

Ninth annual report of the directors of the Glasgow Asylum for Lunatics, : submitted, in terms of their charter, to a general meeting of contributors, 9th January, 1823.

Contributors

Glasgow Royal Asylum for Lunatics.

Publication/Creation

Glasgow : Printed by James Curll, 26, Bell-Street, 1823.

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NINTH
Annual Report
OF
THE DIRECTORS
OF THE
GLASGOW ASYLUM
FOR
LUNATICS.



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NINTH
ANNUAL REPORT
OF
THE DIRECTORS
OF THE
GLASGOW
Asylum for Lunatics,

SUBMITTED,

IN TERMS OF THEIR CHARTER,

TO

A General Meeting of Contributors,

9th JANUARY, 1823.



GLASGOW,

PRINTED BY JAMES CURLL, 26, BELL-STREET.

1823.

Ashburn Reports
GLASGOW, Royal Mental Hospital



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NINTH ANNUAL REPORT

OF

THE DIRECTORS

OF THE

Glasgow Asylum for Lunatics.

THE Directors of the GLASGOW ASYLUM FOR LUNATICS, submit to the Contributors and to the Public, an account of their proceedings during last year, in this their NINTH ANNUAL REPORT.

	Males.	Females.	Total.
In the Asylum, 1st January, 1822,.....	74	47	121
Admitted since,.....	50	30	80
Do. from relapse,.....	1	0	1
	<u>125</u>	<u>77</u>	<u>202</u>
Dismissed Cured,.....	26	7	33
Do. Relieved,.....	12	13	25
Do. by desire,.....	13	12	25
Died,.....	11	2	13
Remaining, 31st December, 1822,.....	63	43	106
	<u>125</u>	<u>77</u>	<u>202</u>

None of the Patients, who were cured, have relapsed, in so far as we have yet learned; and some of them, who had been admitted at an early period of their malady, were dismissed, after only a short residence in the Asylum. Our mild system of cure, continues to manifest its usual good effects, while the Patients are under our care; and to leave, even after their dismissal, a favourable impression on their minds. Those who have been dismissed *cured*, contemplate the Asylum, not as their prison, but as a place of refuge, where, on a return of their lamentable malady, they are sure of protection and of kind treatment. Instances of the voluntary return of Patients have been noticed in former Reports, and several such instances occurred during last year. A female Patient, on experiencing some of the precursory symptoms of lunacy, soon after she had been dismissed cured, privately left her friends, and walked a distance of many miles to the Asylum. Of the Patients who were *relieved*, or who were dismissed by *desire*, some were much amended; others were in a state which did not admit of much improvement; and, what is not unusual, a few were prematurely removed by their friends. After a certain progress in convalescence, it is sometimes difficult to convince the relatives of a Patient, that any further treatment is necessary; but the relapse of a convalescent, soon after premature dismissal, has not unfrequently occurred: merely, as it would appear, from the feeling of sudden emancipation from our rules, before the habit of mental control had been sufficiently established. The proportion of deaths considerably exceeds that of any former year. But several Patients were unavoidably received in a dying state; and an unusually great number of Patients died of apoplexy,

or sunk under general palsy, in consequence of attacks of an apoplectic nature.

Died of Fever,.....	3
Dropsy,.....	2
Exhaustion,.....	2
Apoplexy, or Palsy,.....	6
	<hr/>
	13
	<hr/> <hr/>

The following Tables, constructed from the records, as usual, by the Superintendent, comprehend the admissions only for one year, preceding the 30th June last; and exhibit the events of the cases as ascertained by the 31st December.

MALE PATIENTS, OLD CASES.

Classification of Cases when admitted.	How Dismissed.				State of those Remaining.		Totals of the several Classifications.
	Cured.	Relieved.	By desire.	Died.	Improved.	Continuing the same.	
Furious,.....	1	0	2	1	0	1	5
Melancholy,.....	0	1	0	0	0	1	2
Furious and Melancholy,	0	0	1	0	0	0	1
Imbecile,.....	0	0	0	1	0	0	1
Fatuous,.....	0	1	2	0	0	0	3
Idiots,.....	0	0	1	1	0	2	4
Total,.....	1	2	6	3	0	4	16

FEMALE PATIENTS, OLD CASES.

