

**Forty-seventh annual report of the directors of the Glasgow Royal Asylum for Lunatics, submitted, in terms of their charter, to general meeting of contributors, 10th January, 1861.**

### **Contributors**

Glasgow Royal Asylum for Lunatics.  
Mackintosh, Alexander.  
Caldwell, John.  
Duthie, James.

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FORTY-SEVENTH ANNUAL REPORT

OF

THE DIRECTORS

OF THE

GLASGOW ROYAL ASYLUM

for Lunatics,

SUBMITTED, IN TERMS OF THEIR CHARTER,

TO

GENERAL MEETING OF CONTRIBUTORS,

10TH JANUARY, 1861.

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GLASGOW:

PRINTED BY JAMES HEDDERWICK & SON,  
PRINTERS TO THE QUEEN.

1861.

REPORT

THE DISCOVERY

GLASGOW ROYAL ASYLUM

FOR THE



GENERAL REPORT

1861

GLASGOW

PRINTED BY JAMES GILCHRIST & CO.

1861

1861

# LIST OF DIRECTORS, &c.

FOR 1861.

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

Mr. David Mackinlay,	}	from Town Council.
" John Thomson,		
" William Bankier,	}	from Merchants' House.
" Thomas Whyte,		
" Adam M'Lellan,	}	from Trades' House.
" Robert Lochore, Tertius,		
Dr. A. D. Anderson,	}	from Physicians and Surgeons.
" John G. Fleming,		
Rev. David Brown,	}	from General Session.
Mr. Joseph A. Wright,		
Sir James Anderson,	}	from General Body of Contributors.
Dr. John M. Pagan,		
Mr. William M'Lean,		
" John Smith,		
" John Brown, Jun.		
" Robert Aitken,		
" George Thomson,		
" John Cairns,		
The Chief Magistrate of Paisley,	}	<i>ex-officiis</i> .
Dr. Allen Thomson, Professor of Anatomy,		
" John M'Farlane, Professor of Medicine,		
" Alexander Mackintosh, Physician to the Asylum,		

## Weekly Committee.

Mr. M'Kinlay.	Mr. Bankier.	Mr. J. Brown.
" M'Lean.	" Smith.	" G. Thomson.

## Committee on Accounts.

Mr. Smith.	Mr. Aitken.
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## Visitors.

The Lord Provost.	Mr. Adam M'Lellan.
Sir James Campbell.	" Robert Lochore, Tertius.
Rev. David Brown.	" Joseph A. Wright.
Dr. A. D. Anderson.	" John Cairns.
" John M. Pagan.	" Robert Aitken.
Mr. John Thomson.	" James Murray.
" Thomas Whyte.	



## OFFICERS OF THE ASYLUM.

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### RESIDENT.

Physician - Superintendent.  
ALEXANDER MACKINTOSH, M. D.

Medical Assistants.  
DR. CHRISTIE AND DR. GILLAND.

Superintendent of Ladies.  
MRS. MAPLESON.

Steward.  
MR. JOHN CALDWELL.

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. JOHN ROBERTSON.

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

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THE DIRECTORS, in this their FORTY-SEVENTH REPORT, have to present to the Contributors and the Public the following statement of their management during the year 1860. The general results will be seen from the annexed Table:—

	<i>Males.</i>		<i>Females.</i>		<i>Total.</i>
Remained on 31st December 1859, ...	266	...	234	...	500
Admitted since,.....	93	...	111	...	204
	<u>359</u>	...	<u>345</u>	...	<u>704</u>
Dismissed Cured,.....	45	...	51	...	96
"    Relieved,.....	36	...	22	...	58
"    not Improved,.....	3	...	1	...	4
Died,.....	23	...	21	...	44
	<u>107</u>	...	<u>95</u>	...	<u>202</u>
Remaining on 31st December 1860,..	252	...	250	...	502
	<u>359</u>	...	<u>345</u>	...	<u>704</u>
Average daily number,.....	259	...	239	...	498
	<u>259</u>	...	<u>239</u>	...	<u>498</u>



The number of Patients treated this year does not vary much from the last, 704 being the number for 1860, and 708 for 1859.

The Directors have first to notice that, in consequence of the crowded state of the Asylum, they have been obliged to refuse admission to a great many Patients for whom application was made. They cannot, therefore, too strongly urge on the guardians of Lunatics the propriety of making the necessary inquiries before sending any one to the Asylum—it may be to be returned to them, thus subjecting the unfortunate Patient to great annoyance and possible risk.

Occasionally a Patient has been brought to the Asylum in a dying state, and has sunk within a few hours after admission. Perhaps the exhaustion occasioned by the journey accelerated the closing scene; while there can be no doubt that the death itself unduly added to the mortality of the House.

Many of the Patients, on admission, were in a very weak state of body, their mental malady being often complicated with Paralysis, Epilepsy, or other diseases, which rendered their recovery almost, if not quite, hopeless. A considerable number proved to be very expensive, their rate of board being totally inadequate to cover the outlay for attendance alone, without taking into account food, stimulants, or lodging. For example, one of the petty-officers of a ship became insane during a voyage to a distant land, and was obliged to be confined to a small space, and restrained for several months before the ship returned with him to this country. On admission, his mind appeared to be nearly gone, and his bodily health was at an exceedingly low ebb. With-

out going into detail, it may be stated that this Patient cost the Asylum several pounds per week, while the sum paid for him did not cover a fourth part of the outlay. For another Patient, the cost of medicine alone exceeded the amount paid for her—attendance, lodging, board, and cordials having all to be defrayed by the Institution. It is obvious that such Patients are, in a pecuniary point of view, ruinous to the Asylum, which is already heavily burdened with debt; hence, donations and legacies are urgently required to place it in easy circumstances, so as to enable the Directors to give all the comforts of life to that class of Patients just bordering on pauperism, many of whom have seen better days, or whose means are inadequate to meet the heavy outlay they require.

The Sheriffs, at the instance of Procurators-Fiscal, sent 20 Lunatics to Gartnavel this year. Several of those from Lanarkshire having immediately recovered, under the treatment of the Asylum, and before the expiration of the statutory time, were at once restored to liberty, when they appeared before their lordships to be personally examined.

The Directors add with pleasure that a few Patients came voluntarily to place themselves under treatment, having, on several previous occasions, experienced its benefits.

The Directors will now briefly notice the Dismissals. The cases are 96, or nearly one half of the number admitted. It should be borne in mind that the Admissions include the Incurable as well as the Curable. One of the cured is a rare case, a recovery from Epilepsy, and from Insanity resulting from it, in a rather delicate per-



son, who delighted and amused his fellow Patients with his artistic and humorous exhibitions, and received the applause of all who heard him. He was a universal favourite, was long in the Asylum, and, after a lengthened probation to test his recovery, was dismissed in May last, and continues to keep well. Another case was that of a respectable widow from Forfarshire, who had been for many years the devoted nurse of an imbecile helpless lady in the country, and who, by her over-anxious, long-continued, and unremitting care, both by night and by day, exhausted her vital powers, and then fell into a state of melancholy. The prospects of recovery, judging from her mental and physical prostration on admission, were very slender indeed. For more than two years of her residence in Gartnavel, little change was observed in her mental condition. After this, however, she began to recover, and then spontaneously did all in her power to promote the comfort of her more helpless fellow Patients. She left the Asylum at the end of spring, perfectly recovered, and full of gratitude to all connected with it. Other and extraordinary cures took place in old and most unlikely cases. Recovery in cases of such long standing, where the Patients were obliged to be for years under treatment, ought to console the relatives of those mentally afflicted.

As the following case is very interesting, in a surgical point of view, and reflects credit on the Surgeon to the Asylum, Dr. FLEMING, the Directors will very briefly notice its leading features:—A female Patient, not by any means in robust health, was suddenly seized with symptoms of strangulated *hernia* (rupture). Every other means having been perseveringly tried without relief to



the sufferer, Dr. FLEMING, with her consent, to save her life, proceeded to perform the necessary operation, which he did successfully. She bore the operation well, and expressed her gratitude for all that was done for her. After many anomalous symptoms, on the twenty-seventh day after the operation, she was pronounced to be well. It remains to be observed that, from a short time after the first symptoms of this most painful disease making their appearance, no mental alienation could be detected, and no difficulty, such as is generally found among the insane in dealing with similar cases, was experienced.

The Directors have satisfaction in stating that the mortality this year, notwithstanding the unfavourable circumstances already alluded to, is lower by five than last year. For a lengthened period the Asylum has been in a remarkably healthy state, and the Patients have not suffered from the effects of cold in this most inclement season, so like an Arctic winter. Blankets have been liberally distributed, with warm clothing. The large galleries and dormitories continue to be heated on Haden's plan, some having the benefit of open fires besides; and it may be concluded that, without some such apparatus, it would be impossible to keep up a comfortable temperature in apartments of their dimensions. The parlours and other public rooms and infirmaries are heated by means of open fires.

The Directors will next advert to the general treatment of the Patients. As usual, certain of them are permitted to go to exhibitions in the city, and to town and country, either attended or unattended, as circumstances require, as also to their respective places of worship. The Roman Catholics generally attend at the chapel at Maryhill,

about a mile and a-half distant. Several Patients have also been permitted to reside at the coast for weeks at a time, as formerly. No change of consequence has occurred in regard to amusements or occupations. From the libraries in town every new book and periodical is received. The newspapers and other periodical literature of the day form a never-ceasing fund of pleasure and amusement to the Patients. A billiard-table for the Patients in the East House has been provided. There has always been one in the West House.

The philanthropic Directors of the Glasgow Abstiners' Union continue to do all in their power for the benefit of the Institution, and have been most successful in their endeavours to procure, for the entertainment of the Patients, the services of the distinguished *artistes* whom they have had to perform before the public weekly in the City Hall. The Directors of the Asylum would therefore present their acknowledgments to Mr. M'NEILL, the President, to the Directors and Members of the Union, to their indefatigable Secretary, Mr. LAWSON, as well as to the professional ladies and gentlemen who charmed and delighted the Patients.

To Mr. GEORGE ROY, for his original and very effective entertainments, which called forth the loud plaudits of the Patients, they likewise offer their best thanks.

