Nineteenth annual report of the directors of James Murray's Royal Asylum for Lunatics. June 1846.

Contributors

James Murray's Royal Asylum for Lunatics.

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NINETEENTH

ANNUAL REPORT

OF THE

DIRECTORS

OF

JAMES MURRAY'S ROYAL ASYLUM FOR LUNATICS.

JUNE 1846.

PERTH:

PRINTED BY ORDER OF THE DIRECTORS, BY DAVID PERSTON.

MDCCCXLVI.

REPORT

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REPORT.

JUNE 1846.

In compliance with one of the provisions of the Constitution of the Establishment, the Directors have now to submit the Nineteenth Annual Report of their proceedings.

The experience of the last twelve months, while it goes to justify and confirm the favourable opinion hitherto expressed of the general system of treatment followed in this Asylum, and to demonstrate how great a blessing such an Institution is to the community among whom it is placed, and for whose benefit it was primarily and chiefly intended, presents little which can be called new, or which has not formed, less or more, the subject of remark in former Reports. There is nothing remarkable in this. In truth, it is no small commendation of the Asylum that such is the case; for mere empirics are ever boasting of novelties, while the true followers of science are contented with a calm observation of the effects of that treatment which experience has justified, as these are slowly and gradually developed in the course of years. The management of a house for the insane is, in some respects, not unlike that of a well-regulated school, which does not change its system of tuition every day,

but in which the same routine is followed over a course of years, varied somewhat, it may be, by a few alterations which good sense and sound observation may have recommended.

It is particularly gratifying to the Directors to be able to announce, and must be equally so to the friends of the Institution to learn, that during the past year it has, in its various departments, been conducted with the same efficiency and success as heretofore, and continues to enjoy equal prosperity with that of any former period of its history.

By the annual Report for 1845, the number of patients at its date in the house is stated to be 150—86 males, and 64 females. At the same period this year, there are in the establishment 151 patients—consisting of 88 males, and 63 females.

By last year's Report, the number of deaths during the previous twelve months is stated as being five. During the year just ended, the deaths amount to ten. A brief explanation of the difference may not be unacceptable. It arises partly from the deaths having occurred among the old residenters of the Asylum (two men being above eighty years of age), and partly from the bodily diseases under which they laboured at their admission—two being epileptic—one woman dying from cancer in the womb, and four being paralytic and worn out.

It is pleasing to advert to the number of cures, which bear a most encouraging proportion to the number of admissions—the former amounting to 15, and the latter to 35. The Physician has the pleasure of knowing that many of the persons so discharged from the Asylum have returned to the world, and resumed their different places and occupations therein; and also that several of those who were removed by their friends, although not numbered among the cures, are now employed at their various trades, earning the means of their livelihood by their own exertions, and conducting themselves quietly and orderly.

In other respects, nothing has occurred in the history of the patients in the Institution, during the past year, calling for remark.

In December last, the Weekly Committee brought under the notice of the Quarterly Meeting of Directors, the rate of charge made for the lower class of patients; and recommended that the same should be raised, which was agreed to. As this matter is of considerable importance in a financial point of view, it may be here proper to mention, in a few words, the ground on which the increase of charge was so resolved on. It was always understood to be the view of the Founder of this Asylum, that there would be no propriety in affording relief to absolute paupers; because, to provide for their reception at a smaller rate than would compensate the Institution, would virtually amount to a bequest, not to the poor people themselves, but to the Heritors of those parishes who, by law, are liable for their support. He had no wish, and no intention, of directing any part of his benevolence in that way; but expressly reserved the same for an entirely different class of society-namely, for persons who, though in poor circumstances, "have not," as the Royal Charter expresses it, "a legal claim for parochial relief as paupers upon any parish," in reference to whom the Charter expressly provides "that the Directors shall have the power to receive (such) patients for less than the established rates, and even gratuitously, providing that the state of the funds shall admit thereof." This principle thus shown to be fundamental, and which, on the smallest reflection, must appear of the most essential and vital importance, in the practical working of the Institution, has never once been lost sight of since its origin by those in the Direction.

From an estimate of expenditure prepared for the purpose it appeared that the keep of each pauper patient was charged at a rate lower than their actual cost, so that a portion of the funds of the Institution was going to the relief of those Heritors whom it was not the intention of the founder to relieve.

Besides these considerations, amply sufficient in themselves, there were also taken into account the rise in the price of provisions, and the rule and practice of other Institutions in Scotland, where the rate of board was higher than in this Institution for the class of patients in question.

The rate, as increased, stands thus: For the three favoured parishes, six shillings sterling weekly, instead of five; and that for all the other parishes within the county, seven shillings per week. The board for all other classes of patients to remain as at present.

