

**Twelfth annual report of the trustees of the State Lunatic Hospital at Worcester. December, 1844.**

**Contributors**

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TWELFTH

ANNUAL REPORT OF THE TRUSTEES

OF THE

STATE LUNATIC HOSPITAL

AT WORCESTER.

REPORT:

DECEMBER, 1844.

**Boston:**

DUTTON AND WENTWORTH, STATE PRINTERS.

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1844.

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TWELFTH ANNUAL REPORT  
OF THE  
TRUSTEES OF THE STATE LUNATIC HOSPITAL.

DECEMBER, 1844.

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*To His Excellency GEORGE N. BRIGGS, Governor of the Commonwealth of Massachusetts, and to the Honorable Council :*

The State Lunatic Hospital having nearly completed the twelfth year of its successful operation, the Trustees respectfully present this, their Twelfth Annual

REPORT:

THE Hospital, during the past year, has been more crowded with patients, and its operations generally have been more successful and beneficial, than in any former year. The smallest number of patients at any time during the year has been two hundred and fifty-three. The largest number two hundred and seventy-three. The average number has been two hundred and sixty-one. The number of attendants, including the Superintendent and his family, the Chaplain, Steward, &c., is about fifty-five, making upwards of three hundred persons as the average number under the same roof.

By resolves of March 24th, 1843, the Trustees, Superintendent and Treasurer " were authorized so to enlarge the Hospital as to accommodate one hundred and fifty more patients, together with all the necessary furniture and other accommodations for the same. Under these resolves the Trustees, as stated in our last report, together with the other gentlemen, erected, just at the close of the last year, the Johonnot Hall, consisting chiefly of two large rooms, and extending from the rear of the centre building to the chapel. These large rooms were much needed, as all our other rooms are small. Experience, since



our last report, has fully proved their usefulness. They also, at the same time, commenced upon the foundation of two extensive wings, one for males, the other for females, sufficiently large to contain the required number of patients ; but fearing that possibly the funds appropriated might be insufficient, they contracted at first for finishing only, and furnishing the two upper stories. All the rooms in the two upper stories of the new wings are now nearly finished and partly furnished.

The condition of our institution will more particularly appear by the Report of the Superintendent, which is herewith submitted. Under the smiles of Providence this Hospital has increased in size, usefulness and reputation, beyond the anticipations of its most sanguine friends. For its success we are largely indebted to the energy, ability and untiring exertions of Doct. Samuel B. Woodward, who has been the Superintendent from its beginning, and who has himself built it up and made it what it now is. He has already spent a large portion of his useful life in the care of this and other public institutions ; and we regret that we have to state that during the last spring and summer the Trustees thought his health so precarious, and so much impaired by confinement and close application to duties beyond what he had strength to perform, that they enjoined it upon him to break off at once from his duties here, and take a journey to the south for the benefit of his own health. He was absent two months, returned somewhat improved, and as we trust derived some information that may prove beneficial to all.

During the sickness and absence of Doct. Woodward, Doct. John R. Lee, the Assistant Physician, had the whole medical care of the patients, and shew that by his skill and experience he was entitled to the confidence of all. We feel grateful that the life, health and usefulness of our Superintendent has been so long continued to us ; but the time must come when age or infirmity will require a release from some portions of his present arduous duties.

We think it necessary, even in the present condition of the Hospital, that there should be some additional officers. We are liable, as we have experienced the past autumn, to fevers and other sickness and disability among our attendants. If we have more officers we must have more accommodations for them. Nearly one half of the centre building is now taken up for dining rooms for the patients, being six of the largest rooms. The rest of this part of the Hospital is filled by the Superintendent and his family, the Steward and Matron, and other principal officers of the Institution, and is already more crowded than any other part of the building. This too is the only comfortable and con-



venient part of the Hospital for the superior officers. The Trustees have found it necessary, even for the present number of officers, to make them some further accommodations.

In the infancy of our institution we had no chapel, and of course no chaplain, and no room in the building was reserved for his exclusive use. Ever since the erection of the chapel we have had a regular attendance upon public worship on the Sabbath; and ever since the completion of the Johonnot Hall there has been a regular attendance of such as were sufficiently convalescent and quiet, upon daily prayers in that building. Upon these occasions the Rev. George Allen, the Chaplain, officiates with much credit to himself, and we trust affording much comfort and consolation to the afflicted, and much instruction and benefit to all his hearers.

For the details of our financial operations the year past, we refer to the Report of the Treasurer. If there has been economy in the use or expenditure of the funds appropriated for the support, enlargement or improvement of our institution, we are much indebted to the prompt collections, punctual payments, and safe investment made by the Treasurer.

Of the Steward and Matron we can speak in terms of the highest commendation, for their careful and economical use of the public property, and kind treatment of the patients. The attendants and assistants all deserve praise. If there be a point of view in which this institution shows itself to the most advantage, it is in the discipline and subordination of all the officers and persons employed therein,—each one knowing his place, and each one doing his appropriate duty.

By a resolve of March 13th, 1844, two thousand dollars were appropriated for the erection of a Laundry. The Trustees have selected a spot a little without the yard, and at some little distance from the other buildings, for a Laundry, where all the clothes may be washed, dried, ironed, mangled and aired. This building is now nearly finished. It is of brick, two stories high, fifty feet long and thirty-eight feet wide. It has been the study of the Trustees so to locate all the buildings, especially the workshops where fire is used, as not to expose unnecessarily the principal buildings to the ravages of fire. The place in the main building heretofore used for ironing clothes was contracted, inconvenient and unsafe for that purpose; it will not afford comfortable accommodations as a lodging-room even for any of the attendants; but the building lately used as a wash-room, and which the Trustees had intended for a bakery, they found upon examination unfit for that pur-



pose ; it was of wood, and somewhat decayed. They had it removed without the yard, where it may be used as a store-room. They have also found it necessary and expedient to erect upon the same ground a substantial brick building for a bake-house,—the chambers over which will afford comfortable rooms for some of the attendants, thereby vacating some of the chambers in the centre building, so as to give better accommodations for the Chaplain and others. This situation for a bakery is convenient, the necessity great, and the cost we trust not very considerable.

During the year the meetings of the Trustees have been regularly attended, and the monthly visits to the Hospital regularly made. The by-laws have been revised, and made to conform to the present condition of the Hospital. The Aqueduct, with iron pipes, as authorized by a resolve of March 13th, 1844, has been laid down ; but as the damages to be agreed upon or assessed for land occupied thereby, have not yet been settled, the whole cost cannot be here stated.

The resources for the payment of ordinary expenses are the board of patients, the produce of the farm, and the proceeds of our mechanical operations. The current expenses for ordinary purposes, the past year, and the receipts for the payment thereof, can be better understood in the Treasurer's Report.

Much good might result if the Trustees had authority to appropriate, from their funds for current expenses, when they may find it expedient, a sum not exceeding one thousand dollars in any one year, for the purchase of land, or for the erection, enlargement or permanent improvement of their fences and buildings.

There is now a piece of productive land, about five acres, situated between the farm of the Hospital and the public highway, that has been recently sold for about five hundred dollars, and was purchased and is now held by a friend, and offered to our institution at the cost. We think it worth much more to the Hospital than to any other concern. Every year, as the number of our patients increases, we increase the productiveness of our land, the number of cattle upon our farm, and consume a greater amount of produce in our numerous family.

Most of the funds derived from the estates of the late George S. Johonnot, and of Martha Johonnot, his widow, have been converted into cash ; particularly those bridge shares and bank shares that were of doubtful value. The times have been favorable for these operations, and the loss on this part of their estates less than was feared. These funds were appropriated, by resolves of 1843, for the enlargement of



the Hospital,—for which purpose about twenty-eight thousand dollars have been already paid, and about fifteen thousand eight hundred dollars, in cash and in good funds, remain to pay for what has been done and for what is to be done to finish the wings agreeably to said resolves, and for furnishing the same. These new wings, one for males and the other for females, are each of them in the form of an L, and extend nearly on a line with the former front of the Hospital, and in the same direction each way one hundred feet, making the building in front two hundred feet longer than before. The centre building is seventy-six feet long. The two old front wings are each one hundred and twenty-four feet long. The new wings extend their front each way one hundred feet, making the whole front five hundred and twenty-four feet. The lateral wings extend backward; the old lateral wings each from front to rear one hundred and thirty-six feet. The new lateral wings extend from the extreme front backward; the new wing for males, from front to rear, one hundred feet. The new lateral wing for females only seventy-five feet, being as long as the Trustees calculated the funds appropriated would complete and furnish. The centre building is four stories high, and the wings are three stories, exclusive of the basement, which contains the kitchens, rooms for attendants, &c., and of the attic. The Johonnot Hall is seventy-six feet long, and the chapel, which is a continuation of the same line of building, is forty feet,—both extending from the rear of the centre building one hundred and sixteen feet. On each side of the chapel are infirmaries and other rooms extending each way to the male and female central wings, and forming a hollow square or yard on each side of the Johonnot Hall. The whole, when completed, will afford good accommodations for four hundred patients and their attendants.

The whole number of patients that have been admitted into the Hospital from the beginning is 2013. The whole number that have been discharged, including those that have died, is 1750. There remain now, at the end of the year, 263 patients. The number admitted the past year has been 236. The number discharged 228, of whom 124 have recovered and 15 have died. Leaving at the Hospital 8 more patients at the close of the year than at its commencement.

The produce of the farm has been large, and chiefly consumed upon the premises. Much of the work in the shoe-shop is for the use of the patients. The cabinet furniture, the mattresses, and the linen for the new wings, have been prepared by those of the household.

R. Newton, Esq. has been employed by the Trustees as council, and



is now engaged in settling the land damage of the aqueduct. The amount paid for the aqueduct is \$2,210 72. The pipe is of iron ; it has a bore of two inches diameter, and is one mile long. Its weight is about one hundred and forty pounds to the rod. Its strength has been tested by a powerful hydraulic press.

Much yet remains to be done to carry out the designs of the benevolent founders of this institution. There is much room for the charitably disposed and affluent to do good. Many improvements remain yet to be made, and many distressed subjects to be relieved.

The State Lunatic Hospital has uniformly received the patronage and encouragement of the wise and good. We feel it to be our duty, in behalf of the afflicted inmates and their friends, to acknowledge the bounty and kindness of our civil rulers, in erecting and supporting so useful an establishment. We would gratefully remember also individual benefactors, among the foremost of whom are the late George S. Johonnot, Esq., and the late Martha Johonnot, his widow, who have bequeathed so large a portion of their estates in aid of the benevolent cause in which we are engaged.

HENRY GARDNER,  
STEPHEN SALISBURY,  
JOSEPH SARGENT,  
S. C. PHILLIPS.

WORCESTER, Dec. 1st, 1844.

## TREASURER'S REPORT.

*To His Excellency GEORGE N. BRIGGS, Governor, and to the Honorable Executive Council of the Commonwealth of Massachusetts :*

The Treasurer of the State Lunatic Hospital respectfully presents his Twelfth Annual Report :

The Treasurer charges himself from December 1, 1843 to November 30, 1844, inclusive, as follows :

For cash on hand Dec. 1, 1843, balance of account, . . . . .	\$3108 68	
For receipts from cities, towns and individuals, . . . . .	28,878 37	
For credits on bills for sundry articles sold, . . . . .	284 53	
	<hr/>	\$32,271 58

He credits himself as follows :

For payments for improvements and repairs, . . . . .	736 47	
“ “ “ salaries, wages and labor, . . . . .	7871 41	
“ “ “ furniture and bedding, . . . . .	1656 33	
“ “ “ clothing, linen, &c. . . . .	2447 66	
“ “ “ fuel and lights, . . . . .	3984 19	
“ “ “ provisions and groceries, . . . . .	10,675 89	
“ “ “ medical supplies, . . . . .	526 38	
“ “ “ hay \$40, straw \$120 20, . . . . .	160 20	
“ “ “ miscellaneous, . . . . .	1220 22	
	<hr/>	
Expenses for the year, . . . . .	29,278 75	
Cash on hand balance to new account, . . . . .	2,992 58	
	<hr/>	\$32,271 58

*The item Fuel and Lights includes*

Wood, . . . . .	572 cords 7 feet 5 inches, . . . . .	2554 32
Charcoal, . . . . .	2164 bushels, . . . . .	195 56
Anthracite, . . . . .	105 tons 340 lbs, . . . . .	796 13
Oil, . . . . .	487½ gallons, . . . . .	434 89
Candles, . . . . .	6 lbs., . . . . .	2 16
Wick, . . . . .	. . . . .	1 13
		<hr/>
		\$3984 19



*Provisions and Groceries include*

Fruits, &c.,	.	.	.	.	.	.	.	.	\$625	25
Salt, spices and small groceries,	.	.	.	.	.	.	.	.	184	24
Soap,	.	.	.	.	.	.	.	.	452	95
Butter,	.	.	.	12,453	lbs.	.	.	.	1746	04
Cheese,	.	.	.	11,584 $\frac{3}{4}$	lbs.	.	.	.	703	96
Eggs,	.	.	.	673	dozen,	.	.	.	95	86
Beans,	.	.	.	31	bushels,	.	.	.	45	08
Peas,	.	.	.	15 $\frac{7}{16}$	bushels,	.	.	.	18	59
Milk,	.	.	.	12	quarts,	.	.	.	48	
Tea,	.	.	.	873 $\frac{1}{2}$	lbs.	.	.	.	258	42
Coffee,	.	.	.	1387	lbs.	.	.	.	102	91
Shells,	.	.	.	60	lbs.	.	.	.	6	59
Biscuit,	.	.	.	.	.	.	.	.	87	66
Brown Sugar,	.	.	.	11,911	lbs.	.	.	.	791	36
White Sugar,	.	.	.	802	lbs.	.	.	.	95	70
Molasses,	.	.	.	935 $\frac{1}{2}$	gallons,	.	.	.	191	86
Honey,	.	.	.	663 $\frac{1}{2}$	lbs. 5 gallons,	.	.	.	56	97
Vinegar and Cider,	.	.	.	17	barrels 26 gallons,	.	.	.	50	02
Rice,	.	.	.	1621	lbs.	.	.	.	55	20
Corn,	.	.	.	752	bushels,	.	.	.	524	80
Oats,	.	.	.	159 $\frac{1}{2}$	bushels,	.	.	.	51	71
Barley,	.	.	.	49	bushels,	.	.	.	30	15
Rye,	.	.	.	334	bushels,	.	.	.	257	37
Flour,	.	.	.	273 $\frac{1}{2}$	barrels,	.	.	.	1373	87
Turnips,	.	.	.	11 $\frac{1}{2}$	bushels,	.	.	.	2	80
Potatoes,	.	.	.	1842	bushels,	.	.	.	545	32
Poultry,	.	.	.	885 $\frac{9}{16}$	lbs. 2 dozen pigeons,	.	.	.	83	51
Fresh Fish,	.	.	.	626	lbs. 129 shad, 90 mackerel,	.	.	.	57	85
Salt Fish,	.	.	.	6706	lbs.	.	.	.	170	00
Mackerel,	.	.	.	3	barrels,	.	.	.	31	75
Salmon, 4 bbls. 75 lbs. smoked, 50 lbs. smoked Halibut,	.	.	.	.	.	.	.	.	58	45
Oysters, Clams, Lobsters,	.	.	.	.	.	.	.	.	34	34
Tongues and Sounds,	.	.	.	2	barrels,	.	.	.	10	50
Herrings,	.	.	.	2	boxes,	.	.	.	1	66
Ham,	.	.	.	560 $\frac{1}{2}$	lbs. and smoking others,	.	.	.	45	40
Mutton and Lamb,	.	.	.	1912 $\frac{1}{2}$	lbs.	.	.	.	137	95
Beef,	.	.	.	24,142 $\frac{1}{2}$	lbs.	.	.	.	1236	98
Pork,	.	.	.	1937	lbs.	.	.	.	125	53

Veal, . . . . .	4397 lbs. . . . .	260 98
Sausages, . . . . .	507½ lbs. . . . .	49 55
Tripe, . . . . .	199 lbs. . . . .	15 94
Tongue, . . . . .	2½ lbs. . . . .	00 25
		<hr/>
		\$10,675 89

*Miscellaneous includes*

Cash advanced to patients and charged in their accounts, or paid to them when leaving the Hospital, . . . . .	\$182 17
Expenses after elopers or for their return, . . . . .	39 85
Expenses of sending home patients discharged, . . . . .	22 37
Funeral expenses, . . . . .	101 50
Postage, . . . . .	113 64
Books, stationery and printing, . . . . .	107 53
Three cows and two calves, two pairs oxen, one bull, and one horse, . . . . .	363 00
Expenses of Trustees' visits, . . . . .	48 61
Analysis of water, . . . . .	45 00
Filling ice cellar, . . . . .	23 00
Pasturing, \$30 08, rent of land, \$32 87, . . . . .	62 95
Repayment of money overpaid for patients, either by being paid in advance or through mistake of the Treasurer, in the time of their being in the Hospital, . . . . .	36 74
Sundries, . . . . .	73 86
	<hr/>
	\$1220 22

No appropriation will be necessary for the current expenses of the ensuing year.

ALFRED DWIGHT FOSTER,

*Treasurer of the State Lunatic Hospital.*

WORCESTER, December 10, 1844.



THE TWELFTH REPORT  
OF THE  
SUPERINTENDENT TO THE TRUSTEES  
OF THE  
STATE LUNATIC HOSPITAL,  
WORCESTER, MASS.,

*From Dec. 1st, 1843, to Nov. 30th, 1844, inclusive.*

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It is now twelve years since the Hospital was opened for the reception of the insane. During this time there have been admitted into its wards 2013 patients. There have been discharged 1750, of which number 916 have recovered, 151 have died, and 683 have been discharged in various conditions, some greatly improved, some with improved health and habits, others as harmless and incurable, for want of room, and a few have been sent back to the jails and houses of correction for the same reason.

We have had from the commencement a succession of prosperous seasons, an unusual exemption from mortality, and such success in the recovery of insanity, as calls loudly for gratitude to the Giver of all good for his protection, guidance and blessing.

The Hospital has been for a long term, in such a crowded state as to render additional accommodations necessary; the pressing demands for admission being far beyond the means of relief.

In 1843, the Legislature decided to add to the Hospital one hundred and fifty apartments, and to expend for this purpose a fund given to this institution by George and Martha Johonnot, who, in their last will, made it the residuary legatee of their estate. From this source the Hospital came in possession of a legacy of about \$43,000, which has been expended according to the original design of its benevolent donors, that of adding to the accommodations for the insane in this Commonwealth.

The additional wings, part of which are now nearly ready for occu-



pancy, extend in front, from the present verandahs, 66 feet, with a return wing from the southern extremity of 100 feet, and from the north of 75 feet. These buildings contain 160 apartments for patients, and such attendants and assistants as may be necessary to take charge of them.

The walls throughout the building are hollow, to increase their dryness and to admit the plastering to be made on the brick surface, a consideration of some importance in a hospital for the insane.

The rooms are 8 feet by 10, each has a window secured by a cast iron grating corresponding with the sash, so as to remove all offensive appearance. There are also ventilating openings over the doors, and two orifices in the inner wall of each room which terminate in the attic story, from whence the foul air escapes through the sky lights and windows. The halls are 12 feet wide, those of the front wings crossing those of the lateral wings at right angles. There are dining rooms in each story, to which the food is transferred from the kitchen by dumb waiters. There are also, sink rooms, water closets, &c., connected with each gallery.

The kitchens, containing the most approved apparatus for cooking, conveying water, &c., are in the basement story. Here are also placed the furnaces for warming and ventilating the whole building.

The verandahs have been enlarged ten feet in width, and through them we have easy access from the new wings to the centre building.

The whole building presents a front of five hundred and twenty-five feet, this with the four lateral wings, Johonnot Hall, the chapel, infirmaries, bakery and solitary, which are all connected, make a range of *thirteen hundred* feet, besides out buildings, shops, laundry, &c.

The new laundry is a commodious building, about 100 feet south east of the eastern extremity of the south wing. It is 50 feet long by 30 feet wide, consisting of basement, centre, and attic stories, appropriated to washing, drying and ironing the clothes. The wash room is fifty feet by twenty. In this room is a steam boiler, which heats all the water for washing, steams the clothes, and warms this large room and the ironing room directly over it. Warm and cold water are conducted to each tub by pipes and are again let off, after being used, by valves at the bottom of the tubs, a press is used as a substitute for wringing, dumb waiters carry the clothes to the attic, which is heated for the purpose of drying in winter and bad weather, and every arrangement is made for facilitating the labor in this department.

Over the wash room is a room of the same size for ironing, and



airing the clothes. One end of this room is partitioned off as an airing room for the clothes after ironing, the furnace for heating the irons is placed in this partition,—the pipe of which passes around the room and affords sufficient heat for drying. Through the centre of this room runs the steam pipe for warming which is connected with the steam boiler below, over this is the ironing table where the laundress and her assistants, with a suitable selection of patients ply the irons. At the end of the room is the mangle by which much of the heavy work of this department is accomplished.

Besides these rooms, this building has a convenient cellar, in which is the tank for water with suitable pipes and cocks for the regulation of the water for the whole establishment; a kitchen and rooms for the accommodation of a family and the persons employed.

A bakery and rooms for the seamstresses are now being erected on the site of the former wash house, which has been recently removed to another location. This building, sixty feet long and twenty wide, occupies the space between the chapel and the infirmary. It is to be two stories high and to contain eight rooms, suitable for the labor, board and lodging of all the persons employed in these two departments.

These buildings, with the Johonnot Hall, erected last year from the funds left by the benevolent woman whose name it bears, compose the projected improvements which will add greatly to the comfort of the establishment.

When these accommodations are completed, the Hospital will afford room for 400 patients, and apartments for nearly 100 other persons, most of whom are in some way employed about the establishment.

The operations of the Hospital have been upon a more extended scale than any former year. The number of admissions and discharges has been greater, the number of residents more numerous, and more patients have recovered. The number of patients at the close of the year, (263,) exceeds the number of rooms by more than thirty. This number has been suffered to accumulate, with much present inconvenience, from an unwillingness to send patients away, when additional rooms will so soon be in readiness to accommodate all, we trust, who may desire a residence within the wards of the hospital.

The interest in such institutions, has evidently greatly increased within a few years. The number of recent cases admitted is greater than at any former period, and in most of them the friends of the insane, desire to avail themselves early of the benefits of the Hospital. In the course of the last year quite a number of individuals have been

brought to the institution the first week of their illness, and many more within two, three, or four weeks. These are favorable indications, and induce a hope that insanity will be diminished, that fewer cases will be suffered to assume a chronic form, and the sufferings attendant upon this great calamity be essentially lessened.

Following this brief description of the new buildings, I present the usual tables deduced from the records of the Hospital. On examining the tables heretofore presented in reports, with reference to the value of their statistics, I cannot persuade myself to omit any. I am aware they are of unequal value, but I trust none are wholly useless or uninteresting. All the tables given are designed to present *facts* only. If the numbers cannot all be vouched for as mathematically correct, they approximate so closely to facts as to be safe for ordinary estimates.

If we present reports, of what shall they consist? Not, surely, of essays on insanity, theories and views irrespective of the statistics which we gather in the institutions. These would of course do little to impress the public mind of the value of our observations. If our views and theories are founded on facts, and are supposed to derive weight from our experience and observation, why not present these facts as succinctly as possible, in tabular or other forms? They are unsafe for us if they are unsafe for others.

Fully believing that the statistics of insanity, are as valuable as any other vital statistics, I shall not discard them, but hope to see them extended and perfected till they be found wholly correct and entirely reliable.



## TABULAR VIEW

*Of the Condition of the State Lunatic Hospital, from December 1st, 1843, to November 30th, 1844, inclusive.*

No.	Time of admission	Age when admitted.	Sex.	Married or single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remaining.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
1833.												
2	Jan'y 22	63	Male	Widower	Religious, -	7 years	The Court	11 yrs	Remains	Improved	Hereditary.	Periodical.
7	do 29	44	do	do	Intemperance, -	6 do	do	10 mths	do	do	do	Homicidal.
8	do 30	56	do	Single	Unknown, -	10 do	The Legislature	10 mths	do	Stationary	do	do
12	Feb'y 15	39	do	Widower	Intemperance, -	14 do	The Court	11 yrs	do	Improved	Foreigner.	Pauper.
18	do 18	66	Female	Widow	Unknown, -	27 do	do	9 mths	do	Stationary	do	do
19	do 18	37	do	do	do	7 do	do	9 mths	do	do	do	do
21	do 18	28	Male	Single	Masturbation, -	5 do	do	9 mths	do	Improved	do	do
27	do 28	36	do	Married	Intemperance, -	5 do	do	8 mths	do	Stationary	Homicidal.	do
44	March 16	44	do	Single	do	16 do	do	3 mths	do	do	do	do
45	do 16	49	do	Widower	Religious, -	14 do	do	3 mths	do	do	do	do
102	June 6	42	Female	Single	Disappointed affection, -	14 do	do	5 mths	do	Improved	Hereditary.	do
133	Oct'r 19	33	do	Widow	Ill health, -	2 do	do	1 mth	do	Stationary	do	do
1834.												
176	Feb'y 10	44	Male	Single	Disappointed affection, -	10 do	The Overseers	10 yrs	Discharged	Improved	do	do
190	March 22	40	do	Married	Jealousy of wife, -	3 do	The Court	10 yrs	Remains	Stationary	Demented.	do
209	April 30	29	do	Single	Unknown, -	6 do	do	7 mths	do	Improved	Homicidal.	do
223	June 21	40	Female	do	Domestic affliction, -	10 do	do	5 mths	do	do	Hereditary.	Period.
260	Oct'r 9	37	Male	do	Unknown, -	6 do	do	10 yrs	do	Stationary	do	do
278	Dec'r 18.	40	do	do	do	2 months	do	10 yrs	do	do	Periodical.	do
1835.												
308	April 18	25	Female	do	Intemperance, -	Unknown	do	9 yrs	do	do	Foreigner.	Pauper.
319	May 12	45	do	Married	Ill health, -	6 years	do	9 yrs	do	do	Demented.	do
347	July 15	52	Male	do	Intemperance, -	6 do	do	9 yrs	do	do	Hereditary.	Periodical.
367	Oct'r 1	32	do	Single	Masturbation, -	4 do	do	9 yrs	do	do	do	do
1836.												
400	Jan'y 28	35	Female	do	Unknown, -	6 do	do	8 yrs	do	Improved	do	do
425	April 12	40	do	do	do	6 do	do	7 mths	do	Stationary	Periodical.	do
431	May 3	29	do	do	Ill health, -	5 do	do	6 mths	do	do	do	do



435 May 6	Female	Married	Ill health.	-	-	5 years	The Court	8 yrs	6 mths	Remains	Stationary	Hereditary.
451 June 28	Male	Single	Intemperance,	-	-	1 do	do	8 yrs	5 mths	do	do	do
488 Sept. 22	do	do	Masturbation,	-	-	10 do	do	8 yrs	2 mths	do	do	do
1837.												
518 Jan. 9	Male	Single	Masturbation,	-	-	3 do	do	7 yrs	9 mths	Discharged	do	Hereditary.
532 Sept. 8	do	Widower	Ill health,	-	-	6 do	do	7 yrs	9 mths	Remains	Improved	Suicidal.
545 March 8	Female	Single	Domestic affliction,	-	-	3 do	do	7 yrs	8 mths	do	do	do
547 do 10	do	Widow	Religious,	-	-	13 do	do	7 yrs	do	Died	do	do
582 May 26	do	Single	Disappointed affection,	-	-	6 months	do	7 yrs	6 mths	Remains	do	Periodical.
612 Aug. 5	do	do	Domestic affliction,	-	-	10 years	do	7 yrs	3 mths	do	Stationary	do
635 Sept. 9	Male	do	Unknown,	-	-	10 do	do	6 yrs	10 mths	Discharged	do	Hereditary.
648 Oct. 5	do	do	Intemperance,	-	-	10 do	do	7 yrs	1 mth	Remains	do	Periodical.
658 do. 22	Female	Married	Ill health,	-	-	18 months	do	7 yrs	do	Discharged	do	Foreigner. Pauper.
666 Nov. 4	do	Single	Disappointed affection,	-	-	10 years	do	7 yrs	do	Remains	do	Paroxysmal.
678 do 22	Male	do	Religious,	-	-	2 do	do	7 yrs	do	do	do	do
680 Dec. 1	do	Widower	Domestic affliction,	-	-	22 do	do	7 yrs	do	do	do	Homicidal.
1838.												
718 Feb. 15	do	Married	Intemperance,	-	-	30 do	The Overseers	6 yrs	9 mths	Died	do	do
719 do 15	Female	Single	Unknown,	-	-	Unknown	The Court	6 yrs	9 mths	Remains	do	Foreigner.
721 do 15	do	do	Intemperance,	-	-	20 years	do	6 yrs	9 mths	do	do	do
789 June 24	Male	do	Ill health,	-	-	2 do	do	6 yrs	5 mths	do	Improved	do
814 Aug. 20	do	do	Masturbation,	-	-	3 do	do	5 yrs	9 mths	Discharged	Stationary	Periodical.
876 Dec. 27	do	do	do	-	-	3 do	do	6 yrs	do	Remains	Improved	Hereditary.
1839.												
895 March 1	Female	do	Ill health,	-	-	2 do	do	5 yrs	9 mths	do	do	do
910 April 17	do	Widow	Domestic affliction,	-	-	2 months	do	5 yrs	7 mths	do	Stationary	do
946 June 19	Male	Married	do	-	-	5 years	do	5 yrs	5 mths	do	Improved	Periodical.
948 do 20	Female	Single	Religious,	-	-	1 month	The Friends	5 yrs	5 mths	do	do	do
949 do 22	do	Widow	Domestic affliction,	-	-	5 years	The Court	5 yrs	5 mths	do	Stationary	Suicidal.
954 July 1	Male	Single	Masturbation,	-	-	5 do	do	5 yrs	5 mths	do	Improved	Periodical.
961 do 9	Female	Married	Indulgence of temper,	-	-	3 do	do	5 yrs	5 mths	do	Stationary	do
973 Aug. 5	Male	Single	Masturbation,	-	-	9 do	do	5 yrs	4 mths	do	do	do
995 Sept. 9	do	do	do	-	-	5 do	do	4 yrs	9 mths	Discharged	do	do
996 do 16	Female	Married	Domestic affliction,	-	-	15 do	do	4 yrs	9 mths	do	do	do
1024 Nov. 2	Male	Single	Unknown,	-	-	5 do	do	5 yrs	3 mths	Remains	do	do
1840.												
1078 March 28	do	do	Disappointed affection,	-	-	4 months	do	4 yrs	8 mths	do	Improved	do
1092 April 21	Female	do	Ill health,	-	-	6 years	do	4 yrs	8 mths	do	Stationary	do
1095 do 29	do	Widow	do	-	-	10 do	do	4 yrs	8 mths	do	Improved	do
1115 June 11	Male	Single	Exposure to wet,	-	-	2 months	do	4 yrs	5 mths	do	do	Hereditary.



