Thirty-sixth annual report of the trustees of the State Lunatic Hospital at Worcester. October, 1868.

Contributors

State Lunatic Hospital at Worcester. Hooper, Robert W. Bemis, Daniel W. Bemis, Merrick.

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THIRTY-SIXTH ANNUAL REPORT

. OF

THE TRUSTEES

OF THE

STATE LUNATIC HOSPITAL

AT

WORCESTER.

Остовек, 1868.

BOSTON:

WRIGHT & POTTER, STATE PRINTERS,
79 MILK STREET (CORNER OF FEDERAL).
1869.

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Commonwealth of Massachusetts.

TRUSTEES' REPORT.

To His Excellency the Governor and the Honorable Council of the Commonwealth of Massachusetts.

The Trustees of the Worcester Lunatic Hospital respectfully submit their Thirty-Sixth Annual Report.

This hospital was established nearly forty years ago in the suburbs of the quiet town of Worcester. It is now in the middle of a thriving and prosperous city. Its essential features remain the same as when it was built, with only the addition of such improvements as its construction permitted. It is yet far from being such a building as the wants of this community require. At no distant day it may be thought advisable to relinquish the valuable tract of land in which it stands, in exchange for a more quiet and less expensive location at a little distance; and, by such exchange, the Trustees believe that a new hospital, suited to the times and to the character of the Commonwealth, might be built without cost to the State. As it is, the Trustees have confidence that the condition of its inmates, during the past year, has been as satisfactory as at any previous time.

By the Treasurer's report, the finances, which had been somewhat embarrassed by the high cost of supplies, are now in a good condition; and when all dues are received, and all debts paid, a balance will remain in favor of the hospital.

The average cost per week of each patient, in 1867, was \$4.60, and for the present year \$3.80. The latter sum now

nearly approaches the amount paid by the State and towns for their patients. The deficiency is made up by the payment of private patients, some of whom, at a sacrifice to their sense of pride and independence, prefer not to be a public burden.

In the treatment of those under our care, we can hardly venture to say that any very decided improvement has been made over former years, as our facilities have not increased with the progress of experience. We have far from reached perfection in the treatment of the insane. There are more truths yet to be revealed to us, and we trust that nothing that thought or expenditure can give will be neglected to make this hospital what it should be.

Freedom from personal restraint, instituted by the humane and courageous Pinel, marked an epoch in the annals of insanity. Another great step in advance will be to give useful and cheerful occupation to the insane, to relieve the tedious monotony of a hospital life,—to make a cheerful and happy home for such as are visited with this malady, from which no gift of mind or person can exempt us. Judge, counsellor, legislator and private citizen are all alike subject to it. It is the duty of every member of the community to use his power and influence to lessen the sufferings of those afflicted with insanity.

The restraints formerly used here, partly from ignorance, but more from motives of economy,—the cell, the camisole, chains and other instruments of days gone by,—have been exchanged for the gentle but firm presence of faithful and conscientious attendants, at all hours, to protect the patient from injury to himself or to others. If such attendance could be had in private families, and the love and affection of friends not exhausted, there are many patients in our hospitals who might remain at home. Yet the surroundings of a hospital, which seem so painful to visitors, are a source of benefit to some patients, from the sympathy and interest they excite.

It must not be supposed that the hardness of each individual case is in proportion to the complaints made by patients of the injustice of confining them to a hospital. This man who represents his case to the visitor most eloquently as being separated from his family, for whose support he is able to work, in another hour is dangerous to approach. This one who claims the need

of her children for her fostering care, if placed at large would put a firebrand to her dwelling.

Every attention possible is given to the complaints by patients of ill usage from their friends or attendants, and experimental visits to their homes, when the friends desire, are allowed, if safe and proper. Some are permitted to work at their trades in the city, while under the supervision of the hospital, and all are allowed the largest amount of liberty consistent with safety.

The health of our Superintendent, after a life of twenty years of labor in the hospital, having failed, he was induced to take a vacation in the summer, which he passed in visiting the hospitals of other lands. He has returned, apparently restored to health, and filled with experience which he will detail to you in the report that accompanies this.

In his absence, the duties of his office were most faithfully performed by Dr. Draper, to whom we feel gratefully indebted.

Very respectfully submitted by the Trustees.

R. W. HOOPER.
CHAS. MATTOON.
HENRY CHAPIN.
WM. WORKMAN.
S. E. SEWALL.

TREASURER'S REPORT.

To the Trustees of the Worcester Lunatic Hospital.

GENTLEMEN:—I herewith submit my annual report of the financial condition of the Worcester Lunatic Hospital.

RECEIPTS.

Cash on hand September 30, 1867,	1.	\$1,779 64
received of the Commonwealth for support of patients,		19,417 59
received of cities and towns for support of patients, .		27,203 83
received of individuals for support of patients,		35,765 47
received from sale of farm products,		3,087 83
	-	\$87,254 36

The expenditures of the year have been as follows:-

35
2
7
6
6
35
30
53
32
50
18
52
0
31
22
32
75
23
93
23
79

1868.]	PUBLI	IC I	DOCI	UMI	ENT-	_N	To. 23.			7
Fuel,							\$5,737	34		
T . 1 .							1,175			
Soap,							473			
Improvements an							4,164			
Freight and expr								72		
Live stock, .								00		
Salaries and wag							20,567			
Miscellaneous,							2,829			
Provender,.							1,901			
,		-				_				
Total amount of	current e	exper	ises,				\$72,054			
C)							2,395			
Undertakers' bill	s, .						1,142	90		
Paid on loan,							7,500	00		
Cash on hand, Se	eptember	30, 1	1868,				4,161	15		
						-			\$87,254	36
			Res	OURC	ES.					
Cash,				00					94 181	15
Due from the Co	· ·	lth.			•		\$4,975	78	\$4,161	10
Same, (Appendi								91		67
Due from cities a									7,707	28
Due from individ					•				8,893	
Due from marvio	tuais,	•					,		0,000	02
	****								\$26,317	00
			-							
			LIAI							
Worcester Coun							\$4,500			
Due for bills of s	supplies a	nd ex	xpense	es,			7,910			
Due for salaries	and wage	s,					4,988	96	17 004	0.1
*						-			17,394	81
Balance,									\$8,922	13
Invested funds, (market v	alue.)						2,050	
Dividends from				1 6					17 13.31	00
			,					-		
Surplus, .									\$11,044	13
						1	200			
And the state of		-				D.	W. BEI	MIS,	Treasurer	
Worcester L				}						
Worcester	R, Oct. 1,	1868	5.)						

We have examined the above account, with the vouchers, and find it correct.

WILLIAM WORKMAN,

HENRY CHAPIN,

Auditing Committee.

WORCESTER, Oct. 17, 1868.

OFFICERS OF THE HOSPITAL.

TRUSTEES.

ROBERT W. HOOPER, M. D.,		Boston.
HON. CHARLES MATTOON, .		Greenfield.
HON. HENRY CHAPIN,		Worcester.
WILLIAM WORKMAN, M. D.,		Worcester.
HON. SAMUEL E. SEWALL, .		Boston.

RESIDENT OFFICERS.

MERRICK BEMIS, M. D.,			Superintendent.
JOSEPH DRAPER, M. D.,			Assistant-Physician.
CAROLINE A. BEMIS, .			Matron.
DANIEL W. BEMIS,			Steward.

TREASURER.

DANIEL	w.	BEMIS, .					Worcester.
			Office	at the	Ho	spital.	

SALARIED OFFICERS OF THE HOSPITAL.

Superintendent, .					\$1,800 00
Assistant-Physician, .					900 00
Matron,					200 00
Steward and Treasurer,					1,000 00

SUPERINTENDENT'S REPORT.

To the Trustees of the Worcester Lunatic Hospital.

Gentlemen:—In obedience to the laws of the Commonwealth, I have the honor to submit to you the Thirty-Sixth Annual Report of the Worcester Lunatic Hospital.

For the general results of the year, and the condition of the patients in detail, you are respectfully referred to the following tabular statements, and such brief explanatory remarks as may accompany them:—

Table No. 1, Showing the general results during the year.

- No American State of the				Males.	Females.	Totals.
Patients in the Hospital, October	1, 1	867,	.	177	178	355
Admitted during the year, .			.	158	138	296
Whole number under treatment,				335	316	651
Discharged recovered,				62	48	110
improved,				44	48	92
not improved, .			. i	20	14	34
Died,				21	12	33
Whole number discharged, .				147	122	269
Remaining, September 30, 1868,				188	194	382

From this table, it appears that two hundred and ninety-six patients were admitted during the last year, of whom one hundred and fifty-eight were males, and one hundred and thirty-eight were females.

At the close of the previous year, there were three hundred and fifty-five patients inmates of the hospital, of whom one hundred and seventy-seven were males, and one hundred and seventy-eight were females, so that there were six hundred and fifty-one persons under treatment in the course of the year, of whom three hundred and thirty-five were males, and three hundred and sixteen were females; the daily average was three hundred and seventy. No disturbing causes have operated to influence in any very great degree the usual results of the year.

The number of patients discharged was two hundred and thirty-six, of whom one hundred and ten were recovered, ninety-two improved, and thirty-four not improved. Thirtythree were removed by death, of whom twenty-one were males, and twelve were females.

The recoveries were thus in the ratio of a fraction more than thirty-nine per cent. to the number of admissions,—a gratifying result if compared with the percentage of recoveries in other old and long established hospitals.

At the close of the year there were eight patients in the hospital who had recovered their usual degree of mental health, and were awaiting the convenience of their friends for their removal. If this number be added to the number of those discharged and tabulated, the ratio of recoveries to the number discharged will be increased from forty-seven to fifty per cent. And if eight cases of recurrent mania and ten cases of unknown duration be included in the tabular statement, the ten per cent. of recovery of recent cases will be increased from fifty-four to sixty per cent.

Again, if fifty-six patients who were transferred directly to other institutions be deducted from the whole number discharged, the ratio of recoveries to the number discharged will be sixty-one per cent., or sixty-five per cent. if the eight who had recovered and were remaining be added to the number of those discharged.

The rate of mortality is somewhat less than during the previous year, and may be considered as quite moderate, if we regard the condition of many of the patients when admitted.

The percentage of deaths of the average number of residents was nine, and only five per cent., if calculated on the whole number under treatment.

TABLE No. 2,

Showing the Admissions and state of the Hospital from October 1, 1867, to September 30, 1868.

	Males.	Females.	Totals.
Patients in the Hospital, October 1, 1867,	177	178	355
admitted in the course of the year,	158	138	296
remaining in the Hospital, Sept. 30, 1868, .	188	194	382
Of the admissions there were cases of one year or less		1000	
duration,	103	82	185
Of the admissions there were cases of more than one			
year's duration,	49	48	97
Of the admissions there were cases the duration of	1 3/11		
whose insanity could not be ascertained,	6	8	14
Patients committed by Courts,	109	88	197
committed by Overseers of the Poor,	12	10	22
on bonds,	37	36	73
committed by Governor's warrant,	-	-	-
committed by the Board of State Charities, .	1	3	4
committed by Commissioners of Lunacy, .	-	-	-
Foreigners and those having no settlement in the		00	110
State, committed in course of the year,	58	60	118
Foreigners and those having no settlement in the	01	00	104
State, discharged in course of the year,	61	63	124
Foreigners and those having no settlement in the	47	48	95
State, remaining in the Hospital, Sept. 30, 1868, .	45	45	90
Patients in Hospital previously,	8	8	16
in Hospitals of other States previously,	1	6	7

State Paupers remaining in the Hospital at the close of each year as nearly as can be ascertained.

1842,		34	1851,		201	1860,	20	130
1843,		38	1852,		241	1861,		156
1844,		38	1853,		216	1862,		189
1845,		57	1854,		151	1863,		175
1846,		52	1855,		115	1864,		116
1847,		121	1856,		155	1865,	100	91
1848,		150	1857,		119	1866,		129
1849,		167	1858,		121	1867,		101
1850,		181	1859,		124	1868,		95

The preceding table shows that one hundred and eighty-five patients were admitted to the hospital in the course of the year whose insanity had existed one year or less previous to the date of their admission. Other tables in this connection show that about seventy-five per cent. of all patients admitted to the hospital who had been insane not more than one year previous

to admission have recovered their mental health and usefulness and have been restored to society.

It may also readily be shown that a large proportion of those who are placed under treatment on the first appearance of disease recover their customary health within a period of six months.

The table also shows that one hundred and ninety-seven patients were committed by order of the probate courts of the several counties, thus making the commitment of patients an open, fair, legal proceeding. In all cases where the patient has been admitted by the officers of the hospital the admission has been given on the authority of a certificate of insanity from two physicians. And in those cases where the patient has voluntarily sought the benefits of the institution an examination has at once been made and certificates procured from physicians not connected with the hospital.

Of the one hundred and ninety-seven committed by the courts in the course of the year, one hundred and eighteen were supported by the charity of the Commonwealth. Of this class one hundred and twenty-four were discharged, leaving ninety-five in the hospital at the close of the year.

The number of patients admitted into the hospital since it was opened amounts to eight thousand one hundred and ninety-eight, of whom four thousand and ninety-five have been males and four thousand one hundred and three females.

Of this number, three thousand eight hundred and twenty-five have been discharged recovered, and one thousand four hundred and forty-six have been discharged improved; the recoveries being in the ratio of forty-eight and nine-tenths per cent. to the whole number, after deducting the number of those who remain under treatment. And the ratio of those discharged improved, to the whole number, is a fraction less than twenty per cent., after deducting those who remain in the hospital.

Fifty-seven patients have been removed to other institutions in the course of the year by order of the Board of State Charities, and five have been removed to their homes out of the Commonwealth. A large majority of these patients were supposed to be incurable, and had been residents in the hospital varying periods of time from a few weeks to several years.

I have done all in my power to carry out the plan of boarding a few quiet chronic patients in private houses, whose condition seemed to warrant it, both in deference to the opinions encouraged by your board, and under the convictions on this subject which I urged in my reports of 1856 and 1857; but I must confess that I find very great difficulty in getting proper persons to interest themselves sufficiently in the subject to assist me in my efforts, and have thus far been able to procure suitable homes for a few cases only of those whose service would be of real value.

In reference to those cases for whom asylums are sought out of the Commonwealth and similar cases so disposed of in former years, I beg leave to make a single remark.

It is much to be regretted that there cannot be a fair understanding and an equitable arrangement between the authorities of different countries and also between the authorities of different sections of our own country, for the purpose of facilitating and rendering such transfers humane and desirable, not only between this country and England, Scotland, Ireland and Germany, but between different States of our own country.

Under the existing state of things lunatics who may be wisely and properly transferred to their homes in a foreign country, are generally landed at Liverpool, where it not unfrequently happens that all trace of them is lost. Sometimes, however, they are picked up as wanderers in the streets, and are sent to English asylums or poor-houses.

And in the case of those who are sent into other States, where they are supposed to have settlements, the result frequently is, that on arriving in the place of their settlement, either their identity or their insanity is repudiated by the authorities, and the unfortunate lunatic, unable to provide for himself, is let loose on the public streets, to take his chance of what Providence may do for him. They sometimes succeed in begging their way back to the hospital. When they have done so they have been received by order of the Board of State Charities, and taken care of until they could again be transferred.

Of the unrecovered patients discharged, many were removed by the Board of State Charities, and proper provision was made for them in other institutions; some, however, were removed for whom no special provision was made for their care; and some, as frequently happens, were very injudiciously removed, and have consequently been readmitted in a much more hopeless condition than when they were taken away.

TABLE No. 3, Showing the Number Admitted, Restored, Improved, Died, &c., in each Month in the Year.

	Aı	MITT	ED.		REMOVED.										REMAINING.				
MONTHS.	96		es.		. 63.		Kestored.		Improved.	Not	improved.		Died.	7	otals			les.	**
	Males.	Females.	Totals.	м.	F.	м.	F.	M.	F.	м.	F.	M.	F.	T.	Males.	Females.	Totals.		
October, .	7	11	18	2 1 3	8	5	2	1	2	3	1 2	11	13		173	176	349		
November, . December, .	9 15	11 9	20 24		8 4 3	5 3 4	2 2 4 2 1 5 6	1 1 2	1 1	_	-	6 9	9 8	15 17	176 182	178 179	354 361		
January, .	19	9 5	23	7 4 8 9 6 7 3 8	5	- 3 3 4 8 3 6	2	-	-	-	-	7 4	8 7 4	14	193	177	370		
February, . March, .	8	10	18 20	8	245235	3	5	9	- 3	2 6	1	22	13	8 35	197 186	183 179	380 365		
April,	19	17	36	9	5	3		1	3-755	6	1	19	12		186	184	370		
May,	9	15	24	6	2	4	9	_	2		1	11	14	25	184	185	369		
June,	15	16		7	3	8	12	1 1	2 3 1 1	1 1 2 2 3	1	18			181	182	363		
July, August,	21 9	15 8	36 17	8	3	6	1	1	1	2 9	3	9	9 8	18 25	193 185	188 188	381 373		
September, .	17	12	29	4	4	5	1	2	-	3	1	14	6	20	188	194	382		
Totals, .	158	138	296	62	48	44	48	20	14	21	12	147	122	269	-	-	-		

TABLE No. 4, Showing the form of Disease in those Admitted and Discharged during the year.

		ADMITTED		DISCHARGED.					
FORM OF DISEASE.	Males.	Females.	Totals.	Males.	Females.	Totals.			
Mania,	61	56	117	48	45	93			
" Chronic,	24	20	44	26	21	47			
" with Epilepsy, with general Paralysis, .	9	-	9	4	-	4			
" with general Paralysis, .	5	-	5	3	-	$\frac{4}{3}$			
Melancholia,	6	14	20	7	10	17			
Dementia,	28	33	61	30	29	59			
" Senile,	5	6	11	1	2	3			
" with Epilepsy,	10	4	14	4	1	5			
" with general Paralysis,	8	2	10	2	1	3 5 3			
Monomania of Fear,	1	2	3	-	1	1			
of Suspicion,	1	1	2	1	-	1			
Totals,	158	138	296	126	110	236			

TABLE No. 5.

Supposed Causes of Insanity of Patients admitted into the Hospital from January 18, 1833, to September 30, 1868.

			18	68.	PREVI	ously.
CAUSES.			Males.	Females.	Males.	Females.
Apoplexy,			_	_	1	2
Asthma,			-	-	1	-
Bronchitis,				-	_	1
Bowels, Disease of,			_	_	1	_
Cancer,			_	-	_	1
Chorea,			_	_	_	3
Constipation,			_	_	200	_
Convulsions,				-	10	12
Dysentery,		- 1	_	_		9
D		- 1			2 3	2 2
77 15	•		14	4	188	69
E D'			11	1	3	3
Eruptive Diseases,			-		9	0
Eyes, Disease of,				-	2	1
Eyes, Loss of,					1	1
Erysipelas,			-	-	=0	
Fevers,	•		-	1	52	72
Hysteria,			-	1	-	1
Hemorrhoides,			-	-	1	1
Ill Health,			4	6	257	944
Influenza,			-	-	1	3
Insolation,			2	-	19	-
Idioey,			-	-	18	10
Laryngitis,			-	-	-	-
Measles,			-	-	4	6
Nervous Irritation,			-	-	-	-
Nymphomania,			-	-	-	4
Old Age,			1	3	30	34
Otitis,			-	-	-	-
Paralysis,			12	2	91	30
Pneumonia,			-	-	-	-
Rheumatism,			-	-	5	1
Scrofula,			2	2	4	4
Sea-sickness,			-	-	1	4 1 2 3 3
Somnambulism,			-	-	-	2
Suppressed Eruptions, .			-	-	4 1 1	3
Suppressed Ulcer,				-	1	3
Satyriasis,			_	-	1	The second
Tic Douloureux,			-	-	_	2
Tumor,			_	_		2 1
Whooping Cough,			-		1	_
Amenorrhœa,			_		-	23
Lactation, Excessive, .	- 1		_			4
Menorrhagia,		13			-	10
Menorrhagia, Suppressed,						27
Miscarriage,	3.0		,			5
miscarriage,			100		-	0

TABLE No. 5 .- Concluded.

			18	68.	PREVI	OUSLY.
CAUS	ES.	-	Males.	Females.	Males.	Females.
Danamana		WEEKS !				12
Pregnancy, .			-	12	-	228
Puerperal, .			-		_	
Turn of Life,			-	9	-	90
Amputation of Leg,			-	-	1	-
Bathing in Cold Wa	ater, .		-		3	-
Drinking Cold Wat	er, .		-	-	1	10
Exposure to Cold,			-	-	11	13
Injuries by Falling,	&c., .		-	-	21	7
Injury of Head,			3	2	61	14
Injury of Spine,			1 7	-	5	8
Lead, Poison of,			5	-	5	-
Lightning, Stroke o	f, .		-	-	.7	1
Labor, Excessive,			-	-	44	60
Loss of Sleep, .			-	-	1	3
Study, Excessive,			-	-	29	12
Spiritualism, .			-	-	22	24
Criminal Trial,			-	-	-	1
False Accusation,			-	-	-	1
Imprisonment, .			-	-	4	1
Death of Relatives,			-	-	31	90
Domestic Trouble,			-	-	115	346
Marriage, Unhappy	, .		2	6	2	5
Disappointment in I	Love,		-	6	67	102
Disappointed Ambit	ion, .		1	-	9	9
Home Sickness,			-	-	6	18
			-	-	21	24
Seduction, .			-	-	-	3
Millerism, .			-	-	9	6
Political Excitemen	t, .		-	_	10	1
Religious Excitement			5	2	158	177
Pecuniary Trouble,			_		145	38
Poverty,			_	_	1	1
Poverty, Fear of,			_	_	32	8
Prosecution, .	•				1	_
Giving up Business,						
Change of Business,			1		9	
Violent Temper,	, .		1	-	2	15
Jealousy,			-	-	18	28
			30	4	630	87
Intemperance,			90	4		
Opium, Use of,				-	3 2	9 7
Tobacco, Use of,			04	6		
Masturbation, .			24	0	409	69
Venery, Excess of,			10	10	1 142	1 101
Unknown,	· · ·		12	18	1,143	1,164
Hereditary or Perio	odical,		45	55	-	-
Totals, .			158	138	3,937	3,965

The foregoing table shows the assigned causes of insanity of the patients admitted during the year, and also of all the patients admitted in previous years since the hospital was opened. The classification is given as indicating very clearly the relation of cause and effect in the progress of mental disease. It does illustrate to some extent the predisposing influences as to whether they are moral or physical in their nature. In this respect the table is valuable, having been carefully kept nearly thirty-six years, and embracing more than eight thousand cases.

I have endeavored to re-arrange and classify anew the whole number of cases, and show in a more acceptable manner the conditions and circumstances influencing the health of the patients previous to invasion of mental disease.

Having personally known a majority of all the patients admitted to the hospital, and having carefully studied the histories of all others, I may be able to present a new classification in my next annual report.

Table No. 6,

Showing the Ages of Patients Admitted, Discharged Recovered, not Recovered, and Died during the Year.

AGES.	Арм	ITTED.		ERED.		VERED.	DIED.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	
Less than 15,.	_	1	_	2	-	1	_	_	
From 15 to 20,	8	5	1	2 2	2	6	-	-	
20 to 30,	37	26	21	11	17	10	2	1	
30 to 40,	40	30	16	9	17	12	1	2	
40 to 50,	30	40	8	11	14	18	6	2	
50 to 60,	22	11	12	6	9	8	6	3	
60 to 70,	6	15	2 2	6	3	5	1 5	1	
70 to 80,	12	7	2	1	1	2	5	1	
80 to 90,	-	1	-	-	-	-	-	2	
Unknown,	3	2	-	-	1	-	-	-	
Totals,	158	138	62	48	64	62	21	12	

TABLE No. 7,

Showing the Ages of Patients Admitted, Discharged Recovered, not Recovered, and Died, from January 18, 1833, to September 30, 1867.

AGES.	Арм	ITTED.	100000000000000000000000000000000000000	EGED RE-	0.0000000000000000000000000000000000000	RGED NOT VERED.	DIED.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females	
Less than 15,.	33	27	7	11	21	12	2	2	
From 15 to 20,	338	243	130	148	71	68	15	16	
20 to 30,	1,042	990	519	505	376	385	69	75	
30 to 40,	966	1,046	467	503	410	383	106	100	
40 to 50,	832	857	352	395	299	291	112	100	
50 to 60,	440	482	193	226	166	158	79	87	
60 to 70,	266	229	93	108	103	71	58	58	
70 to 80,	104	75	24	26	27	21	44	25	
80 to 90,	1	15	6	2	5	4	6	7	
Unknown,	1	1	-	-	-	-	-	-	
Totals,	3,937	3,965	1,791	1,924	1,418	1,393	491	470	

Table No. 8,

Showing the Duration of Insanity before Admission of Patients Admitted, Discharged Recovered, not Recovered, and Died during the Year.

