

General report of the Royal Hospitals of Bridewell and Bethlem, and of the House of Occupations, for the year ending 31st December, 1853 : printed for use of the governors / Bridewell Royal Hospital and Bethlem Royal Hospital.

Contributors

Bridewell Royal Hospital.
Bethlem Royal Hospital (London, England)
Bridewell Royal Hospital. House of Occupations.

Publication/Creation

London : David Batten, [1854]

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GENERAL REPORT

OF

THE ROYAL HOSPITALS

OF

BRIDEWELL AND BETHLEM,

AND OF THE

HOUSE OF OCCUPATIONS,


FOR THE YEAR ENDING 31ST DECEMBER,

1853.

PRINTED FOR THE USE OF THE GOVERNORS.

LONDON :

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BETHLEM HOSPITAL.

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BETHLEM HOSPITAL.

REPORT.

To the Right Worshipful the PRESIDENT,
the Worshipful the TREASURER, and
the GOVERNORS of the Royal Hospital
of Bethlem.

MY LORDS AND GENTLEMEN,

The Annual Report that I have now the honor of submitting to you, will, I hope, meet with your approbation; as the evidence it contains will, I have reason to think, prove to your satisfaction that this Hospital, which has the advantage of being under your supervision, and which enjoys the distinction of being one of the oldest charitable institutions for the reception of the insane in Europe, continues to be conducted on the best and most approved principles.

The object of these Annual Reports is, I apprehend, to lay before you, in plain unaffected language, an account of the management of the Hospital during the past year, with the Statistical Tables, and such practical remarks as may suggest for your consideration any additional measures which may increase the comfort of the patients, and still further carry out the great designs of this munificent endowment.

The humane and enlightened principles which now guide us in the moral and medical treatment of insanity,

may be said to have been recently discovered, and we may therefore look forward to many improvements being yet introduced into our present system of management, which can only be elicited by experience. This anticipation is in itself a great inducement to persevere in watching closely the habits and exigencies of the insane, of which I freely acknowledge I am deeply sensible, as well as of the responsible nature of the duties which devolve upon me; I at the same time feel greatly encouraged by the support which I have already received from your liberal administration.

On the 1st of January, 1853, there were 356 patients (including those out on leave) in the Hospital, of whom 194 were males, and 162 females; and during the year 242 patients were admitted—105 males, and 137 females; so that since the last Annual Report 598 patients have been under medical treatment and moral surveillance.

The admissions were as follows :—

	M.	F.	Total.
Curable.....	72	128	200
Incurable	1	3	4
Criminal	32	6	38
	<hr/>	<hr/>	<hr/>
	105	137	242
	<hr/>	<hr/>	<hr/>

The number of admissions in this, and in all other public institutions, is subject to remarkable fluctuations: thus, in the year 1849 there were received into this Hospital 344 patients; the next year the number rose to 373, and in the following year, viz., 1851, the admissions fell to 306.

It is, therefore, neither surprising nor disparaging to find the number of admissions last year was less than

during preceding years, which was reasonably accounted for by my predecessors, who observed, in their Report addressed to you in 1851, that “this diminution of admissions may be ascribed to the numerous County Asylums which have been erected in different parts of the kingdom, and which must necessarily diminish in a material degree the applications for admission into this and similar institutions.”* We have also to consider, that in the Metropolitan district alone, competition has induced the proprietors of some private asylums to adopt such a reduction of terms as render many of these establishments available to the middle classes of society,—persons on the verge of poverty, who would otherwise require charitable assistance. Among the admissions you will observe 38 criminal lunatics,—32 males, and 6 females,—being an increase of 10 upon the number admitted in 1852, and of as many as 24 upon the number admitted in 1851.†

The discharges and removals of patients during the year amounted to 212, of whom 82 were males, and 130 females; of these numbers it is satisfactory to state that 121 were dismissed cured. The details are as follows:—

	M.	F.	Total.
Cured	45	76	121
Uncured	35	48	83
Removed at request of friends.....	2	6	8
	<u>82</u>	<u>130</u>	<u>212</u>

The peculiar constitution of this Hospital, which, by its regulations, restricts the period of a patient's residence on the Curable Establishment to one year, with a discretionary extension to three or six months,—which

* Annual Report of 1851. † Vide Reports 1851 and 1825.

was wisely devised with the view of making it a strictly Curative Institution,—may explain the reason of so many patients being discharged *uncured*. The majority of them were in fact still under medical treatment, though with little, if any, hope of permanent amendment: it being well known that the chances of recovery are materially diminished after the first year; and the majority of cures here reported will be found to have taken place within the first three months after admission.