Some of the Patients were disappointed at not receiving the visit anticipated from Lord SHAFTESBURY, whom they expected to go over the Asylum, had he been able to attend the meeting of the Social Science Association, which was held in Glasgow in September last.

Having now reported on the state of the Patients, the Directors will proceed to notice the changes in the Staff



of the Institution, which have occurred in the course of the year. Dr. CASKIE and Dr. CAMERON having resigned in the autumn, soon after left the Institution—the former to settle in London, and the latter, who had passed a competitive examination before the Board at the India House with great eclat, to join the army at Chatham as an assistant-surgeon, preparatory to his proceeding to India. In the performance of their duty, and at all times, they gave the greatest satisfaction to the Directors. They are young gentlemen of great promise and talent, and the Directors cannot but wish them success in their future career.

Dr. CHRISTIE and Dr. GILLAND having been highly recommended to the Directors, and having produced most satisfactory testimonials as to their character and qualifications, including considerable experience in hospital practice, were appointed to succeed Dr. CASKIE and Dr. CAMERON, and accordingly entered on their duties, as Medical Assistants, in the beginning of October.

Early in the year, the Directors took into their consideration the propriety of raising the Chaplain's salary, on account of his meritorious services; and after due deliberation they augmented it accordingly.

The Directors will next refer to the department of the Master of Works. Every year, since the erection of the present Asylum in 1843, they have done all in their power to improve it, and this, too, even in the face of the debt upon it.

They have now to state that, in addition to keeping up the tear and wear of the House, for which six tradesmen are constantly required, they have this year expended, and principally by contract, for painting and

papering, about £330; for a new hydro-extractor for wash-house, with protector, upwards of £70; and for water-pipes, which were laid from the gate and around the Asylum, with seventeen fire-cocks, hose, and carriage complete, about £310.

These pipes introduce the Loch-Katrine water from the north, while the old pipes bring it from the south. The rain water is still used for the wash-houses.

The Directors had long been anxious to have an abundant supply of water at hand, with fire-plugs all round the building, for the better protection of the Patients in the event of any accident occurring from fire; and, taking advantage of the copious supply, immediately after its introduction into the city, passing the gate, they have not hesitated to spend upwards of £300 to give the greater safety and security required.

Several of the floors had to be renewed; and the walls, in some cases, were covered with light wood. The Asylum tradesmen, assisted by some of the Patients, made patterns of castings for three new boilers for the heating apparatus.

Three of Smith's patent steam indicators were placed for safety on the boilers, which have been repaired. In consequence of the supply of water being now by gravitation, the engine is not required to pump the Loch-Katrine water to the cisterns. It was found necessary to provide another apparatus for feeding the boilers; and for this purpose one of Gifford's steam-boiler injectors was introduced.

The consequence is that the steam-boilers are now supplied with hot water, almost at the boiling point, from the condensed steam of the cooking apparatus;



and this plan has been found to be a great saving of fuel and water, while, at the same time, it greatly prevents the destruction of the pumps.

A great deal of plumber, carpenter, and painter work has been done.

Many galleries, parlours, and bed-rooms in both Houses have been decorated or furnished anew, and 549 pieces of paper have been replaced on the walls. These repairs have occasioned their own as well as other tradesmen to be constantly employed in the Asylum. About a thousand yards of new carpeting, oil-cloth, and matting have been renewed; and also, as in former years, furniture and pictures have been added.

One of the out-offices on the farm-steading has been made more suitable for its purpose, with the assistance of an additional mason; and many of the walls were pointed, to preserve them from injury. Other alterations, additions, and improvements are still required, and have been under the consideration of each successive Board of Directors, since the removal of the Asylum from the Parliamentary-road to Gartnavel, and nothing but the want of funds has prevented their being carried into effect.

The Directors now pass on to the department under the charge of the Gardener and Farm-Overseer. At the commencement of the year little out-door work could be got done, in consequence of the wet weather which has been so prevalent during a great part of it. The boundary paling, which is often broken on Sundays, is constantly requiring repair; and 1,500 larch stakes had to be purchased, to replace those worn out or destroyed by mischievous persons from without. About 600 yards



of drains have been cut on the grounds of the farm and garden, four feet deep, and laid with two-inch pipes. The Patients had also a great deal of work in cutting about 1,000 yards of ground, from three to six feet deep, for the water-pipes, and making fifteen deep holes for the fire-plugs, and 550 yards of drains to carry off the water from them. They also worked well on the harvest field; and, without repeating the detail which is to be found in the Treasurer's statement, it may be sufficient to state here that, notwithstanding the weather, the crop was an average one.

In the garden, only the carrot crop failed; everything else in it was very productive, especially strawberries and gooseberries, which were unusually abundant and good, and were served up daily to the Patients in both Houses.

The Patients were much benefited by employment of all kinds, but especially by out-door labour. A very few would not do any work the whole year round, excepting to assist in cutting down the crops and stacking the corn.

The Directors take this opportunity of recording their conviction, that it is the Patients who work who are the most likely to recover, and have the best chance of cure, and that it is a great mistake in those connected with them to try to prevent them from employing themselves. Even when a cure cannot be effected, such work tends very much to keep the Patients in good bodily health, to tranquillise their nervous systems, and produce what is of the utmost consequence to them—sound and refreshing sleep.

One of the principal buildings on the farm-yard was,

at their last visit, ordered by the Committee to be enlarged, and this was done at a small cost. The Gardener reports this to be a decided improvement.

On the parish-road a great deal of expensive work has been done by the Asylum. The foot-path has been continued from the gate westward to Claythorn; but the cart-road is still in a very bad state, and, unless the Statute Labour Committee allows more money, it is impossible for the Asylum to put or keep it in order.

The Harvest-home Ball went off in the usual manner, to the delight of the inmates, and the strangers, including the reporters who were present.

The Directors cannot but thank the gentlemen of the press for their constant attendance; and, in doing so, take leave to express the hope that their valuable services to the Institution may be continued.

The Abstract of the Treasurer's Accounts, annexed to this Report, will explain how the financial affairs of the Institution have proceeded during the past year. It will be seen that several sums have been received from legacies, amounting, after deduction of duty, to £591 : 9s. 2d., for which the Directors beg leave thus publicly to express their thanks. They have thereby been enabled to make a little further progress in reducing the debt of the Asylum; but any considerable diminution of it has been prevented by the increase that has taken place in the prices of some of the principal provisions required for the House, as well as by a good deal of extra expenditure incurred during the year, and alluded to in the present Report.

While referring to the state of their finances, the Directors cannot help remarking that the present gene-



ration of their fellow Citizens have yet much liberality to exercise, ere they can put themselves on a footing of equality with their predecessors in the support of this Institution. On looking back to the annual Reports, issued about or soon after the time of its commencement, now forty-six years ago, and contrasting them with those of a more recent date, the truth of the remark now made very clearly appears. The Public, to a very great extent, are probably under the belief that the Asylum has a source of revenue from the board of its own Inmates, and is consequently independent of extraneous aid, which would no doubt be the case, if the original cost of the grounds and buildings were discharged. But it would be too much to expect that this should be done from the annual revenue received for the maintenance of the Patients; and, therefore, additional Contributions and Legacies are greatly needed, to assist in the reduction of the remaining debt, the payment of interest on which forms a very large item in the expenditure of the Directors.

The Directors have now to thank the members of the Weekly Committee, and also the House Visitors, for their valuable services.

Finally, they thank the Medical and Surgical Officers, the Treasurer and Secretary, the Superintendent of Ladies, the Chaplain, and other Officers, for their services during the past year.

OF

FOR THE YEAR 1860.

## CHARGE.

Recovered of Board for 1860,.....	£ 14,909	4	8	
"    of Arrears, per last Account,....	688	4	2	
				£15,597 8 10
Proceeds of Farm Produce, &c. sold,.....		775	9	4
Advances for Patients in 1859, recovered in 1860,.....		762	16	0

Executors of the late James Ewing, Esq. of Strathleven, farther to ac- count of his Legacy of £ 2,000,...	£ 250	0	0
Less—Legacy-duty,.....	25	0	0
	<u>£ 225</u>	0	0

Executors of the late James Ander-				
son, Esq. of Highholm,.....	£	100	0	0
Less—Legacy-duty, &c.....		10	10	10
			89	9 2

Executors of the late Miss Elizabeth Arthur, St. George's-road, Glasgow, free of Legacy- duty,.....	250	0	0
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Executors of the late Miss Jane		
Good, Hill-street, Glasgow,.....	£ 30	0 0
Less—Legacy-duty,.....	3	0 0
	<hr/>	27 0 0

	591 9 2
Interest on Deposit Account with National Bank,.....	5 17 11
with Union Bank,.....	12 17 0
	<hr/> £17,745 18 3 <hr/>



## DISCHARGE.

Balance due to the Treasurer, per last Account,..... £11 11 0

## HOUSE EXPENSE, viz.

Butcher Meat,.....	£3,293	9	9	
Meal, Barley, Peas, Salt, &c.....	431	7	5	
Flour, and Bakers' Wages,.....	744	3	2	
Groceries,.....	754	8	7	
Milk,.....	423	17	9	
Butter and Cheese,.....	459	18	8	
Potatoes,.....	112	10	0	
Eggs, Fish, and Poultry,.....	309	11	3	
Medicines,.....	90	13	9	
Coal and Coke,.....	498	7	0	
Gas-Light and Candles,.....	161	0	7	
Soap and Soda,.....	155	16	0	
Water-Rent since 10th March 1859,.....	254	17	1	
Wine, Spirits, Porter, Ale, and Beer,.....	639	12	10	
Fruit,.....	31	5	5	
				8,360 19 3

## SALARIES, viz.

Physician,.....	£500	0	0	
Deduct Fees received,.....	322	7	0	
				£177 13 0
Treasurer and Secretary,.....	300	0	0	
Medical Assistants,.....	193	5	8	
Chaplain,.....	70	0	0	
Ladies' Superintendent,.....	100	0	0	
Steward,.....	90	0	0	
Surgeon,.....	26	5	0	
				957 3 8