TABLE -- Continued.

No.	Time of admission.	Age when admitted.	Sex.	Married or Single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remains.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal. &c.
1141	Aug. 1840.	81	Female	Single	Religious, -	8 months	The Court	4 yrs	Remains	Improved	Hereditary.	
1144	do 12	50	do	do	Ill health, -	8 years	do	4 mths	do	do		
1145	do 13	49	Male	Married	Intemperance, -	Unknown	do	4 mths	do	do	Periodical.	
1147	do 18	26	do	Single	Periodical, -	9 years	do	4 mths	do	Stationary	Hereditary.	
1151	do 25	58	do	Married	Unknown, -	34 do	do	4 mths	do	Improved		
1156	Sept. 4	40	do	do	do	2 do	do	3 mths	do	Stationary		
1169	do 19	46	Female	Single	do	25 do	do	4 yrs	do	do		
1179	Oct. 12	35	do	do	do	20 do	do	2 mths	do	do		
1183	do 17	41	Male	Married	Failure in business, -	7 do	do	2 mths	do	do	Periodical.	
1193	Nov. 25	46	Female	do	Family trouble, -	12 years	do	4 yrs	do	do		
1202	Dec. 17	55	do	Single	Intemperance, -	1 month	do	4 yrs	do	Improved		
1211	Jan. 12	45	do	Widow	Family trouble, -	1 year	The Overseers	3 yrs	do	Stationary		
1226	Feb. 25	53	do	do	Paralysis, -	7 years	The Court	9 mths	do	do		
1228	March 5	33	Male	Single	Unknown, -	3 do	do	9 mths	do	do		
1239	April 3	32	Female	Married	do	5 do	do	8 mths	do	Improved	Foreigner.	
1243	do 10	68	do	Widow	Family trouble, -	1 month	The Friends	3 yrs	do	do	Periodical.	
1244	do 10	50	Male	Married	Epilepsy, -	20 years	The Court	8 yrs	do	Stationary		
1252	do 29	31	Female	do	Ill health, -	2 months	The Friends	7 mths	do	Improved		
1256	May 18	41	do	do	Unknown, -	4 years	The Court	6 mths	do	Stationary		
1272	June 23	42	Male	do	Family trouble	2 do	do	5 mths	do	do		
1279	July 1	24	do	Single	Masturbation, -	2 do	do	3 yrs	do	do	do	Hereditary.
1299	Aug. 5	62	Female	Widow	Ill health, -	3 do	do	3 yrs	Discharged	Recovered	do	
1316	Sept. 4	40	do	Married	Family trouble, -	15 do	do	3 mths	Remains	Stationary	Hereditary.	
1317	do 11	58	do	Widow	Ill health, -	12 do	do	3 mths	do	do	do	
1319	do 15	23	do	Single	Unknown, -	20 months	do	3 mths	do	do	do	
1324	do 22	25	Male	do	do	1 year	do	3 mths	do	do	do	
1325	Oct. 1	26	do	do	Masturbation, -	8 years	do	3 mths	do	do	do	
1333	do 13	15	Female	do	Ill health, -	1 year	do	3 mths	do	do	do	
1334	do 14	30	Male	Married	Epilepsy, -	5 years	do	3 mths	do	do	do	
1345	Nov. 11	20	Female	Single	Ill health, -	16 months	do	9 mths	Discharged	Stationary		
								8 mths	do	Improved		



1356 Nov. 1842.	24	35	Female	Married	Disappointed ambition, -	3 years	The Court	2 yrs	7 mths	Discharged	Stationary	Hereditary.
1371 Jan.	1	27	do	Single	Parental abuse.	-	11 do	2 yrs	11 mths	Remains	do	Hereditary.
1375 do	6	31	Male	do	Unknown, -	-	3 do	2 yrs	11 mths	do	Improved	do
1387 do	20	22	do	do	do	-	20 months	2 yrs	4 mths	Discharged	do	do
1390 do	24	29	do	do	Masturbation, -	-	6 years	2 yrs	10 mths	Remains	do	do
1392 do	27	55	do	Married	Asthma, -	-	4 do	2 yrs	6 mths	Discharged	do	do
1397 Feb.	6	34	do	Single	Animal Magnetism, -	-	3 do	2 yrs	10 mths	Remains	Stationary	Periodical.
1402 do	14	58	Female	do	Fear of poverty, -	-	13 months	2 yrs	10 mths	Discharged	Improved	Hereditary.
1408 do	24	24	Male	Married	Intemperance, -	-	3 do	2 yrs	4 mths	do	Stationary	do
1409 do	28	30	do	Single	Unknown, -	-	2 years	2 yrs	9 mths	Remains	do	do
1418 March	15	30	Female	do	do	-	2 months	2 yrs	5 mths	Discharged	Improved	do
1423 do	30	67	Male	do	do	-	30 years	2 yrs	8 mths	Remains	Stationary	do
1426 April	5	67	Female	Widow	Paralysis, -	-	4 do	2 yrs	5 mths	Discharged	Improved	do
1427 do	6	25	Male	Single	Unknown, -	-	4 months	2 yrs	5 mths	Remains	Stationary	do
1432 do	15	27	do	do	do	-	2 years	2 yrs	4 mths	Discharged	do	Suicidal.
1455 May	24	22	do	do	Masturbation, -	-	4 do	2 yrs	6 mths	Remains	do	Hereditary.
1464 June	18	21	do	do	do	-	6 do	2 yrs	5 mths	do	do	Hereditary.
1465 do	20	42	Female	do	Unknown, -	-	9 months	2 yrs	5 mths	do	Improved	Periodical.
1470 do	28	18	Male	do	Epilepsy -	-	5 years	2 yrs	5 mths	do	Stationary	Periodical.
1474 July	6	65	Female	do	Unknown, -	-	Unknown	2 yrs	4 mths	do	Improved	do
1480 do	14	35	Male	Married	do	-	3 months	2 yrs	4 mths	do	Stationary	do
1481 do	15	36	do	Single	do	-	13 years	2 yrs	4 mths	do	do	do
1484 July	20	65	Female	do	Ill health, -	-	9 months	2 yrs	4 mths	do	do	Hereditary.
1488 Aug.	5	46	do	do	Unknown, -	-	12 years	2 yrs	4 mths	do	do	do
1489 do	5	46	Male	do	do	-	25 do	2 yrs	4 mths	do	do	do
1491 do	17	35	Female	do	Ill health, -	-	4 do	2 yrs	4 mths	do	do	do
1495 do	20	26	do	Married	do	-	2 months	2 yrs	3 mths	Discharged	do	do
1498 Sept.	1	45	Male	do	do	-	3 do	21 mths	2 yrs	Remains	Improved	Periodical.
1499 do	1	40	Female	do	Religious, -	-	3 years	2 yrs	2 mths	Discharged	Stationary	Hereditary.
1508 do	8	42	Male	Single	Ill health, -	-	21 years	19 mths	15 do	Died	do	do
1515 do	26	25	do	do	Unknown, -	-	4 do	15 do	15 do	Discharged	Improved	Paroxysmal.
1519 do	30	44	do	do	do	-	24 do	15 do	15 do	do	Stationary	Periodical.
1525 Oct.	5	22	do	do	do	-	3 do	19 do	19 do	do	do	do
1526 do	5	30	Female	do	Excitement, -	-	16 months	2 yrs	1 mth	do	Improved	Hereditary.
1529 do	9	27	do	Widow	Loss of husband, -	-	6 do	2 yrs	1 mth	Remains	do	do
1531 do	11	40	Male	Single	Unknown, -	-	13 years	15 mths	1 mth	do	Stationary	do
1532 do	12	27	Female	do	Ill health, -	-	6 months	18 do	18 do	Discharged	Recovered	do
1533 do	17	29	Male	do	Unknown, -	-	10 do	2 yrs	1 mth	do	Improved	do
1535 do	17	28	do	do	Masturbation, -	-	5 years	2 yrs	1 mth	Remains	Stationary	Periodical.



TABLE—(Continued.)

No.	Time of admission.	Age when admitted	Sex.	Married or Single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remains.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
1543	1842. Oct. 31	39	Male	Widower	Trouble in business,	6 months	The Court	19 months	Discharged	Improved	Hereditary.	
1546	Nov. 3	50	Female	Married	Unknown	3 years	do	2 yrs 1 mth	Remains	Stationary		
1549	do 8	19	Male	Single	Masturbation,	1 year	do	18 months	Discharged	do		
1554	do 9	19	Female	do	do	2 years	do	2 years	Remains	Improved	Periodical.	
1556	do 19	20	Male	do	Unknown,	3 do	do	20 months	Discharged	do	do	
1557	do 26	32	do	do	Masturbation,	3 do	do	10 do	do	Recovered	do	
1565	Dec. 1	22	do	do	do	3 months	do	23 do	Remains	Stationary	Hereditary.	
1570	do 14	50	Female	Married	Love affair,	3 years	do	23 do	do	do		
1571	do 14	56	Male	do	Inventions,	10 do	do	23 do	do	Improved		
1572	do 16	33	Female	do	Family trouble,	2 do	The Overseers	18 do	Discharged	do		
1575	do 23	24	do	Single	Unknown,	6 months	The Friends	21 do	do	do	Suicidal.	
1577	1843, Jan. 2	33	Male	do	Periodical,	2 weeks	The Court	13 do	do	Recovered	Hereditary.	
1580	do 6	32	do	do	Love affair,	2 years	do	23 do	Remains	Stationary	do	
1584	do 15	28	do	do	Masturbation,	6 do	do	22 do	do	do	Periodical.	
1585	do 17	59	Female	Widow	Trouble,	4 do	do	22 do	do	Improved		
1597	Feb. 13	40	do	Single	Unknown,	7 do	do	22 do	do	Stationary		
1598	do 13	31	do	Married	do	4 weeks	do	22 do	do	Improved		
1600	do 23	50	Male	do	Religious,	6 months	do	21 do	do	do	do	
1602	do 24	42	do	do	do	2 years	The Friends	12 do	Discharged	do	do	
1607	do 27	28	do	Single	do	4 weeks	The Court	11 do	do	Stationary		
1615	March 15	17	Female	do	Followed fever,	2 months	do	20 do	Remains	Improved		
1617	do 15	24	Male	do	Epilepsy,	2 years	do	20 do	do	do		
1626	April 6	36	Female	do	Love affair,	4 months	do	19 do	Discharged	Stationary		
1627	do 6	50	do	Married	Religious,	2 do	do	20 do	Remains	do		
1628	do 7	30	do	Widow	Old age,	2 years	do	20 do	do	do		
1630	do 8	18	do	Single	Epilepsy,	4 do	The Friends	12 do	Discharged	do	do	
1633	do 10	70	Male	Married	Wound on the head,	6 do	The Court	20 do	Remains	do	do	
1636	do 22	25	do	Single	Religious,	6 weeks	do	12 do	Discharged	Recovered	do	
1637	do 24	24	do	do	Masturbation,	5 years	do	41 do	do	Stationary	do	
1638	do 24	50	do	Married	Unknown,	5 weeks	do	14 do	do	do	do	



[illegible]



TABLE—(Continued.)

No.	Time of admission.	Age when admitted.	Sex.	Married or Single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remains.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
1720	1843. Aug.	70	Male	Married	Fear of poverty,	5 weeks	The Overseers	9 months	Discharged	Stationary	Hereditary.	Periodical.
1721	do 28	37	do	do	Intemperance,	4 do	The Court	4 do	do	Recovered	Periodical.	do
1722	do 31	42	Female	do	Ill health,	1 year	do	13 do	do	do	do	do
1723	Sept. 1	38	do	do	do	3 months	do	5 do	do	do	do	do
1724	do 4	14	do	Single	Unknown,	6 weeks	The Friends	5 do	do	Improved	do	do
1725	do 5	50	do	do	do	4 do	The Court	11 do	do	do	do	do
1726	do 7	52	do	Widow	Intemperance,	3 do	do	4 do	do	Recovered	Hereditary.	Periodical.
1727	do 7	40	Male	Single	do	1 year	do	11 do	do	do	do	do
1729	do 8	22	Female	do	Amenorrhoea,	6 months	do	11 do	do	do	do	do
1730	do 9	23	Male	do	Exposure to cold,	1 week	do	4 do	do	do	do	do
1731	do 12	41	Female	do	Unknown,	2 weeks	The Overseers	9 do	do	Improved	do	do
1732	do 13	45	Male	Married	Palsy and Epilepsy,	5 years	The Friends	4 do	Died	Stationary	do	do
1733	do 19	26	Female	do	Influenza,	4 weeks	The Court	3 do	Discharged	Recovered	do	do
1734	do 20	15	Male	Single	Unknown,	4 do	do	14 do	Remains	Improved	Hereditary.	do
1735	do 20	34	Female	do	Ill health,	4 months	The Overseers	4 do	Discharged	Recovered	do	do
1736	do 23	30	Male	do	Religious,	4 weeks	do	4 do	do	do	Periodical.	do
1738	do 25	25	Female	Married	Trouble,	2 years	do	4 do	do	do	do	do
1739	do 25	30	Male	Single	Masturbation,	7 years	do	14 do	Remains	Stationary	do	do
1740	do 26	50	do	Married	Unknown,	6 months	The Friends	11 do	Discharged	Improved	Hereditary.	do
1741	do 26	33	Female	Single	do	5 years	The Court	14 do	Remains	Stationary	do	do
1742	Oct. 3	25	do	do	Trouble,	1 year	do	8 do	Discharged	do	do	do
1743	do 3	22	do	do	do	2 years	do	13 do	do	do	do	do
1744	do 4	19	do	do	Ill health,	2 do	The Friends	6 do	do	Improved	do	do
1745	do 4	36	do	do	do	3 do	do	3 do	do	do	do	do
1746	do 6	17	Male	do	Unknown,	8 months	The Court	3 do	do	Recovered	do	do
1747	do 10	16	do	do	Intemperance,	6 weeks	do	5 do	do	do	do	do
1748	do 10	38	do	Married	Unknown,	7 years	do	4 do	do	Improved	do	do
1749	do 10	25	do	Single	Intemperance,	Unknown	do	5 do	do	Recovered	Periodical.	do
1750	do 11	31	do	Widower	Trouble,	5 years	do	3 do	do	do	do	do
1751	do 12	50	Female	Single	Unknown,	5 do	do	9 do	do	Improved	Hereditary.	do
1753	do 14	52	Male	Married	Periodical,	15 do	do	10 do	do	Stationary	do	do







TABLE—(Continued.)

No.	Time of admission.	Age when admitted.	Sex.	Married or single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remaining.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
1794	1843. Dec. 25	42	Female	Single	Disappointed affection, -	14 years	The Court	11 months	Discharged	Stationary		
1795	do 26	51	do	Married	Periodical, -	6 weeks	do	7 do	do	Recovered		
1796	do 27	25	do	Single	Influenza, -	6 do	The Overseers	3 do	do	do		
1797	do 28	26	do	do	Amenorrhœa, -	4 do	The Friends	4 do	do	do		
1798	1844. Jan'y 2	36	do	Widow	Unknown, -	50 years	do	10 weeks	do	Improved	Hereditary.	
1799	do 4	24	Male	Single	do	8 months	The Overseers	10 do	do	do	do	
1800	do 6	30	Female	do	Ill health, -	3 years	The Court	10 months	Remains	do	do	
1801	do 8	53	do	do	do	5 months	do	7 do	Discharged	Recovered	Periodical.	
1802	do 9	30	Male	do	Unknown, -	5 years	do	11 do	Remains	Improved	do	
1803	do 9	39	do	do	Love affair, -	15 do	do	11 do	do	Stationary	do	
1804	do 9	22	do	do	Unknown, -	3 do	do	11 do	do	Improved	Hereditary.	
1805	do 12	35	do	Married	Property, -	4 weeks	do	4 do	Discharged	do	do	
1806	do 15	45	Female	do	Ill health, -	20 months	The Friends	0 do	do	do	do	
1807	do 15	28	Male	do	Domestic trouble, -	4 years	The Court	11 do	Remains	do	do	
1808	do 16	25	do	do	Wound on the head, -	4 weeks	do	4 do	Discharged	Recovered	do	
1809	do 16	60	do	Widower	Loss of wife, -	3 months	The Friends	3 do	do	do	do	
1810	do 17	32	do	Married	Anxiety about property, -	2 years	The Overseers	6 do	do	Improved	Hereditary.	Periodical.
1811	do 19	39	Female	Single	Ill health, -	1 week	The Court	10 weeks	do	Recovered	do	
1812	do 20	63	do	Married	Domestic trouble, -	3 months	do	13 do	do	do	do	
1813	do 22	44	Male	do	Periodical, -	9 do	do	6 months	do	do	do	
1814	do 24	25	Female	Married	Chorea St. Viti, -	2 weeks	do	5 do	do	do	do	do
1815	do 24	35	do	Single	Rheumatism, -	2 do	The Overseers	10 do	Remains	Improved	do	
1816	do 26	30	do	Married	Puerperal, -	2 years	The Court	10 do	do	Stationary	do	
1817	Feb'y 2	53	do	do	Ill health, -	4 do	do	5 do	Discharged	Improved	do	
1818	do 5	30	Male	Single	Unknown, -	1 do	do	3 do	Died	Stationary	do	
1819	do 7	19	Female	do	Ill health, -	2 weeks	do	3 do	Discharged	Improved	do	
1820	do 8	18	Male	do	Masturbation, -	2 years	The Overseers	10 do	Remains	Recovered	do	
1821	do 10	30	do	do	Unknown, -	Unknown	The Court	10 do	do	Improved	do	
1822	do 19	19	Female	do	Followed fever, -	3 months	The Overseers	10 do	do	Stationary	do	
1823	do 19	26	Male	Married	Religious, -	1 week	The Court	2 do	Discharged	Recovered	do	do



1824	Feb'y	20	21	Female	Married	Religious,	-	-	5 months	The Friends	2 months	Discharged	Recovered	Hereditary.	Periodical.
1825	do	20	33	Male	Single	Unknown,	-	-	Unknown	The Court	7 do	do	Improved	do	do
1826	do	21	19	do	do	Epilepsy,	-	-	do	do	9 do	Remains	Stationary	do	do
1827	do	22	30	Female	do	Domestic affliction,	-	-	6 months	The Friends	6 days	Discharged	Improved	do	do
1828	do	26	21	Male	do	Fright, -	-	-	Unknown	do	5 months	do	Recovered	do	do
1829	March	5	42	Female	do	Ill health,	-	-	2 months	do	5 weeks	do	do	do	do
1830	do	8	42	do	Married	Religious,	-	-	1 do	The Court	4 months	do	do	do	Periodical.
1831	do	12	33	do	do	Trouble,	-	-	2 weeks	do	7 weeks	do	do	do	do
1832	do	12	16	do	Single	Family trouble,	-	-	3 months	do	2 months	do	do	do	Hereditary.
1833	do	15	50	Male	Married	Pecuniary embarrassm't,	-	-	1 do	do	5 do	do	Improved	do	do
1834	do	18	40	Female	Single	Periodical,	-	-	3 do	do	2 do	Remains	do	do	do
1835	do	18	15	Male	do	Unknown,	-	-	9 do	The Overseers	2 do	Discharged	Recovered	do	Periodical.
1836	do	18	42	do	Married	Religious,	-	-	3 years	The Friends	8 do	Remains	Stationary	do	Hereditary.
1837	do	18	23	do	Single	Unknown,	-	-	9 months	do	5 do	Discharged	Recovered	do	do
1838	do	23	28	Female	Married	Ill health,	-	-	3 do	The Court	3 do	do	Stationary	do	do
1839	do	24	23	Male	Single	Masturbation,	-	-	2 years	The Overseers	7 do	do	Recovered	do	do
1840	do	25	20	do	do	Epilepsy,	-	-	2 do	The Friends	2 do	do	Stationary	do	do
1841	do	25	25	do	do	Unknown,	-	-	5 do	The Court	8 do	Remains	do	do	do
1842	do	26	19	do	do	Loss of father,	-	-	6 months	do	8 do	do	do	do	do
1843	do	28	63	Female	Widow	Ill health,	-	-	5 years	The Friends	8 do	do	Improved	do	do
1844	April	3	26	do	Married	Domestic affliction,	-	-	3 months	The Court	4 do	Discharged	Recovered	do	do
1845	do	6	44	do	Single	Unknown,	-	-	4 years	do	7 do	do	Improved	do	do
1846	do	7	44	Male	Married	Religious,	-	-	1 year	do	8 do	Remains	Stationary	do	do
1847	do	8	26	do	Single	Masturbation,	-	-	1 do	do	8 do	do	Improved	do	do
1848	do	9	24	Female	Married	Ill health,	-	-	6 months	do	4 do	Discharged	Recovered	do	Periodical.
1849	do	11	55	Male	do	Intemperance,	-	-	2 do	do	8 do	Remains	Improved	do	do
1850	do	12	64	do	do	do	-	-	4 years	do	8 do	do	do	do	Hereditary.
1851	do	15	34	Female	Single	Chorea,	-	-	3 months	The Friends	5 do	Discharged	Recovered	do	do
1852	do	15	25	Male	do	Unknown,	-	-	4 do	The Court	7 do	Remains	Stationary	do	do
1853	do	15	45	do	Married	Intemperance,	-	-	2 years	do	7 do	do	do	do	do
1854	do	15	63	do	Single	Unknown,	-	-	Unknown	do	3 do	Died	do	do	Periodical.
1855	do	15	57	do	Married	Trouble,	-	-	10 years	do	7 do	Remains	do	do	do
1856	do	16	21	Female	Single	Unknown,	-	-	3 do	do	4 do	Discharged	Recovered	do	do
1857	do	16	25	Male	do	do	-	-	8 do	do	7 do	Remains	Stationary	do	do
1858	do	17	44	Female	do	Family trouble,	-	-	1 year	The Friends	5 do	Discharged	Recovered	do	do
1859	do	17	45	do	Married	Ill health,	-	-	3 years	The Court	7 do	Remains	Improved	do	do
1860	do	18	63	do	Single	do	-	-	4 months	The Friends	6 do	Discharged	do	do	Periodical.
1861	do	20	35	Male	do	Unknown,	-	-	3 do	The Court	7 do	Remains	Stationary	do	do
1862	do	20	27	do	do	Pecuniary embarrassm't,	-	-	5 years	do	7 do	do	do	do	do
1863	do	21	45	do	Married	Religious,	-	-	4 months	The Friends	4 do	Discharged	Recovered	do	do



TABLE—(Continued.)

No.	Time of admission.	Age when admitted.	Sex.	Married or single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remaining.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
1864	1844.											
1865	April	50	Male	Married	Eruption, -	1 year	The Court	7 months	Remains	Improved	Hereditary.	
1866	do	32	do	Single	Intense study, -	4 months	do	5 do	Discharged	Recovered	Idiotic.	
1867	do	14	Female	do	Followed fever, -	2 do	do	3 do	do	Stationary	Hereditary.	
1868	do	47	Male	Married	Fear of poverty, -	3 do	do	7 weeks	do	Recovered	do	
1869	do	42	do	Widower	Religious, -	2 years	The Friends	4 months	do	Improved		
1870	do	22	Female	Single	Ill health, -	2 do	do	6 do	do	Recovered		
1871	do	22	do	Married	Puerperal, -	6 weeks	do	2 do	do	do		
1872	May	20	do	Single	Ill health, -	5 do	The Court	5 do	do	Improved		
1873	do	7	do	Widow	Trouble, -	36 years	do	6 do	Remains	Stationary		
1874	do	8	Male	Single	Hard study, -	2 do	do	6 do	do	Improved		
1875	do	35	Female	Married	Unknown, -	10 days	do	6 do	do	do	Periodical.	
1876	do	69	Male	Single	do	2 months	The Overseers	6 do	do	do		
1877	do	52	Female	Married	Hard labor, -	5 do	do	3 do	Discharged	Recovered	Hereditary.	
1878	do	40	do	Widow	Unknown, -	1 year	The Court	6 do	Remains	Stationary	do	
1879	do	34	do	Married	Domestic trouble, -	6 months	do	1 month	Died	do		
1880	do	44	do	do	Trouble, -	2 weeks	do	4 days	do	do		
1881	do	33	do	do	Religious, -	2 do	The Overseers	2 months	Discharged	Recovered		
1882	do	30	do	do	Fright, -	2 do	The Friends	2 do	do	do		
1883	do	36	do	do	Ill health, -	1 month	The Court	6 do	do	do	do	
1884	do	33	Male	Single	Intemperance, -	Unknown	do	5 do	do	do		
1885	do	33	do	Married	Unknown, -	6 weeks	The Friends	6 do	Remains	Stationary		
1886	do	33	do	do	Intemperance, -	5 years	The Court	1 month	Discharged	Recovered		
1887	do	60	Female	do	Religious, -	3 weeks	do	3 months	do	do		
1888	do	33	do	Widow	do	7 months	do	3 do	do	do	do	
1889	do	50	do	do	do	2 years	do	3 do	do	do		
1890	June	63	Male	Single	Loss of property, -	4 do	do	3 do	do	do	do	
1891	do	45	Female	Widow	Hard labor, -	6 do	The Friends	6 do	Remains	Stationary		
1892	do	60	do	Married	Unknown, -	10 weeks	do	6 do	do	Improved		
1893	do	33	do	Single	Measles, -	1 year	The Court	6 do	do	Stationary		
1894	do	29	Male	Married	Masturbation, -	20 years	do	5 do	Discharged	Recovered	Periodical.	
	do	30	do	Single	do	Unknown	The Friends	5 do	Remains	Stationary		







TABLE—(Continued.)