The deaths which took place during the year, it is highly satisfactory to state, were not so numerous as I had reason to anticipate in my last Report, where I explained that “the admission of patients from purely charitable motives, labouring under different forms of organic disease, greatly augmented the number of deaths, a result which, I ventured to observe, might during the current year be predicted.”* The particulars connected with the decease of these patients will be found fully detailed in the “*Case and Autopsy Books*,” and do not appear to demand any special notice. The general health of the patients during the year continued good; and, with the exception of one casualty, on which the coroner’s verdict was “Accidental Death,” no accident of any kind has occurred. It is gratifying, also, to report, that although epidemic cholera prevailed to a considerable extent in some of the suburbs of the Metropolis (a few cases occurring in this neighbourhood), not a single case of the disease appeared in this Hospital.

It is, I am aware, not customary to introduce into

* Report for 1852, p. 45.

these Reports details which are purely professional ; but you will, I hope, permit me to refer briefly to the general principles which we here observe in the management of the insane, whether curable or incurable. Every patient, on admission, is placed under immediate active medical treatment, although it may be very true, and the fact is confirmed by daily experience, that in some cases judicious moral treatment is of more avail in the cure of the disease than the exhibition of any kind of medicine. In the majority of cases, however, it is necessary to combine medical with moral treatment ; and here I have the satisfaction of stating that the "Non-Restraint System" continues to be unreservedly adopted in this Hospital, and, as far as my experience has gone, it has been attended with considerable success. You will, probably, allow me to explain, that mechanical restraint, by means of chains, belts, leg-locks, handcuffs, &c., was formerly considered to be indispensable in the treatment of the insane. The celebrated Thomas Willis advised, as the first indication in the curative process of madness, "manacles, fetters, and stripes ;" he also recommended "that the food should be slender, and not over delicate ; clothing rough ; bed hard ; and treatment severe and rigid."* "The first attention of the medical practitioner," says Dr. Cox, "is to see that the proper means of securing the patient be at hand.† We must have recourse to the best method of restraint, and perhaps every other must yield to the improved strait waistcoat, assisted by other means of coercion,

* Willis (Omnia Opera)

† Practical Observations on Insanity, by Joseph Mason Cox. London : 1804, p. 23.

known to those who undertake the care of the insane ; and he states, in a note to this passage, with evident satisfaction, that he has devised some improvement in a mechanical contrivance, of which he may, at some future time, publish a description with engravings.”* At this period, and indeed until very lately, the application of restraint was the rule of treatment ; hence Mr. Bryan Crowther, who was the Surgeon to this Hospital at the beginning of the present century, tells us, in his practical remarks on insanity, that “excepting for the strait waistcoat, and confinement to the room, we possess no ascendancy over unruly patients.” Hence, he pithily observes, that “to illustrate the propriety of management by a detail of cases, would be just giving the history of a strait waistcoat, with the benefit of coercion.”† Such was the system of restraint and coercion universally and indiscriminately adopted in the year 1807, when Dr. Powell, who was at that time Secretary to the Commission in Lunacy (then appointed by the College of Physicians), stated to the Committee of the House of Commons, that “Insane Houses were places for the safe custody and confinement of lunatics, rather than curative Hospitals.”‡ Happily, however, for the interests of humanity, this system has been abolished ; and although we are indebted to the illustrious Pinel for having, in the first instance, emancipated the poor lunatic from his fetters, a large debt

* Practical Observations on Insanity, by Joseph Mason Cox, Esq. London : 1804. P. 47.

† Practical Remarks on Insanity, by Bryan Crowther. London : 1811, pp. 89, 90.