## REPAIRS AND IMPROVEMENTS, viz.

Wages of Tradesmen,.....	£432	18	0	
Painting and Paperhanging,.....	279	2	11	
Ironmongery,.....	59	14	4	
Oils, Colours, &c.....	32	19	8	
Building Materials, &c.....	57	2	3	
Plumbers' Materials,.....	52	7	4	
Repairing Boilers,.....	13	8	6	
Laying Water-Pipes,.....	225	0	0	
Stakes and Rafters,.....	29	0	0	
Miscellaneous,.....	26	6	3	
				1,207 19 3
Furniture,.....		922	6	7
Servants' Wages,.....		2,257	9	9
				£13,717 9 6
<i>Carried forward,.....</i>				



<i>Brought forward</i> ,.....	£13,717	9	6
Outlays for Patients, during Quarter ending 31st Dec. 1860, } yet to be recovered,.....	806	16	11
Expended on Garden,.....	157	17	10
"    on Farm,.....	166	4	7
Interest on Credit Account with National Bank for 1859,....	931	9	2
"    "    with Union Bank for 1860,.....	752	10	0
Union Bank, in part principal Sum in loan,.....	225	0	0
Lodged in National Bank on Deposit Account,.....	405	0	0
"    in Union Bank    "    "    .....	5	0	0
<b>MISCELLANEOUS CHARGES, viz.</b>			
Assessed Taxes, Income-Tax, Poor-Rates, &c. £205 17 6			
Books, Periodicals, and Stationery,.....	66	8	6
Printing and Advertising,.....	43	3	11
Postages and Incidents,.....	35	16	4
Insurance,.....	38	1	11
Tolls, Carriage Hires, and Stabling,.....	58	9	9
Rent of Rooms for Directors' Meetings in Town,.....	13	0	0
Subscription to Stirling's Library,.....	3	3	0
For taking charge of Parcels in Town,.....	9	0	0
Repairing Carriage and Saddlery,.....	47	4	5
Law Expense,.....	22	16	10
Carriage of Parcels to Gartnavel,.....	5	0	0
Miscellaneous,.....	32	2	9
		580	4 11
		£17,747	12 11
<hr/>			
Amount of DISCHARGE, as above,.....	£17,747	12	11
"    of CHARGE,    "    .....	17,745	18	3
			<hr/>
Balance due to the Treasurer,.....	£1	14	8
			<hr/>

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BOARD of PATIENTS, yet to be recovered, viz.

DEBTS.

National Bank, on Credit Account,.....	£20,000	0	0
Union Bank, .....	14,370	0	0
National Bank, Interest,.....	945	2	7
Debts due on open Account,.....	2,432	18	8
Balance due to the Treasurer, per preceding Account,.....	1	14	8
	<u>£ 37,749</u>	<u>15</u>	<u>11</u>
Amount of PROPERTY, as above,.....	£81,690	14	9
of DEBTS, .....	37,749	15	11
Balance in favour of the Institution,.....	<u>£43,940</u>	<u>18</u>	<u>10</u>



REPORT  
BY  
THE PHYSICIAN SUPERINTENDENT,  
TO THE DIRECTORS,  
For 1860.

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IN submitting the Medical Report for the past year, I beg leave to state that, at the beginning of 1860, 500 Patients of all classes remained in the Asylum, and that 204 were admitted, which made the total number treated during the year 704. It is a remarkable coincidence that the number of Admissions in 1860 should be the same as in the previous year. There was a difference, however, in the relative number of each sex, for while in 1859 the numbers were 115 and 89 respectively, in 1860 they were reversed, the numbers admitted being 93 males and 111 females. The disparity this year is unusual—the statistics of former years showing that the male admissions were generally in excess. It may be partly accounted for from the fact that, the Male Division being overcrowded, numerous applications for admission into it were obliged to be rejected.

The re-admissions have been fewer this year. Many of them had enjoyed several years of mental health. We observe that as the attacks increase in frequency, the disposition to be affected increases in the same ratio. A

considerable number of the admissions were suicidal Patients, and several had made attempts to destroy themselves before they were sent to the Asylum. Two had swallowed large doses of laudanum; one had attempted to stab himself; and another had inflicted a severe wound in his throat with a razor, which occasioned the loss of a large quantity of blood. Only five cases of General Paralysis were admitted.

From the Table appended, showing the social condition of those admitted, it will be seen that the number of the unmarried considerably exceeds that of the married. This result is more fully established than it was last year, when a similar conclusion was elicited. The results derived from our statistics agree with the conclusions of Dr. PARCHAPPE, in his analysis of the statistics of the Bicêtre and Salpêtrière Asylums, that celibacy may be regarded as a predisposing cause of Insanity, and that it appears to act almost equally on both sexes. In last year's statistics, the opinion, entertained by ESQUIROL, that unmarried men are more liable to Insanity than female celibates was corroborated. This year the reverse is the case, there being a considerable preponderance in the number of unmarried females admitted.

From the Table which shows the ages of the Patients admitted, it will be seen that the three quinquennial periods between 25 and 40 yield by far the largest number, and that the numbers of each period almost exactly correspond. This result, similar to that of last year, is in accordance with Asylum statistics. Between the ages of 45 and 50 there is a very striking increase in the number of females admitted, the numbers being respectively 2 males and 13 females. The reason of this inequality



is obvious, and no doubt depends on the marked change which the whole female organization undergoes at the second critical period of life. The number of those admitted below 20 years of age is very small, constituting but  $\frac{1}{15}$ th part of the whole.

CAUSES.—Those stated cannot be altogether depended on, and must be considered as mere approximations to fact. In the great majority of cases, Insanity is produced by the influence of exciting causes acting on a constitution already predisposed. Hereditary tendency, and the condition of brain induced by previous attacks, are probably the two most frequent sources of this predisposition. The former is the most common. It has been stated that Insanity is, of all diseases, the most frequently hereditary. One-third of the re-admissions were found to be hereditarily disposed to Insanity; and, perhaps, even a larger number, could their malady have been traced.

The causes may be either predisposing or exciting, or both; and in different cases we have found that the same circumstance may have acted, in the one as a predisposing, and in the other as an exciting cause. The general opinion that physical causes are the greatest in number is fully confirmed by our statistics of this as well as of other years. Of those admitted, 21 per cent. were attributed to moral, and 78 per cent. to physical causes.

Of the moral causes, excessive mental excitement, either intellectual or emotional, is probably the most common. Thus, under the head of "Religious Excitement" there is nearly 9 per cent. of the total admissions, which is the greatest number ever admitted into the



Asylum from that cause; and it is a curious fact that nearly two-thirds of the whole number were males, from which it might be inferred that men are more strongly impressed than women by religious convictions. Other causes, however, such as Hereditary Disposition, or Masturbation, by weakening the system, may have in a great measure tended to produce this result. The two most common physical causes have already been noticed. The third cause on the list is Intemperance—the abuse of alcohol—which still sends many of its victims to this place. Self-Abuse, or Masturbation as the French call it, was assigned as the cause in 4 per cent., who were all males. Several of these were highly educated, and possessed of first-rate mental abilities.

DISMISSALS.—We shall now notice these, including under this head, Cures, Cases Relieved, Dismissed not Improved, and Deaths.

CURES.—The appended Tables show that the percentage of cures during the past year is very favourable. Of the total number treated, 13·6 per cent. have been dismissed cured, being 2 per cent. higher than last year. Of those treated to a conclusion, 47·7 per cent. were cured, being 6·5 per cent. higher than last year. Of the number admitted, 47 per cent. have been cured, being 7 per cent. higher than last year. Very many of the cases admitted were known to be incurable; so that if such cases were deducted, the per centage of cures would rise much higher. As the case stands, however, we have every reason to be satisfied with the general result, more especially when we consider that those dismissed as cured

left the Asylum only after a lengthened trial, and when we had every reason to believe that the cure was complete. It has always appeared to us that the complete restoration of coherence, the absence of all delusion, and the appearance of perfect mental health, are not to be regarded as reasons for *immediate* dismissal; for many, although in this state in an Asylum, speedily relapse when they are at large, because of their unfitness for self-government. In many cases, when friends were importunate, Patients have been dismissed, to be speedily re-admitted. When there was any doubt in regard to their mental state, they have been allowed to go home on trial for a time, that we might have every reason to be satisfied in regard to the genuineness of the cure, before final dismissal.

The question, When is a Patient sufficiently well to return to the world? often becomes, from many considerations, a very difficult one to answer. In the Asylum, the Patient may be quite recovered to all appearance, attending concerts, &c. in the city, or walking into the country, attended or unattended; but the moment he feels himself to be free—as happened in a case in this House, after long probation,—and before he leaves the grounds on his way out a dismissed man, excitement may begin and gradually increase, delusions return, violence follow, and the legal Authorities may be again compelled to interfere, to arrest and secure the Lunatic.

In regard to the form of Insanity in those cured, we may observe that 60·6 per cent. were cases of Acute Mania, 4·1 of Chronic Mania, 26 of Monomania, and 8·5 of Dementia. The relative proportion of cures, in the different forms of Insanity, does not exactly corres-



pond with last year, but from a very limited number of cases no useful data can be deduced. The general result, however, holds good, that while Acute Mania is the most common form of Insanity, it is also that most amenable to treatment.

Early and correct diagnosis, followed by the proper treatment, is of the greatest importance where the brain is the organ diseased, and the interests at stake, consequently, so large. We have but seldom the opportunity of treating cases from the very commencement; for Patients are not generally brought to an Asylum until every other plan of treatment has been tried—their systems reduced, both mentally and bodily—life at a low ebb—and in such a state that they could not be kept any longer at home. The statistics of this, as in former years, show the great importance of early treatment.

Of those cured, 57·3 per cent. were cases of Insanity, which had existed, by report, for not more than one month before admission. In 25 per cent. the duration of Insanity has been above one month but under four. In 5·1 per cent. above four months but under twelve. One Patient cured had been insane for seven years before admission. The same results, in nearly the same ratio, are deduced from the Tables of last year.

In regard to the length of residence in the Asylum of those cured, it is interesting to observe that 25 per cent. were under treatment for a period under three months, 55·1 per cent. above three months but under six, 21·9 per cent. above six months and under twelve, 11·4 per cent. above twelve months but under three years, and 6·1 per cent. above three years. The same results are deducible from last year's Report. We thus learn that

by far the greater number are dismissed cured within six months, and that a mere fraction require treatment for more than twelve months. It is worthy of observation that three Epileptics have been dismissed cured—as Insanity connected with Epilepsy, and probably depending upon it, is most unfavourable as regards prognosis.