No.	Time of admission.	Age when admitted.	Sex.	Married or Single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remains.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
1935	1844. Aug.	26	Female	Single	Periodical, -	10 days	The Court	4 months	Remains	Improved	Periodical.	
1936	do	40	do	Married	Domestic trouble, -	3 weeks	The Friends	4 do	do	do		
1937	do	45	Male	do	Intemperance, -	2 years	The Court	4 do	do	Stationary		
1938	do	38	do	do	Fear of poverty, -	2 weeks	do	4 do	do	do		
1939	do	36	Female	Single	Unknown, -	Unknown	do	4 do	do	do		
1940	do	31	Male	Married	Intemperance, -	2 weeks	do	5 weeks	Discharged	Recovered		
1941	do	30	Female	do	Ill health, -	6 do	do	4 months	Remains	Improved		
1942	do	28	do	do	do	6 do	The Friends	10 weeks	Discharged	Recovered		
1943	do	18	Male	Single	Exposure to cold, -	1 week	do	3 months	Remains	Improved		
1944	do	33	Female	Married	Puerperal, -	4 months	do	3 do	do	do		
1945	do	32	Male	do	Religious, -	3 weeks	The Court	3 do	do	do		
1946	do	42	do	Single	Unknown, -	2 years	do	3 do	do	do		
1947	do	40	do	do	do	4 weeks	do	3 do	do	Stationary	do	
1948	do	53	do	Married	Religious, -	3 months	do	3 do	Discharged	Recovered		
1949	do	38	do	do	do	3 do	do	3 do	Remains	Stationary		
1950	do	43	Female	Single	Ill health, -	4 do	do	6 weeks	Discharged	Recovered		
1951	do	19	do	do	Followed fever, -	1 week	do	3 months	Remains	Improved		
1952	do	30	Male	Married	Unknown, -	2 years	do	3 do	do	do		
1953	do	25	Female	do	Ill health, -	4 months	The Friends	3 do	do	do		
1954	do	39	Male	do	Family trouble	3 do	The Court	3 do	do	Stationary		
1955	do	38	Female	do	Unknown, -	6 years	do	3 do	do	do		
1956	do	35	Male	do	do	4 do	do	3 do	do	Improved		
1957	do	16	do	Single	do	2 months	do	3 do	do	do		
1958	do	36	Female	Married	Ill health, -	4 weeks	do	3 do	do	do		
1959	do	42	Male	Single	Intemperance, -	Unknown	do	6 weeks	Discharged	Recovered		
1960	Sept.	54	Female	Married	Unknown, -	1 week	do	3 months	Remains	Stationary		
1961	do	21	Male	Single	do	1 year	do	3 do	do	Improved	Hereditary.	
1962	do	48	Female	Married	Brain fever, -	10 months	The Friends	3 do	do	do	do	
1963	do	49	do	Widow	Ill health, -	6 weeks	do	3 do	do	do	do	
1964	do	50	do	Married	do	3 months	The Overseers	3 do	do	do	do	
1965	do	48	Male	do	do	2 years	The Friends	3 do	do	Stationary	do	



1966 Sept.	7	50	Male	Married	Religious,	1 week	The Court	7 days	Died	Stationary	do	do
1967 do	9	40	do	do	Trouble,	Unknown	do	3 months	Remains	do	do	do
1968 do	9	33	do	Single	Unknown,	do	do	3 do	do	Improved	do	do
1969 do	9	20	do	do	Masturbation,	1 year	do	3 do	do	do	do	do
1970 do	9	32	do	do	Religious,	1 do	do	3 do	do	Stationary	do	do
1971 do	16	21	do	do	Ill health,	5 weeks	do	10 weeks	Discharged	Recovered	do	do
1972 do	17	58	Female	do	do	1 year	The Overseers	2 months	Remains	Improved	do	do
1973 do	17	25	do	Married	Puerperal,	2 weeks	The Friends	2 do	do	do	do	do
1974 do	21	25	do	Single	Ill health,	2 do	The Court	2 do	Discharged	Recovered	do	do
1975 do	24	35	Male	Married	Exposure,	2 months	do	2 do	Remains	Improved	do	do
1976 do	24	27	Female	do	Epilepsy,	5 years	do	2 do	do	Stationary	do	do
1977 do	25	28	do	do	Jealousy,	2 do	The Friends	2 do	do	do	do	do
1978 do	28	24	do	Single	Ill health,	1 year	do	2 do	do	Improved	do	do
1979 do	28	30	do	do	Unknown,	6 years	The Court	2 do	do	Stationary	do	do
1980 Oct.	1	23	Male	do	Masturbation,	8 years	do	2 do	do	do	do	do
1981 do	2	36	Female	Married	Unknown,	5 do	do	2 do	do	do	do	do
1982 do	9	18	Male	Single	do	18 do	do	2 do	Died	do	do	Periodical.
1983 do	9	42	Female	do	do	3 do	do	6 weeks	Remains	do	do	do
1984 do	11	27	Male	do	do	1 year	do	7 do	do	do	do	do
1985 do	12	46	Female	Married	do	2 years	do	7 do	do	Improved	do	Hereditary.
1986 do	14	20	do	Single	do	3 months	do	7 do	do	do	do	Periodical.
1987 do	14	46	do	do	do	6 weeks	do	7 do	do	do	do	do
1988 do	16	20	Male	do	do	4 years	do	7 do	do	do	do	do
1989 do	16	63	Female	do	do	6 months	The Overseers	7 do	do	do	do	do
1990 do	16	45	Male	do	Ill health,	4 weeks	do	7 do	do	do	do	do
1991 do	19	50	Female	Married	Trouble,	5 months	The Court	6 do	do	do	do	do
1992 do	19	35	do	Widow	Unknown,	Unknown	do	6 do	do	do	do	Hereditary.
1993 do	19	47	Male	Single	do	6 months	do	6 do	do	do	do	do
1994 do	20	22	do	do	Religious,	1 week	The Overseers	5 do	do	do	do	do
1995 do	21	50	Female	Married	do	10 days	The Court	5 do	do	Stationary	do	do
1996 do	23	30	do	Single	Unknown,	1 year	do	5 do	do	do	do	do
1997 do	24	30	do	Married	Puerperal,	3 years	do	5 do	do	do	do	do
1998 do	25	65	do	Single	Religious,	16 do	do	5 do	do	do	do	do
1999 do	30	21	do	do	Ill health,	2 months	do	4 do	do	do	do	do
2000 do	31	38	do	Married	Periodical,	1 week	The Overseers	4 do	do	Improved	do	do
2001 Nov.	12	26	Male	Single	Unknown,	5 years	The Court	3 do	do	Stationary	do	do
2002 do	14	35	Female	Married	Religious,	4 weeks	do	3 do	do	Improved	do	do
2003 do	15	31	do	do	Trouble,	3 months	do	2 do	do	Stationary	do	do
2004 do	16	21	do	do	Followed fever,	5 weeks	do	2 do	do	do	do	Hereditary.
2005 do	27	23	do	Single	Unknown,	10 do	The Friends	2 do	do	Improved	do	do



TABLE—(Continued.)

No.	Time of admission.	Age when admitted.	Sex.	Married or Single.	Supposed Cause.	Duration before admission.	By whom committed.	Time spent in the Hospital.	Discharged or Remains.	In what state.	Hereditary. Suicidal.	Periodical. Homicidal, &c.
2006	1844. Nov.	18	Female	Single	Religious, -	2 months	The Friends	2 weeks	Remains	Improved	Hereditary.	
2007	do	18	do	Widow	Unknown, -	2 years	do	2 do	do	Stationary		
2008	do	19	Male	Married	Perplexity in business, -	1 week	The Court	11 days	do	Improved	Periodical.	
2009	do	20	Female	Widow	Periodical, -	6 weeks	The Friends	10 do	do	Stationary	do	
2010	do	21	Female	Married	Intemperance, -	4 years	do	9 do	do	do		
2011	do	27	Female	Single	Unknown, -	12 do	do	3 do	do	do		
2012	do	27	Male	Married	Trouble, -	1 week	The Court	3 do	do	do		
2013	do	28	Female	do	Religious, -	4 weeks	The Friends	2 do	do	do		

TABLE 1.

*Showing the Committals from each County in the State, the present and previous years.*

			1844.	Previously.	Total.
Barnstable, . . .	Males, . . .		3		
	Females, . . .		2	36	41
Berkshire, . . .	Males, . . .		5		
	Females, . . .		3	54	62
Bristol, . . .	Males, . . .		10		
	Females, . . .		11	103	124
Dukes, . . .	Males, . . .		0		
	Females, . . .		0	6	6
Essex, . . .	Males, . . .		14		
	Females, . . .		15	240	269
Franklin, . . .	Males, . . .		1		
	Females, . . .		0	68	69
Hampden, . . .	Males, . . .		4		
	Females, . . .		4	78	86
Hampshire, . . .	Males, . . .		4		
	Females, . . .		7	102	113
Middlesex, . . .	Males, . . .		19		
	Females, . . .		16	189	224
Nantucket, . . .	Males, . . .		1		
	Females, . . .		1	12	14
Norfolk, . . .	Males, . . .		15		
	Females, . . .		16	173	204
Plymouth, . . .	Males, . . .		2		
	Females, . . .		8	75	85
Suffolk, . . .	Males, . . .		16		
	Females, . . .		8	186	210
Worcester, . . .	Males, . . .		16		
	Females, . . .		35	449	500
Private boarders, . . .			0	6	6
			236	1777	2013



The government of the State in its beneficence has established this Hospital, and assumed the payment of the salaries of its officers, and tenders *its* use, and *their* services for the relief of the insane. It is a noble monument of its public spirit, and regard to the wants of suffering humanity.

The charge for support at the Hospital embraces only the cost of board and the supervision of attendants and other assistants, who are all, in one way or another, devoted to the interests of the patients.

It would appear, from the table, that this benefit was unequally distributed ; some counties having many, others comparatively few inmates in its wards. But the counties receiving most benefit bear the greater proportion of expense, and those most exempt from the malady which renders its establishment desirable, have most cause for thankfulness. It is a blessing when necessary, but the greater blessing not to need, or be obliged to use it.

It is the high honor of this ancient Commonwealth to be the first and foremost in providing for its insane. Its accommodations are more ample and probably not inferior to those of any other community in the world. It is to be hoped that they will be found sufficient for all its demands, and that a long time may elapse before they are fully occupied.

TABLE 2.

*Showing the number of Admissions, and the state of the Hospital, from  
Dec. 1st, 1843, to Nov. 30th, 1844.*

Patients in the Hospital in the course of the year, . . . . .	491		
Males, . . . . .	244		
Females, . . . . .	247—491		
At the commencement of the year, . . . . .	255		
Males, . . . . .	135		
Females, . . . . .	120—255		
Admitted in the course of the year, . . . . .	236		
Males, . . . . .	109		
Females, . . . . .	127—236		
Remain at the end of the year, . . . . .	263		
Males, . . . . .	128		
Females, . . . . .	135—263		
Patients admitted, . . . . .	236	Patients now in the Hospital, . . . . .	263
Males, . . . . .	109	Males, . . . . .	128
Females, . . . . .	127—236	Females, . . . . .	135—263
Cases of duration less than one year, . . . . .	131	Cases of duration less than one year, . . . . .	51
Males, . . . . .	49	Males, . . . . .	19
Females, . . . . .	82—131	Females, . . . . .	32—51
Cases of longer duration than one year, . . . . .	105	Cases of longer duration than one year, . . . . .	212
Males, . . . . .	60	Males, . . . . .	109
Females, . . . . .	45—105	Females, . . . . .	103—212
Cases committed by the Courts, . . . . .	158	Foreigners discharged the last year, . . . . .	12
By the Overseers, . . . . .	22	Males, . . . . .	11
Private boarders, . . . . .	56—236	Females, . . . . .	1—12
Foreigners now in the Hospital, . . . . .	38	Applications not received at the time, . . . . .	107
Males, . . . . .	18	Not received at all, most- ly for want of room, . . . . .	77
Females, . . . . .	20—38		

In the course of the last year *seven* cases of insanity, found by the Commissioners of Lunacy in the Massachusetts Prison, came into the Hospital. Three of these men were sent to the Hospital in the month of April. One had been in confinement nearly seven years, almost



constantly in a solitary room of the prison, without labor, and almost without exercise. He had delusions, supposed himself rich, and gave away, as he declared, large sums of money. He stated to the commissioners that he had \$150,000 a day for services, was worth \$360,000,000, and received "great legacies to pay for highway robberies." He will not labor as he has plenty of servants to do his work.

This man is now in improved health, civil and respectful. He attends religious services every Sabbath, and family prayers frequently in the evening. He is evidently insane, but during the eight months that he has been in the Hospital has had no outbreak of violence, nor any marked periodicity or lucid interval. He appears better, is social in his feelings, unites in games with his associates, and enjoys himself well in his new situation. It can hardly be expected that he will recover.

Another of these unfortunate men was in the Hospital apartment of the prison, recovering from illness, when visited by the Commissioners. He was a colored man, born a slave, and was supposed to have escaped from his master in Baltimore. He had been in solitary confinement four months previous to this illness. His delusion was respecting a "perpetual motion" which he had discovered, and which the world were using to move steam-boats, rail-cars, and all kinds of carriages. He too was rich, and thought himself a prophet. This man was not well when he came to the Hospital, was troubled with asthmatic breathing and some cough. Insanity was clearly marked in this case. He talked much of his perpetual motion. He was fond of playing the violin, in which amusement he was indulged, though he had no knowledge of music; he attended church on the Sabbath when able, and though quite insane, and occasionally considerably excited, was never troublesome. He was attacked with lung fever in July, and died in a few days.

The third person sent to the Hospital at this time, was a foreigner, by trade a glass blower, and by far the most violent and dangerous of the three. He had false hearing, and had attempted to kill one or more of those persons whom he supposed were talking to him or about him. From this false hearing came his delusions. Since he has been under our care, he has had turns of violence and great trouble from this source. When excited, he is disposed to be quarrelsome and suspicious of his attendants. At these times he fills his ears with bread, wax, or



wool, to remove the disagreeable noises which annoy him excessively. He is not always equally excited, but is never a safe man to be at large. His health is bad, owing to internal hemorrhage, which has occurred occasionally for some years, and which tends to increase his irritability and excitement.

On the 9th of September, the other four insane prisoners were brought to the Hospital.

The first on the list attempted homicide. He was not supposed insane when he committed the act. After a time he began to complain of his ears, said there were "worms in them." He gradually went into a dull, stupid state, and became speechless. For some time previous to the meeting of the Commissioners, he assumed nearly the same posture on the floor every day, took his food irregularly, and was never found asleep. Since he came to the Hospital, his appearance has been similar; he sits all day, unless compelled to move, in one position, his countenance is downcast, he is silent, never having uttered a word to any one, he neither turns his head to the right nor left, or moves his lips when spoken to, or urged to speak. At first he took little food, recently he has eaten better and gained some flesh. He has attended meeting a few times, on the Sabbath, and appears precisely as he does in the ward. His health is improving, and there is some ground to hope that he may yet be better, and perhaps ultimately recover. No one who examines the case can doubt of his insanity.

Another of the prisoners is a young man, about twenty years of age. He did not appear insane when committed to the prison in Oct., 1843, but became so soon afterwards. He was incoherent, talkative and noisy for some weeks in succession, and then became dull and silent for a season—was inclined to keep his bed, and, when urged to talk, appeared no more rational than when excited. Sometime before the meeting of the Commission in Sept., he again became excited and continued so till the time of the meeting. When first seen by the Commissioners he talked incessantly, was very profane, and laughed much and loudly. His eyes were red, his pulse frequent, and every thing about him indicated insanity. He was also a victim of self-pollution, probably the cause of his disease.

There was no change in him, after he came to the Hospital, till he took large doses of medicine, since which time he has gradually improved in his appearance and conduct. He is now quiet at night, talks less, is more easily controlled, labors some, has attended meeting on



the Sabbath, and has some indications of improvement which may, perhaps, result in complete recovery.

The next of the four on our list is a colored man, who was committed to prison in June last. He was quite violent at first, but afterwards became more quiet, and told his story of what had occurred to him since his pardon from the prison in 1839. He called himself God, President, King, &c., talked loudly, tore his clothes and bedding, and rubbed his straw to powder. Since he came to the Hospital he has been less violent, he still says he is God, but if any one else wishes to be God, he will give up his claim, there was no God at the prison, so he would be one. His eyes are blood-shot, and his countenance vacant. He now says but little, works some, attends chapel on the Sabbath, and is harmless and inoffensive. When in prison, his first outbreak was in the chapel, during religious service.

The fourth and last of the seven prisoners sent to the Hospital, was convicted of highway robbery. He had been in prison before, and left at the expiration of his sentence. After his re-committal, more than a year before he came to the Hospital, he was well enough to do some labor, but appeared eccentric and strange. He had a sudden outbreak in the shop where he was at work, after which he did no labor. He claimed to be the Savior, said that he had spiritual intercourse with individuals abroad, and could accomplish many things at remote distances. He reads the Bible, talks much about it, and quotes it for all purposes. He has a Sabbath of his own, which is on Tuesday. When at the prison he knit from the yarn of cast off stockings, a whole suit for himself, which he put on before the Commissioners. He has not changed in his character or conduct since he came to the Hospital. He has had one outbreak, and then undertook to defend himself from imaginary insults. He claimed the right to defend himself if he was misused, but finally consented to report his grievances and be non-resistant. He talks rapidly and with great freedom of language, but has recently appeared quite inoffensive; he attends church, and works some, he manifests no disposition to change his residence.

It is to be hoped that much good may result from the benevolent action of the government in this matter of insane prisoners, independent of the relief afforded to these individuals who have been, for a considerable time, secluded in places quite unsuitable for them. The prison itself is no place for the insane in any circumstances. They must be confined in close rooms, for their presence, with other prisoners in the



Hospital, or in the shops, would be subversive of all order and discipline. Whenever confined, they should be the subjects of frequent inspection by the medical officer, and every comfort should be afforded them which the nature of the case demands. If the insanity is real, who can so well direct the proper course of treatment as the physician? If feigned, who can so well detect the counterfeit, and expose the imposition?

If it were made the duty of the physician of the prison to examine all such cases from day to day, or even one day in a week, to discover what physical derangement there is in the system, what manifestations of insanity or its counterfeit, the difficulties now embarrassing the Commissioners would be greatly diminished.

It cannot, generally, be a difficult matter for a medical man to distinguish real insanity, if he devotes himself to the case and investigates the condition of the individual. It is a mistaken notion, quite prevalent in the community, that insanity can be easily simulated. This is far from being true. Few individuals, even the most intelligent in society, know sufficiently what are the distinctive marks of any one form of insanity, to counterfeit its symptoms, even if they are the most common that are exhibited in a Hospital. Can ignorant men, destitute of all knowledge of the subject, counterfeit the most difficult and unfrequent forms of disease? It is the ignorant only who can believe such an absurdity.

If the physician of the prison, after examining such cases, and duly considering them, should report his opinion to the officers as a guide to them in their course of discipline, it would relieve those who do not claim a knowledge of insanity from much embarrassment as to their duty. The neglect of this salutary provision tends directly to induce prisoners who are lazy, and choose not to work, to simulate insanity to avoid labor.

Insane prisoners can be induced to labor in the shops or on the grounds of a Hospital where no tasks are imposed, no exactions required, and where silence is not necessary and cannot be compelled. But very different, indeed, is the condition of a laborer in the shops of a prison. There order must be preserved, silence imposed, and every movement must be in accordance with the system adopted. One noisy, irregular person would destroy all the discipline of such an establishment. The management of the insane at labor is entirely different from that of the convict, and they cannot assimilate. It is to be hoped



that the salutary regulations adopted by the government will be continued in force, and be followed by new ones connected with the inspection of such individuals as are feigning insanity, or are really insane.

There are those who seem to doubt whether a guilty, or a wicked man can be insane. Who is there among mankind that comes more directly under the influence of causes prolific in the production of insanity than the prisoner who has been detected in his crimes, whose schemes of wealth or aggrandizement are frustrated, and who is suffering ignominious punishment as the result of his vicious career?

The Warden of the prison entertained no such views, and his conduct towards these unfortunate men was most unexceptionable. He visited all the cases frequently, examined them with vigilance and care, and formed his opinions from his own observation. In this he evinced great benevolence as well as firmness and sound judgment.

To many it seems strange that there should be so many criminal lunatics in this country, and strong suspicions are entertained that the courts are too lenient in thus extending clemency to those who have committed offences. Sir James Graham recently stated in the British Parliament, in a debate on the report of the English Commissioners of Lunacy, that there were in confinement, in the Kingdom of Great Britain, 240 criminal lunatics, 85 of whom were in the Bethlehem Hospital, 33 in jails, and the remainder in the various asylums in the Kingdom.

The English Metropolitan Commissioners recommend separate establishments for criminal lunatics, to be made stronger and of more ready inspection, where separate confinement may diminish the danger which arises from the ordinary intercourse of our asylums.

My experience would not confirm these views, as the criminal insane are often the most harmless and docile in the Hospital. They require care and watchfulness, to be sure, but they can usually be managed with as much safety as any other class of patients who are equally insane.

There have been, in the Hospital, sixteen persons who have committed homicide, and many more who have made assaults with intent to kill. Among this number are many in whom we place confidence, allowing them to be about the premises without particular suspicion.

There may always be some cases of this character, in large public institutions, which cannot be too closely guarded, and for these there should be a few strong apartments, that the public may feel secure, and that such dangerous persons may not regain their liberty. Such was



the notorious Trask, who escaped from our strong apartments, which, on the first inspection, he declared to be like cobwebs, compared with those he left in Boston. Rogers, too, in his periods of excitement, required a room where he could be safe himself, and out of danger of injuring others.

A few such apartments are quite as much needed for another class who should be made subjects of strict inquiry, and frequent observation by those who are fully acquainted with insanity. I allude to those who are arraigned for crime, who are suspected to be insane, and for whom the plea of insanity is to be made. At present, in cases of this description, courts and juries, no less than medical witnesses, are wholly dependent upon the vague testimony of persons of inexperience, often of loose observation, and not unfrequently so connected with the individual on trial as to make their testimony not wholly safe and reliable. The physicians of jails rarely see such cases, and often feel incompetent to decide where there is any considerable difficulty.

If in connection with our large institutions some such strong rooms could be provided, and the medical officers of the institution be instructed to examine them frequently, and carefully, under all circumstances, and for a considerable period, the results might be more satisfactory and more safely relied upon, than they can be under the present system.

At some time, not far distant, I hope, a suit of rooms for the violent insane of both sexes may be erected, at a suitable distance from our Hospital building, in which a few such apartments may be provided, with others to take the place of our present solitary rooms, which are so near as to annoy the better class of patients, and so constructed as to be neither pleasant, comfortable, or healthful.

The subject of the jurisprudence of insanity is deeply interesting, and is claiming increased attention from year to year from the lawyer, the judge, and the medical man. The practice of our courts, and those of English judicature, is quite in advance of the principles laid down in their books. But the latter will make steady progress till more just views prevail, and criminal law be modified by the enlightened experience of modern science and observation.



TABLE 3.

*Showing the number of Discharges and Deaths, and the condition of those who have left the Hospital, from Dec. 1st, 1843, to Nov. 30th, 1844.*

	No. of each Sex.	Recovered.	Improved.	Incurable & Harmless.	Incurable & Dangerous.	Died.	Total.
Patients discharged, . . . 228							
Males, . . . . .	117	56	19	29	4	9	117
Females, . . . . .	111	68	21	16	0	6	111
	228	124	40	45	4	15	228
Patients discharged whose insanity was of less du- ration than one year, 100							
Males, . . . . .	41	37	3	0	0	1	41
Females, . . . . .	59	56	1	0	0	2	59
	100	93	4	0	0	3	100
Patients discharged whose insanity was of longer duration than one year, 128							
Males, . . . . .	76	19	16	29	4	8	76
Females, . . . . .	52	12	20	16	0	4	52
	128	31	36	45	4	12	128

*Facts relating to discharges.*

Discharged as harmless and incurable, mostly for want of room, in twelve years, - - - - -	216
Sent to the jails as incurable and dangerous, - - - - -	40
Discharged by the Probate Court, - - - - -	35
" " " higher Courts, - - - - -	9
Sent to South Boston, - - - - -	17

It will be seen by the table that, in the course of the past year, forty patients were removed from the Hospital improved, but not recovered, forty-five as incurable and harmless, and four as incurable and dangerous. That in the course of the last year, eighty-nine left the Hospital, most of whom ought to have been retained, and almost as many were denied admission for want of room. Nothing can show more clearly

that the additional accommodations, now in progress, are necessary to supply the wants of the community.

There are already enough patients in the Hospital, waiting for these accommodations to be in readiness, and more than can now be well provided for, to fill one quarter of the additional apartments.

In twelve years nearly three hundred patients have been sent away from the Hospital, who ought to have been retained. A large proportion of these individuals are now living, some in jails, some in cages and dungeons, and many in poorhouses, in a miserable condition, not so much from a disposition to neglect them as from the difficulty of taking care of them in places so illy provided with suitable means.

TABLE 4.

*Showing the number of Admissions and Discharges, and the average number of Patients each month in the year.*

Monthly Average.					Admissions.	Discharges.
December,	-	-	-	262	20	10
January,	-	-	-	261 1-2	19	24
February,	-	-	-	258 2-3	12	14
March,	-	-	-	255 1-2	15	17
April,	-	-	-	260 1-2	27	19
May,	-	-	-	263	18	25
June,	-	-	-	258 1-2	20	21
July,	-	-	-	259 1-6	19	17
August,	-	-	-	265	32	26
September,	-	-	-	265 1-2	20	24
October,	-	-	-	262	21	15
November	-	-	-	261 2-3	13	16
Yearly Average,					236	228



TABLE 5.

*Showing the number of Residents, the average number of Patients, the number at the end of each year, and the Expense of each year, for the twelve years that the Hospital has been in operation.*

The Year.	No. of Residents.	Average No.	No. at the end of the year.	Annual Expense.
1833	153	107	114	\$ 12,272 91
1834	233	117	118	15,840 27
1835	241	120	119	16,576 44
1836	245	127	138	21,395 28
1837	306	163	185	26,027 07
1838	362	211	218	28,739 40
1839	397	223	229	29,474 41
1840	391	229	236	27,844 98
1841	399	233	232	28,847 62
1842	430	238	238	27,546 87
1843	458	244	255	27,914 12
1844	491	261	263	29,278 75

The accommodations of the Hospital will be for about 400 patients, and it has been erected at an expense of about \$150,000, which is not far from \$375 for each patient. I have estimated that the new wings would be erected for about \$300 to an individual, perhaps something less.

The cost of some of the English institutions is given in the report of the Metropolitan Commissioners, recently published by order of the government. The Wakefield Asylum cost £111 for each person; the Gloucester £357. Most of the English institutions cost about £200 for each individual. The Bedford Asylum cost £20,000, and will accommodate 200 patients, which is about \$500 for each individual. The Asylum at Kent cost £64,000, will accommodate 300 patients, which is more than \$1000 each. The Hanwell Asylum, for 1000 patients, cost £196,000, which is nearly \$1000 for each patient.

The English Commissioners, very justly in my opinion, discountenance low prices. They sanction no houses where the charge is less than 8 shillings a week, or about \$2 00 of our currency, and they are better pleased with those which charge 9 or 10 shillings a week, which is from \$2 25 to \$2 50, about the customary charge of the New England public Hospitals.

There is doubtless some danger of getting prices too low, though the

motive with those who strive to reduce them is unquestionably good. If the cost of living should increase, it would be difficult to raise the price, and there is danger, in such circumstances, of cheapening the living to poor-house fare, lest the cost of support should exceed the income. I think it much better to keep up the price to the average charge at the American Hospitals, and increase the comforts and benefits that a liberal price will allow, rather than reduce it to the minimum rate and endanger neglect and too cheap a diet.



TABLE 6.

*Statistics of the Hospital, from Jan. 1833, to Nov. 30th, 1844.*

	1833.	1834.	1835.	1836.	1837.	1838.	1839.	1840.	1841.	1842.	1843.	1844.
Whole No. of Patients admitted, -	153	119	113	125	168	177	179	162	163	198	270	236
Discharged, including deaths and elopements, -	39	115	112	106	121	144	168	155	167	191	203	228
Discharged recov'd,	25	64	52	58	69	76	80	82	82	88	116	124
Discharged impro'd,	7	22	23	17	23	24	29	29	36	25	32	40
Discharged not improved, -	2	20	28	22	20	28	37	29	37	66	33	49
Died, -	4	8	8	8	9	16	22	15	12	12	22	15
Eloped, -	1	1	1	1	0	0	0	0	0	0	0	0
Patients in the Hospital in the course of the year, -	153	233	241	245	306	362	397	391	399	430	458	491
Patients remaining at the end of the year, -	114	118	119	138	185	218	229	236	232	238	255	263
Males admitted, -	96	68	51	66	94	96	80	75	73	107	111	109
Females admitted, -	57	51	62	59	74	81	99	87	90	91	109	127
Males discharged, -	19	58	57	56	65	74	66	59	71	96	92	108
Females discharged, -	15	48	46	41	47	54	30	81	84	83	89	105
Males died, -	3	5	4	6	6	10	14	9	7	3	8	9
Females died, -	1	3	4	2	3	6	8	6	5	9	14	6
Patients sent by Courts, -	109	55	90	117	129	123	123	106	110	157	152	158
Private, -	44	64	23	8	39	54	56	56	53	41	68	78
Recoveries :												
Males, -	13	33	27	32	37	45	32	28	37	44	53	56
Females, -	12	31	25	26	32	31	48	54	45	44	63	68
Average, -	107	117	120	127	163	211	223	229	233	238	244	261

TABLE 7.