‡ Report to the Select Committee. Powell, 1807.

of gratitude is due to those physicians in this country who have persevered in carrying out the views of this great philanthropist. It has been well observed, that the world is not less indebted to those who persevere in establishing a discovery, than the discoverer himself; for the most important truths require to be constantly reiterated before they take a firm hold of the public mind; and if the enlightened views of Pinel had not been adopted, and fairly tested at various public establishments, the possibility of managing violent lunatics, without imposing upon them the least mechanical restraint, would still be disputed, and the proposition denounced as utopian and impracticable. As a substitute for mechanical restraint, seclusion in the padded room is now resorted to, it being found that temporary isolation not unfrequently has the effect of tranquilizing the most violent lunatics, particularly after having a warm bath administered, and such sedatives, or other medicines, as the case may require. It was the celebrated physician, Autenreith, who invented, upon the authority of Dr. Burrows, the padded room; which however, Dr. Burrows himself, by the following account, appears to have highly disapproved of. "To obviate," says he, "the necessity of bodily restraint by the ordinary means, Dr. Autenreith constructed a strong room, padded all round, in which he conceived that the most furious lunatics might be let loose, like a beast in a den, without doing harm to himself or any one. The absurdity and uselessness of such a plan must be apparent to the experienced, who know that some maniacs, unrestrained and so situated, would tear away all padding, and beat their brains out; or soon become beasts

in reality.”* If Dr. Burrows had lived to see the success that has attended the use of the padded room, he would, no doubt, have greatly modified this opinion : but the practice of putting patients into seclusion by no means supersedes the necessity, at the same time, of medical treatment and constant attention. It is quite true that, if abused, the system of seclusion might be rendered very cruel. Solitary confinement, unnecessarily imposed, and unduly prolonged, would become painful and intolerable to many patients ; it is, therefore, very properly required, that in every Lunatic Asylum an entry should be made, in the Medical Journal, of the name of every patient placed in seclusion, and the duration of such confinement.

You will, I trust, excuse this digression which I have introduced with a view of calling your attention to the difference which exists between the system of treatment which was formerly adopted, and the one which is now found to be not only the most humane but the most successful. In illustration of the past and present plan of treatment, it may be interesting to contrast the two following cases, the one extracted from the Records of this Hospital, in the year 1809, the other from the “ Case Book,” of 1853. Both cases I transfer to my Report verbatim, leaving the deduction to others.

“ A. F. admitted into the Hospital, February 6, 1808, aged 34. This woman was born at Derby. At the age of 20, she came to London to seek for service, but she soon lost her character, and every sense of modesty and decency. The natural violence of her disposition was increased by her intemperance. She was the most tur-

* Commentaries on Insanity, Burrows. London : 1828, p. 689.

bulent of all the females that disturb the night about Fleet Market, and has been repeatedly flogged at Bridewell for her extreme violence and disorder. She became at length the horror of the watchmen, for punishing and imprisonment had no effect in checking her career. She was known to her companions by the name of "Ginger." In one of her paroxysms of rage she attacked the windows of the Mansion House, and on her examination before the Lord Mayor, it appeared that her violent disposition had gradually passed into a state of complete madness. Under these circumstances she was sent, February 6th, 1808, to the Hospital, and placed on the curable establishment. At the expiration of twelve months, her lunacy continuing, she was admitted on the incurable list. There is no record of the manner in which she conducted herself during the first year, but it appears that she was chained to her bed of straw for eight years without any covering or apparel. So long as she continued thus coerced the violence continued." The last entry is "*coercion still makes her ferocious, but when left at liberty she is not in the least degree dangerous.*"