	Adm	itted.		arged vered.		'd not vered.	Di	ed.
DURATION OF INSANITY.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
Insane 1 year or less,	86	74	44	38	11	16	5	6
More than 1 year, and less than 2 years,	15	14	9	7	14	13	2	2
More than 2 years, and less than 5 years,	16	19	3	3	13	16	9	2
10 years,	11	9	-	-	16	10	2	-
15 years,	13	5	6	-	3	4	3	-
20 years,	5	3	-	-	1	1	-	-
25 years,	4	5	-	-	1	1	-	2
30 years,	2	3	-	-	1	1	-	-
Thirty years or more,	5	5	-	_	4	-	-	-
Totals,	158	138	62	48	64	62	21	12

TABLE No. 9,

Showing the Duration of Insanity before Admission of Patients Admitted, Discharged Recovered, not Recovered, and Died, from January 18, 1833, to September 30, 1867.

	Adm	itted.	Dischar	ged Re- red.	Dischar	ged not vered.	Die	ed.
DURATION OF INSANITY.	Males.	Females.	Males.	Females.	Males.	Females.	Malcs.	Females.
Insane one year or less, .	2,486	2,679	1,378	1,505	672	640	244	288
More than one year, and less than 2 years,	164	130	176	161	122	94	35	17
More than 2 years, and less than 5 years,	549	521	118	136	210	191	93	67
More than 5 years, and less than 10 years, .	303	280	48	57	214	208	38	31
More than 10 years, and less than 15 years, .	158	170	14	23	112	104	32	27
More than 15 years, and less than 20 years,	73	47	9	9	46	66	20	11
More than 20 years, and less than 25 years, .	50	44	7	-	33	36	5	8
More than 25 years, and less than 30 years, .	21	16	5	1	11	10	7	6
Thirty years or more, .	33	29	2	5	13	13	. 9	7
Unknown,	100	49	24	21	45	31	8	8
Totals,	3,937	3,965	2,791	1,924	1,478	1,393	491	470

TABLE No. 10,

Showing the Civil Condition of Patients Admitted, Discharged Recovered, not Recovered, and Died during the year.

CIVIL	Армі	TTED.		RGED RE-	THE RESERVE OF THE PERSON NAMED IN COLUMN TO	RGED NOT VERED.	DIED.		
CONDITION.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females	
Unmarried,	75	50	30	13	40	25	5	2	
Married,	67	59	26	21	18	25	14	7	
Widowers,	16	-	5	-	4	-	2	-	
Widows,	-	29	-	14	-	12	-	3	
Unknown,	-	-	1	-	2	-	-	-	
Totals,	158	138	62	48	64	62	21	12	

Table No. 11,

Showing the Civil Condition of Patients Admitted, Discharged Recovered, not Recovered, and Died, from January 18, 1833, to September 30, 1867.

CIVIL	Армі	TTED.		RGED RE-		RGED NOT	D	DIED.		
CONDITION.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.		
Unmarried, .	2,072	1,686	890	769	893	732	187	198		
Married, .	1,661	1,778	828	917	517	507	241	182		
Widowers, .	179	-	70	-	56	-	57	-		
Widows, .	-	480	-	235	-	140	-	88		
Unknown, .	25	21	3	3	12	14	6	2		
Totals, .	3,937	3,965	1,791	1,924	1,478	1,393	491	470		

TABLE No. 12,

Showing the Occupation of Patients admitted to the Hospital from January 18, 1833, to September 30, 1868.

			1000,	10 25	рето	67 00	', 1	000.	
occu	JPAT	TION	OF	маг	ES.			1868.	Previously.
Auctioneers,								_	2
Armorers,								-	3
Authors, .								-	3
Blacksmiths an	d Iro	n-wor	rkers,					2	70
Bakers, .								_	12
Butchers, .								_	5
Book-agents,								-	2
Book-binders,								1	2 3
Broom-makers,								_	2
Book-keepers,								_	10
Brittania-work	ers.							/-	2
Brick-makers,								_	6
Bellows-makers					Mil			_	2
Barbers, .	,							3	16
Clergymen,								_	25
Carvers, .									3
Carpenters,	:	•	•	•	•			6	127
Coppersmiths,			•	•	•	•		_	9
	•			•	•				22
Coopers, . Cabinet-makers								_	17
	5,			*					16
Clothiers, .								-	
Comb-makers,				•				-	. 4
Confectioners,								-	3
Card-makers,								-	1
Chair-makers,								-	3
Cigar-makers,								-	6
Clerks, .								9	111
Carpet-weaver	8,							-	3
Caulkers, .								-	3
Camphene-dist	illers,							-	3
Dyers, .								-	3
Druggists,								-	3
Drovers, .								-	2
Daguerreotype	ists,							-	2 4 2 4
Engineers,								2	2
Engravers,								-	
Editors, .								-	4
Expressmen,								-	14
Farmers, .								26	763
Fishermen,								_	35
Gardeners,								-	10
Glass-blowers,								_	4
Hotel-keepers,									14
Hatters, .								1	8
Harness-maker	s.							î	14
Hackmen and		sters.						_	37
Jewellers,								3	21
					1				

TABLE No. 12—Continued.

occu	PA	TION	OF	MA	LE	S.		1868.	Previously.
Lawyers, .								_	16
Laborers, .								39	890
Manufacturers,								1	32
Millers, .									6
Merchants,								2 '	161
Masons, .								4	32
Miners, .	•							_	4
Miniature-pain	ter.							Bar S	1
Mat-makers,	,								3
Musicians,		•						. 9	8
Machinists,								5	55
								0	7
Operatives in 1	vi;ii.							8	94
Palm leaf split	ton	, .						0	1
Painters, .	ect,							4	49
Printers, .						,		1	35
						1.		2	28
Physicians,								2	
Paper-makers,								-	7
Peddlers, .									16
Potter, .								- 1	1
Pump and Bloo	ek n	nakers	, .					- 1	4
Pattern-makers								-	4
Plumbers,								-	5
Police Officers,								-	3
Rope-makers,								-	11
Restaurators,	: -							1	12
Shoemakers an								11	315
Sail-makers,								-	9
Soap-makers,								-	10
Sash and Blind	ma	kers,				*		-	3
Sea-captains,								2 2	16
Sailors, .									161
Students, .								1	- 59
Ship-carpenter	s,							-	9
Shop-keepers,								3	5
Stone-cutters,									13
Soldiers, .								2 .	27
Sexton, .								-	1
Stevedore,									1
Surveyors,									2
School-boys,								2	29
Tailors, .								1	28
Teachers, .		100				11		-	38
Tobacconists,									3
Tinners, .					1			_	8
Tanners, .		120				100		4	26
Umbrella-make								_	2
Wheelwrights,			1000		1		100		18
No occupation,		10						7	242
No occupation,	1								
Totals,								158	3,937

Table No. 12-Concluded.

OCCUPA	TIO	NOF	FEA	IALI	ES.		1868.	Previously
Actresses, .							_	2
Cooks,							. 1	64
Engraver, .							_	1
Housekeepers, .							77	2,128
Housemaids, .							23	408
Laundresses, .							-	. 4
Music teachers,							-	3
Midwives, .							-	2
Nurses,							1	14
Operatives in M	ills					. 1	10	227
Seamstresses, .							23	746
School-girls, .							1	45
Teachers, .							2	82
Type-setters, .							_	3
No occupation,							7-	236
						-		
Totals, .							138	3,965

Table No. 13.

Diseases which have proved fatal, from January 18, 1833, to September 30, 1868.

					18	68.	Previ	ously.
DI	SEA	SI	S.		Males.	Females.	Males.	Females.
Apoplexia, .					1	-	16	11
Asphyxia, .					-	1	2 4	7
Asthma,					-	-	4	1
Ascites,					-	-	5	7
Antochiria, .					1	-	16	11
Bronchitis, .					-	-	2	-
Carcinoma, .					-	-	2	2
Cardionosus, .					-	-	13	14
Cholera,					-	-	5	-
Cholera Morbus					-	-	2	3
Cystitis,					-	-	Li .	1
Dysenteria, .					-	-	12	6
Delirium Treme	ens,				-	-	4	-
Enteritis, .					-	-	6	9
Epilepsia, .					4	1	74	37
Erysipelas, .					-	-	9	10
Hepatitis, .					1	-	-	2
Hydrothorax, .					-	- 1	1	1
Hernia,					-	- 1	1	-
					-	1	38	58

Table No. 13-Concluded.

DISE	0.70	0		18	68.	Prev	iously.
DISE	LSE	э.		Males.	Females.	Males.	Females
Mania, Exhaustive				2	2 1	15	15
Marasmus, .				1	1	72	70
Meningitis, .				-	-	11	15
Mortificatio, .				-	-	-	1
Necropneumonia,				-	-	1	2
Paralysis,				9	1	55	20
Phthisis Pulmonali	s,			1	2	65	124
Pleuritis,				-	-	-	2
Pneumonia, .				1	- 1	15	9
Senectus, .				-	3	29	21
Typha Mania, .				-	_	8	11
Typhoid Fever,				_	_	8	6
Variola,				-	-	1	-
Totals, .				21	12	491	470

TABLE No. 14,

Showing the Admissions from each County, from January 18, 1833, to September 30, 1868.

				1868.			
			Males.	Females.	Totals.	Previously.	Whole No
Barnstable,			_	_	_	128	128
Berkshire,			-	-	-	190	190
Bristol, .			1	1	2	294	296
Dukes, .			1	-	1	19	20
Essex, .			29	29	58	1,159	1,217
Franklin,			1	-	1	126	127
Hampden,			1	4	5	372	377
Hampshire,		. 1	1	2	3	325	228
Middlesex,			52	40	92	1,386	1,379
Nantucket,			_	-	-	32	32
Norfolk, .		.	5	7	12	637	. 649
Plymouth,			_	_	_	238	238
Suffolk, .			7	9	16	742	758
Worcester,			59	45	104	2,312	2,303
Other States,			1	1	2	42	44
Totals,			158	. 138	296	7,902	8,198

TABLE No. 15,

Showing the Whole Number of Patients during the last year, the Average Number, the Number at the end of each year, the Expense of each year, the Annual Expense for each Patient, and the Expense of each Patient per week for each of the Thirty-six years the Hospital has been in operation.

YEARS. Whole Number. Number	end of each	Current Expenses of each	Annual	Expense per
	rent.	Year.	Patient.	Week for each Patient.
		rear.	rations	each rationt.
	1			
1833, . 153 107	114	\$12,272 91	\$114 67	\$2 25
1834, . 233 117	118	15,840 97	135 38	2 60
1835, . 241 120	119	16,576 44	137 30	2 64
1836, . 245 127	138	21,395 28	168 44	3 12
1837, . 306 163	185	26,027 07	159 64	3 07
1838, . 362 211	218	28,739 40	136 20	2 62
1839, . 397 223	229	29,474 41	132 16	2 53
1840, . 391 229	236	27,844 98	121 59	2 33
1841, . 399 233	232	28,847 62	123 81	2 38
1842, . 430 238	238	29,546 87	111 12	2 13
1843, . 458 244	255	27,914 12	114 40	2 20
1844, . 491 261	263	29,278 75	112 17	2 15
1845, . 656 316	360	43,888 65	138 88 .	2 66
1846, . 637 359	367	39,870 37	111 06	2 13
1847, . 607 377	394	39,444 47	104 62	2 01
1848, . 655 404	409	42,860 05	106 09	2 05
1849, . 682 420	429	40,870 86	97 31	1 87
1850, . 670 440	441	46,776 13	106 40	2 04
1851, . 704 462	466	52,485 33	112 61	2 16
1070 777	532	43,878 35	85 20	1 64
1050 000 500	520	53,606 66	103 14	1 98
1074 010 100	381	53,221 52	123 77	2 38
1000 000	336		157 29	3 02
1000 500	376	54,895 88 45,631 37	128 64	2 47
10FF 04F 00F	372	49,004 75	124 04	2 38
	301		102 86	2 39
				3 01
	317	48,363 33	156 51	
1860, . 532 324	331	47,757 01	147 39	2 83
1861, . 583 369	379	54,748 53	148 37	2 84
1862, . 600 401	396	53,043 88	132 18	2 50
1863, . 611 398	399	66,082 36	166 03	3 19
1864, . 625 366	344	66,612 00	182 00	3 50
1865, . 565 350	343	73,772 41	211 37	4 06
1866, . 630 368	381	88,398 73	239 28	4 60
1867, . 669 389	355	86,930 88	223 47	4 30
1868, . 651 370	382	72,054 59	197 60	3 80

No epidemic prevailed to any extent during the year, and the health of the patients was, in general, good.

The cold, wet spring, the very severe weather of summer, and the sudden changes of the temperature during almost the entire year, exerted an unfavorable influence on the sanitary condition of such patients as were enfeebled by age and exhausting bodily and mental disorders. The deaths of thirty-three patients,—twenty-one men and twelve women,—have been somewhat less than during the preceding year; both absolutely, and when calculated in reference to the average population. By referring to the proper table it will be seen that the mortality for the year reached nine per cent. of the average number of residents, and five per cent. of the whole number of residents during the year; while the average mortality, since the opening of the institution, has been a fraction more than eight per cent. on the average number of patients, and a fraction less than five per cent. on the whole number of residents.

On comparing the mortality for the sexes separately, it will be found, as has been before noticed, that any seeming increase in the death-rate is nearly confined to male patients. When the rate of mortality in the hospital is considered, it must not be forgotten how large a proportion of the more feeble inmates are advanced in life,—more than one-third of those who died having passed their sixtieth year,—nor should it be forgotten that nearly all are broken in health of body and mind long before their admission to the hospital.

As to the causes of death, there must be noticed the large proportion from paralysis, epilepsy, apoplexy and other cerebral disorders, of which, altogether, there were fifteen cases; and also the proportion of thoracic diseases, of which there were as many as six cases: making, altogether, twenty-one deaths out of the thirty-three tabulated. The remaining twelve embrace a variety of cases, the character of which is shown in the table No. 13.

Several cases were brought to the hospital in nearly a dying condition, and ought not to have been sent to a hospital at all. Their transit here most likely hastened their death, and entailed upon the institution an unnecessary expense in nursing and attendance, besides adding to our bills of mortality. They seem to have been committed simply because they were not cleanly in their habits, and required nursing and attendance. These patients should be taken care of elsewhere, for the few days or weeks they may live, and not be sent to an institution which should be kept as far as possible for curative purposes.

It will be seen by reference to table No. 15, that while the average number of patients was less than during the preceding year, the average weekly expense was reduced from four dollars and thirty cents to three dollars and eighty cents,—a fact which seems to promise for the future something of our old-time financial prosperity. The weekly expense steadily advanced during the war until it reached the sum of four dollars and sixty cents in 1866. While the cost of support has been materially lessened, the property of the Commonwealth has not been suffered to deteriorate, nor has there been any reduction in the quality or quantity of the supplies.

In fact, the whole treatment of the patients, in a medical, moral and hygienic point of view, has received a full share of attention, so that the institution might be, as it has been, as far as possible, curative, and afford relief in those cases where recovery seemed impossible.

Insanity is so essentially a disease of debility, that, as a necessary starting point to its successful treatment, a good and generous dietary is indispensable. No less desirable are faithful and skilful nurses and attendants. In addition to this, large outlays must be made, annually, to provide other comforts, without which little can be accomplished.

Add to all this the expense necessary for the annual repairs of an establishment subject to the hard usage of a hospital for the insane, and it will not be expected that the weekly expense per patient can be reduced very much lower.

All the usual sources of intellectual occupation are kept up, as formerly,—the library, periodicals, and daily and weekly papers. The lectures, concerts, social re-unions have been the means of giving much comfort and relief to our patients who would otherwise have suffered from the dull monotony of a hospital routine. The usual recreations of games, rides, walks, and everything that can be made available for the healthy and innocent occupation of mind, have been freely encouraged and employed. I ought not to omit the daily religious services in the chapel, and the frequent, well-timed visits of the Chaplain, Rev. George Allen, as among the best and highest prized privileges of the patients.

The usual tables showing the extent to which the patients have been industriously occupied by the amount of work exe-

cuted in the house, in the shops and in the gardens and on the farm are necessarily omitted. But when I remind you that last year nearly thirty thousand days' work were accomplished, and nearly the same amount in each of several previous years, you will be ready to believe that a respectable degree of industry has marked the year just closed.

The great disproportion between the employed and the aggregate number of patients is always noticed and often commented upon. Those persons who regard this disproportion unfavorably are apt to overlook the greatly impaired physical condition of a large majority of insane persons. Regarding as I do occupation as one of the most important curative agents in the treatment of insanity, and urging its adoption upon all, both in and out of my own hospital, it ought of course to be my desire to bring this curative agent into full force.

When we look for a moment at the population of the house, it is evident that we cannot draw to a much greater extent upon the fluctuating portion of it for carrying on the process of either trade or farm labor. This class of our patients, to us, improve, or recover and go away. During a large part of the time they are with us, they not only are unfit for labor, but require extraordinary care and attention to preserve their health and lives. Then, the smaller class who sicken and die are not to be regarded in reference to any plan of occupation. If we turn our attention to the more fixed population, we shall find indolence is one of the most marked characteristics of dementia, and that incapacity for useful employment is quite frequently the measure of imbecility.

The general paralytics and epileptics, who comprise classes of large and increasing numbers, are, aside from all considerations of their physical condition, too uncertain and too dangerous for any sort of occupation. It is worthy of remark, that though the employments of the male patients are distributed among a great number of trades, we can claim at any one period but very few competent workmen, in any one of them most useful to the institution. Few indeed are there able to perform daily labor.

For example, we have had committed to our care during the past year four masons, one of whom was discharged at the end of one week, one is upwards of seventy years of age, one is

demented, and constantly excited, and the fourth is demented, but works daily. Of painters there were three admissions, one of whom is a young man, paralytic, one is seventy-four years of age and helpless, and the third was discharged within two months of the time of his admission. Of tailors there was but one admission, a paralytic. Of blacksmiths there were two admissions, one of whom was a man seventy-three years of age, and one young man who was discharged at the end of six weeks. Of shoemakers there were eight admissions, four of whom were discharged within about three months of the time of their admission, one is homicidal and dangerous, two are paralytic, and one is epileptic. Of machinists there were five admissions, two of whom were discharged within two months of the time of their admission, one is homicidal, one paralytic, and one epileptic. Of carpenters there were five admissions, one of whom works daily, two are thoroughly demented, and two are each seventy-nine years of age, and work a little every day.

Very nearly the same conditions will be found to exist, if we follow through the occupations of all those committed to the hospital in the course of any one year.

Notwithstanding all these discouragements, I am more than ever convinced of the value of systematic occupation as a powerful curative agent in the treatment of the insane—not manual labor merely, but occupation, manual and mental, which shall employ to the fullest extent consistent with improving health, every mind and every body under the care and control of the institution.

TABLE No. 16,

Showing the Statistics of the Hospital from January 18, 1833, to September 30, 1868.

	1833.	1833. 1834. 1835.	1835.	1836.	1837.	1838.	1839. 1	1840. 18	1811.	1812.	1843. 1	1814. 1	1815.	1816.	1847.	1818.	1849.	1850.	1851.
						-							-	1			-		1
Whole number admitted,	153	119											15		40	261	273	241	263
Whole number discharged,	88	115	112			100									113	246	253	553	238
Discharged recovered,	25	64				1000		88							03	136	138	125	1111
Discharged improved,	-1	22	23	Last of		2000		1			133	-014			23	32	56	15	38
Discharged not improved,	C)	50	28												20	48	55	625	20
Died,	4	8	00								3500		100		90	90	97	22	39
Eloped,	1	-	1							200			100	19/50	1	1	1	1	1
Whole number in hospital during year,	153	233	241												100	655	685	676	704
Number remaining at end of each year,	114	118	_				1000						123		168	409	459	441	466
Males admitted,	96	69	51		100	in a	1	500							0.0	128	134	129	125
Females admitted,	20	20	200		500		200								35	183	139	112	138
Males discharged,	19	58	22				50.0								86	105	112	91	86
Females discharged,	15	48	46		13						440				85	111	104	81	101
Males died,	೦೦	5	4			1000	300								18	15	19	53	13
Females died,	-	00	4			200	100			No.		Lane.		-	15	15	18	58	56
Sent in by courts,	109	55	06						848.0	4.63	1				35	166	206	194	184
Sent in by friends and overseers, .	44	64	53	S	39	54	99	99	53	41	89	78 1	126 1	134 1	105	95	67	47	7.9
Sent in by governor's warrant,	1	1	1		7		1				- 60		70		1	1	-	1	1
Males recovered,	13	93	27				400	0.00						-	48	67	20	09	99
Females recovered,	12	31	25										203		55	69	68	65	55
Average number in hospital,	107	117	150				133	100							225	404	450	440	462
				-		-		-	-	-	-	-							

TABLE No. 16—Concluded.

			2
-		PPG	
1 1		1001	100 100
20		201	122 103
46		56	56
23		20	
35	7	7	1 27
1	357	357	357
17			
76		1.336	
12		98	
53	_	_	_
07		111	
104		133	
18			13
17		14	14
93		160	
48			
1			
46			
10			
10		349	

TABLE No. 17.

Per Cent.

	1833.	1833. 1834. 1835.		1836.	1837.	1838.	1839.	1840.	1841.	1842.	1843.	1814.	1845.	1846.	1847.	1848.	1849.	1850.	1851.
Per cent. of recovery of recent cases, .	1	82	85	84	89	98	06	91	91	91	88	93	893	79	72	86	84	87	82
Per cent. of recovery of all discharges,.	1	54	46	53	22	55	47	53	49	46	59	54	623	29	49	55	54	54	46
Per cent. of recovery of old cases,	1	20	18	19	25	15	17	55	21	16	29	24	311	28	17	119	24	21	18
Per cent. of admissions of the most prominent causes each year:—																		THE IS	
	8	18	21	22	21	28	27	25	23	18	16	15	13	11	17	18	18	7	6
	6	9	1	1-	9	6	5	4	4	6	13	6	1	10	9	1	C1	4	C1
The affections,	14	12	17	16	16	15	25	17	13	15	6	10	14	1	12	11	10	တ	11
	1	11	6	9	9	10	9	5	4	5	1	00	6	10	00	C1	4	00	61
	25	24	23	15	10	16	00	12	12	S	9	00	10	10	1-	5	4	00	4
	5	9	1	16	21	9	00	1	9	4	3	C1	9	60	C1	C3	4	00	4
Per cent. of deaths of all in the hospital each year,	2.61	2.61 3.43 3.31		3.26	2.94	4.45	5.53	3.83	3.00	2.79	4.80	3.50	4.31	5.96	4.94	4.58	5.45	8.50	5.53
Per cent. of deaths of average number of residents each year,	3.70	er 3.70 6.80 6.66		6.30	5.50	7.58	98.6	6.55	5.15	5.00	9.00	5.74	7.59	10.55	7.95	7.92	9.00	12.95	8.00

TABLE No. 17-Concluded.

