

**Annual report of the managers of the State Lunatic Asylum : made to the Legislature January 18, 1844 / New York State Lunatic Asylum at Utica.**

**Contributors**

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ANNUAL REPORT

OF THE

MANAGERS

OF THE

STATE LUNATIC ASYLUM.

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Made to the Legislature January 18, 1844.

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ALBANY:

CARROLL AND COOK, PRINTERS.

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336067

IN ASSEMBLY,

January 18, 1844.

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ANNUAL REPORT

Of the Managers of the State Lunatic Asylum.

*Utica, January 16, 1844.*

*To the Speaker of the Assembly.*

SIR:

Herewith is submitted the annual report of the Managers of the State Lunatic Asylum.

Respectfully yours.

T. H. HUBBARD,  
NICHOLAS DEVEREUX,  
A. MUNSON,  
J. SUTHERLAND,  
C. A. MANN,  
C. B. COVENTRY,  
DAVID BUEL, JUNIOR,  
T. ROMEYN BECK.

IN ASSEMBLY.

January 18, 1844.

ANNUAL REPORT

Of the Managers of the State Lunatic Asylum.

Printed, January 18, 1844.

To the Speaker of the Assembly.

SIR:

I have the honor to acknowledge the receipt of the annual report of the Managers of the State Lunatic Asylum.

Respectfully yours,

- T. M. HUBBARD,
- NICHOLAS DEVEREUX,
- A. BURROK,
- J. SUTHERLAND,
- C. A. JANN,
- C. B. GOVEENTRY,
- DAVID BUEL, Justice,
- T. ROMEYN BECK.

## MANAGERS.

T. H. HUBBARD,	UTICA:
N. DEVEREUX,	"
A. MUNSON,	"
C. B. COVENTRY,	"
C. A. MANN,	"
J. SUTHERLAND,	GENEVA:
T. R. BECK,	ALBANY:
D. BUEL, JUN.	TROY.
A. V. WILLIAMS,	NEW-YORK.

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## RESIDENT OFFICERS.

A. BRIGHAM, M. D. Superintendent and Physician.  
H. A. BUTTOLPH, M. D. Assistant Physician.  
C. CHATFIELD, Steward.  
MRS. CHATFIELD, Matron.  
EDMUND A. WETMORE, Treasurer.



MANAGERS

T. H. HURBARD, Treasurer

N. DEWEES, Secretary

A. MUNSON, Treasurer

C. R. GOVARTY, Secretary

C. A. WEAVER, Treasurer

J. RUTHERLAND, Secretary

T. R. BAKER, Treasurer

E. BIRK, Secretary

A. V. WILLIAMS, Treasurer

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A. BRIGHAM, M.D., Superintendent and Physician

H. A. BENTON, M.D., Assistant Physician

G. CHESTER, Steward

MRS. CHESTER, Matron

GEORGE A. WATSON, Treasurer

**REPORT**  
**Of the Managers of the State Lunatic Asylum.**

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TO THE LEGISLATURE.

The Managers of the State Lunatic Asylum, respectfully submit the following

**REPORT.**

The Asylum has been in operation since the 16th of January, 1843, when it was opened under some disadvantages of a temporary character, for the admission of patients. Many of the necessary arrangements had not then been completed; only a small part of the furniture had then been procured; the furnaces intended for warming the apartments to be occupied by the patients were unfinished, the verandahs uninclosed, and no means then in readiness for furnishing an adequate supply of water. But so strong was the desire expressed in applications from different parts of the State, to have the institution opened at the earliest day practicable, that we fixed on the 16th of January, believing that the small number of patients that would be admitted during the first two or three months, could be made comfortable; and that in the mean time, the necessary arrangements then in progress, could be completed.

We refer to the first annual report made to us by the superintendent, and herewith submitted to the Legislature, for a full and detailed account of the operations of the Institution, from the time it was opened for the admission of patients, to the 30th of November last. From this it will be seen that during a period of ten and one-half months, *two hundred and seventy-six* patients in all, have been received into the Asylum; that *fifty-three*, during the same period, have been discharged, recovered; fourteen improved; six unimproved; seven have

died, and that one hundred and ninety-six were remaining on the 30th November.

The Asylum has filled up more rapidly than was anticipated by us at the commencement ; and we believe there is no record of so great a number of admissions, during the same period of time, in any similar institution. In thus rapidly assembling so large a number of insane persons together in an Asylum, in many respects unprepared for their admission, and many of them when admitted of the most violent class, accidents of a serious character were reasonably to have been anticipated, besides being adverse in many respects to the success of the Institution.

Under these circumstances, also, the duties of the superintendent and other officers have been rendered peculiarly arduous and responsible. It is, however, with unfeigned gratification, that we are enabled to state, that no case of suicide or other accident of a serious nature has occurred ; that fifty-three of our fellow beings, under the auspicious influences of this Institution, have been restored to reason, to their families, and society ; and that those who still remain, have been rendered comparatively comfortable under the severest of human afflictions.

It is not easy for any person who has not actually seen the inmates of the Asylum, and remarked their condition on admission, fully to comprehend the extent of the change which is wrought upon them in every thing that marks the physical and moral condition of a human being, by being placed under the control and influence of such an institution.

The success which has thus far attended this noblest of public charities, and the remarkable exemption from any serious accident, in thus rapidly assembling so large a number of insane persons with attendants, who, when they commenced, were inexperienced in the performance of their duties, we cannot but attribute in a great degree, to the ability, skilfulness, experience, and entire devotedness to his duties of the superintendent who is placed at the head of the Institution, and who, under the general supervision of the managers, presides over and directs all its operations.

We also present herewith, an abstract from the reports made to us quarterly by the treasurer of the Asylum, showing the receipts and

expenditures on account of the Institution, from the first of January, 1843, to the first of December last. It does not embrace the payments for salaries of the resident officers of the Asylum, which by law are paid quarterly from the State Treasury.

By the 45th section of the act of the 7th of April, 1842, for organizing the Asylum, "sixteen thousand dollars were appropriated to provide furniture, stock, books, and fixtures; eight thousand dollars to purchase provisions, fuel, and medicines, and to defray contingent expenses; and two thousand dollars to enclose and improve the grounds.

It will be seen by reference to our report made to the Legislature at the last session, (Assembly Docs. 1843, No. 50,) that there had been expended up to January 1, 1843, eleven thousand six hundred and ninety-nine dollars and seventy-five cents, of the moneys appropriated by that act; \$5,618.58 of which was expended for fixtures, drains, a well, and towards completing and preparing the building; \$4,419.42 for the purchase of furniture; and the residue, \$1,661.75 for attendants, assistants, labor, fuel, lights, provisions, household stores, and current expenses.

By the act of 18th April, 1843, chap. 224, an appropriation was made of \$10,500, to defray the expenses of erecting a barn and two brick buildings for hospitals, work shops and wash room, and two wooden buildings for wood sheds and store houses. By the last mentioned act also \$5,600 were appropriated to replace that amount expended the preceding year, towards completing and preparing the building out of the moneys appropriated to provide furniture.

When the present Board of Managers was organized, and assumed the charge of the Institution, which was on the 19th of April, 1842, they found on examination that very considerable expenditures were necessary before the Institution could be opened for the admission of patients, although the impression seemed to have gone abroad that the Institution was then complete and ready for the admission of patients, as soon as the necessary furniture could be procured. Indeed the act of 1842, for organizing the Asylum, seems to have been framed and passed under such an impression. The present Board, as soon as they undertook the making of the necessary arrangements for opening the Institution, found that the building was not provided with a supply of water; that a long and expensive stone drain, leading to the Erie canal,

a distance of 140 rods was indispensable ; that hot air furnaces for warming the building, with new flues, must be constructed ; that the pipes for distributing water to different parts of the building, with the large cisterns or tanks in the attic, were to be procured ; the verandahs to be enclosed ; iron railings for the steps to be procured ; that considerable expenditures were required for additional support to the roof of the centre part of the building, which on examination was found insecure ; that rooms were to be provided for the most noisy and violent patients ; that the necessary out-buildings for the establishment were yet to be erected ; and that many fixtures and some alterations in the interior of the building were absolutely required, before the Asylum could be opened for the reception of patients.

The expenditures which we have found necessary to make, have been made with as strict a regard to economy as the necessary wants of the Institution would in our judgment warrant.

The original estimate for furniture for the entire establishment was \$16,076.88, (see Senate Doc. 1842, No. 20, page 46.) We were obliged to use part of the moneys appropriated for furniture for completing the building and getting it in readiness for the admission of patients. We have consequently up to the present time expended for furniture less than half the sum originally appropriated for that purpose. The house, however, is but scantily furnished, and further additions to the furniture will from time to time be indispensable, which will require the moneys thus necessarily taken from the furniture appropriation to be hereafter replaced.

We have expended for finishing rooms in the basement, fixtures, drain, completing and preparing the building, &c. from 1st January to 1st December, 1843, \$11,288.95 ; for furniture during the same period \$3,536.53 ; for improvement of the grounds, being principally enclosing, with a high fence, large yards in the rear of the building for the use of the patients, \$1,164.20 ; and for obtaining a supply of water and the various pipes and fixtures connected therewith, \$2,579.86.

We have also during the last summer erected a stone barn 100 by 46 feet, with vegetable cellar, vaults for manure, carriage room and stables, at an expense of \$2,761.54. The barn is large and substantially built, but not larger than will be required for the purposes of the Institution.

The following is a condensed statement of the expenditures made by the Board of Managers from the 19th April 1842, when the Board was organized, to 1st December 1843, the date of the last quarterly report of the treasurer.

Paid for finishing rooms, fixtures, drains, furnaces, and completing and preparing the building for the reception of patients,	\$16,241 00
Paid for obtaining a supply of water and the various fixtures, pipes, &c. connected therewith, .....	2,579 86
Paid for furniture, .....	7,955 95
Paid for the improvement of grounds and fences, .....	1,164 20
	<hr/>
	\$27,951 01
	<hr/> <hr/>

By the 45th section of the act of 1842, there was appropriated for the purposes mentioned in that section, in all \$26,000.

Charging the above items of expenditure to the appropriation of 1842, leaves to be paid out of the appropriation of 1843, .....	\$1,951 10
Paid out of appropriation of 1843, for erection of stone barn with vegetable cellar, vaults, &c.....	[2,761 54
	<hr/>
	\$4,712 55
	<hr/> <hr/>

Deducting the last mentioned sum from the \$16,000 appropriated by the act of 1843, there remains of that appropriation \$11,387.45, which has been necessarily expended prior to the first of January, in defraying the current expenses of the Institution. To the first of December last, only \$14,600 of the appropriation of 1843 had been drawn from the State Treasury. Deducting the above \$4,712.55 from the last mentioned sum, there remains of the appropriation of 1843, \$9,887.45, which has been expended, and may be charged to current expenses, as follows :

Paid for labor, wages of attendants, fuel, lights, medicines, provisions, &c., as per last annual report, .....	\$ 1,661 75
Paid for labor, wages of attendants, fuel, lights, medicines, provisions, &c., including stock for farm, horses,	
	<hr/>
Carried forward, .....	\$ 1,667 75

Brought forward,.....	\$1,661 75
carriages, harness and farming implements, from 1st January to 1st Dec., 1843, as per annexed abstract of treasurer's report,.....	11,738 69
Advanced to purchase clothing for patients,.....	414 71
Balance in treasury, Nov. 30,.....	490 11
	<hr/>
	\$14,305 26
	<hr/> <hr/>

Balance of appropriation of 1843, received as above, and applied as above to payment of current expenses,.....	\$9,887 45
Received for board, and advances for clothing of pati- ents, to 1st Dec.....	4,008 06
Received for rent of farm for 1842, and for articles sold, as per abstract of treasurer's report,.....	309 75
Received for rent of farm, received prior to 1st Jan- uary, 1843, as per last annual report,.....	100 00
	<hr/>
	\$14,305 26
	<hr/> <hr/>

By the 48th section of the act to organize the Asylum, it is provided that "all purchases for the use of the Asylum shall be for cash, and not on credit or time." By the preceding statement, it will be seen that the Managers had no means to defray the current expenses of the Asylum during the last year, except by using for that purpose the moneys appropriated at the last session, for the erection of out-buildings. They were thus obliged to defer the erection of any of the buildings provided for in the act of 1843, except a barn, which was indispensable. The Institution could be carried on temporarily without the other buildings provided for by that act, though they are much needed.