*Statistics of the different Seasons.*

	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Admissions—												
In Winter,	27	26	24	23	26	46	39	32	31	50	51	51
In Spring,	72	35	31	36	49	46	38	42	37	48	58	60
In Summer,	23	30	30	42	40	47	59	44	51	40	56	71
In Autumn,	31	28	28	24	53	38	43	44	44	60	55	54
Discharges—												
In Winter,	0	22	21	20	14	18	31	29	35	37	44	48
In Spring,	1	33	30	33	36	37	38	38	33	46	49	60
In Summer,	11	28	31	24	29	44	48	41	37	46	46	65
In Autumn,	23	24	22	21	33	29	29	32	50	50	42	55
Recoveries—												
In Winter,	0	13	13	12	10	15	13	18	20	24	24	31
In Spring,	0	20	11	15	17	23	24	22	10	22	34	33
In Summer,	9	16	16	12	15	18	23	20	22	25	29	23
In Autumn,	16	15	12	19	27	20	20	22	30	19	29	37
Deaths—												
In Winter,	0	3	1	0	1	3	5	6	1	4	5	2
In Spring,	1	2	2	1	2	5	5	6	2	1	3	3
In Summer,	3	3	2	4	1	5	7	1	5	3	6	6
In Autumn,	0	0	3	3	5	3	5	2	4	4	8	4

TABLE 8.

Ages of Patients in the Hospital, December 1st, 1844.				Duration of Insanity with those remaining, December 1st, 1844.		
Under 20, -	-	-	9	Less than 1 year, -	-	51
From 20 to 25,	-	-	23	From 1 to 2 years,	-	14
" 25 to 30,	-	-	28	" 2 to 5 " -	-	70
" 30 to 35,	-	-	37	" 5 to 10 " -	-	45
" 35 to 40,	-	-	39	" 10 to 15 " -	-	28
" 40 to 45,	-	-	24	" 15 to 20 " -	-	21
" 45 to 50,	-	-	34	" 20 to 25 " -	-	7
" 50 to 55,	-	-	26	" 25 to 30 " -	-	7
" 55 to 60,	-	-	10	Over 30 years,	-	7
" 60 to 65,	-	-	16	Unknown, -	-	13
" 65 to 70,	-	-	8			
" 70 to 75,	-	-	6			
" 75 to 80,	-	-	1			
Over 80, -	-	-	2			
			263			263



TABLE 9.  
*Classification of Insanity.*

	Whole No.	No. of each Sex.	Curable.	Total of Curable.
Mania, - - -	999			
Males, - - -		540	350	
Females, - - -		459	323	673
Melancholia, - - -	702			
Males, - - -		310	168	
Females, - - -		392	250	418
Dementia, - - -	225			
Males, - - -		139	4	
Females, - - -		86	4	8
Idiots, - - -	12			
Males, - - -		10		
Females, - - -		2		

The various forms of insanity continue to appear in about the usual proportions. Violent insanity, assuming the form of mania, is the most common of any in this institution, designed principally for those "furiously mad and dangerous to be at large." The homicidal and the suicidal, often of the melancholy class, are of course the most dangerous of all. Our class of demented patients has been numerous; they are generally imbecile, though sometimes impulsive and dangerous. Idiots can hardly ever be violent, and are, of course, rarely committed to this institution. These two classes of unfortunate beings are exciting unusual interest among the philanthropists of modern times.

In 1828, a school for the instruction of idiotic male patients was established in Paris in connection with the Bicetre, and the plan has been extended by M. Leuret and Voisir. A similar school was established at the Salpêtrière for females, in 1831, by M. Falret. At the Lancaster Lunatic Asylum, and at the Hanwell Asylum in England, efforts are now making, on the same benevolent plan, to resuscitate minds impaired by disease, and to develop the mental powers of the congenital idiot to a considerable degree of usefulness. A similar effort has been made in a few of the institutions in this country, in all, it is said,



with unexpected success. I have no doubt that such cases have too often been despaired of when patient continuance in effort might have been followed by favorable results. Such cases are not necessarily hopeless. The brain, after severe disease, may be left in an inactive state when no organic lesion has taken place to fatally impair its functions.

Many cases of palsy are followed by the loss of memory of names of persons, things, and even language, which, though in old age, have been learned anew more or less perfectly, so at last, as to be quite useful again. Some individuals of this description have a sort of double consciousness, the condition of knowledge, alternating after successive attacks of disease. May there not be even greater probability of restoring an intellect prostrated by insanity in early life, where none of the faculties are wholly lost, though all are weakened and debilitated?

I am not informed what process of education has been adopted with these unfortunate persons. The first object undoubtedly is to fix the attention and excite interest. If the same means should be adopted which the patient mother uses to develop the mental powers of her infant, with the same sweetness of temper, patient trial and persevering effort, I have no doubt much might be accomplished. If attention can be excited, I have but little doubt that the object can be effected. It may require tenfold more perseverance and patience than it does to educate an active child, but what is this to the blank, the utter darkness in which the intellect and moral sensibilities of the idiot are enveloped, if by these means it can be removed. Could a mother be persuaded that her idiot child could be taught to know and understand, even if imperfectly, its powers, capacity and destiny, if she could, by a life of effort, teach it to read and understand the great moral truths without which its mind must be a blank, how willingly would she devote herself, day and night, watchfully and prayerfully, to give it such instruction as would increase its usefulness and add to its enjoyment.

### INFANTILE INSANITY.

There is another class of unfortunate individuals, far more numerous than I had formerly supposed, and much more interesting than idiots,—I refer to *INSANE CHILDREN*.

Since I have been connected with this Hospital, I have been consulted in a number of cases of this description. These little patients have intelligent faces, well formed bodies, good developments of the head,



and active minds. Their movements are free, easy and graceful, many of them are sprightly, even handsome; they are generally restless, irritable and extremely mischievous, and are rarely able to speak. In some cases, as soon as there is any mental development, the peculiar characteristics begin to appear, without any known cause. In other cases, epileptic fits have preceded these peculiarities. In one case the use of instruments in labor was supposed to be the cause; epileptic convulsions probably sometimes arise from difficult parturition.

No person familiar with these cases would be likely to mistake them for idiots; they look differently, walk differently, and have different developments of body and mind.

Some of these children have been benefitted by medical treatment. One, at the present time under my care for epilepsy, seems to be improving favorably. My attention has recently been particularly directed to this subject as I have been, within a few days, consulted in three different cases, of which the epileptic child, above named, was one. I have strong hope that some of them may be cured, and then instructed. Like other insane persons, there is difficulty in fixing the attention, they move with great rapidity from one thing to another, and are impatient of restraint.

In some such persons particular faculties seem much more active than others. One lad, in whose case I was consulted, was not able to articulate, and of course had never learned to read, but was observing of many things, particularly of mechanical operations, drawing, &c. He has left many traces of his skill on the buildings and fences of his former residence, which are yet to be seen. He has now arrived at manhood, but I have no knowledge of his present condition or of his progress in improvement for the last few years. When a lad, he was extremely mischievous, but sprightly and interesting.

Within a few days I have seen a very interesting case of this description, a girl twelve years old, who has a well formed head, an intelligent and handsome face, a bright black eye, and easy and graceful manners. She is respectful and obedient in her conduct, gentle and affectionate in her temper and disposition, and usually quiet and unobtrusive, but is easily excited, impatient when urged to do any thing disagreeable to her, and if opposed utters a scream, but cannot articulate. She constantly hurries from one thing to another, and, like the insane, wants a safety valve to let off her excitement. She is excessively fond of music, would listen with apparent delight to the tones of a piano, seem-



ed to have an irresistible desire to perform herself, and would strike the keys with eagerness and great satisfaction. In her visit to me she would seize the bellows which hung in the room, and blow them with great effort and apparent delight. She is perpetually active, but is far less mischievous than formerly. She has very little power of attention, and has, as yet, never been taught. I have referred the case to my friend, Dr. Howe, whose great success in a case apparently far more forbidding, is universally known, and I am happy to say he is interested in it, and I have no doubt will find his active benevolence excited when he shall see her.

A child two years old was lately brought to me at the request of the family physician, who had consulted me respecting it. It is unable to sit, to use its limbs, or talk, its face is intelligent, by no means idiotic. It has powers of mimicry unequalled by any child of its age I have ever met with. Having understood that it would imitate its father in whatever motions he made, I tried some experiments with it, and was astonished and amused to find it copy my movements so exactly, and that too, with the most roguish expression conceivable, apparently much delighted.

I have now the case formerly alluded to under my care for epilepsy, which, for some months, has been severe and of frequent recurrence. This child has an intelligent face, and a good developement of the head, except that it is small. Its form is graceful, and its movements easy and natural. Since it commenced the use of remedies, it has been more quiet and tranquil, less mischievous, sleeps better, has fewer fits, and they are less severe. If the epilepsy can be cured in this case, and I think it may be, I shall have great confidence that, under the care of its excellent mother, it may be taught to articulate, and finally be educated. Indeed since I have seen this interesting child some effort has been made to teach it to talk, and with some little success.

What has struck me as particularly worthy of remark in all these cases is that while some of the faculties of the mind are active and many of them capable of improvement, others are torpid or perverted, bearing, in this particular, much resemblance to certain cases of insanity.

I have been consulted quite recently in a case of insanity which commenced in infancy, and has continued in some degree to this time, now twenty years.

When an infant, this young man had epileptic fits, these did not con-



tinue long, and the child was apparently healthy, sprightly, and intelligent, till eight years of age or upward, and learnt as well as other children. He then became affected with *false vision*, *saw spiders*, and *other vermin*, crawling over him and all about him, and particularly in his food, so that it was with difficulty that he could be prevailed on to eat. This delusion continued for some time. At that time, now ten or twelve years, I was consulted in the case, and prescribed some remedies. The delusion left him after a while, and he has since been in most respects better, is able to work, but not to learn much, although his mind seems not to be particularly inactive. He is talkative and inquisitive in an unusual degree, asks childish questions, but is inattentive to the answers, and not profited by the information which he obtains. He is able to read and write some, but has not been able to acquire much knowledge. The present winter, he has attempted to acquire some additional learning; commenced going to school and gave his attention to arithmetic, he made but little progress, and soon began to complain of his head, and confusion of thought, finally ceased to speak, because he says he could not speak right. For five or six weeks he has been almost constantly mute, speaking only occasionally. Since that time he has twice run away from his home, and wandered he knew not where, was lost and confused in his mind.

When he returned home the first time, he was greatly rejoiced to see his friends, and to get back again. When found the second time, he was brought to me, to be placed under my care, his vision is not now disturbed, he does not talk because he is not satisfied with what he says, and he is tired of life. A few days since he purchased a pistol to take his own life, but it was taken from him before he made any attempts. He is a stout, hale, full grown young man, his head is of good size and well formed, his motions easy and graceful, his speech natural. He eats rather sparingly, is anxious to get well, and willing to adopt any means recommended for his cure.

The subject of educating demented persons is new, it is at present exciting much attention, and the results are looked for with deep interest. The brain, in such cases may not be affected with organic changes, but only be in an extremely torpid or inactive state. Some such cases, after a long torpor in which all hope of recovery has been lost, have spontaneously come out of apparently the most forlorn condition, and been restored to health and mental soundness. So the idiot and congenital insane may have a brain capable of greater or less improvement, if persevering efforts are made to excite it to activity.



If *one* old case of insanity in *ten* can be restored to soundness of mind by the appliances of insane hospitals, should not all of this class have the benefits of such a trial? In a large proportion of these cases the physical health can be improved, perverted habits can be changed, and the mind be made to enjoy, in some degree, what it has been deprived of under the influence of long continued and neglected disease. So if *one* idiotic or demented person can have his powers of mind rendered active by effort, and some degree of knowledge imparted to him by which his enjoyment and usefulness can be increased, even if *ten* fail of improvement, it will be worth the effort in all. But the case is more favorable than this supposition allows. I have no doubt that nearly all can be improved physically and mentally, and that the experiment will be productive of much good. It is certainly worthy of the consideration of the Christian and the philanthropist.

TABLE 10.

*Showing the Causes of Insanity and circumstances connected with causes and predisposition to Insanity.*

Intemperance, - - -	260	Jealousy, - - -	6
Ill health, - - -	318	Fright, - - -	13
Masturbation, - - -	139	Palsy, - - -	16
Domestic Afflictions, - - -	203	Hereditary, or having insane	
Religious, - - -	173	ancestors or kindred, - - -	525
Property, - - -	107	Periodical, - - -	381
Disappointed Affection, - - -	63	Homicidal, - - -	22
Disappointed Ambition, - - -	33	Have committed Homicide, - - -	16
Epilepsy, - - -	49	Suicidal, - - -	213
Puerperal, - - -	56	Have committed Suicide, - - -	10
Wounds of the Head, - - -	23	Arising from physical causes, - - -	807
Abuse of Snuff and Tobacco, - - -	9	Arising from moral causes, - - -	604

Many not classed.

The number of cases of insanity from intemperance is less than formerly, and has sensibly diminished for three or four years. There have been two cases of delirium tremens in the Hospital the last year, both of which recovered favorably: this is probably more than the average for the last five years. It is reasonable to hope that the many influences now in successful progress, to remove this great scourge from our land, are already felt in the diminution of insanity from this cause.

The secret vice, a cause nearly allied to intemperance, has also



fewer victims than formerly, which we may hope is caused by the information that has been diffused on the subject, and the warnings that have reached the young through the various channels of intelligence that have been opened on this hitherto obscene subject.

The number of cases from religious causes, continues to be large. The last year has been as prolific of excitement on the subject as any of the past years. Millerism has had as many victims as in any former year, and though its prophets have so frequently proved false, the delusion continues to agitate the community to a most remarkable extent. The repeated failure of the calculations on which this final consummation is made to depend, would be sufficient, it would seem, to satisfy the honest, but misguided votary of the ignorance of his false guides of the true basis of their estimate, even if he still retains confidence in their integrity and good intentions. The delusion is one greatly calculated to disturb the excitable, and it is not surprising that many have become insane under its influence.

By the table it will appear that a large number of the insane have insane kindred nearly allied to them. My opinion, often expressed in former reports, respecting this predisposition to insanity, remains unchanged. It should never be recorded as a cause, but only as one of the influences connected with the condition of the individual, which increases his liability to an attack of insanity. It always requires another, and often more than one cause, to induce insanity even where this predisposition exists ever so strongly. This constitutional tendency may be increased, and perhaps be developed by causes to which the system is subjected. Ancestors of a highly nervous temperament may have descendants that are insane, and the insane may have offspring of highly nervous temperaments who are never insane. These changes are constantly taking place in families, the results of intermarriage of individuals of different temperaments, as well as from a multitude of other causes. A predisposition of this character frequently ceases to operate on one or two generations and then subsequently appears, often excited by influences not understood, but which might be discovered by diligent inquiry. This is a subject of vast interest to society, and may at some future time be so carefully studied, and so well understood, as to make a marked difference in the predisposition of families to dangerous and fatal disease.

From careful study of the laws of life, we may derive much benefit in the early training of individuals who, at its very outset, exhibit ten-



dencies to the development of predisposition to disease which, when once established, it may be difficult to influence. Here should be founded the very basis of education, that from well formed bodies, and brains well developed, intellectual and moral powers may emanate such as will prove a safeguard from disease, and particularly from insanity.

The table shows a large number of periodical cases. This is an interesting form of insanity, and should be carefully studied by the jurist no less than the physician, for in connection with it comes the important inquiry, what is a lucid interval, and how far are the rights to be restored to an individual who has been insane, and how far responsibility rests upon such a person when his excitement has left him. In such cases there is generally a period of gloom and depression of spirits following high excitement, during which every thing appears as sombre and uninteresting as it does beautiful and cheering in the period of excitement. In both these conditions there is a false estimate of things by which the mind is swayed and the feelings estranged. Though the conversation may not exhibit marked inconsistency or delusion during the season of depression, yet the influence of unnatural feelings is manifested in all the conduct, in the transactions of business, and in social intercourse. If a person has an annual period of excitement, even if it be of short duration, followed by marked depression, of longer or shorter continuance, the integrity of his mind should be suspected at all times, especially if he deviates in his conduct from the common exhibition of character, either in his mental or moral relations. Such a man should be estimated by comparing him now with his best condition of mind when not suspected of insanity, or any deviation from a sound and healthy state. If the lucid interval be of short duration, and the paroxysms of insanity near two, three, or four times a year, followed by longer or shorter periods of depression, it will never be safe to consider such an individual of sound mind. In all transactions of business, it should, in such cases, devolve on the opposite contracting party to show, in case of any subsequent dispute, that the man possessed a rational mind, uninfluenced by any traces of former disease.

If the lucid interval be of longer duration so that the paroxysms of insanity recur once in two or more years, and the healthy and rational appearance and conduct of the man be fully restored, he should, unhesitatingly, be considered of sound mind, and his civil rights and legal responsibilities should be restored to him.



Short intervals of apparent reason, with an insane man, should always be distrusted, as they can never be relied upon, though at the time there may be evidence of a clear and collected state of mind. I have known many instances of this kind in insanity and the delirium of fever, where the friends, and even medical gentlemen of high standing, supposed that the individual was conscious of what he was doing, and capable of transacting important business, when, after recovery, not a trace of recollection remained of any thing that occurred during this period.

When a man has for years been subject to periods of insanity, the brain being, for a longer or shorter time under the influence of disease, either of excitement or collapse, it can hardly be supposed that the mind will continue to return to an entirely healthy condition, even if it be able to solve common problems, it may be perplexed by those more difficult. Such a man may be able to perform common labor and transact common business, while in things of greater magnitude he would show indecision quite unnatural to him, and a want of that forecast and sound judgment that had formerly characterized his mind.

TABLE 11.

*Occupation.*

Farmers, - - -	238	Stevedores, - - -	2
Laborers, - - -	157	Broom-makers, - - -	2
Merchants, - - -	78	Copper-smiths, - - -	2
Shoemakers, - - -	77	Watchmen, - - -	2
Seamen, - - -	66	Drovers, - - -	2
Carpenters, - - -	53	Curriers, - - -	2
Manufacturers, - - -	35	Card-makers, - - -	2
Teachers, - - -	28	Glass-blowers, - - -	2
Students, - - -	27	Engineers, - - -	2
Blacksmiths, - - -	20	Tobacconists, - - -	2
Printers, - - -	20	Weavers, - - -	2
Tailors, - - -	13	Soldiers, - - -	2
Machinists, - - -	11	Umbrella-maker, - - -	1
Coopers, - - -	11	Snath-maker, - - -	1
Bricklayers, - - -	10	Gilder, - - -	1
Cabinet-makers, - - -	10	Soap-maker, - - -	1
Clothiers, - - -	8	Sheriff, - - -	1
Clergymen, - - -	8	Constable, - - -	1
Painters, - - -	7	Turner, - - -	1
Lawyers, - - -	6	News-collector, - - -	1
Physicians, - - -	6	Broker, - - -	1
Sail-makers, - - -	6	Hatter, - - -	1
Millers, - - -	5	Gardener, - - -	1
Bakers, - - -	5	Mat-maker, - - -	1
Rope-makers, - - -	5	Stocking-weaver, - - -	1
Jewellers, - - -	5	Bellows-maker, - - -	1
Musicians, - - -	4	Pump-maker, - - -	1
Pedlers, - - -	4	Chair-maker, - - -	1
Paper-makers, - - -	4	Auctioneer, - - -	1
Harness-makers, - - -	4	Miniature-painter, - - -	1
Coachmen, - - -	4	Wheelwright, - - -	1
Innkeepers, - - -	4	Book-binder, - - -	1
Barbers, - - -	4	Carriage-maker, - - -	1
Turners, - - -	3	Females not accustomed to labor, - - -	170
Calico-printers, - - -	3	Females accustomed to sedentary employments, - - -	212
Tanners, - - -	3	Females accustomed to active employments, - - -	355
Comb-makers, - - -	3	Many not classed.	
Butchers, - - -	3		
Stone-cutters, - - -	3		
Book-keepers, - - -	3		



TABLE 12.

*Diseases which have proved fatal.*

Marasmus, - - -	34	Dysenteric Fever, - - -	2
Epilepsy, - - -	15	Bronchitis, - - -	2
Apoplexy and Palsy, - - -	15	Typhus Fever, - - -	3
Consumption, - - -	14	Chronic Dysentery, - - -	3
Suicide, - - -	10	Erysipelas, - - -	3
Disease of the Heart, - - -	10	Old Age, - - -	1
Inflammation of the Brain, -	6	Gastric Fever, - - -	1
Hæmorrhage, - - -	5	Land Scurvy, - - -	1
Cholera Morbus, - - -	4	Congestive Fever, - - -	1
Inflammation of the Bowels, -	4	Concussion of the Brain, -	1
Lung Fever, - - -	4	Disease of the Bladder, -	1
Mortification of the Limbs, -	3		
Dropsy, - - -	3		
Diarrhœa, - - -	3		
Disease of Brain from Intem-		Total, - - -	151
perance, - - -	2		

The number of deaths in the Hospital the past season, has not been great, and the patients have been unusually healthy. In the course of the autumn, typhus fever prevailed extensively in the vicinity, and three attendants and a number of patients were attacked with it. Some of the cases were mild, others severe, three were fatal.

The first death from this cause was a man aged 44, who had been demented for years, and insane since 1820. We discovered little change in him, except that he was thirsty, his tongue was furred, and his eye more heavy than usual. His illness continued but a few days and he died rather suddenly.

The second fatal case was an extremely slender woman, aged 42, who had been insane 23 years. Her attack was sudden and severe, the stomach was much disturbed, and the bowels affected with diarrhœa. She soon had aphthæ and red tongue, her strength was much prostrated, and she appeared extremely sick, but had no symptoms that threatened immediate death. One morning she got up, as usual, and while sitting in her chair, appeared faint, and was placed upon the bed, she became purple all over, the heart struggled violently, and she died almost immediately.

The third fatal case was a man aged 76, who had been insane 36



years, nearly half his life; many years of which he had spent in solitude, in a dark and damp cage under ground. He had been in the Hospital nearly eight years, and was generally healthy. When excited he was extremely violent, when in his lucid interval, he was calm and civil, quite harmless and pleasant. His attack was sudden and severe, marked particularly by severe billious symptoms, excessive vomiting, great thirst, dry and red tongue, and extreme exhaustion.

In all these cases insanity had been of long duration, and they were hopeless of cure. In them all, particularly the first two, we saw repeated, what we have often witnessed, the sudden failure of the powers in an insane patient under severe acute disease.

On the evening of the 19th of May, Abner Rogers, Jr., whose assault and assassination of the lamented warden of the Massachusetts prison, and whose trial and escape from punishment, on the ground of insanity, made him extensively known in this vicinity, threw himself from the window of the great hall, while attending prayers, which produced such a severe concussion as to result in his death in thirty-six hours.

The case of Rogers, as a case of insanity, was very interesting. He had been a bad man, spent his life in courses of crime, and for many years was an inmate of a prison. At his trial it appeared that he had had strange turns, recurring at periods more or less regular, for some years before the homicide. In childhood he had epileptic fits, which showed the tendency to disease of the brain and nervous system. It was also proved that at sundry boarding places he had had turns of excitement, of appearing strange, and of forgetfulness, which usually passed off in a few days and left him in his usual state of health. His temperament was truly nervous, and his imprudence and irregularities had increased the predisposition to excitement and impulse, to which he was constitutionally prone.

Some days before the homicide, he had one of these excitements, was extremely irritable, apprehensive and suspicious; his nights were sleepless, disturbed by threats from imaginary voices which produced a suspicion that the Warden was intending to inflict some severe punishment upon him. In the day time, while in the shop, he was extremely uneasy, passing repeatedly from his seat to the desk of the Overseer, and importuning him in the most imploring manner, to intercede with the Warden and prevent the punishment. Yet no punishment awaited him, he imagined all that so distressed and perplexed him. It can hardly



be doubted that false hearing was at the bottom of all the difficulty in the case.

It was in this condition of mind, harrassed and perplexed by voices threatening with punishment the most cruel and unjust, that the impulse was excited to assault the Warden and give him the fatal thrust. For some days this state of mind continued, but soon yielded as on former and subsequent occasions, to calmness and self-control.

When Rogers came to the Hospital, about the first of February, he had a slight paroxysm of this excitement, in which his pulse was frequent, his tongue furred, his eyes red and excited, his appetite bad, and he was restless and sleepless. After a few days he was better, but on the 30th of March had a return of similar symptoms, with head-ache and vertigo. This also passed by in a few days, and he continued his work regularly till the 14th or 15th of May following, when these symptoms recurred in an aggravated form. He was greatly excited in manner, had head ache, vertigo, furred tongue, loss of sleep, loss of appetite, and bad taste in the mouth, which he attributed to bad food. He told an associate at this time that the food which was offered him was a corpse, he knew by the smell. He was irritable, suspicious, and afraid to take his food, apprehending that it was the intention of those around to poison him. He could not sleep, and dared not, if he could, lest the opportunity should be improved to take his life. During this time his countenance was haggard and anxious, and his eye, under such circumstances, was the most piercing and the most insane, expressing the strongest jealousy working within. I have, for years, been in the habit of contemplating the countenances of insane men and watching the indications of the insane eye, but I have never, in all my experience, seen an eye so indicative of the workings of the mind as was that of this man.

On the evening of the fatal leap, he requested to attend prayers with his associates, and as he had been more calm that day, it was thought safe for him to attend. He had before uniformly conducted with the utmost propriety on such occasions, and was gratified for the privilege of attending; so he now seemed. Towards the close of the service he became greatly excited, appeared agitated and alarmed, and requested to leave the room. He was watched with the greatest anxiety, by the officers present, who discovered his perturbation, and this probably increased his apprehensions of danger. He declared to one near him that the room was full of dead bodies. As quick as thought he stepped upon the seat and made the fatal plunge,—it seemed like magic to those

who were around him—his attendant sprung to seize him, but could not reach him,—not a dozen persons knew what had happened—most of the audience supposed that a gun was fired into the room,—the excitement was tremendous, but soon subsided and all was quiet. The deluded man was found in a state of insensibility from which he did not recover ; he died in thirty-six hours.

The last tragic scene of this man's life tended greatly to settle the public mind respecting his insanity. Before this there had been such a mixture of strange and rational conduct, so much self-possession in the *lucid interval*, and so much of the appearance of passion, jealousy and malevolence in his excitement, that many individuals could not see why he was not wholly a bad man, not insane, but responsible as other men for his conduct. This last scene cannot be explained on any rational view of the case, he acted from impulse only, regardless of consequences.



TABLE 13.

*Showing the comparative Expense of supporting old and recent Cases of Insanity, from which we learn the economy of placing patients in Institutions in the early periods of Disease.*

No. of the Old Cases.	Present Age.	Time Insane.	Estimate expense at \$100 a year before entering the Hospital, and varying from \$120 to \$132 since.	No. of the recent cases discharged.	Present Age.	Time Insane.	Cost of support at \$2 25 per week.
2	70	29 years.	\$3332 00	1649	22	14 weeks.	\$31 50
7	49	18 "	2124 00	1694	60	7 "	15 75
8	61	22 "	2624 00	1695	38	13 "	29 25
12	48	26 "	3018 00	1696	36	18 "	40 50
18	72	34 "	3918 00	1700	40	6 "	13 50
19	60	19 "	2324 00	1702	30	12 "	27 00
21	40	17 "	2113 00	1706	33	18 "	40 50
44	57	26 "	3002 00	1708	22	11 "	24 75
45	61	26 "	2955 00	1709	31	9 "	20 25
102	54	26 "	2955 00	1716	26	16 "	36 00
133	45	14 "	1551 00	1718	34	26 "	58 50
209	40	17 "	2084 00	1719	38	19 "	42 75
223	51	21 "	2484 00	1723	64	31 "	69 75
260	48	17 "	2232 00	1724	42	6 "	13 50
278	50	11 "	1544 00	1728	23	16 "	36 00
319	54	10 "	1367 00	1735	28	17 "	38 25
347	59	15 "	1764 00	1737	24	20 "	45 00
367	41	13 "	1564 00	1739	40	16 "	36 00
400	44	15 "	1764 00	1740	18	16 "	36 00
425	49	14 "	2232 00	1743	36	30 "	67 50
431	37	14 "	1532 00	1747	25	23 "	51 75
435	56	16 "	1832 00	1748	32	30 "	67 50
488	37	18 "	2032 00	1749	35	21 "	47 25
532	70	14 "	1632 00	1750	21	15 "	33 75
452 years.			\$53,979 00				410 weeks. \$922 50
Whole expense of 24 old cases, -				-	-	-	\$53,979 00
Average expense of old cases, -				-	-	-	2,244 95
Whole expense of 24 recent cases, -				-	-	-	922 50
Average expense of recent cases, -				-	-	-	38 44

TABLE 14.