Per cent. of recovery of recent cases, . 77 83 80 92 78 76 76 84 86 64 64 64 64 78 78 76 65 40 50 47 Per cent. of recovery of all discharges, 42 46 52 45 48 65 34 48 64 64 64 49.2 60.7 55 40 50 47 Per cent. of recovery of old cases, . 18 24 29 17 15 30 20 18 19 30 26 21 18 17 10 11 42 Per cent. of admissions of the most prominent causes each year:— III health,		1852.	1852. 1853. 1854.	1851.	1855.	1856.	1857.	1858.	1859.	1860.	1861.	1862.	1863.	1861.	1865.	1866.	1867.	1868.	Totals.
42 46 52 46 64 64 61 49.2 60.7 55 40 50 40 64 64 61 49.2 60.7 55 40 50 40 60	Per cent. of recovery of recent cases, .	22	88	80	95	78	92	78	75	92	18	89	74.4	78	73	63	94	54	81.6
most most a series of the seri	Per cent. of recovery of all discharges,	45	46	52	45	48	65	34	48	64	64	61	49.2	7.09	55	40	20	47	51.9
9 7 8 10 19 23 17 19 27 27 25 21 15 12 23 29 29 8 4 3 4 3 1 - 1 1 1 2 - <td>Per cent. of recovery of old cases,</td> <td>18</td> <td>24</td> <td>53</td> <td>17</td> <td>15</td> <td>30</td> <td>20</td> <td>18</td> <td>19</td> <td>30</td> <td>26</td> <td>21</td> <td>18</td> <td>17</td> <td>10</td> <td>11</td> <td>42</td> <td>21.1</td>	Per cent. of recovery of old cases,	18	24	53	17	15	30	20	18	19	30	26	21	18	17	10	11	42	21.1
9 7 8 10 19 23 17 19 27 27 25 21 15 12 23 29 29 29 29 20 <td>Per cent. of admissions of the most prominent causes each year:-</td> <td></td> <td>,</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Per cent. of admissions of the most prominent causes each year:-											,							
3 4 3 4 3 1 - 1 1 1 2 -	Ill health,	6	1~	00	10	19	23	17	19	27	27	25	21	15	12	23	53	25	18.6
6 2 8 5 2 1 1 1 1 1 3 4 2 2 1 1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1	Religious,	00	4	00	4	00	1	1	П	-	1	C1	1	1	1	1	1	C1	4.9
3 2′ 2 1 1 3 4 2 2 1 1 - - 1 2 4 2 4 11 9.7 15 9.5 11 1.2 12 6 7 1 2 4 2 9 4 11 9.7 15 9.5 11 1.2 12 6 7 1 2 4 4 3 1 1 5 4.6 5 12 5.1 8 4 3 10 1 5.81 5.00 5.58 4.60 6.00 6.80 5.1 6.4 5.1 5.6 6.5 5.2 6.8 6.4 9 8.73 7.88 7.80 7.70 9.80 11.00 9.1 9.7 6.4 8.1 8.4 7.5 - 9.3 10 11	The affections,	9	C1	8	5	C1	C1	5	1-	9	7	4	6	60	C1	C1	1	20	9.4
2 2 4 2 9 4 11 9.7 15 9.5 11 1.2 12 11 1.2 15 9.5 11 1.2 12 5.1 8 4 3 10 5.81 5.00 5.58 4.60 6.00 6.80 5.1 6.0 4.6 5.1 5.6 6.5 6.5 6.8 6.4 9.4 11 9.7 6.4 8.1 8.4 7.5 - 9.3 10 11 11 11 12 5.1 6.5 6.5 6.5 6.8 6.4 8 1 11	Property,	ග	51	C1	1	1	1	1	00	4	67	C1	1	1	1	1	1	1	4.0
2 4 4 3 3 1 1 5 4.6 5 12 5.1 8 4 3 10 1 5.81 5.00 5.58 4.60 6.00 6.80 5.1 6.0 4.6 5.1 5.6 6.5 6.8 6 6.4 8.73 7.88 7.90 7.70 9.80 11.00 9.1 9.7 6.4 8.1 8.4 7.5 - 9.3 10 11	Intemperance,	C1	C1	4	C1	6	6	4	11	9.7	15	9.5	11	1.2	12	9	7	11	9.6
5.81 5.00 5.58 4.60 6.00 6.80 5.1 6.0 4.6 5.1 5.6 6.5 6.8 6 6.4 8.73 7.88 7.90 7.70 9.80 11.00 9.1 9.7 6.4 8.1 8.4 7.5 - 9.3 10 11	Masturbation,	0.1	4	4	60	ෙ	1	1	50	4.6	10	12	5.1	S	4	೦೦	10	11	5.7
8.73 7.88 7.90 7.70 9.80 11.00 9.1 9.7 6.4 8.1 8.4 7.5 - 9.3 10 11	Per cent. of deaths of all in the hospital each year,	5.81	5.00	1000	4.60	00.9	6.80	5.1	6.0	4.6	5.1	5.6	6.5	5.2	6.8	9	6.4	ro	4.9
	Per cent. of deaths of average number of residents each year,	8.73	7.88		02.2	9.80	11.00	9.1	7.6	6.4	8.1	8.4	7.5	1	9.3	10	=======================================	6	8.1

TABULAR VIEW

Of the Condition of the Patients in the Hospital, from October 1, 1867, to September 30, 1868, inclusive.

1							-;						
Homicidal. Periodical.							Periodical.		do	op pu			
	tary.									Sui. and			
Suicidal. Hereditary.	Heredit	qo	qo				do		do do	op	qo		do
In what state.	Not improved Hereditary.	op	Improved	op	Not improved	op	Improved Not improved	Improved	Not improved do Improved Not improved	do Improved	Not improved	qo	Improved Not improved
Discharged or Remaining.	4 mths Remains	qo	qo	qo	op	op	qo	do	99999	op	op	do	do do
Time spent in Hospital		9 mths	6 mths	5 mths	5 mths	7 mths	9 mths 9 mths	-	9 mths 1 mth 1 mth 11 mths	5 mths 4 mths	5 mths	2 mths	4 mths 11 mths
Time	31 yrs	29 yrs	29 yrs	28 yrs	28 yrs	26 yrs	25 yrs 24 yrs	24 yrs	23 yrs 23 yrs 23 yrs 22 yrs	22 yrs 22 yrs	21 yrs	20 yrs	
By whom committed.	6 months Private Bond	Probate Court 29 yrs	The Overseers 29 yrs	Probate Court 28 yrs	2 months Private Bond	Probate Court 26 yrs	do .	op	Private Bond Probate Court Private Bond	op do	qo	op	4 months Probate Court 19 yrs 7 years do 18 yrs
Duration before admission.	6 months	3 do	2 do	6 years	2 months	1 year	6 years 7 do	op g	6 do 5 weeks 24 years 5 do	1 week 6 months	2 do	5 years	4 months 7 years
	•	•	•	-	•			•		• •		•	• •
Supposed Cause.		• •					· · · · · ·		on,	ment, .	Miction,		
SoddnS	Love affair,	Unknown,	Ill health,	qo	op	Unknown,	Masturbation,	Unknown,	Masturbation, Convulsions, Masturbation, do .	Disappointment, .	Domestic affliction,	Ill health,	Unknown, Ill health,
Civil condition.	Single	do	do	qo	Married	Single	do do	Female Married	Single do do	do Married	op	Single	do
Sex.	Female Single	Male	Female	do	qo	Male	do	Female	Male do Female Male	qo qo	Female	op	Male Female
Age when admit- ted.	37	24	30	. 26	31	28	888	36	2828	26 48	44	24	28
Time of Admiss'n.	582 May 26	876 Dec. 28	895 March 1	1092 April 2)	1252 April 29	Feb. 28	Jan. 14 Nov. 16	1844 Oct. 2	ROAS	April 18 May 11	2645 April 16	July 11	May 12 Nov 6
No.	585	876	895	1092	1252	1409 Feb.	1583 Jan. 1772 Nov.	1981 Oct.	2047 Jan. 2220 Aug. 2229 Sept. 2280 Nov.	2412 April 2419 May	2645	2981 July	3191 May 3334 Nov

	Periodical.	op			op op		Periodical.
Hereditary.	op	op op	999	qo	eg eg eg	Suicidal. Hereditary.	99999
Improved do do do Not improved	Exhaustion Improved do	do do Not improved do Improved	9999	do Not improved Improved	do Not improved Improved	do Not improved Recovered Improved Not improved Improved	Not improved Improved do do
Remains do do	Died Remains do	99999	୫୫୫୫	Discharged Remains Discharged	Remains do not improduced In mths Discharged Improved	Remains do Discharged Remains do	
8 mths 6 mths 9 mths 9 mths	11 mths	8 mths 1 mth 1 mth 10 mths 10 mths	5 mths 4 mths 2 mths 9 mths	10 mth 6 mths	10 mths	6 mths 5 mths 9 mths 5 mths 1 mths	l muth l mth h th
18 yrs 18 yrs 17 yrs 17 yrs	15 yrs 15 yrs 14 yrs	14 yrs 14 yrs 14 yrs 13 yrs 13 yrs	13 yrs 13 yrs 13 yrs 12 yrs	11 yrs 12 yrs 11 yrs	11 yrs 11 yrs 10 yrs	10 yrs 10 yrs 9 yrs 10 yrs 10 yrs	
6 months Probate Court 5 years 2 do The Overseers 20 do Private Bond	The Overseers do Probate Court	The Overseers Munic'l Court The Overseers do Probate Court	do do do do	do The Overseers Probate Court	do The Overseers Probate Court	do Private Bond Probate Court Private Bond The Overseers Probate Court	Gov, Order do do
6 months 5 years 2 do 20 do	7 do 1 week 3 years	15 30 30 30 30 30 30 30 30 30 30 30 30 30	3 do 5 do 5 do 4 weeks	2 years 3 do	2 months 11 years 21 do	1 year 1 do 6 years 8 do 6 do	10 20 20 20 20 20 20 20 20 20 20 20 20 20
Disappointed affections Ill health, Unknown,	Puerperal, do Over-exertion,	Unknown, Domestic affiction, Unknown, Masturbation, Unknown,	Spiritualism, do do	Unknown,	Unknown,	Turn of life,	tion, a,
Single Married Single do	Married do do	Widower do Single do do	Married do Single Married	do Single do	999	Male Single do Married female do Married do Married Gemale Single Single Single	Married Single do Married
Male Female Male Female	999	Male do do do	do do Female do	Male Single Male do	Female Male do	Female Male do Female Male	The second name of the second na
8888	8888	84884	4488	200 200 200 200 200 200 200 200 200 200	45 30 47	484884	
Jan. 23 April 2 Dec. 11 do: 28	Sept. 23 do 23 Oct. 19	Jan. 13 Aug. 31 Sept. 2 Nov. 16 do. 20	DYNA	Sept 8 do 30 Dec. 3	Sept. 19 Oct. 13 do 26	April 1 do 15 May 12 June 3 do 9	9999
3380 3427 3605 3613	4395 4414 4431	4493 4684 4688 4741 4741	4832 4851 4882 4959	5137 5157 5198	5417 5433 5450	5580 5580 5580 5585 5602 5602	

TABULAR VIEW-Continued.

Homicidal Periodical.				Homicidal.	Periodical Periodical.
Suicidal. Hereditary.		Suicidal. Hereditary.	Suicidal. Hereditary.	qo	Suicidal. Hereditary.
In what state.	Improved	Not improved do	do do Not improved do do Improved	Not improved do Improved Not improved do	Epilepsy Improved Not improved do do do do Consumption Improved do
Discharged or Remaining.	Remains	do do do Discharged Remains do	Disc Ren	do do Discharged Remains do	narged ains lo lo lo narged ains
Time spent in Hospital.	yrs	yrs 7 mths yrs 5 mths yrs 4 mths yrs 9 mths yrs 10 mths yrs 10 mths		yrs 2 mths yrs yrs yrs yrs 11 mths yrs 11 mths	yrs 6 mths Disch yrs 3 mths Disch yrs 6 mths Rema yrs 5 mths d yrs 4 mths d yrs 4 mths yrs 3 mths Disch yrs 4 mths yrs 1 mth Rema
By whom committed.	Probate Court 10 yrs Gov. Order 10 yrs	Probate Court 9 Private Bond 9 Probate Court 9 do do 8 do do 8 do do 8 do do 8	00000000	The Overseers 8 Probate Court 8 do 8 The Overseers 7 Private Bond 7	Probate Court Police Court Probate Court Private Bond The Overseers Probate Court The Overseers Probate Court Thrivate Bond Thrivate Bond Thrivate Bond
Duration before admission.	2 years	6 weeks 1 year 9 years 2 years 2 do 3 months 3 years 10 do	do do do do year	6 do 1 year 4 days 3 years	3 do 1 week 6 months 1 year 1 do 3 years 12 do 112 do 18 do 19 do 10 do 11 do
Supposed Cause.	Domestic affliction, .	Unfortunate marriage, Epilepsy, Ill health, Onknown, Domestic affliction, Epilepsy,	Loss of property, Religious excitement,	Masturbation,	Epilepsy, Unknown, Epilepsy, Spiritualism, Chikown, do do do do
Clvil condition.	Married	7 7	do Married Single Married do	Single do do Married do	do do do do do do do do do do do do do d
Sex.	Male Female	do do do do do Marie Female Single Male Go Marrie Male Male Marie Marie Marie Marie Marie Female Single	le.	Male Female Male do Female	Male do do do do do do Male Female
Age when admit- ted.	40	882244368	838883	848888	2922348943
Time of Admiss'n.	5735 Sept. 20 5739 do 20 1859	5850 Mar. 14 5880 April 19 5903 June 4 5908 do 10 5909 do 11 6962 Aug. 28 6003 Nov. 29 6007 Dec. 8	Feb. do do do May	Sept. 22 Sect. 5 Oct. 6 do 15	できるされることでき
No.	6735 5759	5850 Mar. 5880 April 5903 June 5908 do 5909 do 5962 Aug. 6003 Nov. 6007 Dec.	6022 6039 6047 6067 6074 6097	6189 6189 6217 6225	6273 Feb. 6301 Mar. 6310 April 6325 May 6350 do 6354 June 6382 July 6390 do 6423 Aug.

Periodical.		do Homicidal.	Periodical. Homicidal.	Periodical.
Hereditary.	op op	do Suicidal.	Hereditary. Suicidal. Hereditary.	Suicidal. Hereditary.
Improved do do do do do do do do do	do Improved	Improved Not improved do Improved Not improved	Improved do do do do do Not improved Improved do	Improved Suicidal. Not improved Hereditary. Improved do
Remains do do do do	do Benains do do do do do do do do do do do do do	do do Discharged Remains	do do Discharged do Remains Discharged Remains	999999
11 mths 10 mths 9 mths 9 mths	9 mths 6 mths 6 mths 6 mths 5 mths 5 mths 4 mths 4 mths 4 mths 2 mths 2 mths 2 mths 2 mths 2 mths 2 mths 2 mths 3 mths 4 mths 4 mths 4 mths 5 mths 6 mths 6 mths 7 mths 7 mths 7 mths 8	10 mths 9 mths 9 mths 11 mths 9 mths	8 mths 7 mths 14 dys 3 mths 5 mths 10 mths 3 mths	2 mths 2 mths 2 mths 1 mth 1 mth
7 yrs 6 yrs 6 yrs 6 yrs 6 yrs	6 yrs 6 yrs 7 yrs 7 yrs 7 yrs 7 yrs 8 yrs 9 yrs 9 yrs 8 yrs 9 yrs 9 yrs 8 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 8 yrs 8 yrs 9 yrs 8 yrs 9 yrs 8 yrs 9 yrs 8 yrs 9 yrs 9 yrs 8 yrs 9 yrs 8 yrs 9 yrs 9 yrs 9 yrs 8 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs 9 yrs	6 yrs 6 yrs 6 yrs 6 yrs 6 yrs		5 yrs 5 yrs 5 yrs 5 yrs 5 yrs
Probate Court do do do The Overseers Private Bond Probate Court	do do do do do do do do Private Bond do do Private Bond do Probate Court do	The Overseers Probate Court do do do Private Bond	The Overseers do do do do Private Bond	months The Overseers weeks Probate Court months years Private Bond year months Probate Court
3 years 12 do 1 year 14 years 7 do 4 do	10 do 5 do 5 do 3 weeks 10 years 3 do 1 do 17 do 15 do 5 do 5 do	FA	1 years 10 years 2 do 2 do 10 do Unknown 7 years	2 weeks 2 weeks 2 years 1 year 6 months
Domestic affliction, Unknown, Unknown, do do	Epilepsy, Unknown, Epilepsy, Ill health, Epilepsy, Unknown, On Epilepsy, Turn of life, Unknown, Epilepsy, Turn of life, Unknown,		nce,	Loss of property,
Female Widow do Single do Married Female do do Single	Male do do do do do do do Married do Go do do do do Married Male Go do do do Married Male Single do do do do do do do do Single	ale	Male do do Male Married do do Male Go do Constant Single	do do do do do do do Maried do Marie Single
62 II 27 II 499 N 355 II 355 II	250232333333333333333333333333333333333		80822263	
ect. 4	2 128 2 2 2 8 2 2 2 8 2 2 8 2 2 8 8 2 2 8 8 2 2 8 8 2 2 8 8 2 2 8 8 2 8 8 2 8	200000	2	7. 31 7. 24 9. 31 9. 31 9. 31
OGGAGG	A Long Man No No	ZOOOO	J. N. O. N.	5823 July 6823 July 6833 Aug. 6847 do 6880 Oct.
6446 6448 6458 6493 6502 6506	6512 6557 6558 6581 6591 6591 6690 6690 6690 6690	6693 6704 6707 6709 6710	6724 6746 6748 6754 6777 6795 6810	6823 6823 6833 6847 6880

Homicidal. Periodical.	Homicidal.	Homicidal.	Periodical. do
Suicidal. Hereditary.	Suicidal.	do Hereditary. Suicidal. Hereditary.	do do Suicidal.
In what state.	Improved do do Not improved Improved Not improved Improved Epilepsy Faralysis	Not improved do do do do do do do do Not improved do do Not improved do	do Not improved Improved do do Recovered Improved
Discharged or Remaining.	2 mths Benains do 0 mths Remains do 0 mths Discharged Improved 9 mths Died Epilepsy 8 mths do Paralysis		Discharged Remains do do do Discharged Remains
Time spent in Hospital.	tyrs 2 mths Discipled by 11 mths Rem tyrs 10 mths tyrs 10 mths tyrs 10 mths tyrs 10 mths 10 mths 2 mths 10 mths 3 mths Discipled by 11 mths 3 mths Discipled tyrs 8 mths Discipled tyrs 8 mths 10 mths 11 mths	61	yrs 10 mths yrs 1 mth
By whom committed.	months Probate Court years weeks do do do do Board of S. C. months Private Bond do do The Overseers do do The Overseers	months Probate Court month do do do do do Private Bond do Private Bond do Private Bond do Private Bond do do do month The Overseers year Probate Court do The Overseers year do d	Probate Court Private Bond Probate Court Private Bond Probate Court do do
Duration before admission.	2 months 20 years 3 weeks 20 years 20 do 3 do 3 months 15 years 14 do 2 months	2 years 8 months 1 month 10 years 2 do 17 do 6 do 2 do 1 year 1 year 4 years 10 do 3 weeks 22 years	3 months 10 years 7 months 14 years 5 months 7 years
Supposed Cause.	Old age, Masturbation, Unknown, do do Hard study, Ill health, Hard work, Old age,	Unknown, Unknown, Unknown, Unknown, Onknown, Onknown, Epilepsy, Unknown, Unknown, Puerperal, Unknown, Masturbation,	Ill health, Epilepsy,
Civil condition.	Widow Single do do do Widow Married do	Single Married Married Married Single Married Single Married Single Married do do do	do do do do Married Widow Single
Sex.	Female do Male do Female Male Female do Male do Male do Male do Male do Male do Male do	ale	do do do do do
Age when admit- ted.	8664282442	6148882488848888888888888888888888888888	2284238
Time of Admiss'n.	0000000000	8 Jan. 8 Mar. 5 Mar. 5 Mar. 11 do 114 do 21 do 22 May 6 do 11 do 12 do 12 do 12 do 12 do 13 do 20 do 30 do 3	
No.	6889 6896 6905 6912 6915 6920 6921 6921	6938 6971 6977 6977 7008 7008 7008 7008 7008 7008 7008 7	7063 7068 7068 7071 7071

Homicidal. Periodical. Homicidal.	ර දිර දිර	Periodical,	, Homicidal.	qo.	Periodical.
	Suicidal. Hereditary.				qo
Not improved Recovered Improved do Improved do do do Not improved Improved do do do Improved Improved	Not improved do do do do	do do Improved Not improved do Improved	do do do Notimproved	do do do Improved	do Not improved Improved do do do do Paralysis
Remains do d		22222	Disc Ren Disc Ren		do do Discharged Remains do do Died
yrs 11 mths 13 dys 13 dys 12 dys 12 dys 12 dys 15 dys 17 7 mths 15 dys 1	∞∞∞∞∞-	yrs 7 mths yrs 7 mths yrs 5 mths yrs 5 mths yrs 5 mths yrs 5 mths		112811	yrs 20 ds yrs 11 mths yrs 6 mths yrs 11 mths yrs 24 dys yrs 9 mths yrs 2 mths
40100000000000	00 00 00 00 00	00 00 00 00 00 00	00 00 04 00 00	000000000000000000000000000000000000000	20000000
3 years 3 months The Overseers 5 do 1 year 4 years 2 months Probate Court Unknown Board of S. C. 1 week Probate Court 5 years 1 week Probate Court 6 years 1 week Probate Court 6 years 1 week Probate Court 6 do 6 years 1 week Probate Court 6 do	Proba The O Proba	Private Bond Probate Court s The Overseers Probate Court Private Bond		Privat Proba	do months Private Bond months Probate Court
3 years 3 months 15 do 1 year 14 years 2 months Unknown 5 years 1 week 5 years	5 years 1 month 3 months 4 years 5 do	6 months 5 years 32 do 2 months 6 do	12 years 3 months 8 do 15 years	3 do 14 do 1 week 5 years 6 months	20140000
					n, .
Turn of life,	Injury of head, Ill health, . do . Unknown, . do .	Ill health, Epilepsy, Intemperance Puerperal, Inknown	Masturbation, Ill health, do Intemperance,	Unknown, Ill health, Unknown, Epilepsy, Ill health,	Masturbation, Paralysis, Unknown, Puerperal, Disappointment in love, Intemperance, Taking cold,
Female Married do do do Male do Single Go do do Male Go Go Male Go Married Female Married Female Warried Married	Single do do do Married	Female Single Male do do Go do Go do do do do do Single	Widower Single Married	Widower Single do	do Married Single Married Single Widow
Female do Male do Female do Male Female Female Male	do Male Female do Male	Female Male do Female do	Male do do	do do do Male	do do do do do do Male
8684884885		8283884			2482888
ppt. 21 ct. 13 ct. 13 lo 19 lo 29 lo 29 lo 22 lo 22 lo 22 lo 23 lo 24 lo 25 lo 25 lo 25 lo 25 lo 25 lo 25 lo 25 lo 25 lo 26 lo 27 lo	6000 6000 8881			5,47,14,	
7100 Sept. 7111 Oct. 7112 do 7113 do 7116 do 7123 do 7136 do 7137 do 7145 Dec. 7149 do	7163 Jan. 7165 do 7169 do 7173 do 7173 do	7186 do 7196 Mar. 7221 April 7225 do 7227 do			7356 Nov. 7367 do 7375 Dec. 7376 do 7384 do 7394 do

TABULAR VIEW-Continued.