Classification of Cases when admitted.	How Dismissed.				State of those Remaining.		Totals of the several Classifications.
	Cured.	Relieved.	By desire.	Died.	Improved.	Continuing the same.	
Furious,.....	0	1	0	0	0	1	2
Melancholy,.....	0	2	0	0	0	0	2
Furious and Melancholy,	0	0	1	0	0	1	2
Fatuous,	0	1	2	0	0	3	6
Idiots,	0	0	0	0	0	1	1
Total,	0	4	3	0	0	6	13

MALE PATIENTS, NEW CASES.

Classification of Cases when admitted.	How Dismissed.				State of those Remaining.		Totals of the several Classifications.
	Cured.	Relieved.	By desire.	Died.	Improved.	Continuing the same.	
Furious,.....	13	7	2	4	1	0	27
Melancholy,.....	4	2	0	1	0	0	7
Furious and Melancholy,	6	0	0	0	0	0	6
Imbecile,.....	1	0	0	0	0	1	2
Fatuous,	0	0	1	1	0	1	3
Total,.....	24	9	3	6	1	2	45

FEMALE PATIENTS, NEW CASES.

Classification of Cases when admitted.	How Dismissed.				State of those Remaining.		Totals of the several Classifications.
	Cured.	Relieved.	By desire.	Died.	Improved.	Continuing the same.	
Furious,.....	3	4	3	1	0	1	12
Melancholy,.....	3	2	2	0	0	0	7
Fatuous,.....	0	0	1	0	0	1	2
Total,.....	6	6	6	1	0	2	21

From these Tables, the result of the treatment, in regard to the relative proportions of cures, in the old, and in the new cases, is as follows:

OLD CASES.

Males treated,.....16,.....	Cured,.....	1
Females do.13,.....	Do.	0
		<u>1</u>
		<u>29</u>

NEW CASES.

Males treated,.....45,.....	Cured,.....	24
Females do.21,.....	Do.	6
		<u>6</u>
		<u>30</u>

The cure of mental derangement, like that of bodily disease, depends much on the timely use of remedies. Even the most judicious treatment known, often fails of

success; but it is not wonderful, that lunacy should be peculiarly intractable, after the aberrations of the mind have long become habitual, and its illusions, through frequent recurrence, perhaps indelibly impressed. Sometimes, from feelings of delicacy, the nature of the case is not disclosed, until concealment is no longer possible; but, not unfrequently, the malady has made some progress, before the friends of the Patient are aware of its existence. The following detail of symptoms, derived from our observation, or consistent with our experience, may serve, without the aid of professional knowledge, to direct attention to the state of the mind, on the approach of lunacy, and when proper treatment is likely to be of great avail.

The first indications of lunacy are various; and, as might be expected in the accounts given of a malady which exhibits a great diversity of forms, they have been variously described. Headache, giddiness, throbbing of the temples, or impaired vision, have ushered in a paroxysm; and hypochondriacal apprehensions, arising from a disordered state of the digestive organs, have terminated in maniacal illusions. In many instances, the symptoms, first remarked, are a defect in the power of attention, fits of absence, frequent talking or muttering of the Patient to himself, unmeaning fixed staring of the eyes, a dejected countenance, and sometimes jerking motions of the body, or odd gesticulations. * Together

* We scarcely need to mention, that the habit of exhibiting some of these symptoms, may be accidentally acquired; or, that some of them may proceed from a morbid state of the nervous system, without denoting any tendency to lunacy.

with these appearances, the mind is perhaps under the depressing influence of hurt pride, disappointed hope, or religious apprehensions: perhaps it is brooding over some feeling of remorse, fear, jealousy, or chagrin, on grounds which are wholly imaginary. Love is, in some cases, the predominant impression; and it is equally singular and characteristic, that the object of this affection and the Patient are sometimes unacquainted with each other. The first indication, in some Patients, is an extraordinary flow of high spirits, about to end, at length, in maniacal delirium. In some, extreme terror is first noticed. The countenance is pale, ghastly, and strongly expressive of the inward emotion; the speech is hurried and tremulous; and the extremities are cold, perhaps bedewed with a cold sweat. Soon, however, the eye glares malignantly, the face flushes, and assumes the expression of ferocity, the objects of terror become the objects of vengeance, and the Patient is furious. In some, there is an unusual degree of suspicion, or of anticipation of evil, and a belief in imaginary plots or conspiracies. In others, there is great irascibility and malignity, and some act of desperation, vengeance, or cruelty, is perhaps the first obvious symptom of the malady. From the commencement of lunacy, and especially as long as the mind continues to be in a state of excitement, Patients generally sleep little or none; yet some are disposed to lie constantly in bed, and are unwilling to answer questions, or to converse with their friends, or relatives. In some instances, the Patient carefully conceals his illusions, for a long time after they have taken possession of his mind. Perhaps he, for the first time, reveals them confidentially to his clergyman, or to his medical

attendant. As soon, however, as maniacal illusions are betrayed, the nature of the case is manifest.