*Showing the duration of Insanity, the ages and civil state of Patients in the Hospital, admitted last year and previous years.*

	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Duration before admission :												
Less than 1 year,	41	56	48	54	72	82	84	75	81	106	129	127
From 1 to 5 years,	27	29	37	37	58	50	63	56	52	58	62	68
“ 5 to 10 “	27	14	15	13	14	16	18	15	12	13	15	12
“ 10 to 20 “	31	6	5	11	14	8	10	10	10	5	7	10
“ 20 to 30 “	12	4	0	2	4	7	1	3	4	5	1	5
“ 30 to 40 “	3	2	1	2	1	1	1	2	0	4	1	3
Unknown,	12	8	7	6	5	13	2	1	4	7	5	11
	153	119	113	125	168	177	179	162	163	198	220	236
Duration with those remaining at the end of each year :												
Less than 1 year,	26	22	21	11	29	28	34	28	32	40	45	51
From 1 to 5 years,	23	25	22	39	51	65	69	75	74	89	74	84
“ 5 to 10 “	20	24	34	35	38	44	44	52	53	38	55	45
“ 10 to 20 “	28	24	29	35	41	41	52	52	45	37	52	49
“ 20 to 30 “	7	5	3	7	11	18	14	13	15	18	19	14
“ 30 to 40 “	2	2	4	2	2	3	4	5	4	6	4	7
Unknown,	8	16	6	9	13	19	12	11	9	10	6	13
	114	118	119	138	185	218	229	236	232	238	255	263
Ages of patients when admitted :												
Under 20 years,	2	12	4	11	13	17	10	10	7	14	15	16
From 20 to 30 years,	34	31	23	29	58	47	47	46	50	55	48	64
“ 30 to 40 “	46	31	36	32	34	51	49	40	45	44	62	65
“ 40 to 50 “	35	31	28	26	31	32	30	34	31	46	39	43
“ 50 to 60 “	14	8	13	14	13	20	21	21	19	24	38	26
“ 60 to 70 “	17	5	6	13	12	8	14	6	9	12	11	17
“ 70 to 80 “	3	0	3	0	7	2	8	5	1	2	5	3
Over 80 years,	2	1	0	0	0	0	0	0	1	1	2	2
	153	119	113	125	168	177	179	162	163	198	220	236
Civil state of patients when admitted :												
Single,	92	71	52	68	94	101	80	75	82	108	92	114
Married,	38	40	46	49	61	65	75	71	63	76	103	102
Widows,	12	4	8	6	11	5	17	12	13	12	17	17
Widowers,	11	4	7	2	2	6	7	4	5	2	8	3
	153	119	113	125	168	177	179	162	163	198	220	236



TABLE 15.

*Showing the comparative Curability of Insanity treated at different periods of Disease.*

	Total of Cases.	Total of each Sex.	Cured or Curable.	Incurable.
Of less duration than 1 year,	962			
Males, - - -	-	448	397	51
Females, - - -	-	514	466	48
From 1 to 2 years, - -	332			
Males, - - -	-	164	90	74
Females, - - -	-	168	103	65
From 2 to 5 years, - -	323			
Males, - - -	-	188	60	128
Females, - - -	-	135	51	84
From 5 to 10 years, -	186			
Males, - - -	-	102	13	89
Females, - - -	-	84	12	72
From 10 to 15 years, -	105			
Males, - - -	-	55	4	51
Females, - - -	-	50	3	47
From 15 to 20 years, -	39			
Males, - - -	-	26	1	25
Females, - - -	-	13	0	13
From 20 to 25 years, -	28			
Males, - - -	-	15	0	15
Females, - - -	-	13	0	13
From 25 to 30 years, -	10			
Males, - - -	-	8	0	8
Females, - - -	-	2	0	2
Over 30 years, - - -	13			
Males, - - -	-	5	0	5
Females, - - -	-	8	0	8

Some unknown.

TABLE 16.

*Showing the comparative Curability of Insanity attacking at different Ages.*

			Total of Cases.	Total of each Sex.	Curable.	Incurable.
Under 20,	-	-	332			
Males,	-	-	-	119	50	69
Females,	-	-	-	114	74	40
From 20 to 25,	-	-	291			
Males,	-	-	-	160	84	76
Females,	-	-	-	131	89	42
From 25 to 30,	-	-	273			
Males,	-	-	-	143	72	71
Females,	-	-	-	130	85	45
From 30 to 35,	-	-	279			
Males,	-	-	-	150	82	68
Females,	-	-	-	129	85	44
From 35 to 40,	-	-	228			
Males,	-	-	-	98	53	45
Females,	-	-	-	130	85	45
From 40 to 45,	-	-	187			
Males,	-	-	-	98	64	34
Females,	-	-	-	89	56	33
From 45 to 50,	-	-	145			
Males,	-	-	-	68	47	21
Females,	-	-	-	77	61	16
From 50 to 55,	-	-	127			
Males,	-	-	-	56	37	19
Females,	-	-	-	71	52	19
From 55 to 60,	-	-	66			
Males,	-	-	-	31	20	11
Females,	-	-	-	35	23	12
From 60 to 65,	-	-	57			
Males,	-	-	-	25	19	6
Females,	-	-	-	32	23	9
From 65 to 70,	-	-	30			
Males,	-	-	-	21	14	7
Females,	-	-	-	9	7	2
From 70 to 75,	-	-	19			
Males,	-	-	-	12	5	7
Females,	-	-	-	7	7	0
Over 75, -	-	-	14			
Males,	-	-	-	6	3	3
Females,	-	-	-	8	2	6



TABLE 17.

*Showing the relation of Cause to Recovery.*

PHYSICAL CAUSES.	Whole Number.	No. of each Sex.	Curable.	Incurable.
Ill health, puerperal, followed fever, measles, wounds of the head, &c. - - -	405			
Males, - - -	-	82	46	36
Females, - - -	-	323	235	88
Intemperance, - - -	258			
Males, - - -	-	231	125	106
Females, - - -	-	27	14	13
Masturbation and its results, debility, weakness, &c. -	142			
Males, - - -	-	128	35	93
Females, - - -	-	14	1	13
Epilepsy, - - -	49			
Males, - - -	-	43	5	38
Females, - - -	-	6	0	6
Palsy, - - -	33			
Males, - - -	-	24	4	20
Females, - - -	-	9	1	8
MORAL CAUSES.				
Religious, including Mor- monism, Millerism, Fanat- icism, &c. - - -	177			
Males, - - -	-	90	63	27
Females, - - -	-	87	61	26
Afflictions, trouble, love, fright, fear of death, fu- ture punishment, poverty, &c. - - -	458			
Males, - - -	-	185	109	76
Females, - - -	-	273	166	107
Cause unknown in many cases.				

TABLE 18.

*Showing the causes of Insanity as affecting persons pursuing different Occupations.*

OCCUPATIONS.	Intemperance.	Ill Health.	Masturbation.	Domestic Affliction.	Religious.	Property.	Disappointed Affection.	Disappointed Ambition.	Epilepsy.	Wounds on the Head.	Jealousy.	Fright.	Total.
Farmers, . . .	54	10	23	19	22	20	3	0	7	1	2	0	161
Shoemakers, . . .	8	5	22	4	8	4	2	0	1	1	0	1	56
Laborers, . . .	55	3	13	4	6	5	0	0	2	0	1	2	91
Seamen, . . .	25	1	5	2	5	6	0	0	0	0	2	0	46
Merchants, . . .	11	2	27	2	4	13	0	0	1	0	0	1	61
Carpenters, . . .	15	5	6	1	5	5	2	0	2	0	0	1	42
Blacksmiths, . . .	4	1	1	0	1	2	2	0	0	0	0	0	11
Students, . . .	0	2	17	2	2	0	0	0	1	0	0	0	24
Clergymen, . . .	0	0	4	0	1	1	1	0	0	0	0	0	7
Lawyers, . . .	2	0	2	1	0	1	0	0	0	0	0	0	6
Physicians, . . .	2	0	0	0	0	1	1	0	0	0	0	0	4
Printers, . . .	0	0	11	1	0	0	1	0	1	0	0	0	14
Manufacturers, . . .	9	0	3	0	4	3	1	1	0	1	0	0	22
Barbers, . . .	0	1	0	0	1	0	0	0	0	0	0	0	2

This table continues to confirm the views expressed in former reports, that intemperance is the cause of insanity with those who pursue, active, rather than sedentary employments, and that those who pursue light and sedentary employments are more frequently the victims of the secret vice.



Of the 160 farmers,  $32\frac{1}{2}$  per cent. became insane by intemperance,  $14\frac{1}{2}$  per cent. by the secret vice,  $13\frac{3}{4}$  per cent. by religious influences, and  $12\frac{1}{2}$  per cent. by trouble respecting property.

Of 91 laborers, 60 per cent. are from intemperance, 14 per cent. from the secret vice,  $6\frac{1}{2}$  per cent. from religious influences, and  $5\frac{1}{2}$  per cent. from anxiety about property.

Of 46 seamen, 54 per cent. of the cases are from intemperance, 11 per cent. from the secret vice, 11 per cent. from religious influences, and 13 per cent. from trouble about property.

Of the 53 who pursue active mechanical trades, carpenters, blacksmiths, &c., 35 per cent. arise from intemperance, 13 from the secret vice, 11 from religious influences, and 13 from anxiety about property.

Of the 155 who pursue light and sedentary employments, including merchants, printers, students, and shoemakers, 12 per cent. arise from intemperance, 50 per cent. from the secret vice, 9 from religious influences, and 11 from anxiety about property.

Of 17 professional men who have been in the Hospital, 4 became insane by intemperance, 6 by the secret vice, 1 from religious influences, and 3 from anxiety about property.

TABLE 19.

*Showing the state of the Moon at the commencement of a paroxysm of excitement in 106 cases of Periodical Insanity, amounting in all to 789 paroxysms. Also the relation of the Moon to the 151 Deaths that have occurred in the Hospital.*

NUMBER OF PAROXYSMS EACH DAY.					NUMBER OF DEATHS EACH DAY.				
Day of the Moon.	Whole No.	Male.	Female.	Day of the Quarter.	Day of the Moon.	Whole No.	Male.	Female.	Day of the Quarter.
1	20	12	8	1	1	1	1	0	1
2	46	24	22	2	2	9	6	3	2
3	28	14	14	3	3	11	5	6	3
4	31	14	17	4	4	5	3	2	4
5	26	12	14	5	5	9	4	5	5
6	31	14	17	6	6	7	5	2	6
7	42	21	21	7	7	8	1	7	7
End of 1st qr.					End of 1st qr.				
8	38	20	18	1	8	6	3	3	1
9	27	16	11	2	9	8	2	6	2
10	18	7	11	3	10	3	3	0	3
11	27	11	16	4	11	3	1	2	4
12	27	16	11	5	12	4	2	2	5
13	26	14	12	6	13	8	6	2	6
14	36	15	21	7	14	5	3	2	7
End of 2d qr.					End of 2d qr.				
15	36	20	16	1	15	4	3	1	1
16	22	11	11	2	16	10	6	4	2
17	32	18	14	3	17	6	3	3	3
18	16	9	7	4	18	0	0	0	4
19	23	15	8	5	19	2	1	1	5
20	33	17	16	6	20	8	5	3	6
21	30	16	14	7	21	7	4	3	7
End of 3d qr.					End of 3d qr.				
22	28	13	15	1	22	2	1	1	1
23	33	12	21	2	23	2	1	1	2
24	34	16	18	3	24	6	2	4	3
25	25	9	16	4	25	7	4	3	4
26	24	12	12	5	26	4	2	2	5
27	13	4	9	6	27	0	0	0	6
28	17	9	8	7	28	6	4	2	7
Paroxysms,	789				Deaths,	151			



We have added to the records of the last year, on the subject of the moon, nine cases of periodical insanity and 61 paroxysms, in all 106 cases and 789 paroxysms. The facts accumulated on this subject have become so numerous that I am unwilling to discontinue the record, though nothing occurs to sustain the theories that have, for so long a time, been prevalent upon the subject.

The 15 deaths that have occurred in the Hospital the last year, arranged according to the theory of Dr. Allen, the champion of lunar influence in modern times, will show at the new and full moon 8 deaths, and at the quadratures 7 deaths, which is a trifle in favor of this theory.

There have now been 151 deaths in the Hospital; 74 of them have been at the time of the new and full moon, and 77 at the quadratures.

The whole number of paroxysms of excitement recorded in the table is 789; of these, 372 occurred at the new and full moon, which, according to Dr. Allen's views, is the period of increased excitement, and 417 at the quadratures, the period of diminished excitement. Thus we see that our observations do not confirm the plausible theory so fully sustained by Dr. Allen's tables.

It is useless to go over the subject more fully. My observations have no reference to any theory, as I have never adopted one. The first period of diurnal excitement, from 4 o'clock in the morning till 9, may have some countenance from facts, as I think at day light, and as light advances in the morning, the violently insane are liable to be excited. The same is true of bright moon-light nights, which I have always attributed to *light* only, and not to the period of *the day*, or the *lunar period*.

Some patients have morning and some evening excitements. I have no data to decide which are most numerous or most aggravated. It is quite as frequently the case that the violent insane are more excited after sleep, as that they are more quiet.

TABLE 20.

*Of Per Cent.*

	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Recovery of cases of less than 1 year, -	82	82	84	89	86	90	91	91	91	88	93
Recoveries of all discharged, - -	54	46	53	57	52	47	53	49	46	59	54
Recoveries of all cases, - - -	20	16	19	25	15	17	22	21	16	29	24

*Per Cent. of cases from the most prominent Causes each year.*

	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Ill health, - -	8	18	21	22	21	28	27	25	21	18	16	15
Religious, - -	9	6	7	7	6	9	5	4	4	9	13	9
The Affections, -	14	12	17	16	16	15	25	17	13	15	9	10
Property, - -	7	11	9	6	6	10	6	5	4	5	7	3
Intemperance, -	25	24	23	15	10	16	8	12	12	8	6	8
Masturbation, -	5	6	7	16	21	6	8	7	6	4	3	2

*Per Cent of deaths of all in the Hospital each year.*

1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
2½	3½	3½	3¼	3½	4½	5½	3¼	3	2¾	4¾	3

Per cent of deaths of the whole number, 151 of 2013, - - - - 7½

Per cent. of deaths of the average number the last year, 15 of 261, - - - 5¾

*Per Cent. of Recoveries compared with the admitted.*

There have been in the Hospital 2013 patients, of whom 916 have recovered, which is - - - - 45½ per cent.

There have been admitted to the Hospital the last year 236 patients, and there have recovered 124, which is - - - - 52 per cent.

There have been admitted 127 cases of duration less than one year, of these 93 have recovered, which is - - - - 73 per cent.



The per cent. of recoveries of recent cases is very large in the American Institutions, which speaks well for the correctness of the moral and medical management. The treatment of the insane in all the American Hospitals is on the same principles and the appliances very nearly alike in each, Some depend upon *medicine* more than others, but when it is prescribed, it is nearly the same in all.

**BLEEDING.** All agree that depletion, by which I would be understood general bleeding and active cathartics, is not favorable in insanity, as it rarely affords more than temporary relief, and frequently produces marked injurious effects. When blood-letting has been employed freely and frequently in active mania, the only form of insanity in which it is commonly used to excess, if the excitement, for a short period, an hour or two, and sometimes a day or two, abates, it is generally renewed with increased violence, and under circumstances far less favorable for the benefit of other remedies. The indications for active depletion are usually the *effect* and not the *cause* of excitement, they grow out of the perpetual activity of the physical and mental powers, and are not the cause of it. By this course of remedies the strength and energy of the system is reduced, the nervous system is rendered more susceptible, and the actual violence of the symptoms is increased. The effect of great loss of blood is often to produce pain in the head, a sense of stricture, as if a fillet were tied around it tightly, ringing in the ears, and noises in the head which lead to false perceptions of sound, and illusions liable to result in permanent insanity. It is said that animals which are bled to death have congestion of blood in the vessels of the head; the last rush of blood seems to be to this citadel of life. It is a fact also that I have noticed for many years, that affections of the heart are produced by excessive loss of blood in any way. An eminent practitioner of medicine once informed me, that when he had bled cases of severe and painful neuralgia, he had repeatedly found palsy of the side affected with the disease on his next visit.

Free general bleeding is only useful in cases of entonic inflammation, such as pneumonia and phrenitis, with symptoms very unlike those attendant on insanity in any form.

**CUPPING AND LEECHING.** The effect of local bleeding is more favorable, and may sometimes procure relief from distressing symptoms and afford an abatement of excitement that may give other remedies a



better opportunity to produce good effects. But even local bleeding can rarely be relied upon to cure insanity. It is usually prescribed to procure present relief rather than with the expectation of permanent benefit. Where there is a redness of the eyes, great head-ache, and much heat and throbbing of the carotid and temporal arteries, it may not be amiss to use local depletion, while at the same time every effort should be made to promote the circulation of blood in the extremities, and the quantity of blood abstracted at one time should not be very great.

In some cases I have seen great excitement followed by a state of apparent dementia, almost immediately on free blood letting. Some time ago, a female, aged about 50, came under my care in the most violent mania. The remedies prescribed for her had but little effect, and it was resolved to bleed her freely. Sixteen or eighteen ounces of blood were taken from her arm, she became dull almost immediately, and remained so for a long time before she gained activity of mind, after which her excitement became as bad as ever and other remedies finally relieved her.

A vigorous, athletic man, aged 55, was subject to the most violent paroxysms of periodical insanity. He had been under my care repeatedly, and remedies had little effect in diminishing his excitement or abridging the length of his paroxysms. One day in the extreme of one of his excitements, he urged me to bleed him, and presented his arm for the purpose, held by the other hand so as to swell the veins to an inordinate size. I had him bled freely, principally to see what would be the effect of copious depletion in such a state of excitement. Within a few hours he seemed like an idiot, but the excitement was not essentially diminished. His mind was entirely *chaotic* for a number of days, the paroxysm was prolonged to an unusual extent, and its violence, on the whole, was not lessened.

Some years ago, a ship-master came under my care, who had been bled about sixteen ounces, from twenty to thirty times in the course of five or six weeks. He looked pale and bloodless, was tremulous and weak, but his excitement was not essentially abated. He afterwards recovered under different treatment, and has had no return of disease.

A patient is now under my care who was bled in the outset of disease, four or five pounds, at as many different times. His body appeared bloodless, and his mind chaotic in the extreme; he has become more quiet, but all our efforts have failed in removing his insanity.



**CATHARTICS.** Drastic purging is often even worse than bleeding. The effect of this remedy as a depletion, is probably less disastrous than blood-letting, but it produces other effects often very injurious. The digestive organs of the insane are peculiarly liable to disturbances. Dyspepsia, vomiting and costiveness or diarrhœa, are often troublesome symptoms with them. Drastic cathartics generally aggravate these symptoms when they exist, and sometimes produce them when they do not. Costiveness is generally easily obviated by mild cathartics, it is far less troublesome than diarrhœa, which is often obstinate, and too frequently a dangerous symptom when attendant on insanity. If the secretions of the liver are unhealthy or deficient, or if other conditions of the digestive organs require a change, the blue pill or small doses of calomel may be indicated. These remedies often produce very favorable impressions and prepare the system for others which may be needed to remove the symptoms of insanity itself.

In short, cathartics, as such, rarely do good in cases of insanity, but alterative remedies and laxatives are often necessary, and in many cases cannot be dispensed with. Tincture of Rhubarb and Senna with aromatics, Aloetics, Colocynth and Guaiacum are valuable remedies of this class.

I often combine compound extract of Colocynth with *Ens veneris* or Martial flowers, in torpid states of the intestinal canal with constipation. My favorite remedy in such cases, is the tincture or powder of Guaiacum. No remedy in my hands has a more favorable effect in those cases of melancholy attended by dyspepsia, costiveness, and gastric distress after taking food, than the aromatic tincture of Guaiacum prescribed so as to insure a laxative effect. It invigorates the stomach, acts favorably upon the bowels, proves diaphoretic, and, when necessary, emenagogue. It may be prescribed in doses of from one drachm three or four times a day, to half an ounce. Milk and sugar are altogether the best medicine in which it can be taken. The powder of Guaiacum is the better form of this remedy, if needed as a simple laxative, it rarely nauseates, and is useful in flatulency, giving tone to the whole alimentary canal, and effectively obviating constipation.

Oil of Croton in combination, given in minute doses, often proves favorable to remove costiveness. It is almost the only active purgative which can be prescribed favorably in small quantities. In combination with tonics, alteratives and narcotics, it can be used without swelling the bulk of the medicine, often in very small doses counteracting the constipating effects of other remedies.



**EMETICS.** Emetics have never been extensively used in my practice with the insane. Many practitioners think well of their effects, and I have occasionally prescribed them to obviate particular symptoms, but have not seen much good from them to relieve the symptoms of insanity. In certain conditions of the stomach, they are indicated in this, as well as other diseases. Ipecacuanha and sulphate of zinc and copper are generally preferable to antimony. Antimony in small doses, combined with narcotics to determine to the surface and obviate their constipating effects, may be prescribed for a short time in the commencement of the disease, but is not useful when it has progressed for some time, especially when tonics and generous diet become necessary. Antimony in small doses often destroys appetite and relaxes the tone of the stomach and bowels, so as to retard the progress of recovery. The patient requiring more tonics to restore strength to the system generally, and to the digestive organs particularly, than if it had not been used. It is not always a safe medicine, and generally does less good than it has credit for, yet I doubt not there are cases in which it may be useful.

**NARCOTICS.** By far the most useful remedies in active mania, after the system is prepared for their use, are narcotics.

It is generally conceded at the present day, that the condition of the brain in mania, is not inflammation, but rather a high state of irritation, increasing its activity and that of the nervous system generally. The symptoms are sometimes equivocal, and are calculated to mislead, but close observation and the effect of remedies conspire to show that the brain is not in a state of inflammation. For this state of the brain narcotics would seem to be the most natural remedies, and experience shows that such is the fact. In many cases, this state of excitement will, after a time, give place to more healthy and natural actions, and the disease will be cured without the use of remedies; but in a majority of cases the symptoms yield more readily and favorably where narcotics are prescribed.

**MORPHINE.** The remedies of this class most extensively useful are the Sulphate of Morphine and other similar preparations. The exact time, circumstances, and cases when these remedies can be applied with the greatest benefit, must depend upon the judgment and experience of the medical adviser. On this, doubtless, depends their greater utility in the hands of some men than of others, though many more cases, suitable for their use, may have fallen under the care of one



man than of others who have management of institutions. Other practitioners have generally but a limited experience with them, as insanity, at the present day, is but little treated by medicine except in the institutions especially devoted to this class of patients.

The Morphine should usually be administered in solution, beginning with greater or less doses, according to the nature of the case, and the urgency of the symptoms. Moderate doses should generally be first tried, and they may be cautiously enlarged till the system is under their influence, and the excitement is controlled. The effects should be carefully watched, and if any unpleasant or unfavorable symptoms occur, the remedy must be changed, modified or combined, so that these effects may be obviated. In a large majority of the cases no such effects will occur. When its effect is favorable, it exercises a controlling influence over the symptoms, and the patient becomes more quiet, rational and natural in every respect. These effects, once gained, can in most cases be maintained till the recovery is complete. Sometimes symptoms occur which require that the remedy be increased, but more generally it can be cautiously diminished, and after a time be withdrawn, and the system suffer no inconvenience, and the insanity proved to be cured. The time that this remedy should be used varies, in different cases, from a few weeks to many months.

In the few cases in which it is necessary to administer narcotics, in large doses to produce the most decided impressions, the tincture of opium is better than the salts, but generally the salts are more safe and agreeable in their effects.

In some cases, the Dover's powder is the best form in which this remedy can be administered, especially in the early periods of disease, when the skin is inclined to increased temperature and unnatural dryness.

For twelve years this remedy has been extensively used in this institution, with the most marked success.

The manner in which the Morphine has been used in this and other Hospitals in this country, continuing it till the symptoms have subsided, then omitting and seeing them return, then again and again removed by the renewal of the medicine, affords unequivocal evidence of its power to subdue maniacal excitements, relieve the delusions of the insane, and restore the brain and nervous system to a sound and healthy state.

Most English writers speak of the extraordinary effects of this remedy in isolated cases, but caution against its general use. But the



practitioners in the English institutions have learned, by experience, to rely upon it with as much confidence as those in this country have for a long time done.

I quote the following from the Report of the British Metropolitan Commissioners.

“Preparations of opium and other sedatives, given in repeated and sufficient doses, are thought by the best practitioners, who conduct the medical treatment in the LARGE ASYLUMS, to be of great efficacy, in subduing excitement and agitation, and, conjoined with the use of baths, cold applications to the head, and the use of antispasmodics and aperients are said to promote the cure of mania in the early and acute stages.

It is rare that any benefit arises from single doses of opiates at night to produce sleep, unless the system is kept under the influence of them the whole time. In the most violent forms of disease, the doses should be repeated once in four or six hours. The medicine failed to gain any permanent credit while it was only prescribed at night, in large doses, for the purpose of procuring sleep.

It is important to know, in this connection, the symptoms which contra indicate the use of this class of remedies. When the skin is hot and dry, the tongue covered with a white fur, or dry, smooth and red, the bowels obstinately constipated, the pupil of the eye greatly contracted, and the vessels of the conjunctiva injected with blood, the symptoms must be changed before the Morphine can be used with safety or advantage. With the dry, red, smooth tongue, which attends comparatively few cases, the use of opiates is generally unfavorable, but the other symptoms, above enumerated, can commonly be removed, or so far obviated, in a few days, as to make them unexceptionable.

I have spoken thus far only of the use of the Morphine in maniacal excitement. In some forms of melancholy, especially where there is great mental anguish, and strong suicidal propensity, its operation is equally beneficial, often procuring relief in a short time, and carrying the patient along most favorably to health. In this form of disease, it is rarely necessary to use the remedy in large doses, but whatever is prescribed should be at regular intervals, from three to six times in the twenty-four hours.

**DATURA STRAMONIUM.** Some practitioners place great reliance on the use of Stramonium in Mania. In some cases its effects are very favorable, in others it not only disappoints our hopes, but sometimes



actually coincides with diseased impressions, and aggravates the symptoms. The late Dr. Todd used it successfully, and his testimony is a host in favor of any medicine. In my hands, in ordinary cases, it has not proved very successful.

In cases of insanity connected with epilepsy, and especially in epilepsy disconnected with insanity, I have seen most excellent effects from this remedy. It is rare that a case of insanity complicated with epilepsy, entirely recovers, but under the use of stramonium the symptoms of both are often greatly diminished in force and frequency. In many cases in which the paroxysms of epilepsy have recurred frequently, they have, for months, been wholly suspended by the use of the tincture of stramonium.

I have now in my care a young woman who had for some years been subject to epileptic paroxysms, three or four times a week for the last two years, she has had turns of violent mania, with the most determined purpose to commit suicide. At each recurrence, she would beat her head against the wall of her room, if otherwise restrained, so forcibly as to inflict severe wounds. She was put upon the use of Stramonium soon after she came to the Hospital; after a considerable time the severity of the paroxysms abated, and the insanity was less violent. It is now more than ten months since she has had an epileptic fit or a severe paroxysm of insanity. Her health has improved in every respect; she is more or less insane at all times, but is not violent. Instead of being one of the most troublesome patients in the house, she is quiet, harmless, and even useful, as she is industrious, and capable of doing much profitable labor. The Stramonium is still used in such doses as slightly to impair the vision.

This remedy rarely makes any favorable impression on epilepsy unless it be used in sufficient doses to dilate the pupils of the eye slightly, and produce some difficulty of vision more or less of the time.

In cases of insanity in which the condition of the brain is similar to that which exists in epilepsy, the Stramonium would doubtless do good, but to be able to distinguish these cases, requires discrimination and experience which few men possess.

The best form of administering the Stramonium is in tincture of the seeds, or tincture of the extract.

**CONIUM MACULATUM.** The extract of Conium, either alone or in combination with mineral tonics, is a valuable remedy, and has proved useful in some forms of insanity. As a means of removing maniacal



excitement it is worthy of little confidence. But for some forms of melancholy, and especially chronic disease of the digestive organs, with melancholy or neuralgia, it often proves very useful. It is a deobstruent narcotic of no inconsiderable power. In cases of melancholy complicated with disease of the stomach and torpor of the liver, attended by uneasiness, restlessness, watchfulness, and nervous pains, it often affords great relief, and is auxiliary in accomplishing a cure. In pure neuralgia, Conium combined with Iron, Quinine, Nitrate of Silver, or the Arsenical solution of Fowler, often proves a very efficient remedy. It may be advantageously used for a long time, in large doses, without danger. It is only in large doses that it is useful in any case, and particularly as a deobstruent. The *minimum* dose is ten grains three times a day, the *maximum* dose, two, three, or four drachms, as frequently repeated. I have rarely found any advantage from doses less than fifteen or twenty grains, repeated three or four times a day, but commonly give from thirty to forty grains as frequently repeated.

With the Carbonate, or Red Oxyd of Iron, it is more frequently prescribed, than in any other way. These two medicines, when combined, qualify each other, and the combination seems to increase the efficacy of both. There is considerable difficulty in procuring a good quality of this extract, it should be made of the expressed juice of the plant, evaporated in a sand bath.

When used in large doses, the extract of Conium produces temporary vertigo, and a *heavy, dull* pain over the eyes, and across the forehead. If this effect is never produced by the medicine, the dose is either too small or the medicine of a bad quality.