Homicidal. Periodical.	Homicidal. Suicidal. Homicidal.	
Suicidal. Hereditary.	Suicidal. Hereditary. do do do	
In what state.	Not improved do	qo
Discharged or Remaining.	8 mths Remains 8 mths 6 do 8 mths 6 do 7 mths 6 do 7 mths 6 do 1 mths Pied 6 mths Remains 4 mths Bied 6 mths Discharged 6 mths Discharged 6 mths Discharged 11 mths Discharged 3 mths Remains 6 do 1 mth Discharged 3 mths Remains 6 do 1 mth Discharged 1 mth Discharged 2 mths 6 do 1 mth Discharged 1 mth Discharged 1 mth Discharged 2 mths 6 do 1 mth Discharged 2 mth Discharged 3 mth Disc	I mth Remains
Time spent in Hospital.		2 yrs I mth
By whom committed.	The O Privat Probat Probat Privat Sup. C Privat Probat Probat Probat Probat Probat Probat Probat	op
Duration before admission.	ps sq	. Z years
Supposed Cause.	Epilepsy, do do Unknown, Masturbation, do do Paralysis, Pecuniary trouble, Unknown, Disease of brain, Disease of brain, Disease of brain, Death of husband, Unknown, Intemperance, In health, Congenital,	Ill health,
Civil condition.	Single Married do do do Married Single Married Single Single Married Single Married Single Married O do do do do do do do do do	qo
Sex.	ale	qo
Age when admit- ted.	888448888888888888888888888888888888	35
Time of Admiss'n.	Jan. 1866 do do 112 do 124 do 125 do 124 do 125 do do 126 do 126 do 126 do 127 do 12	Sept. 1
No.		7589

Homicidal.	Periodical.	do Homicidal.	Periodical.	Homicidal.
	Suicidal,	op :	Hereditary.	do do do Suicidal.
Improved do do do Recovered Improved do do do Palsy	Improved do do	Not improved Improved Not improved Improved	Recovered Improved do Not improved Improved	do do Improved do Recovered Consumption Improved do do do do do do do
ed ed	Discharged Remains Discharged	do do do Discharged	do do do Remains Discharged	rged us
***************************************	1 yr 11 mths 11 mths 7 dys 1 yr 10 m 26 d 1 yr 7 mths	the li	6 9 9 9	00 00 00
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Puerperal, Masturbation, do Paralysis, Unknown, Ill health, Paraylsis, Unknown, Masturbation, Paralysis,	Epilepsy, do	Turn of life, . Intemperance, Unknown, .	Unknown, Epilepsy, Unknown, do	Masturbation, do do do do Domestic affliction III health, dasturbation, III health, dasturbation, Unknown, destation, destation, different III health, destation, des
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Homicidal. Periodical.	Periodical. Homicidal. Periodical. do d
Suicidal. Hereditary.	omi. do ury.
In what state.	Improved Recovered Not improved Improved Acovered Not improved Imp
Discharged or Remaining.	Remains Discharged Remains do Discharged Remains Discharged do
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Supposed Cause.	Ill health, Unknown, Paralysis, Unknown, Ill health, Ill health, Religious excitement, Religious excitement, Ill health, Unknown, Intemperance, Masturbation, Unknown, Intemperance, Masturbation, Domestic affliction, Domestic affliction, Intemperance, do Masturbation, Domestic affliction, Intemperance, do Masturbation, Intemperance, Intemperance, Intemperance, Intemperance, Intemperance, Intemperance, Intemperance, Old age, Inten of life, Unknown
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Supposed Cause.	Unknown,	Intemperance,	Turn of life,	Disappointmentin love,	Turn of life,	Intemperance,	Ill health.	Intemperance,	Unknown,	Ill health,	Sun stroke,	Domestic affliction,		Spiritualism.	Domestic affliction, .	Ill health,	Unknown,	Intemperance,	Unknown,	. 'uo	nce, .	Ill nealth,		Epilepsy.	Intemperance,	Unknown,
Clvii condition.	Single		Married	Married	Widow	Married	Married			Single	op	Widow	Married	Single	Widow	Married	Single	Married		qo	Widower			Single	Ma	do
Sex.	Male Female	Male	Female	Male	do	Male	Female	Male	Female	qo	qo	do	do	Male	Female	do	Male	do	Female	Male	do	Pomolo	do	Male	do	Female
Age when admit- ted.	40	24	47	38	53	34	8,8	35	38	28	13	40	200	42	989	000	98	22	31	25	689	10	32	22	20	88
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nce,	Unknown, Epilepsy, Ill health, Ill health, Ill health, Masturbation, Intemperance,	Ill health,	Turn of life, Turn of life, Turn of life, Ill health, Unknown, Scrofula,	Epilepsy, Hard work, Ill health, Injury to head, Old age,
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Homicidal.	Homicidal.	Periodical. do	Homicidal. Periodical. Periodical. do do do
Suicidal. H Hereditary. P	Hereditary.	do do	
In what state.	Not improved do Recovered of Exercised Supproved Improved Improved do do do do do do do do do	do do Improved Not improved Improved	Recovered Not improved Exhaustion Not improved Recovered Improved Not improved Hereditary Improved Improved Recovered Improved Im
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Time spent in Hospital.	6 mths 21 dys 6 mths 4 dys 6 mths 6 dys 3 mths 22 dys 5 mths 12 dys 9 mths 12 dys 6 mths 8 dys 9 mths 8 dys 9 mths 8 dys	29 dys 29 dys 19 dys 8 dys 1 dy	2 mths 28 dys 5 mths 25 dys 5 mths 20 dys 2 mths 24 dys 8 mths 25 dys 1 mth 14 dys 7 mths 5 dys 8 mths 21 dys 8 mths 17 dys 6 mths 14 dys 1 mth 24 dys 2 mths 14 dys 2 mths 14 dys 8 mths 17 dys 1 mth 24 dys 2 mths 4 dys 2 mths 4 dys 2 mths 11 dys 2 mths 14 dys 1 mth 24 dys 2 mths 14 dys 2 mths 14 dys 2 mths 14 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 2 mths 1 dys 2 mths 1 dys 1 mth 24 dys 2 mths 1 dys 3 mths 1 dys 2 mths 1 dys
By whom committed.	Private Bond Probate Court do do do Ao Sup. Court The Overseers Probate Court Private Bond Sup. Court	Probate Court do do do Private Bond Probate Court	do do do Private Bond Probate Court Private Bond Probate Court Private Bond Probate Court Private Bond do
Duration before admission.	1 year 8 months 2 years 3 months 3 weeks 6 months 1 year 27 years 5 do	6 months 1 month 15 years 3 do 1 month 3 weeks	1 week 2 weeks Unknown 6 months 1 week 24 years 1 week 16 years 6 months 24 years 1 month 1 week 7 weeks 1 week
Supposed Cause.	Old age, Ill health, do Masturbation, Intemperance, Unknown, Masturbation, Hard work, Epilepsy, Spiritualism,	Loss of property, Paralysis, Injury to head, Epilepsy, Injury to head, Masturbation,	Intemperance, do do do do
Civil condition.	, rd		do do do do do Single Wridow Warried Widow Single Married Widow Single
Sex.	le le	Male do do do do Single do do Female Married Married	do Female Male Female do do do do Anale Female Male Female Male do do do
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Jan. 24 33 Male Married Pecuniary trouble, 1 week Probate Court 5 mths 27 dys Discharged 1 mth 9 dys Discharged 2 do 2 do		Hereditary.		Suicidal.	Hereditary.	op op
Jan. 24 33		Recovered do Improved do do	do Recovered Improved do Suicide Recovered Improved	Recovered Improved Not improved Recovered Improved Not improved	Recovered Improved Not improved Improved do do	Recovered Improved Recovered Improved Recovered Improved
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Jan. 24 33 Male Married Pecuniary trouble, do 25 28 do Married Old age, do 31 41 do Married Old age, do 31 25 Female do Married Old age, do 31 25 Female do Married Old age, do 11 78 Male Married Married Old age, do 12 7 Female Single Epilepsy, do 13 63 do Married Married Go 14 45 do do do do do do do d	न न	ps ns	00 00	y Fs qq	00	years month days years weeks years
Jan. 24 33 Male Married do 25 28 do Married do 31 41 do do do do 31 45 do do do do do 31 25 Female Go do	Pecuniary trouble, Masturbation, Old age, Epilepsy, Unknown, Paralysis, Domestic affliction,	Old age,	do	ince,	Intemperance, Ill health, Epilepsy, Ill health, Paralysis, Ill health, do	,
Jan. 24. 33 Male do 27. 72 26 do do 31 41 do do 31 25 Female do 31 25 Female do 112 7 Female do 12 13 63 do do 22 23 66 do do 24 25 66 do do 27 28 66 do do 28 66 do do 27 28 66 do do 28 66 do do 29 18 51 do do 29 18 Male do 12 29 66 do do 29 18 Male do 12 29 66 do do 28 66 do do 29 18 Male do 19 28 Male do 19 28 Male do 19 28 Female do 19 28 Female do 19 28 Male do 29 66 do do 29 66 do do 29 68 Male do 18 77 Male do 29 64 Male do 29 64 Male do 29 65 Male do 29 66 Male do 29 68 Male do 29 68 Male do 29 68 Male do 29 68 Male do 18 77 Male do 29 68 Male	the sea and sea	E had det to a	do do Widow Married do do			do Widow Single do Married do
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In what state.	Recovered Improved Ao Becovered Improved Mot improved Improved Improved Mot improved
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By whem committed.	week Probate Court do
Duration before admission.	1 week 14 years 4 do 2 weeks 1 year 2 weeks 1 year 2 do 3 months 6 months 6 months 7 weeks 1 week 6 months 1 year 1 do 3
Supposed Cause.	Intemperance, Ill health, Tumor of the eye, Intemperance, Epilepsy, Ill health, do Domestic affliction, Ill health, Intemperance, Ill health, Onknown, do Injury to head, do Inknown, do Epilepsy, do Unknown, Old age, Unknown, Ill health, Old age, Unknown, Ill health, Old age, Unknown, Ill health, Old age, Unknown, Faralysis,
Civil condition.	Married do d
Sex.	Male Marrie Female do do Midov Go Single do Marrie Go Marrie Go Marrie Male do Marrie Male do Marrie Go Marrie Go Marrie
Age when admit- ted.	82882838384444 288824842888888613848
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15 months 1 month 1 year 3 years 20 do 4 months 1 year		2 do 2 weeks 3 months 16 years 2 weeks	months years months weeks week year year year	3 weeks 6 months 8 years 7 Unknown 10 years 2 do	13 years 7 months 2 years 3 do
Unknown, Turn of life, Unknown, do Fever, Paralysis, Unknown,	Domestic ametion, Ill health, Unknown, Injury of head,	Fever,	Amenorrhæa, Masturbation, Hard work, Turn of life, Intemperance, Old age, Puerperal, Ill health,	Intemperance, Constitutional, Unknown, Intemperance, Ill health, Turn of life, Domestic affliction,	Excessive Joy, Ill health, Turn of life, Epilepsy, Unknown,
Male Married Male Married do d	Je.	9	le le	le le	Female Single Male Female Married Male Female Widow
	55 Male 17 do 37 Fema 68 do				22 Fema 35 Male 42 Femal 25 Male 40 Femal
Aprill do	8061 do 30 8062 May 2 8063 do 4	388888	99999999	8078 do 28 8080 do 28 8082 do 26 8083 do 26 8084 do 27 60 26 60 26 60 27	8085 June 8087 do 8088 do 8089 do 8090 do

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Time spent in Hospital.	2 mths 5 dys 3 mths 20 dys 3 mths 15 dys 3 mths 15 dys 3 mths 15 dys 3 mths 15 dys 3 mths 14 dys 3 mths 12 dys 3 m	3 mths 11 dys 2 mths 5 dys 1 mth 3 mths 7 dys	~ F 0 0 4	1 mth 4 dys 3 mths 2 dys 3 mths 2 dys 1 mth 25 dys 3 mths 3 mths 3 mths 3 mths 2 mths 3 mths 2 mths 3 mths 3 mths 2 mths 3 mths
By whom committed.	Probate Court do do Private Bond Probate Court do	do do do The Overseers	do Probate Court Private Bond Probate Court do	Sup. Court Probate Court Private Bond Probate Court Board of S. C. do do Probate Court do do Private Bond do do
Duration before admission.	3 years 1 week 1 years 1 years 2 years 6 months 6 months 2 weeks 9 months 8 years 14 do	hs	1 month 1 year 5 months 2 do 6 years	Unknown 6 months 3 years 1 month 1 do Unknown 10 months 6 weeks 1 month 6 years
Supposed Cause.	Ill health, Use of tobacco, Masturbation, Paralysis, Turn of life, Unknown, Masturbation, Intemperance, Puerperal, Old age, Unknown, Unknown,	Unknown,	Puerperal,	do d
Civil condition.	Female Married do Single do Go Go Maried do Go Male do Go do Go Go Go Married do Go G	do do do Married		Widower Married do Single Married Widow do Single do do
Sex.	Female do do do Male do Male do Co Male do	Female Male do do	ale	do Male do Female do do do do
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Injuries in the army, Masturbation, Domestic trouble, Unknown, do Intemperance, Unknown, do Fever, Unknown, Intemperance, Sun stroke, Intemperance, Unknown, Sun stroke, Intemperance, Unknown, Sun stroke, Onknown, Sun stroke, Unknown, do do do do do do do Domestic affliction, Unknown, do	Ill health,
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In former reports, I have faintly sketched what seemed to me desirable in order to fulfil the important indication in the arrangements for the care and control of persons afflicted with mental disease.

The attention which you have given to the matter has led me to investigate and study the subject faithfully, and to inquire what modifications and improvements, if any, can be made in our present system.

The minds of medical men in all countries are now directed to the same subject, and are contemplating similar measures to those so feebly set forth in the annual reports of your hospital.

In England, asylums which were regarded twelve years ago as models, are now being enlarged and improved by wide departures from the original plans. New asylums are being built upon improved plans. And while this change is going on in existing hospitals, new plans are submitted and approved, embodying entirely new principles of arrangement. On the Continent, the same questions occupy the minds of thinking men.

If we consider that human nature is the same everywhere; that man is, all the world over, subject to the same impulses, and governed by the same motives; and that when insane, insanity assumes the same forms, and is successfully treated on the same general principles in all countries, we certainly ought to take as great an interest in the consideration of this subject as is taken by the humane of other countries.

Our system finds its weakness mainly in the meagre advantage we have at our command to classify, employ and occupy the minds and the bodies of our patients. It overlooks, to a great extent, the important fact that inactivity is incompatible with bodily vigor, and that exercise of all the faculties, bodily and mental, is the best method of preserving health, as well as of regaining it when lost. This law is laid deep in our organization, and cannot be violated with impunity. Any system of treatment not based upon it, or in any way ignoring it, must of necessity prove worse than useless.

If we look carefully at our own management, we shall find that our patients are and must be left too much to their own choice, whether to work or to be idle. No encouragement is held out, no inducement is offered to persuade them to labor. They know almost at once that occupation is not the rule of the institution, and they act precisely as sane men and women would do under similar circumstances. Men are not apt to labor without some adequate motive. The insane will not labor for the benefit of their health, because they do not believe themselves diseased.

What we need most of all is a systematic arrangement and control which puts every one to some occupation. It is not to be expected that the work of any large proportion of the insane will be remunerative. The object will be gained when the faculties, mental and physical, are employed. This woman whose vagaries have controlled all her actions for many years, may not be persuaded to engage in the useful labors of her early life. She will, however, carefully undertake any useless fancy work, and thus employed, be relieved from the thraldom of delusion. This man who refuses to assist the mechanic in any light labor, will enslave himself for years in the pursuit of perpetual motion. This young clerk who cannot confine himself to the duty of an accurate copyist, is employed many weary hours in the equally laborious task of balancing imaginary accounts. To turn this waste of labor into healthy and useful channels, is a work next in importance to that of arousing the dormant energies of the demented and fatuous. How can we accomplish these desirable purposes? We may lay the subject before the whole corps of assistants. If, happily, they are persuaded, and are willing to devote themselves to the duty, where are the means by which they can accomplish the results? We may argue the advantages of occupation with the patients, but can we make it clear to such minds that labor is essential to recovery, and as such is a sufficient inducement to command their attention?

If a strong, active, convalescent mechanic is induced to labor, can we regularly pay him for his work? If we remunerate one, can we all? If a delicate lady is directed to occupy herself in music and drawing, in addition to the ordinary occupation of needle-work, can we assure her of a speedy return to society and friends? If we advise a gentleman to keep up his habits of reading, writing and conversation, can we afford accommodation for his library? Can any number of such visit the public library? When all these obstacles are over-

come, we shall find that we have no convenient rooms, no sufficient accommodations by which any number of our patients can gratify their own healthy tastes and feelings.

With the common laboring men and women, the difficulties are more readily met and overcome, though no hospital or asylum in this country has yet provided the means necessary for this class.

It is to be supposed that if all laborers were promised fair wages for their work, and regularly paid, a much larger proportion would be induced to engage in profitable employment. When the plan had proved successful, the wages of the patients might be kept, by the treasurer of the institution, on deposit for their benefit and use.

In Great Britain, an extra allowance of some luxury, such as beer or tobacco, has a powerful effect, not only in producing quiet and good conduct, but in promoting habits of industry; and under the influence of such motives, many who would otherwise be idle and listless, perhaps noisy and destructive, engage regularly in useful labor.

In regard to females, sewing and knitting, embroidery and fancy work furnish a ready resource. So also do the various departments of domestic labor. But they should have also the stimulant of remuneration. Labor, at present, is almost entirely compulsory, inasmuch as it is not, and cannot be, to any great extent, remunerative to the laborer. If we pay for it, there is the nice question of how much. Many of the insane, all of the demented, must be re-taught to labor, and at considerable expense; and it must not be excessive, but graduated according to the strength and condition of every patient.

It requires a large judgment and a nice discrimination to provide occupation for that growing class of active, intelligent minds which, for various reasons, find an asylum in our hospitals for the insane. How can we, for such patients, fill up all the hours of the day with recreation, amusement and exercise? How can we gratify their intelligent wants? How can we answer their just demands?

The establishment of hospitals for the insane was at the first an effort of philanthropy to redeem from jails and poor-houses, from cages and out-houses, the forlorn, the friendless and hopeless; and now, having fulfilled their first mission so well, we seem to have forgotten that there is yet the higher office to prevent and turn aside this great current of human suffering from another and more hopeful class.

I know of no way by which this can be accomplished but by the adoption and execution of some such plan as we have considered on other occasions. What has been attempted elsewhere can be accomplished here. We need a different class of houses, and more land. We need arrangements which will dispense, for the most part, with the necessity of locks, bolts and bars; with camisoles and belts; and, if possible, with drugs, medicines and sleeping draughts. We need all the arrangements for the highest comfort, the most perfect cleanliness, ventilation and warmth. We need everything calculated to promote the best hygienic condition of the insane. And above all, we need such arrangements and such means as will serve to give occupation to every mind and every body placed under the care of the asylum.

During the last summer it was my good fortune to visit many institutions for the insane in foreign countries. Among other places visited was the town of Gheel, in Belgium, where the cottage system, so called, has perhaps reached its highest state of development.

The early history of this community, so far as it relates to the insane, is very obscure, and much of it is lost in tradition. It is supposed to be quite certain, however, that a church was built and dedicated to St. Martin as early as the seventh century where the town of Gheel now stands. To the little colony of Christians gathered about the church so recently built, the Irish princess Dymphna, accompanied by a priest named Gerbernus, fled from the rage of a cruel and wicked father. By their acts of charity and Christian benevolence, as well as by their quiet and pious conduct, they seemed to have gained the love and esteem of the few inhabitants of Gheel. But being pursued in their flight by the unnatural father, and discovered in their retreat, Dymphna was slain by her incestuous parent, while the good priest who had protected her, fell at the hands of his followers. It is related that some insane persons who witnessed this unnatural deed were so shocked by its horror as to recover at once their lost senses. Dymphna and Gerbernus were buried side by side, and soon a little chapel rose near their graves.

In the meantime Dymphna was canonized, and hither to the chapel of St. Dymphna came the insane from all the country round about to bow at her shrine, and pray for the intercession of the blessed Saint that they might be healed of their infirmities. As the fame and influence of the Saint increased, a new and massive church was erected at great expense of toil and money. So great was the faith in the miraculous power of the Saint, that quarrels took place between rival towns for the possession of her bones, and the Gheelans, almost by divine assistance, were enabled to retain and remove them to the prepared shrine in their new church.

It is quite easy to understand how a thousand years ago the rude inhabitants of the little hamlet of Gheel were wrought upon by a belief in this supernatural agency. We, ourselves, in the days of spiritual manifestations and clairvoyant insight know how readily any absurd doctrine may obtain credence for peculiar medical efficacy. As a matter of fact in our every day experience we also know how frequently a removal from home and a change of scene is followed by an improvement in the condition of the insane mind.

The practice of bringing the insane to the shrine of the Saint increased as the knowledge of her miraculous power became more widely known; so that early in the history of Gheel the inhabitants became accustomed to the presence of lunatics among them, and also the care of providing for their welfare. Living in the midst of a most barren and desolate tract of country, the Gheelans were of necessity industrious, and as we have already seen, they were filled with religious fervor. These two important traits rendered them peculiarly well fitted for the duty of providing for and taking care of the insane; the duty being enforced by all the dictates of worldly interest as well as Christian charity. The insane were regarded with feelings of religious awe, and it was deemed the highest Christian duty to make every effort and suffer every sacrifice for their care. These feelings were handed down from generation to generation, and enjoined by father upon son, till at last, instead of a hamlet with a rude chapel and a few demented wanderers, Gheel comes to be an important community, accepting a labor and devoting itself religiously to a duty which has no parallel in history; choosing cheerfully and hopefully a state of things which no other community could be persuaded to tolerate for a day. It is this religious feeling in regard to the lunatics, which has been and still is, more than anything else, their safety in the colony, and makes Gheel better adapted than any other place for this peculiar plan of treatment called the cottage plan. The religious fervor in behalf of the insane seemed to be the distinguishing trait of the Gheelan mind and habit. Insanity was supposed to be due to supernatural causes. The doctrines of the Church were such as to encourage this idea, consequently spiritual aid was regarded as the most efficient means of relief. Who then so likely to intercede for divine favor as the blessed Saint Dymphna?

The patient for whom the direct intercession of the Saint was desired, was placed in appropriate apartments adjoining the church under the care of persons retained for this purpose. These apartments consisted of two large and two smaller rooms or cells furnished with heavy oaken benches and iron rings to which furious patients might be fastened while awaiting their turn. Hither a priest would come daily to say mass and read prayers. If the patient was sufficiently tranquil an offering was performed daily for nine days in succession. The patient, preceded by priests and surrounded by assistants, chanting the praise of Saint Dymphna, marched in procession three times round the church. Each time as the procession passed through the chancel a halt was made at the tomb of the Saint, which is placed upon columns about four feet high, forming a sort of portico of gothic architecture. The procession kneeled and the lunatic dragged himself, or was dragged under this portico containing the remains of the Saint. They then exorcised him and conducted him back to the adjoining apartments. If the patient was too furious to be easily managed, a person from the country has been known to perform his part. While making the three circuits the friends and relatives remained in the interior of the church praying to the Saint for help. When nine days of such labor had passed the patient was generally freed from his restraint and restored to his family.

It is certain, says the very able and accomplished superintendent, M. Bulkens, in one of his reports to the Belgian Lunacy

Commissioners, that cures were effected in this way. Fortunately, however, for the insane, a belief in the miraculous power and direct intervention of the Saint has nearly passed away, and few, if any are now found willing to put their insane relatives through this ordeal.

Such in brief is the story generally told and believed in regard to the origin and growth of Gheel. It begins in fable and ends with the condition and prospects of the colony at the present day. Commencing with some accidental circumstance happening to a few religious fanatics eleven centuries ago, it reaches forward to an important community of eleven thousand people, among whom are living in comparative comfort and freedom, and in the enjoyment of unusual social privileges, about eleven hundred lunatics. No doubt there have been great cruelties practised at Gheel, and probably bad results were produced by so strange a mixture of medicine and religious fanaticism. But this was in no way peculiar to the habits or customs of Gheel.

It can be shown that severer customs prevailed in other parts of Europe, and that the system pursued at Gheel tended in a great degree to remove the restraint and ameliorate the condition of the insane. For as early as 1676 a municipal order was promulgated forbidding the keepers of lunatics to allow them to go abroad unrestrained, making the keepers responsible for damages done by lunatics, and imposing a fine for violation of the order; thus showing that the keepers were, in their humane tendencies, in advance of the public opinion of their day. Still, so much freedom continued to be enjoyed by the patients, that in 1747 another municipal interference was considered necessary to check the growing evil of permitting the insane the enjoyment of free air and exercise. But it is remarkable in this case that public opinion had taken a wide step in advance, and the magistrates in their municipal order enforced by fine, recognized the superiority of a careful personal supervision to the promiscuous employment of chains and fetters. Again, so soon as 1754 another enactment was passed, in which the magistrates complain that the lunatics are so free that one can no longer distinguish between the patients and citizens, and when the keeper is admonished, he always replies, "My insane boarder is not dangerous. He does no harm to any

one. He is quiet and well-behaved." All the facts go to show that the management and treatment of the insane was at that time in Gheel far in advance of the spirit of the age, while doubtless they suffered much, which, to us to-day, would seem but little short of downright cruelty.

In 1821, Esquirol visited this colony, and wrote nearly as follows: "The greater part of these unfortunates are fed like the peasantry of the country. In the town the dietary is better, and generally it is the same as that of the persons with whom they live. The lunatics, male and female, wander freely in the streets or in the country, without any one appearing to be watching them, even when they have trammels on their feet. If they try to escape, straps are used. If they are furious, they are chained by the hands and feet when they do not go out of doors, at least when they are lodged on a sequestered farm. In spite of these means of restraint, it happens often that they wander or escape, but the police of the surrounding districts stop them at eight or nine miles distance, and bring them back."

Following Esquirol, Guislain and Moreau addressed themselves to the French, Parigot and Bulkens to the Belgians, and Rollin and Droste to the Germans, giving to continental inquirers all the facts concerning Gheel and its system. In 1828, Sir Andrew Haliday, in his general view of lunatic asylums, gives his opinion of the system in the following remarks: "If the governors of St. Luke's were to form such an establishment upon some of the heaths or commons that are at no great distance from the metropolis, they would more effectually, I imagine, fulfil the intentions of the supporters and contributors to this institution, than by transferring their supposed incurables, after a twelvemonth's trial, to the white and red houses at Bethnal Green, as very uniformly has hitherto been their practice for a number of years, and that such an establishment might be formed at a very small expense must be apparent to all who will give themselves the trouble to think on the subject.