In establishing regulations relating to the admission and support of patients, we could not, in justice to the unfortunate class for whose benefit this institution was intended, require payment for their support, in advance. We supposed that all, or nearly all the counties in the State had not at the time the Asylum was opened, made any provision for the support in it of the insane poor, and if payment in advance had been required, nearly all of that class must necessarily have been excluded until the annual meetings of the boards of supervisors in November. Payment for the support of patients is required semi-annually

on the first of August and February. Under this regulation, although \$13,852.76 was charged for the support of patients, to the 30th of November, only \$4,008.06 of the sum thus charged was actually received into the treasury up to the last mentioned day ; and as the whole of the appropriations of 1842 and 1843, have been expended in the manner before stated, the moneys which are hereafter received on account of the support of patients, will be the only means for the payment of future current expenses, and we think will be adequate for that purpose.

We have made such regulations for the disbursement of money expended for the use of the Asylum, by the steward and treasurer, as seemed to us well calculated to insure fidelity, economy and strict accountability.

All moneys received, whether for the support of patients or otherwise, are paid to the treasurer, and by him deposited to his credit as treasurer, in one of the banks in Utica. All purchases for the Institution are made by the steward, for which duplicate bills are made out on one of which the steward endorses an order on the treasurer to pay to the person of whom the purchase is made, the amount of the bill, and on the other takes a receipt for the order so given. No payment is to be made by the treasurer, except on the order of the steward, endorsed on the bill containing the items of charge for payment of which the order is drawn, nor unless the bill is countersigned, or endorsed, "approved" by the superintendent. The treasurer pays the orders of the steward by checks on the deposit bank, and takes a voucher for such payment, and makes entries in his books of the payment, under the proper heads of expenditure. To enable the steward to pay petty current expenses, the payment of which in the manner above mentioned would be inconvenient, the treasurer is authorized to advance to him a sum not exceeding \$200 ; the expenditures of which is entered by the steward in a pass book, and must be accounted for monthly, or oftener to the treasurer, after the account has been examined and approved by the superintendent, and before any further advance of money can be made to him by the treasurer for petty expenses. The steward is required to take vouchers for all payments on account of petty expenses exceeding one dollar, and file the same with the treasurer on settling his account for petty expenses. The treasurer and steward are required to furnish to the Managers quarterly abstracts of their accounts which are examined and compared with the original vouchers, by the finance committee of the Board.



The measures taken to furnish a supply of water for the use of the Asylum, have proved, as far as we have had an opportunity of judging, entirely successful. The large reservoir formed by excavating a well sixteen feet in diameter in the clear, for the first twenty-three feet in depth ; and eight feet diameter for the remaining ten or eleven feet, will, as far as we yet have had an opportunity of testing it, furnish an ample supply of water at all seasons, for the use of a much larger number of inmates than can be accommodated in the present building. The water is forced into a reservoir in the attic of the building with great facility and at very trifling expense, by means of a pump operated by a single horse.

We feel it our duty to repeat the recommendation in our last annual report, that provision should be made for the purchase of a piece of ground, of between three and four acres, which lies westerly of and adjoining the grounds in front of the building, and approaches to within a short distance of the west wing. By an agreement between the owners of this land and the former building commissioners, (Senate Document 1839, No. 20,) we are bound to lay out and open a street, adjoining this land, which will lead to within a short distance of the west wing of the Asylum. It is quite desirable to avoid the necessity of opening this street, as well as to avoid having buildings erected too near the Asylum. This ground is also wanted as an addition to the grounds in front of the building, and which it is intended to have laid into promenade grounds and ornamented with shrubbery and trees. We have not yet commenced laying out, improving, or fencing the grounds in front, but intend doing so the coming spring, prior to which it is desirable on many accounts, that this small addition to the grounds should be made.

The two brick buildings mentioned in our last report, to be used for hospitals for the sick, washing and ironing rooms and work shops, are much needed. We have now no hospital department for the sick. The washing and ironing is done in the basement of the centre part of the present building, but the rooms used for that purpose are too small and badly lighted, and we are fully convinced that both the health and comfort of the inmates above, require that the washing for so large a family should be removed to a place without the present building.

It is also desirable that other accommodations for the more noisy and violent class of patients should be provided. That class are now placed in the basement of the present building, where we have fitted

rooms that are entirely comfortable, but it is found that they disturb and annoy by their noise, those in the halls above. The present building was originally intended for only the convalescent, a class who are comparatively orderly and quiet. All well organized hospitals for the insane have separate accommodations for the noisy and violent class, and so far removed as not to disturb those who are quiet.

By the 35th section of the act to organize the Asylum it is provided "that the price to be paid for keeping the poor or any persons in indigent circumstances in the Asylum until the first of April, 1843, shall be two dollars and fifty cents per week, and that thereafter it shall be annually fixed by the managers, and shall not exceed the actual cost of support and attendance, exclusive of officers' salaries."

In the commencement of such an institution, and while it is not filled with inmates, the actual cost of support and attendance for each person has necessarily been greater than it will be when the Institution is filled. Hitherto we have charged for patients supported by the counties, two dollars and fifty cents per week, which has been as near the actual cost as could be determined by us on the first day of April last. But the Institution is now nearly filled and the expense for attendance is less in proportion to the number of patients than it was in the commencement. From a desire to extend the benefits of this Institution to the insane poor, we have, not without some hesitation, fixed the price for keeping "the poor or any persons in indigent circumstances," whose support is chargeable to a town or county, at two dollars per week, after the first of February, 1844. We think the actual cost of support and attendance for that class, will not, after the first of February, exceed that sum. We anticipate greater proceeds from the farm the ensuing than we had the past year, which will tend to lessen the actual cost of support.

There are at the date of this report, two hundred and ten patients in the Asylum, and we can not properly accommodate, with our present means of classification, more than two hundred and twenty-five. There are accommodations for only twenty of the most violent class, (a greater number than we usually have,) in the basement of the two wings.

We have no means of ascertaining with accuracy the number of insane in the State, for whom provision ought to be made in a well regulated asylum. Our predecessors who planned and commenced the building of this Institution, were convinced, after very full investigation, that the number for whom such provision should be made, was at least one thousand, and their plan contemplated accommodations for that number. By the census of 1840, there were reported in the State, 2340 idiots and lunatics. In 1841, the Secretary of State reported that there were 803 lunatics in the State, supported at the public charge. In 1842, the Trustees of this Institution, from information obtained by circulars addressed to the different counties, estimated that there were 430 lunatic paupers in the State, then *confined in jails and poor-houses*.

It is thus perfectly apparent that but a very small number of the insane in the State, can at present receive the benefits of this Institution. The question then properly arises, shall it be enlarged?

It will be borne in mind, that the commissioners who originally formed the plan of this Institution, designed it on a scale sufficiently large to accommodate one thousand patients. The foundations of four buildings, each five hundred and fifty feet in length, were laid.

By the act of 1st May, 1839 the Legislature directed the completion of one of the buildings, and that the foundations of the others should be leveled and covered for protection.

In looking to the future enlargement of the Institution, we have doubted whether it would be advisable, under the existing state of things, to attempt to carry out the original plan; and it is with diffidence in our own judgment, that we have arrived at the conclusion that it is not expedient, under existing circumstances, to urge upon the representatives of the people, its enlargement, according to the original plan of its founders.

We early found that the south and west foundations, which were carried up only a little above the surface of the ground, had become so much injured by exposure to the rain and frost, as to be wholly unfit to build upon as originally designed. We accordingly used most of

the stone in those foundations, for making the drain and the erection of the barn.

The east foundation, which was carried up nearly or quite to the height of the basement, we had supposed was better protected, and consequently less injured. We very recently employed two experienced and competent master builders to examine it, with a view of determining its present condition, who certified to us, "that they are of the opinion, that it is damaged to such an extent, by the rain and frost, that it is unsafe to erect a building upon it as originally contemplated."

We think there are manifest and great advantages in having the parts of the establishment so connected, that both officers and patients can easily pass, at all times, to and from the different apartments, an advantage not secured by the original plan.

By erecting two additional wings of brick, each 250 feet long, including the verandas, by 38 feet in width, we shall be enabled to furnish suitable accommodatons in the Institution for five hundred patients. We should recommend to have these additional wings placed fifteen or twenty feet from, and at right angles with, the present wings, each story to be connected with each of the stories of the present building by a veranda, in such a manner as not to obstruct the light, but so as to afford easy and convenient access to the different halls. In this manner all the required means of classification could be secured, the whole could be placed under the charge of one superintendent with two assistants, the patients could be easily changed from one apartment or class to another, which is found to be frequently necessary, and all could have easy access to the chapel in the present building, which is sufficiently large to accommodate five hundred persons.

These additional wings we think can be erected at less expense than it would cost to build on the east foundation, 550 feet long, (with a centre part of 125 feet, designed to be occupied by the resident officers and not planned or intended for apartments for patients,) in case that foundation was now in a condition safe to build upon.

The erection of the two wings, as here suggested, with buildings in the rear, for hospitals for the sick, washing and ironing rooms and work shops, which would be connected with the proposed wings, and together enclose a large yard for the use of patients, would form a plan af-

fording desirable facilities for management and access to different apartments, convenient arrangements for classification, and also be susceptible of further enlargement, if necessary, in such manner as to secure the advantages of a connected establishment.

We have caused careful estimates to be made by practical and experienced builders, of the cost of erecting with brick, two wings of the size above mentioned, with two buildings of brick, 130 by 25 feet each, for hospitals, washing, ironing, and work rooms, with two frame buildings, 70 by 20 feet each, for wood and store-rooms.

They estimate the entire expense, exclusive of painting, at \$69,016. Making a reasonable allowance for contingencies, we think it safe to say that the whole expense of erecting the building would not exceed \$80,000.

Under this state of facts, it is respectfully submitted to the Legislature to determine whether the Institution shall be enlarged, and if so, how and when it shall be done. At the same time, we feel it a duty we owe to the numerous insane in our State, who need the advantages of a well regulated asylum for their restoration or comfortable existence, to recommend to the Legislature the enlargement of it as speedily as the necessary means can properly, in the judgment of the Legislature, be devoted to this object. If the work should be commenced the ensuing spring, it will require at least two years, under the most favorable circumstances, before it can be completed.

T. H. HUBBARD,  
NICHOLAS DEVEREUX,  
A. MUNSON,  
CHARLES A. MANN,  
J. SUTHERLAND,  
C. B. COVENTRY,  
DAVID BUEL, JR.  
T. ROMEYN BECK.

## ABSTRACT

### Of Treasurer's Report.

*Receipts from 1st January to 1st December, 1843.*

1843.	Jan. 1.	Balance in the treasury, as per report, . . . .	\$3,900	25
	Feb. 1.	Cash from State Treasurer, appropriation,		
		1842,	3,000	00
	March 27.	do do do do do	4,000	00
	May 13.	do do do do do	3,500	00
	June 2.	do do do do 1843,	2,600	00
	July 3.	do do do do do	3,000	00
	Aug. 1.	do do do do do	2,500	00
	Sept. 12.	do do do do do	2,000	00
	Oct. 12.	do do do do do	2,000	00
	Oct. 28.	do do do do do	2,500	00
	June 14.	do from S. S. Thorn, . . . . .	\$5	25
	July 10.	do for old brick sold, . . . . .	4	50
	Aug. 18.	do of A. C. Doum, for a horse,	80	00
	Sept. 21.	do of E. Porter, for rent of farm, to 1st April, . . . . .	100	00
	Nov. 15.	do of H. Seymour, in part for yoke of oxen, . . . . .	25	00
		do of C. T. Parker, for old barn sold,	95	00
			<u>309</u>	<u>75</u>
	Jan. 1, to Dec. 1.	Cash from sundry patients, for board, &c.,	4,008	06
			<u>\$33,318</u>	<u>06</u>

*Payments from 1st January to 1st December, 1843.*

For finishing rooms in basement, fixtures, drains, furnaces, verandahs, completing and preparing the building for the reception of patients,.....	\$11,288	95
For furniture,.....	3,536	53
For supplying water and fixtures connected therewith,..	1,923	33
For erection of stone barn, with vegetable cellar, carriage room, stables, &c.,.....	2,761	54
For improvement of the grounds, being principally for fences,.....	1,164	20
For advances to purchase clothing for patients,.....	414	17
Attendants, assistants and labor,.....	3,081	45
For fuel and lights,.....	1,258	08
For provisions, household stores, &c.,.....	5,300	29
For books,.....	44	00
For the farm, stock, horses, carriages, harness and farming implements,.....	1,032	79
For medical supplies,.....	126	85
For blank books, stationery and printing,	306	76
For miscellaneous expenses,.....	588	47
		<hr/>
Balance in treasury, Nov. 30, 1843,.....	490	11
		<hr/>
	<b>\$33,318</b>	<b>06</b>
		<hr/> <hr/>

## FIRST ANNUAL REPORT

Of the Superintendent of the New-York State Lunatic Asylum at Utica, from the opening of the Institution, January 16th, 1843, to November 30th.

