the paint keeps the iron and wood-work in a much better state of preservation. In the course of the year, the East House was all lime-washed, and part of it twice over, at much expense; but the Directors are convinced, that until the walls are properly boarded up, to prevent the paint from being rubbed off by the Patients coming in contact with it, the interior will never look well. In the meantime, nothing but the want of funds, and the heavy debt under which the Institution labours, prevents this, and many other most important alterations and additions, from being effected.

With regard to the financial affairs of the year, while the Directors gratefully acknowledge the receipt of a legacy of £300, free of duty, bequeathed by the late Miss Pollok of Largs, they have to state that this has been the only legacy received during the year, and that the subscriptions have been but two in number, of a guinea each. In these circumstances, and taking into view the great extent of necessary and highly beneficial improvements, alluded to in other parts of this Report as having been made on the buildings and grounds, as well as from the interest charged on their debts to the Banks having, during the past year, in consequence of the state of the money market, exceeded the charge for the year preceding by above £200; considering also the advance which has taken place in the price of provisions, and in the wages of labour, it will not seem wonderful that the Directors have found themselves unable to reduce any farther the principal sum of their debts to the Banks. The interest, however, amounting to £1,906 : 10s. has been duly paid; and the Directors hope that their successors may have it in their power, in the course of another year, to announce the receipt of the legacy of £2,000, referred to in last year's Report, as having been left to the Asylum by the late Mr. Ewing of Strathleven, the payment of which would enable the Directors to make a most desirable reduction of the Debt which now presses so heavily on the Institution.

The Directors will next proceed to notice the extraordinary proposition of the Board of Ordnance, to destroy the Institution, by erecting close to the south-east boundary wall a large Barracks for the infantry, cavalry, and artillery of the district—certainly the most expensive and inconvenient site for Her Majesty's troops that could well



have been selected. The Committee, on being apprised of this circumstance, directed their Secretary to put himself into communication with the Members of Parliament representing the City of Glasgow and the County of Lanark, also with the Member for the Stirling district of burghs, and the Law-Agent of the Directors, Mr. John Kerr. The Members of Parliament promptly waited upon the officials in London; a memorial was afterwards, by their advice, sent to the Board of Ordnance, and a copy of it was also transmitted to Her Majesty's Commissioners in Lunacy, who supported the Directors in their opposition to this project; and it is now to be presumed that the Government, or rather the four gentlemen composing the Board of Ordnance representing it, will go elsewhere for accommodation—say to the eastern part of the town, where the public and other great works are situated, where a barracks *may* be required, and where, it ought to be recollected, ground can be bought perhaps at a tithe of the price which it would cost at the west end, where little else is to be seen but gentlemen's villas and pleasure-grounds in every direction.

The thanks of the Directors are therefore justly due to Messrs. Hastie and Macgregor, as well as to Mr. Lockhart and Sir James Anderson, the gentlemen alluded to, for their able and efficient attention to this business.

The Directors will now notice the land question, or in other words the farming and gardening operations for the year, under the excellent management of Mr. Duthie, the gardener. One acre of waste ground was taken in at the beginning of the year from the old quarry, which was sown with five bushels of oats, and it yielded nine bolls. Another acre has just been taken in from the same place, and thirty-nine chains of drains were cut into it before

being ploughed, so that it is now ready for the seed. Every part of the quarry has at length been filled up, and principally by the Patients, to whom it gave most excellent occupation, leaving no waste ground now within the boundaries of the Institution. The crops of oats, barley, beans, hay, and turnips have given a very fair return, viz. Oats, about 139 bolls to 14 sown; barley, 15 bolls to  $1\frac{2}{3}$  sown; beans, 30 bolls to  $2\frac{1}{2}$  sown; turnips,  $2\frac{3}{4}$  acres, yellow and Swedish together, produced 54 tons; hay, from 9 acres produced 1700 stones. Forty-seven bolls of the oats have already been milled into meal of a superior quality, and used by the Patients. A good deal of money has been spent on the grounds, but the labouring of them has been of benefit to many of the Patients themselves, both with respect to their health and recovery; and no effort has been spared to make these grounds at once useful and productive. The Farm is at present well stocked with implements, and, with the exception of a heavy roller, which is much needed, it wants for nothing of this kind. The Garden, the carrot crop excepted, has been very productive, more so than ever, and there is still a sufficiency in it for all the demands of the House, till the new crop comes in. It may also be mentioned that there was fruit this year for the first time for the East House as well as the West House Patients.

The application of the Directors to the Road Trustees for a stone crossing, to be made at the expense of the latter, where the public Omnibus stops, from the north to the south side of the Great Western Road, was successful, and it is really a boon to those requiring to use it. They would now thank the gentlemen of the Trust for their prompt and kind attention to this matter.

The Directors think it proper to state, that the arrange-

ments they entered into this year with the City Parish for the supply of clothing to the Glasgow Pauper Patients, has proved to be very beneficial to these unfortunate persons.

The Sheriffs, as usual, visited the Asylum frequently in the course of the year, and expressed themselves satisfied with the appearance of the Patients and the state of the House. They were accompanied, as the Statute directs, by two Members of the Faculty of Physicians and Surgeons of Glasgow.

Before closing this Report, the Directors avail themselves, with much pleasure, of the opportunity it affords them for again expressing to the Contributors and the Public the high opinion which the Directors continue to entertain of the character and talents of the Physician Superintendent. The care uniformly bestowed by Dr. Mackintosh on the health and comfort of the Patients, which has been especially conspicuous during the past year; the vigilance he has exercised over all who are employed under him in the service of the Institution; and his unwearied attention to every department of its business, justly entitle him to the highest approbation of the Directors.

Lastly, the Directors would present their best thanks to the gentlemen composing the Weekly Committee for their valuable services during the year. They would likewise thank the thirteen House Visitors for their continued attention to the particular duty which devolved upon them; as well as the other Medical and Surgical Officers, the Treasurer and Secretary, the Chaplain, the Superintendent of Ladies, and other Officers, for their services during the same period.

ACCOUNT  
OF THE  
*Treasurer's Intromissions,*  
FOR THE YEAR 1854.

**CHARGE.**

LEGACY AND SUBSCRIPTIONS, viz.

Executors of Miss Susan Pollok, Largs, } Legacy and Interest, free of duty,.... }	£301	12	10
Frederick A. Eck, Hollybush House, Ayr,	£1	1	0
Henry Leck, accountant, Glasgow,.....	1	1	0
			£303 14 10

BOARD OF PATIENTS, viz.

Recovered of Board for 1854,.....	£13,773	15	1
Do. of Arrears, per last Account,...	409	13	5
			14,183 8 6
Advances for Patients in 1853, recovered in 1854,.....		414	18 8
Proceeds of Farm Produce, &c. sold,.....		434	0 5
National Bank, Interest on Deposit Account,.....		14	0 10
Union Bank, Do. Do. ....		16	3 4
			£15,366 6 7

**DISCHARGE.**

Balance due to the Treasurer, per last year's Account,.....	£142	14	11
HOUSE EXPENSE, viz.			
Butcher Meat,.....	£2,234	13	2
Meal, Barley, Pease, Salt, &c. ....	646	12	2
Flour, and Baker's Wages,.....	896	1	4
Groceries,.....	583	19	11
Milk,.....	334	11	4
			£4,695 17 11
<i>Carried forward,....</i>	<i>£4,695</i>	<i>17</i>	<i>11</i>
			£142 14 11

	<i>Brought forward</i> , . . . . .	£4,695 17 11	£142 14 11
Butter and Cheese, . . . . .		375 7 7	
Potatoes, . . . . .		127 16 4	
Eggs, Fish, and Poultry, . . . . .		237 2 8	
Medicines, . . . . .		108 17 8	
Coal and Coke, . . . . .		486 14 9	
Gas-light and Candles, . . . . .		125 10 5	
Soap and Soda, . . . . .		143 10 6	
Water Rent, . . . . .		203 16 3	
Wine, Spirits, Porter, Ale, and Beer, . . . . .		465 0 4	
Fruit and Vegetables, . . . . .		59 10 2	
		<hr/>	7,029 4 7
<b>SALARIES, viz.</b>			
Physician, . . . . .	£500 0 0		
Deduct, Fees received, . . . . .	291 18 0		
	<hr/>	£208 2 0	
Treasurer and Secretary, . . . . .		300 0 0	
Medical Assistant, . . . . .		70 15 0	
Do. . . . .		75 0 0	
Do. . . . .		72 3 3	
Chaplain, . . . . .		60 0 0	
Ladies' Superintendent, . . . . .		100 0 0	
Steward, . . . . .		110 0 0	
Surgeon, . . . . .		32 11 0	
		<hr/>	1,028 11 3
Wages to Attendants on Patients, and other Servants, . . . . .			1,443 14 4
<b>REPAIRS AND IMPROVEMENTS, viz.</b>			
Tradesmen's Wages, . . . . .	£462 14 7		
Timber, . . . . .		126 17 11	
Stones, . . . . .		55 0 6	
Painting, . . . . .		31 4 7	
Ironmongery, . . . . .		31 2 3	
Miscellaneous, . . . . .		289 0 1	
		<hr/>	995 19 11
Furniture, . . . . .			839 7 9
Outlays for Patients during Quarter ending 31st December 1854, yet to be recovered, . . . . .			454 11 4
Expended on Garden, . . . . .			157 7 3
Do. on Farm, . . . . .			216 11 1
Outlay for additional Tank, . . . . .			235 19 8
Do. for Straw House, Coal Depôt, &c. . . . .			170 0 0
<b>MISCELLANEOUS CHARGES, viz.</b>			
Assessed Taxes, Income-Tax, Poor-Rates, &c. . . . .	£273 15 0		
Books, Periodicals, and Stationery, . . . . .	80 11 2		
		<hr/>	
	<i>Carried forward</i> , . . . . .	£354 6 2	£12,714 2 1

<i>Brought forward</i> ,.....		£354 6 2	£12,714 2 1
Printing and Advertising,.....		55 6 8	
Postages and Incidents,.....		48 4 2	
Insurance,.....		39 3 8	
Tolls, Carriage Hires, and Stabling,.....		33 18 10	
Rent of Rooms for Directors' Meetings in } town,..... }		7 12 6	
Subscriptions to Reading Club, and Stir- } ling's Library,..... }		7 7 0	
Delivery of Letters and Parcels at Gartnavel,		5 0 0	
For taking charge of Parcels in town, .....		9 0 0	
Repairing Carriage and Saddlery,.....		59 3 4	
Law Expense,.....		31 7 9	
Price of a Horse,.....	£50 0 0		
Deduct, price of one sold,.....	23 0 0		
		<u>27 0 0</u>	
Miscellaneous,.....		29 16 4	
			<u>707 6 5</u>
Interest on Credit Account with Union Bank,.....			753 14 2
Do. Do. with National Bank,.....			1,183 0 0
			<u>£15,358 2 8</u>
Amount of CHARGE,.....		£15,366 6 7	
Do. of DISCHARGE,.....		15,358 2 8	
			<u>£8 3 11</u>

A B S T R A C T  
OF  
The Property and Debts of the Asylum,  
AT 30TH DECEMBER 1854.