Although it may appear somewhat paradoxical, we say with truth that we are never more delighted with our friends, as we call our Patients, than when we see them turn their backs upon us, and leave the Institution in their right minds. It cannot but be that out of 96 cases of cure many of them were of great interest, and well worthy of special notice. There are, however, so very many such cases, that we cannot enter into their details.

This year 73 Patients have been Dismissed Relieved, and 4 in *statu quo*.

DEATHS.—While the per centage of Cures is greater than last year, it is gratifying to observe that the per centage of Deaths is somewhat less.

Our rule is that Patients shall not be admitted into the Asylum in a moribund state; but, in some cases, it would be inhuman to refuse admission, so that our bill of mortality is larger than it might be. This year 5 Patients have died during the first week of residence in the Asylum, and 2 during the second week. These were all moribund on admission. One of these was a Patient who had nearly destroyed himself with a razor on the day previous to his re-admission, and who succumbed within five days after he was brought hither. He had been prematurely removed, and was most anxious to be brought back to the Asylum to die.



The mortality of the Asylum may be viewed under two distinct aspects—first, as regards those diseases of the brain and nervous system, generally connected with other causes of Insanity; and, secondly, as regards those diseases common to all classes, and incidental to the Insane. Eighteen Patients have succumbed to diseases of the brain or nervous system, and three to exhaustion from Acute Mania; while twenty-three have died from diseases treated in general hospitals. Diseases of the brain and nervous system have been, as may be expected, the most frequently fatal; the next in order are pulmonary diseases; and next, diseases of the alimentary canal. Leaving out of sight, as we are entitled to do, these fatal cases depending on disease of the brain, such as general paralysis, we have 3·1 per cent. of mortality depending on general disease. Even this low figure might, with perfect justice, be further reduced, by deducting those brought to the Asylum in a moribund state.

A glance at the appended Table, showing the causes of death, will satisfy that nearly all the cases we had to do with were diseases in which treatment, unfortunately, could do but little more than alleviate suffering, or ward off for a time inevitable destiny.

Although the mortality has been small, it by no means follows that the Insane are but little liable to general disease, or that their powers of endurance are unusually great. The very reverse is the case, notwithstanding the exceptions. We have the advantage, however, of having the Patients constantly under observation, so that disease is detected in its first invasions, and generally checked before it is beyond human control. Strict attention to cleanliness, ventilation, warmth, wholesome

food, exercise, with other preventive means, are constantly employed, and prompt medical treatment is always at hand to arrest, if possible, the progress of disease.

In the month of January, and during the spring months, the delicate Patients suffered severely from the effects of the inclement season; it has been, however, the subject of frequent remark among the Medical Officers, that, although the weather has been unusually severe during the winter months, and particularly so at this Christmas-time, there has not occurred a single case of Pneumonia, or one of Bronchitis, requiring any amount of care. There has been a much larger per centage of illness among the Servants of the Institution than among the Patients.

The most common form of disease, which has required much attention, has been Gastro-Enteritis; but this has been confined almost exclusively to the Female Division of the East House, the crowded state of which may have been one of the causes of this malady. It has been most frequently met with among those Patients whose systems were deficient in tone, the aged, the infirm, and the idiotic who take only involuntary exercise. In the latter class, there is generally torpidity and extreme sensitiveness of the bowels alternately; in the former, the alimentary canal is very irritable, and while the greatest care has to be employed in regard to diet, it is not always that the Patients can be got to take, if anything, only what is good for them.

The remark has been frequently made that diseases of the alimentary canal are by far the most common class of diseases among the poor Insane, and this has been fully verified by the experience of the past year. When



we consider the constant care and attention that the unfortunate inmates of an Asylum require, and the absolute necessity that exists for their diseases being diagnosed by objective symptoms alone, we are daily impressed with the conviction that it is not in their own homes, but in such places alone, especially for the poor, that their comforts can be attended to, and their lives prolonged.

A few cases of very considerable interest, in a surgical point of view, have been treated in the Asylum during the past year,—particularly one, already referred to in the Directors' Report, in which the operation for strangulated femoral hernia was performed, followed by artificial anus and spontaneous cure within six weeks after the operation.

A considerable number of *post mortem* examinations have been performed on the head and different parts of the body, and from these much useful information has been obtained regarding the symptoms and treatment of disease in the Insane.

In several cases where Insanity had been of long duration, and gradually proceeding from bad to worse, extensive disease was found in the bones of the cranium. In one case there were several points of exostosis at the base of the skull, and also ossification of some parts of the dura mater. In another case, that of an aged female who had been deaf and dumb from infancy, and insane for an unknown length of time, there were marks of exfoliation of the inner table of the skull of very great extent; and, from the appearance of the surface from which the exfoliation had taken place, it was evident that the diseased state had occurred at an early period of life

—in all probability, the same cause which produced deafness was the origin of Insanity.

Circumstances of great interest were connected with the previous history of many of those who died during the past year; but the case of one—a gentleman of fortune—is so remarkable that we cannot refrain from entering into some of its details. Most painful and distressing circumstances—connected with the death of a beloved relative—acting on a highly educated, extremely conscientious, refined, and exquisitely sensitive organization, induced an attack of Acute Melancholia. He gradually became worse, until he became dead to all around him, falling into a state of total unconsciousness. After emerging somewhat from this state of mental and bodily torpidity, he was placed in an Asylum, whence, after a residence of several months, he was transferred to Gartnavel. On his admission, he was found to entertain some very remarkable delusions. He believed that at the time he became unconscious, he really had ceased to exist, and had been buried, and that his soul had come back to the world shortly before he had been first confined. He gravely stated that his old body still lay in the village church-yard, and expressed his determination to dig it up—in obedience to a Divine command—and thereby to break the spell which bound him; for he believed that although he spoke and felt like other men, all these things were mere illusions, cunning artifices of the Evil One, devised to delude him and intensify his misery. He also believed that he had received a command from Heaven that he should destroy himself in the same manner that a relative had done, because this deed was laid to his charge. He was in the



world, but not of it. To him time had ceased to be, and with it all hope of pardon and peace had for ever fled. In a state of the most intense mental agony he continued to exist for some time, but he at length began gradually to emerge from this winter of despair, as was evinced by his reviving taste for the literature of the day. At this time, fortunately, we happened to have a Patient who was a compositor, and in such a state that he could follow his occupation. The vigorous and highly-cultivated mind of our Patient—now bursting its icy fetters—became absorbed with the idea of a weekly paper, containing contributions from the literary inmates of the Asylum. To him no difficulties were insuperable; so that, he having undertaken the editorship, and the compositor his part of the work, the *Gartnavel Gazette* made its second appearance. In a short time the compositor became *compos mentis*, and was dismissed, so that it was expected that the paper would be doomed to a premature death. Our editor, however, determining that it should not die, undertook the additional duties of compositor, so that the periodical continued to appear. His whole being was in the work, and the printing-room was his home. Many of his articles, but more especially his notes and critiques on Shakspeare—whose works he had most thoroughly studied—display a mind comprehensive in grasp and subtle in perception. The constant application which this work spontaneously entailed upon him was accompanied with the happiest results; for day by day he became less reserved and taciturn—forgot his sorrows—and, by-and-by, the summer of a new life shone upon him; and he, too, like the compositor, was dismissed cured. Shortly afterwards he



went abroad, and, after months of voyaging and travelling, he determined to return to his native land; but having taken out his passage-ticket, and had his luggage conveyed on board, he was seized with an irresistible impulse to return himself by a different vessel. Shortly after his safe return to Scotland, he heard that the vessel containing his luggage, and by which he himself intended to have returned, had been destroyed by fire while at sea! This circumstance, in particular, operated so powerfully on his over-sensitive brain that he became again ill mentally, displaying strong suicidal tendencies. So, one evening, he walked into my library, and thus addressed me in a very peculiar and determined manner:—"I have come to consult you, Doctor, and to return to Gartnavel, because I am not well. Will you allow me to remain now?" I was then obliged to decline; but having accompanied him near to his lodgings in Glasgow, I made him promise not to injure nor to attempt to hurt himself in any way, and to meet me next day at noon, in Glasgow, at the house of his relative, to arrange matters. All this he did most punctually, and then voluntarily returned to the Asylum. For some months he continued in great mental agony and alarm, frequently shouting, in wild tones—"Fire! fire!" After this he became more composed, showed a great attachment to a very feeble Patient, to whom he paid the most marked attention. This brief period was speedily followed by a state of the most intense mental anguish—nothing seeming to fill the mind but its own sorrows. He now obstinately refused all sustenance, and for months he was fed by means of the stomach-pump. He then suddenly began to take food, and to show symptoms of returning reason. His long



abstinence, combined with his most miserable and depressed mental condition, left him in a state of extreme bodily exhaustion, from which, however, he gradually recovered, so that in a short time he was able to take out-door exercise within and beyond the grounds, and also to visit his friends in town. Suddenly, however, he became worse, but this time the form of insanity changed—he became very Maniacal. During the paroxysms, his mind was very acute and delusive. He believed that his spirit was *en rapport* with those of his deceased relatives—with one in particular; and that he had revelations from Heaven. All his actions he endeavoured to explain by mathematical demonstrations. During the intervals of his paroxysms, he amused himself by writing paraphrases of the Psalms, poetry, and dramas, and also by sketching likenesses of his fellow Patients. His own likeness, taken by himself at the mirror, displays mournful traces of a diseased imagination—his locks being represented as serpents and furies. Throughout the whole of this new phase of his disease, he constantly referred to painful family circumstances, and showed a strong desire to be possessed of a razor. Still, his suicidal propensities did not appear to be so strong as formerly. Again he suddenly became depressed in spirits—at first refusing everything but bread and water, and finally persisting in total abstinence. Remorse, misery, and deepest despair now took possession of his whole soul, and on him all kindness and sympathy were bestowed in vain. He fancied that we were prompted by Satan to address to him kind words, and to hold before him bright hopes, to intensify his misery by the contemplation of what could never be realised in his experience. His delusions

seemed to be engrained into his very being, forming, as it were, a part of himself. For six months he was again fed by means of the stomach-pump several times daily; but now his bodily health became completely undermined, and his own expressive language, as to the impossibility of his life being prolonged, seemed about to be proved true. We have often seen such prognostications verified. For months, or years it may be, Patients will repeat, and in an agony of mind, that they feel themselves to be in dying circumstances, while they are becoming more and more depressed and miserable daily. This language is frequently the forerunner of death. The Patient whose case has now been somewhat detailed, unlike others similarly affected, did not desire a change of residence. But even when this desire has been gratified, it has not prevented the approach of the event they had so long expected. At last he was suddenly seized with a fit of Epilepsy, and, in the presence of the relative he had always loved best, he expired. Such was the end of this unfortunate gentleman, who—although entailing an immense amount of labour and anxiety during his long illness—has, on account of his splendid talents and generous disposition, his memory engraven on the hearts of all who knew him.