The different physiological views which have been taken of the nature of lunacy, may have possibly had some share, in leading to certain discrepancies, which we have observed in the accounts given of the symptoms. Some of the most intelligent writers on the subject, are not even agreed, as to the organ which is primarily affected ; * nor have they settled whether lunacy is to be ascribed chiefly to moral, or to physical causes. And although we are disposed to think, that the disease originates in the brain; and that, perhaps in every instance, there exists a physical cause, or predisposition; yet the nature and limits of this Report, forbid us to enter on the discussion of these points.

In a considerable proportion of the cases which come under our care, we find that some change is recollected, by the friends of the Patient, to have taken place, in his temper, disposition, manners, or habits, before there was any suspicion entertained that his mind was about to become deranged. In some cases, only for a few days, in others, for weeks or even months, the Patient is observed to have become more sedate and pensive; or at

* “ Les préludes de l'invasion et du retour des attaques de manie peuvent être très-variés ; mais il semble en général que le siège primitif de cette aliénation est dans la région de l'estomac et des intestins, et que c'est de ce centre que se propage comme par une espèce d'irradiation le trouble de l'entendement.”—*Pinel*.

“ Tantôt les extrémités du système nerveux et les foyers de sensibilité placés dans diverses régions, tantôt l'appareil digestif, tantôt le foie et ses dépendances sont le premier siège du mal.”—*Esquirol*.

times gloomy, anxious, and irritable. He is less sociable, yet perhaps mixes occasionally with joyous parties; and, during that transient but dangerous respite from depression which he may obtain from the use of stimulating liquors, he is possibly admired for the liveliness of his conversation, and the acuteness of his wit. He is less interested in his usual occupations and amusements; yet he may sometimes, of a sudden, and for a short time, pursue them with enthusiastic ardour. Very often, at this period, he is subject to some unusual affection of his stomach, or bowels, * and his sleep begins to be disturbed and broken.

We do not expect that Patients, in this precursory stage of lunacy, will be sent to the Asylum. But we cannot too often repeat, that, as soon as the nature of the case is evident, recourse ought to be had to skilful treatment. It is gratifying to state, that, during last year, a considerable number of Patients were admitted at an early period of their malady, and were almost all speedily dismissed cured.

The Directors warmly sympathize with that feeling so natural to relatives, in regard to the danger of any degree of publicity being given to the cases under our treatment, or of any improper disclosures being made; and the strictest care is taken that no Patient shall be

* The active remedies which are frequently employed with benefit, in cases of indigestion, may sometimes owe their good effects, more to their influence on the state of the head, than is generally supposed. And where there is a known predisposition to lunacy, the possibility that a loss of tone in the digestive organs, may proceed from some change going on in the brain itself, ought not to be overlooked.

seen by strangers, and that no person shall be admitted to an interview with a Patient, without the approbation of his relatives, or guardians. Indeed, in our Asylum, the utmost degree of privacy is observed, consistently with that perfect security against neglect, and cruelty, which is afforded by the nature of the institution, and which is one of the great advantages of a *public* Asylum for Lunatics.

Some persons have hesitated, not only to place a Patient in any kind of Lunatic Asylum, but even to employ an experienced keeper; from a fear that those who have been much accustomed to coerce the insane, may not be disposed to treat them with due tenderness. But an experienced keeper has been taught to submit to the most insulting abuse, without retaliation. He has learned to observe, and even to anticipate, the changes in the state of the malady; and he is alert in detecting, and judicious in counteracting, the artful, and often dangerous purposes of the Patient. When any kind of coercion is necessary, he acts, from habit, with coolness and address; and without that awkward struggling, whereby Patients are often unnecessarily injured, when committed to the care of persons who are timid and ignorant, although perhaps very humanely disposed. In fact, with us, coercion is very little employed. Often out of the whole number of our Patients, amounting sometimes to more than 120, not a single individual is in confinement.