*To the Managers of the Asylum.*

GENTLEMEN,

In compliance with the ninth section of the act to organize the Asylum, the Superintendent submits to the Board of Managers his

### FIRST ANNUAL REPORT.

The Asylum was opened for the reception of patients the 16th of January 1843. Since that time to the 30th of November, a period of ten months and a half, there have been admitted as patients :

	Men.	Women.	Total.
Discharged, recovered, .....	148	128	276
do improved, .....	30	23	53
do unimproved, .....	10	4	14
do unimproved, .....	1	5	6
do dead, .....	6	1	7
Remaining, November 30th, .....	101	95	196



TABLE I.

*Monthly Admissions.*

	Men.	Women.	Total.
January, .....	9	6	15
February, .....	13	14	27
March, .....	14	7	21
April, .....	16	8	24
May, .....	30	20	50
June, .....	12	12	24
July, .....	12	16	28
August, .....	10	13	24
September, .....	10	13	23
October, .....	10	9	19
November, .....	11	10	21
Total, .....	148	128	276

TABLE 2.

*Showing the number from each county, and how supported at the Asylum.*

COUNTIES.	Supported by county or town	Supported by friends.
Albany, .....	11	1
Allegany, .....	1	1
Broome, .....	2	0
Cattaraugus, .....	2	1
Cayuga, .....	5	2
Chautauque, .....	8	0
Chemung, .....	3	0
Chenango, .....	7	9
Columbia, .....	1	0
Cortland, .....	1	2
Delaware, .....	1	0
Dutchess, .....	0	1
Erie, .....	5	2
Fulton, .....	0	1

TABLE 2. (CONTINUED.)

COUNTIES.	Supported by county or town.	Supported by friends.
Genesee,.....	3	1
Greene,.....	1	1
Herkimer,.....	7	8
Jefferson,.....	5	8
Kings,.....	0	1
Lewis,.....	0	1
Livingston,.....	4	0
Madison,.....	1	10
Monroe,.....	6	5
Montgomery,.....	3	0
New-York,.....	0	2
Niagara,.....	4	1
Oneida,.....	17	21
Onondaga,.....	10	6
Ontario,.....	4	1
Orange,.....	5	0
Orleans,.....	3	0
Oswego,.....	5	1
Otsego,.....	12	5
Queens,.....	0	1
Rensselaer,.....	6	3
St Lawrence,.....	1	1
Saratoga,.....	1	2
Schenectaday,.....	3	1
Schoharie,.....	3	0
Seneca,.....	3	0
Steuben,.....	1	0
Tioga,.....	1	0
Tompkins,.....	3	0
Ulster,.....	2	0
Washington,.....	0	1
Wayne,.....	2	4
Westchester,.....	0	1
Wyoming,.....	1	1
	164	107

With the exception of two patients from Canada, one from Ohio, one from Connecticut and one from Illinois, all that have been admitted into the Asylum were residents of the State of New-York.

No patient has been received from either of the following counties, viz: Clinton, Essex, Franklin, Hamilton, Putnam, Richmond, Rockland, Suffolk, Sullivan, Warren and Yates.

Of the 164 patients supported at the Asylum by counties, 76 were sent by the first judge of the county, in conformity to the 26th section of the "Act to organize the State Lunatic Asylum, and more effectually to provide for the care, maintenance and recovery of the insane," passed April 7th, 1842.

Eighty-eight were committed to the Asylum mostly by the superintendents of the poor of the counties, a few by the overseers of the poor of towns, and by justices of the peace.

Eighty patients have been discharged. Fifty-six of these were recent cases, that is, of not more than twelve months' duration. Of this number forty-nine recovered. Three were discharged without recovery, and four died.

Twenty-four were old cases. Of this number four recovered, seventeen were discharged without recovery, and three died.

From the foregoing statement, it is evident the location is a healthy one, and that our arrangements are good for the accomodation, comfort and proper treatment of the insane.

We have been entirely exempt from fevers, dysentery, or other serious affections of the bowels, and from catarrhal complaints. The influenza prevailed very generally in this vicinity, but no case occurred among our patients or assistants.

We attribute this remarkable exemption from colds and affections of the lungs that arise from changes of the atmosphere, to the thick walls of the building and the great space enclosed by them, which preserves a large body of air nearly of the same temperature. We were not at all oppressed by the heat of summer, and owing to the excellent construction and arrangement of hot air furnaces, we know nothing within our walls of the severity of winter.

The deaths have been few. One died soon after admission, from exhaustion consequent to long abstinence from food and exposure to cold, before he came to the Asylum. Another from erysipelas, arising from a wound before admission; a third from schirrous stomach; one died of paralysis; two of consumption, and one from sudden effusion upon the brain, the third day after reception.

Evidence of the general good health of our patients, will be found in the following table. We have practised weighing each patient soon after admission, and again the first day of each month, and when discharged.

TABLE 3.

Total weight on admission, of 276 patients, .....	34,856 lbs.
Total weight of those discharged and remaining December 1st, .....	35,885 "
	<hr/>
Increase in weight, of all received, .....	1,029 "
	<hr/>
Total weight of men on admission, .....	20,440 "
Total weight of men at the end of the year and when discharged, .....	20,981 "
	<hr/>
Increase, .....	541 "
	<hr/>
Average weight of men on admission, .....	138 lbs. 1 oz.
Average weight of men at the end of the year, and when discharged, .....	141 " 10 oz.
Total weight of women on admission, .....	14,416 lbs.
Total weight of women at the end of the year, and when discharged, .....	14,904 "
	<hr/>
Increase, .....	488 "
	<hr/>
Average weight of women on admission, .....	112 " 10 oz.
Average weight of women at the end of the year, and when discharged, .....	116 " 7 oz.

With the exception of two, all discharged cured had gained flesh—some of them from 10 to 18 pounds, one 37 pounds. Total increase in weight, of the 53 discharged cured, 306 pounds.

TABLE 4.

*Ages of the patients admitted into the Asylum.*

Under 20 years of age, .....	22
From 20 to 25 years of age, .....	52
“ 25 to 30 “ .....	45
“ 30 to 35 “ .....	44
“ 35 to 40 “ .....	38
“ 40 to 45 “ .....	24
“ 45 to 50 “ .....	17
“ 50 to 55 “ .....	15
“ 55 to 60 “ .....	7
“ 60 to 65 “ .....	5
“ 65 to 70 “ .....	4
“ 70 to 75 “ .....	1
“ 75 to 80 “ .....	1
“ 80 to 85 “ .....	1

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TABLE 5.

*Ages when insanity commenced.*

Under 20 years of age, .....	48
From 20 to 25 years of age, .....	62
“ 25 to 30 “ .....	43
“ 30 to 35 “ .....	29
“ 35 to 40 “ .....	42
“ 40 to 45 “ .....	13
“ 45 to 50 “ .....	16
“ 50 to 55 “ .....	6
“ 55 to 60 “ .....	6
“ 60 to 65 “ .....	7
“ 65 to 70 “ .....	2
“ 70 to 75 “ .....	2

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TABLE 6.  
*Civil Condition.*

Married, .....	140
Single, .....	125
Widowers, .....	7
Widows, .....	4
	<hr/>
	276
	<hr/> <hr/>

This table presents a different result from what we see in the reports of many other lunatic hospitals. In most such, both in Europe and in this country, the single are more numerous than the married. This has been so generally noticed, that some have supposed that celibacy increased the number of insane, or that matrimony prevented insanity. This, though no doubt true in an occasional instance, is, I apprehend, a wrong inference, from the fact that more single than married persons are found among the insane.

Many become insane previous to the age when persons usually marry. Thus we see, by table fifth, that 48 out of 176 became deranged before the age of 20, and 62 more before the age of 25. Many others, though not actually deranged, are so strongly predisposed to insanity that their marriage is not deemed advisable. In these instances celibacy is the consequence and not the cause of the insanity.

TABLE 7.  
*Occupations.*

	Men.
Farmers, .....	62
Laborers, .....	26
Merchants, .....	14
Clerks, .....	9
Scholars, .....	7
Joiners, .....	6
Shoemakers, .....	4
Attorneys, .....	4
Saddlers, .....	3
Stone cutters, .....	2
Physicians, .....	2
	<hr/>
Carried forward, .....	139

Brought forward,.....	139
Teacher, .....	1
Baker, .....	1
Glass cutter, .....	1
Innkeeper, .....	1
Boatman,.....	1
Blacksmith,.....	1
Hatter, .....	1
Engraver, .....	1
Carriage maker, .....	1
	<hr/>
	148
	<hr/>
	Women.
House work,.....	99
School girls, .....	12
Tailoresses,.....	8
Milliners, .....	4
Instructresses,.....	4
Mantuamaker,.....	1
	<hr/>
	128
	<hr/>

By farmers we mean those who labor on farms, whether they own them or not; and by laborers, those accustomed to manual labor, but not on farms.

Under the head of house work, we have placed not only house-keepers, but all the women accustomed to house work.

TABLE 8.

*Places of Nativity.*

State of New-York,.....	181
Ireland, .....	22
Connecticut, .....	17
Massachusetts, .....	16
England, .....	10
Canadas, .....	7
New-Hampshire, .....	6
Vermont,.....	6
	<hr/>
Carried forward,.....	265

Brought forward, .....	265
Scotland, .....	5
Rhode-Island, .....	2
New-Jersey, .....	1
Pennsylvania, .....	1
France, .....	1
Denmark, .....	1
	—
	276
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TABLE 9.

SUPPOSED CAUSES.	Men.	Women.	Total.
Religious anxiety, .....	29	21	50
Ill health, .....	23	23	46
Unknown, .....	22	18	40
Puerperal, .....	..	20	20
Loss of property .....	14	3	17
Doubtful, .....	7	8	15
Excessive study, .....	9	3	12
Intemperance, .....	9	1	10
Death of kindred, .....	4	6	10
Fright, .....	4	3	7
"Millerism," .....	5	2	7
Abuse of husband, .....	..	5	5
Perplexity of business, .....	2	3	5
Disappointed ambition, .....	3	..	3
Epilepsy, .....	2	1	3
Seduction, .....	..	3	3
Blows on the head, .....	2	1	3
Disappointment in love, .....	2	2	4
Masturbation, .....	2	1	3
Political excitement, .....	2	..	2
Jealousy, .....	1	1	2
Neuralgia, .....	1	..	1
Malformation of head, .....	1	..	1
Excessive labor, .....	1	..	1
Inhaling carbonic acid gas, .....	1	..	1
Exposure to excessive heat, .....	1	..	1
Exposure to fumes of charcoal, .....	..	1	1
Excitement from sea voyage, .....	..	1	1
Opium eating, .....	..	1	1
Irregular decay of faculties from old age, .....	1	..	1
	148	128	276

Thirty-four are known to have insane kindred : thirty had been previously insane : fifty-four were suicidal : three had committed homicide before admission.