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**PROPERTY.**

Balance in Treasurer's hands, per preceding Account,.....	£8 3 11
BOARD of PATIENTS, yet to be recovered, viz.	
Arrears, per last year's Report, .....	£732 18 9
Deduct, recovered in 1854,.....	409 13 5
	£323 5 4
Arrears of Board for 1854,.....	652 10 10
	975 16 2
Advances for Patients, yet to be recovered,.....	454 11 4
Price of Ground,.....	10,185 0 0
Expenditure on Buildings and Grounds,.....	61,153 5 0
Original Cost of New Furniture,.....	5,018 2 2
	£77,794 18 7

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**DEBTS.**

National Bank, on Credit Account,.....	£22,500 0 0
Union Bank,           Do.           .....	15,000 0 0
Due on open Account, .....	1,464 7 1
	£38,964 7 1
 Amount of PROPERTY, as above,.....	 £77,794 18 7
Do. of DEBTS,.....	38,964 7 1
	Balance in favour of the Institution,..... £38,830 11 6

## REPORT

BY

THE PHYSICIAN SUPERINTENDENT,

TO THE DIRECTORS,

FOR 1854.

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THE year which has now closed was beclouded with many cares, and with much anxiety. Cholera was extensively prevalent, and fears were entertained lest the Asylum should be invaded, and its inmates suffer from that disease. This subject for a time constantly occupied our thoughts, and our energies were incessantly and perseveringly devoted to the effecting of such arrangements and preparations, as were believed to be useful and necessary in anticipation of an attack of this alarming and fatal epidemic. These, however, are so fully detailed in the preceding Report of the Directors, that I shall not recapitulate them here.

In the earlier part of the year—in order to avoid the evils of over-crowding, and in consequence of the prevalence of cholera—we were obliged to refuse almost all applications for admission into the East House, and, owing to this circumstance, there have been fewer Patients admitted than during the previous year. Another circumstance which has probably also tended to produce the same result, is the practice which prevails now more



than formerly, among Parochial Boards, of attaching lunatic wards to their respective Poor-houses, for the purpose of maintaining their own insane.\*

ADMISSIONS.—The total number of Patients admitted amounts to 240; and, as has generally been the case in this Asylum, the number of Males exceeds that of the Females, there being 123 of the former, and 117 of the latter. The relative proportion of Male to Female Patients, calculated from the total number of admissions (6,827) since the opening of the Asylum, is as 119.3 of the former, to 100 of the latter—or very nearly as 6 to 5. This preponderance of Male Patients has been so very generally observed in our past history, and is so decided, that it must depend on other than mere accidental causes.

Of those admitted, 107 were affected with Mania, 83 with Monomania, including Melancholia, and 50 suffered from Dementia. I have already, in my former Reports, defined these terms, and stated the sense in which I employ them.

In the class of cases constituting the first group, recoveries, for various reasons, most frequently take place. In this form of disease, the attack is, generally speaking, to some extent more or less acute, and of a paroxysmal character. It is also more amenable to treatment than the other forms; and it is in cases belonging to this group, that remedial aid must be and is soonest sought, the general features of the disease being usually such as to compel the relatives or guardians of Patients so affected, to place them with as little delay as possible under proper management in an Asylum. Many recoveries also take place in

\* The Sheriffs of the County of Lanark, we understand, do not permit Inspectors or Parochial Boards to receive into their keeping, or to detain any Lunatics, but those belonging to the Parish in which such Poorhouse is situated.

those cases forming the second group. In this class, the disease is, for the most part, gradual in its approach, slow and insidious in its progress, and in very many instances is associated either with visceral complications, or a generally enfeebled state of the nervous system. By the adoption of those remedial measures specially indicated in each individual case, and by engaging the attention, and occupying the mind in some one or other of the various modes which the facilities of an Asylum provide, many of these unhappy creatures may be and are restored to health of body and soundness of mind.

In the third group recovery occurs less frequently. The mental infirmity characteristic of this class of cases may be the result of original mal-development, or the consequence of cerebral disease or injury of the brain; it is often associated with such diseases as epilepsy and paralysis, and is frequently coincident with the advance of old age. The other forms of insanity, too, especially when of long continued duration, are apt to and do lapse into this form, there being in most such cases a tendency to degenerate, or to pass from the higher types to forms of a lower grade. But, if as is the case, only a small proportion of those affected with this form of insanity recover, there is perhaps not one, whose condition may not in some respects be ameliorated and improved; a consideration of no mean importance to every benevolent and reflecting mind. Among the poor of the City of Glasgow, Dementia is by no means of rare occurrence, and seems to be induced by the privations and miseries to which they are exposed. At all events, such cases usually recover under a course of proper treatment, including the use of a generous and liberal dietary, with thorough attention to clothing, exercise, &c.

One of the saddest and most painful features of insanity, is the strong and frequently developed tendency to suicide. Of those admitted during the year, 36 or 1 in 6.6 had either threatened or attempted to commit suicide. This number was divided equally between the two sexes. Seven made the attempt to destroy themselves with cutting instruments; five attempted drowning, and two strangulation. One swallowed several ounces of laudanum; another put about a pound weight of gunpowder in an open vessel, and placing his head over it, applied an ignited match. In several instances repeated attempts were made by the same individuals, and by different modes. Some acted under the influence of terror or despair; others in obedience to fancied spiritual revelations or divine commands. One young woman was seized as she was rushing into the river Clyde—she was an “unfortunate,” and for some time previously had been haunted by remorse and sorrow; these preyed upon her mind; she drank to excess; and ultimately, underneath the shock occasioned by the sudden death of a friend, her reason gave way; spectral illusions flitted before her, and she heard illusory sounds. She had had, she affirmed, an interview with the Saviour, who had spoken kindly to her, and had made an engagement to meet her at midnight, and take her with him to heaven. Before, however, she could enter there, she must first—according to the voice—quit this life, and in order that she might be ready to meet him, go and drown herself. She was hastily proceeding to act in accordance with this advice when she was rescued, and she greatly regretted having been prevented from accomplishing her design, as she was thereby precluded from enjoying the happiness she had anticipated; but would not again make a similar attempt, the promise having only availed for the night on which it was made.

In several instances, not included in the preceding, a suicidal impulse existed, but was successfully resisted. One Patient—a young man of education superior to his station in life—was, as he expressed it, “tempted” repeatedly to destroy himself, and was only restrained from doing so by considerations of a domestic nature. Another Patient, a female who had been repeatedly insane, expressed herself similarly, and was afraid to be left alone, or to go into the second storey, lest she should attempt to throw herself out at the window.

Not unfrequently a homicidal propensity is associated with the suicidal impulse. In five of the admissions this was the case. Friends are oftenest the objects of this propensity, either from their being fancied enemies or tormentors, or from a desire on the part of the lunatic, to free them from some imaginary awful and impending danger.

A question has been raised as to the safety and propriety of admitting Patients usually denominated “criminal lunatics” into a public Lunatic Asylum, and various objections have been urged condemnatory of the practice. It is therefore likely, and the rather that this subject has been taken up by competent authority, that State Hospitals in England and Scotland will be provided by the Government, similar to the one in Ireland, exclusively for this class of Patients. Three Patients under this head were admitted; one of them, a male, got up during the night, and seizing a knife ran out of the house with it, and stabbed the first person whom he chanced to meet upon the road. Another Patient, a female, while under the care of her friends, contrived to get possession of a knife, and with it stabbed her husband. The act in both instances was the same, only the circum-

stances differed. The one was under no surveillance and stabbed a stranger, the law interfered, the man was apprehended, proved to be insane, and committed—a criminal lunatic. The other Patient, though watched and tended, stabbed her husband, the relatives kept the matter quiet, and she was committed to the Asylum as an ordinary Patient.

The designation “criminal lunatic” for such cases ought to be discarded; it is a misnomer, and its employment tends unfortunately to degrade the unhappy being to whom it may chance to be applied. Some such designation, however, might answer convicts, and be applied to those who had become insane after having been convicted of crime; and this class should certainly be kept by themselves. Speaking philosophically, no lunatic can be a criminal if he committed the deed when insane. Either the individual, at the time when the act—whatever it may have been—was committed, was sane or he was insane; in the one case he is a criminal and no lunatic, in the other he is a lunatic and no criminal. He cannot be both, any more than he can be both sane and insane at the same moment; and it is as unjust that the sense of degradation, associated with criminality, should be attached to any one whose acts are the results of an insane mind, as it would be unjust to punish such an one for his deeds. The second of the admissions of this class is not uninteresting. In a fit of jealousy the Patient committed an assault of a serious nature, and was sentenced to an imprisonment of twelve months. It does not appear, that at the time of her trial any doubts were entertained of her sanity, though soon after unmistakable insanity developed itself. Although quite a young woman—under twenty-five years of age—she had been committed to

prison forty-two times on various charges; and though no positive or certain information of the fact can be obtained, there is good reason to believe, that at least some of these alleged crimes were in reality the overt acts of insanity. It would be curious to know when in reality mental disease began here. In the third case, the Patient had been insane from his youth, and was allowed to be at large, from a belief that he was harmless. An attempt to commit rape brought him under the cognisance of the authorities, and led to his committal to the Asylum.