Much injury, and even fatal consequences, have resulted from forcible, and highly injudicious, though well meant attempts to compel Patients to swallow; and, in certain states of the malady, it is not unusual for lunatics to

refuse to take their food. Some refuse to eat, for the lamentable purpose of terminating their existence by starvation; others without assigning any reason for their abstinence. By some, a whimsical, or imaginary reason is assigned. One declines to eat, because he is not served in plate, with the choicest of viands and of wines, and with a proper train of attendants, befitting his imaginary high rank. Another, because he considers the Asylum to be a charitable establishment; and that, in taking any food, he is devouring the bread of the poor. Some fancy that medicines or poisons have been mixed with their victuals, and will either taste nothing voluntarily, or only when their attendant partakes with them. One person refused to eat, because he imagined that he was just going to be executed, for the commission of some capital crime, and therefore that it was quite unnecessary for him to take any more food. Fortunately, he imagined that the Physician was the judge by whom he had been condemned, and by whom a remission of his punishment might be granted. Accordingly, he daily, at the visit, fell on his knees to implore a respite; and he was daily respited, on condition that he would eat his dinner—which he then ate very heartily. In the course of a few days, this illusion gradually vanished. One of those interesting melancholics, who had long “pined in thought,” fancied that a person deceased, to whom she had been tenderly attached, would again appear and claim her as his bride. But, in order that the weight of her material frame might, in his flight with her to the region of spirits, be as small an encumbrance to him as possible, she refused to take her food; frequently asserting, that he never would return until her body was further reduced. By means of persuasion, aided by the influence of that

authoritative ascendancy which it is always of importance to maintain over the insane, she permitted herself to be fed; though often, after swallowing a morsel, she expressed her regret, that it would serve only to delay the long-expected arrival of her lover. In these, and in all similar cases, the reluctance to take food is overcome by address and perseverance, without the use of harsh or violent measures; and no such apparatus, as that of forcing instruments, is permitted to be used in the Asylum.

It is often no less difficult to judge of the cure, in lunacy, than of the first indications, and sometimes insidious approach of the malady. Much may no doubt be learned from the conversation and writings of the Patient; but it is astonishing with what propriety some persons will converse or write, who are unquestionably insane. One of our Patients, now considerably improved, but still under illusions, writes, in a kind of diary, the following account of his admission into the Asylum. "On my arrival in Glasgow, a number of interesting feelings rushed into my mind. The recollection of those happy days which I had formerly spent here, served only to augment my melancholy. But, being convinced, that, in all the proceedings of my friends regarding me, they had my welfare and ultimate recovery in view, I resolved cheerfully to submit to all their measures. After dinner, we stepped into a chaise; but instead of taking the road by which I had been led to expect that we were to travel, we proceeded to this large building. I was much struck by the external appearance of the edifice, but before I had time to observe it particularly, I was ushered into the company of lunatics, who

all seemed happy at the addition of one more to their number." He proceeds to give a very interesting account of some of his associates; but, for obvious reasons, we forbear to transcribe further.

The removal of a lunatic from his home to the Asylum, and, of course, from all persons who are familiar to him, and from all other known objects whatever, to a place where his attendants, and all objects around him, are strange, has often, by introducing some new train of thought, a powerful and salutary influence on his mind. A convalescent states, in a letter, as follows. "When I was brought to the Asylum, I fancied that I was placed in the anatomical class-room of the College, for the purpose of being dissected, or of having some dreadful operation performed on me; and this impression was so strong, as to banish all my former illusions! But when, by the kind treatment which I experienced, I discovered that this impression also was false, I began to distrust all my absurd fancies. And one day accidentally observing some well-known distant objects from the window, I discovered, for the first time, that I was in the Lunatic Asylum; and from that time I date my amendment."

The newspapers continue to be read with avidity, and many of our Patients take a warm interest in public events. The arrival of His Majesty in Scotland, called forth some loyal addresses in prose, and in verse. In one of these addresses to the King, the following passage occurs, among a detail of other grievances, public and private. "That, by the false advice of friends or foes, I am now confined, where a Physician has, by some oversight of Parliament, or in some way mysterious to me, obtained a power much