"The renting of a considerable portion of any such heath or common would not be any great charge to the funds of the establishment, nor could the building of the cottages cost much, and such an arrangement might be made the means of keeping many poor but well-ordered families from the work-house, and of rendering them useful and industrious members of society. The average expense at St. Luke's was, some years ago, forty-six pounds eighteen shillings and threepence. He might be maintained at one-third of the expense at an establishment similar to that at Gheel, and have almost a certain prospect of being cured while the disease is yet curable."

Since that day, Doctors Cumming, Webster, Browne and Coxe have all published favorable notices of the cottage system. More recently, Doctors Stevens and Sibbald have recorded their observations respecting the working of the system.

According to all the published accounts of Gheel, and particularly that of Dr. Sibbald, it seems that up to about this period of time no efficient system of general superintendence had been established, without which it would be strange if gross abuses and crimes injurious to the patients were not frequently practised. And without doubt, during the long ages the colony had existed, scenes of great cruelty had been suffered. Slight responsibility attached to the keepers, except so far as the dictates of their religion, and motives of worldly interest guided and directed them in the care of the insane. These could hardly have been sufficient to repress abuse or encourage kindness, much less to reclaim, organize and bring under general superintendence this strange moral waste.

Guislain made Gheel the subject of a most searching examination, and in consequence of the numerous abuses found to exist, condemed the whole system. Another inquiry followed, which also resulted in exposure and condemnation of flagrant abuses, but at the same time in recommendation of the system, and suggested an organized medical superintendence, under the control of the state. Consequently, in 1850 or 1851, M. Parigot was appointed resident medical superintendent, and from that time, a most remarkable change took place in the condition of the insane. The law which inaugurated this state of things creates a superintending body called the general commission, consisting of the governor of the province for its president, the provincial attorney, the commissary, the burgomaster, the dean, the medical inspector, and four members taken from the citizens of Gheel. These hold office for two years, and go out by rotation. This commission appoints annually a

committee of five inhabitants, whose office it is to control the general administration and finances. The medical administration is lodged with the resident medical superintendent, who is appointed by the minister of justice. He writes the reports, grants certificates of cure, and superintends all the affairs of the colony, residing at the infirmary or asylum proper. Under him are four medical assistants, each residing in and visiting all the patients of his own district at least once in a week, and oftener when necessary, or when requested. They report quarterly to the resident medical superintendent, which, accompanied by his comments thereupon, are sent to the superior commissioner. Patients may also be placed under the care of private practitioners, who agree to submit to the same regulations as are laid down for the assistant-physicians. comes a corps of civilian inspectors, one for each district, who go from house to house, noting the condition, wants and prospects of every patient, and making regular reports to the superintendent.

A list is kept of those whose characters and dwellings are considered by the authorities as sufficient to qualify them as nurses, and includes the names of those at present under their care.

The insane of different sexes are not allowed to board with the same nurse, unless with the special sanction of the superior commission. Each lunatic is placed specially under the charge of the cottager with whom he boards, who is responsible for any injury done by the patient, and, except in case of emergency or extreme violence, he must not use any measure of restraint, such as the employment of straps, the belt, or the camisole, nor must he place the patient in seclusion without first having received authority for so doing from the assistant physician of the district in which he is located, and the physician must report directly to the superintendent.

Every nurse who violates these rules, who abuses a patient, or who neglects to obey the orders of the superior commission, or the committee, or the physicians, shall be deprived of his license to receive and take care of lunatics. I was informed that several householders had been so deprived of their licenses on account of their violation of regulations, or for neglect or abuse of patients. On the other hand, prizes and rewards are

awarded to such nurses as distinguish themselves by their humanity and devotion to the welfare of their patients. A chaplain is connected with the establishment, for the comfort and benefit of the lunatics.

Quiet patients also attend the public services in the various churches of the commune, unattended by their nurses. known to be excitable are accompanied by attendants. The local committee is authorized to fix the dietary, and also the hours of meals. The committee also appoint, when necessary, head attendants, to assist the assistant-physicians. Quiet and orderly patients are permitted to visit, unattended, public houses, places of amusement and refreshment, but the sale of drugs and spirituous liquors to all lunatics, is strictly forbidden. All the details as to clothing, bedding, furniture, &c., are under the direction of the local committee, with the concurrence of the superintendent. Unsuitable patients are excluded by law, and all classes of insane persons may be placed in the commune, except those who require continual restraint or coercion, those who are suicidal, homicidal or incendiaries, and those whose escapes shall have been frequent, or whose malady is of such a character as to offend the public peace or decency.

We are now at Gheel. We know its geography, we have heard its traditions, we have glanced at its history. Let us look at it as it is, and consider briefly its working. The general appearance of the town is quite as good, perhaps better, than other towns of equal size in its neighborhood, and produces, on the whole, a favorable impression on the mind of the visitor. The streets are quiet, but cheerful; the houses tolerably comfortable, though rude in finish, and very plainly furnished; the gardens are neat and well cultivated; the people are well clothed, and they seemed to be well fed. They are industrious, and occupied chiefly in cultivating the soil; the manufactures being confined entirely to the needs of the district, except perhaps small quantities of lace, in the making of which a few women are employed. Some agricultural and dairy products are supplied to the Antwerp market.

On the whole, the remembrance of the town is more pleasing than that of many Irish towns of the same size, and the general feeling in regard to its comforts is much the same as that in regard to an English or Scotch village, consisting chiefly of peasantry. The hamlets and houses outside the town had the same general character with those in the town, except that they were of ruder construction, less commodious and less tidy. There are in the community about eleven hundred lunatics; a casual observer, a stranger, would pass a day in the village without detecting any marked signs of mental disease in the persons wandering about the streets. There is certainly less peculiar conduct which might be attributed to mental aberration than is witnessed in any second-rate Italian town.

In passing about the town, both alone and with Dr. Bulkens, I visited any and every house I desired, and I ought to state here my belief in the entire honesty and sincerity of the enlightened superintendent, Dr. Bulkens.

Judging from what I saw, the insane in the commune of Gheel are kindly and well cared for. That abuses do exist the Doctor frankly admits. The abuses, if any, are not the result of the system pursued so much as the want of a sufficient number of intelligent medical assistants to carry out the plan adopted.

The patients were in the enjoyment of a good degree of bodily health, were plainly but decently clad, and I believe they were provided with a sufficient quantity of wholesome, nutritious food. I was informed that the laws regulating the management of the insane, allow seventeen ounces of bread and five ounces of meat to each man, and fourteen ounces of bread and four ounces of meat to each woman per day; vegetables were being freely used also. They were generally cleanly in their persons, though not particularly neat or tidy in their habits. The free air and the unrestrained exercise of the powers of locomotion of so large a number of the insane add greatly to the health, quiet and general comfort of the whole. The sleeping accommodations of many of the patients were such as would not be satisfactory in a well-ordered lunatic asylum; the rooms being small, often smaller than our single rooms, never so well lighted, sometimes in lofts or attics, and occasionally, for patients of filthy habits or those who are noisy, in out-houses, as is sometimes practised at almshouses in towns of our own country. The beds of cleanly patients were neat and of the same quality as those of the family.

There is generally no accommodation for bathing, and little for general toilet purposes.

At some of the houses where are placed patients belonging to wealthy families, the apartments were cheerful, agreeable and commodious, and were furnished with some degree of taste and elegance; some of them contained pianos and other musical instruments, and many of them books and pictures.

Patients from the families of the laboring classes were in considerable numbers engaged at some useful labor; but those from families of the wealthy were not employed, except as influenced by their pleasure or the character of their delusions.

More than one-half, perhaps five-eighths, of the whole number of patients follow some occupation, though with but little attempt at any regularity or organization.

Some of both sexes were assisting the families with which they boarded in the various household duties, as cooks, nurses and companions for children. Some were laboring as shoemakers, tailors, blacksmiths and wheelwrights. Many of both sexes were employed in the fields, at the usual farm labors. They all or nearly all enjoy the fruits of their own labor. Those who are able to make any contract to perform a piece of work, or to hire themselves out for a day or week, receive their wages and make such use of them as they please.

One man was shown me who had purchased four cows from his earnings, and rented them to the villagers. Others were pointed out who owned goats or donkeys. One whom I saw had taken a contract to paint or color a house, and was about commencing his work.

I was informed that many who were able to work performed labor only at irregular intervals, working a few days and earning a little money, and then idling about until they had expended their earnings.

A large majority of the patients are paupers, but the amount of their earnings is never withheld and credited to the department from which they come, or to their families in payment for their support. Government wisely regulates this, the object being to induce habits of labor, thereby hoping to promote recovery.

There is exercised by the patients great apparent freedom of action and choice of pleasure. They seem to move when and where they please, with no one to watch their steps. They may work or play, but if they work they receive direct gain in shape of wages for their labor. They may go in and out as any other members of the family do. They may be and are to a certain extent interested in all the details of social life. Though not in their own homes they have a home, live in a family and are members of society, useless it may be, but still they are identified as a part of the community.

There seems to be a general feeling of contentment among the insane which is not found in any asylum. In very few cases indeed did there seem to be any disposition to escape.

But little actual restraint is suffered by the patients; more perhaps, however, than in the best regulated asylums in England or America. But at Gheel restraint is only an interference with certain dangerous muscular efforts. If a patient strikes he wears a leather belt to which his arms are loosely strapped. If he tears his clothes or undresses himself he wears the camisole. If he attempts frequently to escape he wears anklets fastened together by a chain. Sometimes both anklets and wristlets are worn; generally, however, the patient still enjoys free air, and moves about as well as he can where he likes.

The most unpleasant forms of restraint which I saw were those cases of excited epileptics, who, during excitement, wore the camisole, and were also fastened to the bed, and must, from the nature of the case, be left alone a large part of the time. The condition of such, as soon as reported, is improved by admission to the asylum proper.

I am not able to state accurately the amount of restraint, but believe it to be a much larger percentage and of severer character than has been suffered in your own hospital at any time during the last twelve years. I believe also that restraint is going out of use at Gheel, and that if Dr. Bulkens were well supported by able medical assistants, mechanical restraint would soon lose itself in ordinary seclusion in comfortable rooms and private gardens. That you may not consider me a careless or superficial observer, I will briefly show how other alienists have seen the Commune of Gheel. In 1851 Dr. Earle writes: "The accommodations are of various grades; at some houses which I visited the apartments were very agreeable and commodious,

but in none were they furnished in a style nearly so elegant as that of many of the private institutions for the insane in Belgium, France, England and America. But at Gheel much the greater proportion of the patients are supported at the expense of the public, and about fifty cents a week is paid for the board and care of each of these. No very great extent of luxury, either in furniture or food, can be supplied at the rate of seven cents a day. Consequently many of these are placed in garrets, lofts, outhouses and other out of the way nooks and corners, where their accommodations can hardly be accurately described by that expressive word, comfortable. They appear however, to be decently clothed and sufficiently well-fed, and of all that I saw in the numerous houses which I visited in Gheel and the surrounding country, I have no recollection of hearing a word of complaint in these respects. On the contrary, one woman at a large farm-house a mile or two out of town, was sorely troubled because there was too much food, too much clothing, in short too much of everything in the world." Again he says, "Within the town I saw but one patient in the streets upon whom there was any restraining apparatus. His waist was encircled with an iron belt to which his hands were secured by wristlets. In the suburbs and around the farm-houses however there were several who were fettered with iron, the chain between the ancles being about eight inches in length. In some cases the rings around the ancles had abraded the skin and occasioned bad ulcers."

In 1860 Dr. Sibbald writes: "One of the agreeable features of the place is the general contentment manifested by the insane. In very few cases, indeed, did they complain of the injustice of their detention, though questioned on the subject. The comparative liberty of free air was evidently valued by them as a great privilege, more especially among those who had been previously residents in asylums. In one case, that of a young man who had been confined in Guislain's Asylum at Ghent, I was particularly struck with this. He was one of those subjected to mechanical restraint. He had a leather belt around his waist to which his arms were loosely strapped to prevent him from tearing his clothes. I asked him whether he did not find this restraint very irksome, to which he replied in the affirmative. I then asked him why he was thus strapped and

received a very simple, straightforward answer, giving the true reason. In my next inquiry I asked whether he had worn those things at Ghent? and he answered no. Then said I, would you not rather live there? they were kind to you were they not? Yes, replied he, but I prefer to walk about as I like." Again he says, "The greater number were restrained by anklets fastened together by a chain, which as well as the anklets is bound in leather to prevent the unpleasant appearance and jingling of the chain, and to avoid the anklets hurting the wearer, others wore a belt to which their arms were strapped, as in the case of the young man whom I have described above, some wore both belt and anklets."

Again he says, "As far as I could judge from the histories of the cases which I saw, I formed the opinion that two classes of cases, more than any other, derive benefit from this system. One class comprises the milder forms of acute mania, many of which may be successfully treated, though, at first sight, it might appear that their excitement would require that they should be more closely confined as a protection to themselves and others. The other class consists of partially demented cases who have, either through old age or from other causes, fallen into a second childhood. When such a patient is of the male sex he receives much more suitable care and attention from a kindly cottar's wife than is possible even from a conscientious and experienced male attendant; and when there are children in the family, the evident happiness which results from their playful intimacy with their broken-minded friend, either male or female, lights up as nothing else can do, the clouded remnant of their mental life." And again he says, "From what I saw I have every reason to believe in the thoroughly trustworthy nature of the reports of Dr. Bulkens. patients appeared generally to be in good health, and as far as short residence can determine, they are well cared for. One thing which in such a place must speak strongly as to the character of the administration, is the fact that the worthy medical inspector appears to be a favorite with his patients."

In 1867 Dr. Howe writes: "This establishment flourishes mainly, I think, in virtue of three great advantages for the treatment of insane persons, which were not and are not found in an equal degree at any public hospital in the world.

"First, employment at domestic and agricultural work in company with sane persons, and mostly in the open air. This promotes bodily and mental health, or at least retards the progress of disease.

"Second, social and family relationship with sane persons. This keeps alive and active the unperverted sentiments and affections, and helps to restore the mental and moral balance.

"Third, the greatest possible amount of personal freedom. This not only promotes bodily health, but, by preserving selfrespect, promotes mental health." He says "the history of Gheel, from the twelfth to the nineteenth century, may be regarded as a severe test of human virtue and goodness. Tens of thousands of helpless lunatics were thrown upon the hands of simple peasantry, whose control over them was only partially modified by priests and magistrates. Whoever studies carefully the condition of lunatics during these centuries, will conclude that, upon the whole, these unfortunates had more of human enjoyment, and less of suffering, than in other countries where people not only thought, with John, that they were possessed of devils, but with Jeremiah, that they should be put in prison and in the stocks. Upon the whole, human virtue stood the test bravely at Gheel." Again he writes, "Here at Gheel one cannot but rejoice at seeing how large a proportion of the lunatics have entire freedom, and indulge the hope that, by some happy reform, thousands who are now needlessly imprisoned in other lunatic asylums, may have theirs also, and that to the sad loss of reason may not needlessly be added the loss of liberty also."

I visited also the French colony, Fitz James, about fifty miles north of Paris, in the department of Oise. The little town of Clermont is situated in the midst of a fertile and beautiful agricultural region, and, from the eminence on the slope of which it stands, commands an extensive prospect. The original asylum, established by the father of the present managers, which has grown from a very small beginning in a private house to a large and prosperous institution, is situated on the border of this village. In 1849 the original proprietor died, when his sons, the present proprietors, assumed the manage ment, and reorganized the institution. The degree of prosperity was such that, as early as 1856, it was thought advisable to procure more land than was at that time occupied, and try

the effect of a greater amount of out-of-door labor for those whose habits and proclivities would allow of their being employed. Accordingly, an estate of about five hundred acres of land was purchased in the immediate neighborhood in order to carry out the plan. Upon the estate was a mansion-house and such other buildings as would constitute a gentleman's country residence. Other plain buildings of rather rude construction were erected, and soon forty able-bodied, quiet male patients, supported at the expense of the departments, were transferred from the original asylum proper to the colony, and put to work. These were all chronic cases, and had, for various periods of time, performed the out-of-door labor on the ninety acres of land cultivated in connection with the asylum proper at Clermont.

The results were so satisfactory, that Dr. Labitte soon erected other and more extensive buildings for the accommodation of a larger and increasing number of patients of both sexes.

Alterations and additions continued to be demanded until the institution may now be considered quite complete of its kind. It has four distinct departments, with convenient out-buildings, stables, and such other fixtures as a large and well cultivated farm requires. During the seven or eight years since which this system has been inaugurated, the profits of the institution have been so large that the improvements necessary have been made and paid for from the annual income. This colony is simply an appendage to the asylum at Clermont, from which patients may be transferred, when thought desirable by the proprietor, and sent back to the asylum again if necessary.

The four sections to which I referred are: first, one devoted to male patients, who pay liberally for their support, and whose friends prefer placing them here rather than at Clermont. The accommodations are such as may be found in an old country house. Twenty-three male patients, with their attendants, have rooms in this old mansion house, in which are also apartments for the medical officers and their servants. Second, a corresponding establishment at a little distance for female pay patients. These two sections are comfortable, though not furnished with any degree of taste or elegance. That of the males in the mansion-house could hardly be said to have been neat or tidy. Third, one for female paupers, situated at a little distance from the female pay patients, and at a greater distance and in the rear of the section for male pay patients. This sec-

tion is devoted chiefly to laundry operations, and the washing for both asylums is performed here. Fourth, one for the laborers on the farm, where they live in small, rude dwellings, called cottages. These cottages are not models for comfort or convenience, nor are they patterns of good taste and cleanliness. There are other buildings occupied by patients, but of the same general character as those of the third and fourth sections.

The mansion-house is of two stories, and so divided as to accommodate twenty-three patients and the medical officer and manager, with his family and the necessary servants and attendants. It has also, beside parlors and sitting-room, a billiard room. It is quite pleasantly situated in a wide lawn, is surrounded by trees, and has a creek flowing in front.

The section allotted to the female pay patients is also an old country house, of two stories, divided in the usual manner, and has the usual conveniences of a country house. It is well situated in a fine lawn, and gives one, on the whole, a pleasing remembrance. Of the comforts and conveniences of the departments for pauper patients, little can be said. They are destitute of all proper means of lighting, warming and ventilation. They have no conveniences for bathing, and but little attempt is made to preserve habits of common decency. The laundry is quite spacious, well arranged and convenient, and a large amount of useful labor is here performed.

The farm buildings are convenient, and arranged with care and skill, and speak of the thrift and enterprise of the place much more plainly than do the buildings for other purposes. The stables were well filled with a fine stock of oxen and horses, and a large herd of cows were feeding on the lawn. An extensive piggery was filled with choice breeds, and more than one thousand rabbits were kept in boxes, where they were bred for the table and market. There were also butchers' stalls, sheds for carriages and farming implements, and a mill, with steam power; and also, on the creek, in front of the male department, a small, showy building, which contains hydraulic apparatus for lifting water to such parts of the establishment as it may be desired. Besides these, there were store-houses and cellars and cider and wine vaults.

The hospital, or asylum proper, of which I have spoken, is known as the Clermont Asylum, and the colony of Fitz James

is only an appendage to this, in which are lodged in detached buildings, not cottages or houses, the quiet and industrious patients. Nor are these accommodations based upon the model of any family arrangements. They more nearly correspond to military barracks in second-rate villages.

Dr. Gustave Labitte is the medical director and superintendent of the affairs of both establishments, and a brother, Alexander Labitte, has charge of the general administration and direct oversight at the colony where he resides. A medical assistant is employed at each institution. At the asylum proper each division or class has its appropriate airing court, beyond which the patients seldom go. Here, as at the colony, the accommodations for the pay patients are fair, while that of the paupers are bare, uncomfortable and coarse in the extreme. Rooms used as day-rooms contained no furniture but the plainest of wooden benches and heavy tables, not clean, on which their meals were served. Their food was plain, but appeared to be sufficient in quantity and fair in quality. No great order or regularity was observed in dispensing the food, and on the whole the meal was unsatisfactory. Refractory patients could not be well supplied. Feeble patients were not properly attended, and deluded ones were suffered to absent themselves without an effort on the part of the attendants to satisfy their wants.

In this asylum, consisting mainly of three separate ranges of buildings, each with its appropriate grounds and enclosures, there appeared to be an unusual amount of severe restraint of various kinds, which, added to the number of those who were suffering from bruises of varying degrees of severity, leaves on the mind of the visitor painful recollections.

There seemed to be everywhere an utter want of authority, and almost complete absence of any executive power in the internal management of the establishment.

At the colony, which is used as a sort of penal establishment for the strong and healthy and docile who quietly submit to the direction of taskmasters, the condition is better only as the patients are of a class who can labor with profit and consequently enjoy freedom from restraint and the cheerful and healthy influences of out-of-door labor.

The medical end which should be kept in view seems to have

been lost sight of. The patients are not surrounded with any of the customs or habits of social life. I observed no marked attempt to introduce among them reciprocal relations, or to inspire them with sentiments of personal consideration. And I looked in vain for those conditions of social and domestic life of which the family is and must remain the model.

That the patients perform a large amount of useful labor no one can for a moment doubt. The general thrift and pecuniary prosperity of the place sufficiently prove this. Since its establishment, about six hundred acres of land, in a department where land is expensive, have been purchased out of the net proceeds of the establishment, besides the cost of the buildings, fixtures, stock, farming implements and improvements. Here may be seen the best mowing and reaping machines; the most approved ploughs, harrows, drills, cultivators; the most successful methods of raising and fattening improved breeds of cattle, sheep and swine. Here, too, are the finest horses, the best cows, and sleekest oxen to be found in the country, with prize sheep and swine. The buildings, courts, stables and outhouses, all prove how profitable to the proprietors has been the experiment.

The departments which send their poor insane to this colony, are not essentially different in their habits of feeling in regard to the insane from other localities, and consequently appreciate the pecuniary advantages of such a system. Although patients may not recover, the cost of maintenance may be lessened, and habits of obedience acquired may continue when returned to the local authorities. Such, in brief, are my impressions of Clermont. I know they differ widely from those of some other observers who have the same general hopes in regard to the insane, and the same or similar opinions in relation to their management with myself.

Of the French asylums for the insane, you will permit me to make a passing remark of one or two. In Paris, the asylum of St. Anne is perhaps the best It has, architecturally, every advantage over others. Here are found all the accommodations for classification, all the arrangements for care and custody, and all the fixtures for treatment which skill and ingenuity can devise and money procure.

The buildings are neat, plain and substantial, and consist mainly of a separate block for reception and observation of patients on admission, with rooms for medical offices and for a few convalescents. Opposite to this is a square with a block or pavilion occupying each corner and the middle of each side, with domestic offices and rooms for assistants in a centre block.

These blocks are all connected by a covered walk, which divides the blocks and their appropriate courts from each other. The ranges of apartments on the right of the entrance are occupied by males, and those on the left by females. Day-rooms, dining-rooms, bath-rooms, and rooms for refractory patients are on the first floor, and the sleeping accommodations in associated dormitories are on the second floor. The domestic arrangements, kitchens and laundry are perfect, containing the most expensive machinery of the latest pattern and improvement. There are large cellars, store-rooms and winevaults, filled with everything the market could supply. The sewing-rooms, linen and clothing stores are large, abundantly supplied, and were models of neatness and good order. The dietary was good, and seemed to be abundant. The medical stores appeared to be on a scale of the most lavish expenditure; supplies of all kinds were plentiful almost to wastefulness.

The apartments of the patients were very plainly but cleanly furnished. The bedding was good, and the sleeping-rooms light and airy. The rooms for excited patients open into separate airing courts. These rooms are of solid masonry, quite dark, often damp, and must at times be cold. Some of them, however, are very expensively padded, and did not appear to have ever been used. Many of the unpadded rooms were occupied, and in every case, I believe, the patient was also in the camisole. Here may be seen the most elaborate arrangements for the application of water as a remedial agent, and for the general purposes of bathing. In a large room devoted entirely to this use are contrivances quite extraordinary-jets of water of all sizes, from the finest stream to the most powerful douche, heavy enough to fell a strong man; baths of every conceivable form-plunge baths, sitting baths, foot baths, head baths and shower baths; baths in every direction-perpendicular, horizontal and upright. Then there was a sort of platform from which an attendant could control not only all other fixtures in the room, but also a powerful douche from flexible hose. Besides these, there was a coil of

iron pipe enclosing a space four feet in diameter and more than six feet high, so arranged that a man could step inside. The pipe was punctured with small holes on the inside, so that when a patient was placed upright in the centre and the stop was turned the water came rushing with great power from a thousand jets and struck upon every inch of his body in continued streams with immense force. In an adjoining room there was apparatus for vapor baths, and in another a score of ordinary bathing tubs with covers so fixed as to enclose the patient's body in the tub, leaving his head above the lid or cover.