"M. C. admitted into this Hospital, Sept. 30, 1853, in a state of violent raging excitement, depending upon acute mania. She had been in this state three days previous to her admission, and had wandered about the streets in a comparatively naked state, under the excitement of religious enthusiasm. She was a powerful muscular woman; and to bring her to the Hospital it was necessary to impose upon her the restraint of a straight jacket. She screamed violently all the way to the Hospital, and used the most threatening language, refusing to listen to anything that was said to her, but

when tired of vociferating, contented herself with kicking and spitting at those within her reach. On admission the mechanical restraint was removed; she was ordered a warm bath, and two grains of the acetate of morphia, and afterwards placed in a bed in a padded room. She continued noisy for an hour or two, and then became quieter, but the attendant who looked at her every half hour always found her sleepless. The following day she continued tranquil, but when addressed, responded with an oath or obscene expression. She was ordered one grain and a half of acetate of morphia. The third day she continued quiet and sullen, but permitted the nurse to dress her and place her in a chair in the day-room with the other patients. Her bowels not having been relieved, she was ordered one drop of croton oil on a lump of sugar. Within four hours after her bowels were acted upon she resumed her natural demeanor, and asked for employment. The following day (the 4th), she continued tranquil and rational, rather shrinking from conversation; and being a little feverish was ordered "henbane," with a saline. From that day she speedily became convalescent, and was discharged cured, November 11, 1853, having been a patient in the Hospital, 42 days."

Other cases of a similar description might be extracted from the Case Books and Records of the Hospital, but I apprehend these sufficiently evince the great advantage of the *non-restraint* system, which, with some few exceptions, is I believe adopted in all the best conducted Asylums in the Kingdom.

In the moral management of the insane, we cannot attach too much importance to those occupations and recreations which tend to divert the mind from its

delusions, and which rouse and invigorate the healthy exercise of its reflecting faculties. Speaking generally, we find lunatics of every class, unless urged to the contrary, disposed to be indolent ; some few indeed may be mischievously restless : but the majority succumb under their morbid feelings, and are indisposed to exert themselves with any degree of steadiness.

There can be no doubt that every description of occupation has a curative tendency, and it is desirable that such patients should receive every possible encouragement. Even recreation, whatever be the kind of amusement, is only another term for mental employment, and judiciously promoted, cheers the mind, and excites a healthy tone of feeling. Hence some of the patients during the year were permitted to walk out, under the care of nurses and proper attendants, which was esteemed a great indulgence, and had perceptibly a good effect. Four of the male patients, who were, however, not fit to be discharged, were allowed to spend a day at Kew, another day they went by steam-boat to the Nore ; and conducting themselves well, under the charge of careful attendants, during the year visited many different public exhibitions, the National Gallery, the Crystal Palace, Marlborough House, the Zoological Gardens, Smithfield Cattle Show, &c., &c. This privilege was awarded to them gradually, and was suggested by their enjoyment and quiet demeanor when first taken for a walk round the garden : and I have no hesitation in stating, that this indulgence having been highly appreciated by them, has had a beneficial effect upon their minds. If we can succeed in giving a patient the impression that we repose confidence in him, if we can make him sensible of the importance of keeping his *parole d'honneur*, we are

greatly improving his mental state : for the recovery of self respect is often the first indication of impending cure. Hence we find the Reports of many Lunatic Asylums attesting the advantages which patients derive from such excursions.

One of the most important points connected with the management of every Hospital or Asylum for the reception of Lunatics, affects the arrangements which are made for the proper classification of the patients. It is evident that the homicidal and suicidal, the maniacal and melancholic, the noisy and the dirty, must be separated from those who are tranquil, cleanly, well disposed, and perhaps only partially insane, or under some harmless delusion. My attention has been frequently directed to this subject, and I have endeavoured to avail myself of all the resources of the Hospital to effect this object. The alterations connected with the building itself, mentioned in my last Report, as being then anticipated, have, through your sanction and liberality, been proceeded with, and are all nearly finished. The wards are exceedingly comfortable, and the domestic appointments for the use of the patients in the day and sleeping rooms, very complete. It would also, I beg to observe, be in many respects advantageous if we possessed better means for employing, under proper selection, our criminal lunatics, who are not only capable but desirous of occupation. Their industry would, in a financial point of view, be very productive ; and, which is a most important consideration, their mental and bodily state of health would be thereby greatly improved.

It is lamentable to see strong and healthy men, in the prime of life, idling away their time from morning till night, lounging listlessly about the wards, doing nothing.