*Remarks.*

The table of causes deserves attention and explanation. The causes of many diseases are obscure; those of insanity are often peculiarly so. Hence we find few authorities attempt to give any thing more than the *supposed* or *probable* causes.

We have endeavored to be as accurate as possible in investigating the cause of insanity in each individual admitted. We have interrogated relatives, neighbors and physicians, so far as we have had opportunity, who were knowing to the cases sent to us, and have neglected no means in our power for ascertaining the exact causes of the attack.

In many cases the evidence thus obtained has been satisfactory, and we feel but little doubt of the correctness of the causes assigned, but in many others, we have not obtained such evidence as to enable us to state them confidently.

A general division of the causes of insanity is into moral and physical, though authorities are not agreed as to their comparative influence. With Pinel, Esquirol and Georget we believe that moral causes are far more operative than physical. In our opinion, those in the above table under the heads of masturbation, blows on the head, malformation of the head, excessive labor, inhaling carbonic acid gas, exposure to the fumes of charcoal, opium eating, and exposure to the sun, are about all that we can confidently attribute to physical causes.

It is usual, we know, to place the puerperal, and those arising from ill health and intemperance in the same list, and we do not doubt that in many instances they are thus correctly arranged; but according to our observation the puerperal state only renders the nervous system more susceptible of derangement from some moral cause, as neglect and abuse of husband, or other kind of mental anxiety.

So as regards intemperance, happily now an unfrequent cause of insanity in this region, we have thought in many instances it was the remorse, the mental agony consequent upon a misspent life and fortune, that produce the insanity, and not the direct effect of intemperance.

The sad effects of alcoholic drinks are more frequently found in the stomach than in the brain. Insanity is comparatively rare among savages and uncultivated nations that are intemperate and exposed to the same physical causes as the inhabitants of civilized nations.

Intemperance is however not unfrequently the indirect cause of insanity in many that are temperate. Many of the cases of puerperal insanity and some of those under the heads of ill health and loss of property, and all those under that of abuse of husband, appear thus to have originated.

Ill health should not always be considered a physical cause of insanity, as dyspepsia, palsy, epilepsy, apoplexy, and other complaints that often precede insanity, are caused by mental anxiety, and are merely the first symptoms of disease of the brain in those who become insane.

The causes are also very properly divided into the predisposing and the exciting.

Among the forms is hereditary predisposition or a peculiarity in the structure of the brain, transmitted from parents. It is not however disease, nor would it lead to insanity without the agency of some exciting cause.

Intemperance and excesses of all kinds, erroneous methods of education which prematurely task the intellectual faculties or which permits the passions to acquire undue power in early life, are also predisposing causes of mental alienation.

But in our opinion the most frequent and immediate cause of insanity and one the most important to guard against, is the *want of sleep*.

So rarely do we see a recent case of insanity that is not preceded by want of sleep, that we regard it as almost the sure precursor of mental derangement.

Notwithstanding strong hereditary predisposition, ill health, loss of kindred or property, insanity rarely results unless the exciting causes are such as to occasion loss of sleep. A mother loses her only child, the merchant his fortune, the politician, the scholar, the enthusiast, may have their minds powerfully excited and disturbed, yet if they sleep well they will not become insane.

We find no advice so useful to those who are predisposed to insanity, or to those who have recovered from an attack, as to carefully avoid every thing likely to cause loss of sleep, to pass their evenings tranquilly at home and to retire early to rest.

We add a few cases of insanity attributed to different causes, in all of which loss of sleep preceded the attack, and but for which we apprehend insanity would not have occurred.

### 1. *Millerism.*

S. H. attended from idle curiosity a religious meeting, and heard preached for the first time the doctrine of the immediate destruction of the world. His attention was awakened and he attended similar meetings several evenings in succession; commenced studying the Bible on the subject; passed several nights in the investigation; had but little or no sleep for above a week; then had contests with devils; determined not to eat until the end of the world, and became decidedly deranged.

### 2. *Excessive Study.*

P. W. a young man of superior mental attainments and great ambition, determined to excel in his profession, and studied excessively during the day and night. His health, however, remained good until he resolved to sleep less and devote more of the night to study. He allowed himself only three hours for rest, but after pursuing this course a few months, became deranged. The particulars thus stated, I have learned from his diary and journal, in which nothing evincing mental derangement appears until several months after the resolve to allow himself but three hours out of the twenty-four, for sleep.

### 3. *Religious Excitement.*

Mrs. F. attended upon protracted religious meetings during the day and evening, for several successive weeks. Her conversation and thoughts were wholly upon religious subjects, but she showed no symptoms of insanity until after passing several nights without sleep, engrossed in religious exercises and conversation. Soon after this, she became dejected and doubtful of her salvation, then said she had committed the unpardonable sin, and attempted to destroy herself.

### 4. *Loss of Child.*

Mrs. H. attended her only child during a protracted and distressing illness, slept but little for several weeks previous to its death. After this she was unable to sleep, notwithstanding some use of opiates, and in a few weeks became deranged.

*5. Loss of Property.*

Mr. J. a high spirited, proud, but worthy merchant, lost his property by some ill-judged investments of capital. During his embarrassment, and soon after it, he often spoke of his inability to sleep, and remarked to a friend that he "had not slept one hour in any one night for more than a month;" soon after this he became insane.

In these instances, and many similar might be adduced, excitement and anxiety of mind produced loss of sleep, and insanity was the consequence. Had the mental anxiety not had the effect to prevent sleep, insanity would not probably have occurred.

Some have doubted whether insanity is ever produced by attendance on religious meetings, and hearing certain religious doctrines inculcated, as for instance that of the immediate destruction of the world; and have appeared to think, if such is the fact, it might be adduced as evidence of the incorrectness of such doctrines. Not so: all that it proves is, that they have taken strong hold of the feelings and intensely occupied the mind. It would be strange indeed if they should not. Truth is as powerful to excite the feelings as error; and of all truths those connected with religion most strongly interest the human mind, and while to thousands they bring consolation and hope, and calm the disquieted mind, and thus no doubt save many from derangement, to a few of very excitable temperament, or to those already predisposed to insanity they cause a loss of sleep, and occasionally insanity.

The error is not so much in the doctrine preached, as in the too frequent or too long continued and untimely attendance of excitable and nervous persons upon such meetings. They should be advised not to attend frequently, especially evenings. All agree that it would be often injurious to preach to the sick in a manner that would be proper and useful to the healthy, but in every neighborhood are some nervous and easily excited individuals, who are as liable to be injured by exciting preaching as those actually sick.

The number of cases attributed to religious excitement is large. Many, if not the most of them, occurred during, or soon after long attendance on protracted religious meetings, and full one half were individuals of unquestionable piety previous to their attendance on such meetings. But their feelings having become strongly engaged, and their sympathies awakened for those who were anxious, they became

much excited, sleepless and finally deranged. They were, however, for the most part either persons already debilitated by disease or of very nervous temperaments, and liable to insanity from any cause that occasioned much mental excitement or anxiety.

If such individuals were timely cautioned by their friends, no doubt the number of cases attributed to religious excitement would be greatly diminished.

Insanity arising from the causes alluded to, usually comes on suddenly, or in the course of a few months. But there are other cases of mental derangement that advance more slowly, the causes of which may often be avoided, and which induces me to allude to them.

I refer to mental derangement that arises from too constant application to one point; by suffering the mind to dwell intensely, and for too long a time upon one subject. All the faculties of the mind should be exercised and not one exclusively. If one subject is permitted to engage all the thoughts and feelings, other faculties and feelings become weakened and the healthy balance of the mind is destroyed, and mental derangement, usually monomania, ensues. Like the philosopher in *Rasselas*, who, after forty years' constant devotion to the study of astronomy, to the exclusion of all other topics and even conversation, became deranged and fancied he had the command of the heavenly bodies; so we every day see monomaniacs caused by too exclusive devotion to one subject.

There are exceptions no doubt,—instances of individuals who receive no marked injury from this cause, but the majority will. It is an excellent rule for every person to follow, that when the mind is found constantly dwelling on one subject, to strive to withdraw it, and to become interested in some other, for a part of the time at least, and to let no one subject, however important, wholly engross the thoughts.

Allusion has been made to a predisposition to insanity being given by premature cultivation of the mental faculties. This appears to be a fruitful source of weak, ill regulated, and not unfrequently of disordered minds. The mental powers being unduly and irregularly tasked in early life, never after obtain their natural vigor and harmonious action.

Neglected *moral education* is also a fertile source of insanity, whereby the feelings and passions acquire undue power. A character is early

formed that can bear no restraint or opposition, and in after life is kept in a constant state of excitement, until insanity ensues.

But some are prone to insanity, no doubt, in consequence of their organization. Men are not created alike. In some we find various organs imperfectly formed or developed, and such persons, from this cause, are disposed to disease of these organs.

In regard to the brain, the material instrument of the mind, it is less perfect from birth in some, than in others.

In certain individuals the portion of the brain connected with the intellectual faculties is deficient. Where this is considerable it causes idiocy. In others, who seem to have good intellectual organization there appears to be deficiencies in regard to the brain, connected with the moral powers.\*

The want of balance between the reasoning faculties and the feelings appears to produce insanity in some.

In such individuals, nothing peculiar is noticed in early life, nor until the time that reason usually begins to exercise its sway over the impulses and feelings. Then we observe that the latter are too strong for the former. It is at this point, that education should exert its utmost power, to give to reason the control of the feelings and passions. When it fails to do so, insanity not unfrequently ensues, for most insane persons become so through the feelings.

This dominion of reason should extend over all the feelings and impulses, the good as well as the bad, for insanity is perhaps most frequently produced by the excitement of some of the best impulses of our nature. "It is a calamity," says Sir James Mackintosh, "incident to tender sensibility, to grand enthusiasm, to sublime genius, and to intense exertion of the intellect."

It is hoped these few remarks on the causes of insanity may engage the attention of some, and occasionally prevent the occurrence of this disease.

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\* These are *moral idiots*, and are often seen in prisons.

Like Caliban of Shakespeare,

——— "On whose nature,  
Nurture (education,) can never stick,  
Which any print of goodness will not take,  
Being capable of all ill,"—

### DEFINITION OF INSANITY.

Many have tried, but failed to give a definition of insanity that would embrace every case. Some, as Dr. Good observes, "are so narrow as to set at liberty half the inmates of lunatic hospitals, while others are so loose and capacious, as to give a strait waistcoat to half the world."

It is perhaps impossible. Insanity is a disease and, like other diseases, cannot be described by any one symptom, as no one is characteristic of the different varieties. It is a chronic disease of the brain producing either derangement of the intellectual faculties, or prolonged change of the feelings, affections and habits of an individual.

Derangement of the intellectual faculties is usually obvious to all, but disorder of the feelings, affections and propensities from disease, without intellectual disturbance, though not an uncommon form of insanity, many are not inclined to admit.

But that there is a variety of insanity, in which the intellect is not noticeably disturbed, while the natural feelings, inclinations and temper are changed and perverted by disease, is a fact that can be established at every Lunatic Asylum.

This form of insanity has been denominated moral insanity, in distinction from intellectual derangement.

### CLASSIFICATION OF INSANITY.

Classifications of insanity are various. A common one is into mania, melancholy, dementia, and idiocy. Some include monomania and moral insanity. None of them appear to be of much practical utility.

A classification founded on the symptoms must be defective, and perhaps none can be devised in which all cases can be arranged.

So exceedingly various are the peculiarities, delusions and opinions of the insane, so different the symptoms they exhibit, that it seems impracticable to classify them. As a slight indication of the difficulties of the task, I need but allude to a few of the peculiarities daily noticed in this Asylum.

In addition to emperors, queens, prophets and priests, we have one that says he is nobody, a nonentity. One that was never born, and

one that was born of her grandmother, and another dropped by the devil flying over the world. One has had the throat cut out and put in wrong, so that what is swallowed passes into the head, and another has his head cut off and replaced every night. One thinks himself a child and talks and acts like a child. Many appear as if constantly intoxicated. One has the gift of tongues, another deals in magic, several in animal magnetism. One thinks he is a white polar bear.