What extraordinary and true books might be written of the life and experiences of insane people in Asylums, and also of persons disordered in mind who may never have been so confined!

TREATMENT.—The Treatment of Insanity has undergone no marked change. Very many cases in the Asylum are quite hopeless as regards cure, so that we have



merely to attend to the general health, and try to alleviate particular symptoms when they appear. Still, there are many Patients under active treatment, in reference to whom hopes of ultimate recovery are entertained. The treatment of such cases is as varied as the cases themselves, for every one has its own peculiar features. Practitioners, in general practice, would be surprised at the quantity of powerful opiates administered to some Patients, with but little effect, to soothe the nervous system, and procure sleep—essential to life. We may refer to the case of one lady who, for a long time, was restless and sleepless to an extraordinary degree. After other treatment, powerful sedatives, with many hours daily of pedestrian exercise in the open air, in all weathers, and rapidly performed, at length began to tell. As she was very suicidal, she could not be left for a single moment by night or day. Her attendant could not keep up with her in her daily walks, and was so much knocked up that she became ill. A new one was substituted, but she too could not endure the fatigue, although it seemed to have but little effect upon the Patient. We were obliged to have a relay of attendants, giving her a fresh one every day. Although at one time we had doubts of this Patient's recovery, the treatment pursued has been attended with complete success in her case, and in many others of a like kind.

In regard to the influence of sedatives, however, we may mention that, in cases where physical exercise was impossible, the exhibition of opium, in its various preparations, combined with tartar emetic—both by the bowel and the mouth—has soothed the nervous system when all others, and both exhibited separately, have

failed. We have tried, and we think with some benefit, the medicine called chemical food. Dr. PARISHES' syrup of the phosphates of iron, lime, soda, and potash, comes under this term, and has been very carefully prepared by Dr. CHRISTIE, one of the Medical Assistants, who is an able chemist. He has also prepared a syrup of the phosphate of iron and manganese, and a syrup of the phosphate of iron. These preparations have also been beneficial to the Patients.

The greater number of the cases admitted were in a very reduced condition, so that careful and generous alimentation was necessary, combined with other means, for arresting the waste and correcting the deficient nervous nutrition. The usual moral means—in the way of amusements, occupations, and religious exercises—have been employed, to rouse the dormant faculties, and to strengthen them by judicious exertion; but we have been satisfied, from our experience in another place, that they are not sufficient. This, in regard to the poorer Patients, we have not hesitated to state from the beginning of our superintendence here. For certain classes especially, a greater variety of agreeable work is required—not for profit, but as a means of cure; and, even where recovery is hopeless, there can be no doubt that such employment would add materially to the comfort and happiness of the Patients. Elsewhere we had introduced, or were the means of introducing, eighteen weavers' looms, which were constantly worked by the insane of both sexes. It is necessary to add, that nothing but the enormous load of debt upon this Institution has prevented the Directors from building additional workshops, where the Patients might be able to work at various trades, and manufacture



much of the cloth required by the House, such as ticking and sheets, which we are at present obliged to purchase. The kind of cloth woven in Glasgow is certainly different from that made in the east country; but, for coarse articles, we are persuaded that any man who has been taught to weave fine cloth could soon be master of the other also.

Many strangers of both sexes have visited the Institution, and been present at our festive gatherings. Our Asylum life has been, as usual, cheered by the lively strains of some of the best instrumental and vocal music which the City of Glasgow can afford; and we cordially concur in the acknowledgment of the Directors to that philanthropic and enterprising body of gentlemen who compose what is called the Abstiners' Union, for interesting themselves so much in our cause, and procuring for the Patients—and that, too, gratuitously—such means of innocent gratification. To Mr. GEORGE ROY we are also much indebted for his inimitable performance, which pleased the Patients very much indeed. It might be right here to state, in regard to the Patients attending these entertainments, that the feelings and wishes of relatives and guardians are always considered. Those who are likely to be benefited, and to whom there is no objection, are encouraged and entreated to attend; while some, however anxious they may be, cannot on all occasions be permitted to be present. The Patients who decline are, of course, allowed to stay away; and those whose guardians object to their attending are not allowed to go near the Concert or Ball Room. It must be stated, however, that our most literary Patients do not give their countenance to these meetings. The lady Patients who wish to enjoy the musical treat without being seen, sit in the

parlours off the Concert Gallery in the utmost privacy, hearing to advantage, and nearly as well as those who appear in public. On the private nights, certain Patients take advantage of the absence of strangers, and enjoy themselves very much. It need scarcely be added that a great many invalids are always unfit to appear at, or enjoy, such exhibitions. We are always delighted to see those Patients who have been dismissed returning to our re-unions—thankful, rejoicing, and doing all they can to entertain their old friends. One of these much-loved old Patients, who takes a deep and abiding interest in the Institution, has lately produced an interesting little book, calculated to do much good, called “The Philosophy of Insanity,” in which he gives some of the details of his own remarkable case when mentally afflicted many years since. From the nature of the subject, it is probably not calculated to be so popular as the other writings of the same amiable author—one of his excellent works having gone through several editions, and been stamped with the seal of public approbation; nevertheless, it bears the marks of an acute and reflecting mind and a warm and generous heart. We were pleased to see it favourably reviewed in several journals. The *Edinburgh Scotsman* newspaper devoted nearly two columns of its valuable space to a very favourable review of “The Philosophy of Insanity.”

MEDICAL STUDENTS.—I have now to report that six young gentlemen, studying at the Glasgow College, attended at the Asylum for three months at a time in the course of the year, either with the view of qualifying themselves for general practice, or to pass the Government Boards.



MEDICAL STAFF.—I cannot conclude without noticing the resignations of my late Assistants. Able or better officers than Dr. CAMERON and Dr. CASKIE I have not seen. While anxious for the welfare of the Patients, they were self-reliant, and much and deservedly beloved. In all my intercourse with them I had great pleasure; and can have no doubt of their distinguishing themselves wherever their lot in life may happen to be cast. They left the Asylum with many a good wish and prayer for their welfare.

In acknowledging the efficient services of the non-Medical Resident Officers, all of whom have been many years employed in the Asylum, I have to add that these officers have always cordially and cheerfully assisted me, and done all in their power to benefit the Patients. The Attendants have arduous and often painful and trying duties to perform. Many of them have had much experience in the treatment of the Insane, and deserve thanks for meritorious services.

In every Report since my appointment in 1849, I felt it to be a pleasing duty gratefully to acknowledge the consideration of each successive Board of Directors;—and I now beg leave respectfully to tender my best thanks to the Directors of last year, for the confidence which they invariably reposed in me, and for their continued support in all my efforts to relieve suffering humanity, and promote the best interests of the Institution.

ALEXANDER MACKINTOSH, M. D.

PHYSICIAN-SUPERINTENDENT.

GLASGOW ROYAL ASYLUM FOR LUNATICS,  
GARTNAVEL, 31st December, 1860.

# MEDICAL STATISTICAL TABLES,

FOR THE YEAR 1860.

## I.—GENERAL STATEMENT.

	MALES.		FEMALES.		TOTAL.
Remaining on 31st December 1859, .	266	...	234	...	500
Admitted since, . . . . .	93	...	111	...	204
	—		—		—
TOTAL, . . . . .	359	...	345	...	704
	==		==		==
Dismissed Cured, . . . . .	45	...	51	...	96
" Relieved, . . . . .	36	...	22	...	58
" Not Improved, . . . . .	3	...	1	...	4
Died, . . . . .	23	...	21	...	44
	—		—		—
TOTAL, . . . . .	107	...	95	...	202
Remaining on 31st December 1860, .	252	...	250	...	502
	—		—		—
TOTAL TREATED, . . . . .	359	...	345	...	704
	==		==		==
Average Daily Number, . . . . .	258.52..		239.42..		497.94
	=====		=====		=====



## II.—TABLES RELATIVE TO PATIENTS ADMITTED DURING THE YEAR 1860.

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

	MALES.	FEMALES.	TOTAL.
Mania, Acute, . . . . .	39	48	87
" with Epilepsy, . . . . .	1	1	2
" " General Paralysis, . . . . .	5	1	6
" Chronic, . . . . .	12	3	15
" with Epilepsy, . . . . .	1	1	2
Monomania, including Melancholia, } 17, 24-41; and Dypsomania, 1, 0-1, }	21	42	63
Dementia, . . . . .	12	13	25
" with Epilepsy, . . . . .	1	0	1
Imbecility, . . . . .	1	2	3
<b>TOTAL,</b> . . . . .	<u>93</u>	<u>111</u>	<u>204</u>

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

	MALES.	FEMALES.	TOTAL.
Unmarried, . . . . .	51	62	113
Married, . . . . .	36	37	73
Widowed, . . . . .	6	12	18
<b>TOTAL,</b> . . . . .	<u>93</u>	<u>111</u>	<u>204</u>

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

	MALES.	FEMALES.	TOTAL.
Under 20 Years, . . . . .	4	7	11
" 25 " . . . . .	11	12	23
" 30 " . . . . .	16	18	34
" 35 " . . . . .	20	16	36
" 40 " . . . . .	15	17	32
" 45 " . . . . .	14	8	22
" 50 " . . . . .	2	13	15
" 55 " . . . . .	2	5	7
" 60 " . . . . .	5	3	8
" 65 " . . . . .	3	8	11
" 70 " . . . . .	0	3	3
" 75 " . . . . .	1	1	2
<b>TOTAL,</b> . . . . .	<u>93</u>	<u>111</u>	<u>204</u>

Table 4.—Showing the (apparent or supposed) Causes of  
Insanity in those Admitted.