Before concluding this subject, I may be permitted to add, that when in the Dundee Asylum I did not scruple to admit, and at one time had nearly all the criminal lunatics in Scotland under my care, and of the worst class too; and I must say, that the great mass of the other Patients had little or no aversion to them, while I found that they were as easy to manage as those who had never brought themselves before a jury of their country. Incendiarism is a crime of not unfrequent occurrence, and is sometimes the act of a lunatic. In three instances this propensity existed, though in only one of the cases was the attempt actually made.

It is a common circumstance for the insane to refuse their food. In many instances the abstinence is of merely temporary duration, and effects its own cure. In other cases, however, when the fast is a protracted one from delusion, and the Patient obstinate, it is sometimes necessary to have recourse to compulsory measures, where proper and practicable, and after all other means have failed. This peculiarity existed in a very considerable number of the admissions during the year, but, in the majority of cases, was not persistent. The motives which prompt to this conduct are very various. One be-

comes depressed, expresses anxiety about her soul's salvation, and retires to her room to fast and pray; food pampers her carnal appetites, and therefore she will not partake of it. Another has, she says, been commanded by God not to eat; it is in vain to reason with her, and neither persuasion nor entreaty will avail. One man imagined that he had made an unsuccessful attempt to commit suicide, and thereby destroyed his wind-pipe and gullet, and refused all food, on the ground that he could not swallow it; occasionally, curiously enough, he would take a meal voluntarily, and again relapse into his former state. In the greater number of cases in which a cause was assigned, the refusal originated in a belief that the food was dirty, or mixed with poison. In some, if not indeed in all of these cases, acidity, or some other gastric or bilious disorder, existed; and the probability is that the delusive notions had their origin in abnormal sensations, the result of the faulty state of the interior of the body. Examples are not wanting of Patients who persist in maintaining that they get poison in their food, but who nevertheless take their meals heartily and regularly.

Five Patients were affected with hypochondriasis. In these cases the thoughts of the Patient are "centred all in self;" he is wholly absorbed in the contemplation of his own condition; every sensation is carefully observed and noted; and every change of bodily state, even the least appreciable, becomes an unfailing source of uneasiness, anxiety, and alarm. His mind is

"An artist at creating self-alarms,  
Rich in expedients for inquietude."

If he is ever happy, it seems to be only when he has secured a patient listener, to whom he may descant upon the interminable variety of ailments, imaginable and unimagi-

nable, with which he is afflicted. In general the appearance of Patients of this class throws discredit upon their statements; they usually have a healthy look, and, with placid features and an unwrinkled brow, detail with tiresome minuteness all their sufferings and miseries. That their alleged sufferings, however, are in all cases entirely imaginary, is a most gratuitous and unwarrantable assumption; but even admitting that they have no existence in perverted bodily sensation, still to the minds of these unhappy creatures they possess all the intensity of realities, and it is cruel to make them the subject of a jest or a laugh, as is too often done. Two of these hypochondriacs recovered, one left prematurely, and two are under treatment.

One circumstance connected with the Admissions, which is peculiarly gratifying to me, is the fact that in several instances, the Patients were either brought at their own earnest request by their friends, or came themselves voluntarily and alone, demanding to be admitted. In every one of these cases the Patient had been previously an inmate of the Asylum, and having thus experienced its benefits felt desirous again to return to enjoy them, when circumstances rendered this necessary.

Notwithstanding all the care which was bestowed in endeavouring to ascertain the cause of the disease, our information upon this subject is, for various reasons, faulty and incomplete. A very large number of those who were admitted were paupers, of whose previous history, in many instances, either no information whatever could be obtained, or only the most meagre and imperfect details. Another source of difficulty, is the feeling of false delicacy, so often manifested by relatives or friends, and which prompts them to withhold or misrepresent facts and circumstances connected with the family history or conduct



of the Patient. A third difficulty, and an inherent one, is the obscurity of the cause; so many coincident circumstances may have conspired to induce the attack as to render it impossible to assign the proper influence due to each, or to say what were predisposing and what exciting causes. In a very large number of the cases admitted, the Patient suffered from a more or less impaired state of the general health, and had done so for an indefinite period previously; and in many of them the mental disorder had been so silent and gradual in its approach, as to render it impossible to say when it began. So ill fitted often are friends to judge in these matters, that it is by no means rare to find them mistaking the earlier symptoms of aberration, and assigning these as the cause or causes.

Every year's experience furnishes only more and more convincing proof of the hereditary nature of insanity, and of the influence which previous attacks exercise in predisposing to a recurrence of the disease. During the year, 35 Patients were received in whom the disease was admittedly hereditary, and of these 12 were second or subsequent attacks. In 19 cases in which the disease was declared not to be hereditary, or in which no reliable information could be obtained, the attack had been preceded by one or more previous attacks. The information communicated relative to one of the admissions, furnishes a melancholy illustration of the transmissibility of a hereditary disposition. In this instance, the malady first manifested itself in the great-grandmother of the Patient, and has regularly appeared in one or other of the members of the three succeeding generations. But this is not all, for, in the course of the year, we had under our care two other Patients belonging to another branch of the same family, and bearing the same degree of relationship

to the person originally affected; so that in each of two branches of one family the disease had been transmitted to the fourth generation. Other lateral but more distant branches, it is known, suffer in a similar manner. But, it may be asked, Is this disease more prone to run in families than many others? We certainly think not.

Another very influential cause is the intemperate use of alcoholic liquors. Forty-five, or about a fifth of our admissions, are attributed to this cause alone. It is a mistake, however, to suppose that intemperance is, in every instance where it exists, the cause of the attack; for there are cases in which it is clearly evident that the pernicious habit is the result of, or is consequent upon, the mental derangement. In a considerable number of instances, it was ascertained that one or other of the parents of the Patients (I speak of patients generally) had been addicted to intemperance. It was not, however, clearly ascertained in any instance that their habits had been such previous to the birth of their offspring; so that although it appears that this vice is indulged in by no means rarely by the parents of those who become insane, it is not proved by our investigations this year that the intemperance of the parents produced a predisposition in the children; it is nevertheless very likely, but this is a subject we cannot pursue farther here. Our inquiries, however, show that the children of parents having a proclivity to intemperance, and, at one period or other of their lives, actually of intemperate habits, are apt to become insane; that where the mental or physical organization of the parent is favourable to the development of intemperate habits, the offspring have a predisposition to insanity. That the children of drunken parents are apt to become intemperate is well known, and may be explained possibly

by reference to the influence of example alone. But it is not of this I speak now, but of intemperance in the parent as a cause of insanity in the offspring. Take the following case in illustration. The father of a Patient, who died during the year, was very much addicted to the use of alcoholic agents. The family consisted of five members; the two elder born were intelligent and of good abilities, equal, apparently in all respects, to the average of society; the third was rather weak-minded and eccentric; the fourth was an epileptic, and the fifth or youngest an imbecile. Not one of the members of that family has, as yet, exhibited the slightest tendency to indulge in the habits to which their parent was unfortunately so much addicted. It would be a mistake were any one to suppose that the forty-five admissions under this head represented that number of different individuals; in fact, in several instances, the same person was admitted a Patient oftener than once in the course of the year. There are, unfortunately, not a few unhappy beings who may be said to oscillate between the Asylum and their liberty. They are admitted—recover—and are discharged, again to relapse into their former wretched and degrading habits, to be again admitted and dismissed; and thus the change goes round till a fit of apoplexy ends their miserable existence, or incurable insanity consigns them to an Asylum for life.

Insanity is very frequently associated with disorders of the female constitution. Although this is comparatively seldom assigned by friends as a cause, it is found to exist in one form or other in many of the cases admitted. Menorrhagia and melancholia, dysmenorrhœa and mania, are often found coincident. In several instances the attack was associated with the imperfect establishment of the

menstrual discharge; and a still greater number of cases occurred among females in whom the secretion was about to cease. Pregnancy, in two instances, had followed illicit intercourse, and though not suspected at the time of admission, became apparent shortly after. Eight cases occurred after delivery. Four epileptics were admitted.

In six cases, all males, it was ascertained that the head of the Patient had been injured, and that this was the apparent cause of the mental disorder. They were all imbecile, and in three paralysis was superadded. In two the injury had been sustained in early life; in the others the accident had occurred from a few weeks to several years prior to admission. In not one of these cases does recovery seem probable. Excluding the paralytic cases already referred to, which were the result of injury or accident, paralysis, general or partial, existed in 15 other cases, of whom 10 were males and 5 females. One of the remarkable and characteristic features of general paralysis, is the false and exaggerated notions which persons so affected entertain of their power, wealth, &c. One boasts of his amazing prowess, and that he can perform the most herculean feats; another fancies that he is possessed of enormous riches, and property of untold value; that he is the Supreme Being, a king, and the like. Voracity of appetite, and a restless activity, are not unfrequently found among Patients of this class. The number of males here affected with paralysis is just double that of females. One case had been preceded by an attack of chorea; and in another case, a brother of the Patient suffered from the same affection. In one, the attack was consequent upon, and was supposed to be caused by, the sudden healing up of old ulcers upon the legs. In another case, general blood-letting had been twice employed pre-

vious to the admission of the Patient, and, according to the statement of the relatives, with a decidedly injurious effect. One fancies he is a king, and attaches "Rex" to his signature; another is a Russian diplomatic agent; one says that she is the true Messiah, and denounces the greater part of the Old and New Testaments as a fabrication and imposture; another is a great Evangelist; a third has been dead and has come alive again, and believes that the Millennium has begun, and that she has been inspired and commissioned to convert the world; some accuse themselves of having committed enormous crimes; others, by far the greater number, are the victims of plots and conspiracies; some profess to be the special favourites of Heaven, and to have divine revelations, while others are possessed of devils; one fancies that part of her body is made of glass, and dreads being touched; another that she is the Evil One, and that her skin has become black; some are tormented in one way or other by means of gas; others are under mesmeric or electrical influences. Two brothers, labourers, had succeeded, as they imagined, in solving the mystery which so long puzzled the learned—perpetual motion; and, at the time of their admission had actually constructed some rude mechanisms, made of wood and iron, for the purpose of demonstrating their discovery.