A number have hallucinations of sight, others of hearing. One repeats whatever is said to him, another repeats constantly words of the same sound as door, floor. One is pursued by the sheriff, many by the devil. One has invented the perpetual motion and is soon to be rich; others have already acquired vast fortunes, scraps of paper, buttons and chips are to them large amounts of money. Many pilfer continually and without any apparent motive, while others secrete every thing they can find, their own articles as well as those of others. A majority are disposed to hoard up trifling and useless articles, as scraps of tin, leather, strings, nails, buttons, &c., and are much grieved to part with them.

One will not eat unless alone, some never wish to eat, while others are always starving. One with a few sticks and straws fills his room with officers and soldiers, ships and sailors, carriages and horses, the management of which occupies all his time and thoughts. Some have good memory as regards most things, and singularly defective as to others, one does not recollect the names of his associates, which he hears every hour, yet his memory is good in other respects.

One says he is Thomas Paine, author of the Age of Reason, a work he has never read; another calls himself General Washington; and one old lady of diminutive size calls herself General Scott, and is never so good natured as when thus addressed. One is always in court attending a trial, and wondering and asking when the court is to rise. Another has to eat up the building, drink dry the canal and swallow the Little Falls village, and is continually telling of the difficulty of the task.

A large majority are pleasant and sociable, a few are morose and unsocial; some appear constantly happy, others most of the time melancholy.

Some talk continually, others never speak; a considerable number reason correctly and converse rationally on all but one or two subjects;



others exhibit but little mental disorder except by a change of temper and disposition, obviously from disease, and disregard and abuse of their best friends and nearest kindred. A youth in whom no intellectual derangement is noticed, has occasionally an irresistible propensity to set things on fire, has burned several buildings without any motive. He had been subject to fits in infancy, and his late singular conduct was attributed by a court and jury to insanity.

Some of our patients are corpulent, others spare; some have great muscular power, others but little; some have light hair and blue or grey eyes, and about an equal number have dark hair and eyes.

Such are some of the most distinctive and peculiar characteristics of our patients. Others might be added, but these will suffice to show the difficulties of arranging them in a few classes.

We have seen no classification that is unobjectionable, nor have we any to propose. We prefer one founded upon the faculties of the mind that appear to be disordered, and think we could place all our patients in one of the following classes.

1st. *Intellectual Insanity*, or disorder of the intellect without noticeable disturbance of the feelings and propensities.

2d. *Moral Insanity*, or derangement of the feelings, affections and passions, without any remarkable disorder of the intellect.

3d. *General Insanity*, in which both the intellectual faculties and the feelings and affections are disordered.

In each of these classes may be found those who are constantly excited or depressed; but as these different states of feeling are frequently witnessed in the same patients, and often in the same hour, we cannot arrange them in distinct classes.

According to this arrangement we have of

Intellectual insanity . . . . .	15
Moral insanity . . . . .	38
General insanity . . . . .	223

Some of the cases thus arranged are more marked than others. Some of intellectual insanity manifest no disorder of the feelings, while others at times do, though not to any marked extent. So of those mo-

rally insane, while in a few we discover no intellectual derangement, in others some is at times exhibited.

We have no idiots. They should not be classed with the insane, as idiocy is not disease or the result of disease, but the consequence of malformation of the brain.

### SIZE AND SHAPE OF THE HEAD.

We measure the head of each patient in various directions, soon after admission, and make a record of the same. This we have done to ascertain if the heads of the insane are different from those of the sane, and also to learn what influence long continued insanity, has upon the size and shape of the head, as we have often heard the relatives of those long insane remark that their heads had undergone singular changes in these respects since they became insane.

From our admeasurements we have not found any form or size of the head peculiar to the insane. Some are of good size and shape; still it must be confessed that many have singularly shaped heads, but whether the cause or consequence of their derangement we are not able to say. Several have one side of the head more elevated than the other. In one case of an adult, the head is known to have changed considerably since affected by insanity.

We apprehend this disease often arises from unequal development of the brain, one class of organs being but partially developed, and others excessively so; though as insanity is caused by the disease and not the size of an organ, it may affect those whose organization is most perfect.

### THE PULSE.

We count the pulse of each patient on admission, and make a record of the number of pulsations in a minute. In this manner we have become satisfied that, in a large majority of cases, both of recent and chronic insanity, the pulse is more frequent than in health. This is not, however, uniformly so, as in a small proportion of cases, both of recent and chronic insanity, we have found the pulse less frequent than natural.

### BRIEF DESCRIPTION OF THE BUILDING.

The New-York State Lunatic Asylum, is situated about one mile and a half west of the city of Utica, on an elevated site, commanding a

fine view of the city, of the Erie canal and railroad, and the beautiful scenery of the Mohawk valley.

The building was commenced in 1838, and mainly completed in the winter of 1841-2. It is built of hammered stone, 550 feet in length. It consists of a main or centre building, sixty-six by one hundred and twenty feet, and four stories high above the basement. The basement is occupied by a kitchen, extending through the whole extent, and rooms for washing and ironing.

The first story, in front, serves for the offices of the superintendent and steward, and for drawing-rooms. The second and third stories, in front, are occupied by the resident officers, and their families, and the front rooms, of the fourth story, serve for lodging rooms for assistants, and those engaged in the domestic duties of the house.

In the rear of the first three stories are dining rooms for patients, fifteen by thirty-six feet; one for men and one for the women on each story, and connected with the halls in the wings. Back of these are verandas eighteen feet by forty, open to the air in summer, though guarded by iron sash, and in winter closed by moveable glass windows. These large verandas afford delightful promenades and places of resort for our patients, where they can safely enjoy all the benefits of the open air. In the rear of the fourth story is the chapel, thirty-six by ninety-three feet. In front of the centre building, is a Doric portico with a pediment at the elevation of the main roof, supported by six stone columns, eight feet in diameter at the base and forty-eight feet high.

The main wings connected with the centre building, are three stories high above the basement, and forty feet wide, connected with end wings fifty-four feet wide. The basement of the wings serves for store rooms and hot air furnaces, and a small part at the extremity has been properly fitted up for the temporary accommodation of a few of the most violent and noisy patients.

Through each story of the wings extends a hall thirteen feet wide and two hundred and twenty-five feet in length, connected with the dining rooms and verandas and thus forms a promenade of two hundred and sixty-five feet.

On each side of the halls are rooms for patients, thirty-five in number; each nine and a half by ten feet, and in addition, rooms for atten-

dants, a clothes room, a large and comfortable bathing room, a water-closet and large parlors, which serve for reading and sitting rooms.

One wing is occupied by men the other by women. The different stories are alike, with the exception that the lower story has two of the large parlors connected by folding doors and is twelve feet high, while the two upper are ten.

The food prepared in the kitchen is elevated to the different stories and dining rooms by means of dumb-waiters or moveable cupboards.

The whole building is admirably warmed by hot air furnaces in the basement, two in each wing and one in the centre building.

The supply of water, in addition to rain-water that flows from the roof into six large tanks lined with lead, containing above four thousand gallons each and placed in the attic stories of the wings, is furnished by a well five hundred feet distant, in the rear of the asylum.

This well is thirty-three feet deep, sixteen in diameter for twenty-three feet, and then eight feet in diameter for the remaining ten.

The water is forced from the well by means of a pump, driven by horse power, to the attic story of the centre building, and thence distributed over the whole establishment. One horse will pump from forty to fifty hogsheads in an hour. We use between three and four thousand gallons of water daily.

The whole building is surrounded by an area seven feet wide at the bottom, and six feet below the surrounding ground, to which it gradually slopes. The bottom is paved with brick, and at its outer edge is a gutter connected with large culverts, which effectually drain the building, and render the basement story dry and comfortable.

#### DAILY ROUTINE OF BUSINESS.

The watchman rings the bell at half past four in summer, and half past five in winter, when all in the employ of the Asylum are expected to rise and enter upon their various duties.

The attendants open the doors of the patients' rooms, see that they are well, and assist such as require it in dressing and preparing for breakfast. They also commence making the beds, cleaning the rooms and sweeping the halls.

One hour and a half after the ringing of the morning bell, breakfast is ready for our whole household. It is announced by a bell, ten minutes previously, that the tables may be arranged and the dining rooms put in order. After breakfast the soiled dishes and plates are sent to the kitchen to be washed. The knives and forks, cups and saucers are cleaned in the dining rooms by the attendants, assisted by some of the patients. The rooms are then thoroughly cleaned, the beds made, and every thing put in good condition. Those patients disposed to labor on the farm, in the garden or about the halls and yards, are permitted to, and thus have rendered us much valuable assistance. Usually many more volunteer than we deem prudent to thus exercise. Those who do not labor, pass their time in various ways : in reading, playing ball, rolling nine-pins, or in walking and in attending school, which commences at 10 o'clock.

Soon after breakfast the superintendent and assistant physician visit all parts of the building. Through the apartments of the women they are accompanied by the matron. The condition of each patient is ascertained, and the directions deemed necessary for the day given to the attendants.

Prescriptions are then attended to, and half an hour before each meal the attendants from each hall call at the physician's office for the medicine, which is placed in cups, each cup labeled with the name of the patient for whom the medicine is prescribed.

At half past twelve dinner is ready. After this meal the patients again engage in labor and amusements.

The women work much of the time ; they also ride, walk, play battle-door, and such as choose attend school.

Six o'clock is the hour for tea. In the evening the halls are lighted with globe lamps, suspended from the ceilings. Tables also are supplied with lights, at which may be seen some reading, others playing cards, checkers, and conversing ; and in the ladies' apartments knitting, sewing, singing and reading.

During the day the physicians, the matron and steward pass frequently through most of the halls, visiting the sick, attending to particular calls or waiting upon visitors.

At nine o'clock patients usually retire, many of them earlier, and by half past nine all are in bed.

At nine o'clock the watchman calls for orders at the physician's office. His station is in the kitchen, from whence he can be called by a bell to any part of the building, and his duty consists principally in guarding against fire. He passes through the main building frequently during the night, looking into each hall in the wings and visiting such patients as he is directed to. He also sees that the furnaces in winter, are properly supplied with fuel in the night; and that the fires in the kitchen, and in the washing and ironing rooms, are in readiness in the morning.

### DIET.

The following directions were prepared by the superintendent, for the guidance of the steward, at the opening of the Asylum. They have been essentially adhered to, and it is due to that officer to say, that the supplies for the household have been abundant and of good quality.

### BREAKFAST.

Coffee, bread, butter, potatoes, cold or warm meat, hashed meat, mackerel, sausages, dry or buttered toast, and buckwheat cakes in the season. These articles varied according to the season of the year, and to afford a frequent change.

### TEA.

Tea, bread, butter, biscuit, toast, plain cake, gingerbread, crackers, cheese, apple sauce, and berries in the season. These so varied as to make some change frequently.

### DINNER.

*Sunday.*—Cold meat, potatoes, pudding or rice, molasses, bread, butter, crackers, cheese, pie.

*Monday.*—Boiled corned beef, vegetables, rice, molasses, bread and butter.

*Tuesday.*—Roast meat, vegetables, pie or pudding, cheese, bread and butter.

*Wednesday.*—Soup, boiled fresh meat, stew-pie, beefsteak, fresh fish, poultry, or other articles in the market and not used other days, bread and butter.

*Thursday.*—Same as Monday.

*Friday.*—Same as Tuesday.

*Saturday.*—Boiled salt fish, rice, molasses, or pudding, vegetables, bread and butter.

The sick have a prescribed diet. Milk is abundantly supplied to all the tables, and fruits, especially apples, are often furnished to such of the patients as are not likely to be injured by them.

Ten minutes before each meal a bell is rung to apprise the attendants in the wings that it is time to prepare the tables for meals. With the assistance of a few trusty patients they prepare the tables and receive the food from the kitchen.

During meals the attendants wait upon the patients, and take their own meals from the same table afterwards. Sometimes, when all the attendants are not needed to wait upon the table, one or more eat with the patients.

We regard this arrangement, though somewhat different from the practice of many other institutions, a very good one. We adopted it here at the commencement, and in no instance have we heard any complaint from patients or attendants.