	MALES.	FEMALES.	TOTAL.
Anxiety, . . . . .	2 ...	6 ...	8
Bodily Disease, . . . . .	1 ...	1 ...	2
" Injury, . . . . .	1 ...	0 ...	1
Business Anxiety, . . . . .	1 ...	0 ...	1
Debility and Old Age, . . . . .	1 ...	1 ...	2
Desertion by Husband, . . . . .	0 ...	1 ...	1
Destitution, . . . . .	2 ...	5 ...	7
Disappointment in Love, . . . . .	0 ...	3 ...	3
Dissipation, . . . . .	3 ...	1 ...	4
Epilepsy, . . . . .	4 ...	2 ...	6
Fever, . . . . .	1 ...	1 ...	2
Fright, . . . . .	0 ...	1 ...	1
General Paralysis, . . . . .	0 ...	1 ...	1
Grief, . . . . .	0 ...	5 ...	5
Hereditary, . . . . .	9 ...	13 ...	22
Ill Usage, . . . . .	0 ...	1 ...	1
Imbecility, . . . . .	0 ...	1 ...	1
Intemperance, . . . . .	13 ...	4 ...	17
Lactation, . . . . .	0 ...	2 ...	2
" Prolonged, . . . . .	0 ...	1 ...	1
Masturbation, . . . . .	9 ...	0 ...	9
Menstrual Disorder, . . . . .	0 ...	6 ...	6
Mental Application, . . . . .	3 ...	0 ...	3
Pecuniary Losses, . . . . .	1 ...	1 ...	2
Predisposition, . . . . .	16 ...	16 ...	32
Pregnancy, . . . . .	0 ...	1 ...	1
Puerperal State, . . . . .	0 ...	5 ...	5
Religious Excitement, . . . . .	12 ...	6 ...	18
Remorse, . . . . .	0 ...	1 ...	1
Straitened Circumstances, . . . . .	1 ...	0 ...	1
Sun-stroke, . . . . .	2 ...	1 ...	3
Unknown, . . . . .	11 ...	24 ...	35
TOTAL, . . . . .	<u>93</u>	<u>111</u>	<u>204</u>



Table 5.—Showing the Occupations of those Admitted.

MALES.	
Baker, . . . . .	1
Brazier, . . . . .	1
Carters, . . . . .	2
Chemist, . . . . .	1
Clergymen, . . . . .	3
Clerks, . . . . .	7
Commission-Agent, . . . . .	1
Comptroller of Customs, . . . . .	1
Confectioner, . . . . .	1
Drapers, . . . . .	3
Druggist, . . . . .	1
Engineers, . . . . .	2
Farmers, . . . . .	5
Farm Servants, . . . . .	2
Fishermen, . . . . .	2
Flesher, . . . . .	1
Grocer, . . . . .	1
Groom, . . . . .	1
Hatter, . . . . .	1
Joiners, . . . . .	5
Labourers, . . . . .	9
Masons, . . . . .	2
Merchants, . . . . .	6
Carry forward, . . . . .	59
Brought forward, . . . . .	59
Miners, . . . . .	4
Pattern Designer, . . . . .	1
Plasterer, . . . . .	1
Plumber, . . . . .	1
Policemen, . . . . .	2
Railway Superintendent, . . . . .	1
Sawyer, . . . . .	1
Schoolboy, . . . . .	1
Seaman, . . . . .	1
Sea-Captain, . . . . .	1
Ship-Broker, . . . . .	1
Shoemakers, . . . . .	3
Shopkeeper, . . . . .	1
Students, . . . . .	2
Tailor, . . . . .	1
Teachers, . . . . .	2
Thread Finisher, . . . . .	1
Tollkeeper, . . . . .	1
Warehousemen, . . . . .	2
Watchmaker, . . . . .	1
Weavers, . . . . .	4
Writer, . . . . .	1
TOTAL, . . . . .	93

FEMALES.	
Dairykeeper, . . . . .	1
Domestics, . . . . .	31
Domestic Servants, . . . . .	12
Dressmakers, . . . . .	7
Factory Workers, . . . . .	3
Farm Servant, . . . . .	1
Governess, . . . . .	1
Ladies, . . . . .	23
Milliners, . . . . .	2
No Occupation, . . . . .	5
Printfield Workers, . . . . .	2
Carry forward, . . . . .	88
Brought forward, . . . . .	88
Sewers, . . . . .	11
Shopkeeper, . . . . .	1
Staymaker, . . . . .	1
Teachers, . . . . .	4
Vagrants, . . . . .	2
Vestmaker, . . . . .	1
Warehouse Worker, . . . . .	1
Weaver, . . . . .	1
Yarn Winder, . . . . .	1
TOTAL, . . . . .	111

Table 6.—*Showing the Number of Admissions in each Month of the Year 1860.*

	MALES.	FEMALES.	TOTAL.
January, . . . . .	10	9	19
February, . . . . .	9	5	14
March, . . . . .	10	11	21
			— 54
April, . . . . .	6	8	14
May, . . . . .	9	4	13
June, . . . . .	11	5	16
			— 43
July, . . . . .	7	10	17
August, . . . . .	4	20	24
September, . . . . .	8	6	14
			— 55
October, . . . . .	7	11	18
November, . . . . .	5	13	18
December, . . . . .	7	9	16
			— 52
			—
TOTAL, . . . . .			204
			==

### III.—TABLES RELATIVE TO PATIENTS DISMISSED CURED.

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

	MALES.	FEMALES.	TOTAL
Mania, Acute, . . . . .	29	29	58
"    "    with Epilepsy, . . . . .	1	0	1
"    Chronic, . . . . .	4	0	4
Monomania, including Melancholia, . . . . .	8	17	25
Dementia, . . . . .	3	5	8
	—	—	—
TOTAL, . . . . .	45	51	96
	==	==	==



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

					MALES.		FEMALES.	TOTAL.
Under 1 Week, .	.	.	.	.	7	...	8	15
" 2 Weeks,	.	.	.	.	12	...	12	24
" 3 "	.	.	.	.	3	...	5	8
" 1 Month,	.	.	.	.	7	...	1	8
" 2 Months,	.	.	.	.	5	...	6	11
" 3 "	.	.	.	.	2	...	6	8
" 4 "	.	.	.	.	1	...	4	5
" 5 "	.	.	.	.	0	...	1	1
" 7 "	.	.	.	.	1	...	1	2
" 8 "	.	.	.	.	0	...	1	1
" 1 Year,	.	.	.	.	0	...	1	1
" 7 Years,	.	.	.	.	0	...	1	1
Unknown, .	.	.	.	.	7	...	4	11
					—		—	—
TOTAL,	.	.	.	.	45	...	51	96
					==		==	==

Table 3.—Showing the Ages of those Cured.

					MALES.		FEMALES.	TOTAL.
Under 20 Years,	.	.	.	.	2	...	4	6
" 25 "	.	.	.	.	3	...	5	8
" 30 "	.	.	.	.	10	...	8	18
" 35 "	.	.	.	.	9	...	8	17
" 40 "	.	.	.	.	4	...	5	9
" 45 "	.	.	.	.	8	...	5	13
" 50 "	.	.	.	.	2	...	7	9
" 55 "	.	.	.	.	3	...	2	5
" 60 "	.	.	.	.	3	...	0	3
" 65 "	.	.	.	.	1	...	6	7
" 70 "	.	.	.	.	0	...	1	1
					—		—	—
TOTAL,	.	.	.	.	45	...	51	96
					==		==	==

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

	MALES.	FEMALES.	TOTAL.
Under 1 Week, . . . . .	3	0	3
" 1 Month, . . . . .	1	2	3
" 2 Months, . . . . .	5	4	9
" 3 " . . . . .	4	5	9
" 4 " . . . . .	7	9	16
" 5 " . . . . .	2	10	12
" 6 " . . . . .	3	3	6
" 7 " . . . . .	3	5	8
" 8 " . . . . .	2	3	5
" 9 " . . . . .	1	3	4
" 10 " . . . . .	1	1	2
" 11 " . . . . .	0	1	1
" 1 Year, . . . . .	0	1	1
" 2 Years, . . . . .	4	3	7
" 3 " . . . . .	4	0	4
" 4 " . . . . .	3	1	4
" 5 " . . . . .	1	0	1
" 7 " . . . . .	1	0	1
TOTAL, . . . . .	45	51	96

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

	MALES.	FEMALES.	TOTAL.
Anxiety, . . . . .	0	3	3
Bodily Disease, . . . . .	0	1	1
Desertion by Husband, . . . . .	0	1	1
Destitution, . . . . .	1	3	4
Disappointment in Love, . . . . .	0	1	1
Dissipation, . . . . .	1	0	1
Epilepsy, . . . . .	3	0	3
Fright, . . . . .	0	1	1
Hereditary, . . . . .	5	4	9
Intemperance, . . . . .	10	4	14
Lactation, . . . . .	0	1	1
" Prolonged, . . . . .	0	1	1
Masturbation, . . . . .	2	0	2
Menstrual Disorder, . . . . .	0	4	4
Mental Application, . . . . .	1	0	1
Physical Fatigue, . . . . .	0	1	1
Predisposition, . . . . .	8	9	17
Pregnancy, . . . . .	0	1	1
Puerperal State, . . . . .	0	2	2
Religious Excitement, . . . . .	3	5	8
Sun-stroke, . . . . .	0	1	1
Unknown, . . . . .	11	7	18
Visceral Disease, . . . . .	0	1	1
TOTAL, . . . . .	45	51	96



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

		PER CENT.
Total Number Treated, . . . . .	704	Cured, { 13·63 47·72 47·
" " to a Conclusion, . . . . .	202	
Admitted, . . . . .	204	

#### IV.—TABLES RELATIVE TO PATIENTS WHO DIED DURING THE YEAR 1860.

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

	MALES.	FEMALES.	TOTAL.
Mania, . . . . .	6	12	18
" with Epilepsy, . . . . .	1	0	1
" Chronic, . . . . .	2	1	3
Monomania, including Melancholia, . . . . .	5	2	7
Dementia, . . . . .	6	3	9
" with General Paralysis, . . . . .	1	0	1
Imbecility, . . . . .	2	3	5
TOTAL, . . . . .	23	21	44