Glandular tumors sometimes disappear quite suddenly under the use of this remedy. A lady came under my care with the deepest melancholy, under the false impression that she had a hole in her stomach, and that all the food she took was impacted in the abdominal cavity. She had had for two years or more cessation of the menses, and an uterine tumor as large as a quart bowl. This tumor gave her little trouble and occasioned no anxiety, the other sufferings and alarm occupied all her thoughts, and made her most unhappy. She took the extract of Conium in combination with the Red Oxyd of Iron, in doses of from thirty to forty grains, three times a day, with Sulphate of Morphine, particularly at night. After some months, the patient got better, the delusion vanished, the health was completely restored, and what was quite surprising to all who had any knowledge of the case, the tumor gradually diminished and finally entirely disappeared, and the



healthy functions of the uterus were restored. There has been no return of either disease since, a period of five or six years. The lady now enjoys uninterrupted health.

**CAMPHOR.** This medicine has alternately been in favor with, and lost the confidence of, the medical practitioner, for centuries past, and its merits are now very unequally estimated by men of experience in the treatment of insanity. In the large doses in which it has sometimes been used, it has doubtless produced very considerable effect in allaying irritation and procuring sleep. But it is not frequently used in this way, and when it is, its effects are not as certain or as safe as other medicines now more extensively relied upon. The use of Camphor is now principally confined to a combination with other moderate narcotics, to remove slight irritation of the nervous system, and promote sleep. I have used it in various forms, and in large and small doses, without any favorable results. In dismenorrhœa connected with insanity, or without it, it is often a useful remedy, in doses of from five to ten grains, and frequently relieves from extreme suffering. The tincture is used externally to the head with temporary relief, and is perhaps more useful than diluted alcohol alone, though generally less efficacious than cold water.

Camphor will probably never again receive the encomiums which it has occasionally had in times past, as a remedy for insanity, but it has a limited usefulness in some cases, and will not be likely to be wholly discarded.

**HYOSCYAMUS.** The extract of Hyoscyamus has been extensively used as a remedy in maniacal excitements. It is probably at this day more extensively used, in this country, and in Europe, than any other of the narcotics, and until the preparations of Morphine were extensively introduced, it stood at the head of the list of narcotics, in this and similar diseases.

It is a useful medicine in some cases of moderate excitement, in disturbances of the nervous system, and sleeplessness. In combination with tonics, alteratives and other narcotics, it is useful to allay irritation and produce a quiet and equable state of the system in many forms of mental disease.

In high maniacal excitement, and the extreme suffering of some cases of melancholy, it is only an auxiliary to the more powerful and efficacious remedies that we have before considered. Its virtues have



probably been overrated, but it is worth a trial in many forms of disease that do not require potent remedies. I hardly know of a remedy more likely to induce sleep in simple watchfulness, than a combination of Hyoscyamus, Camphor, and Lupuline, in equal proportions, from two to five grains each for a dose, repeated if necessary. In combination with Nux Vomica and Nitrate of Silver it often proves a valuable remedy.

**NUX VOMICA, BELLADONNA, VERATRINE.** These remedies are useful in some conditions of the nervous system, but, so far as I have known, have not been extensively employed in insanity.

**NUX VOMICA** is useful in palsy, relaxation of the muscular tissues of the stomach, bowels, and bladder, as well as in external muscular weakness. I have used it in cases of melancholy with flatulency and general relaxation of the muscular tone. In my practice it often enters into combination with Nitrate of Silver, in affections of the heart, in epilepsy, neuralgia, and chorea. It is a powerful remedial agent, and may be used in larger doses than is usually prescribed. The first unpleasant symptom arising from its use, is a sense of constriction of the stomach, which is specific, and shows that the medicine is producing some effect.

My own experience of **BELLADONNA** is quite limited. It is very apt to affect the vision considerably before it affects the nervous system generally, and this symptom sometimes coincides with the illusions of disease, or creates visual illusions which are likely to disturb the insane. This disagreeable effect is so often produced by it as to operate unfavorably to its extensive use.

**VERATRINE** is probably not strictly a narcotic, but is a remedy which affects the nervous system in a surprising manner. It will often produce nausea and vomiting before it exhibits any very marked effect as a general remedy. When applied externally in the form of ointment or strong tincture, it relieves neuralgic pains in a surprising manner, usually producing a prickling sensation of the part to which it is applied. When used internally, it has in some cases, produced strangury.

**AMMONIA, ETHER, LYTTA, AROMATICS, &c.** In some low cases of melancholy, and, indeed, in some cases of high excitement, there is coldness of the surface and extremities, a moist skin, paleness or livid-



ity of the skin, particularly of the hands and feet, a weak pulse, and other indications of a languid circulation; in such cases, diffusible stimulants are often indicated. In some cases of recent dementia, in which the patient will stand like a statue, with the face fixed to the floor, moving neither hands, feet or head, nor taking food, nor attending to the calls of nature, without being moved by another; strong stimulants, aromatics, wine and other cordials are indicated, and often produce decidedly good effects. The warm bath, frictions, mustard foot bath, &c., are good auxiliaries in such cases.

The Lytta is also useful for the removal of some local symptoms often connected with insanity. In many cases of unequal circulation of the blood, where the vessels of the brain are too excitable, and those of the extremities too torpid, Lytta, in connection with the use of stimulant baths and the diffusible stimulants, becomes a valuable remedy. Sometimes, even in old cases, it improves the health and gives energy to the mind. In such cases, the brain itself needs stimulation, being torpid and sluggish in its action, all the powers languish for want of vital energy.

**COUNTER IRRITATION.** Blisters, setons and issues, were formerly in great use in insanity. In some cases they doubtless do well, especially in chronic cases, arising from repelled eruptions, and the drying of old ulcers. In recent cases they often produce too much irritation, which, coinciding with disease, often increases excitement. There is often much difficulty in the management of them in severe cases. For the last number of years I have not often prescribed them. One case has been in the Hospital in which the cause is obviously the drying up of ulcers on the legs. The application of stimulant dressings in a few days renewed the discharge, and the insanity disappeared at once. For some years, strict attention has been paid to these ulcers, keeping them always discharging, and the insanity has not recurred.

**TONICS.** There are many cases of insanity benefitted by the use of Tonics. In acute mania, after the first excitement is over, tonics are often indicated, and not unfrequently may be used with propriety very early in the disease. In many such cases, the great excitement exhausts the vital principle rapidly, and the patient is found enfeebled while considerable excitement exists. In such cases, Quinine, Bark, Aromatics, and often wine, and other stimulants, are beneficial, used at the same time with narcotics.



In cases of melancholy, the use of tonics, in some form, is more frequently indicated than in mania. In melancholy the powers of life often flag, the digestive organs suffer from debility, and tonics are the principal reliance for a cure. Iron, Bark, Nitrate of Silver, Sulphate of Zinc, with vegetable bitters and aromatics, are found useful remedies in this form of insanity. The combination of tonics and narcotics is often successful in melancholy. The extract of Conium, with the red oxyd of Iron and some aromatics, is a useful medicine, as is also the Nitrate of Silver with Nux Vomica, and extract of Hyoscyamus, Capsicum, &c. Quinine, Bark, &c., are more generally indicated in the more acute forms of disease, while Iron, Silver, Zinc and the vegetable bitters do better in the chronic forms.

In many cases of insanity connected with chronic disease, the main object is to restore the health, as soon as this is re-established the mind improves, and not unfrequently this improvement is in strict accordance with improved health. In all cases of insanity the health should be made as perfect as possible, but in chronic cases the principal reliance for recovery of the mental malady is on the restoration of good health. There are many cases of chronic insanity benefitted by narcotics, and some are cured which have long been considered hopeless.

I have often seen chronic insanity, which for a long time had been a source of wretchedness, and which had annoyed all who had come within the circle of its acquaintance, relieved by the use of Morphine, and the person afflicted, made pleasant, healthful, useful and agreeable,—changing the whole character while the medicine was in use, and sometimes affecting a cure. But in many cases the symptoms return, to a greater or less extent, when the remedy is withdrawn. Permanent benefit is often gained in such cases by the combined influence of narcotics and tonics. Narcotics relieve the irritation of the system, and tonics restore the strength. In this form of disease, medical men often fail, for want of perseverance with remedies, which, if continued for a long time, frequently affect cures, when for a few months only, they make very little impression.

**BATHS.** The warm and cold baths are remedies of more general application than perhaps any others in institutions for the insane. The warm bath is often useful in acute mania, when the patient is continued in it for some time, and when it is renewed frequently on the occurrence of excitement. It is also beneficial to cases of melancholy and



chronic insanity, in which the functions of the skin are performed in an unhealthy manner, or when the surface is cold and dry.

In warm climates baths of various descriptions are probably more beneficial than they are in cold ones. The skin is there more frequently subject to disease and its functions are more likely to be disturbed.

The warm bath should be generally used in all institutions, with all, or nearly all patients, to promote cleanliness and keep up a healthy condition of the surface. The office of the skin is not so well understood, by the public generally, as it should be. Diseases often arise from neglect of baths, and in few diseases are the functions of this important organ more likely to be disturbed than in the various forms of insanity. The perspiration, in some cases, emits an odor quite peculiar and very offensive, which renders cleanliness and ventilation important auxiliaries in their treatment.

Local bathing, as the application of cold water to the head, and warm water or stimulant baths to the feet, is an important adjuvant in the treatment of insanity. Cold applied to the head and warmth to the feet frequently gives relief where the blood inclines to circulate unequally, so that the head is hot and painful, and the feet and other extremities cold. The Nitro-muriatic bath, the mustard bath and salt water bath are all useful local baths. Frequent ablution with warm water, or a solution of Saleratus and water, is often useful where baths are in any way objectionable. Friction with a brush or coarse towel, wet or dry, has very nearly the same effect, but in a more limited degree.

It may be surprising to some that in such a full view of remedies applicable to the treatment of insanity, a list of medicines very frequently prescribed should be entirely overlooked. Of this list are Castor, Valerian, assafoetida, and some other mere NERVINES, which from time immemorial have had a conspicuous place in the treatment of nervous diseases, of which insanity is one. I have seen very little benefit from their use. They are disagreeable, often offensive to the stomach, and if they have any effect, the same good can be produced by articles less disgusting and of more certain and permanent effect.

#### INSANITY COMPLICATED WITH DISEASES WHICH TEND TO IMPEDE RECOVERY.

**PALSY.** The most insidious form of disease which is found to accompany insanity is a partial palsy, which is often so trifling as wholly



to escape the observation of friends, and yet they discover that something has changed the appearance of the individual affected with it. He is often irritable, forgetful and undecided; has many schemes quite new and usually visionary; his gait is slightly changed, one limb falters a little at first, and more in the progress of disease, till his walk becomes unsteady as if he were slightly intoxicated; his feelings are easily excited; he weeps and scolds alternately, but is most of the time calm, often pleasant and agreeable; little things disturb his equanimity; slight provocations excite his passions. His mind becomes weakened by degrees, and is childish and trifling. Sometimes he appears better, and the hopes of his friends are renewed; they know not what is the matter, but they see a change in his whole character. If he has been provident and saving, he frequently becomes wasteful and extravagant; he is restless, discontented, and desirous of change; delusions and moral perversions follow. He is sent to a hospital for the insane, with the impression that his disease is trifling and will soon be removed. Fatal mistake,—irremediable mischief is begun in the brain, and the case is hopeless before the friends have apprehended danger. It may be protracted and exhibit some symptoms of amendment, but they are all delusive. Epilepsy, apoplexy, or fatal atrophy, will finally relieve the miserable sufferer by a sudden or lingering death. In such cases the friends are apt to be dissatisfied with the hasty and unfavorable opinion of the experienced medical adviser, and the patient is changed from place to place to obtain a more favorable prognosis, and with a hope that somewhere a cure may be found. I have lost and gained such patients in this way, but never give any encouragement; they will never recover.

Insanity sometimes follows a regular attack of palsy, which has the character of Hemiplegia. Though this form of mental disease affords little hope, it is not so certainly fatal as the one just described. The mind is rarely restored to its former vigor and activity after a paralytic attack, but there is more hope that the patient will regain a comfortable state, and that life will be prolonged. Loss of memory, an excitable state of feeling, and particularly a propensity to weep from slight causes, are almost universally characteristic of the mind after an attack of palsy.

**ASTHMA.** A large number of cases of insanity, complicated with asthma, have come under my care. Asthmatics are more frequently insane than their proportion in society would admit, if their disease had



no agency, as a cause, in producing insanity. This complication does not necessarily interfere to prevent the recovery of patients affected with this disease; yet I apprehend it is an impediment in the way of a cure. There is often a marked coincidence between the paroxysms of asthma and the periods of excitement in periodical insanity. It is an interesting subject of enquiry, whether the circulation of black blood to the brain, in asthma, predisposes to the excitement of mental disease. Facts connected with it would be exceedingly interesting and instructive.

**EPILEPSY.** Epilepsy has generally been considered an incurable disease, and has been too often abandoned without an effort for its cure. But epilepsy, when not complicated with palsy, insanity, or incurable injuries of the head, is not always hopeless. There are remedies which make a strong impression upon the disease, and are frequently successful in removing it, when used with efficiency and pursued perseveringly. My experience in this formidable malady has been considerable, and I speak with confidence of the effect of these remedies. Nitrate of Silver, and some of the active preparations of *Datura Stramonium*, are my principal reliance. I have gone into some detail of their effects in another place. My confidence in the efficacy of these remedies is unabated as my experience is enlarged.

Some circumstances connected with this disease increase its danger and interfere with its cure. When complicated with established habits of intemperance it will rarely be cured, and the effect of that pernicious habit on the brain is such that an abandonment of it will not always leave the patient in circumstances to be benefitted by remedies. The practice of self-pollution often induces epilepsy, and, while it is continued, renders the case hopeless. An abandonment of the habit will often place the patient in a favorable situation for recovery. These two evils connected with insanity render the case entirely hopeless.

Epilepsy complicated with insanity, arising from whatever cause, is a most formidable and dreadful disease. The character of the excitement, in such cases, is the most dangerous and unmanageable, and often so completely impulsive that there is no safety in admitting the unhappy victim of disease into any association with other patients. Even when the mind is nearly demented, and the energies of the physical powers are broken down, they suddenly rally to the most desperate effort, and mischief is done when all the powers seemed to be prostrated.



Epileptics, like the hereditary and homicidal insane, have a peculiar constitutional irritability, easily excited, and difficult to be wholly overcome. Errors in diet, irregularities of every kind, exposures and excesses, have all a great tendency to produce a return of disease when it has been essentially relieved by great attention to regimen and the use of appropriate remedies. With all these complications a majority of the cases of epilepsy can be essentially benefitted by regimen and medicine. In old and incurable cases of epilepsy combined with insanity, remedies have not only lessened the number of the paroxysms, but improved the health and diminished the insanity. A number of cases are now under my care which verify the statement; and so many have for years received improvement, that I feel confident that no future adverse experience can invalidate its truth. I cannot say that I expect this class of patients will be frequently cured, but I have hope that a considerable proportion of them will remain permanently improved after a full trial of remedies, and that individuals who are thus affected may be restored to health and soundness of mind.

One good result, of no inconsiderable magnitude, has arisen from the repeated experiments with remedial agents in these complicated cases of insanity with epilepsy, which is, that by them have been discovered the anti-epileptic powers of certain remedies and systems of regimen, thus greatly prolonging the intervals between the fits, and rendering the paroxysms less severe. If this discovery does not cure these complicated cases, it shows that great hopes may be derived from them in cases arising from certain irritations of the system, and perhaps continued, very considerably, by habit.

Some years ago a most unfortunate man, about forty years of age, was brought to this Hospital. He had had epilepsy very badly for many years, had palsy of one arm, had lost one eye, and was, in his paroxysms of insanity, one of the most desperate and dangerous men that I have ever met with. No hope whatever was entertained of any improvement in the case. In the hope of giving some relief to such a forlorn case of suffering and disease, and making him more comfortable to his associates and those who had the care of him, I prescribed for him the Nitrate of Silver and extract of Stramonium. He pursued these remedies six months, and during that time never had a paroxysm of epilepsy. He became docile and pleasant, pursued light labor, and was trustworthy and harmless. The remedies were withdrawn, and the paroxysms of epilepsy recurred, but with less violence and frequency than before. He left our care some years ago. I have no knowledge of his present situation.



There is now in the Hospital a young woman, aged 27, who has been subject to epilepsy for five years, particularly at the menstrual period, during which she usually had from two to six or eight paroxysms. Soon after she came under my care she had a recurrence of the menses, epilepsy and violent insanity. The paroxysms were at least two a day for three or four days. She has taken the Nitrate of Silver and Stramonium liberally since. At the next menstrual period she was quite insane for a number of days, but had no epilepsy. Since that time she has passed another menstrual period without a recurrence of epilepsy or insanity, which has not happened before for a long period. The trial of remedies has not yet been sufficient to insure a recovery, and I have many fears that the case will prove incurable: but the effect of the medicine to suspend the paroxysms of this complicated case of disease is remarkable and encouraging.

There is a form of epilepsy occurring with those who have had partial palsy, and sometimes with those who have had occasional paroxysms of epilepsy, which is terrific in its aspect and generally fatal in its event, and that very suddenly, which is worthy of consideration. The patient has an epileptic fit, which, in fifteen or twenty minutes, is succeeded by another, and these paroxysms occur at nearly the same regular intervals till death succeeds, in from 20 to 36 hours. The patient rarely, if ever, wakes to consciousness, but in the intervals appears perfectly apoplectic—the vessels of the face are tinged with blood, the countenance livid, and the power of swallowing and muscular motion nearly or quite lost.

I have seen a number of such cases die, and for some years after I became familiar with them I considered them hopeless. They frequently occur in institutions for the insane. I have recently adopted a course of treatment which has been successful in many cases. Instead of blisters, sinapisms and other irritants, I place upon the handle of a spoon a scruple or half a drachm of calomel, and prying open the mouth introduce it as far as practicable, then snapping the other end of the spoon throw it as far as possible down the throat. If in four or six hours no effect is produced by it, I repeat half the quantity, and so proceed till free catharsis follows. In a very large proportion of the cases the paroxysms have subsided upon the operation of the medicine, and the patient has returned to his accustomed state of health in a few days. I do not remember to have lost but one case of this description for some years past, and have seen a number recover which, under any other prescription that I have seen used, would have certainly proved fatal.



Since I commenced writing this sheet a case of this description has been brought to my care. The epileptic paroxysms were not severe at first, and were not recognised as such by the attending physician. This patient was bled, in the onset of his disease, sixty ounces without relief, but he became pale and bloodless, the pulse, when reaction took place, having the rapidity and irritation that is found to follow excessive hæmorrhage, the epileptic paroxysms became more distinct and genuine, and occurred once in 15 or 20 minutes. There is a slight degree of consciousness awakened in the interval of his paroxysms, but the patient does not speak, and will probably sink under his disease and the injurious depletion prescribed for him. He is very insane, and it has been difficult to manage or control him. He is now dull, and makes no attempt to move.

Some time since a lady came under my care with puerperal epilepsy. She had had fits once in 15 or 20 minutes for 20 hours, laid apoplectic in the intervals of the paroxysms, and was abandoned by her medical adviser as in a hopeless state. After having over 40 convulsions of this description, I prescribed the calomel as before named, and gave an enema of oil of turpentine and laudanum. The fits left her immediately on the operation of the medicine, but she was wholly blind for a week and quite insane. She gradually recovered and was quite well afterwards.

Very good effects come from this practice in some cases of apoplexy and palsy, where the bowels are constipated and the power of deglutition lost.

I apprehend that in most institutions, and particularly in private practice, there is great want of perseverance in cases of epilepsy. They are considered in the outset as incurable, and remedies which are not followed by immediate improvement of the symptoms are abandoned, and the case is given up as hopeless.

**DISEASES OF THE DIGESTIVE ORGANS.** Dyspepsia and disease of the liver are often connected with insanity, as a cause or concomitant; in either case it is not a favorable circumstance, and is a frequent impediment to recovery. Hypochondriacal melancholy is the most common form of insanity connected with dyspepsia. If the case is not a bad one, restoration of health often removes the insanity. If the disease of the digestive organs is severe, it frequently terminates in fatal marasmus.

There is a condition of the stomach and bowels connected with



insanity that indicates serious disease, and often proves fatal. The tongue is red and dry, vomiting and diarrhœa are easily excited, the whole intestinal canal partakes of the disease, and a chronic diarrhœa often proves fatal. Such cases do not bear opiates well, and all remedies are often unavailing to promote a cure.

A large proportion of the cases reported as arising from ill health have more or less connection with derangements of the digestive functions. Sometimes the liver is affected with torpor, and sometimes is active in producing a morbid secretion, which, by the ancients, was supposed to be a frequent cause of melancholy. For this they prescribed hellebore with great reputed success. Cases of melancholy relieved by this, or kindred remedies, do not seem to be common in modern times.

#### CIRCUMSTANCES FAVORING THE RECOVERY FROM INSANITY.

**EARLY ADMISSION.** It is conceded by all who have anything to do with the insane, that an early application of remedies and regimen proper in their treatment is favorable to the recovery of the recent insane. For this purpose, after it is settled that the disease is formed and established, they should immediately be sent to a hospital designed for their treatment, that they may not only have the proper remedies administered in season, but that improper appliances, from which many patients suffer while with their friends, may be avoided. In many cases of insanity means, both medical and moral, are adopted which are calculated to prolong and aggravate the symptoms before the patient is sent to a hospital. There is much choice in the institution itself, not only in its architectural arrangements, but in its location as to dryness or dampness, as to exposure, prospect, and outward accommodations.

**CLASSIFICATION.** Nothing can be more important in such an institution than suitable classification. It is but recently that due attention has been paid to this important consideration. Formerly a large proportion of the inmates of hospitals for the insane were confined in solitary rooms, chained, or in strait waiscoats,—the quiet and the violent crowded indiscriminately together. In Europe, if any separation was made, it had no reference to the character of the case, but to the rank of the individual to society, and this rule is not wholly abandoned at the present time. In some of the institutions, both in this country and abroad, the basis of classification was the amount paid for board and attendance. This objectionable rule has but recently been aban-



done in some of the most prominent institutions in this country. While in existence it brought together, the violent maniac, the drivelling idiot, and the tranquil monomaniac, the outrageous, profane, and noisy, the convalescent, the timid, and the sensitive. Nothing could be worse than such an association for the curable and those recovering. A better system of classification generally prevails in all the institutions at the present day.

Some writers recommend a strict adherence to the rule of bringing together cases of the same class only. The violent with the violent, the melancholics by themselves. This is a better system than had formerly prevailed, but a more rational and common sense rule is to bring together not only those who will not injure each other, but to classify so that mutual good may be imparted, and so that no one shall associate with those particularly obnoxious to him.

In many of the smaller institutions the limited number of apartments renders perfect classification difficult, while in some of the great ones the apartments are too large and too few. It is desirable to have the wards of such a hospital of moderate size, and to have a considerable number of them.

**DIET.** The diet of the insane should be simple and substantial. In a few cases it may be necessary to prescribe a light diet for a season, but even this is not common. The insane require a considerable quantity of food, and are usually fond of eating. In high maniacal excitement the energies of the system require frequent replenishment in consequence of the exhaustion produced by perpetual activity. They are rarely injured by food, and very frequently are made more quiet and tranquil by a full meal, a proof, if any be needed, that in mania there is no inflammation of the brain or its membranes. Low diet produces irritation and dissatisfaction, which coincides with the symptoms of disease and increases its intensity. It is generally safe to supply the demands of the patient for food. Many convalescents eat very liberally and gain flesh rapidly. It is always a favorable circumstance to find a recent case, that has been much excited, gaining flesh; we predict from this circumstance alone a favorable termination, even if in other respects there is no particular amendment.

Perhaps there has been no greater improvement in the treatment of the insane than in the matter of diet, the old notions of starvation being everywhere discarded, and a good diet substituted.



**WARMTH AND VENTILATION** are of the first importance in an institution for the insane. The apartments should be of equable temperature at all times, free from too great dryness or dampness of the atmosphere and every nauseous effluvia. The residents in the wards should be placed in such a temperature that they neither think of being cold nor disagreeably warm.

There should be a free circulation of pure air through all the wards of the Hospital, that all disagreeable effluvia be immediately removed from the apartments, and the air for respiration be as free from contamination as the external air. These important objects are most favorably gained by the free admission of air from without, warmed in furnaces so as to admit of a large volume, heated to a moderate temperature. As a means of restoration to the insane these are more important than is generally conceived.

**OCCUPATION.** There is now no difference of opinion among those who manage the insane relative to the value of employment. The insane should never be idle. By employment the maniac expends his excitement in a reasonable and proper way, which he would otherwise exhaust in noise, violence, and mischief. The depressed and melancholic will, by employment, be withdrawn from the theme of his gloomy musings to the consideration of other subjects calculated to disengage his mind from the influence of his delusions, and the wretchedness of his condition. While actively engaged, the monomaniac forgets his vagaries, brings into action powers which have been cast in the shade by intense contemplation of isolated subjects, till the mind, by habits long cherished, is absorbed in hallucinations of its own creation. The convalescent, by occupation, strengthens his physical powers, and brings the mind into regular channels of action, till sound and rational views take the place of the ideal creations of a distempered fancy.

All are better for employment: with it the mind is kept active and vigorous; without it, it is constantly becoming more limited in its sphere, till it famishes for want of aliment to sustain it, and it sinks into confirmed and hopeless fatuity. Nothing is so bad for the sane or the insane as inactivity and idleness.

**AMUSEMENTS.** Recreation and amusements are important in the management of the insane. Acting upon the principle that diversion and change has a tendency to remove from the mind false impressions and abstraction, whatever is innocent in the way of relaxation may do good.



Riding, walking, dancing, music, and various active and sedentary games, are all useful to occupy the time and divert the mind. Active games promote health by the exercise which they give and the pleasure they afford. There can be no difference of opinion as to the utility of riding, walking, and other active exercises, for most of the inmates of hospitals for the insane. They are universally adopted in such establishments, and such abundant testimony in their favor must establish the fact of their usefulness.

DANCING may be objected to by some on account of its supposed immoral tendency, by others as being too exciting for many of the insane, and also as bringing together the sexes, which, in some institutions, they studiously endeavor to avoid. Dancing is an exercise of the right kind, and very harmless in a hospital where every movement is in the hands of the officers, where there is no exposure to vicissitudes of heat and cold, and where it is limited to seasonable hours. There may be some institutions, in the vicinity of large cities, where this amusement might be objectionable, most of the inmates being from a small circle in extent; the intimacies and associations formed at dancing parties might not be desirable abroad. In my own experience I have not met with any difficulty of this kind, and the amusement has been more gratifying to a large class of patients, and more beneficial in its results, than any other mere amusement. Besides those who engage in the exercise, a larger number assemble to enjoy the music, and witness the performance with apparently equal delight.

MUSIC is also one of the great sources of gratification in hospitals for the insane. Like dancing, it is beneficial to those who practice it, and to those who listen to it. It often does good by awakening old associations and long accustomed habits of pleasure, as well as by present gratification, most delightful and tranquilizing to the minds and feelings of the melancholy and desponding. Many highly excited maniacal patients listen attentively to plaintive music, and for the time are made calm and quiet by its influence. It is one of the appliances that rarely injures any one, and often does good to many, even of different and nearly opposite character.

PARTIES. Social intercourse is extremely useful to the intelligent and convalescent insane. Whatever brings them withing the sphere of customary influences, and makes a residence in a hospital appear



like a family or social circle, is calculated to promote their recovery. In this Hospital the Matron's parties, held twice a month, where the patients in considerable numbers meet to spend the afternoon socially and profitably, have been both useful and agreeable. At these parties much clothing and bedding for the patients is made, also articles for sale, by which the library is replenished and made valuable.

There is also much visiting from one gallery to another, and to the apartments of the Matron and family, where an agreeable hour is often spent in cheering and comforting the unhappy, and in increasing the quiet and self-control of the more excited, thus leaving a favorable impression calculated to produce contentment and promote recovery. The more nearly the condition of the insane can approximate to that of the world abroad the better. The hospitals for their care and recovery should be as much like private apartments as possible, when not incompatible with security and protection from external influences. A large number of patients, who spend the day in active and useful employments abroad, spend the evening in the social circle, singing, reading, and playing games in the different apartments of the institution, where they act freely in whatever they do conformable to the lenient government every where adopted.

**READING.** A library of well selected books is essential to a hospital for the insane. Reading is pursued as an amusement by some, and as a source of instruction and moral and religious improvement by others. Religious reading is enjoyed by many. All have free access to the Bible, and few, if any, are injured by it. It is a source of great comfort and consolation to many, to be able to resort to this foundation of religious hope in the hour of trial and despondency. A blessing so common is not anywhere fully appreciated, but when the twilight of reason begins to dawn upon the mind that has been enveloped in darkness, and overwhelmed with religious gloom and anxious forebodings, then the promises there contained lighten the pathway, excite confidence, and buoy up the soul till consolation and safety is again felt in the hopes of the Gospel, and in that faith that "works by love and purifies the heart."