The opinion, commonly entertained, that insanity is a disease of more frequent occurrence among unmarried, than among married and widowed persons, cannot be said to receive support from our admissions during the year, the two classes being nearly equal—the former amounting to 118 and the latter to 122. Last year, the married and widowed were considerably in excess of the unmarried. The ages range from 15 to the verge of 90 years; 125,

or rather more than half the number of Patients admitted, were above 25 and under 45 years of age.

Masturbation, as is well known by the profession, is frequently the cause as well as the consequence of insanity, although in the former case very difficult to be ascertained. In the case of the Patient admitted under this head the effects were very baneful. He was pale and miserably thin, and suffered from strumous abscesses. His countenance had a vacant unintellectual expression; his pupils were large; and his mind was greatly weakened. His articulation was impaired, and his limbs paralysed. One peculiarity observed in his case was, that when he thought no one was watching him, he could and did walk better than when he was conscious of being observed. In 48 cases the attack was of second or subsequent occurrence; or, in about a fifth of all the admissions the Patient had before been once or oftener insane.

DISMISSIONS.—During the past year, 288 Patients have been discharged; of these 116 were dismissed cured, many of whom we were surprised to see become well, their cases having appeared so hopeless on admission; 110 were removed during treatment or relieved; and 62 died. If the per centage be calculated from the total number of admissions, the cures amount to 48.3, the relieved to 45.83, and the deaths to 25.83 per cent. If the per centage be taken on the number dismissed, the cures will amount to 40.27, the relieved to 38.19, and the deaths to 22.14. If, however, the total number treated be adopted as the basis of our calculations, then the cures will amount to 16.27, the relieved to 15.44, and the deaths to 8.61 per cent. It will be observed that the results obtained in the treatment of insanity, as indicated by the preceding figures, vary very much according as

one or other mode of making the calculations is adopted. In a large Asylum such as this, which has been long established, calculations made upon the total number under treatment during the year, indicate results as unfavourable as they are inaccurate, in consequence of the accumulation of chronic and incurable cases. Equally fallacious, as regards the curability of the disease, is the second mode, which assumes as the data the number of dismissals; for in consequence of the injudicious and reckless conduct of relatives and guardians, many Patients are removed either before remedial measures have had a fair trial, or before recovery is fully established. Of the three modes of calculation, therefore, the first, or that which is based upon the number of admissions, is the most accurate and reliable; and whilst it makes the nearest approach to a tolerably fair estimate or approximation, at the same time gives the most favourable view of the curability of insanity.

It has been already stated in a preceding part of this Report, that in the experience of this Institution insanity occurs less frequently among females than among males. It appears further, from calculations based upon the total number of admissions, that recoveries more frequently take place among the former than the latter, the ratio being as 107.9 to 100. Of the 116 who were discharged cured, 26 were dismissed within three months from the date of their admission, 45 within six months, 32 within one year, 17 within two years, and 6 within five years; 71 Patients, or rather less than two-thirds of those dismissed, recovered within six months from the time when they were first placed under treatment in the Asylum; and 45, or rather more than one-third, recovered after having been under treatment for a period of varying duration, but not exceeding

five years. From this number, however, there must be deducted two intemperate Patients, who, after their recovery, submitted to a protracted residence, in order if possible to lessen the probability of a relapse when they again went into society. Certain privileges were acceded to them, such as permission to go into town, &c. on parole, in order to make their stay less irksome, and to accustom them gradually to the change from a residence in this house to entire liberty. Insanity resulting from intemperance, is, in its earlier attacks, in most cases, curable; and in 41 cases, or fully more than a third of all the recoveries, intemperance was the assigned cause of the malady. But if, as is the case in its earlier attacks, this form of insanity is often recovered from, there exists, unfortunately, a very strong tendency to its recurrence. In these cases indulgence almost invariably induces a fresh attack, or may lead even to fatal results. A lamentable example of this is furnished by the case of one of those dismissed during the year. Within a month after the date of his dismissal he had relapsed into his former habits, and, during a deep debauch, he died of apoplexy.

110 Patients were discharged relieved; 30 of these left after a residence of three months or less, 29 after a residence not exceeding six months, 30 within a year, 11 within two years, 14 under five years, and 6 after a longer residence. The number of those dismissed relieved during the past year is unusually high, a circumstance which is greatly to be regretted, not merely because the practice of premature removals often proves prejudicial to the best interests of the Patients so removed, but also because of the motives which prompt to it, and which in many instances have their origin in the system commonly called "penny wise and pound foolish."



We believe that under more prolonged treatment a great number of those dismissed "relieved" would have recovered, and then ceased to be a burden on the community. It is perhaps not too much to say, that the mental health of many Patients is unwittingly sacrificed to this kind of expediency.

DEATHS.—62 Patients, of whom 32 were males and 30 females, have died during the year. Although, in the present instance, the mortality of the two sexes is nearly equal, the past experience of the Institution proves that the mortality is considerably higher among the male than among the female Patients. The mortality among males, calculated from the total number admitted (3,716), amounts to 16.84 per cent., that of the females to 13.10 per cent. on the total admissions (3,113), showing a difference of 3.14 in favour of the females, and being in the ratio of 100 to 77.78. 6 Patients died in less than a month after their admission; 4 in less than two months; and 6 in less than three months. 12 had been inmates for periods ranging between three and seven years. 30 were above the 45th year of their age at the time of their death. 1 died of apoplexy, 3 of disease of the heart, 4 of cholera, 6 of phthisis pulmonalis, 10 of diarrhœa, and 13 of paralysis. The mortality of an Asylum cannot be regarded as at all indicative of the mortality of insanity *per se*; it merely indicates the complications which may have presented themselves before or during the treatment of the mental disease, and which may prove fatal. The Patient is generally known to die from physical diseases quite appreciable, and which have developed themselves before or during the progress of the mental aberration. One of the deaths was that of a poor woman who died from hæmatemesis; and as the case is peculiar, I here insert the report of the inspection of the

body, which took place twenty-two hours after death. The body was extremely emaciated, and almost totally destitute of fat. Both lungs, especially the left, were much shrunk or collapsed, but were free from tubercular or other evident structural lesions. Recent pleuritic adhesions, but neither firm nor extensive, existed on both sides of the thorax. There was no fluid in either pleural cavity. The left ventricle of the heart was firm and contracted, the right soft and flaccid, and both cavities were empty. The stomach was displaced downwards and distended, and contained probably not less than from  $2\frac{1}{2}$  to 3 pounds of semi-coagulated blood. The smaller intestines also contained blood in a similar condition, and their parietes in many places were discoloured by it. A large fragment of bone (which had been swallowed in her broth), of a triangular form and with sharp edges, was found firmly impacted in the œsophagus a little below the point where it is crossed by the aorta. At the place of arrest, ulceration to a considerable extent had taken place, and at a point corresponding with one of the angles of the impacted piece of bone, all the tissues of the œsophagus had been perforated. It is certain that at this spot, and by the same agency, a similar opening had been effected in the walls of an adjacent blood-vessel, though, owing to the previous disturbance of the parts, it was found impossible to determine from what source the fatal hæmorrhage proceeded. Sub-arachnoid effusion, the presence of a few small whitish patches on the membranes, and slight effusion into both lateral ventricles of the brain, were the only abnormal conditions observed in the head.

TREATMENT: *Medical, Physical, and Moral*.—During the past year, the Patients have been treated upon the general principles already enunciated in former Reports.

We continue to find that it is of the first importance to attend to the general health of the Patients. Constipation, biliary and gastric disorders, with torpor, are of very frequent occurrence among the insane, and often for the time being render the Patient restless, irritable, excited, or dull; conditions which, in many instances, may be either prevented altogether or removed by a careful attention to the state of his body. The use of warm baths has been cautiously extended, and long-continued immersion practised, in some instances, with a marked beneficial sedative effect, in cases in which there was much excitement. Although general blood-letting has now been almost if not entirely discarded in the treatment of the insane, recourse is still occasionally had to the local abstraction of blood, either by means of leeches applied to the head or cupping-glasses to the nape of the neck. The great mass of the Patients, however, cannot bear depletion in any form, but the reverse; and therefore, from the time of admission, stimulating nourishment, with alcoholic agents, as they are clearly indicated, are freely given, and with beneficial results. When in Forfarshire, I found, in my practice there, that the insane could bear any sort of reduction, whether by means of blood-letting or medicine, very much better than they can do here. The Patients in this quarter are more exhausted, more reduced every way on admission.

In consequence of the favourable reports of the beneficial results which had been obtained from the use of sumbul in cases of epilepsy, I was induced to make trial of this alleged new remedy for that disease. Several Patients of both sexes, whose cases seemed the most favourable for trial, were selected, and submitted to this mode of treatment; but, I regret to say, with only

doubtful, if indeed with any good, result. It seemed as if, in some instances, the seizures occurred less frequently; but if the interval was prolonged, the attack, when it did come on, was apparently of increased severity. It may, however, reasonably be doubted whether either one or other of these results was produced by the sumbul, for those who are conversant with epilepsy as it usually occurs among the inmates of an Asylum, know well that even under ordinary circumstances the interval between the paroxysms is of very variable duration, and that the attack often varies greatly in intensity. Narcotics and counter-irritants in many cases have been found very beneficial.