The subject of restraint and non-restraint, as exercised in Asylums, is a fertile theme for discussion. The advocates of one view, speak as if every kind of restraint could be advantageously dispensed with; and in order to excite sympathy in support of their sentiments, they recal from the past the filthy dungeons in which the insane were wont to be immured, and the clanking chains with which their limbs were fettered. But in considering this matter, it ought to be viewed in relation to Asylums as they are now generally conducted; where such horrible dens of confinement, and all instruments of cruelty, are unknown.

This subject has been very candidly and satisfactorily treated in a Report of the Metropolitan Commissioners on Lunacy to the Lord Chancellor in 1844, which was presented to both Houses of Parliament, by command of her Majesty. This Report shows very clearly that the difference between the "restraint" and "non-restraint" system, is, after all, not so great as their respective adherents imagine. "In some Asylums," it is observed in the Report, "both public and private, the Superintendents and Proprietors state that they manage their patients without having recourse to any kind of restraint what-

ever. In other Asylums, it is affirmed that the disuse of restraint is their rule and system, and that its use, in cases of necessity or expediency, forms the exception to the rule. Those who profess the entire disuse of restraint employ manual force and seclusion as parts of their method of management, maintaining that such measures are consistent with a system of non-restraint. It is said by these persons that when any of the limbs (as the legs or hands of a patient) are confined by the strait-jacket, the belt, or by straps or gloves, he is under restraint. But in cases where he is held by the hands of attendants, or when he is, for any excitement or violence, forced by manual strength into a small chamber or cell, and left there, it is said that restraint is not employed, and the method adopted in these cases is called the 'non-restraint system.' In those cases where the patient is overpowered by a number of keepers holding his hands or arms during a paroxysm of violence, it is said that there is no mechanical restraint. Here restraint of some sort or other is manifest; and even in those cases where the patient is forced into a cell by manual strength, and prevented from leaving it until his fit of excitement shall have passed, it is difficult to understand how this also can be reconciled with the profession of abstaining from all restraint whatever, so as to be correctly termed 'non-restraint.' It seems to us that these measures are only particular modes of restraint, the relative advantages of which must depend altogether on the results. The advocates of these two systems, to which we have called your Lordship's attention, appear to have been actuated by a common desire to improve the condition of the insane. Those who employ, as well as those who do not employ, mechanical restraint, adopt an equally mild and conciliatory method of managing their patients. The usual forms of mechanical restraint are strong dresses, strait-waistcoats, gloves, straps or belts made of linen cloth or leather,"

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The Commissioners are of opinion that mechanical restraint to some extent is indispensable, as will be seen from the following extract:—" In the year 1828, the licensing and visiting of houses for the reception of the insane in the metropolitan district was entrusted to this Commission, and we have since that period constantly directed our attention to procure the abolition of restraint, in all cases in which we have considered that its use could be avoided with benefit, and without danger, and to its modification and diminution in those cases in which we have thought it to be still necessary."

The evils which result from acting entirely on the nonrestraint system is very graphically illustrated by a reference to Hanwell :- "The system of non-restraint at Hanwell has been carried on by mild and kind treatment of the patients, by an increase in the numbers of attendants, and by adopting seclusion or solitary confinement, sometimes in darkened cells, in lieu of mechanical restraint. At our visit to this Asylum in 1843, there was no patient under mechanical restraint; but we saw a violent female lunatic, who had been endeavouring to bite other persons as well as herself, seized by four or five of the nurses, and, after a violent and protracted struggle, forced with great difficulty into, and fastened in, one of the cells. During this scene, there was much confusion in the ward, and the great efforts of the patient to liberate herself, and (after her seclusion) the violence with which she struck the door of the cell, and threw herself against it, must have greatly exhausted her. In another case, a female, secluded in a darkened cell, had contrived to tear off considerable quantities of a woollen rug, which she formed into balls and swallowed; one of these stuck in her throat, and, but for prompt assistance, accidentally rendered at our visit, she might have been suffocated. In another case, a female patient rushed against an elderly female with all her weight, striking her at the same time

violently on the loins, and precipitating her forwards. The person thus struck, being quite unaware of the attack, fell forwards on her head and neck in such a way as to cause apprehension lest a dislocation of the neck might have taken place; fortunately she did not receive any serious damage. Another woman was seen by us with the skin of her arm torn nearly from the wrist to the elbow, and bleeding from a severe cut which she had just received by thrusting it through the window of the cell in which she was confined. Besides these acts of violence, we observed on the bodies of several other patients various cuts and bruises, which we were told had been inflicted by their insane companions, and which we rarely meet with in other Asylums. During the short interval between the first and last days of our visit to this Asylum in June 1843, one of the male patients was killed by another." The Report adds,-"On our visit to Hanwell, in the year 1844, we found the Asylum in good order, and the patients, with one or two exceptions, tranquil and comfortable, and not one under mechanical restraint." It does not appear distinctly from this concluding passage whether it is to be understood that the evils found existing in 1843, arising from the non-restraint system, had been overcome in 1844.