Many prefer light reading, tales, periodical publications, newspapers, &c. A great number of these are sent to us by our friends, and many are regularly taken.

The amount received by the sale of articles made by our family, has been nearly one hundred and fifty dollars the past year, all of which is



expended to replenish and sustain the library. We acknowledge with gratitude the receipt of valuable donations from the following sources : From the Rev. J. W. Hawkins, 100 temperance tracts ; from Rev. T. F. Norris, a large number of books, papers and periodicals, of much value and interest, together with the Olive Branch ; from J. S. C. Knowlton, Esq. and J. W. Goodrich, Esq., editors in this town, a liberal supply of papers and periodicals. James M. Barnard, Esq., of Boston, has sent to us rare books and reports from foreign institutions, of uncommon interest and value. He has laid us under great obligations for his continued interest in our welfare. From Judge Thomas, of this town, we received a liberal donation of books, which have afforded much valuable reading ; and from E. S. Thomas, Esq. a copy of his "Reminiscences." From the Hon. Edward Everett, we have received the Report of the Metropolitan Commissioners to the British Parliament, a rare and valuable gift. The Hon. Bezaleel Taft remembers us annually, by a donation to our library, and many other kindnesses which we delight to remember. We also acknowledge the receipt of books and papers from Thomas M. Pratt, Esq. of Northampton ; papers and other valuable reading from Mr. Thompson, periodical agent, Worcester, and from our valued friend Dr. Batchelder, of Utica.

From the Hon. C. Hudson, D. P. King, J. R. Reading, Mr. Parmenter, Mr. Steward, and Dr. Simons, members of Congress, we have received public documents and valuable papers. From Joseph Adshhead, Esq., Manchester, England, we have received interesting foreign papers.

We acknowledge the receipt of the following newspapers from their editors and publishers, to whom, with our thanks, we will make the slight return of a copy of our Annual Report :—The Greenfield Mercury, Boston Recorder, Hampshire Gazette, Olive Branch, Springfield Republican, Springfield Gazette, Old Colony Memorial, Congregational Visitor, Mother's Magazine, Worcester Cataract, Christian Watchman, Social Monitor, Gospel Messenger, Youth's Companion, Christian Witness, Perfectionist, Advocate of Peace, New Bedford Mercury, Fall River Monitor, New York Observer, New Hampshire Patriot, Keene Sentinel.

It would be gratifying to these editors to see with how much avidity the patients from different sections of the State seek for the intelligence from their own neighborhood ; how eagerly they glance over the newspaper they have been accustomed to read at home ; and what pleasant



associations these weekly messengers awaken of home, friends, and by-gone scenes.

Many patients read newspapers when they would read little or nothing else ; and as the assistant physician enters the ward with the daily supply of papers, many a hopeless patient comes eagerly forward to receive them ; and they pass from patient to patient till they are completely worn out, one reading the stories, another the politics, a third the ship news, and others the poetry, agricultural intelligence, etc. each as his taste may dictate.

Reading produces much occupation, diverts the mind for the time by affording subjects for contemplation, and thus tends directly to promote recovery and prevent fatuity when delusions remain.

WRITING is frequently as useful as reading. We are in the habit of indulging those who desire to write letters and other compositions for amusement, as a means of expending excitement. By the compositions of the insane we can often judge more accurately of the state of the mind than by conversation. Many patients write well before they are recovered, and thus deceive their friends, leading them to suppose that they are better than they find them by observation ; and some who appear comfortably cannot write at all ; others commence a letter well and end it with a scribble. When the mind is not confused by writing, it is often a salutary discipline, and helps to promote recovery.

LABOR is by common consent estimated above all other occupations for the insane by the managers of hospitals. All patients who will participate in it are benefitted by it, whether it be the excited, the depressed, the monomaniac, or the demented. By labor, health is improved, excitement is expended, the mind diverted from the delusions of disease, kept bright, and prevented from decay. No individual loses his mind while he is regularly employed, and very few become excited in consequence of occupation.

In cases of mania, with persons accustomed to labor, after the first excitement of disease has subsided, there is a desire for employment, usually in the customary channels. If the man is a farmer he desires to labor on the land ; if a mechanic he prefers the workshop. Many females like active employments, others prefer the more sedentary ; but nearly all wish to do something, and scarcely any improve if unemployed. Some extremely torpid, not to say demented patients wake up most favorably by the influence of labor, and improve considerably, if they do not recover.



There are many individuals in this Hospital who, previous to entering it, had been in close confinement for years. Many of them commenced labor under the most vigilant supervision, but by degrees gained our confidence, and for the last few years have been permitted to go alone to their employments, where they perform much useful labor. Many of these individuals seem to have no more idea of leaving the establishment than children would the family domicile.

Patient trial, persuasion, and uniform kind management, has brought many insane persons to be useful in the various departments of business. No such person becomes demented, or habitually indulges bitter feelings. All feel an interest in improvements and production, and become identified in interest and feeling with the institution.

Convalescents labor for a season, and then frequently withdraw from it, preferring excursions about the town, and various amusements, to hard work. There are many exceptions to this rule with the working classes. They often prefer regular employment till they are sufficiently recovered to return home and pursue their own business.

In connection with every public hospital for the insane, ample provision should be made for agricultural and horticultural employments, and the more common mechanical trades.

**FARM.** The farm connected with this Hospital is less than it should be, as more land could be advantageously cultivated.

*The quantity of the Products of the Farm and Garden is given in the following statement, with the value as estimated by the Steward.*

Hay, 40 tons, at \$13 00 per ton, -	-	-	-	\$520 00
Onions, 130 bushels, at 50 cents,	-	-	-	65 00
Tomatoes, 30 " at 50 "	-	-	-	15 00
Green peas, 40 " at 100 "	-	-	-	40 00
Potatoes, 65 " at 33 "	-	-	-	21 45
Corn, 140 " at 70 "	-	-	-	98 00
Soft corn, 15 " at 35 "	-	-	-	5 25
Beets, 405 " at 37 "	-	-	-	149 85
Ruta Baga, 260 " at 20 "	-	-	-	52 00
Parsnips, 110 " at 37 "	-	-	-	40 70
Carrots, 1385 " at 25 "	-	-	-	346 25
Cabbages, 800 at 5 "	-	-	-	40 00
Broom corn, 459 lbs. at 6½ "	-	-	-	29 83
Broom corn seed, 30 bushels, at 30 "	-	-	-	9 00



Oats and straw, - - - - -	\$20 00
Winter squashes, 8,000 lbs., - - - - -	60 00
Pumpkins, 16 loads, - - - - -	16 00
Corn fodder, - - - - -	15 00
Garden vegetables, - - - - -	100 00
Poultry, 460 lbs., at 10 cents, - - - - -	46 00
Pasturing 12 cows, - - - - -	150 00
Milk, supposed about 36,000 quarts, at 4 cents, - - - - -	1440 00
Pork, 6445 lbs., at 3½ cents, - - - - -	354 47
Beef, 6167 lbs., at 4½ " - - - - -	277 51
Pigs sold, - - - - -	81 44
	<hr/>
	\$3992 75

The stock has been fed from the farm and garden. The stock on hand is 4 horses, 5 oxen, 13 cows, and 40 swine.

The farm consists of about 60 acres of land, a large proportion of which is pasturage. There are from 10 to 20 acres of cultivated land, on which this quantity of produce is raised. From our garden we have this year obtained more than 2500 bushels of roots, besides garden vegetables in great profusion, for use through the summer and autumn. These roots are fed to the stock.

In addition to the labor on the farm and in the garden, the laborers have accomplished much in improvements, sawing and piling wood, taking care of stock, and attending to the order and neatness of the grounds and walks.

One patient last winter sawed and split from 75 to 80 cords of wood, at a stipulated price, which was paid him by the Steward.

**CABINET SHOP.** In the cabinet shop the bedsteads, tables and sinks have been made for the new wings, and a great amount of other labor has been done by patients, under the care of a vigilant and faithful overseer.

**MATTRESS SHOP.** In this shop, also, a great amount of labor has been done. Nearly all our mattresses are made over annually, and many new ones are also made. At present they are making the mattresses for the new wings, which we hope to be able to accomplish by the time they are ready for occupancy.



In the seamstresses' room nearly \$2,000 worth of clothing and bedding have been made up for the establishment. One female has, in the course of the last year, bound 790 pairs of shoes, made 40 pairs of pantaloons and 32 vests, besides mending and much other work. Other individuals have done nearly or quite as much labor, and one hundred or more are daily employed in some useful manner. From six to ten females have been daily employed in the laundry.

**SHOE SHOP.** The following statement of the labor and expenses of the shoe shop is given by the overseer.

Amount of work done for officers, assistants, and customers,	\$537,62
For patients,	540,38
Stock and shoes on hand,	175,00
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	\$1,253,00
Expended in stock and tools,	\$657,60
Stock and shoes on hand at the commencement	
of the year,	155,00
Wages of overseer,	227,00
Board of overseer,	100,00
Binding, fuel, and light,	60,00
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	\$1,199,60
	<hr/>
	\$53,40

No mechanical business is pursued at the Hospital which does not pay for itself, and furnish a moderate balance in favor of the State. This is intended to be small, as the whole establishment is benefitted by low prices of the articles sold rather than by profits cleared.

**RELIGIOUS EXERCISES.** The religious services of the chapel have been conducted, the past year, by our Chaplain, the Rev. George Allen, with his usual fidelity and ability. He has not only officiated twice on each Sabbath, but has attended devotional services each evening in the Johonnot Hall, at which a large proportion of our whole family have usually been present. Reading a portion of Scripture, singing and prayer constitute this exercise.

We feel that the experiment of religious services and instruction at this Hospital has been wholly favorable, and far more extensively useful than was at first anticipated. A larger class have been able to attend



than was then expected, and the individuals whom we at first supposed might be excited and injured by these services, have been found to attend with entire tranquillity and composure.

The influence of religious instruction at daily prayers, and weekly in the Chapel, has given our patients favorable impressions of the character and designs of the Hospital, and has increased their confidence in the good intentions of the officers.

In many instances, religious instruction has left influences far above its moral effects on the management of the insane. It has made permanently good impressions upon the character of individuals, amending the heart, improving the life, awakening a sense of religious obligation, and transforming the habits from levity to sobriety, from dissoluteness to the proprieties of rational life.

Religious instruction is here, as elsewhere, designed to strengthen and encourage us in the way of virtue, to regulate and guide the wayward, to awaken the hopes, and afford comfort to the anxious and desponding, to calm and tranquilize the agitated, to do us all present good and prepare us for an heavenly inheritance.

A large portion of the insane are fully capable of appreciating these influences in all things but such as relate to their particular delusions. They know *right* from *wrong*, *good* from *evil*, and when hurried by passion or impulse into improprieties or mischief, as fully repent and regret the consequences of their errors as other individuals. If this be true, then surely they should come under all the influences that tend to disengage them from error, and guide them in the way of duty. With a motive strongly presented to them, they can control their feelings and govern their conduct. What can more effectually reach the main spring of action in their minds than religious truth, presented in the right manner and with the right spirit?

**CONCLUSION.** The past year has been one of unusual labor, anxiety and care. In addition to the management of 260 patients, on an average, buildings have been erected affording more accommodations for the insane than the original Hospital, and though these have been superintended, while being erected, by an able and competent architect, they have increased the labors and responsibility of the officers. The presence of so many individuals at labor in the immediate vicinity of the insane, increases the excitement and diminishes the discipline which it is desirable to maintain in such an institution. With all these embarrassments, now nearly brought to a close, we have had a prosperous



season, and have great reason for gratitude to the Giver of all good that the year has closed so auspiciously.

I would express my thanks to the Board of Trustees for many indulgencies, during the past year, extended to myself personally, in a season of ill health, and for their kindness to my family, no less than for the care and scrutiny with which they have managed the affairs of the Hospital.

To my assistant, Dr. John R. Lee, and to the Steward and Matron, Mr. and Mrs. Hitchcock, I am indebted for every aid which I could have asked at their hands in the management of the Hospital, both while with them and while abroad in pursuit of health. Nothing was left undone which it was in their power to perform.

From the excellent supervisor, Mrs. Sarah Hayward, and all the overseers and officers of the Hospital, in their various departments, I have received every aid which it has been in their power to contribute, and acknowledge with grateful feelings, their deep sympathy in the hour of sickness, no less than their constant willingness to lessen the burden of my duty, and perform their own with cheerfulness and alacrity.

Commending the Hospital and its great interests to the care of the government, and the protection of Heaven, I respectfully submit this Report.

SAMUEL B. WOODWARD.

STATE LUNATIC HOSPITAL, }  
*Worcester, Mass. Nov. 30, 1844.* }



REGISTER OF THE WEATHER, kept at the State Lunatic Hospital, Worcester, Mass., Lat. 42° 15' 49"—Elevation 483 ft.

1844. JANUARY.		THERMOMETER.			BAROMETER.			WIND.			WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.		
1	Monday	24	38	29	29.36	29.41	29.45	N. W.	N. W.	N. W.	Fair	Fair	Fair	-	
2	Tuesday	23	45	38	29.53	29.51	29.48	do	do	do	do	do	do	-	
3	Wednesday	26	33	33	29.41	29.13	28.98	N. E.	N. E.	N. E.	Snow	Snow	Rain	.75	Halo around the moon. Snow commenced at 6½ A. M.; 4 inches snow. [Barometer, 28.78.
4	Thursday	30	33	31	28.84	28.83	28.96	S. W.	S. W.	S. W.	Cloudy	Fair	Fair	-	
5	Friday	13	14	15	29.16	29.25	29.32	N. W.	N. W.	N. W.	do	do	do	-	
6	Saturday	12	26	24	29.50	29.54	29.58	do	do	do	Fair	do	do	-	
7	Sunday	18	32	33	29.41	29.23	29.13	S. W.	S. W.	S. W.	Cloudy	Snow	Snow	-	
8	Monday	18	21	14	29.28	29.40	29.48	N. W.	N. W.	N. W.	Fair	Fair	Fair	.04	Thermometer 5° below 0 at 5 A. M. Snow commenced at 3½ P. M. 6 inches of snow.
9	Tuesday	below	15	10	29.63	29.58	29.49	do	do	do	do	Cloudy	Snow	-	
10	Wednesday	13	31	28	29.16	29.19	29.23	N. E.	do	do	Cloudy	Fair	Cloudy	.30	
11	Thursday	4	17	13	29.74	29.81	29.81	N. W.	do	do	Fair	do	Fair	-	
12	Friday	0	25	25	29.63	29.48	29.41	S. W.	S. W.	S. W.	do	Cloudy	Cloudy	-	Thermometer 2° below 0 at 6 A. M. Rain commenced last evening.
13	Saturday	40	40	38	28.51	28.53	29.63	S. W.	N. W.	N. W.	Rain	Fair	Fair	.46	
14	Sunday	17	24	22	29.50	29.52	29.56	N. W.	N. W.	do	Fair	do	do	-	
15	Monday	3	36	25	29.68	29.72	29.74	do	do	do	do	do	do	-	
16	Tuesday	21	35	34	29.55	29.33	29.26	N. E.	N. E.	N. E.	Snow	Rain	Rain	-	Snow and rain during the day; 2 inches snow.
17	Wednesday	34	37	46	28.90	28.54	28.35	do	do	S. W.	Rain	do	do	-	
18	Thursday	25	31	29	28.94	29.09	29.15	S. W.	W.	W.	Cloudy	Fair	Fair	-	
19	Friday	17	18	20	29.42	29.51	29.52	N. W.	N. W.	N. W.	Fair	do	do	-	
20	Saturday	below	3	6	29.60	29.67	29.63	do	do	do	do	do	do	-	
21	Sunday	3	12	8	29.60	29.60	29.58	do	do	do	do	do	Cloudy	-	
22	Monday	6	25	18	29.56	29.62	29.69	N. E.	do	do	Snow	do	Fair	-	
23	Tuesday	16	33	38	29.49	29.15	29.06	S. E.	S. W.	S. W.	do	Rain	Rain	-	
24	Wednesday	34	42	39	29.05	29.04	29.03	S. W.	do	do	Fair	Fair	Fair	-	
25	Thursday	15	12	7	29.06	29.02	29.04	N. W.	N. W.	N. W.	Cloudy	do	do	-	
26	Friday	below	3	2	29.14	29.19	29.22	do	do	do	Fair	do	do	-	[low at 12 M. Thermometer 8° below 0 at 6 A. M.; 2° be-
27	Saturday	6	7	4	29.41	29.43	29.43	do	do	do	do	do	do	-	Thermometer 6° below at 6 A. M.
28	Sunday	5	20	12	29.58	29.63	29.61	do	do	do	do	do	do	-	Thermometer 6° below at 6 A. M.
29	Monday	2	4	0	29.48	29.44	29.44	do	do	do	do	do	Cloudy	-	Halo around the moon.
30	Tuesday	7	7	8	29.30	29.25	29.20	do	do	do	Cloudy	Cloudy	Cloudy	-	
31	Wednesday	2	1	2	29.32	29.43	29.45	do	do	N. W.	Fair	Fair	Fair	-	

Range of the Thermometer from 8° below zero to 45° above. Barometer from 28.35 to 29.74. Amount of rain, 3.14 inches. Snow, 13½ inches.



## REGISTER OF THE WEATHER—Continued.

FEBRUARY.		THERMOMETER.			BAROMETER.			WIND.			WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.		
1	Thursday	6	24	22	29.71	29.72	29.67	N. W.	N. W.	N. W.	Fair	Fair	Fair	-	Halo around the moon.
2	Friday	17	24	24	29.58	29.58	29.60	do	N. E.	N. E.	Snow	Rain	Cloudy	.03	Two inches of snow. Rain at 11 A. M.
3	Saturday	22	31	28	29.60	29.60	29.61	N.	do	do	Fair	Cloudy	do	-	
4	Sunday	17	30	26	29.61	29.62	29.61	N. W.	do	N.	do	Fair	Fair	-	
5	Monday	20	27	24	29.53	29.52	29.55	N. E.	do	N. E.	Cloudy	Cloudy	Snow	-	Snow squalls in the morning.
6	Tuesday	23	31	30	29.40	29.30	29.30	do	do	do	Snow	Rain	Cloudy	.35	Four inches of snow.
7	Wednesday	24	41	40	29.28	29.27	29.25	N. W.	N. W.	N. W.	Fair	Fair	Fair	-	
8	Thursday	26	31	26	29.01	28.84	28.86	N. E.	N. E.	do	Cloudy	Snow	do	-	
9	Friday	16	24	16	29.09	29.11	29.14	N. W.	N. W.	W.	Fair	Cloudy	do	-	Thermometer 2° below 0 at 6 A. M.
10	Saturday	0	17	16	29.31	29.31	29.32	W.	do	N. W.	do	Fair	do	-	
11	Sunday	8	26	25	29.56	29.61	29.61	N. W.	do	do	do	do	do	-	Thermometer at 0 at 6 A. M.
12	Monday	2	30	37	29.65	29.75	29.75	do	do	do	do	do	do	-	
13	Tuesday	13	36	32	29.73	29.63	29.54	W.	S. W.	S. W.	do	do	do	-	
14	Wednesday	27	36	30	29.42	29.48	29.55	W.	W.	N. W.	do	do	do	-	Five inches of snow.
15	Thursday	13	34	30	29.64	29.63	29.58	N. W.	S. W.	S. W.	do	Cloudy	Snow	.41	
16	Friday	26	40	34	29.10	29.18	29.19	do	N. W.	N. W.	do	Fair	Fair	-	Snow squalls at 2½ P. M.
17	Saturday	21	32	29	29.22	29.24	29.27	W.	W.	do	do	Cloudy	do	-	
18	Sunday	7	12	13	29.43	29.50	29.54	N. W.	N. W.	W.	do	Fair	do	-	
19	Monday	19	33	36	29.54	29.54	29.54	S. W.	W.	S. W.	do	do	do	-	
20	Tuesday	22	50	44	29.52	29.43	29.42	do	S. W.	do	do	do	do	-	
21	Wednesday	33	56	40	29.33	29.26	29.29	do	do	do	do	do	do	-	
22	Thursday	32	45	41	29.18	29.19	29.22	do	N. W.	W.	do	do	do	-	
23	Friday	28	29	33	29.30	29.26	29.22	N. W.	do	W.	do	Cloudy	Cloudy	-	Snow in the night, about 1 inch.
24	Saturday	16	22	19	29.38	29.49	29.52	do	do	N. W.	Cloudy	Fair	Fair	-	
25	Sunday	12	32	28	29.65	29.73	29.72	do	do	N.	Fair	do	do	-	
26	Monday	17	50	49	29.71	29.66	29.63	N.	W.	S. W.	do	do	do	-	
27	Tuesday	28	34	33	29.36	29.24	29.86	S. W.	S. W.	do	Cloudy	Rain	Snow	-	
28	Wednesday	29	36	34	29.45	29.58	29.63	N. E.	N. W.	N. W.	Snow	Fair	Fair	.60	
29	Thursday	26	46	39	29.69	29.58	29.63	N. W.	do	do	Fair	Cloudy	Cloudy	-	

Range of the Thermometer from 2° below zero to 56° above. Barometer from 28.84 to 29.75. Rain, 1.44 inches. Snow, 12 inches.



## REGISTER OF THE WEATHER—Continued.

MARCH.	THERMOMETER.		BAROMETER.		WIND.		WEATHER.			Inches of Rain.	REMARKS.
	Sunrise	2 P. M.	Sunrise	2 P. M.	Sunrise	2 P. M.	Sunrise.	2 P. M.	Sunset.		
1	40	50	29.52	29.52	W.	S. W.	Fair	Cloudy	Cloudy	-	
2	36	44	29.49	29.20	S. W.	do	Foggy	do	do	-	
3	37	47	29.37	29.36	S. W.	N. W.	Cloudy	Fair	Fair	.10	Rain in the night.
4	30	31	29.10	29.31	N. E.	do	Snow	Cloudy	do	.33	Snow commenced at 3, A. M.; 6 in. snow.
5	6	20	29.62	29.70	N. W.	do	Fair	Fair	do	-	
6	21	40	29.79	29.81	S. W.	do	do	do	do	-	
7	18	46	29.90	29.88	N. W.	S. W.	do	do	do	-	
8	39	45	29.76	29.60	S.	do	do	Rain	Cloudy	.17	
9	44	47	29.25	29.25	W.	W.	Foggy	Cloudy	do	-	
10	29	39	29.38	29.42	N. W.	N. W.	Cloudy	Fair	Fair	-	
11	32	51	29.60	29.69	do	do	Fair	do	do	-	
12	34	47	29.77	29.30	W.	S. E.	Cloudy	Cloudy	Cloudy	-	
13	40	46	29.55	29.40	S. E.	do	Rain	Rain	Rain	.38	
14	42	48	29.36	29.42	N. W.	N. W.	Cloudy	Fair	Cloudy	-	
15	29	32	29.59	29.63	N. E.	N. E.	do	Cloudy	do	-	
16	30	35	29.38	29.12	do	do	Rain	Rain	Rain	.85	Snow in the night, 3 inches.
17	34	42	28.79	28.85	N. W.	N. W.	do	Fair	Fair	.34	
18	36	41	28.94	29.05	S. W.	S. W.	Fair	Cloudy	Snow	.10	1½ inches snow.
19	16	26	29.29	29.45	do	W.	do	Fair	Fair	-	
20	32	46	29.47	29.30	S. E.	S. W.	Cloudy	Cloudy	Rain	.20	Rain commenced at 4, P. M. Lightning in the evening.
21	30	34	29.24	29.27	N. W.	N. W.	do	do	Cloudy	.42	Snow in the night.
22	25	34	29.04	29.03	do	do	Snow	Snow	do	-	5 inches of snow.
23	21	33	29.20	29.23	do	do	Cloudy	Cloudy	do	-	
24	20	40	29.32	29.39	do	do	Fair	Fair	Fair	-	
25	36	57	29.30	29.22	S. W.	W.	do	do	do	-	
26	32	55	29.50	29.45	N. W.	N. W.	do	Cloudy	do	-	
27	33	36	29.57	29.72	N. E.	N. E.	Cloudy	do	Cloudy	-	
28	28	32	29.58	29.37	do	do	Rain	Rain	Foggy	.05	Rain in the evening.
29	41	48	29.26	29.51	N. W.	do	Fair	Fair	Cloudy	-	
30	23	25	29.36	29.30	N. E.	do	Snow	Snow	Snow	.86	Snow and hail commenced in the night;
31	20	30	29.55	29.76	N. W.	N. W.	Cloudy	Fair	Fair	-	4 inches.

Range of the Thermometer from 6° to 57°. Barometer from 28.79 to 29.90. Rain, 3.30 inches. Snow, 13½ inches.

17th 7th

51°



## REGISTER OF THE WEATHER—Continued.

APRIL.		THERMOMETER.		BAROMETER.		WIND.		WEATHER.		Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.	
1	Monday	13	43	29.99	N. W.	N. E.	N. E.	Fair	Fair	-	Barometer 30.24 at 9½ A. M.
2	Tuesday	18	43	30.15	N. E.	N. W.	do	do	do	-	
3	Wednesday	20	49	29.87	do	S. W.	S. W.	do	do	-	
4	Thursday	45	76	29.40	S. W.	do	do	do	do	-	Aurora borealis.
5	Friday	44	54	29.42	N. W.	N. W.	N. W.	do	do	-	
6	Saturday	31	56	29.85	do	N. E.	N. E.	do	do	-	
7	Sunday	40	48	29.94	S. W.	S. W.	S. W.	Cloudy	Cloudy	-	Lightning in the evening.
8	Monday	50	72	29.56	do	do	do	do	do	-	
9	Tuesday	54	63	29.32	do	N. W.	N. W.	do	Fair	-	
10	Wednesday	33	71	29.52	N. W.	S. W.	S. W.	Fair	Cloudy	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
11	Thursday	49	74	29.54	W.	S. E.	N. E.	do	Fair	-	
12	Friday	40	72	29.69	N. E.	S. E.	S. E.	do	do	-	
13	Saturday	45	80	29.66	S. W.	N. W.	N. W.	do	do	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
14	Sunday	57	85	29.51	N. W.	do	S. W.	do	do	-	
15	Monday	64	65	29.38	W.	E.	E.	Cloudy	Cloudy	-	
16	Tuesday	45	70	29.54	N. E.	S. W.	S. W.	do	Fair	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
17	Wednesday	57	67	29.25	N. W.	N. W.	N. W.	do	do	-	
18	Thursday	33	56	29.66	do	E.	S. E.	Fair	do	-	
19	Friday	32	61	29.72	S. W.	S. W.	do	do	do	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
20	Saturday	38	53	29.61	do	N. E.	N. E.	Cloudy	Cloudy	-	
21	Sunday	56	56	29.50	N. E.	do	do	Rain	Rain	.02	
22	Monday	50	73	29.40	do	do	E.	Cloudy	Fair	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
23	Tuesday	52	63	29.70	S. E.	S. W.	S. W.	Rain	do	-	
24	Wednesday	48	62	29.54	S. W.	do	S. W.	Cloudy	Cloudy	.22	
25	Thursday	52	64	29.21	N. W.	N. W.	N. W.	do	Fair	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
26	Friday	53	58	29.31	S. W.	S. W.	N. E.	do	Rain	.11	
27	Saturday	38	58	29.55	N. E.	N. E.	S. E.	do	Fair	-	
28	Sunday	39	58	29.49	S. W.	W.	W.	do	do	-	Thermometer 84° at 1½ P. M. 86° at 2½ P. M.
29	Monday	45	60	29.41	N. W.	N. W.	N. W.	Fair	do	-	
30	Tuesday	36	70	29.67	do	S. W.	S. W.	do	do	-	

Range of the Thermometer from 13° to 86°. Barometer from 29.23 to 30.24. Rain, .35 of an inch.