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

	MALES.	FEMALES.	TOTAL.
Under 25 Years, . . . . .	1	1	2
" 30 " . . . . .	2	3	5
" 35 " . . . . .	4	3	7
" 40 " . . . . .	4	2	6
" 50 " . . . . .	4	4	8
" 55 " . . . . .	2	1	3
" 60 " . . . . .	1	3	4
" 65 " . . . . .	2	1	3
" 70 " . . . . .	3	1	4
" 75 " . . . . .	0	2	2
TOTAL, . . . . .	23	21	44

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

	MALES.	FEMALES.	TOTAL.
Under 1 Week, . . . . .	1	4	5
" 2 Weeks, . . . . .	1	1	2
" 1 Month, . . . . .	0	1	1
" 3 Months, . . . . .	2	0	2
" 4 " . . . . .	0	1	1
" 6 " . . . . .	1	0	1
" 7 " . . . . .	1	0	1
" 8 " . . . . .	0	1	1
" 9 " . . . . .	0	1	1
" 10 " . . . . .	0	1	1
" 11 " . . . . .	1	1	2
" 1 Year, . . . . .	1	0	1
" 2 Years, . . . . .	5	1	6
" 3 " . . . . .	4	2	6
" 4 " . . . . .	3	0	3
" 6 " . . . . .	0	2	2
" 8 " . . . . .	2	2	4
" 14 " . . . . .	1	0	1
" 15 " . . . . .	0	1	1
" 18 " . . . . .	0	1	1
" 21 " . . . . .	0	1	1
TOTAL, . . . . .	23	21	44

Table 4.—*Showing the Causes of Death.*

	MALES.	FEMALES.	TOTAL.
Asphyxia, . . . . .	0	1	1
Chronic Bronchitis and Disease of Heart, . . . . .	0	2	2
Dysentery, . . . . .	1	0	1
Epilepsy, . . . . .	2	0	2
" with General Paralysis, . . . . .	0	1	1
Exhaustion from Mania, . . . . .	1	2	3
" " Puerperal Mania, . . . . .	0	1	1
Gastro-enteritis, . . . . .	0	3	3
General Paralysis, . . . . .	6	0	6
" Prostration, . . . . .	2	1	3
Meningitis, . . . . .	1	0	1
Organic Disease of the Brain, . . . . .	3	5	8
" " and Heart, . . . . .	0	1	1
Peritonitis, Acute, . . . . .	1	0	1
" supervening on Ovarian Disease, . . . . .	0	1	1
Phthisis Pulmonalis, . . . . .	6	1	7
Pulmonary Hæmorrhage, . . . . .	0	1	1
Valvular Disease of Heart, . . . . .	0	1	1
TOTAL, . . . . .	23	21	44



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

		PER CENT.
Total Number Treated, . . . . .	704	Died, { 6.25 21.78 21.56
" " to a Conclusion, . . . . .	202	
Admitted, . . . . .	204	

V.—SHOWING THE NUMBER OF PATIENTS DISMISSED IN EACH MONTH OF THE YEAR 1860.

	MALES.	FEMALES.	TOTAL.
January, . . . . .	13	6	19
February, . . . . .	2	8	10
March, . . . . .	10	9	19
			— 48
April, . . . . .	13	8	21
May, . . . . .	13	8	21
June, . . . . .	10	9	19
			— 61
July, . . . . .	11	9	20
August, . . . . .	5	5	10
September, . . . . .	5	4	9
			— 39
October, . . . . .	13	6	19
November, . . . . .	4	11	15
December, . . . . .	8	12	20
			— 54
			—
TOTAL, . . . . .			202

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

*From the Opening of the Asylum on 12th Dec. 1814 till 31st Dec. 1860.*

	CURED. PER CENT.
Total Number Treated to a Conclusion, . . . . .	7,707 } 3,793 { 49.21
	DIED.
" " " " . . . . .	7,707 } 1,277 { 16.56

# VII.—THE PUERPERAL STATE AS A CAUSE OF INSANITY.

DATE.	TOTAL FEMALE ADMISSIONS.	FROM PUERPERAL CAUSES.	PER CENT. ON FEMALE TOTAL ADMISSIONS.
1845, .....	164	10	6
1846, .....	192	11	5·7
1850, .....	167	17	10·1
1851, .....	199	10	5
1852, .....	119	11	9·2
1853, .....	125	11	8
1854, .....	153	8	5·2
1855, .....	84	12	14·2
1856, .....	99	13	13·1
1857, .....	139	7	5·03
1858, .....	140	11	7·85
1859, .....	89	6	6·74
1860, .....	111	5	4·5

# VIII.—INTEMPERANCE AS A CAUSE OF INSANITY, *Showing the Number of Male and Female Admissions from this Cause, compared with the Total Number of Admissions, in each Year, since 1824.*

YEAR.	Males.	Females.	Total.	Total Admissions.	Per Cent.
1824, .....	..	..	..	75	..
1825, .....	2	..	2	75	2·6'
1826, .....	..	..	..	72	..
1827, .....	1	..	1	72	1·38
1828, .....	2	1	3	88	3·40
1829, .....	3	4	7	84	8·3'
1830, .....	2	1	3	84	3·57
1831, .....	2	2	4	89	4·49
1832, .....	..	1	1	97	1·03
1833, .....	5	2	7	83	8·43
.....	..	..	..	..	..
1838, .....	18	13	31	117	26·49
1839, .....	19	5	24	128	18·75
1840, .....	12	8	20	149	13·42
1841, .....	22	8	30	157	19·10
1842, .....	27	19	46	199	23·11
1843, .....	21	10	31	327	9·48
1844, .....	39	14	53	290	18·27
1845, .....	57	33	90	364	24·72
1846, .....	68	37	105	414	25·36
.....	..	..	..	..	..
1850, .....	42	29	71	393	18·06
1851, .....	33	21	54	259	20·84
1852, .....	34	22	56	266	21·05
1853, .....	48	17	65	319	20·37
1854, .....	27	18	45	240	18·75
1855, .....	26	7	33	201	16·41
1856, .....	19	13	32	217	14·74
1857, .....	26	18	44	287	15·33
1858, .....	15	13	28	267	10·48
1859, .....	15	12	27	204	13·23
1860, .....	13	4	17	204	8·33

In the years 1834, 1835, 1836, 1837, 1847, 1848, and 1849, there were no Statistical Tables appended to the Annual Reports relative to Intemperance as a Cause of Insanity in the Patients admitted.



IX.—*Showing the NUMBER of PATIENTS annually ADMITTED  
NUMBER who have been DISMISSED CURED, RELIEVED, and  
its Opening, on 12th December 1814, till 31st December 1860,*

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.	Males.	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
1855,.....	117	84	201	223	201	424	340	285	625
1856,.....	118	99	217	218	194	412	336	293	629
1857,.....	148	139	287	229	191	420	377	330	707
1858,.....	127	140	267	242	229	471	369	369	738
1859,.....	115	89	204	249	255	504	364	344	708
1860,.....	93	111	204	266	234	500	359	345	704
TOTAL,.....	4,434	3,775	8,209						

TOTAL AS ABOVE,..... 8,209

DEDUCT—Remain,..... 502

TOTAL NO. OF PATIENTS, 7,707



into the GLASGOW ROYAL ASYLUM, including *Re-Admissions*, the UNFIT, and the NUMBER who have DIED during each Year, from with the per Cent. of CURES and DEATHS upon 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	..	4	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
34	35	69	70	36	106	1	..	1	17	20	37
41	50	91	48	36	84	..	..	..	18	16	34
52	59	111	62	29	91	..	..	..	21	14	35
51	56	107	42	26	68	1	..	1	21	23	44
41	41	82	35	40	73	..	..	..	21	28	49
45	51	96	36	22	58	..	..	..	23	21	44
1,964	1,829	3,793							745	530	1,277

TOTAL NO. OF CURES,.. 3,793

TOTAL NO. OF DEATHS,.. 1,277

PER CENT. OF CURES,.. 49.21

PER CENT. OF DEATHS,.. 16.56



## QUANTITIES OF THE PRINCIPAL PROVISIONS, &amp;c.

*Consumed in the Asylum in the Years 1858-59-60.*

	1858.	1859.	1860.	
Beef, Mutton, &c.....	9,000 ..	9,793 ..	9,748	Stones.
Bacon Ham,.....	3,039 ..	4,025 ..	3,509	Lbs.
Bread,.....	43,833 ..	43,906 ..	44,959	Loaves.
Tea,.....	1,736 ..	1,809 ..	1,817	Lbs.
Coffee,.....	2,464 ..	2,464 ..	2,912	"
Sugar,.....	17,033 ..	17,397 ..	17,681	"
Butter,.....	9,203 ..	9,516 ..	9,285	"
Cheese,.....	3,093 ..	3,162 ..	3,367	"
Eggs,.....	4,417 ..	4,506 ..	4,596	Dozens.
Fish,.....	20,791 ..	20,034 ..	18,784	Lbs.
Fowls,.....	239 ..	307 ..	323	Pairs.
Rabbits,.....	— ..	245 ..	236½	"
Potatoes,.....	39½ ..	44 ..	42½	Tons.
Oatmeal,.....	428 ..	441½ ..	437	Bolls.
Rice, Barley, and Peas, .....	27,779 ..	25,115 ..	27,065	Lbs.
Milk,.....	9,912 ..	10,764 ..	12,335	Gallons.
Butter-Milk, .....	10,920 ..	10,920 ..	10,980	"
Beer,.....	1,027 ..	1,068 ..	1,136	Firkins.
Porter and Ale,.....	1,496 ..	1,817 ..	1,306	Doz. Pints.
Wine,.....	86½ ..	84½ ..	86	" Qrts.
Spirits, including Laboratory, ..	177 ..	280 ..	340	Gallons.
Soap and Soda,.....	18,774 ..	19,877 ..	17,761	Lbs.
Candles,.....	41½ ..	43½ ..	46½	Stones.
Coals, Dross, and Coke,.....	1,311 ..	1,311 ..	1,358	Waggons.
Gas,.....	1,153,400 ..	1,196,000 ..	1,230,800	Cubic Feet.