Several Patients of the higher classes have been permitted, during the summer, to go to the coast, to the Bridge-of-Allan, Dunkeld, Ireland, &c. for amusement and pleasure, always accompanied, of course, by attendants. A few are proposing to go to the Exhibition in Paris, and probably this also may be permitted.

It is known that the Directors take in many newspapers and journals, and that, in addition to the Asylum library, they have four subscriptions in the libraries in the City for the use of the Patients, that they may have the newest books and periodicals as soon as they come out. I may now state that the house library has been added to, in consequence of the very great interest which is taken by the Patients in the war against Russia.

The printing-press of the Asylum continues to be used by the Patients. They compose the articles, then put them in type, and then act as pressmen in throwing them off. A great many schedules, &c. have been printed, also part of Shakspeare, with original introductory notes. A gentleman—a profound melancholic, with very extraordinary delusions—continued for a time absorbed in the

contemplation of his own miseries, moody and inactive. Nothing could interest him, and if his thoughts were for a moment diverted, they immediately reverted to their former channel. He was a genius—an artist; and had on a former occasion been insane, and then his recovery dated from the time when he began to employ himself in executing some sculptures in marble, which he did most beautifully and truly. On this occasion, it was resolved to engage him, if possible, in a similar manner, in the hope, if we succeeded, that the experiment might be followed by a like happy result. Marble and the necessary implements having been procured, he was at length induced to set to work, and before he left the Asylum, he had executed several sculptures in a very superior manner; and I am glad to say that he has since continued well.

The Patients in the East House are now much more comfortable than they were before certain alterations were made; and when the Directors get means (which are now more wanted than before, in consequence of the extraordinary expenses of the year\*), and which I hope will be soon, I would submit that others be made for the comfort of the lowest class Patients; and, if it was practicable, that an addition be made to the building, in the Male division to join the wash-house, and in the Female division to join the laundry, at the west end of the respective courts. Such additions would make the classification more complete, and thus, as well as by other means, tend to the recovery of the Patients.

Having now alluded to the more prominent circumstances connected with the department committed to my care, I beg leave respectfully to present my humble ac-

\* See pages 6 and 7.

knowledgments to the Directors, for their unabated confidence in me, and for their cordial expression of it at the end of their Report.

The Officers deserve my thanks. Dr. Fleming, the able and experienced Surgeon to the Institution, attended as usual, and was highly successful in the treatment of his cases.

Dr. Kirkwood and Dr. Ferguson, the two resident Medical Officers, displayed great zeal and ability in the execution of their particularly arduous and laborious duties during the bygone year. Their assistance was the more valuable as it was prompt, decided, and, in many instances, anticipatory of my wishes; and for all which it is with great pleasure that I recommend them to the favourable consideration of the Directors.

Mrs. Mapleson, Superintendent of Ladies, continues to deserve and enjoy the confidence of all concerned.

The Rev. Mr. Russell, the Chaplain, is always punctual in attendance on his sacred duties, and I have good reason to believe that his discourses are much prized by many of his hearers.

In conclusion, I have to thank the other Heads of Departments and Servants, who have co-operated with me and rendered good service to the Asylum.

ALEXANDER MACKINTOSH, M. D.

Physician & Superintendent.

GARTNAVEL, 30th December, 1854.

## MEDICAL STATISTICAL TABLES,

FOR THE YEAR 1854.

### I.—GENERAL STATEMENT.

	MALES.	FEMALES.	TOTAL.
Remaining on 31st December 1853, . . . . .	248	224	472
Admitted since, . . . . .	123	117	240
	—	—	—
TOTAL, . . . . .	371	341	712
	==	==	==
Dismissed Cured, . . . . .	60	56	116
Do. Relieved, . . . . .	56	54	110
Died, . . . . .	32	30	62
	—	—	—
TOTAL, . . . . .	148	140	288
Remaining on 31st December 1854, . . . . .	223	201	424
	—	—	—
TOTAL TREATED, . . . . .	371	341	712
	==	==	==
Average Daily Number for 1854, . . . . .	226	218	444

II.—TABLES RELATIVE TO PATIENTS ADMITTED  
DURING THE YEAR 1854.

*Table 1.—Showing the Form of Insanity in those Admitted.*

	MALES.	FEMALES.	TOTAL.
Mania, . . . . .	56	51	107
Monomania, including Melancholia, . . . . .	43	40	83
Dementia, . . . . .	24	26	50
TOTAL, . . . . .	123	117	240

*Table 2.—Showing the Social Condition of those Admitted.*

	MALES.	FEMALES.	TOTAL.
Unmarried, . . . . .	67	55	122
Married, . . . . .	50	42	92
Widowed, . . . . .	6	20	26
TOTAL, . . . . .	123	117	240

*Table 3.—Showing the Ages of those Admitted.*

	MALES.	FEMALES.	TOTAL.
Under 15 Years, . . . . .	0	0	0
— 20 — . . . . .	16	5	21
— 25 — . . . . .	13	11	24
— 30 — . . . . .	18	10	28
— 35 — . . . . .	18	21	39
— 40 — . . . . .	18	17	35
— 45 — . . . . .	8	15	23
— 50 — . . . . .	10	11	21
— 55 — . . . . .	9	12	21
— 60 — . . . . .	5	9	14
— 65 — . . . . .	4	5	9
— 70 — . . . . .	2	0	2
— 75 — . . . . .	1	1	2
— 80 — . . . . .	0	0	0
— 85 — . . . . .	0	0	0
— 90 — . . . . .	1	0	1
TOTAL, . . . . .	123	117	240



*Table 4.—Showing the (Apparent or Supposed) Causes of Insanity in those Admitted.*

	MALES.	FEMALES.	TOTAL.
Anxiety, . . . . .	1 ...	3 ...	4
Biliary Disorder, . . . . .	1 ...	0 ...	1
Brain Fever, . . . . .	0 ...	1 ...	1
Coup de Soleil, . . . . .	1 ...	0 ...	1
Critical Period, . . . . .	0 ...	2 ...	2
Death of Relatives, . . . . .	0 ...	2 ...	2
Desertion by Husband, . . . . .	0 ...	1 ...	1
Domestic Trials, . . . . .	0 ...	1 ...	1
Epilepsy, . . . . .	1 ...	3 ...	4
Fright, . . . . .	1 ...	1 ...	2
Grief, . . . . .	3 ...	1 ...	4
Hereditary, . . . . .	23 ...	12 ...	35
Ill-usage, . . . . .	0 ...	2 ...	2
Imprisonment, . . . . .	2 ...	0 ...	2
Injury of Head, . . . . .	6 ...	0 ...	6
Intemperance, . . . . .	27 ...	18 ...	45
Love, Disappointed, . . . . .	2 ...	4 ...	6
Masturbation, . . . . .	1 ...	0 ...	1
Menstrual Disorder, . . . . .	0 ...	4 ...	4
Nervous Debility, . . . . .	0 ...	1 ...	1
Old Age, . . . . .	2 ...	1 ...	3
Over-Exertion, . . . . .	1 ...	1 ...	2
Over-Study, . . . . .	2 ...	0 ...	2
Official Honesty Impugned, . . . . .	1 ...	0 ...	1
Paralysis, . . . . .	10 ...	5 ...	15
Poverty, . . . . .	2 ...	0 ...	2
Previous Insanity, . . . . .	21 ...	27 ...	48
Puerperal States, . . . . .	0 ...	8 ...	8
Quarrel, . . . . .	1 ...	0 ...	1
Religious Excitement, . . . . .	2 ...	1 ...	3
Remorse, . . . . .	1 ...	1 ...	2
Reverses in Business, . . . . .	1 ...	0 ...	1
Shingles, Attack of, . . . . .	1 ...	0 ...	1
Slandorous Reports, . . . . .	0 ...	1 ...	1
Typhus Fever, . . . . .	1 ...	1 ...	2
Ulcers, Healing of Old, . . . . .	1 ...	0 ...	1
Unascertained, . . . . .	7 ...	15 ...	22
<b>TOTAL,</b> . . . . .	<b>123</b> ...	<b>117</b> ...	<b>240</b>

Table 5.—Showing the Occupations of those Admitted.

MALES.			
Baker, . . . . .	1	<i>Brought forward,</i> . . . . .	63
Bill-Poster, . . . . .	1	Merchants, . . . . .	10
Block-Cutter, . . . . .	1	Miners, . . . . .	3
Block-Printer, . . . . .	1	No Occupation, . . . . .	5
Boilermaker, . . . . .	1	Painters, . . . . .	3
Carpenters, . . . . .	4	Pipemaker, . . . . .	1
Clergymen, . . . . .	2	Plumber, . . . . .	1
Clerks, . . . . .	10	Printer, . . . . .	1
Commission-Agents, . . . . .	2	Policeman, . . . . .	1
Cooper, . . . . .	1	Porter, . . . . .	1
Drapers, . . . . .	2	Ship-Captains, . . . . .	2
Die-Stamp Cutter, . . . . .	1	Shoemakers, . . . . .	4
Engineers, . . . . .	3	Shopkeeper, . . . . .	1
Ex-East India Merchant, . . . . .	1	Spirit-Dealers, . . . . .	4
Farmers, . . . . .	5	Student, . . . . .	1
Farm-Servants, . . . . .	3	Tailor, . . . . .	1
Flesher, . . . . .	1	Tinsmiths, . . . . .	2
Footman, . . . . .	1	Tobacco-Spinner, . . . . .	1
Gasfitters, . . . . .	2	Unascertained, . . . . .	3
Grain-Merchant, . . . . .	1	Vocalist, . . . . .	1
Hatter, . . . . .	1	Waiter, . . . . .	1
Hawkers, . . . . .	2	Watchmakers, . . . . .	3
Inland Revenue Officers, . . . . .	3	Weavers, . . . . .	8
Labourers, . . . . .	12	Writers, . . . . .	2
Mason, . . . . .	1		
	—	TOTAL, . . . . .	123
<i>Carry forward,</i> . . . . .	63		==