The practice of attendants leaving the patients and going to a separate table, in another part of the building, not only occupies much time and exposes the patients to accidents, during the absence of the attendants, but not unfrequently leads to suspicion that better food, or a greater variety, is furnished to the attendants than to the patients. To avoid this, and to secure the neat and comfortable appearance of the dining rooms, we deem it necessary that the attendants and patients take their meals at the same table.

We have but one kitchen, and the food for the whole household is alike, except that the sick have such articles prepared for them as are directed by the physician.

Occasionally patients are disposed to eat too much for their own good, and some of full habit and much excited, require an unstimulating diet, but generally, we consider an abundant supply of good, plain, nutritious food the best for our patients.

Some idea of the amount of provisions required at the Asylum may be obtained from the following account of the daily consumption of the principal articles.\*

3	bushels of	potatoes.
245	pounds of	bread.
37	"	butter.
2½	"	coffee.
1	"	10 ounces tea.
26	"	4 " sugar.
127	"	corned beef, Monday and Thursday,
160	"	fresh meat, Tuesday and Friday.
48½	"	codfish, Saturday.
68	quarts of	milk daily.

The officers of the house and visitors occasionally eat with the patients, and we can confidently state that their tables, in the quantity and quality of the food, neat appearance and general arrangement, will favorably compare with those of good boarding houses. Of the 196 patients now in the Asylum, all but eleven take their meals with others, at tables furnished with knives and forks, tumblers, and handsome table crockery. We make no use of tin or wood dishes at any of the tables.

Good order usually prevails. It is a privilege to thus come to the table, which is forfeited for a time by improper conduct.

We deem this assembling of our patients at a neat and well furnished table, where they are civilly waited upon, very conducive to their restoration. The insane rarely recover who take their food in a rude manner, in solitary cells, swallowing it like ravenous animals. We have had many sent to us accustomed to this manner of living, who gave us much trouble to educate over again, but their improvement has repaid us.

We are aware that patients may be supported in a cheaper manner, but we do not think they can be, if they are to have allowed them all the chances they ought to have for recovery. While we, therefore, most carefully guard against any waste, or unnecessary expenditure, we en-

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\* These calculations were made the middle of December, when we had 203 patients, and our whole family amounted to about 260 persons.



deavor to supply to our household such things as we consider necessary for their restoration.

### LABOR.

We are under obligation to many of our patients for the labor they have performed. Above seventy of the men have assisted us, more or less, on the farm, in the garden, in sawing wood, making roads, fences, filling up excavations and removing the immense amount of rubbish that had accumulated while erecting this large establishment. They have also picked the hair for our mattresses, and some have assisted us in the joiner's shop.

A still larger number of the women have aided us. They have made mattresses, comfortables, sheets, curtains, cushions, dresses, and knit many pairs of stockings and mittens. Both men and women have done more labor than we anticipated. The benefit has, however, been reciprocal. Those that have thus voluntarily labored for us have been pleased and improved by it.

Our large farm, of one hundred and twenty-five acres, we find well adapted for the purposes for which it was purchased; affording pasturage and hay for the cows and horses we wish to keep, and good land for raising all the vegetables consumed by our household. It has produced the last year between forty and fifty tons of hay, above two thousand bushels of potatoes, and an abundant supply of garden vegetables and some corn and oats.

That many of the insane are benefited by labor, especially in the open air, is unquestionable, but let it not be supposed that all are. According to our experience labor is rarely serviceable in recent cases, and not unfrequently injurious. It would be surprising if this was not the case, and would contradict all we know of the pathology of the disease. In recent cases of insanity there is increased arterial action of the brain, and labor would increase the circulation, especially with the head down, and be likely to aggravate the disorder. This is not merely an opinion unsupported by facts. I have repeatedly seen recent cases made worse by labor.

The number able to labor will vary in different institutions. In some, especially in those that have been long established, are many old and incurable cases, that are made much happier by daily labor. In such institutions these may be classified and taught trades, and do much to-

wards supporting themselves. I hope the time will speedily come when, in every State, good Asylums will be provided for this class of patients, and for all the insane. I am clearly of the opinion that, with a good farm connected with such Asylums, and the judicious arrangement and management of shops, one half of the incurably insane of our country would perform sufficient labor to support themselves, and would be the happier and more healthy for the exercise.

Incurable cases, instead of being immured in jails and in the town and county poor houses without employment, where they are continually losing mind and becoming worse, should be placed in good Asylums, and have employment on the farm or in shops. In this way they would, in general, be rendered much happier, and some would probably recover.

But there are other insane persons that ought not to labor, and some that will not, and to one or the other of these classes belong many that have been sent to this Asylum. Many of the cases received here are either of recent origin, and which, for reasons already given, ought not to labor, or violent and excited patients that can not be induced to make the attempt.

Counties send to us, for the most part, either recent cases that are deemed curable, or the most violent, that they can not safely keep in county houses. We receive but few from the counties that belong to the quiet, harmless class, that would be gratified and benefited by labor. We believe, however, this selection to have been judicious, though we can not forbear repeating that we hope the time is not far distant when *all* the insane will be placed in Asylums expressly provided for them.

That the county houses of the State, considered as receptacles for the poor who are not insane, are well arranged and conducted I do not intend to dispute, but I believe them to be very uncomfortable and improper places for the insane. They are not arranged and conducted in a manner likely to "minister to a mind diseased."

The insane require peculiar care. In a good regulated Asylum, though incurable, they enjoy much; while out of one, exposed to innumerable annoyances that would not affect the sane, they pass much of their time in indescribable wretchedness.

A broad distinction should be made between the sane and insane poor, as regards providing for their comfort. The former may have,

in a good county house, most essential comforts, provided the insane are not kept in it; but the insane themselves, unless they have especial care, in reference to their disordered minds, have little or none.

The State of New-York is deservedly renowned for what it has done, and is now doing, to cultivate and improve the minds of her citizens. Shall these same minds be neglected when impaired by disease?

### AMUSEMENTS.

Labor, especially gardening and farming, are to many of the men the best amusement. The women also derive pleasure in adjusting their rooms and assisting the attendants in the varied labors of the halls and dining rooms. At present many of them are greatly interested in preparing articles for a *Fair*, to be held on the anniversary of the opening of the Asylum, the 16th of January. Innumerable are the pin-cushions and pen-wipers already made, and frequent have been the consultations respecting the best form for these and other fancy articles. Many of our patients are engaged in devising or making something to add to the stock of articles for sale, and our halls for the women look as if occupied by milliners actively employed. The prospective occasion induces many to labor, serves to beguile the time, and affords amusement.

But our patients also derive amusement from reading and writing, and from walking and riding, occasionally. We have a suitable library for their use, and a moderate supply of newspapers.

Our extensive halls and verandas, 265 feet in length and 13 wide, afford admirable places for various amusements. Here the men play ball, roll nine-pins, and amuse themselves in various ways; and the women play battle-door, the graces, &c. In the evening, especially in winter, the men play whist; backgammon and other games, and the women play on the piano, dance, sing, form tableau, &c.

Every Wednesday afternoon the matron has a party in the hall of the convalescents, to which all the women who promise to conduct with propriety are invited. These are very agreeable parties and afford enjoyment to many. They usually quilt, or unite in some other labor and are furnished with fruit, cake or other light refreshment.

### SCHOOL.

We have long been desirous of seeing, in lunatic asylums, systematic efforts to cultivate the minds of patients. For this purpose we have

established schools, two for the men and one for the women, and our highest expectations of good results have been more than realized.

Among our attendants and convalescent patients are those accustomed to teach. These take charge of the schools. They commence at ten and two, and continue from one to two hours. The best of order prevails. The patients read in rotation, and sometimes at once, spell, recite pieces they have committed to memory, attend to arithmetic, history and geography, assisted by maps and black boards. Many attend to writing and some have here first learned to write. We have no more beautiful sight to present than our school rooms, where the patients may be seen engaged in their studies with all the sobriety and ardor usually seen in other schools.

The school is beneficial, especially to the convalescent—those that are melancholy—and to those who appear to be losing their mental powers and sinking into a demented condition.

Those who have recovered, but continue with us for fear of a relapse, and to test the permanency of their recovery, derive both pleasure and profit from attending. Those that are melancholy and depressed are beguiled from their sorrows, and for a while made to forget them, and thus the way is often prepared for their restoration.

Those who appear to be losing their mental powers are much benefited by this daily and regular exercise of their minds; their memories improve, and they become more active and cheerful.

The want of proper mental occupation, according to our observation, is one of the most pressing wants of lunatic asylums. Notwithstanding amusements and labor many are constantly disposed to sit still, absorbed in their own thoughts and delusions, and thus continually becoming worse.

Schools, we believe, will do much towards remedying the evil to which we allude, and the expense attending them is but trifling.

### RELIGIOUS WORSHIP.

In the fourth story of the centre building is a spacious and beautiful CHAPEL, thirty-six by ninety-three feet, to which the access is easy from all parts of the house. It was solemnly dedicated to Almighty God the 12th of July. The Rev. Dr. Nott, of Schenectady, preached

a sermon, and hymns composed for the occasion, by Mrs. Sigourney and the Hon. Ezekiel Bacon, were sung by the choir of singers resident at the Asylum.

Since that time we have had religious services every Sabbath afternoon. Until recently the clergymen of various denominations in Utica, and in this vicinity, have kindly officiated. Our thanks are due to them for their highly acceptable and gratuitous labors.

Within a few weeks we have engaged the Rev. James Nichols to preach for us regularly, and his ministration has been satisfactory to all.

From one-half to three-fourths of the patients attend, and are gratified with the opportunity thus afforded them of assembling for worship. Nothing as yet has occurred to disturb the services, and a spectator rarely sees anything indicative of a lunatic asylum.

In our opinion we could not dispense with religious services on the Sabbath without great detriment to our household. The day is looked forward to with pleasing anticipations by most of our patients. They are dressed for the occasion; the women wear their bonnets, and thus the appearance of the congregation is not different from other religious assemblies.

Not unfrequently strangers have been present, and they will bear testimony to the good order and attention of the congregation.

The choir of singers is composed wholly of the members of our household. About one-half are patients. They assemble Sunday evenings for practice, and in justice to them it should be said, that without any instruction from others they have perfected themselves to a degree that will favorably compare with the choirs of most churches. Their voluntary and gratuitous services in this delightful part of religious worship demands our thanks.

The exercises are conducted in the order and manner usual in most churches in this section of the country, and continue about one hour. Singing, reading of the Scriptures and prayer, then singing again, after which is the sermon, and the services are closed by prayer, singing and benediction.

I need scarcely add that nothing sectarian is ever preached: consequently no objections are made by our patients or other members of

our household. All cheerfully assemble and unite like one family in solemn worship of their Creator.

### RESTRAINTS.

As is well known the present building forms only part of a contemplated establishment. It was originally intended solely for the quiet and convalescent class, consequently no strong rooms were provided for the noisy and violent. We are, therefore, without any now, though by lining some of the rooms with boards, and making stronger doors, we have made some of the rooms safe and comfortable for this class, but we have no cells or dungeons; every patient has a good sized room, well ventilated and warmed.

Seclusion, usually for a short time in one of these rooms, forms our chief restraint. If a patient is very noisy or violent, he is told that if he can not control himself and conduct with propriety he must retire by himself. If, however, in a short time he thinks he can thus conduct, he is again permitted to associate with others.

Leather and cloth mittens and leather muffs and wristbands are our only other means of restraint. We have never had a straight-jacket or restraining chair in the asylum, though we probably should have used the latter occasionally had we one. We believe that sometimes restraint of this kind is far better for patients than to permit them to exhaust and injure themselves by their incessant exertions, or to have them restrained by the hands of attendants.

But no restraint, except for the moment, is permitted here, unless by the express order of one of the officers of the house.

Among our printed rules for the conduct of the attendants are the following, to which we believe they strictly adhere. "The attendant is never to apply any restraining apparatus, such as muffs, mitts, &c. unless by order of a resident officer. Violent hands are never to be laid upon a patient, under any provocation. A blow is never to be returned, nor any other insult. Sufficient force to prevent the patient injuring himself, or others, is always to be applied gently."

