

Sixteenth annual report of the directors and physician of James Murray's Royal Asylum for Lunatics. June 1843.

Contributors

James Murray's Royal Asylum for Lunatics.

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SIXTEENTH

ANNUAL REPORT

OF THE

DIRECTORS AND PHYSICIAN

OF

JAMES MURRAY'S

ROYAL ASYLUM FOR LUNATICS.

JUNE 1843.

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JUNE 1843.

It now devolves upon the Directors to make the Sixteenth Annual Report of the proceedings of the Institution. These proceedings, it is obvious, must necessarily vary but little from those of preceding years. For the first few years of the existence of the Asylum, every thing was new, and the novelties and improvements which were constantly occurring, fell to be noticed in the Annual Report; but, as the Institution continues to emerge from its infancy, these naturally occur more seldom. The management and proceedings generally assume a more uniform and settled course, and afford less interest than formerly, except, indeed, to those who feel disposed to study the subject of insanity as a part of medical science. The Directors are happy to be able to state, that during the last twelve months, the same prosperity and success have attended the Institution as during the former years.

During the past year, there have been admitted into the Institution 32 patients, viz., 13 males, and 19 females. In the course of the year, 17 have been cured,—5 males and 12 females; 4 have been removed by their friends more or less recovered,—

1 male and 3 females ; and 9 have died,—5 males and 4 females. In June last year, there were in the House in all 141 patients, while at the same period this year, the total number of patients is 143, shewing an increase of 2 patients this year, as compared with the preceding.

In reference to the unusual number of deaths during the past year, it may be proper to explain that four of those who died were persons of 70 years of age and upwards, whose deaths could, of course, be no matter of surprise according to the ordinary laws of mortality, even without any reference to the malady with which they were affected. Other two who died were paralytic and worn out men, on their reception into the House ; and one of the number, a woman, when she came to the Asylum, was almost *in articulo mortis*. She was an improper person, from the first, to be sent to the House, but having come from a distant parish, she could not easily be sent back.

While in England and France in the summer of 1842, the Physician took advantage of the opportunity to visit some of the most celebrated Asylums in both these countries ; and it is certainly gratifying to know that, in his opinion, our own Institution will stand a comparison with any of those which he inspected in either of these countries. On this occasion the Physician directed his inquiries somewhat particularly to the non-coercion system, of which so much has lately been said ; but from all he has either seen or heard of the working of this system, the Physician is still of opinion that slight and well regulated mechanical means of restraining the violence of the insane are both proper and necessary, and neither ought nor can be given up.

In Bedlam and St. Luke's, the Physician found the usual mode of treating the insane pursued in this and other Institutions was also followed there, and the medical men in these two Asylums are inferior to none in the world.

In France, the Physician found matters improved since his last visit to that country; but still there is more mechanical coercion used than he can approve of, and less attention paid to classification than is desirable. At Rouen, there is an Asylum built after a plan of the celebrated Esquirols, which consists of detached buildings, each capable of containing sixty patients, and forming three sides of a square. In these are the dormitories and day-rooms. The fourth side is open, and the space within is the airing ground—a most excellent plan in a warm climate, but which would not do well in our cold country. There is a separate house for the genteel patients, who never mix with the paupers. The bathing-house is also a distinct building, in which there are 40 baths, and great abundance of water supplied by a steam-engine and other ingenious apparatus.

It has often been a matter of regret that patients have been prematurely removed from the Asylum before their recovery was fully established. Their friends visit them at the House, and seeing that apparently their reasoning faculties are restored, they hastily conclude that all is right, and hurry them from the House as soon as possible. The consequence, not unfrequently, is, that the unhappy patients, being suddenly brought into contact with what was the exciting cause of their malady, before their minds have been sufficiently strengthened, suffer a relapse, and require to be returned to the Asylum. Were the relations of the insane to allow themselves, as they ought, to be guided by a medical adviser, they might render a signal service to the insane, and save themselves much trouble. It is not always an easy matter to say whether a man be insane or not, although persons unacquainted with the subject may think so. It has been well observed, in a letter by Dr. Andrew Combe, addressed in 1830 to the late Dr. Macintosh of Edinburgh, and which is published in the last number of the *Phrenological Journal*, that “insanity is not a state separated by a broad line

from sound mind. Every gradation is observable, and we perceive morbid action before we can venture to say that the patient is insane. * * * The symptoms indicative of insanity consist of deranged cerebral functions and local phenomena. Every sense, every nervous function, and every faculty of the mind may be involved in the disease or not; and hence indescribable variety. *The true standard is the patient's own natural character*, and not that of the physician or of philosophy. A person, from excess of development in one part of the brain, may be eccentric and singular in his mental manifestations, and yet his mental health be entire. Before we can say that he is mad, we must be able to shew a departure from his *habitual* state, which he is incapable of controlling. An irascible man may be very boisterous without being mad; but if a mild and timid creature become equally boisterous and irascible, we may apprehend disease. One may be *naturally* suspicious, jealous, and cunning, without being insane; but if a man of an open, generous, and unsuspecting nature become so, danger to his cerebral health is at hand."