24th 2th

1-2d 14th



## REGISTER OF THE WEATHER—Continued.

MAY.		THERMOMETER.		BAROMETER.		WIND.		WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset	Sunrise	2 P. M.	Sunset	Sunrise.	2 P. M.	Sunset.		
1	Wednesday	50	78	69	29.47	29.57	29.33	Cloudy	Fair	Fair	-	
2	Thursday	58	72	69	29.26	29.22	29.25	do	Cloudy	do	-	
3	Friday	54	73	67	29.29	29.24	29.19	Fair	Fair	Rain	.26	Thunder storm.
4	Saturday	54	59	54	29.18	29.20	29.18	do	Cloudy	do	.22	Rain commenced at 6½ P. M.
5	Sunday	49	66	63	29.22	29.28	29.29	do	Fair	Fair	-	
6	Monday	51	74	62	29.32	29.28	29.05	do	do	Rain	.18	
7	Tuesday	52	59	58	29.34	29.04	29.20	do	do	Fair	-	High wind.
8	Wednesday	46	74	66	29.36	29.23	29.20	do	Cloudy	Cloudy	-	
9	Thursday	52	63	58	29.33	29.42	29.51	do	Fair	Fair	-	
10	Friday	46	70	66	29.71	29.78	29.73	do	do	Cloudy	-	
11	Saturday	48	50	52	29.64	29.38	29.30	Cloudy	Rain	do	.16	Rain commenced at 8 A. M.
12	Sunday	58	64	54	29.00	29.00	29.16	Fair	Fair	Fair	.33	Thunder storm in the night.
13	Monday	40	66	60	29.41	29.57	29.58	do	do	Cloudy	-	
14	Tuesday	49	52	48	29.56	29.57	29.60	do	Cloudy	do	-	
15	Wednesday	47	74	67	29.60	29.57	29.50	Fair	Fair	Fair	-	
16	Thursday	51	58	59	29.38	29.29	29.26	Cloudy	Rain	Cloudy	.60	
17	Friday	57	58	56	29.20	29.41	29.48	Rain	Cloudy	Fair	.36	
18	Saturday	51	50	53	29.45	29.31	29.33	Cloudy	Rain	do	-	
19	Sunday	43	60	60	29.43	29.53	29.53	Fair	Fair	do	.47	White frost.
20	Monday	48	54	54	29.55	29.38	29.26	Rain	Rain	Rain	-	
21	Tuesday	56	68	52	29.13	29.34	29.47	Cloudy	Fair	Fair	-	
22	Wednesday	35	72	54	29.61	29.72	29.71	Fair	do	do	-	
23	Thursday	40	72	64	29.72	29.74	29.72	do	do	do	-	
24	Friday	48	83	74	29.72	29.69	29.64	do	do	do	-	
25	Saturday	52	84	65	29.56	29.41	29.43	do	do	Cloudy	.02	Thunder storm in the afternoon.
26	Sunday	46	60	64	29.41	29.33	29.27	Foggy	Cloudy	Rain	.23	
27	Monday	60	77	72	29.21	29.21	29.24	Cloudy	do	Cloudy	-	Rain in the night.
28	Tuesday	60	76	70	29.20	29.18	29.21	do	Fair	do	-	
29	Wednesday	58	72	75	29.24	29.30	29.33	Fair	do	do	-	
30	Thursday	46	73	64	29.40	29.42	29.37	do	do	Cloudy	-	Rain in the night.
31	Friday	56	66	65	29.24	29.12	29.16	Rain	Cloudy	do	.34	

Range of the Thermometer from 35° to 84. Barometer from 28.94 to 29.78. Rain, 3.67 inches.

22th 25th 7th 16th



## 1844 REGISTER OF THE WEATHER—Continued.

JUNE.		THERMOMETER.			BAROMETER.			WIND.			WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.		
1	Saturday	54	74	66	29.36	29.45	29.44	N. W.	S. W.	S. W.	Cloudy	Fair	Fair	-	
2	Sunday	56	72	67	29.33	29.36	29.35	S. W.	do	N. W.	Fair	do	Cloudy	.12	Rain commenced at 8½ P. M.
3	Monday	59	69	61	29.39	29.41	29.45	N. E.	N. E.	N. E.	Cloudy	do	Fair	-	
4	Tuesday	44	68	60	29.49	29.49	29.51	do	do	do	Fair	do	do	-	Dense fog.
5	Wednesday	54	70	64	29.53	29.49	29.44	S. W.	S. W.	S. W.	Cloudy	Cloudy	do	-	
6	Thursday	52	73	68	29.39	29.32	29.33	do	do	do	Fair	Fair	do	-	
7	Friday	64	70	72	29.35	29.32	29.22	N. W.	N. W.	N. W.	Cloudy	Cloudy	do	.06	Rain in the forenoon.
8	Saturday	54	66	60	29.29	29.43	29.56	do	do	N. W.	Fair	Fair	do	.08	Rain in the night.
9	Sunday	53	60	65	29.48	29.29	29.13	S. W.	S. W.	S. W.	do	Cloudy	Cloudy	.22	Rain commenced at 10½ P. M.
10	Monday	57	68	60	29.21	29.24	29.27	N. W.	W.	W.	do	Fair	Fair	-	
11	Tuesday	44	64	60	29.41	29.55	29.61	do	N. W.	N. W.	do	do	do	-	Frost.
12	Wednesday	44	71	63	29.70	29.75	29.75	do	S. E.	S. W.	do	do	do	-	
13	Thursday	50	69	56	29.75	29.68	29.63	S. W.	S. W.	do	do	do	do	-	
14	Friday	53	72	54	29.58	29.59	29.54	do	N. E.	do	Cloudy	do	do	-	
15	Saturday	50	74	60	29.73	29.78	29.76	N. E.	do	S. E.	Fair	do	do	-	
16	Sunday	50	75	70	29.68	29.59	29.50	S. W.	W.	S. W.	do	do	do	-	
17	Monday	55	75	66	29.44	29.42	29.39	do	S. W.	do	do	do	Cloudy	-	Showers in the morning.
18	Tuesday	64	71	72	29.34	29.30	29.29	do	do	do	Cloudy	Cloudy	do	.03	
19	Wednesday	67	87	75	29.31	29.32	29.26	do	do	do	Fair	Fair	Fair	-	
20	Thursday	68	80	76	29.21	29.28	29.30	do	W.	W.	Cloudy	do	do	-	
21	Friday	64	77	65	29.30	29.34	29.35	N. W.	N. E.	N. E.	Fair	do	do	-	
22	Saturday	59	60	61	29.30	29.13	29.11	N. E.	do	do	Rain	Rain	Cloudy	1.27	
23	Sunday	56	74	69	29.21	29.32	29.37	W.	N. W.	W.	Cloudy	Fair	Fair	-	
24	Monday	58	80	73	29.38	29.32	29.30	W.	W.	S. W.	Fair	do	do	-	
25	Tuesday	66	85	76	29.30	29.30	29.27	S. W.	S. W.	do	Cloudy	do	do	-	
26	Wednesday	68	87	76	29.30	29.39	29.40	do	do	do	do	do	do	.09	Thunder storm in the afternoon.
27	Thursday	70	81	77	29.38	29.39	29.37	do	N. E.	N. E.	Fair	Cloudy	Cloudy	-	
28	Friday	70	88	76	29.27	29.25	29.30	do	S. W.	S. W.	Cloudy	Fair	Fair	-	
29	Saturday	57	70	63	29.37	29.37	29.54	N. W.	N. W.	N. W.	Fair	do	do	-	
30	Sunday	51	72	65	29.61	29.63	29.59	N. E.	S. W.	S. W.	do	do	do	-	

Range of the Thermometer from 44° to 89°. Barometer from 29.11 to 29.73. Rain, 1.92 inches.

12th 15th

9th 11-12th 29th



## REGISTER OF THE WEATHER—Continued.

JULY.		THERMOMETER.			BAROMETER.			WIND.			WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.		
1	Monday	57	68	72	29.45	29.30	29.24	S. W.	S. W.	S. W.	Cloudy	Cloudy	Fair	-	
2	Tuesday	66	79	75	29.24	29.27	29.27	W.	N. W.	do	Fair	Fair	do	-	
3	Wednesday	66	82	69	29.22	29.15	29.20	S. W.	W.	N. W.	Rain	do	do	-	Rain in the night.
4	Thursday	50	65	56	29.33	29.44	29.50	N. W.	N. W.	do	Fair	do	do	-	
5	Friday	49	78	64	29.52	29.45	29.33	do	S. W.	S. W.	do	do	Cloudy	-	
6	Saturday	59	78	76	29.20	29.14	29.11	S. W.	do	do	Rain	do	Fair	.07	Rain in the night.
7	Sunday	61	76	66	29.19	29.23	29.33	N. W.	do	N. W.	Fair	do	do	.06	
8	Monday	52	73	68	29.42	29.44	29.44	do	do	W.	do	do	do	-	
9	Tuesday	56	83	74	29.44	29.36	29.30	S. W.	do	S. W.	do	do	do	-	
10	Wednesday	67	80	74	29.24	29.12	29.08	do	do	do	Cloudy	do	Cloudy	-	
11	Thursday	64	87	65	29.07	29.12	29.20	W.	N. E.	N. S.	Fair	do	Rain	.12	Rain commenced at 4½ P. M.
12	Friday	62	71	68	29.29	29.48	29.44	N. W.	do	do	Cloudy	Cloudy	Cloudy	-	
13	Saturday	60	79	72	29.52	29.52	29.48	N. E.	S. W.	S. W.	do	Fair	do	-	
14	Sunday	67	83	71	29.43	29.36	29.28	S. W.	do	do	do	do	do	-	
15	Monday	68	78	73	29.27	29.33	29.35	N. W.	W.	do	Fair	do	do	-	
16	Tuesday	64	63	60	29.32	29.14	29.18	S. W.	N. E.	N. E.	Rain	Rain	Rain	1.03	Showers in the afternoon.
17	Wednesday	55	80	76	29.24	29.30	29.35	N.	N. W.	W.	Fair	Fair	Fair	-	
18	Thursday	58	80	74	29.44	29.44	29.39	N. W.	S. W.	S. W.	do	do	do	-	
19	Friday	59	84	73	29.30	29.21	29.16	S. W.	do	do	do	do	Rain	.81	
20	Saturday	67	68	70	29.16	29.20	29.20	do	S. E.	S. E.	Cloudy	Rain	Cloudy	}	
21	Sunday	63	82	76	29.32	29.45	29.49	N. W.	N.	N. W.	Fair	Fair	Fair	-	
22	Monday	61	80	76	29.53	29.55	29.52	do	S. W.	S. W.	do	Cloudy	do	-	
23	Tuesday	65	83	77	29.47	29.42	29.39	S. W.	do	do	do	do	do	-	
24	Wednesday	66	81	78	29.37	29.40	29.37	N. E.	S. E.	S. E.	Cloudy	Fair	Cloudy	.37	Rain in the night.
25	Thursday	59	63	61	29.38	29.37	29.43	S. E.	N. E.	N. E.	do	Rain	Rain	-	
26	Friday	57	73	68	29.41	29.43	29.43	N. E.	do	do	do	Fair	Fair	-	
27	Saturday	55	77	68	29.46	29.54	29.55	N.	N. W.	N. W.	Fair	do	do	-	
28	Sunday	54	82	71	29.59	29.66	29.66	S. W.	do	S. E.	do	do	do	-	
29	Monday	58	80	71	29.66	29.64	29.61	do	S. W.	S. W.	Cloudy	do	do	-	
30	Tuesday	60	81	72	29.57	29.52	29.48	do	do	do	Fair	Fair	do	-	
31	Wednesday	63	68	66	29.48	29.44	29.40	do	S. E.	S. E.	Cloudy	Cloudy	Rain	1.04	

Range of the Thermometer from 50° to 87°. Barometer from 29.07 to 29.66. Rain, 3.50 inches.



## REGISTER OF THE WEATHER—Continued.

AUGUST.		THERMOMETER.		BAROMETER.		WIND.		WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunrise	2 P. M.	Sunrise	2 P. M.	Sunrise.	2 P. M.	Sunset.		
1	Thursday	67	80	29.36	29.36	S. E.	S. W.	Fair	Fair	Fair	.27	Thunder shower in the afternoon. Rain in evening.
2	Friday	71	84	29.40	29.46	S. W.	N. W.	Cloudy	do	do	-	Rain in the night.
3	Saturday	66	82	29.51	29.49	N. W.	do	do	do	Cloudy	1.18	Showers during the day.
4	Sunday	68	76	29.20	29.13	S. E.	S. W.	Rain	do	Fair	-	
5	Monday	58	74	29.27	29.32	N. W.	N. W.	Fair	do	do	.06	Rain in the afternoon.
6	Tuesday	56	73	29.35	29.30	W.	S. W.	do	Cloudy	do	-	
7	Wednesday	60	76	29.30	29.36	W.	N. W.	Foggy	Fair	do	-	
8	Thursday	61	81	29.44	29.46	W.	S. W.	Cloudy	do	do	-	
9	Friday	64	81	29.42	29.27	S. W.	do	do	do	do	-	
10	Saturday	73	77	29.18	29.24	W.	W.	Fair	Cloudy	do	-	
11	Sunday	58	73	29.30	29.32	W.	N. W.	do	Fair	do	-	
12	Monday	54	70	29.42	29.45	N. W.	do	do	do	do	-	
13	Tuesday	53	79	29.53	29.56	do	S. W.	do	do	do	-	
14	Wednesday	53	70	29.61	29.66	S. W.	do	Cloudy	Cloudy	Cloudy	-	
15	Thursday	55	82	29.65	29.66	S. E.	S. E.	Foggy	Fair	Fair	-	
16	Friday	56	82	29.59	29.54	S. W.	S. W.	Fair	do	Cloudy	-	Fog in the morning.
17	Saturday	63	90	29.39	29.34	do	do	Cloudy	do	Fair	-	
18	Sunday	62	81	29.44	29.51	N. W.	N. W.	Fair	do	do	-	
19	Monday	64	76	29.57	29.58	S. W.	S. E.	Cloudy	Cloudy	Cloudy	-	
20	Tuesday	68	84	29.47	29.44	do	S. W.	Rain	Fair	do	.05	Slight showers in the afternoon.
21	Wednesday	61	75	29.58	29.59	N. E.	N. E.	Cloudy	do	Fair	-	Rain in the night.
22	Thursday	51	74	29.63	29.51	do	S. E.	Fair	do	Rain	-	
23	Friday	56	73	29.18	29.00	S. E.	do	Rain	do	Cloudy	.26	Thunder showers in the night.
24	Saturday	58	70	29.03	29.05	N. E.	N. E.	Foggy	do	do	.73	
25	Sunday	60	70	29.05	29.05	E.	S. W.	do	Cloudy	do	.36	
26	Monday	54	76	29.13	29.20	S. W.	S. E.	Fair	Fair	do	-	
27	Tuesday	56	72	29.19	29.19	N. E.	N. E.	Cloudy	Cloudy	Rain	.07	
28	Wednesday	60	69	29.20	29.17	do	do	Foggy	do	Cloudy	.04	Rain in the afternoon.
29	Thursday	52	72	29.18	29.25	W.	N. W.	Fair	Fair	Fair	-	Aurora Borealis.
30	Friday	54	73	29.36	29.34	N. W.	W.	do	do	do	-	
31	Saturday	58	79	29.49	29.52	W.	W.	do	do	Cloudy	.32	Showers in the afternoon.

Range of the Thermometer from 51° to 90°. Barometer from 29.00 to 29.66. Rain, 3.39 inches.

22nd 17th 29th 16th



## REGISTER OF THE WEATHER—Continued.

SEPTEMBER.	Day of Month.	THERMOMETER.		BAROMETER.		WIND.		WEATHER.			Inches of Rain.	REMARKS.
		Sunrise	2 P. M.	Sunset	Sunrise	2 P. M.	Sunset	Sunrise	2 P. M.	Sunset		
1	Sunday	62	70	66	29.57	29.59	29.59	N. E.	S. E.	S. E.	.13	Rain in the night.
2	Monday	64	72	70	29.58	29.50	29.42	S. E.	do	do	.29	
3	Tuesday	67	72	72	29.20	29.23	29.29	S. W.	N. W.	N. W.	.20	
4	Wednesday	54	76	73	29.38	29.40	29.50	do	do	Fair	-	
5	Thursday	49	75	68	29.70	29.67	29.68	do	N.	do	-	
6	Friday	44	78	74	29.83	29.85	29.82	do	S. W.	S. E.	-	
7	Saturday	51	81	73	29.74	29.70	29.66	S. E.	do	do	-	
8	Sunday	55	82	81	29.59	29.58	29.53	S. W.	do	do	-	
9	Monday	55	81	74	29.50	29.46	29.54	W.	W.	do	-	
10	Tuesday	59	89	79	29.48	29.52	29.53	N. W.	N. W.	do	-	
11	Wednesday	60	78	70	29.53	29.54	29.52	W.	W.	do	-	
12	Thursday	63	75	78	29.53	29.53	29.52	N. E.	N. E.	Cloudy	-	
13	Friday	60	68	66	29.51	29.50	29.50	do	do	do	-	
14	Saturday	55	76	72	29.50	29.50	29.50	N. W.	W.	Fair	-	
15	Sunday	63	80	83	29.44	29.48	29.49	N. W.	N. W.	do	-	
16	Monday	57	86	84	29.50	29.50	29.48	N. W.	do	do	-	
17	Tuesday	64	75	66	29.55	29.54	29.50	do	do	Cloudy	-	
18	Wednesday	50	82	78	29.49	29.27	29.29	do	do	do	-	
19	Thursday	54	81	72	29.40	29.47	29.49	do	do	Fair	-	
20	Friday	59	87	77	29.52	29.52	29.50	S. W.	S. W.	do	-	
21	Saturday	63	81	73	29.48	29.41	29.38	do	S. E.	do	-	
22	Sunday	59	56	68	29.41	29.42	29.44	N. W.	N. W.	Cloudy	-	
23	Monday	42	70	66	29.57	29.58	29.60	N.	do	Fair	-	
24	Tuesday	38	73	66	29.62	29.62	29.62	N. W.	S. W.	Foggy	-	
25	Wednesday	55	60	57	29.61	29.58	29.58	S. W.	do	Cloudy	-	
26	Thursday	47	51	61	29.58	29.62	29.61	N. E.	N. E.	Rain	1.54	
27	Friday	38	54	52	29.68	29.68	29.68	N. W.	N. W.	Fair	-	
28	Saturday	30	54	49	29.65	29.50	29.45	do	W.	do	-	
29	Sunday	42	48	48	29.00	28.68	28.54	N. E.	N. E.	Rain	1.52	
30	Monday	43	63	60	29.10	29.30	29.39	S. W.	S. W.	Fair	-	

Range of the Thermometer from 30° to 89°. Barometer from 28.54 to 29.85. Rain, 3.63 inches.

28th 10th

29th 6th

Frost. Thermometer 34° at 5½ A. M.

Rain commenced at midnight.



## REGISTER OF THE WEATHER—Continued.

OCTOBER.		THERMOMETER.		BAROMETER.		WIND.		WEATHER.		Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.	
1	Tuesday	36	53	29.76	N. W.	N. W.	N. W.	Fair	Fair	-	
2	Wednesday	29	69	29.83	do	S. W.	S. W.	do	do	-	
3	Thursday	42	58	29.59	S. W.	S. E.	S. E.	do	Cloudy	.83	Rain commenced at 3, P. M.
4	Friday	58	66	29.13	S. E.	N. W.	S. W.	Rain	Fair	1.66	
5	Saturday	45	60	28.95	S. W.	do	N. W.	Fair	do	-	
6	Sunday	43	57	29.35	W.	do	do	do	Cloudy	-	
7	Monday	43	50	29.19	N. W.	do	do	Rain	do	.21	
8	Tuesday	42	52	29.49	do	do	do	Cloudy	do	-	
9	Wednesday	42	63	29.33	S. W.	W.	do	Fair	Fair	-	
10	Thursday	44	71	29.30	do	S. W.	S. W.	do	Cloudy	-	
11	Friday	47	52	29.38	N. W.	N. E.	N. E.	Fair	do	.07	Rain in the night.
12	Saturday	38	59	29.65	do	do	do	Cloudy	do	-	
13	Sunday	33	63	29.77	N. E.	S. W.	S. W.	Fair	do	-	
14	Monday	42	53	29.56	S. W.	do	do	do	do	.52	
15	Tuesday	32	58	29.03	S. E.	S. E.	do	Rain	do	.71	
16	Wednesday	46	59	28.98	S. W.	S. W.	do	Fair	Cloudy	-	
17	Thursday	40	55	29.65	do	do	do	do	Cloudy	.13	
18	Friday	59	64	29.59	S. E.	S. E.	S. E.	Rain	Rain	1.10	High wind and rain during the night.
19	Saturday	65	58	29.09	S. W.	N. W.	N. W.	do	Fair	-	
20	Sunday	36	45	29.63	N. W.	do	do	Fair	do	-	
21	Monday	38	49	29.97	do	S. E.	S. E.	Cloudy	Cloudy	-	
22	Tuesday	40	54	29.89	N. E.	N. E.	N. E.	Fair	Fair	-	
23	Wednesday	34	57	29.79	do	do	do	Foggy	do	-	
24	Thursday	33	58	29.82	do	do	E.	Rain	do	-	
25	Friday	46	60	29.75	S. W.	S. W.	S. W.	Fair	do	-	
26	Saturday	50	66	29.54	W.	do	do	Cloudy	Cloudy	-	
27	Sunday	52	51	29.39	N. W.	N. E.	N. E.	do	do	-	
28	Monday	34	34	29.29	N. E.	do	do	Rain	Rain	.97	Rain continued through the night.
29	Tuesday	38	40	29.03	do	do	do	Cloudy	Cloudy	1.14	
30	Wednesday	38	40	29.22	S. W.	S. W.	S. W.	Rain	do	-	
31	Thursday	35	42	29.37	N. W.	N. W.	N. W.	do	Fair	-	

Range of the Thermometer from 23° to 71°. Barometer from 28.71 to 29.98. Rain, 7.34 inches.

29.25 10th 15th 21st



## REGISTER OF THE WEATHER—Continued.

NOVEMBER.		THERMOMETER.		BAROMETER.		WIND.		WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.		
1	Friday	32	56	29.60	N. W.	N. W.	N. W.	Fair	Fair	Fair	-	
2	Saturday	36	57	29.53	do	do	do	do	do	do	-	
3	Sunday	32	57	29.64	do	S. E.	S. E.	do	do	Cloudy	-	
4	Monday	45	45	29.41	N. E.	S. E.	N. E.	Rain	Rain	Rain	1.20	
5	Tuesday	38	46	29.09	do	N. W.	N. W.	Cloudy	Fair	Fair	-	
6	Wednesday	36	38	29.89	W.	W.	do	do	Cloudy	do	-	
7	Thursday	32	55	29.12	do	S. W.	S. W.	Fair	Fair	do	-	
8	Friday	45	57	29.01	do	W.	W.	Cloudy	do	do	-	
9	Saturday	33	53	29.32	S. W.	N. W.	N. W.	do	do	do	-	
10	Sunday	29	50	29.60	N. W.	S. W.	S. W.	Fair	do	do	-	
11	Monday	45	53	29.34	S. W.	N. E.	N. E.	Cloudy	Rain	Rain	.18	Thunder shower in the afternoon.
12	Tuesday	42	46	29.46	do	do	do	do	do	Foggy	-	
13	Wednesday	52	44	29.10	W.	S. W.	W.	Cloudy	Cloudy	Cloudy	.37	Rain in the morning.
14	Thursday	31	41	29.39	do	N. W.	N. W.	Fair	Fair	Fair	-	
15	Friday	31	48	29.65	N. W.	W.	do	do	do	do	-	
16	Saturday	33	53	29.63	W.	W.	do	do	do	do	-	
17	Sunday	29	56	29.76	do	S. E.	S. E.	Cloudy	do	Cloudy	-	
18	Monday	46	48	29.23	S. W.	W.	N. W.	Rain	Cloudy	do	.18	
19	Tuesday	22	39	29.65	N. W.	N. W.	S. W.	Fair	Fair	Fair	-	
20	Wednesday	30	38	29.64	W.	S. W.	do	Cloudy	Rain	do	-	
21	Thursday	30	54	29.64	N. W.	N. E.	N. E.	Fair	Fair	do	-	
22	Friday	38	43	29.60	N. E.	N. E.	do	Rain	Rain	Rain	.39	
23	Saturday	42	50	29.07	do	N. W.	S. W.	Foggy	Fair	Fair	.25	
24	Sunday	34	33	29.05	N. W.	do	N. W.	Fair	do	do	-	
25	Monday	20	24	29.05	do	do	do	do	do	do	-	
26	Tuesday	12	25	29.62	do	S. W.	S. W.	do	do	Cloudy	-	Snow squalls in the afternoon and evening.
27	Wednesday	29	32	29.30	do	N. W.	N. W.	do	do	Fair	-	
28	Thursday	14	18	29.65	do	N. E.	N. E.	do	Snow	Snow	.48	Snow commenced at 11, A. M. 5 in. snow.
29	Friday	21	32	29.41	N. E.	do	do	Cloudy	Cloudy	Fair	-	
30	Saturday	✓10	41	29.59	do	S. E.	S. W.	Fair	Fair	Cloudy	-	

Range of the Thermometer from 10° to 53°. Barometer from 29.39 to 29.76. Rain, 3.06 inches. Snow, 5 inches.

30th 9th 6th 17th



## REGISTER OF THE WEATHER—Continued.

DECEMBER.		THERMOMETER.			BAROMETER.			WIND.			WEATHER.			Inches of Rain.	REMARKS.
Day of Month.	Day of the Week.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise	2 P. M.	Sunset.	Sunrise.	2 P. M.	Sunset.		
1	Sunday	41	34	35	29.29	29.39	29.44	S. W.	N. W.	N. W.	Rain	Snow	Cloudy	.25	
2	Monday	22	46	35	29.73	29.79	29.72	N. W.	do	do	Fair	Fair	Fair	-	
3	Tuesday	24	30	23	29.94	29.92	29.91	do	N. E.	N. E.	do	Cloudy	Cloudy	-	
4	Wednesday	32	34	34	29.55	29.29	29.29	N. E.	do	do	Rain	Rain	Rain	.63	
5	Thursday	37	45	41	29.50	29.60	29.65	do	do	do	Foggy	Fair	Fair	-	
6	Friday	33	35	35	29.72	29.77	29.77	do	do	do	Cloudy	Cloudy	Cloudy	-	
7	Saturday	35	52	54	29.45	29.06	28.93	S. W.	S. W.	S. W.	Foggy	Rain	Rain	.28	
8	Sunday	27	24	22	29.15	29.38	29.46	N. W.	N. W.	W.	Fair	Fair	Fair	-	High wind.
9	Monday	16	32	29	29.69	29.64	29.60	W.	S. W.	S. W.	do	do	do	-	
10	Tuesday	23	41	33	29.56	29.47	29.54	W.	N. W.	N. W.	do	do	do	-	
11	Wednesday	15	18	19	29.68	29.64	29.57	N. W.	N. E.	N. E.	Cloudy	Cloudy	Cloudy	-	
12	Thursday	23	31	30	29.29	29.35	29.34	do	N. W.	W.	do	Fair	Fair	-	Snow in the night.
13	Friday	14	33	29	29.35	29.29	29.29	W.	S. W.	S. W.	do	Cloudy	Snow	-	Snow at 2½ P. M. About two inches.
14	Saturday	29	37	35	29.08	29.03	29.02	W.	do	do	Snow	Fair	Fair	-	
15	Sunday	28	35	31	29.02	29.02	29.04	S. W.	W.	W.	Cloudy	do	do	-	
16	Monday	24	33	27	29.04	29.04	29.03	W.	S. W.	N. W.	Fair	do	do	-	
17	Tuesday	16	22	20	28.99	29.02	29.05	N. W.	N. W.	do	do	do	do	-	
18	Wednesday	16	19	16	29.13	29.24	29.33	do	do	do	do	do	do	-	
19	Thursday	18	31	27	29.35	29.36	29.35	S. W.	S. W.	S. W.	do	Cloudy	Cloudy	-	
20	Friday	17	23	20	29.38	29.43	29.47	N. W.	N. W.	N. W.	do	Fair	Fair	-	
21	Saturday	8	27	26	29.45	29.43	29.41	do	S. W.	S. W.	do	Cloudy	Cloudy	-	Snow squalls in the evening.
22	Sunday	32	32	33	29.21	29.18	29.13	S. W.	N. E.	N. E.	Cloudy	Foggy	Rain	.65	Rain at 1½ P. M.
23	Monday	38	41	40	28.72	28.49	28.41	N. E.	do	do	Foggy	do	do	.15	
24	Tuesday	24	34	30	28.88	29.14	29.26	N. W.	N. W.	N. W.	Fair	Fair	Fair	-	
25	Wednesday	26	43	38	29.53	29.55	29.55	S. W.	S. W.	S. W.	do	do	do	-	
26	Thursday	38	52	48	29.36	29.24	29.24	do	do	do	Cloudy	do	Cloudy	-	
27	Friday	40	31	26	29.16	29.16	29.16	N. W.	N. E.	N. E.	Rain	Snow	Snow	.60	Snow commenced at 1 P. M.; 6 inches.
28	Saturday	16	20	20	28.98	29.06	29.13	do	N. W.	N. W.	Snow	Cloudy	Fair	-	
29	Sunday	9	26	27	29.41	29.46	29.48	do	W.	S. W.	Fair	Fair	do	-	
30	Monday	18	30	38	29.35	29.13	29.08	N. E.	S. E.	do	Cloudy	Cloudy	do	-	
31	Tuesday	33	38	30	29.29	29.42	29.44	W.	W.	N. W.	Fair	Fair	do	-	

Range of the Thermometer from 3° to 54°. Barometer from 28.41 to 29.94. Rain, 2.56 inches. Snow, 8 inches.

28th 3rd

21st 7th