Other means than bodily restraint will often quiet the most violent and excited. Sometimes the warm bath, long continued, has this effect, and cold applied to the head, especially showering the head with cold water. We have often known patients resort to this themselves, in

order to calm their excited feelings. Medicines of various kinds are occasionally useful to lessen excessive excitement. Sometimes laxatives have this effect, and also narcotics and opiates.

We have no uniform method of treating this class of patients, but adapt our measures to the particular wants and peculiarities of each case.

A considerable number were brought to us in chains, but every thing of the kind has been immediately dispensed with here. Many of those who were represented to us as dangerous and unsafe to be at large, especially when they could have access to dangerous weapons, have become our most quiet and industrious patients. No better evidence need be given of the general disposition of the insane to be quiet and orderly when properly treated, than the fact that here have been, for several months, from thirty to forty men associated together, in each of our halls, not one of them under the least bodily restraint, and yet no accident of any importance has occurred, nor injury to any individual.

#### VISITORS.

No subject has occasioned us more difficulty, in order to give satisfaction and yet do what duty required, than the admission of visitors. Keeping in mind that this is an institution, in the accommodations and management of which the whole State is interested, we have wished to open it so far as practicable and consistent with the welfare of the patients.

As it is situated in the neighborhood of a city of 14,000 inhabitants, and near one of the greatest thoroughfares in the country, we expected to have many visitors whom it would be impracticable for us to wait upon. But from the first we have endeavored to admit to some of the halls and apartments occupied by the patients, most persons from different parts of the State who visited the Institution for the purpose of examining it in reference to the accommodations afforded for patients. Acting upon this rule we have admitted according to our list of names, recorded in the book of visitors, 2755.

In January, .....	75
February, .....	112
March, .....	110
April, .....	159
May, .....	262

In June, .....	400
July, .....	406
August, .....	383
September, .....	393
October, .....	251
November, .....	204

These however are but a part of those who have passed through the apartments for patients, as many such did not record their names. A much larger number we are confident have visited the chapel, cupola and other parts of the building not occupied by patients.

As attendance on visitors through the apartments requires one of the officers of the house, it has not always been practicable to wait upon all that we wished, and many have applied either early in the morning or at meal times, when it was inconvenient and improper to go through the house.

But we have been compelled to refuse admission to many, for fear of injuring those committed to our care.

A few visitors occasionally are useful. Patients thus see and realize that they are not shut out, and away from the world and society. But we also know from experience that much company is injurious. Repeatedly we have been obliged to remove patients from the halls of the quiet and convalescent in consequence of their having become excited by seeing visitors.

Other patients who are not thus excited, are often grieved and displeased when gazed at, as they sometimes are by visitors, and addressed and questioned by those who are strangers to them.

We have, therefore, occasionally considered it our duty to refuse admission to visitors, whom, but for this, we would have waited upon with pleasure.

But we never *exhibit patients*. They are sent to us for restoration, and for the <sup>up</sup>seclusion necessary to effect it, and not to be made a spectacle for others. We have, therefore, uniformly refused admission to parties, and all those whose known and avowed object was merely to see deranged persons.



But, as we have said, whenever gentlemen or ladies, from the various sections of the State, who take an interest in the welfare of the unfortunate class committed to our care, wish to see the arrangements and accommodations for their comfort, we most cheerfully afford them every facility in our power.

Visits from medical men are peculiarly gratifying, and we hope they will be more frequent. We have thus an opportunity to receive and impart information respecting the care and treatment of the insane, that may benefit others than ourselves.

#### SUGGESTIONS TO THOSE WHO HAVE FRIENDS THEY EXPECT TO COMMIT TO THE CARE OF THE ASYLUM.

Few things relating to the management and treatment of the insane are so well established as the necessity of their early treatment and of their removal from home in order to effect recovery. There are exceptions no doubt. Some who have been neglected several years and received no medical treatment are sometimes cured and some also recover at home. But these are rare instances. By examining the records of well conducted lunatic asylums, it appears that more than eight out of ten of the recent cases recover, while not more than one in six of the old cases are cured.

But although we consider it extremely important that the first indications of insanity should excite alarm and lead to the early adoption of judicious medical and moral treatment; that the insane should in general be removed from their homes to a good asylum; we beg those who have such in charge not to take any hasty step, and not to adopt any measures without the advice of a physician. Some cases of sudden delirium are caused and accompanied by fever or other disease that is readily detected and removed by proper medical treatment at home. The removal of such cases is not only unnecessary but often dangerous. A judicious physician would in all cases of mental aberration advise patients remaining at home until the nature of the disease was evident.

But when sufficient time has elapsed, and the case is evidently one of insanity unaccompanied by acute disease, then no time should be lost in adopting the most approved remedial measures, among which as has been stated, is removal from home to a place where the exciting

causes of the disease are no longer operative. Still, a patient should not be sent to an asylum, until the relatives and friends have fully satisfied themselves that he will there be treated kindly and judiciously. This is due both to the patients and the institution.

But when they have thus satisfied themselves, they should give the control of the patient into the hands of those who have assumed the responsibilities of the case, and not throw any obstacles in the way of recovery, by frequent visits, or requesting friends and neighbors to visit the Asylum for the purpose of seeing the patient, unless this course has been advised by those to whose care he is confided.

Most insane persons are injured by visits of their relatives and acquaintances. Their aversions, suspicions, and troubles, are often vividly recalled to their minds by such visits, and thus they are rendered much worse; or else the most painful feelings arise when their friends leave them; they become melancholy and sleepless, and in consequence often relapse from a state of advanced recovery.

In some instances the visits of friends are very useful, but the proper time for this kind of intercourse is soonest known to the physician who has charge of the case, and who will gladly avail himself of this as well as of every other means of benefiting and curing the patient.

We always write to the guardians or relatives of those under our care, if they become materially better or worse, and endeavor to keep their friends apprised of every essential change in their condition, and we cheerfully and immediately answer all letters of inquiry respecting them. In this way the anxious friends of our patients can always ascertain their condition, and their prospects of recovery without endangering them.

In some instances we deem it useful for patients to receive letters from home, and in such cases we apprise their friends and request them to write, and also the patients to answer them.

A good supply of clothing should always be forwarded with the patient. Each man should be provided with, at least, two new shirts, a new and substantial coat, vest and pantaloons of strong woollen cloth, a pair of mittens or gloves, two pairs of woollen stockings, a black stock or cravat, a good hat or cap, and a pair of new shoes or boots, together with a comfortable outside garment.

Each woman, in addition to the same quantity of under garments, shoes and stockings, should have a flannel petticoat, and two good dresses, and also a cloak or other outside garment. In case the patient is so much excited as not to admit of being thus clothed, other clothing that can be kept on, that is comfortable, and in sufficient quantity, with a change thereof, may be substituted. It is very desirable that extra and better garments should be sent with those accustomed to them, that when they become better, and when they walk or ride out, attend religious worship, &c., their self respect may be preserved. This is important and should not be neglected. *In all cases the patients' best clothing should be sent.* It will be marked and carefully preserved, and only used when deemed useful for the purposes mentioned.

A written history of the case should be transmitted with the patient, and when convenient, it is also desirable that some one well acquainted with the patient should accompany him or her, from whom minute but often essential particulars may be learned.

As the Asylum will undoubtedly be full by the time this report is published, it may be useful to say here, that application should be made to the superintendent previous to bringing any patient to the Asylum, to ascertain if there are accommodations. Such application should state the sex of the patient and contain a brief history of the case.

#### LEGAL MANNER OF COMMITTING PATIENTS TO THE ASYLUM.

The laws of the State, relating to the confinement of the insane, are contained in *Title Three, Chapter 20, Part First*, of the Revised Statutes, and in "*An act to organize the State Lunatic Asylum, and more effectually to provide for the care, maintenance and recovery of the Insane.*" passed April 7, 1842.

According to these acts, the overseers of the poor of towns (in counties where the distinction between the town and county poor exists) the superintendents of the poor of counties, justices of the peace and the first judge of the county, or in his absence any county judge of the degree of counsellor of the Supreme Court, may send patients to the Asylum. But the laws do not contemplate that each of these authorities should send patients of every class. The overseers and superintendents of the poor are to send the paupers, and also those that are dangerous, and committed to their charge by justices of the peace.

The first judge to send those that are indigent but not paupers, and the justices of the peace to commit to the care of the overseers or superintendents of the poor for transmission to the Asylum, "any person so far disordered in his senses as to endanger his own person or the person and property of others, if permitted to go at large." Judges of the county to commit those who are in confinement under criminal charge who become insane, and those acquitted of crime on the ground of insanity.

The superintendents of the poor of counties, have the right to send to the Asylum, provided it is not full, any insane person in their charge, without instituting any proceedings to prove the insanity, provided the insanity commenced previous to the passage of the act to organize the Asylum, passed April 7th, 1842.

Since the passage of that act they are required to send to the State Lunatic Asylum, or to such public or private asylum as may be approved of by a standing order or resolution of the supervisors of the county, within ten days, every case of lunacy committed to their care and provided for by Title three, Chapter twenty, Part first of the Revised Statutes.

But in all such cases the act of 7th of April, 1842, directs as follows: "In every case of 'confinement' under the statute, Title three, aforesaid, whether of a pauper or not, after the passage of this act, neither justices, superintendents or overseers of the poor, shall order or 'approve' of such confinement, without having the evidence of two reputable physicians, under oath, as to the alleged fact of insanity, and such testimony shall be reduced to writing and filed, with a brief report of all the other proofs, facts, and proceedings in the case, in the office of the county clerk, and said clerk shall file said papers, and register with date, the names and residence of the lunatic and officers severally, in tabular form, in the book of miscellaneous records, kept in said office; and the certificate of said clerk and seal of the court, verifying such facts, shall warrant such lunatic's admission into the Asylum."

Justices of the peace are required also to direct the apprehension and confinement of any person so furiously mad as to endanger himself or the person or property of others if permitted to go at large, but they are to institute the same inquiry and proceedings as above cited. They

should also direct their warrant for the apprehension and confinement of said lunatic to the overseers of the town or superintendents of the county, whose duty it is to see that he is placed in a lunatic asylum within ten days.

Section 26th of the act of 7th April, authorizes the first judge of the county as follows: "When a person in indigent circumstances, not a pauper, becomes insane, application may be made in his behalf to the first judge of the county where he resides; and said judge shall call two respectable physicians and other credible witnesses, and fully investigate the facts of the case, and either with or without the verdict of a jury, at his discretion, as to the question of insanity, shall decide the case as to his indigence. And if the judge certifies that satisfactory proof has been adduced showing him insane, and his estate is insufficient to support him and his family, (or if he has no family himself,) under the visitation of insanity, on his certificate, authenticated by the county clerk and seal of the county courts, he shall be admitted into the asylum and supported there at the expense of said county, until he shall be restored to soundness of mind, if effected in two years. The judge, in such case, shall have requisite power to compel the attendance of witnesses and jurors, and shall file the certificate of the physicians, taken under oath, and other papers, with a report of his proceedings and decision, with the clerk of the county, and report the facts to the supervisors, whose duty it shall be, at their next annual meeting, to raise the money requisite to meet the expenses of support accordingly."

Insane patients, supported by themselves or friends are admitted into the Asylum when there are vacancies. The law requiring the testimony of two physicians, as to the fact of insanity in such cases, was repealed during the last session of the Legislature. It was often troublesome and expensive in some towns to obtain this kind of evidence, even in the most unquestionable cases, and as the managers and resident officers of the Asylum have no interest whatever in retaining patients, and would of course discharge those found not to be insane, it was deemed advisable and safe to refer the question of insanity to them.

But when a patient is thus supported at the Asylum, a bond for the payment of the semi-annual bill of expenses is required. Consequently, those who send friends to the Institution should come prepared to give such a bond, and if strangers, bring evidence of their responsibility.

NATURE AND TREATMENT OF INSANITY AND PROG-  
NOSIS.

In the very able and elaborate report of the committee, of which the Hon. A. C. Paige was chairman, made to the Legislature March 10th, 1831, relating to the Hospital and Lunatic Asylum in New-York, it is remarked, "that in public hospitals judicious regulations should be enforced, for recording and preserving a history of the cases of the patients; with the view of enabling scientific men to extend their researches in this department of science, and from authentic facts, thus collected, to deduce some general principles for the management and treatment of mental disease."