There is another caution which the Directors think cannot be too much attended to—that is, to prevent the insane, on their leaving the Asylum, coming unnecessarily in contact with what may have been the exciting cause of the malady. Here, much depends upon the prudence and good sense of the friends of the insane. Cases, not a few, have occurred in the history of this Institution, of persons bringing on insanity through drunkenness, who, after a short residence in the House, recovered, but, after returning to their friends, no precautions being used to prevent their indulging in their old habit, their malady soon re-appeared, and they again required to be sent back to the Asylum. A few observations from the writer already cited, may tend to illustrate and enforce what has now been said. "The *exciting* causes are, *whatever disorders the action of the brain*. That organ requires

regular exercise for its health and preservation, and for the improvement of its functions, just as other parts do,—as the muscles in fencing or dancing. * * The same organic laws preside over the brain ; consequently *excess* of exercise, as intemperate study, excitement of passion, anxiety, and strong mental exertion long sustained, leads to morbid, cerebral action, with derangement of function in irritable subjects. *Deficiency* of exercise, or idleness, leads equally to diseased action and manifestation, as exemplified in the melancholy and ennui of the retired merchant or soldier, and in the numerous victims of the unoccupied classes of society. Local causes act by disordering the brain. Blows on the head, *coups de soleil*, intense cold, drunkenness, &c., shew this.”

In this, as in other Institutions, insanity is to be found assuming very various forms,—one patient is proud, and looks with disdain on all around him, wrapped up in his own imagined greatness ; while another is moping and dejected, and fancies himself unworthy to breathe the air of heaven. One is all benevolence, and ready to devote his whole energies for the good of mankind ; while another is misanthropical and avaricious. Some appear comparatively happy ; while others are bent on destroying both themselves and others. Besides this class, there is another class, where the disease is not confined to one or a few faculties of the mind, but affects the whole ; which last class are usually ranked under what may be called *general mania*. Now, nothing can be more apparent than that one kind of treatment for all these varieties of disease would be highly injudicious. The particular treatment best suited to each can only be known in this, as in other cases, from hard-earned experience. Hence the folly of the old system of applying an indiscriminate treatment to all classes of insane, and of the friends of the insane hazarding experiments upon them without applying for the advice of men of skill, cannot be too much con-

demned. The multiplicity of Asylums which now exist throughout the country, by which a large class of the insane are brought under the notice of a considerable number of medical men, whose attention is thus necessarily more particularly called to a study of this department of their profession, has been productive of the happiest effects, and is gradually tending to carry this department of medical science to a high degree of perfection.

The average number of cures in this Asylum were much the same during the past as in former years. Much depends upon the promptitude with which application is made for the benefit of the Institution; and from delay in this, cures are often retarded, if not rendered altogether impracticable. The rapidity with which certain patients have recovered after being admitted to the House, has often been surprising. Remarkable cases are recorded by medical authorities of sudden recoveries. "Pinel relates the case of a literary gentleman who, in a paroxysm of suicidal mania, resolved to go and jump into the river. On arriving at the bridge, he was attacked by robbers, against whom he defended himself vigorously, beat them off, forgot the purpose of his excursion, and returned home cured." Although cases exactly of the same kind have not occurred in this Asylum, yet there have been cases not altogether dissimilar; but here, as in other Institutions, recovery generally takes place gradually.

The Directors, in conclusion, will do their utmost to have the Institution conducted with that efficiency and order which has characterised it from its commencement. The Institution has already been found highly beneficial to the community, and possesses, the Directors are happy to think, to a great degree, the confidence of the public. They trust that the more it is known it will be the more highly appreciated; and that, by the continued attention and increasing experience of those intrusted with its more immediate management and superintendence, the

advantage and usefulness of the Institution to the community will, by the divine blessing, not only continue to be felt as hitherto, but be greatly increased.

TABLE FIRST.

	Males.	Females.	Total.
Number of Patients remaining in the Asylum on 13th June, 1842,	78	63	141
Number admitted from 13th June, 1842, to 12th June, 1843,.....	13	19	32

TABLE SECOND.

	Males.	Females.	Total.
Cured from 13th June, 1842, to 12th June, 1843,	5	12	17
Removed by their friends,	1	3	4
Died,	5	4	9
Remaining 12th June, 1843,.....	80	63	143

advantage and usefulness of the institution to the community will be the chief blessing, but this cannot be left to chance, but be given by the State.

Year	Number of Patients	Number of Deaths
1881	121	13
1882	121	13
1883	121	13
1884	121	13
1885	121	13
1886	121	13
1887	121	13
1888	121	13
1889	121	13
1890	121	13

TABLE 1000

Year	Number of Patients	Number of Deaths
1881	121	13
1882	121	13
1883	121	13
1884	121	13
1885	121	13
1886	121	13
1887	121	13
1888	121	13
1889	121	13
1890	121	13

The following table shows the number of patients and deaths in the institution for the years 1881 to 1890. The number of patients is shown in the first column, and the number of deaths in the second column. The total number of patients is 121, and the total number of deaths is 13. The following table shows the number of patients and deaths in the institution for the years 1881 to 1890. The number of patients is shown in the first column, and the number of deaths in the second column. The total number of patients is 121, and the total number of deaths is 13.