If indeed occupation be salutary, and conducive to the recovery of ordinary patients, persons who were never accused or found guilty of committing any crime, it is still more essential for that class of lunatics whose morbid associations, ever dwelling perhaps on one fatal deed, must assume a darker and gloomier character. The minds of such men ought to be engaged in some useful manual occupation, the want of which has a very injurious effect upon them. The propriety and expediency of giving criminal lunatics employment cannot, I think, be doubted; and from practical observation, I fully concur in the views expressed on this subject by a late honorable member of the House of Commons, and one of the Governors of this Hospital—Mr. Charles Pearson. “I am of opinion,” he observes, “that it would be just and proper to empower the government authorities, to whom the custody of criminal lunatics is entrusted, to exact from the healthy and able-bodied a certain amount of labour suited to their age and strength, and previous state and condition.” *

Much has lately been written and said on the subject of criminal lunacy, and the expediency of providing a special asylum for their reception. It would be out of place were I here to enter upon any discussion, but as your Medical Officer I feel justified in bearing my testimony to many of the advantages which this Hospital unquestionably possesses.

In a sanitary point of view, the salubrity of the situation cannot be doubted—well ventilated, dry and warm, the healthiness of the day and sleeping rooms

* Letter on the proposed Legislative Enactment in Reference to the Criminal Lunatics, by Charles Pearson, Esq. M.P., addressed to Dr. Forbes Winslow, Editor of “The Psychological Journal of Medicine,” Vol. 1. p. 182.

cannot be questioned, indeed the facts speak for themselves: our mortality always has been small, and no cases of Cholera, or I believe any other epidemic, has ever occurred within the walls of Bethlem. It is true that we do not, in comparison with some of the County Asylums, enjoy a very extensive acreage of land, nor is the building surrounded with luxuriantly-wooded pleasure grounds; but when we look to the practical utility of these attractive features, we shall find, as far as this Hospital is concerned, they would be of little advantage to us. The want of land we do not feel, because the patients we admit do not, for the most part, belong to the class of agricultural labourers. Half-pay officers, professional men (dependent for support on their mental toil), artists, reduced tradesmen, mechanics, who are not accustomed to field or garden work, nor could we insist upon their so occupying themselves. The inmates of Bethlem belong principally to the middle classes of society; they are in the position of life to which "private patients" (as they are termed) commonly belong; and one of the great advantages of this Hospital is, that being open for their reception, the pain of sending them to a County or Parish Asylum, where they would be at once associated with paupers, is at any rate for a short period postponed. Again, we have no luxuriantly-wooded avenues or pleasure grounds, no park-like scenery surrounding the building; but let us fairly weigh the facts—the safe custody of our criminal lunatics is one of the chief objects which induces the Government authorities to confide to our care this class of patients; and what would be the result if they had the opportunity of roaming unrestrained over such grounds as surround most of our County Lunatic Asylums? The criminal

lunatic, to effect his escape, has a desperate stake at issue—active, cunning, ingenious, and persevering; the only security we can have that he shall not carry out his object, must be looked for in the circumstance of his being constantly within sight of the attendant. The airing grounds connected with this building are large enough for every purpose of exercise and health, which fact is sufficiently proved by the number of years many of these patients have lived here, and by the habitual healthy state of the criminal establishment.

During the last year, in accordance with the announcement which I made in my former Report, I delivered in the Hospital a course of Lectures on the Nature and Treatment of Insanity, illustrated by such cases as were then under medical treatment.

These Lectures were delivered during the months of May, June, and July, and I felt much flattered by their reception. Several of our Governors did me the honour to attend; and I was much gratified in observing that many eminent members of our profession favoured me with their presence at the introductory Lecture. This year I purpose, under your sanction, delivering a similar course, again illustrating the subject matter referred to in the different Lectures by such apposite cases as may then be in the Hospital. The study of mental disease is now recognized to be a distinct and legitimate branch of medical science; and the current admission of recent cases into this Institution present an ever-varying field for practical observation, which the numerous general Hospitals in this Metropolis do not profess to command: Here the pupil has the opportunity of studying all the different forms of insanity, and that too in the early state of the disease. Here he may dismiss his

book-taught theories, and learn to appreciate the value of facts as they appear visibly before him. The attendance of students at these Lectures has not, it appears, since this course was instituted, been so satisfactory as could be desired. My predecessors complained of the small number of those who regularly attended ; but it is to be remembered, that the practice of lunacy is a "specialty ;" and the pupils attending the London, or other Schools of Medicine, aim at qualifying themselves for general medical and surgical practice,—and so much information is required to enable them to pass the stringent examinations which they have to undergo at the different Halls and Colleges, that many of them cannot afford time to follow up any of the collateral branches of this science.