We have not been unmindful of these suggestions, and from the first have kept a case book, in which is recorded the history of each case previous to admission, so far as we have been able to learn it, and also the subsequent treatment and its results. In this manner we hope to have here accumulated a vast collection of facts relating to insanity, from which hereafter useful deductions may be made. We also keep a minute diary of the weather, of the variations of the thermometer and barometer, and of the clouds and winds, the amount of rain, snow, &c. Facts thus collected, we are at all times pleased to impart to those who are investigating subjects which they are calculated to illustrate.

In the present report, we do not propose to dwell upon the nature and treatment of insanity. We consider it a disease of the body—a disease of the brain, the material organ of the mind. In the early stage of the disease, there is usually only disordered *action* of the brain, and this can generally be cured, and the organ suffer no injury; but if this disordered action is long continued, it usually causes *disorganization* of the brain, and renders it forever incapable of properly manifesting its functions; just as a disease of the eye, that might have been easily cured, if judiciously treated at the commencement, terminates in permanent blindness when neglected, though without impairing the health in other respects.

We see nothing to change in the following views heretofore advanced by us respecting the pathology of insanity.

1st. In mental alienation the brain invariably presents appearances of disease, which can be distinctly recognized. Exceptions to this, if ever observed, are extremely rare.

2d. These appearances vary according to the acute or chronic form of the malady, and according to the character of the affection, whether simple, confined to intellectual disorder merely, or complicated with disorder of sensation and motion.

3d. In simple intellectual derangement of an acute or recent character, the grey outer substance of the convolutions of the brain is altered in color and consistence; it is red, marbled and indurated. Sometimes these appearances are confined to the anterior and superior portions of the brain. In chronic cases, all these are more marked. The external layer in such may be separated like a membrane from the lower stratum. In the very chronic cases, especially in dementia, there is often wasting or diminution of the grey substance of the convolutions of the brain.

4th. In intellectual derangement, complicated with derangement of motion, with paralysis more or less general, in addition to the alterations of the grey substance already noticed, there are marks of disease in the medullary portion of the brain. These are, either hardening, serous infiltration or softening and generally morbid adhesions of the fibres of the medullary portion of the brain.

The treatment of insanity is properly divided into *moral* and *medical*. Many cases recover without any medical treatment, by seclusion and quiet—by removal from home and from the exciting causes of the disease, by regulated diet and kind usage.

Other cases are complicated with disease of other organs than the brain, and require medical treatment, which should however be varied according to the organ affected and the nature of the disease.

Some cases may perhaps require bleeding in the earliest stage of the disease, but we apprehend such instances are rather rare. Many of our patients appear to have been injured by too much bleeding and depletion before their admission to the Asylum. We use but few medicines for insanity, uncomplicated with other diseases. Common laxatives with a few tonics and narcotics constitute the principal. We now rarely bleed or blister and not frequently administer emetics or powerful cathartics.

We are not however neglectful of any new remedy proposed for the cure of the insane. Of late no new method of treatment has been advanced, of which we have heard, unless some of the propositions of

M. Leuret, in his valuable work on the *Moral Treatment of Insanity*, may be so considered. He proposes to cure all cases of uncomplicated insanity solely by moral means. He makes great use of the douche and cold effusions. He excites pain and produces unpleasant ideas in order to prevent those still more unpleasant, and thus endeavors to lead patients to seek for pleasure.

We acknowledge ourselves under obligation to the distinguished physician of the Bicêtre Hospital, for many valuable suggestions, though we think some of his propositions very questionable, and liable to the same objections as punishment and undue coercion.

Dr. Moreau of Tours, in a recent work on the *Treatment of Hallucinations by Datura Stramonium*, gave us much encouragement of benefiting those of the insane affected by hallucinations of sight and hearing. But we regret to say that after a thorough trial of this remedy in several cases, we have observed no permanent or material benefit from the use of it.

*Prognosis.*—The longer insanity has existed, the less chance is there for recovery. It is rarely cured after it has uninterruptedly continued two years, though there is always hope if the patient is vigorous and the form of insanity varies. General excitement of the mind and feelings is more readily cured than monomania or derangement on only one or two subjects; and the more acute the disease, the more rapid usually is the recovery.

Hereditary insanity, and that produced by injury of the head or arising from peculiar structure of the brain is curable, but in such cases, relapse is the more to be expected. This is true of those who have suffered from a previous attack. Insanity arising from a violent exciting cause, is more likely to recover than when it is produced by a trivial cause. The middle aged, it is thought, more frequently recover than the very young or the aged. The speedy action of moral causes in producing derangement, is a favorable circumstance; if it has been slow, recovery is difficult. If insanity is connected with pregnancy, or with uterine difficulty, the prognosis is favorable. If the appetite remains good, and emaciation increases, there is reason to fear the case is hopeless.

Remissions are favorable especially if the attacks lessen in violence and duration. No alteration of pulse is an unfavorable indication.



Insanity arising from excessive study, Esquirol thinks, is rarely curable, especially if there have been deviations from a proper regimen, and when it originates in or is fostered by religious notions or pride. It is also very difficult to cure when aggravated by hallucinations. Those forms of insanity in which the patient has a proper notion of his state, present many difficulties if a recovery does not speedily take place. When digestion, sleep and appetite are natural, and the patient increases in flesh without any diminution of the insanity, there is little hope. When the sensibility of the patient is so far weakened that he can gaze on the sun, has lost the sense of smell and taste and is insensible to the inclemency of the weather, he is incurable. Insanity is incurable when it is the result of epilepsy, and when complicated with this disease or with paralysis, leads inevitably to death.

#### ATTENDANTS AND ASSISTANTS.

We have at present forty-one persons in our employ, all of whom reside constantly at the Asylum. We have eleven men attendants, one of whom drives the carriage when the patients ride, and one acts as an assistant to the steward, and attends to various duties in all parts of the house, sees to the clothing of patients, and assists in the care of them in the absence or sickness of other attendents. We employ seven women attendants, and a man and his wife who devote themselves exclusively to the excited class of women; also two seamstresses, who assist as attendants when required. Four women and two men perform all the work in the cooking and kitchen departments, and six women and one man attend to the washing and ironing. Three women are employed in the centre building, occupied by the resident officers and their families. We employ also a watchman, a farmer and joiner.

We pay the men thirteen dollars a month, with the exception of the joiner, who receives nineteen. The women are paid one dollar and a half a week.

Those who remain with us a year, and discharge their duties to the satisfaction of their employers, receive from five to eight dollars gratuity.

Many of our attendants and assistants have been with us from the opening of the Asylum, others have been engaged as the number of patients increased. We cheerfully bear testimony to the faithfulness and

zeal with which they have discharged their responsible and laborious duties ; duties which have been as we anticipated, peculiarly arduous the first year, more so, we trust, than in years to come.

We employ none that are not recommended to us for their intelligence, temperance, fidelity and good disposition, and we keep none long, that do not exhibit these qualities.

For their guidance in their treatment of the patients, and in the performance of their other duties we have printed rules which are strictly but impartially enforced.

### BARN, STOCK AND FARM.

Within the past season a large stone barn forty-six by one hundred feet, has been erected, at a convenient distance from the Asylum. It not only affords us abundant room for the storage of the hay and grain we require, stables for twenty cows and half a dozen horses, but also a place for threshing grain, the safe keeping of farming utensils, and a room twenty-eight by forty feet for carriages. Beneath the whole is a well drained cellar divided into two, by a thick wall. One, twenty-eight by seventy-eight feet, affords ample room for the storage of the large quantity of vegetables raised on the farm and required for the Asylum, the other receives the manure from the stables above and is connected with the piggery that adjoins the barn. Water is brought to the stables and carriage room by means of a pump from a good well in the cellar.

We have at present three horses and eleven cows, but shall require in the spring an additional pair of horses for the farm and a few more cows. It is desirable to have an abundance of good milk, and we ought to have our supply from cows kept on the farm.

We have thirty hogs, six of them large and well fattened, the others of various sizes.

The farm as we have mentioned, is well adapted for the purposes for which it was purchased. It will furnish pasture and hay for more than double the number of horses and cows we now keep, without encroaching upon the land required to raise all the vegetables we should need for a household twice as large as our present.

We have made a road through the middle of the farm the sides of which we propose to plant with trees. By means of this road we are enabled to communicate with all parts of the farm without going near the public road, and thus our patients go and return from walking or from labor, without coming in contact with those not belonging to our family.

On the farm is an orchard and a beautiful grove of fifteen acres in which we expect to make paths and roads, thus affording to our patients delightful walks and places of resort during the summer season.

### ACKNOWLEDGEMENTS

We take great pleasure in acknowledging our obligations to numerous individuals, who have kindly contributed to the enjoyment and comfort of our patients.

To Capt. Amos Smith, (recently deceased,) of N. Y. Mills, and to Nicholas Devereux, Esq. of Utica, we are indebted for many plants and flowering shrubs. They were peculiarly acceptable, as our garden and grounds are extensive, and were totally without any ornamental shrubbery, a want which these donations in part supply.

To Horatio Seymour, Esq. for the valuable present of six volumes of the Natural History of the State of New-York.

To the society of the Dutch Reformed Church of the city of Utica, through the pastor, the Rev. John P. Knox, for two dozen of bibles.

The editor of the Jeffersonian, of Watertown, has, from the opening of the Asylum, favored us every week with his interesting paper, which has been very gratifying to patients from that section of the State. The editors of the Troy Whig, the Liberty Press of Utica, the Utica Daily Gazette, The Freeman's Journal of New-York, the Catholic Herald of Philadelphia, and of the Phrenological Journal of New-York, have also kindly furnished us with their publications for several months past.

To Dr. Bachelder of Utica, we are under obligations for many favors. He has sent us regularly the New-York Journal of Commerce, The New-York Evangelist, the Utica Gazette and the Utica Observer, besides occasional numbers of other valuable periodicals.

The Hon. Ezekiel Bacon, has supplied us with the National Intelligencer and the Christian World. From other sources the patients have been supplied with the following papers: by the Asylum, with the Al

bany Argus, New-York Commercial Advertiser, the New World and Brother Jonathan. By the resident officers, with the New-York Evening Post, The New-York Tribune, The Christian Advocate and Journal, the N. Y. Observer and the Hartford Times.

### CONCLUSION.

In conclusion, we feel devoutly thankful to the Almighty Protector of mankind for his kind care of us the past year. We have been remarkably preserved. No suicide or other serious accident has occurred in the establishment, an exemption hardly to have been anticipated during the past year, and not to be generally expected in years to come.

To the Managers of the Asylum we are under great obligations. They have not only visited the Asylum when required by law, but frequently at other times and often at much inconvenience to themselves, to counsel and aid us in difficulties, and thus have essentially lessened the burdens of the resident officers.

To those more immediately associated with myself in the care of the household, I feel grateful. The steward and matron, Mr. and Mrs. Chatfield, have devoted all their time to the institution. Their duties have been peculiarly arduous the past year, as on them has principally devolved the furnishing of the establishment and other labor that will not be required hereafter; but they have discharged all their duties with a cheerful zeal deserving of the highest commendation.

Dr. Buttolph has performed the duties of assistant physician with ability and entire devotedness to the interests of the institution, sharing with me the hardships and anxieties attendant upon its organization.

Hoping for the continued smiles of Divine Providence upon our efforts in the vast field of benevolent labor where we are placed, we shall enter upon the duties of another year with renewed ardor, believing we shall be aided by the Managers and the Legislature in every reasonable effort to extend the benefits of this noble charity to the suffering class for whom it was provided.

A. BRIGHAM.

NEW-YORK STATE LUNATIC ASYLUM, }  
November 30, 1843. }

P. S. Since the foregoing report was written we have received *fifty-four* patients, and discharged *twenty-nine*. Our present number is *two*  
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*hundred and twenty-one.* Applications for admission have been more numerous of late than at any previous time. We now have all our rooms engaged, and are reluctantly compelled to refuse admission to many, and to discharge others, in order to receive the most urgent cases.

A. B.

*Utica, Feb. 1st, 1844.*