The patients were employed in the laundry, kitchens and sewing-rooms, and in and about the airing courts much as at other hospitals for the insane the world over. There seemed to be no general system of occupation, and no provision for any considerable amount of recreation or amusement, and little or no room for outside exercises.

The hospital at Charenton, a short distance from Paris, is now being completed according to the original plan, only onehalf of which has ever been constructed. The building is situated on the brow of a hill and overlooks a beautiful country. It is neat, plain, but rather shown in its exterior, consisting of a centre building and chapel at a little distance in the rear. From these two buildings proceed parallel wings or ranges of apartments. The centre and chapel are united by a range of apartments from front to rear, so that the centre group of apartments enclose four sides of a square; in the centre of this is a statue of Esquirol. Each of the two parallel wings has four small projecting wings, so as to form three sides of four courts in front of each parallel wing, the fourth side being enclosed by a simple erection or covered walk. The four divisions, consisting of the front wing and two of those in the rear wing, are assigned to men. And the two remaining divisions to the women.

In the male division there seemed to be an unusual amount of excitement and in a portion of it considerable violence, and many patients were in camisoles, muffs and wristbands with belts. Quite a large number were also in seclusion. No more than one division of the males were quiet, and in any degree as comfortable as in ordinary American asylums. The female patients appeared to be much more calm, and in every way

better managed. They were more tidily dressed, their apartments were more cleanly and better furnished, and many of them were employed in sewing, knitting and other light work. They also assisted to a small extent in the domestic offices. There seemed to be little or no occupation for the men, and but little recreation for either sex.

The dining and sleeping accommodations are much like those of St. Anne, comfortable but no more. The food was good and sufficient, and a liberal allowance of light wine is given to the patients. Here too, much reliance is placed upon baths; they are used in all their forms, simple and medicated. Cold water is employed in the neuroses, as headache, sleeplessness, hypochondria, hysteria and general atony. Long continued tepid baths are employed as a remedy for the excitement of acute mania, and one may see scores of patients locked into bathing tubs two, four, six, and even eight hours at a time.

In the French asylums there is much to leave on the mind unpleasant impressions, and one's recollection is often painful.

The manner and bearing of both physician and nurses seem not to be sincere and honest. There is a want of confidence and a restless suspicion on the part of both which must lead to great discomfort and frequent excitement. In the management of the insane, there did not seem to be a sufficient attempt to awaken their sense of honor and confidence in their own strength to recover their habits of self-control. There was entire absence of any teaching by example the value of moral power and religious confidence. There was no endeavor to excite motives of hope or fear. No influence tending to fix their attention on any particular subjects, or to lead them to engage in any variety of occupation, amusement or intercourse. The same general remarks may be applied to the asylums in Switzerland and Germany if we except the asylum near Neuchatel, in Switzerland, which though small, is quite perfect in all its appointments. It is beautifully situated in a highly cultivated region on the shores of the lake, commanding views of the distaint mountains, &c. The buildings enclose a square, are two stories high, and contain on the lower floor diningrooms, sitting-rooms and libraries, and also a range of unoccupied rooms for excited patients. On the second floor are the dormitories and single bed-rooms. Here the conduct of the

physician and nurses was different. I found Dr. Borell and

his family enjoying coffee, newspapers, books and music, with quite a group of his patients about him, all familiar, cheerful and happy. There was no appearance of suspicion; no fear or dread of returning to the wards and apartments devoted to patients. The whole household seemed to be one family, moved by the same impulse, having the same motives, enjoying the same pleasures and entertaining the same hopes. There was here no seclusion and no restraint. The Doctor was just completing a house for a few patients who could enjoy still larger liberties. This hospital was built and endowed for the poor of the district who pay only a nominal price. It may also receive the wealthy at higher rates, but must always accommodate the poor of its own neighborhood.

The asylums at Geneva and Berne are both well situated, pleasantly arranged, and the patients seemed to enjoy a fair degree of comfort. There appeared to be no striking evidence of tact or skill in the management of either. There was a lack of tidiness and order, and want of discipline and control in the care of the patients, and in the administration of the general affairs of the asylums.

The asylum at Frankfort, which is located near the city in the midst of a beautiful and growing suburb, is a pleasant building of modern plan and construction. The main wings are built on three sides of a square, and the patients' rooms are generally arranged on the back side of the wing and the corrider is open to the front. The day accommodations are mostly on the lower floor, and the sleeping-rooms are above. The patients are kindly but carelessly provided for. They are untidy and unclean, and the house in all its parts is slovenly and dirty.

In striking contrast with this is the asylum at Heppenheim, recently constructed upon an improved plan, and as yet occupied only in part. The building, consisting of centre, lateral and projecting wings, is plain, substantial and showy. Situated in the midst of a beautiful and healthy agricultural region, everything is charmingly neat and scrupulously clean. The patients are tidy, cheerful and social. There was perfect discipline in the control of the house, and great order observed in all the arrangements and details of management. There was more than usual attention given to the subjects of recreation, amusement and labor. The patients were well and cleanly

clad, the tables were bountifully spread. The beds were clean and comfortable, the house was roomy, airy and light. The furniture of the establishment was mostly made by the patients, who perform a large amount of useful labor.

In the continental asylums the apartments assigned to patients have not that finished aspect of comfort which is found almost universally in American institutions. Yet compared with the prevailing customs and habits of the people they are probably as comfortably furnished as our own, and answer the wants of the people of those countries as well as our own hospitals answer the wants of our own people. In the more recent ones, the domestic offices, laundry, kitchen and store-rooms are well appointed and quite perfect. Their facilities for distributing supplies are however inferior. In the treatment of patients, mechanical appliances for the purpose of bodily restraint are more extensively used than in any asylums known to me on this side of the Atlantic. And I dare not write how extensively I have seen such means of restraint in actual use. I have doubtless seen much that was not usual and customary. But sometimes it was difficult to see all I desired, and frequently some departments were very reluctantly shown. This is especially true of Parisian asylums.

In England the public institutions for the insane are of two kinds-hospitals for the middling and upper classes, and county asylums for the paupers. In some of these, patients from well-to-do families may be found who refund to the parish from which they come the expense of support. In Scotland, generally, and in a few only of English asylums, both classes are admitted into the same institution, but commonly separate buildings are provided for the two classes. There are also hospitals founded like Bethlehem and St. Luke's, where curable cases are admitted of persons in good social position, who have become reduced; and there are likewise many private asylums accommodating from three or four to seventy-five or one hundred patients. These may be and formerly were extensively owned and managed by non-professional persons who employed a physician to visit them. Some of them are now managed by the first alienists in the country, and a remarkably good feeling and understanding exists generally between them and the public hospitals and asylums. All these institutions, whether public or private, are under the inspection and control

of the commissioners of lunacy. The private establishments differ but little from private houses; none of them having been constructed for the purpose. They nearly all have fine surroundings, large and beautiful grounds laid out in walks, lawns, croquet and bowling plats, tennis courts, and facilities for every amusement and recreation. In the house there are libraries, billiard and smoking rooms and reading rooms on the lower floor, and sleeping and dining rooms above. In these houses many of the rich keep their own servants, horses and carriages.

There is, I believe, in no case any provision for manual labor, except in such private asylums as are occupied by ladies, where the light occupations sought by ladies in their homes are readily available.

In the public asylums of England, what is termed the non-restraint system prevails, and is, I believe, generally honestly and faithfully carried out.

Cases of fury and violence, though by no means so common as with us, nevertheless do occur, and are often controlled by the administration of drugs, such as opium, nitrate of potash, digitalis and antimony. Seclusion in padded rooms is much resorted to, and in some asylums packing in wet sheets is supposed to exert a powerful controlling influence. Shower-baths are often ordered, both for their remedial effect and as a correction for misconduct.

Some alienists admitted frankly that the non-restraint system might be carried too far, and that in some cases it seemed to be for the best interests of the patient that some restraint be applied, but, on the whole, it was thought best to risk the little suffering that might result for want of restraint, rather than that multitudes should be unnecessarily deprived of their liberty.

As it is in America, so it is in England. The very poor have better opportunities for curative treatment than the middling, well-to-do class; for, when attacked, they are taken to the asylum, and are placed under such restrictions as will at least detain them during the acute and curable stage of disease. The wealthy can remain at home, can travel with servants, or can seek admission in a private asylum, where weeks must elapse before a vacant room can be obtained.

Ten years ago the county asylum of England was on the corridor plan, with single rooms upon one side of the corridor only,

and large associated dormitories for about two-thirds of the patients, and day-rooms for self-seclusion of a few upon each floor of the establishment; the dining rooms being generally in some projecting portion of each corridor; bath rooms, water closets, padded rooms, clothes rooms, and all other appointments on each ward, with airing courts, and outside entrances Then the chapel, recreation corresponding to each ward. room, kitchens, laundry and general stores, in connection with the centre building, where the medical officers had their apartments. Then there were farm buildings and the bailiff's cottage at some distance. Of this plan the Derby and Essex County asylums were ten years ago the best examples. They have retained all they then had, and have both been enlarged and improved by slight departures from the original plans.

But hospital architecture has made large strides in England, so that if we were to-day to make comparisons, where all are so good, our preferences would be strongly in favor of the asylums in Sussex, at Haywards Heath and at Worcester. These two seem to be in advance of all other county asylums which I saw, and it would be difficult to say which is best or which is best managed. They each consist of twelve wards, and accommodate seven hundred patients. The construction is similar to other asylums in many respects, but the appointments are more complete. Corridors, with single rooms for a small portion of the patients, opening on one side, with large day-rooms in each story, and corresponding airing courts, and, as is usual in all the recently built institutions, a corridor of communication passing along the whole length of the wings, by which any ward may be entered without passing through any other ward. On the front of the first lateral wings are large showy one-story projections for dining-rooms, which communicate with all the wards by means of the corridor of communication. These rooms will each seat about three hundred and fifty persons, so that all able-bodied patients of the same sex sit at the same table. The laundry wing leads directly from the female side of the house, and the approaches of the stables and gardens are from the male side. The recreation rooms are near the centre, and the chapel is outside.

The hospital at Northampton and the asylum at Glasgow can be compared with our own institutions, inasmuch as they each have both paupers and pay patients under the same roof, and in many respects are much like American asylums. In these the apartments for paupers are not as well furnished and as well kept, the patients are not as well fed and cared for as in your own asylum, while the apartments for the pay patients are better supplied, their surroundings are more tasty and comfortable, and, on the whole, they are better cared for than the corresponding class can be in your own hospital. The average price of board for paupers in English asylums is not materially less than is paid here, and the usual price for patients belonging to a class of well-to-do tradesmen, is from thirty to fifty pounds sterling.

In asylums in England and Scotland of a still more recent date, the day-rooms and all accommodations are on the first floor, and all the sleeping accommodations in large dormitories, with a few single rooms, are on the second floor, except the infirmary wards, which are usually, though not always, on the first floor.

Alterations now going on in some of the older asylums will convert them into blocks or pavilions, connected with each other by covered walks, each block or pavilion having day accommodations on the first floor, and sleeping rooms above assigned to particular classes of patients, and these classes generally taking their meals in one large dining hall.

Many asylums of all classes have detached buildings or cottages, for the accommodation of a few patients who cannot well be classed in the asylum proper, and great advantage is found to result from this plan.

In Ireland, the asylums were found to be quite as good as in England or Scotland, though of poorer construction, and laboring under other great disadvantages. The institutions were generally on the corridor plan, with rooms on one side only, and central dining-rooms. The kitchens, laundry and storehouses were all well constructed, and the patients seemed to be kindly and well cared for.

In most of the particulars of moral treatment, the English asylums are fully equal to those of the United States. In the most important of all, if reference be had to curative treatment, or the quietude, order and hygienic condition of the patients,—that of occupation for the inmates,—they are supe-

rior. Their superiority lies not in the more ardent wish or the greater efforts for the welfare of their patients, for in these respects none excel American superintendents, but in the education of the people, and the nature of their political governments, and also the social restraints under which they live. Obedience to authority becomes by education a habit and principle of life. The English peasant and mechanic have an ingrained belief that they are not only born to labor, but to obey authority, and they readily and without question do as they are bid. Very different are they, and all the continental peasantry, from the American, who looks upon labor as somewhat menial, or, at any rate, regards it as his capital, upon which he has a right to fix his price.

As to correctional means, in the strict sense of the term, there are none in any good institution, and if strong measures are necessary, they must ever bear at the same time more or less of a medical or therapeutical character, and correspond precisely to the mental peculiarity of the patient, whereby their particular healing aim is not lost. Therefore alienists direct the most reasonable mode, not excepting the most extended douche, the deprivation of nourishment, and the like, seeking out for each individual case the most suitable measure, which often requires the deepest meditation.

Their argument is that the insane are diseased, and that their malady is not only curable, but, like all other maladies, curable in proportion to the promptness with which the treatment follows the attack, and that there should be no obstacle in the way of receiving treatment. That some restraint is considered necessary by them for the violent and demonstrative, is manifested by their tenacity for the shower bath, the packing sheet, and nauseating doses of antimony. That a large amount of personal freedom is best for the many, is shown in their so pertinaciously following the system inaugurated by Dr. Connolly at a time when one could hardly think of institutions for the insane without chains, scourges and bands of iron. But, thanks to the humane spirit of the age, which has at last forced its way like a loving genius into the cells of human beings who had sunk to a condition lower than the brutes, and removed from most of them those unhappy conditions which a harder and colder age had made a necessity.

For any success which has attended the labors in this hospital during the year past, great credit is due to Joseph Draper, M. D., Assistant-Physician, and D. W. Bemis, Esq., Steward and Treasurer, who have performed all their duties, and executed all plans faithfully and scrupulously.

Alfred E. Walker, M. D., who acted as Assistant-Physician during a part of the year, leaves to engage in other duties, with the kind wishes of all who came in contact with him.

The Supervisors, Marshall S. Greene, Miss Evans, and Miss Butter , have done much to promote the welfare of the patients by the kindness and faithfulness in which they performed all their duties. The attendants generally are to be commended for their thorough devotion to the best interests of those committed to their care.

Our thanks are due to Miss Dix for the kind interest she has manifested in the welfare of the institution.

I desire to express my sense of obligation to the many friends who have contributed to the welfare of our patients by their frequent concerts in sacred music.

We are also under obligations to many friends for especial favors, among whom may be mentioned Dr. R. W. Hooper, William Knowlton, Esq., Professor Bushee, Professor Harrington, Mr. Brainard, and others.

To the publishers and proprietors of newspapers and periodicals in the city and throughout the Commonwealth, who have sent to us their daily, weekly and monthly issues, we are greatly indebted.

To you, gentlemen, for the personal kindness, the cordial support, and the sympathy enjoyed at all times from each individual member of your board, permit me to renew the expression of my grateful sense of obligation.

With renewed vigor we commence the labors of the new year, trusting that we may be able to devote ourselves wholly and entirely to the development of the highest and best possibilities of our calling.

MERRICK BEMIS.

WORCESTER LUNATIC HOSPITAL, WORCESTER, MASS., Oct. 1, 1868.

METEOROLOGICAL OBSERVATIONS

MADE AT

THE STATE LUNATIC HOSPITAL, WORCESTER, MASS., 1867-8.

Latitude, 42° 16′ 17″ N.; Longitude 71° 48′ 13″ W. Elevation, 528 feet.

EXPLANATION.—The force of the wind is estimated upon a scale of 10 and indicated by figure affixed to the letters denoting the direction. When no number is affixed, 1 is meant.

METEOROLOGICAL OBSERVATIONS-OCTOBER, 1867.

			inch.																			eve.	-	even.	٧.							
	REMARKS.		Ice formed \$ of an inch. Aurora Borealis.			Rain.		Cloudless frost.	r rost.	Rain.	,,,	,,,		Frost.	Slight rain.		Hazy-fine weather.	33	"			Thunder-shower in eve.		Aurora Borealis in even.	Heavy frost, smoky.			r smoky.	Kainy.			
	Inches	Snow.	1 1	1	1	1	1	1		,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
NOW.	Rain & 1		1 1	1	1	1 5	1.40	1	1 1	1	1	1	.48	1	1	1	1	1	1	1	1	1 9	90.	1	1	1	1	1	19	1.83	1	3.79
RAIN AND SNOW.	Hour I	Ended.	1 1	1	1	1	a. m.	1	1 1	1	1 1	1	a. m.	1	1	1	1	1	1	1	1	1	a. m.	1	1	1	1	ı	1	p. m.	1	_
RAIN						m.	67				m.									4		p. m.	-						III.	00		Amount,
	Hour	Began.	! !	1	1	23 a.	-	1	'		7 a.		1	1	1	1	1		.1	1	1	S p.	1	1	1	1	1	1	, a.	1	-	A
+	orce.	9 P. M.	S. W.	N. E.	E.	1	ż	No.	i B		So E	S	N.W.	S. W.	N. W.	1	S. W.	S. W.	N. E.	N. E.	S. W.	N. W.	ż	N.	. W.	N. W.	S. W.	Z.E.	N.E.	N. N.	N. W.	
WIND.	Direction and Force.	2 P. M.	W. W.	W.	E.	E.	N. W.	N. N.	N. W.	. M.	E	N. E.	N. W.	N. W.	S. W.	N. E.	S. W.	Μ.	W.	N. E.	N.E.	S. W.	ż	N.	. s.	N. W.	N. W.	N. E.	N. E.	żż		
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CLOUDS.	-covered.	-	-10	010	00	10	67	0.	- 0	00	00	10	-	-	10	1	00	67	03	00	10	10	-	0	-	-	0	00 9	10	01	01	6.
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TER.	1. to 32	. 9 P. M.	230	8	-				3 29.626								0 29.375					9 29.384						7 29	63	8	6 29.183	9 29.419
BAROMETER.	Cor. and Red. to 32	2 P. M.	29.223	18	29	53		29.596				50	29	23	83		28		29.40	29 673	29.637	29.349	29.61		8	63	29	29.697	23	28	-	29.389
BA	Cor.	7 A. M.	29.290	29.066	29.658	29.493	29.276	29.612	29.724	29.004	29.004	29.117	29.231	29.346	29.379	29.528	29.578	29.280	29.392	29.645	29.722	29.502	29.555	29.839	29.859	29.716				29.037		29.442
		Mean.	49	57	47	99	48	45	47	10	59	46	48	90	52	19	29	64	63	69	99	19	44	33	43	47	49	48	49	49	52	19
	METE	9 P. M.	19	52	49	63	45	42	46	70	51	47	48	48	20	48	19	62	58	53	99	99	33	37	44	45	47	47	49	01	19	20
	THERMOMETER.	2 P. M.	89	15	53	54	53	53	99	60	54	47	52	59	63	69	89	75	75	99	99	19	67	49	54	58	09	69	53	900	22	58
	I	7 A. M.	90 10	57	40	49	47	40	40	141	59	45	45	43	42	46	46	54	26	29	52	89	44	31	32	38	40	38	45	47	49	45
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	oou,					9	1						0)						y	,					1	0					Means,

METEOROLOGICAL OBSERVATIONS-NOVEMBER, 1867.

	REMARKS.		Cloudy.	Hazy A.M.; fair P.M.	Cloudy and rainy.	Cloudy.	Fair weather.	Fair weather.	Cloudy, s'wfabos A M	Cloudy, 5 markes, in.m.	Cloudy and rainy	Cloudy and rainy	Cloudy and tamp;	Cloudy: snowf'hee D M	Cloudy and bluetering	Cloudy and blustering.	Cl'dy with enow conalle	Cl'dy with enow	Fair A M . snow so P M	Fair weather	Coldest dayof the season.	Cloudy and sonally.	Wild geese migrate	Cloudy and raine	Clondy and rainy	Cloudy and rainy.	Cloudy slight aurora		Fair weather.	Cloudy and rainy.	Drizzly.	Fair weather.		
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VIV.	H					4 3						10	-		00			11	6						-	10		104 a.m.	9			2 3	- total	Amounts,
H	Hour	Began.	1	1	8½ p. m		1	1	1		8 p. m	6 p. m.		51 n.m.		1	1	8 a m	8 p. m.		1	1	1	1	3 n. m.	9 p. m.		9 a. m.	1	9 a. m.	-	1	Am	Aun
	oree.	9 P. M.	S. W.	. W.	si i	S. W.	S. W.	N. W.	S. W.	Z	S. W.	N		Z	N. W	S. W.	N S	N	S. W.	S. W.	S. W.	S. W.	N. E.	S.	N S		00	S. W.			S	N. W.		
WIND.	Direction and Force.	2 P. M.	. M.	. N	S. W.		N.W.	N.W.	E.	N. E.	S. W.	32	W.	Z	Z	S. W.	N. W.	N	N.W.	N.W.	N.W.	S. W.	N. E.	S. E.	S. W.	Š	S. W.	S. W.	N. E.	N. E.	N. E.	N.W.		
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CLOUDS.	10=covered.	7A.M. 2P.M.	100	0		_	1 2	2 3	3 10			4	0	01 (6	6	2	000	1	0 8	8 1	0 10	1	01 (01 (01 0	01 0	10 10		3 10		0	1 9	
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BAROMETER.	Red. to	P. M.	29.311 2		263	136	29.611 2	444	673	472	323	400	355		28.873 2	28.868.2	9.523 9	9.047 2	29.033 2	29.187 2	29.462 2	453	575	628	526	581	29,531 2		29.442 2		388	951	98 844 9	
BAR	Cor. and Red.	7 A. M. 2	29.386 2					29.500 2				29.445 2			28.898 2	29.068 2										_						748	6 888 86	200
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	REMARKS.		Fair.	Fair.	Fair.	Fair.	Squally and stormy.	Fair.	Fair.	Fair.	Stormy A.M.; Fair F. M.	Plandy on d of comme	Soir	Fair	Cloudy and stormy.	Fair.	Fair.	Fair.	Clear.	Stormy.	Fair.	Stormy.	Fair.	Joudy.	Stormy.	Fair.	Cloudy.	Stormy.	Fair.	Fair.	air.		And the Control of th
	Inches	Snow.	25 F	1 1	1	- F	1 00	1		10	N P	1	1 2	1	- 0	.50 F	1	1	-	1 8	1	22	1	1	1	1	-	1	1	-	1	14.75	
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E.	320.	P. M.	29.787	3.316	3.222	338	28.946	29,196	29.377	29.546	787.787	20.402	0.040	99.561	9.192	29.072	8.996	9.509	9.894	9.472	29.765	0.072	9.457	29.441	29.518	29.514	29.154	29.442	9.585	9.719		29.410	
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	REMARKS.		Stormy all day.	Fair all day.	Stormy all day.	Fair all day.	Fair all day.	Fair all day.	Cloudy all day.	Cloudy and squally.	Fair snow sonall 9 P.M.	Cloudless.	Nearly the same.	dy all day.	C'dy, sn. fr. 3 p.m. to 12	Fair all day. [p. m.	Fair all day.	E :	Fair all day.	day.	p.m	S p.m.	all day; rain	=	Fair all day.		Cl'dy & stormy. [1 p.m.	storn	Cloudy and stormy.	Fair again.	Fair.	
	Inches	Snow	eo 1	1	4	1	1	1	1	1	1 1	1	1	1	-	1	1	1	1	1	00	1	1	1	1	1	1	ı	11	1	1	27
SNOW	Inches Rain &	Melted Snow.	1.13	1	.20	1	1.	1	1	1	1 1	1	1	1	60.	1	1	1	1	1	.44	1 5	89.	1	1	1	1	1	.93	1	1	3.27
RAIN AND SNOW.	Hour Hour	Began. Ended.	a. m. 12 p. m.		a. m. 12 p. m.		1	1	1	1		1	1	1	. m. 12 m.	1	1	1	1		a. m. 11 p. m.		2 m. 8 p. m.	1	1	p. m	1		- 8 p. m.		1	Amounts,
	Ho	Beg	es		51.3	*					_				3 3.			_		_	2½ a.		12			1 p			_			
	orce.	9 P. M.	N. K.	N	N. E.	N. W.	W.	N. W.	N.	N. W.	S W	N. W.	Μ.	S. W.	N.	N. W	M.	S. W.	W.	S. W.	N. E.	N. W	S. W.	N. W	N. W	N.E.	N. E.	N.	N	N. W	N. W	
WIND.	Direction and Force.	2 P. M.	N.N.	N.W.	N. E.	N. W.	W.	N. W.	N. E.	Z'Z	. N	N. W.	N. W.	S. W.	N. E.	N.W.	N. W.	W.	N.W.	S. W.	N.	N. W.	N. W.	N. W.	N.W.	N. E.	N.E.	N. E.	N. E.	N. W.	N. W.	
	Dire	7 A. M.	N. E.	N. W.	NE	N. W.	S. W.	N. W.	N.W.	N. W.	S. W.	N. W.	N. W.	N. W.	N. E.	-	N. W.	N. W.	N. W.	S. W.	N.	N. W.	N.W.	N. W.	0	N. W.	N. E.	_	N. E.	N. W.	N. W.	
DS.	red.	2P.M. 9P.M.	010	9 4	10	0	67	10	6	00	90	0	0	00	00	0	0	6		10	10	0	00	9	1	10	10	6	10	C4	0	9.
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CR.	0 32°. 1	9 P. M. JA.	28.698 10	99 270 9		29.492 2	29.467 0	29.394 0	29.165 9	20.114 9	90 914 0	29.495 0	29.671	-	3000	29.244 5	29.270 1	29.517 0		29,446 10		-	29.233 10	29.291 0	29,499 3	29.427 6	29.301 10	-	29.201 10	-	29.835 2	29.376
BAROMETER	Cor. and Red. to 32	A. M. 2 P. M.	29.454 28.978	99.175	99 083	29.432	29.409	29.376	29.265	28.926	29.240 29.290	29.446	29.673	29.763 29.723	29.379	29.159	29.174	29.429	29.709	29,496		29.750	29.451	29.240	29.436	29.416	29.267	29.426	29.341	421	53	29.426 29.342
		Mean. 7	220													19 2																21 2
	METER.	9 P. M. 3	600	97	14	15	21	31	35	000	0 12	9	10	17	12	16	14	15	14	32	25	23	39	28	21	12	23	20	23	15	15	19
	THERMOMETER.	2 P. M.	950	38	88	19	56	35	37	27	06	12	16	19	19	31	21	24	23	32	25	88	88	83	- 27	27	222	24	22	23	21	25
	T	7 A. M.	25	29	06	15	11	23	31	27	10	-1-	4	12	15	10	6	6	15	19	28	19	14	33	19	20	14	21	20	23	10	18
.dt.	mou 12.8 c	the Di		400	9 4	4 10	9	1	00	6	2:	161	122	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	nus.
	oon,		1	7					0	1					4	1								0						9	A	Means,

METEOROGICAL OBSERVATIONS—FEBRUARY, 1868.