greater than that which any, or all the authorities of the land put together, can claim; so that he can, by his mere *ipse dixit*, detain a person here at his pleasure, notwithstanding repeated demands for the authority of his so acting, and every remonstrance against its illegality." Those who, with considerable powers of reasoning, are unconscious of the fallacy of their illusions, must very naturally judge it to be illegal, or mysterious, that they should be immured in a mad-house; and they are often highly indignant at the prolongation of a confinement, for which they can see no reason. But, how far soever Patients may seem to be advanced in convalescence, the want of a consciousness that they have been insane, if, at the same time, they have any remembrance of their insane fancies or conduct, is an unequivocal proof that their minds are still unsound. When, on the contrary, they are not only sensible of former mental aberrations, but also grateful for kind treatment, they have, in general, made a great progress in amendment, and are indeed not far from being well. Such favourable indications are often evinced by convalescents, and are well exemplified in the following letter. The writer had proposed, *rather prematurely*, to apply for his dismissal to the Weekly Committee. "I am aware that I have no right to trouble you so often on the subject of my dismissal. But, since I spoke of my application to the Committee of Management, it has occurred to me, that, previous to the adoption of that step, there ought to appear a reasonable ground of application, and a probable chance of success. As my situation precludes me from being a competent judge on either of these points, I must naturally lean for advice to you, who have all along judged of the ideas and sentiments which have, from

time to time, arisen in, or occupied my mind ; and from whom I received the first impressions of the necessity of doubting my own judgment, and of observing the feebleness of my capacity, and mode of reasoning. I am hopeful, that I have now, in some measure, recovered ; and that I shall be restored to my friends and society, as soon as the nature of my complaint will admit. This hope is my chief consolation. I do not, by this, mean to say, that I have not received every indulgence compatible with my situation. But comfort and happiness are unattainable without liberty. I must, however, confess, that I have great cause to be grateful ; and especially to be thankful to you, for your undeviating friendly attention.”

Many essays, and numerous letters have been written. Our poets, indeed, have not been very successful ; unless, perhaps, in one or two humorous effusions, of too ludicrous a cast to admit of being cited ; but some of our prose-writers have often displayed no small share of taste and ability. The specimens of the literary productions of our Patients, which we have given, in this, and former Reports, may, however, be sufficient to show, that persons who are inexperienced, ought to be cautious how they decide, either from the writings, or even from the conversation of a Patient, as to the state of his mind ; and, on the other hand, that it is highly unjust to conclude, that all who are confined in a mad-house, must be either stupid, or ferocious. Many of our Patients, who are not even convalescent, can, at times, or on certain subjects, both feel and reason justly. The mind deranged, has been compared to “ sweet bells jangled ;” and an eminent medical writer has remarked,

that “a madman may be said to be a man out of tune.” We must recollect, that he may be out of tune, only in some single strain.

But lunacy, in whatever form or degree, is undoubtedly one of the greatest of human calamities. And it is peculiarly our duty, as enjoined by our rules, to adopt, in the treatment of the insane, the best practice known, and “to spare no effort to improve, if possible, the practice in a disease, in the cure of which very much still remains to be done.” * When madness was ascribed to supernatural causes, we cannot wonder that little attention, beyond what superstition dictated, was paid to the cure of the malady. But it is unaccountable, that, till of late years, although the utmost efforts of the metaphysician had long been directed to the developement of the nature of mind, and although the cure of bodily disease had been judged to demand the skill of the scientific physician; yet, that the treatment of the mind diseased, was left, either to the uneducated empiric, or to persons who had no other object than profit in view, and who, far from attempting a cure, felt it to be their interest to retain their Patients as long as possible, and to subject them to the most degrading privations, for the purpose of maintaining them at the smallest possible cost. It is sickening to read the details † of the misery to which insane persons, even of amiable and unresisting dispositions, were thus cruelly subjected. Widely different, indeed, were the enlightened views of the liberal and humane founders of our Asylum. And, as we have

* Regulations of the Asylum.

† Parliamentary Inquiry, &c.

hitherto been gratified by the approbation of the most intelligent judges, we trust that we shall continue to maintain our reputation; not only by those merits which meet the eye of every observer, but by progressive improvement, in the moral, intellectual, and medical treatment of the insane.

The expenditure for last year, has been unusually great. Besides the ordinary expenditure, including that for the renewal, as usual, of various articles of furniture, there has been considerable outlay on repairs. The staircase and corridors have been painted; some repairs on the walls of the Asylum, which had been begun during the former year, have been finished; the cupola which had become pervious to rain, has been properly secured against such effects of the weather; and a large sum has been expended in erecting the additional ward. But, by means of donations and legacies, together with the ordinary revenue of the house, not only have the expenses of the year been defrayed, but also the whole debt due, at the commencement of the year, to the Secretary, has been liquidated; as will be seen by the following statement.

RECEIPTS AND DISBURSEMENTS

For the Year 1822.

Receipts.