FEMALES.			
Boot-Closer, . . . . .	1	<i>Brought forward,</i> . . . . .	54
Calender-Worker, . . . . .	1	Physicians' Wives, . . . . .	2
Darner, . . . . .	1	Do. Widow, . . . . .	1
Domestic Servants, . . . . .	14	Sempstresses, . . . . .	11
Dressmakers, . . . . .	3	Shawl-Fringer, . . . . .	1
Factory-Workers, . . . . .	2	Shoebinder, . . . . .	1
Farmers' Daughters, . . . . .	2	Tavern-Keeper, . . . . .	1
Hawkers, . . . . .	3	Teacher, . . . . .	1
Housekeepers, . . . . .	8	Unascertained, . . . . .	3
Ladies, . . . . .	2	Washerwomen, . . . . .	4
Laundress, . . . . .	1	Weavers, . . . . .	3
Merchants' Wives, . . . . .	2	Winders, . . . . .	2
Do. Widows, . . . . .	2	Wives, . . . . .	33
No Occupation, . . . . .	12		
	—	TOTAL, . . . . .	117
<i>Carry forward,</i> . . . . .	54		==

*Table 6.—Showing the Number of Admissions in each Month of the Year 1854.*

	MALES.	FEMALES.	TOTAL.
January, . . . . .	4	10	14
February, . . . . .	8	16	24
March, . . . . .	15	14	29
			— 67
April, . . . . .	14	14	28
May, . . . . .	10	5	15
June, . . . . .	7	13	20
			— 63
July, . . . . .	11	11	22
August, . . . . .	13	11	24
September, . . . . .	13	7	20
			— 66
October, . . . . .	8	4	12
November, . . . . .	8	5	13
December, . . . . .	12	7	19
			— 44
			—
TOTAL, . . . . .			240
			==

III.—TABLES RELATIVE TO PATIENTS DISMISSED  
CURED.

*Table 1.—Showing the Form of Insanity in those Cured.*

	MALES.	FEMALES.	TOTAL.
Mania, . . . . .	40	35	75
Monomania, including Melancholia, . . . . .	18	17	35
Dementia, . . . . .	2	4	6
	—	—	—
TOTAL, . . . . .	60	56	116
	==	==	==

*Table 2.—Showing the previous Duration of the Insanity in those Cured.*

	MALES.	FEMALES.	TOTAL.
Under 1 Month, . . . . .	17	28	45
— 2 Months, . . . . .	9	4	13
— 3 — . . . . .	5	3	8
— 4 — . . . . .	5	1	6
— 5 — . . . . .	4	2	6
— 6 — . . . . .	2	2	4
— 9 — . . . . .	0	3	3
— 1 Year, . . . . .	1	1	2
— 2 Years, . . . . .	1	1	2
— 3 — . . . . .	0	2	2
Unascertained, . . . . .	16	9	25
TOTAL, . . . . .	<u>60</u>	<u>56</u>	<u>116</u>

*Table 3.—Showing the Ages of those Cured.*

	MALES.	FEMALES.	TOTAL.
Under 15 Years, . . . . .	0	0	0
— 20 — . . . . .	8	4	12
— 25 — . . . . .	11	2	13
— 30 — . . . . .	6	11	17
— 35 — . . . . .	12	11	23
— 40 — . . . . .	6	6	12
— 45 — . . . . .	9	5	14
— 50 — . . . . .	5	4	9
— 55 — . . . . .	2	7	9
— 60 — . . . . .	0	4	4
— 65 — . . . . .	1	2	3
TOTAL, . . . . .	<u>60</u>	<u>56</u>	<u>116</u>

*Table 4.—Showing the Length of Residence in the Asylum of those Cured.*

	MALES.	FEMALES.	TOTAL.
Under 1 Month, . . . . .	2	1	3
— 2 Months, . . . . .	9	3	12
— 3 — . . . . .	5	6	11
— 4 — . . . . .	11	12	23
— 5 — . . . . .	4	7	11
— 6 — . . . . .	4	7	11
— 9 — . . . . .	12	10	22
— 1 Year, . . . . .	7	3	10
— 2 Years, . . . . .	3	4	7
— 3 — . . . . .	1	1	2
— 4 — . . . . .	2	0	2
— 5 — . . . . .	0	2	2
TOTAL, . . . . .	<u>60</u>	<u>56</u>	<u>116</u>

Table 5.—*Showing the Causes of Insanity in those Cured.*

	MALES.	FEMALES.	TOTAL.
Anxiety, . . . . .	1	0	1
Death of Relatives, . . . . .	0	2	2
Desertion by Husband, . . . . .	0	1	1
Disappointment, Pecuniary, . . . . .	0	1	1
Fatigue, . . . . .	0	1	1
Fever, . . . . .	1	1	2
Grief, . . . . .	2	2	4
Hereditary, . . . . .	4	3	7
Imprisonment, . . . . .	2	0	2
Intemperance, . . . . .	25	16	41
Love, Disappointed, . . . . .	0	1	1
Menstrual Disorder, . . . . .	0	2	2
Nervous Debility, . . . . .	0	1	1
Nursing (Protracted), . . . . .	0	1	1
Over-Exertion in Business, . . . . .	2	0	2
Over-Study, . . . . .	1	0	1
Previous Insanity, . . . . .	9	11	20
Puerperal States, . . . . .	0	5	5
Quarrel, . . . . .	0	1	1
Religious Excitement, . . . . .	2	2	4
Remorse, . . . . .	0	1	1
Reverses in Business, . . . . .	2	0	2
Slandorous Reports, . . . . .	0	1	1
Unascertained, . . . . .	9	3	12
TOTAL, . . . . .	<u>60</u>	<u>56</u>	<u>116</u>

Table 6.—*Showing the per Cent. of Cures upon the Total Number Treated; the Number Treated to a Conclusion; and the Number Admitted.*

Total Number Treated, . . . . .	712	Cured, } 116	CENT. { 16.27 40.27 48.3
Do. do. to a Conclusion, . . . . .	288		
Admitted, . . . . .	240		

#### IV.—TABLES RELATIVE TO PATIENTS WHO HAVE DIED DURING THE YEAR 1854.

Table 1.—*Showing the Form of Insanity in those who Died.*

	MALES.	FEMALES.	TOTAL.
Mania, . . . . .	5	5	10
Monomania, including Melancholia, . . . . .	8	9	17
Dementia, . . . . .	19	16	35
TOTAL, . . . . .	<u>32</u>	<u>30</u>	<u>62</u>

Table 2.—Showing the Ages of those who Died.

					MALES.	FEMALES.	TOTAL.
Under 20 Years,	.	.	.	.	0	1	1
— 25 —	.	.	.	.	3	2	5
— 30 —	.	.	.	.	2	1	3
— 35 —	.	.	.	.	4	2	6
— 40 —	.	.	.	.	5	3	8
— 45 —	.	.	.	.	4	5	9
— 50 —	.	.	.	.	4	6	10
— 55 —	.	.	.	.	2	1	3
— 60 —	.	.	.	.	4	3	7
— 65 —	.	.	.	.	1	4	5
— 70 —	.	.	.	.	1	1	2
— 75 —	.	.	.	.	2	1	3
TOTAL,	.	.	.	.	32	30	62

Table 3.—Showing the Length of Residence in the Asylum of those who Died.

					MALES.	FEMALES.	TOTAL.
Under 1 Month,	.	.	.	.	2	4	6
— 2 Months,	.	.	.	.	2	2	4
— 3 —	.	.	.	.	2	4	6
— 4 —	.	.	.	.	1	1	2
— 5 —	.	.	.	.	2	0	2
— 6 —	.	.	.	.	5	2	7
— 9 —	.	.	.	.	1	0	1
— 1 Year,	.	.	.	.	2	0	2
— 2 Years,	.	.	.	.	5	9	14
— 3 —	.	.	.	.	3	3	6
— 4 —	.	.	.	.	4	1	5
— 5 —	.	.	.	.	1	1	2
— 6 —	.	.	.	.	1	1	2
— 7 —	.	.	.	.	1	2	3
TOTAL,	.	.	.	.	32	30	62

Table 4.—Showing the Causes of Deaths.

	MALES.	FEMALES.	TOTAL.
Apoplexy, . . . . .	0	1	1
Cardiac Disease, . . . . .	1	2	3
Cerebral Disease, . . . . .	1	1	2
Cholera, . . . . .	2	2	4
Diarrhoea, . . . . .	7	2	9
— Choleraic, . . . . .	1	0	1
Erysipelas, . . . . .	1	0	1
Exhaustion, . . . . .	5	6	11
Glossitis, . . . . .	0	1	1
Hæmatemesis, . . . . .	0	1	1
Paralysis, . . . . .	8	5	13
Peritonitis, . . . . .	1	1	2
Phthisis, . . . . .	4	5	9
Pleuropneumonia, . . . . .	0	1	1
Pneumonia, . . . . .	0	2	2
Tympanitis, . . . . .	1	0	1
	—	—	—
TOTAL, . . . . .	32	30	62
	==	==	==

Table 5.—Showing the per Cent. of Deaths upon the Total Number Treated; the Number Treated to a Conclusion; and the Number Admitted.

Total Number Treated, . . . . .	712	Died, {	CENT. 8.70		
Do. do. to a Conclusion, . . . . .	288			62 {	21.52
Admitted, . . . . .	240				

V.—SHOWING THE NUMBER OF PATIENTS DISMISSED  
IN EACH MONTH OF THE YEAR 1854.