	REMARKS.		Fair weather.	Hazy P. M. : lunar halo	Cloudless. [9 P.M.	Cloudy A. M. : fair P. M.	Fair A.M.: cloudy P.M.	Stormy and cloudy.	Fair weather.	Fair weather.	Rainy.	Fair weather.	Cloudy.	Cloudiess.	Fair weather.	Fair weather.	Fair weather.	Fair weather.		Fair weather.	Fair weather; snow sq's.	Fair weather.	Fair weather.	Fair weather.	Fair weather, cold't day.	Cloudy.	Hazy all day.	Cloudy all day.	C'dv A.M.: stormy P.M.	Stormy and cloudy.	Fair weather.	
	Inches	Snow.	1	1	1	1	1	4.75	i	1	1	1	1	1	1	1	1	i	1	2.00	1	1	1	1	1	1	1	1	1	2.00	1	8.75
SNOW.	Inches Rain &	Melted Snow.	1	1	1	1	1	.62	1	1	1	.45	1	1	1	1	1	1	1	.19	1	1	1	1	1	1	1	1	1	.27	1	1.63
RAIN AND SNOW.	Hour 1	Ended.	1	1	1	1	1	7 a. m.	1	1	1	l a. m.	1	1	1	1	1	1	1	3 a. m.	1	1	1	1	1	1	1		1	9 a. m.	1	nts,
RA	Hour	Began.	1	1	1	1	7 p. m.	. !	1	1	7g a. m.	1	1	1	1	1	1	1	4 p. m.	1	1	1	1	1	1	1	1	1	3 p. m.	1	1	Amounts,
	orce.	9 Р. м.	N. W.	N. W.	N. W.	S. W.	N. E.	N. W.	N. W.	N. W.	S. W.	N. W.	N. E.	N. W.	N. W.	N. W.	N. W.	N. E.	S. E.	N. W.	N.W.	. W.	N. N.	N. W.	N. W.	N. W.	N. E.	N. E.		N.W.	N. W.	
WIND.	Direction and Force.	2 P. M.	N. W.	N. W.	N. W.	W.	S. W.	N. W.	N. W.	N. W.	S. W.	N. W.	N. E.	N. W.	S. W.	N. W.	N. W.	N. E.	S. E.	N. W.	, W.	N. W.	. W.	N.	N. K.	N. W.	N. E.	N. E.	N. E.	N. E.	N. W.	
	Direc	7 A. M.	S. W.			-	S. W.		N. W.	N. W.	S. W.	N. W.	N. E.	N. W.	S. W.	N. W.	N. W.	N. E.	N. E.	N.	S. W.	N. W.	S. W.			N. W.	N. W.	Z.E.	N. E.	N. E.	N. W.	
TOUDS.	=covered.	2P.M. 9P.M.	0	110	0	0	10	9	0	-	10	-	4	0	0	00	9	67	10	1	0.	-	770	00	00	7	7	10	10	00	1	00
CLO	10=cc	7A.M. 2P	0 1	1 10	0 0	8	0	10 8	20	0 0	10 10	0	10 5	0	2	3	4 5	2 2	10 10	100	200	0 0	0	0 0	0 9	2 10	5 5	4 10	2	10 3	00	3. 4.
TER.	. to 32°.	9 P. M.	29.864		29.929	29.708	29.349	166.82	899.68	129.725	5 28.936	83		29.729						29.362					30	8	8		5 29.136	1 28.876	83	909.60
BAROMETER.	Cor. and Red.	м. 2 г. м.	53 29.919					36 28.838					76 29.623	53 29.690	57 29.476	37 29.535	12 29.391	21 29.546		63		71 29.318					83	_		11 28.823	-	11 29.617
	Cor	7 A.	29.953																		29.217				67	30	29			28.		29.521
	DER.	M. Mean.	-	000			77	27				13												20								19
	THERMOMETER	и. 9 г. м.	18	200				25				9		2013						15					4	_				24		19
	THER	L 2 P. M.	27	. 30	9	21	95	32	17	16	28	14	17	25	34	18	36	30	32	253	98	42	48	16	200	21	25	27	35	31	18	25
		7 A. M.	-			-		24	Silve		Take .		9		_		1000	-//	-	55		_	-					1000		27		14
10	SAR SAR	D	_		00	4	5	9		_	-	10	11	12	13			16	17	18	19	200	21	-		24	25	26	27	28	29	Means,
	noon		1	1						0	}						y								0							Me

METEOROGICAL OBSERVATIONS-MARCH, 1868.

	REMARKS.		Driving N.E. snow st'm.											Rain from S. W.	Blue birds and robin ap-	[peared.	Shower, Puss Willowin	Rain. [blossom.	Rain.		Aurora Borealis, 9 P.M.	Hazv, P. M.	Furious snow storm.			Aurora Borealis, 9 P. M.	Aurora Borealis.				Clear.	Snow gone, except where	Frogs peep. [drifted.	
	Inches	Snow.	1	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	44	1	1	1	1	1	1	1	1	1	i.	881
SNOW.	Inches Rain &	Melted Snow.	-1	99.	1	1	1	1	1	1	1	1	1	1	19.	1	90.	1	1	-87	1	1	.83	1	1	1	1	1	1	1	1	1	1	2.85
RAIN AND SNOW.	Hour	Ended.	1	p.m.	. 1	1	1	1	1	1	1	1	1	1	a. m.	ı	p. m.	, ,	1	a. m.	1	1	p. m.	. 1	1	1	1	1	1	1	1	1	1	i
RAI	Hour	Began.	р. ш.	- 10	1	1	1	1	1	1	1	1	-	p. m.	- 8	1	p. m. 2	a. m.	1	00	1	1	a. m. 4	1	-	1	1	. 1	1	1	1	,	1	Amounts.
		9 г. м. 1	N. E. 114	E.	N. W.	N. W.	N. W.	S. W.	S. W.	N. W.	N.W.	S. W.	N.	S. W. 8	S. W.	N.W.	S. W. 1	N. E. 1	S. W.	N. W.	N. E.	N. E.	N. E. 2	N. W.	N. W.	N.	N. E.	N.	N. W.	N. E.	N. E.	S. W.	N. E.	
WIND.	Direction and Force.	2 P. M.	N. W.	N. E.	N. W.	N.W.	N. W.	S	S. W.		N. W.	S. W.	ż	S. W.	S. W.	W.	S. W.	N. E.	S. W.	N. W.	N.E.	N. E.	N. E.	N. W.	N. W.	N. W.	N.E.	N.	N.W.	N.E.	N.E	N.E.	N. E.	
	Dire	7 A. M.	N. W.	N. E.	N. W.	N.W.	N W.	N	S. W.	S. W.	N.W.	N.W.	N. W.	N.E.	S. W.	W.					N. W.		N. E.			N. E.			N. W.				N. E.	
DS.	ered.	2P.M. 9P.M.	10	10	0	0	0	10	10	0	0	10	1	10	GI	. 9	-	10	10	23	-	10	10	-	-	0	1	0	-	0	0	20	0	60.
CLOUDS.	10=covered.	TA.M. 2P.3	0 4	_	-		0 . 0	-		8 6	0	6 9	20	1 9	0	3	9		_	0	0 0	8 0	0 10	2 2	8	1 1	1 9	0 8	1 1	0 1	0 0	2 5	4	4.
JR.	0 32 °.	9 P. M. T.	1				99.949		_	29 667 8	-	29.456					-						-		29.165				275	462	29.772	.575	_	29.453
BAROMETER	Cor. and Red. to 32	2 P. M.	29.375				29.801		619	29,491	29.716	29.456	29.858	29.740	29.119				292	332	29.572	462	641	810	29.195	325	575	575	262	300	654	29.662	29.595	29.435
BA	Cor. a	7 A. M.	29.876	28.924	29.040	99.286	29.765	30.005			29.670	29.644	29.662	29.912	29.205	29.227	29.365	29.492	29.373	29.267	29.613	29.585	28.869		29.291	29.175				29.295	20.593	29.764	29.423	29.437
	.;	Mean.	12	6	4	21	23	25	41	44	40	44	333	30	43	44	48	44	47	45	34	35	53	30	35	25	220	32	43	41	37	34	41	33
	METE	9 P. M.	18	-	67	16	19	34	40	42	40	44	27	34	41	41	48	44	51	35	933	35	31	53	000	53	31	35	41	33	35	35	40	35
-	тнекмометек.	2 P. M.	17	7	11	27	000	34	46	48	48	47	34	35	49	10	99	47	53	54	42	44	53	000	42	40	38	38	204	53	49	44	53	40
	I	7 A. M.	01	12	4	57	16	00	38	42	33	40	39	.21	41	41	41	45	38	46	58	58	28	28	58	400	56	27	333	36	31	25	18	28
of oth.	nom mom	the	-	07	00	7	5	9	7	00	6	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	53	30	31	ns,
1000	nase		-	9				P	1000	0)						٦	,	-						1	0				215		-	9	Means,

METEOROGICAL OBSERVATIONS—APRIL, 1868.

The state of the s	REMARKS.		Thunder storm.									Dandelion in blossom.					Amount O D Mr.	na y r. m.					Cowslip in blossom.	Wind flower in blossom.		Liverwort in blossom.	The party	Lunar halo 9 F. M.	et in olossom:	Bloodroot in blossom.	
The Charles and the Control of the C	88	ν.	Thu									Dane					A	MARIE					-			Live	-	Viole	TOTA	Bloo	1
	Inches	Snow.	1 1	1	1	22	1 4	1		1	- 1	1	1	1	1	1	1	1 1	1	1	1	1	1	00/4	1	1				1	163
SNOW	Inches Rain &	Melted Snow.	-22	1	1	91.	1 1	1.77	-	1.40	1	1	1	1	.08	1 0	19.	1 1	1	.92	1	.10	1	.36	1	2.10	_	16	17.		5.18
RAIN AND SNOW.	Hour	Ended.	5 p. m.			3 p. m.	11	2 a. m.	i, 1	12 p. m.		1	1	1	2 a. m.		1 a. m.			6 a. m.		5 p. m.	1	4 p. m.	1	6 p. m.	2 p. m.	1		6 p. m.	ints,
RA	Hour	Began.	2 p. m.		1	12 p. m.	- w - w	5 p.m. {	- 1	8 a. m. 1		1	1	7 p. m.		o a. m.	1		8 a. m.		1	3 p. m.	1	6g a. m.	1	4 p. m.	b.m.	" " I	- h. m.	5≟p.m. {	Amounts,
	orce.	9 P. M.	N.X.	N.W.		W.	S. W.	٧.	N. W.	N. W.	W.	N. W.	N. W.	S. W.	S. W.	. W.	. W. C	M S	N. E.		N.W.	N. W.	N. W.	.:	N. W.	N.) an o	No. No.		S. W.	
WIND.	Direction and Force.	2 P. M.	S.W.	N. W.	W.	N. W.	S. W.	-	N. W.	N. W.	W.	N. W.	N. W.	S. W.	N. W.	o w.	. M.	N S	N. E.	N. E.	N.W.	S. W.	N. W.	S. W.	N. W.	Z.		N. K.		S. W.	
	Direc	7 A. M.	N.E.	N. W.	N. W.	N. W.	S. W.	S. W.	W.	N. W.	N. W.	W.	N. W.	N. W.	N W.	00.00	P	S W	N. E.	N. E.	N. W.	S. W.	W.	S. W.	N. W.	N. E.		is z		N. E.	
98°	red.	2Р.М. 9Р.М.	1 9	0	-	0	101	0	0	10	10	10	0	01	10	20	9-	110	10	9	0	07	-	10	0	10	0	100	-	9	4.
CLOUDS,	-covered	-	100	1	10	4	10	63	00	10	07	10	0	00:	29	97	7	KAG	10	10	0	00	-	10	***	10	0	200		67	9.
_	. 10	M. TA.M.	99 24				-		0 91	-		8 17	-	27	200	-	-	6 -1		-	0 22		0 60	01 00	01 90	01 60	-	7 8	_	18 10	5.
TER.	80	9 P. M.	29.066	29.262	5 29.11	\$ 29.8	3 29.420		3 29.616					29.572		20.10	5 90 584	2 66 5	29.417	7 29.47	29.585		65	29	29.656	29.599	00 601			3 29.118	29,433
BAROMETER	Cor. and Red. to	2 P. M.	29.081 28.961	29.260	29.078	29.136	29,443	28.966	29.653	29.581	29.277	29.300	29.595	29.662	29.323	29.200	90.170	99 703	29.484	29.457	29,512	29.290	29.763	29.640	29.521	29.551	00 641	90.69	20.00	29.098	29.382
BA	Cor. an	7 A. M.	29.183	29.253	29.131	28.993	29.454	28.791	99 527	29.739	29.307	29.170	29.585	29.792	29.360	607 67	90 909	90 778	29.562	29.443	29.604	29.454	29.831	29.700	29.610	29.670	00 000	20.032	00000	29.237	29.458
		Mean.	30	38	57	56	250	31	25	25	31	33	28	34	100	200	99	47	43	909	99	90	43	100	400	40	40	47		54	41
	THERMOMETER.	9 P. M.	43	88	35	22	355	26	96	27	37	53	31	36	999	93	#0°	47	43	49	99	37	41	700	40	40	45	44	**	69	40
	HERM	2 P. M.	64	44	36	28	25.50	36	30	56	30	21	33	44	09	09	200	14	45	53	63	29	10	98	24	47	5.4	10 KG	3	64	46
	T	7 A. M.	35	32	30	30	23	31	12	24	26	41	21	53	96	90	60	200	4.50	99	46	49	35	3	35	35	06	41	**	40	87
.db.	uoui o s.Ci	the D	- 67	00	4	9	91	- 00	6	10	11	12	133	14	GI of	97	10	19	20	21	22	23	24	22	526	27	00	06	-	30	ns.
	uoo.						0))	Y							0							F	7		Means,

METEOROLOGICAL OBSERVATIONS-MAY, 1868.

* Since noon-day. † Since Saturday.

	REMARKS.									Snow from 5 to 8 A. M.		Julips in olossom.	Cherries in blossom.	Humming bird.														Tilon in blocom	Cut arnes on lawn	Out glass on man.		
	Inches	Snow.	1	1 1	1	1	1	1 1	1 1	1	1	1 1	1	1	1 1	1	1	1		1	1	ı	1 1	1	1 1	1	1	1		1	1	
SNOW.	Inches Rain &	Meited Snow.	1	1 1	1	1	-	180	90.	.75	1	1	1 1	1 1	918	.14	1	1	1 1	1 1	1	*3.6	1 1	-		+1.38	1	1	14		8.30	
RAIN AND SNOW.	Hour	Ended.	1 17	# b. m.	1	1	2 a. m.	o p. m.	е р. ш.	10 a. m.	1			1 1	15 a. m.	8 p. m.	. 1	1	1 0	2 p. m.		4 p. m.	1 1	11 a. m.	104 a. m.	8 a. m.	1	1	1 0	- H-	nt.	
RA	Hour	Began.	1 000	0 2 3. III.	1	1	l a. m.	o b. m.	6 p. m.		1	1 1	1 1	3 p. m.	8a.m. 8	2 p. m.			# SF. III	12 m. }	4 p. m.	1	24 p. m.	5 p.m. {	_	34 a. m.	-	1	1 p. m.	1 1	Amount.	
	orce.	9 г. м.	N. E.	i ki	W.	N.	N. E.		N.	-	≥F	i,	ip	N.E.	N. E. 8	N. E.		S. W.		N. E.	N.E.	N. E.	N.E.	*10	,	E.	S. E.	S. W.	o m	S. W.		
WIND.	Direction and Force.	2 P. M.	N. E.	iri	W.	S. W.	N. E.		N.	S. W.	M.F	zi p	i pi	N. E.	N. E.	N. E.		S. W.		N. E.	N.E.	N. E.	No.	N. E.	E	N. E.	S. E.	o p	o E.	S. W.		
	Direc	7 A. M.	N.W.	N.	F	S. W.	N. E.		N. E.	E.	· ·	. □	ip	N. E.	1		N. E.	oo p		N. E.	N. E.	N. E.	No.		S	N. E.		S. W.	o b	S. W.		
DS.	covered.	2P.M. 9P.M.	0,	20	1	10	10		01	0	0	00	00	10	0	10	1	01	10	10	10	10	20	10	00	10	0	000	20	0	6.	
CLOUDS.	10==cov		99				6		10	00	00 1	00	0 10	_	10	10	01	00 0	2	9			20		10		60		201		1	1
-	0.	ж. Таж	526 2		_	_	164 10		035 10	137 10	808	563 3	_	29.349 10	381 10	10 01		_	_	10 10	29.458 10	026 10	319 10	236 10	351 10		_			351 0	347 7.	
STER.	Cor. and Red. to 32		24 29.526	20.5	13 29	88 29.	6 29.164		34 29.035							29,	5 29	18 29.283		55 29.491	6 29.	629	3 8	29	88 90	88 29	.62 9.	2 29	200	29 351	5 29.347	
BAROMETER	and Re	2 P. M.	29.424	20.4	29.30	29.18	29.146	-	29.064		24.189			29.493			29.375		_	29.435	29.506	28.976	29.542	29	96 66	29 388	29.31	29.27	29.948	29	29.325	
BA	Cor.	7 A. M.	29.317	026.62	29.450	29.285	29.241		29.127	28.983	29.225	29.387	00.020	29.586	29.203	29.491	29.429	29.336	29.103	29.367	29,558	29 104	29.194	29.192	99 96	29.401	29.414	29.299	29.856	29.283	29.516	
		Mean.	1.40	250			19	96	45					50	186			19		90		19				57					53	
	METE	9 P. M.	45	14	59	46	47		42	42	90	47	75	52	99	53	09	660	00	49	46	53	46	51	68	55	58	09	19	61	59	-
	THERMOMETER.	2 P. M.	52	145	63	65	50	-	49	47	98	99	00	51	62	19	689	69	10	53	90	53	53	53	61	63	73	25	89	±02	69	200
	F	7 A. M.	45	44	47	47	47	F	45	34	45	52	44	49	69	20	200	22	54	67	49	49	99	48	69	54	54	99	200	64	54	
3	u o u vàs o	D	1	23 00	0 4	5	9		-	00	6	9:	17	225	14	12	16	17	18	19	20	21	27.53	24	96	38	27	87	88	88	100	60000
	oon,		1				0	9							-	,							•					A			Moon	means,

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METEOROGICAL OBSERVATIONS—JUNE, 1868.

	REMARKS.									Thunder storm.																					
	Inches	Snow.	1 1		1	1	1	1	1	1	1	1	1	1	1	1	ı	1	1	1	IF.	1	1		1 1	1 1		1	-	1	1
SNOW.	Inches	Melted Snow.	1 1	-	1	1	1	-=	16	1	1	1	1.95	1	1	1	ı	1	1	1		1 9	900.		1 1	1		1	1	1	8.08
RAIN AND SNOW.	Hour	Ended.	11 p.m.	-	1	1	1	9½ a.m.	84 a.m.	3 p. m.	1	1	12 p.m.	1	1	1	1	10 a.m.	,	1	1		1 p.m.			,		1	,	1	ınt,
RAI	Hour	Began.	84 p.m.	-	1	1	1	78 a. m.		1 p. m.	1	10 a. m.	1	1	1		1	8 a. m.	1	1	1	1 p. m.	1		-	1	1	1	,	1	Amount,
	orce.	9 Р. Ж.	N.W.	1	S. E.	S. E.	S. W.	N.E. {	Si.	N.W.	N. E.	N.E.	i i	N.W.	200	S. W.	ı p	- i	1	S. W.		N. E.	BN	N	S	W.	S. W.	N. E.	-	S. W.	
WIND.	Direction and Force.	2 F. M.	S. W.	NE	S. E.	S. E.	S. W.	N. E.	N. E.	S. W.	N. W.		N. E.	N.W.	200	S. W.	in	. i.	i E	S. W.		N. P.	iz	N N	M S	W	W	N. E.	N. E.	S. W.	
	Direc	7 A. M.	N.W.	Z	N.W.	N	S. W.	S. W.	N. W.	42	N.W.		N.E.	N.W.	S. E.		× × ×	in in	N. E.	. M.		44.5	iz.	. P	iÞ	W	M	N. E.	N. E.	E.	
DS.	ered.	2P.M. 9P.M.	6 9	00	2	10	6	10	-	6	00	07	2,	0	- 0	7	07	07	5.	- 6	0 0	25	20)	2	00	20	1	0	9	5.
CLOUDS.	10=covered.	-		4	0	10	9	10	00	10		01		6.		200	. 0	40	21		40	200	24	4 40	000	1	-	10	2	4	5.
-	0	9 P. M. 7A.M.	29.398 1				608 1	29.617 10	-	28.484 8	_					_					_			_	_		29.207 2	.388		29.626	29.447 5.
BAROMETER	Red. to	-	29.388 29	594 29	.731 29	669 29	29.416 29.	29.531 29	-						29.548 28		200	200	000	184			90 333 90		29.575 29				535	603	29.431 29
BAR	Cor. and Red. to 32		29.231 29					29.478 29	29.617 29					29.386 23	29.589 22	20.074					29.100 29.	20.000	20 306 00	20 490 90	29.630 20	29.474 20		29.316 29.			29.453 29
		Mean.	63					62		62																					65
	METER	9 Р. Ж.	62	54	99	19	68	54	- 49	99	19	49	60	89	99	38	200	60	77	120	000	200	63	269	9	69	7.5	19	63	64	63
	THERMOMETER.	2 P. M.	070	67	68	64	92	99	70	63	29	53	99		200	001	91		07	025	ōi	100	200	89	75	7.4	82	7.5	75	94	7.1
		7 A. M.	58	52	54	52	65	99	99	63	10	90	20	99	29	00	288	000	90	10	101	200	57	09	61	69	89	09	63	63	19
	ays		75	000	4			-	00	6	10	11	77	13	44	01	97	10	207	130	35	17	18	242	25	26	27	58	53	30	ins,
	nooi	Section 1				0)						-	9						•	•						A				Means,

METEOROGICAL OBSERVATIONS—JULY, 1868.