SUBSCRIPTIONS and LEGACIES, £379 19 10	
Add, found in Charity-Box,	46 0 3
	<hr/>
	£426 0 1
BOARD of the Patients,.....	3935 0 7½
	<hr/>
	<hr/>
	£4361 0 8½

Disbursements.

Balance due the Secretary, per Report for 1821,.....	£ 460 14 0
HOUSE EXPENSE, <i>viz.</i>	
Accounts for Butcher Meat,.....	£421 18 10
Do. Bread,	256 19 2
Do. Beer,	219 15 10
Do. Groceries,	131 13 3
Do. Tea,	94 1 6
Do. Soap, Candle, &c.	113 16 6
Do. Coals,.....	88 0 0
Do. Medicines,.....	13 3 0
Do. Meal,.....	117 13 6
Do. Butter and Milk,	146 6 8
Do. Cheese, &c.	107 16 8
Do. Barley, Pease, &c.	103 0 6
Do. Miscellaneous, <i>viz.</i> Vegetables, Hay, Straw, Lint, &c. &c.....	361 9 1½
	<hr/>
	2175 14 6½
SALARIES to Superintendent, Matron, Surgeon, Secretary, and Porter,.....	373 6 0
WAGES to Keepers and Inferior Servants,	296 11 7½
FURNITURE Bought,.....	131 2 8
	<hr/>
Carried forward,	£3437 8 10

Brought forward,.....	£3437	8	10
CHARGES, viz.			
Printing,.....	£	13	15 0
Advertisements,.....		4	6 0
Law Charges,.....		26	11 7
Stationery,.....		5	5 4
Insurance,.....		5	0 0
Repairs,.....		243	17 6
Miscellaneous,.....		18	2 7½
			<hr/>
		316	18 0½
Feu-Duty, from Martinmas 1821, to Martinmas 1822, of Ground lately acquired, Rent of Garden Ground, &c.		178	16 10
Additional Buildings,.....		338	16 8
			<hr/>
	£4272	0	4½
			<hr/> <hr/>
Amount of RECEIPTS,.....	£4361	0	8½
Do. of DISBURSEMENTS,.....	4272	0	4½
			<hr/>
Balance due by the Secretary,.....	£89	0	4
			<hr/> <hr/>

The Directors congratulate the Subscribers and the Public, on the prosperous state of the Funds. The original contributions, though liberal beyond expectation, were insufficient to defray the expense of finishing and furnishing the Asylum; and debt to a large amount was contracted. By means of our yearly surplus *receipts*, that debt was gradually diminished, and is now wholly discharged. But, it must be recollected, that, while a part of the means of reducing our debt, arose from the board received for Patients, a still greater part was derived from the more precarious sources of donations and legacies; and that we have no capital provided for emergencies.

The addition made to the Asylum, by elongating one of the wings, has now, after a year's trial, been found completely to answer its intended purpose. No inconvenience nor accident has been experienced, in consequence of the want of subdivisions in the new ward. On the contrary, this ward is more secure against escape, and is more light and airy, than separate apartments could easily be made; and the whole Patients being visible at one view, the superintendence of them is thereby greatly facilitated. But although, in regard to Patients at the lower rates of board, the house has thus been relieved of its former crowded state; yet we are still in want of additional accommodations for Patients of the higher classes. With a view to accommodate such Patients, it has long been in contemplation to erect cottages. And if, for this purpose, it shall appear to be expedient, to devote the principle part of the new ground, an eligible plan of the necessary arrangements might, perhaps, without much difficulty, be devised. But we must not forget, that the object of the Asylum, was two-fold—not only “to restore reason,” but also “to lessen peril, where reason cannot be restored;” * and that we are still destitute of proper accommodations for incurables. Such accommodations are generally to be found in extensive Lunatic Establishments, and are the means, both of relieving society of numerous humiliating objects, and of securing these hapless objects themselves, from the common dangers of life; and from that wanton provocation and abuse, to which they are too frequently exposed.

* Inscription on Foundation Plate.

But, far from possessing the means of thus extending the Asylum, we are unable, without again contracting debt, to erect such additions, as would render the present Establishment complete, in all its parts; agreeably to the design of the Architect. The want of a proper Washing-House continues to occasion considerable inconvenience; and, as suggested in a former Report, it is highly desirable that a commodious Chapel should be added to the Asylum. Of various improvements, already under consideration, the introduction of gas-light is one of the most important. By means of gas, more lights could, with safety, be distributed throughout the house, than by any other means; and, during the long winter evenings, much additional comfort might thus be afforded to the Patients.