	MALES.	FEMALES.	TOTAL.
January, . . . . .	11	10	21
February, . . . . .	14	9	23
March, . . . . .	25	22	47
			— 91
April, . . . . .	14	14	28
May, . . . . .	6	8	14
June, . . . . .	17	18	35
			— 77
July, . . . . .	16	18	34
August, . . . . .	7	5	12
September, . . . . .	12	5	17
			— 63
October, . . . . .	6	4	10
November, . . . . .	8	6	14
December, . . . . .	12	21	33
			— 57
			—
TOTAL, . . . . .			288
			==

VI.—SHOWING THE PER CENT. OF CURES AND  
DEATHS, UPON THE TOTAL NUMBER OF PA-  
TIENTS TREATED TO A CONCLUSION,

*From the Opening of the Asylum on 12th Dec. 1814 to 31st Dec. 1854.*

		CURED.	PER CENT.
Total Number Treated to a Conclusion, .	6,405	3,237	50.53
		DIED.	
Do. . . . . do.	6,405	1,034	16.14



VII.—Showing the NUMBER of PATIENTS annually ADMITTED into the been DISMISSED CURED, RELIEVED, and UNFIT, and the NUMBER who to 31st December 1854, with the per Cent. of CURES and DEATHS upo

YEAR.	ADMITTED DURING EACH YEAR.			REMAINED AT THE END OF EACH PRECEDING YEAR.			TOTAL UNDER TREATMENT DURING EACH YEAR.		
	Males.	Females.	Total.	Males.	Females.	Total.	Ma es.	Females.	Total.
1814,.....	25	19	44	...	...	...	...	...	...
1815,.....	40	37	77	21	19	40	61	56	117
1816,.....	56	34	90	39	34	73	95	68	163
1817,.....	45	42	87	56	39	95	101	81	182
1818,.....	50	41	91	56	47	103	106	88	194
1819,.....	45	36	81	62	40	102	107	76	183
1820,.....	54	33	87	64	42	106	118	75	193
1821,.....	56	38	94	69	43	112	125	81	206
1822,.....	51	30	81	74	47	121	125	77	202
1823,.....	41	43	84	63	43	106	104	86	190
1824,.....	40	38	78	55	59	114	95	97	192
1825,.....	47	32	79	59	61	120	106	93	199
1826,.....	38	37	75	59	55	114	97	92	189
1827,.....	50	24	74	55	50	105	105	74	179
1828,.....	45	49	94	62	44	106	107	93	200
1829,.....	47	42	89	64	59	123	111	101	212
1830,.....	40	49	89	59	55	114	99	104	203
1831,.....	56	40	96	62	61	123	118	101	219
1832,.....	48	51	99	75	62	137	123	113	236
1833,.....	52	37	89	78	61	139	130	98	228
1834,.....	50	35	85	71	68	139	121	103	224
1835,.....	55	41	96	78	62	140	133	103	236
1836,.....	65	57	122	73	64	137	138	121	259
1837,.....	61	53	114	79	70	149	140	123	263
1838,.....	58	59	117	74	72	146	132	131	263
1839,.....	80	51	131	80	77	157	160	128	288
1840,.....	78	71	149	82	73	155	160	144	304
1841,.....	83	74	157	92	91	183	175	165	340
1842,.....	114	85	199	84	86	170	198	171	369
1843,.....	184	143	327	102	100	202	286	243	529
1844,.....	157	133	290	196	148	344	353	281	634
1845,.....	200	164	364	225	180	405	425	344	769
1846,.....	222	192	414	258	206	464	480	398	878
1847,.....	203	162	365	289	250	539	492	412	904
1848,.....	205	161	366	298	254	552	503	415	918
1849,.....	211	167	378	284	234	518	495	401	896
1850,.....	194	199	393	265	222	487	459	421	880
1851,.....	140	119	259	227	198	425	367	317	684
1852,.....	141	125	266	226	202	428	367	327	694
1853,.....	166	153	319	214	206	420	380	359	739
1854,.....	123	117	240	248	224	472	371	341	712
TOTAL,.....	3,716	3,113	6,829						

TOTAL AS ABOVE, .....6,829

DEDUCT—Remain, ..... 424

TOTAL NUMBER OF PATIENTS, ..... 6,405

GLASGOW ROYAL ASYLUM, including *Re-Admissions*, the NUMBER who have DIED during each Year, from its Opening, on the 12th December 1814 to the TOTAL.

DISCHARGED.									DIED.		
CURED.			RELIEVED.			UNFIT.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
...	...	...	3	...	3	...	...	...	1	...	1
16	16	32	2	6	8	2	...	2	1	..	1
24	16	40	11	12	23	1	...	1	3	2	5
26	17	43	17	15	32	...	...	...	2	1	3
15	21	36	22	22	44	2	1	3	5	3	8
21	18	39	13	12	25	3	...	3	6	4	10
31	13	44	12	16	28	1	...	1	5	3	8
21	14	35	20	18	38	4	...	1	9	2	11
26	7	33	25	25	50	...	...	...	11	2	13
10	15	25	24	9	33	4	1	5	11	2	13
17	21	38	9	10	19	1	...	1	9	5	14
18	12	30	22	24	46	...	1	1	7	1	8
12	13	25	22	24	46	4	...	4	4	5	9
22	20	42	15	6	21	1	1	2	5	3	8
18	19	37	16	10	26	3	...	3	5	5	10
22	23	45	20	20	40	...	1	1	10	2	12
17	28	45	15	12	27	...	...	...	5	3	8
18	24	42	16	10	26	2	...	2	7	5	12
28	19	47	9	22	31	1	4	5	7	7	14
21	17	38	24	10	34	1	2	3	13	1	14
15	16	31	17	19	36	4	...	4	7	6	13
31	24	55	18	9	27	1	1	2	10	5	15
32	29	61	14	16	30	4	3	7	9	3	12
35	20	55	15	22	37	6	4	10	10	5	15
27	23	50	16	16	32	1	8	9	8	7	15
33	30	63	31	15	46	6	3	9	8	7	15
47	34	81	12	10	22	3	3	6	6	6	12
58	52	110	23	18	41	1	...	1	9	9	18
61	38	99	20	24	44	...	...	...	15	9	24
52	69	121	17	17	34	...	...	...	21	9	30
83	65	148	24	25	49	...	...	...	21	11	32
90	87	177	38	29	67	...	...	...	39	22	61
103	84	187	46	43	89	...	...	...	42	21	63
103	100	203	38	26	64	...	...	...	53	32	85
122	104	226	51	39	90	...	...	...	46	38	84
111	94	205	67	33	100	...	...	...	52	52	104
84	87	171	132	111	243	...	...	...	16	25	41
55	63	118	56	40	96	...	...	...	30	12	42
73	55	128	49	47	96	...	...	...	31	19	50
42	74	116	55	36	91	...	...	...	35	24	59
60	56	116	56	54	110	...	...	...	32	30	62
700	1,537	3,237							626	408	1,034

TOTAL NO. OF CURES,... 3,237

TOTAL NO. OF DEATHS,... 1,034

PER CENT. OF CURES,... 50.53

PER CENT. OF DEATHS,... 16.14

QUANTITIES OF THE PRINCIPAL PROVISIONS, &c.

CONSUMED IN THE ASYLUM IN THE YEARS 1852-53-54.

	1852.	1853.	1854.	
Beef, Mutton, &c.....	6,483 ..	6,553 ..	7,020	Stones.
Bread,.....	31,074 ..	32,901 ..	38,849	Loaves.
Beer,.....	729 ..	834 ..	828	Firkins.
Porter,.....	347 ..	492 ..	732	Doz. Pints.
Ale,.....	347 ..	391 ..	312	—
Tea,.....	1,427 $\frac{3}{4}$ ..	1,419 $\frac{3}{4}$ ..	1,416 $\frac{1}{2}$	Lbs.
Coffee,.....	699 ..	740 ..	938	—
Sugar,.....	10,527 ..	11,241 ..	12,958	—
Soap,.....	7,659 ..	10,022 ..	11,965	—
Soda,.....	3,093 ..	3,557 ..	4,485	—
Candles,.....	36 ..	32 ..	43 $\frac{1}{2}$	Stones.
Coals, Dross, and Coke,.....	1,089 ..	1,241 ..	1,225	Waggons.
Gas,.....	641,000 ..	833,100 ..	919,500	Cubic Feet.
Oatmeal,.....	424 ..	440 ..	388	Bolls.
Barley and Pease,.....	17,149 ..	17,571 ..	17,570	Lbs.
Milk,.....	7,129 $\frac{1}{2}$ ..	7,828 ..	7,873	Gallons.
Butter-Milk,.....	10,958 ..	10,920 ..	10,860	—
Butter,.....	5,147 $\frac{3}{4}$ ..	5,552 ..	6,442 $\frac{1}{2}$	Lbs.
Cheese,.....	1,747 ..	2,247 $\frac{1}{2}$ ..	2,588	—
Wine,.....	84 ..	75 ..	86 $\frac{2}{3}$	Dozens.
Spirits, including Laboratory, ...	32 ..	66 ..	125	Gallons.
Potatoes,.....	32 ..	23 ..	24 $\frac{1}{4}$	Tons.
Eggs,.....	3,155 $\frac{1}{4}$ ..	3,453 ..	3,863	Dozens.

JOHN ARTHUR, STEWARD.

## PRODUCE OF FARM, 1854.

17 $\frac{1}{2}$ Bolls of Oats, at 20/, not entered last year, } 1853 Crop, . . . . . }	£17 6 8
81 $\frac{1}{2}$ Bolls of Oats, at 22/ per boll, . . . . .	89 9 4
10 $\frac{2}{3}$ Do. at 22/ per 264 lbs. . . . .	10 16 6
47 Do. milled and produced 47 $\frac{1}{2}$ bolls } Meal, at 23/ per boll, to store, . . . . . }	54 19 8
30 Bolls Beans, at 24/ per boll, . . . . .	36 0 0
15 $\frac{1}{2}$ Do. Barley, at 26/ per boll, . . . . .	19 18 8
1,700 Stones Hay, at 66/8 per ton, . . . . .	56 13 4
Clover sold at £9, . . . . .	9 0 0
32 $\frac{1}{2}$ Tons Yellow Turnips, sold at 18/ per ton, . . . . .	29 7 8
7 Do. Do. used at home, at 18/ } per ton, . . . . . }	6 6 0
14 $\frac{1}{2}$ Tons Yellow Swedish Turnips, used at home, } at 22/ per ton, . . . . . }	16 3 4
	<u>£346 1 2</u>

## WORK DONE BY HORSE TO HOUSES, ROADS, &amp;c.

Credit given for Money saved by the Farm, . . . . .	<u>£67 3 0</u>
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## PRODUCE OF PIGGERIES.