JOHN CALDWELL, *Steward.*

## PRODUCE OF FARM—1860.

Grass and Clover, sold, . . . . .	£ 5 5 9
Green Corn, . . . . .	0 7 9
52 Tons 13½ Cwt. of Yellow Turnips, sold, . . . . .	42 4 5
38 Bolls of Wheat, sold, . . . . .	39 18 0
1,318 1½ Stones of Potatoes, used at home, . . . . .	29 15 0
35 Tons 11½ Cwt. of Swedish Turnips on hand, at 20s. . . . .	35 11 3
6 Bolls of Wheat, sown in Farm-field, at 21s. . . . .	6 6 0
1½ Bolls of Short Wheat, used for boilings for Horses, at 20s. . . . .	1 10 0
6½ Bolls Barley, used for boilings for Horses, at 24s. . . . .	7 16 0
11½ Bolls of Beans, used and in loft, at 24s. . . . .	12 16 0
35 Bolls Oats, " " 20s. . . . .	35 0 0
70 " " estimated to be in Stacks, at 20s. . . . .	70 0 0
28½ " Beans, " " 24s. . . . .	33 12 0
1,230 Stones of Hay, at 1s. per Stone, . . . . .	61 10 0
5 Boll Oats destroyed by water contract cutting, } Clover cut and used at home for Horses, }	4 16 8
	£ 386 8 10
Credit given for Money saved by the Farm for Work } done by Horses, to Houses, Roads, &c. }	49 8 6
	£ 435 17 4

## GARDEN PRODUCE—1860.

VEGETABLES.			
1,768 Doz. German Greens.		103 Stones Potatoes.	
1,007 " Turnips in summer.		120 " Rhubarb.	
1,197 " Cabbages.		7 " Artichokes.	
1,541 " Leeks.		108 " Parsnips.	
219 " Savoys.		5 " Vegetable Marrows.	
345 " Carrots in summer ; and		261 Pecks Peas.	
180 Stones in winter.		57 " Beans.	
18 " Onions in winter ; and		FRUITS.	
1,447 Doz. in summer.		1,983 Scotch Pints Gooseberries.	
331 " Cauliflower and Bro- coli heads.		542 " " Strawberries.	
34 " Celery.		79 " " Raspberries.	
40 " Red Beetroot.		286 " " Red Currants.	
111 " Asparagus.		151 " " Black "	
5 " Red Cabbages.		22 " " White "	
277 Gals. Spinach.		1,014 Pounds Apples.	
655 " Parsley.		9 " Cherries.	
11 " Kidney Beans.		Horse Radish, Mustard, Cress, Radishes, Lettuces, Sweet Herbs, and Cut Flowers, in their season.	
Total, at Bazaar Prices, ... ..		£372 6 9	



## PRODUCE OF PIGGERIES—1860.

21 Cwt. 1 Qr. 1 Lb. of Pork to the Store, at various prices, . . . . .	£ 47	8	11
Cash received for Pigs sold to fleshers and others, . . . . .	179	18	1
	£ 227	7	0

TOTAL VALUE of FARM, GARDEN, and PIGGERIES, £1,035	11	1
EXPENDED on FARM, GARDEN, and PIGGERIES, . . . . .	476	3 11½
BALANCE in favour, . . . . .	£559	7 1½

## CROPS THRASHED AND DISPOSED OF DURING 1860.

	HAY.	OATS.		BEANS.		BARLEY.		WHEAT.	
	Stones.	Bolls.	½.	Bolls.	½.	Bolls.	½.	Bolls.	½.
Sown on the Farm, . . . . .	..	10	..	2	..	..	4	7	2
Supply for Farm Horses, . . . . .	600	37	..	4	3	1	1	3	2
"    Carriage " . . . . .	630	35	..	11	1	1	1	3	..
Sold, . . . . .	..	..	..	..	..	..	..	38	..
In Stack & Loft, on hand, . . . . .	800	12	1	5	3	4	1	..	..
	2,030	94	1	23	3	7	1	52	..

## CROP OF 1859 ON HAND 1ST JAN. 1860, AND CROP OF 1860.

Swedish Turnips, 15 tons used at home.

800 Stones of Hay, and 1,230 stones of 1860—Total, 2,030.

29½ Bolls Oats; bought 30 bolls; Thrashed of 1860, 35 bolls—  
Total, 94½ bolls.

10½ Bolls Beans; bought 2 bolls; Thrashed of 1860, 11½ bolls—  
Total, 23¾ bolls.

Barley, bought ¾ boll, and Thrashed of 1860 crop, 6½ bolls—Total,  
7½ bolls.

5 Bolls Wheat; Thrashed of 1860 crop, 45½ bolls; bought, 1½ boll  
—Total, 52 bolls.

## GROUND DEVOTED TO EACH CROP ON THE FARM.

9 Imperial Acres	Beans, Potatoes, and Turnips,	.	}	
8½ "	" "	Hay or Pasture, . . . . .	}	Total,
4½ "	" "	Wheat and Barley, . . . . .	}	34 Acres.
12 "	" "	Oats, . . . . .	}	

## INVENTORY OF STOCK—31ST DEC. 1860.

FARM, . . . . .	£488	9	2
GARDEN, . . . . .	167	13	3
PIGGERIES, . . . . .	109	2	3
POLICIES, . . . . .	74	14	8
Total Inventory of Gardener's Department, .	£839	19	4

JAMES DUTHIE,

*Gardener and Farm Overseer.*

## LADIES' WORK DONE IN 1860.

39 Chemises made.	8 Pairs Sleeves made.
18 Long Night-Gowns made.	36 Pocket Handkerchiefs hemmed.
9 Short-Gowns "	30 Pieces Trimming worked for
12 Flannel Semmets "	Petticoats and Dresses.
2 Pairs Flannel Drawers "	6 Collars embroidered.
12 Pairs Cotton Drawers "	4 Silk Aprons made.
29 Night-Caps "	2 Window Screens knitted.
12 Flannel Petticoats "	4 Tidies "
8 Coloured Petticoats "	18 Woollen Doyleys "
4 Gentlemen's Shirts "	4 Pincushion-Covers.
3 Semmets knitted.	2 Dresses made.
58 Pairs Socks "	6 Polka Bodies made.
10 Pairs Stockings knitted.	Repairs of Clothing done.



ACCOUNT OF NEEDLE-WORK DONE  
IN THE FEMALE DIVISION OF THE EAST HOUSE IN 1860.

Dresses made,	.	.	.	.	.	.	.	.	190
Petticoats "	.	.	.	.	.	.	.	.	255
Flannel Semmets made,	.	.	.	.	.	.	.	.	309
Cotton Shifts	"	.	.	.	.	.	.	.	226
Bed-Gowns	"	.	.	.	.	.	.	.	33
Caps	"	.	.	.	.	.	.	.	42
Aprons	"	.	.	.	.	.	.	.	382
Quilted Mats	"	.	.	.	.	.	.	.	24
Pillow and Bolster Slips made,	.	.	.	.	.	.	.	.	329
Sheets hemmed,	.	.	.	.	.	.	.	.	77
Towels "	.	.	.	.	.	.	.	.	284
Handkerchiefs hemmed,	.	.	.	.	.	.	.	.	849
Pairs Blankets	"	.	.	.	.	.	.	.	106
Table and Tray Cloths hemmed,	.	.	.	.	.	.	.	.	19
Bed-Covers	"	.	.	.	.	.	.	.	29

Repairs of Clothing, &c. going on at all times.

WORK DONE IN THE UPHOLSTERY DEPARTMENT  
IN 1860.

Straw Mattresses made,	.	.	.	.	.	.	.	.	256
Hair	"	"	.	.	.	.	.	.	27
" Bolsters	"	"	.	.	.	.	.	.	46
Feather Pillows	"	.	.	.	.	.	.	.	6
Loose Cases for Pillows made,	.	.	.	.	.	.	.	.	21
Sets Bed-Curtains	"	.	.	.	.	.	.	.	5
" Window-Curtains	"	.	.	.	.	.	.	.	4
Waxcloth Table-Covers	"	.	.	.	.	.	.	.	13
Chair-Covers	"	.	.	.	.	.	.	.	25
" Cushions	"	.	.	.	.	.	.	.	11
Carpets and Crum-Cloths	"	.	.	.	.	.	.	.	10
Window-Blinds	"	.	.	.	.	.	.	.	21
Hair Mattresses re-made,	.	.	.	.	.	.	.	.	60
" Bolsters	"	.	.	.	.	.	.	.	12
Feather Pillows	"	.	.	.	.	.	.	.	4

Repairs when required.

## PATIENTS ARE ADMITTED

*ON THE FOLLOWING TERMS.*

### EAST HOUSE.

#### BOARD OF PATIENTS FROM PRIVILEGED

PARISHES, . . . . .	8/6	PER WEEK.
FIRST RATE FOR OTHER PATIENTS, . . . . .	9/6 & 10/6	"
SECOND, . . . . .	15/	"

### WEST HOUSE.

THIRD RATE OF BOARD, . . . . .	£1 1 0	PER 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.

## THE TWO FOLLOWING DOCUMENTS

*ARE IN EVERY CASE INDISPENSABLE.*

I. Order from the Sheriff, in terms of the Statute 20 and 21 Vic. cap. 71, which will be granted on the presentation of Certificates of Lunacy, by two Medical Practitioners, together with a Petition and Statement by a Relative or Guardian of the Patient. Patients can also be admitted on a Certificate of Emergency, but for 24 hours only, in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate. But this Certificate of Emergency must also be granted by the Medical Practitioner who has given the Medical Certificate No. 1.

II. Written Obligations 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, Gartnavel; or by the Secretary and Treasurer, DONALD CUTHBERTSON, Esq. 110 West George-Street, Glasgow.



## 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 Attendants, 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 permitted to visit Patients.

## 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.  
BALDERNOCK.  
BARONY OF GLASGOW.  
BONHILL.  
CAMPBELTON.  
CARMUNNOCK.  
CATHCART.  
CUMBERNAULD.  
GREENOCK.  
HOUSTON AND KILALLAN.  
KILSYTH.

KIPPEN.  
LANARK.  
LARBERT AND DUNIPACE.  
LESMAHAGOW.  
LOGIE.  
MONKTON AND PRESTWICK.  
NEILSTON.  
NEW-MONKLAND.  
PORT-GLASGOW.  
RENFREW.  
ROTHESAY.