The Directors respectfully offer their warmest thanks to those Clergymen who have hitherto preached in the Asylum. But it cannot be expected, that, in addition to their other important and laborious duties, our Clergymen will continue to officiate, as often as could be wished. The propriety of permitting convalescent Patients to attend divine service, is now obvious. And, as the duty of preaching regularly in the Asylum, may probably be undertaken for a moderate salary, it appears, to the Directors, to be expedient that a Chaplain should be appointed.

The Directors return their most grateful thanks for the donations which were bestowed on the Asylum, during last year; and they are impressed with a deep sense of gratitude, for the following legacies, *viz.*

ARCHIBALD SMITH, Esq. of Jordanhill,	£50
JAMES CONNELL, Esq.,	21
ROBERT BLAIR, Esq.,	100
GEORGE OSWALD, Esq. of Auchincruive and Scotston,	100
Mrs. REID, of Greenlaw,	100

Some of these liberal benefactors of the Asylum, especially the late ARCHIBALD SMITH, and GEORGE OSWALD, Esqrs. evinced the warm interest which they took in the prosperity of the Institution; not only by these handsome legacies, but by former donations, and various valuable services.

The Directors thankfully acknowledge the liberal donations of Coals, which were received from the following Coal-Masters, *viz.*

Mr. GRAY,	12	Carts.
Mr. FARIE,	12	do.
Mr. MERRY,	8	do.
Mr. M' ALPIN,	8	do.
Mr. GEMMIL,	6	do.
HEIRS OF GENERAL SPENS,	6	do.
		<hr/>
		52 Carts.
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The Directors return their best thanks to the Physician, Surgeon, Superintendent, and Matron. They also warmly thank the Visitors, for the strict attention which they paid to their important duty.

The approbation of competent and impartial judges, with regard to any department of our Establishment, or

to any point of treatment, cannot fail to be acceptable to every friend of the Institution. Major WOODWARD, Inspector General of Prisons and Lunatic Asylums, in Ireland, having, on the 9th August last, inspected our Asylum, reported, that "he was much gratified by the state in which he found the House;" and the Directors have great pleasure in stating, that they have been favoured with the following satisfactory report, from WILLIAM ROSE ROBINSON, Esq. Sheriff of the County. "That he had, during last year, twice officially visited the Asylum, and that it afforded to him much satisfaction in having it in his power to report, that the system of treatment observed in this Institution, appears, in an eminent degree, to combine every possible attention to the mental solace and bodily comfort of the Patients, and which can aid the prospect, or even the hope of future recovery. The Sheriff has particularly observed, as a proof of the uniform kindness, discrimination, and skill with which the Patients of all ranks are treated, that there is, in this Asylum, a greater proportion of tranquillity and contentment, and less of that perturbation and violent irritation, than is perhaps to be found in other Institutions of a similar description."

The official report of the Sheriff is peculiarly gratifying. And the Directors confidently hope, that the approved principles, on which the treatment of the Patients is conducted, will, under faithful administration, ensure to our Asylum, the lasting approbation and support of the Public.

to any point of treatment, cannot fail to be acceptable to every friend of the Institution. Major Woodward, Inspector-General of Prisons and Lunatic Asylums, in Ireland, having, on the 26th August last, inspected our Asylum, reported, that "he was much gratified by the state in which he found the House;" and the Directors have great pleasure in stating, that they have been favoured with the following satisfactory report from William Ross Robinson, Esq. Sheriff of the County. "That he had, during last year, twice officially visited the Asylum, and that it afforded to him much satisfaction in having it in his power to report, that the system of treatment observed in this Institution appears, in an eminent degree, to combine every possible attention to the mental solace and bodily comfort of the Patients, and which can aid the progress, or even the hope of a permanent recovery. The Sheriff has particularly observed, as a proof of the uniform kindness, discrimination, and skill with which the Patients of all ranks are treated, that there is, in this Asylum, a greater proportion of tranquillity and contentment, and less of that perturbation and violent irritation, than is perhaps to be found in other Institutions of a similar description."

The official report of the Sheriff is peculiarly gratifying, and this Director cordially hopes, that the approved methods, and the treatment of the Patients, connected with the Institution, will continue to our Asylum, the being application and support of the Public.

Wm. Woodward, Esq. Inspector-General of Prisons and Lunatic Asylums in Ireland.

LIST OF DIRECTORS, &c.
For 1823.

The LORD PROVOST, President, *ex officio*.