Pork to store, at various prices, 9 cwt. 2 qrs. 6 lbs. . . . .	£20 9 8
Actual Money received for Pork sold to fleshers and } others, . . . . . }	102 4 11
	<u>£122 14 7</u>

EXTENT OF GROUND DEVOTED TO EACH CROP  
ON FARM.

16 Acres Corn,	} Total Imperial Acres, 33.
9 $\frac{1}{2}$ Do. Hay or Grass,	
5 Do. Beans and Barley,	
2 $\frac{3}{4}$ Do. Yellow and Swedish Turnips,	

## GARDEN PRODUCE, 1854.

2,361½	Doz. German Greens.	38½	Stones Parsnips.
1,498	Do. Turnips in summer.	21½	Do. Vegetable Marrows.
1,231¾	Do. Early and late Cab- bages.	254½	Pecks Pease.
967¾	Do. Leeks.	6	Do. Beans.
318¾	Do. Savoy Heads.	8	Pints Brussels Sprouts.
315¼	Do. Cauliflowers and Brocoli Heads.	<b>FRUITS.</b>	
270¾	Do. Carrots in summer.	136½	Scotch Pints Gooseberries.
56¾	Do. Celery Heads.	54	Do. Jamberries.
34¼	Do. Red Cabbage Heads.	144¾	Do. Strawberries.
9¼	Do. Cucumbers.	53	Do. Red Currants.
1,090	Bunches Onions in sum- mer; and	7½	Do. White Do.
45	Stones Onions in winter.	36	Do. Black Do.
99	Baskets Spinage.	9¾	Do. Raspberries.
248½	Stones Potatoes.	40	Lbs. Apples.
142	Do. Rhubarb.	Parsley, Horse Raddish, Sweet Herbs, Lettuces, Mustard, Cresses, and Kidney Beans in their season.	
39	Do. Artichokes.		
Total, at Bazaar prices, . . . . .		£214	6 3

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Total value of Gardener's Department, . . . . . £750 5 0

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Total expended on Gardener's Department, includ-  
ing Men's Wages, Seeds, Implements, Manure,  
and keep of Horses, . . . . . } £391 0 0

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Balance in favour of Gardener's Department, . . . . . £359 5 0

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Corn used by Farm Horses, . . . . . 36 Bolls.  
Beans do. do. . . . . 9 —  
Barley do. do. . . . . 2¾ —

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Corn used by Carriage Horses, . . . . . 35 Bolls.  
Beans do. do. . . . . 9 —  
Barley do. do. . . . . 1½ —

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Farm and Carriage Horses consume all the Hay made from the  
Farm.

JAMES DUTHIE, GARDENER.

## LADIES' WORK DONE IN 1854.

24 Flannel Shifts and Semets made.	4 Woollen Hoods knitted.
3 Doz. Cotton Chemises made.	6 Comforters knitted.
6 Pairs Cotton Drawers do.	6 Children's Frocks made.
18 Short-Gowns do.	18 Aprons made.
6 Long Night-Gowns do.	6 Tidies knitted.
2½ Dozen Night-Caps do.	6 Overalls made.
16 Morning Caps do.	2 Veils knitted.
18 Flannel Petticoats do.	30 Yards Edgings knitted.
12 White and Stuff Petticoats made.	12 Yards Trimming Sewed work.
24 Habit Shirts made.	10 Pairs Sheets made.
36 Pocket Handkerchiefs hemmed.	12 Pillow-Slips do.
12 Pairs Stockings knitted.	1 Travelling Bag worked.
12 Pairs Socks do.	1 Footstool worked.
12 Caps do.	2 Table-Covers knitted of Wool.
18 Collars do.	4 Tidies do.
7 Pairs Cuffs do.	1 Bed-Cover knitted, Cotton.
	2 Toilet-Covers knitted, do.
	Repairs of Clothing going on at all times.

## ACCOUNT OF NEEDLE-WORK DONE IN THE FEMALE DIVISION OF THE EAST HOUSE IN 1854.

Blankets hemmed, . . . . .	100 Pairs.
Sheets made, . . . . .	110 —
Stockings knitted, . . . . .	24 —
Bed-Covers quilted, . . . . .	30
Striped Shirts made, . . . . .	110
Shifts made, . . . . .	180
Flannel Semets made, . . . . .	120
Flannel Petticoats made, . . . . .	120
Drugget do. do. . . . .	100
Gowns made, . . . . .	130
Aprons do. . . . .	86
Pinafores made, . . . . .	40
Pillow and Bolster Slips made, . . . . .	340
Caps made, . . . . .	300
Hoods do. . . . .	48
Handkerchiefs hemmed, . . . . .	770
Towels hemmed, . . . . .	313
Fine Table-Cloths do. . . . .	24
Coarse do. do. . . . .	18
Fine Table Napkins do. . . . .	24
Coloured Table-Cloths do. . . . .	6

In addition, all the necessary Repairs of Clothing, Bed-Linen, &c. have been made as usual.

WORK DONE IN THE UPHOLSTERY DEPARTMENT  
IN 1854.

Hair Mattresses made,	13
Do. cleaned and re-made,	26
Carpets made,	7
Do. repaired,	12
Hair Bolsters do.	76
Feather Pillows do.	50
Sets Bed and Window-Curtains made,	18
Straw Mattresses made,	114
Foot-Stools made,	4
Beds mended,	61
Window-Blinds made,	4
Sets Window Drapery,	2

The Male Pauper Patients have been employed as Printers, Joiners, Blacksmiths, Tailors, Shoemakers, Gardeners, Oakum-pickers, Farm Servants, and Servants of all work. Some of the Gentlemen, as already stated, have composed articles, put them into type, and completed the whole by also working at the press.

**PATIENTS ARE ADMITTED**

*ON THE FOLLOWING TERMS.*

**EAST HOUSE.**

BOARD OF PATIENTS FROM PRIVILEGED

PARISHES,.....	£0	8	6	d	WEEK.
FIRST RATE FOR OTHER PATIENTS,.....	0	9	0	—	
SECOND,..	0	15	0	—	

**WEST HOUSE.**

THIRD RATE OF BOARD,.....	£1	1	0	d	WEEK.
FOURTH,.....	1	11	6	—	
FIFTH,.....	2	2	0	—	
SIXTH,.....	3	3	0	—	
SEVENTH,.....	4	4	0	—	
EIGHTH,.....	6	6	0	—	

A Fee, on admission, is paid to the Institution by each Patient at the Second rate of Board and upwards. Should the Patient remain a year or longer, the Fee is charged on the expiry of the year, and that of each succeeding year of the Patient's residence in the Asylum.

## GENERAL REGULATIONS.

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1. The first Quarter's Board shall be paid previous to admission (except in the case of Parish Paupers, and thereafter at the beginning of the regular quarterly terms of 1st January, 1st April, 1st July, and 1st October.

2. No part of the Board, *for the first quarter*, of Patients at and above the rate of Fifteen Shillings per week, shall be returned, except in the event of death before the expiry of that period, in which case the Directors may allow a return of such proportion as they consider reasonable.

3. When any Patient is dismissed or dies during the currency of *any succeeding Quarter*, the Weekly Committee shall have power to determine, on an application being made to them for that purpose, whether any or what portion of the Board advanced shall be refunded.

4. Patients have no claim for remuneration for their labour.

5. Every Patient must be provided with proper Apparel. An accurate List of every Article brought with the Patient must, on admission, be delivered to the Steward or principal Attendant, to the Superintendent of the Ladies or the Matron, according to the House in which the Patient is placed, and the Name must be fully marked on each article. If any necessary part of Dress should not be duly supplied, after eight days' intimation has been given that it is wanted, it will be furnished by the House, and the cost of it charged against the Patient.

On applying to the Physician, the Patient will be carefully and expeditiously conveyed to the Asylum, the necessary expenses being paid to the Steward by the Applicant.

Patients in the WEST HOUSE may be visited every *lawful day* between 10 and 12 o'Clock; those in the EAST HOUSE, who are not Paupers, on Mondays, between the same Hours; and Patients who are Paupers, on Saturdays, also from 10 till 12 o'Clock. Only those who are duly authorised can be admitted to visit Patients.



## THE TWO FOLLOWING DOCUMENTS

ARE IN EVERY CASE INDISPENSABLE.

I. Warrant from the Sheriff of Lanarkshire, in terms of the Statute 55 Geo. III. cap. 69; 9 Geo. IV. cap. 34; 4 and 5 Vic. cap. 60; which will be granted on the presentation of Certificates of Lunacy from two respectable Medical Practitioners.

II. Written Obligation for Payment of Board, as well as for due observance of the Rules of the Institution, from one or two responsible Persons resident in Glasgow; or, in the case of Parish Paupers, from an Inspector of Poor.

Forms of these Documents will be furnished by the Physician, Dr. MACKINTOSH, Royal Lunatic Asylum; or by the Secretary and Treasurer, DONALD CUTHBERTSON, Esq. 110 West George-Street.

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## LIST OF PARISHES,

*Which, by contributing the requisite Sum, in proportion to their Population, have acquired the privilege of recommending their Insane Poor for admission into the Asylum, on the same terms with those of the City of Glasgow.*

AYR.	KIPPEN.
BALDERNOCK.	LANARK.
BARONY OF GLASGOW.	LARBERT AND DUNIPACE.
BONHILL.	LESMAHAGOW.
CAMPBELTON.	LOGIE.
CARMUNNOCK.	MONKTON AND PRESTWICK.
CATHCART.	NEILSTON.
CUMBERNAULD.	NEW-MONKLAND.
GREENOCK.	PORT-GLASGOW.
HOUSTON AND KILALLAN.	RENFREW.
KILSYTH.	ROTHESAY.