				ن		3 P.M.							htming	P. M.					ning.											ning.	1.
	REMARKS.			Thunder at 6 P. M.		Thunder storm at 3 P.M. fand 5 P.M.							Thunder and lightni	[at 8]					Thunder and lightning.	Drizzly.										Inunder and lightning.	
	Inches	Snow.	1 1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1 1	1	1	1.	1	1			1	ı	1	1 1	
SNOW.	Inches Rain &	Melted Snow.	1 1	1	1	.30	1	13	20.	! !	1	1	1	1	1	1	1	1	-0.	1	1	1	1	100	00.		1	1	-	11	1.08
RAIN AND SNOW.	Hour	Ended.		1	1	1	1	1	a. H.	,	1	1	1.	1	p. m.	1	1		p.m.		1	1	,	,	a. m.		1	1	a. m.	р. Б.	nt,
RAIN	Hour	Began. I	-	-	1	p. m.		p. m.	р. ш .d	1	1	1	1	1	p. m. 9	1			p. m. 55 p. m. 10		1	1	1	a. m.	1		1	1	a. m. 9	ii.	Amount,
	H					0.00			5	_					00	_			000		2		1	1					120		-
	Force.	9 P. M.	W S	S. W.	S. W	N.W.		S. W		S. W	N.W			S. W.		N. E.		D. W.	N. E.	N. E.	S. W.	S. W.		AE.	4	MN	-	S. W.	S.W.		
WIND.	Direction and Force.	2 P. M.	S.W.S	S. W.	S. W.	S. W.	N. E.	S. W.	N. K.	S. W.		N. W.		S. E.	S. W.	N. E.		D. W.	S. W.	N. E.				Z.Z.		N. W.	M	S. W.	S. W.		
	Direc	7 A. M.	oi or	S. W.	₩.	1	N. E.	K. E.	. E	N. W.					. W.				S. W.	A. E.	K. E.	· ·	ik.	ON. E.	44		W.	1	S. W.		
_	pq.		00 00		0	00	6	6	000		2 2			10 8		-	10	0	8 01	-				_		0	0	00	10		6.
CLOUDS.	-covered.	2P.M. 9P.M	01	100	1	5		0 9	20		4	7	3	8	4	24 0	70	9	9	10		0		25		000			5	100	5.
CL	10=	7A.M.	0.0	2	57	00	00	200	101	10	9	44	01	00	27 -	4 5	2	-	00		10	6,	07	201	200	10	10	10	10	01	6.
ER.	to 32°.		29.591	29.504	29.429	29.374	29.541	29.350			29.372	29.371	29.431	29.409	29.206	29.367	00 057	100.07	29.375		29.877	29.290	29.900	50 947	99 443	29.455	29,438	29.481	29.453	29.274	29.422
BAROMETER.	Cor. and Red. to 32°	2 P. M.	29.585	29.494	29.426	29.341	29.550	29.395	29.446	29.450	29.377	29.341	29.386	29.399	29.214	3 8		23.042	29.322		29.415		29.64/	29.830	90 303	29.445	29.463	29.470	29.435	29.332	29.433 29.396
BA	Cor. a	7 A. M.	29.616	29.540	29.510	29.405	29.555	29.510	29.454	29.502	29.425	29.382	29.387	29.450	29.817	23.224	90 401	101.65	29.360	29.558	29.458	29.480	29.679	29.961	90.308	29.487	29.474	29.492	29.481	29.433	29.433
	J	Mean.	88	79	85	81	69	200	99	75	80	84	82	85	200	==	11	01	11	11	72	77	19	300	22	69	22	69	71	75	74
	THERMOMETER	9 P. M.	75	94	62	78	09	89	66	72	78	83	85	78	180	38	200	71	7.5	64	77	75	100	60	9	89	69	99	71	74	71
200000	HERMC	2 P. M.	228	98	68	06	75	12	69	80	86	16	88	88	260	200	000	60	85	78	75	22.0	4.5	10	75	79	75	92	75	80	80
	H	7 A. M.	69	7.5	11	92	11	19	65	62	26	78	13	6.1	12	200	000	80	11	17	202	73	10	68	38	61	67	64	29	20	89
	ays non		-2	00	4	5	9	-0	0 6	10	=	12	13	#:	9:	120	10	10	19	20	21	77.	223	476	38	27	28	23	30	31	ns,
1000	noo	7.77		(9							y	,			1			0						F	7					Means,

METEOROGICAL OBSERVATIONS-AUGUST, 1868.

The second second	REMARKS.									Thunder st'm at 3 A. M.						Thunder st'm at 7d P.M.	Drizzly morning.													1	Thunder st'm at 4 P. M.			
	Inches	Snow.	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	ı	1	1	1	1	1	1	1	1	1	1	1	1		
SNOW.	Inches Rain &	Melted Snow.	1 1	1	1.27	1	80.	1	10	1.00	10	99.	1	1	1	1	1	1	1	1	.35	1	1	1	1	1	1	1	1	1	.24	1	0 57	10.0
RAIN AND SNOW	Hour	Ended.	1.1	1	4 p. m.	-	6 a. m.	,	1	1	1	11 p.m.	4 p. m.	64 p. m.	1	1	1	1	1	1	7 p m.		1	1	1	1	1	1	1	1	54 p.m.	1	1	ille,
RA	Hour	Began.	11	1	14 a. m.	1	34 a. m.	1		3 a. m.	1	14 p.m.	3 p. m.	6 p. m.	1	74 p. m.	1	1	1	1	It p. m.	-	1	1	1	1	1	1	1	1	4 p. m.		Amon	Amount,
	force.	9 P. M.	S. W	S. W.	-	N. E.	1	1	S. W.	S. W.	1	S. W.	N. W.	1	W.	S. W.	S. W.	W.	S. W.	S. W.	W.	1	1	1	1		S. W.	N. E.		S. W.	S. W.	1		
WIND.	Direction and Force.	2 P. M.	S. W.	S.W.	N. E.	N. E.	N. E.	N. E.		N. W.	W.	S. W.	N. W.	W.	S. W.	S. W.	N. W.	W.	S. W.	S. W.	W.	N. E.	N. E.	N. W.	W.	S. W.	W.	N. E.	S. W.	S. W.	S. W.	S. E.		
	Dire	7 A. M.	S. W.	S. W.	NE	N. E.		N. E.	S. W.		S. W.			N.W.		S. W.	W.			-		N. W.		N. E.	N. E.	-	S. W.	N. E.	1	S. W.		N. E.		
os.	red.	2P.M. 9P.M.	6 8	000	9	6	4	53	9	10	00	10	0	-	0	10	0	0	00	10	8	7	0	0	2	67	-	0	0	0	00	10		6.4
CLOUDS.	=covered.			000	100	202	00	01	10	9	4	10	4	00	7	*	00	00	4	9	10	6	00	-	1-	00	6	6	67	9	00	-		0.4 0.7
-	32°. 10	9 P. M. TA.M.	29.092 7	and the last	_		29.551 8	-		-	_	_	.393 8	.449 0	448 1	_	29.471 10		_	-	-		-	29.441 1	-	.480 1	29.460 4	29.712 10	_	29.383 10			1	29.577 9.
BAROMETER	Cor. and Red. to	2 P. M. 9	29.127 29											413										29.442 29	29.398 29							29.458 29		29.304 29
BAR	Cor. and	T A. M.	29.205 2	28.052	90 418 9				29.412 2		29.370 2			29.465 2	29.474 2	29.469 2	29 353 2	29.600 2				99.426 2	29.546 2	29.499 2	29.427	29.476	99.508					29 491 2	-	29.379 12
		Mean.	92	101	00	67	99	99	68	72	202	99	64	633	67	20	63	62	67	74	73		67	20	20	20	00	64	61	20	75	22	000	69
	THERMOMETER.	9 P. M.	72	192	000	66	929	63.	202	7.1	19	19	9	60	9	202	61	63	89	73	7.5	68	63	99	20	20	100	99	61	20		89	1	67
	HERM	2 P. M.	18	62	000	60	100	202	72	76	15	69	7	-	7.4	11	65	102	7.5	102	7.5	112	7.5	79	202	77	80	69	20	77	68	292	1	74
	-	7 A. M.	74	11	25	0/	69	655	62	102	69	89	69	200	61	63	99	54	69	202	25	69	63	65	9	64	67	88	25	64	64	99	1	69
ъ.	to sy	Dag Dag	-	27 0	0	4 1	9 4	10	- 00	0	10	11	19	100	14	151	16	17	18	10	06	91	06	93	94	95	96	97	26	000	38	318		ns,
	*\$081 \$,UO		1	(9							U	1						•	9					F	7							-	Means,

METEOROLOGICAL OBSERVATIONS—SEPTEMBER, 1868.

	REMARKS.								Showerv.	. (Chomoun	Showery.	Showery.	Showerv	Showery	circuit.				Fog and drizzle.	0															The second		
	Inches Inches	Snow.	1	1	1	1	1	1	1			1	1	1			1	1	1	1	1	1		1	1	1	1	1			1		1			1	1	
SNOW.	Inches Rain &	Melted Snow.	1	1	ı	1	2.45		84		04	70.	1	86	0.50	000	47.0	87.	1	1				1 0	10.	1	1	355		1	1	2.18	1	00	00.		1	8 60
RAIN AND SNOW.	Hour	Ended.	1			1	7 a. m.	-	m. 41 p. m.		10	. 42 p. m.	1	2 a m	_	-	. 5 a. m.	8 a. m.	1	1	1				. 104 p.m.	1	1	S n. m.	,		-	6 a. m.	1	Go m			1	Amount
H	Hour	Began.	,	1	1	1 a. m	1	1	3 a. m		111	12 p. m.	4 a. m.	8 n m		. b. m	4 p.m.	1	1	1	1			1	4 p. m.	1	1	4 a m	- 1	12 p. m.	1	94 p. m.					1	Am
	Force.	9 Р. Ж.	.W.	N. E.	, E	N. E.	N. W.	1	S. W.				1	M S	N N	10	· A ·	N. E.	S. E.	N. W.		M S		. w.	1	N. E.	N. E.	-	P	i	12.	Ä	N. E.	M			S. W.	-
WIND.	Direction and Force.	2 P. M.	. W.	P. E.	4	N. E.	N. W.	W.	S. W.	E	iB		1	S. W.	N	10	· A		S. E.			N S	E 0	20.00	. W.	N.E.	E.	E.	Z	ip	N. E.	N. E.	N. E.	M	III.	-	S. W.	
	Dire	7 A. M.	S. W.	i i	N. E.	E.	1	W.	S. W.	Z	100	į	'n	1	N E	. N	40	1	S. E.	1	N. W.			1 2	. W.	N. E.	N. E.	E.	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. E.	W.	N. E.		. M		S. W.	
DS.	ered.	м. 2р.м. 9р.м.	1,1	10	5	10	0	10	0	0	2	27	10	200	10	200	07	0 :	10	0	0	0	10	20	10	0	00	6	10	201	07	6	10	0	0	> 0	n	9
CLOUDS.	10=covered		-	4	6	10	0	4	1-	-	101	27	10	10		20	0 -	4			9		-		10	0	00			100			10			00	6	1 00
R.	. 32°.	9 P. M. 7A.	29.385 10		_	-			9.305 10	_		-	-	-		-	29.390 10	_	-	-	-	_	_	_	_	_		-	_		4,74	_	29.399 10		462	-,-	9.447	99 473 6
BAROMETER.	Cor. and Red. to	2 P. M.	29.249	29.993	29.701	29.468	29.320	29,393	29.292	177 06	00 055	29,000	29.385	99,480	90 592	000000	29.001	23.4/8	29.602	29.271	29.507	90 790	00 200	20.100	23.414	29.427	29.470	29 336	90 600	000.00	23.926	29.432	29.416	078 66	00 241	23.041	29.440 2	99 443
BA	Cor.	7 A. M.	29.277	29.489	29.705	28.574	29.381	99 416	29.310	00 470	00 449	27.416	29.393	99 481	90 511	00 400	23.400	29. (42	29.667	29.376	29,549	90 TRD	00 740	23.143	29,608	29.441	29.512	29,409	90 638	200.000	29.404	29.866	29.473	90, 296	90 984	200.00		99 495
		Mean.	73	99	62	63	99	99	89	69	000	00	89	7.5	000	31	17	7.9	69	89	48	40	60	00	60	90	900	58	200	000	7.0	69	51	RO	50	70	63	69
	METER	9 P. M.	67	7.9	59	62	62	63	63	24	200	66	99	7.4	RR	25	11	10	57	53	44	48	000	200	09	45	51	58	250	100	10	99	19	250	46	40	99	57
	THERMOMETER	2 P. M.	80	70	29	89	72	20	7.5	60	000	00	7.5	76	80	250		10	99	65	56	200	000	00	63	57	57	63	56	00	99	63	53	68	202	99	89	64
	-	7 A. M.	72	65	61	09	63	65	68	61	200	60	99	67	100	000	100	7.9	55	57	41	40	74	65	10	49	43	53	51	10	49	69	49	555	50	7.0	44	58
th.	mom	әцт		N	00	4	9	9	1	. 0	00	2	10	11	19	90	13	14	15	16	17	18	0	AT OF	20	21	22	23	10	#77	97	26	27	86	200	2	30	Moone

WEATHER AND WIND, 1867-8.

Number of days clear,	WEATHER AND WIND.	October.	October. November. De	December.	January.	February.	March.	April.	May.	June.	July.	August.	Septemb'r.	Total
. .	Tumber of days clear,	2	0	1	61	61	61	22	0	0	0	0	0	11
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Tumber of days cloudy,	29	30	30	29	27	29	28	31	30	31	31	30	355
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Tumber of days rainy,	111	19	12	10	6	6	16	17	6	п	11	15	149
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Number of days N. wind,	1	1	4	00	5	63	2	7	61	0	0	1	33
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Number of days N. W. wind,	11	11	19	21	20	17	17	1	8	9	9	60	139
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Number of days W. wind,	9	7	6	-	1	7	6	00	4	63	6	9	64
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Vumber of days S. W. wind,	12	18	10	9	8	10	12	1	6	16	19	10	137
3 2 0 0 1 0 1	Number of days S. wind,	63	9	0	0	0	1	0	60	9	2	0	1	20
	Number of days S. E. wind,	63	61	0	0	1	0	1	57	4	2	0	1	16
Number of days E. wind, 3 1 0 0 0 0 0 0 9	Number of days E. wind,	60	1	0	0	0	0	0	6	61	0	0	9	21
Number of days N. E. wind, 11 9 8 9 9 15 8 16 1	Number of days N. E. wind,	11	6	00	6	6	15	00	16	11	11	=======================================	=	129

REMARKS.

By clear days is meant days entirely clear; i. e., no cloud whatever being visible. By rainy days, that more or less rain (or snow) fell, without any reference to quantity.

SUMMARY OF METEOROLOGICAL OBSERVATIONS, 1867-8.

October. November. December.
45 35 19
58 42 26
60 87 22
51 88 23
29.442 28.882 29.424
29.389 28.844 29.671
29.419 28.868 29.410
29.417 28.865 29.468
4. 6. 5.
5. 6. 5.
4. 6. 5.
4. 6. 5.
3.79 2.19 2.07
- 1.7 14.75

AL.	Inches Snow.	82.50 91.00 91	67.37
TOTAL	Inches Rain.		46.82
IBER.	Inches Snow.	06 06 06 06 06 06 06 06 06 06 06 06 06 0	12.32
Весимвев.	Inches Rain.	122222222222222222222222222222222222222	3.73
BER.	Inches Snow.		2.84
NOVEMBER.	Inches Rain,	58825 3882 69 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3.92
ei I	Inches Snow.		14.
Остовев.	Inches Rain.	801.4.0.9.6.0.0.7.0.0.0.0.0.4.49.8. 2000000000	3.92
SEPT.	Inches Rain.	25 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3.71
Arg.	Inches Rain.		5.09
July.	Inches Rain.		3.89
JUNE.	Inches Rain.		3.23
MAY.	Inches Rain.	8.81.28.66.89.47.48.69.89.81.39.89.81.39.89.89.89.89.89.89.89.89.89.89.89.89.89	4.39
111	Inches Snow.		4.56
APR	Inches Rain.		4.03
Манси.	Inches Snow.		10.28
MA	Inches Rain.	24.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	3.48
UARY.	Inches Snow.	15. 15. 15. 15. 15. 15. 15. 15. 15. 15.	11.67
FEBRUARY	Inches Rain.	28. 44.12.2.4.12.2.4.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.1.2.2.4.2.2.2.4.1.2.2.4.2.2.2.4.1.2.2.4.2.2.2.4.1.2.2.2.4.1.2.2.2.4.1.2.2.2.4.1.2.2.2.2	3.09
ARY.	Inches Snow.	25.50 113.50 10.50	14.77
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34	YEAE.	1841, 1842, 1843, 1844, 1844, 1844, 1844, 1846, 1852, 1853, 1853, 1856, 1866, 1866,	Sums, . Means, .

Flowering Season on Hospital Hill for Thirty Years.

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TREES, SHRUBS, ETC.	Almond, Flowering, May 10 May Apple, Ash, Mountain, Bloodroot, Calicanthus, Calicanthus, Calicanthus, Currant, Wild, Dandelion, Daphne Mezereon, Fever Bush, Geranium Maculatum, Hyacinth, Leatherwood, Lieatherwood, Listerwort, May 16 May Liverwort, May 16 May Liverwort, May 16 May Liverwort, May 16 May Reach, Narcissus, May 16 May Pacinth May 16 May Liverwort, May 16 May Reach, Narcissus, May 27 May Rose, Russian, Rose, Russian, Scotch, Wind Flower, Wind Flower, Wind Flower, Wind Flower, Wind Flower, Warl Blue, Wind Flower, Wind Flower, Warl Blue, Wind Flower, Wind Flower

Flowering Season, &c.-Concluded.

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1855.	May June May June May Apr. May Apr. Apr. Apr. May May May May May May
1854.	May 20 Apr. 18 Apr. 18 June 6 May 16 Apr. 10 Apr. 20 June 2 May 88 Apr. 20 Apr. 30 June 6 May 28 Apr. 30 June 6 May 30 June 6 Apr. 30
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TREES, SHRUBS, ETC.	Almond, Flowering, Arbutus, Trailing, Ash, Mountain, Bloodroot, Calicanthus, Cherry, " Wild, Crocus, Currant, Missouri, Dandelion, Dandelion, Fever Bush, Geranium Maculatum, Honeysuckle, Tart, Horse-Chestnut, Hyacinth, Leatherwood, Lilac, " Persian, Liverwort, Maple, Red, Narcissus, Peach, " Scotch, Shad Bush, Violet, Blue, Violet, Blue, Wind Flower,
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APPENDIX.

FORMS CONCERNING ADMISSION TO THE HOSPITAL.

PETITION.

[The applicant must answer in writing the printed interrogations accompanying this blank.]

To the Honorable the Judge of the Probate Court, in and for the County of :

of on oath complains
that of , in said county
of , is an insane person, and a proper subject for the treatment
and custody of the Worcester Lunatic Hospital.

Wherefore, h prays that said may be committed to the said Worcester Lunatic Hospital according to law.

, ss. A. D. 186 .
Then the above named made oath that

the above complaint, by h subscribed, is true.

Before me,

, Justice of the Peace.

I, the subscriber, one of the selectmen of
where said
resides, hereby acknowledge
that notice has been given to me of the intention to present the foregoing
complaint and application.

A. D. 186.

To the Honorable the Judge of the Probate Court, in and for the County of :

The subscriber, having made application to your Honor for the commitment of to the Worcester Lunatic Hospital, as a lunatic, now presents the following statement, in answer to interrogatories:—

What is the age of the lunatic? Ans.

Birthplace? Ans.

Civil condition of lunatic? Ans.

Occupation? Ans.

Supposed cause of disease? Ans.

Duration? Ans.

Character-whether mild, violent or dangerous? Ans.

Homicidal or suicidal? Ans.

Paralytic or epileptic? Ans.

Previous existence of insanity in the lunatic? Ans.

Previous or present insanity in any of the family? Ans.

Habits in regard to temperance? Ans.

Whether he has been in any lunatic hospital; if so, what one, when, and how long? Ans.

(If a woman) Has she ever borne any children? Ans.

(If a woman.) How long since the birth of her last child? Ans.

Name and post-office address of some of the nearest relatives or friends?

Ans.

What facts show whether h has or has not a settlement, and where, if anywhere, in this State? Ans.

[For the law relating to settlement, see Gen. Stat., chap. 69.]

, Applicant.

PHYSICIANS' CERTIFICATE.

The subscribers, respectable physicians of in the county of , having made due inquiry and personal examination of named in the foregoing application, within one week prior to the date hereof, certify that the said is insane, and a proper subject for the treatment and custody of the Worcester Lunatic Hospital.

A. D. 186 .

, ss.

A. D. 186 .

made

Then the above named oath that the above certificate is true.

, Justice of the Peace.

Commonwealth of Massachusetts.

, ss. At

, in said county, on the

day of , A. D. 186 .

On the application of for the commitment of of in said county, to the Worcester Lunatic Hospital, ; notice in writing having been given by said applicant to one of the selectmen of where said resides, of h intention to make said application, and said having been duly notified of the time and place appointed for hearing, it appears, upon a full hearing, that said is an insane person, and a proper subject for the treatment and custody of the Worcester Lunatic Hospital.

Wherefore it is ordered that said to the said Worcester Lunatic Hospital. be committed

, Judge of Probate Court.

FORM OF OVERSEERS' BOND.

Worcester Lunatic Hospital.

Whereas, of , in the county of , has been admitted a boarder in the Worcester Lunatic , a majority Hospital, of the Overseers of the Poor of the town of , in the county of , in behalf of the inhabitants of said town, do hereby promise Treasurer of said Hospital, to pay him, or his successor in said office, the rate of board which may, from time to time, be determined by the Trustees of said hospital, for said patient, so long as h shall continue a boarder in said hospital, with such extra charges as may be occasioned by h requiring more than ordinary care and attention, to provide for h suitable clothing, and to pay for all such necessary articles of clothing as shall be procured for h by the Steward of the hospital, and to remove h from said hospital whenever the room occupied by h shall be required for a class of patients having preference by law, or in the opinion of the Superintendent, to be received into said hospital: Also to pay not exceeding fifty dollars for all damages h may do to the furniture and other property of said hospital, and for reasonable charges in case of elopement, and funeral charges in case of death. Payment to be made quarterly, and at the time of removal, with interest on each bill from and after the time it

Witness our hands this Attest. day of

(Signed,)

Overseers of the Poor of the Town of

FORM OF PRIVATE BOND.

Worcester Lunatic Hospital.

Whereas,

becomes due.

of

, in the county of

, as principal, and

of , in the county of , as surety, do hereby jointly and severally promise Treasurer of said hospital, to pay him or his successor in said office, the rate of board which may, from time to time, be determined by the Trustees of said hospital, for said patient, so long as h shall continue a boarder in said hospital, with such extra charges as may be occasioned by h requiring more than ordinary care and attention; to provide for h suitable clothing, and to pay for all such necessary articles of clothing as shall be procured for h by the Steward of the hospital, and to remove h from said hospital whenever the room occupied by h shall be required for a class of patients having preference by law, or in the opinion of the Superintendent, to be received into said hospital. Also to pay, not exceeding fifty dollars, for all damages

h may do the furniture and other property of said hospital, and for reason-

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able charges in case of elopement, and funeral charges in case of death. Payment to be made quarterly, and at the time of removal, with interest on each bill from and after the time it becomes due.

Witness our hands this

day of

, A. D. 186 . , Principal. , Surety.

Patients will be received into the hospital at any time, if the following conditions are complied with:

If the patient is in indigent circumstances, and has no settlement in any town in the Commonwealth, the Probate Court, or if in the city of Boston, the Superior Court, will issue a warrant for the commitment of the patient to the hospital. The State will then pay the cost of support, and the county from which the patient is sent will pay the expenses of the commitment.

If the patient is in indigent circumstances, and has a settlement in any town in the Commonwealth, the Overseers of the Poor of that town may give a bond for the support of the patient. Or, when this is inconvenient, an application may be made to the Probate Court of the county where the patient resides, and a warrant will be issued for the commitment of the patient to the hospital, and the town will be held responsible for the support of the patient.

In all other cases a bond from responsible persons, as principal and surety will be required for the expenses of the patient while in the hospital.

In all cases, before admission to the hospital, two physicians, one of whom shall be the family physician, must certify that the patient is insane.

All necessary clothing must be supplied by the friends of the patients.

Clothing will be supplied at the hospital, if desirable, and charged in the bills at cost.

Damages done to the furniture and other property to the amount of fifty dollars may also be charged.

Reasonable charges will be made in case of elopement, and funeral charge in case of death.

All bills are collected by the Treasurer quarterly, or interest charged on the same after becoming due.

Bills become due on the first of January, April, July and October, and when the patient leaves the hospital.