Without entering into detail, the Directors would observe, in one word, that, while restraints of all kinds are as far as possible to be dispensed with, the opinion of those connected with this Institution, best able to judge, coincides entirely with that of the Commissioners as quoted above, namely, that restraint in certain cases, but these comparatively few—perhaps not more than one in a hundred—is indispensable.

A writer in the British and Foreign Medical Review for 1841 speaks thus:—"The celebrated Robert Hall is described by one of his biographers, after his first attack of insanity, which was but of six weeks' duration, as pale and emaciated, and his

spirits broken by 'severity and harshness,' and as discovering to his friend, with a heart full of injuries, all the secrets of his prison house, 'with his feelings and usage at the time.' We may learn something of these feelings when we find such a man complaining that they 'took away his watch,' in the Asylum to which he had been sent." Now, to one unacquainted with what becomes necessary in treating the insane, it looks like uncalledfor severity to deprive such a man as Hall of the companionship of his watch. The circumstances of his case, however severe it may appear, may have justified those to whose care he was committed in so acting. A case occurred sometime ago in this Asylum, corroborative of what has now been said. It was considered advisable after the admission of a patient, who was a person of rank, to deprive him of his watch, a splendid gold one. Sometime afterwards, when he showed some symptoms of recovery, his watch was restored to him; but shortly thereafter, being seized with a violent paroxysm, he threw it with all his might upon the floor or wall, by which it was shivered in pieces. But another reason besides that of securing the protection of the patient's property, may be mentioned as sometimes justifying the precautionary conduct just alluded to-namely, that of the patient's own personal safety, which in various ways might be endangered by his being allowed the custody even of a watch. Of course there may not be one case in a hundred where such extreme care is required; and the circumstance has only been noticed to show that persons unskilled in the treatment of the insane, are apt to imagine that unnecessary rigour is used: whereas, if they really understood the matter aright, they would acknowledge that the precautions they are disposed to complain of, are, in the circumstances, the purest kindness towards those unhappy sufferers on whose account they are adopted.

The general health of the patients during the past year has been exceedingly good.

In conclusion, it only remains for the Directors to express their satisfaction with the conduct of the different Officers in the Institution during the past year, who they trust will continue to discharge their important duties with that zeal and fidelity which has heretofore merited the approbation of the Directors, and secured the confidence of the public at large.

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rounstances of his case, however severe	Males.	Females.	Total.
Number of Patients remaining in the Asylum, on 9th June, 1845,	86	64	150
Number admitted from 9th June, 1845, to 8th June, 1846,	19	16	35

TABLE SECOND.

restored to him; but shortly thereafter,	Males.	Females.	Total.
Cured from 9th June, 1845, to 8th June, 1846, Removed by their friends, Died, Remaining 8th June, 1846,	2	13	15
	8	1	9
	7	3	10
	88	63	151

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LIST OF OFFICE-BEARERS,

1846-7.

WILLIAM PEDDIE, Esq. of Blackruthven, Chairman.

DIRECTORS.

1.-EX-OFFICIO.

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Hugh Barclay, Esq., Sheriff-Substitute of the County of Perth.

Charles G. Sidey, Esq., Lord Provost of the City of Perth.

Robert Sangster, Esq., Dean of Guild of said City.

Robert Keay, Esq., First Bailie of said City.

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Alexander Fraser, Esq., Convener of the Trades of Perth.

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ROBERT SMYTHE, Esq. of Methven.
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James Miller, Esq., Writer, Perth.
The Right Hon. John Lord Gray.
Captain James Hunter, of Auchterarder.
Colonel George Paterson, of Castlehuntly.
Rev. J. E. Touch, Minister of Kinnoull.
David Craigie, Esq., Cashier of the Perth Bank.
David L. Jolly, Esq., Banker, Perth.
David Boyter, Esq., M.D., Kinnoull Cottage.
Sir Thomas Moncrieffe, of Moncrieffe, Baronet.
Rev. Dr. John Crombie, Minister of Scone.

WILLIAM MALCOM, Esq., M.D., Physician.
Dr. Paul Pierides, Surgeon.
Mr. William Gloag, Commercial Bank, Perth, Treasurer.
Mr. Alexander Mackenzie, Town-Clerk, Perth, Secretary.
The Rev. John Bell, Chaplain.
Mr. Charles Walsh, Superintendent.
Mrs. Walsh, Matron.
Miss Shaw, Housekeeper.