Mr. John T. Alston,.....	}	from Town Council.
William Knox,.....		
Mungo N. Campbell,.....	}	from Merchants' House.
James Ewing,		
James Hunter,	}	from Trades' House.
William Snell,		
William Couper,	}	from Faculty of Physicians and Surgeons.
Dr. James Corkindale,.....		
Rev. James Marshall,.....	}	from General Session.
Mr. Archibald Lawson,.....		
Rev. Dr. Ranken,	}	
Dr. Macgill,.....		
Mr. John Machen,	}	from General Body of Subscribers.
George Rutherford,.....		
Robert Findlay,.....		
Daniel Mackenzie,.....		
William Jamieson, Jun.		
Andrew Mitchell,		
The Chief Magistrate of Paisley,.....	}	Directors, <i>ex officio</i> .
Dr. James Jeffray, Professor of Anatomy,.....		
Robert Freer, Professor of Medicine,		
William Meikleham, <i>Treasurer</i> ,		
John Balmanno, <i>Physician</i> ,		
William Cumin, <i>Surgeon</i> .		
Mr. Donald Cuthbertson, <i>Secretary</i> .		
William Drury, <i>Superintendent</i> .		
Mrs. Drury, <i>Matron</i> .		
John Kirk, <i>Porter</i> .		

WEEKLY COMMITTEE.

Dr. Balmanno, } <i>ex</i>	Mr. Findlay.
Prof. Meikleham, } <i>officio</i> .	Jamieson.
Dr. Ranken.	Dr. Corkindale.

VISITORS.

Mr. John Machen.	Mr. Benjamin Mathie.
Dr. Freer.	Robert Thomson.
Mr. George Rutherford.	William Couper.
Gilbert Watson.	David Crawford.
John Swanston.	James Ewing.
Archibald Lawson.	William Knox.
Robert Hood.	

LIST OF CONTRIBUTIONS,

Received in 1822.

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Lady Ross Baillie's Executors,		
10th Annual Donation,.....	£5	5 0
11th do. ....	5	5 0
	—————	£10 10 0
Executors of Robert Blair, Merchant,		
Glasgow, a Legacy,.....	£100	0 0
Deduct Legacy-Duty, .....	10	0 0
	—————	90 0 0
Executors of James Connell, Merchant,		
Glasgow, a Legacy,.....	£21	0 0
Deduct Legacy-Duty, less Interest,	0	7 2
	—————	20 12 10
Craig & Stirling, Plumbers, Glasgow,.....	1	1 0
Dr. Dinsmore, Stirling,.....	2	2 0
Archibald Geddes, Verreville,.....	1	1 0
John Gordon, Colourman, Glasgow,.....	1	0 0
Miss M'Grigor, Cochrane-Street, Glasgow, .....	1	1 0
Executors of George Oswald, of Auchincruive and Scotstown, a Legacy, .....	100	0 0
Executors of Mrs. Reid, of Greenlaw,		
a Legacy,.....	£100	0 0
Deduct Legacy-Duty,.....	10	0 0
	—————	90 0 0
Mrs. James Smith, George's Square, Glasgow,....	5	5 0
Executors of Archibald Smith, of Jordanhill, a Legacy, .....	50	0 0
Mrs. Watt, of Heathfield, .....	2	2 0
J. S. Wright, Bullcote Lodge,.....	5	5 0
	—————	£379 19 10
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## LIST OF PARISHES,

Which, by contributing the requisite Sum in proportion to their Population, have acquired the privilege of recommending their Insane Poor for Admission into the ASYLUM, on the same terms with those of the City of Glasgow.

Ayr.	Kippen.
Baldernock.	Lanark.
Barony of Glasgow.	Lesmahagow.
Bonhill.	Logie.
Carmunnock.	New Monkland.
Cathcart.	Monkton and Prestwick.
Cumbernauld.	Neilston.
Greenock.	Port-Glasgow.
Houstoun and Kilallan.	Renfrew.
Kilsyth.	Rothesay.



LIST OF PARISHES

Which by contributing the requisite sum in proportion to their Population, have acquired the privilege of recommending their names for Admission into the Academy, on the same terms with those of the City of Glasgow.

Kilpatrick	Ayr
Leith	Highland
Levenshagen	Barony of Glasgow
Leith	Burgh
New Meldrum	Cannock
Leith and Thistle	Canterbury
Leith	Canterbury
Port Glasgow	Glasgow
Leith	Leith and Colinton
Leith	Leith