Before concluding, it is perhaps my duty to refer, as an event in the history of this Institution, of which these Annual Reports may be considered passing records, to the circumstance of an Act of Parliament (16 and 17 Vict. cap. 97) having come into operation on the 1st of November last, by one of the clauses of which, this Hospital is placed under the supervision of the Commissioners in Lunacy. Many of the printed forms of various returns which we had hitherto used have of necessity been altered to comply with the provisions of the Statute. The Statistical Tables annexed to this Report will be found to be drawn up carefully on the same plan as hitherto adopted ; one however, marked No. 5, is somewhat added to, and now shows at a glance the number of male and female curable patients *admitted* and *discharged*, whether as cured, uncured, or dead, during each month in the year.

In conclusion, allow me to acknowledge the courtesy and assistance which I have, on all occasions, personally received from the Members of your Honorable Board, and I beg to subscribe myself,

My Lords and Gentlemen,

Your very respectful and obedient Servant,

W. CHARLES HOOD, M.D.,
Resident Physician.

January 30th, 1854.

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No. 1.

PATIENTS ADMITTED AND DISCHARGED.

	Between the Years 1820 and 1852 inclusive.												During 1853.																			
	Curables.				Incurables.				Criminals.				Total.				Curables.				Incurables.				Criminals.				Total.			
	M.	F.	T.	Total.	M.	F.	T.	Total.	M.	F.	T.	Total.	M.	F.	T.	Total.	M.	F.	T.	Total.	M.	F.	T.	Total.	M.	F.	T.	Total.				
Remained in Hospital 1st Jan. 1820, including those out on leave of absence	29	52	81	161	28	41	69	138	41	9	50	100	98	102	200	66	103	169	338	38	37	75	150	90	22	112	224	194	162	356		
Admitted during the years	3127	4713	7840	15680	102	109	211	322	261	65	326	652	3490	4887	8377	72	128	200	399	1	3	4	8	32	6	38	105	137	242			
	3156	4765	7921	15642	130	150	280	560	302	74	376	3588	4989	8577	138	231	369	738	39	40	79	158	122	28	150	299	299	299	598			
Discharged—	1517	2512	4029	8549	8	24	32	64	70	29	99	1595	2565	4160	38	75	113	216	..	..	..	..	7	1	8	45	76	121
Cured	736	1320	2056	4082	..	4	4	8	3	..	3	733	1324	2057	35	48	83	126	..	..	..	..	..	..	..	35	48	83
By request of friends	85	110	195	390	24	20	44	88	..	..	..	109	130	239	2	6	8	16	..	..	..	..	..	..	..	2	6	8
Disqualified cases	529	425	954	1908	6	..	6	12	..	..	..	535	425	960	..	1	1	2	..	..	..	..	..	..	..	..	1	1
Having been sent out on leave of absence, and no account since received of their state of mind	30	64	94	158	..	1	1	2	..	..	..	30	65	95	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Removed by order of the Secretary of State	..	..	..	..	..	..	..	..	62	6	68	62	6	68	..	..	..	..	..	..	..	..	27	4	31	27	4	31
Escaped	..	1	1	2	..	..	1	2	1	1	2	2	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Died	199	230	429	858	53	64	117	174	76	16	92	328	310	638	9	7	16	32	1	3	4	8	4	1	5	14	11	25				
Remaining 31st December, 1852:—	1	4	5	10	..	..	..	..	..	..	..	1	4	5	4	5	9	14	..	..	..	..	..	..	..	4	5	9
Out on leave	65	99	164	328	38	37	75	150	90	22	112	193	158	351	50	89	139	278	38	37	75	150	84	22	106	172	148	320				
In Hospital	3156	4765	7921	15642	130	150	280	560	302	74	376	3588	4989	8577	138	231	369	738	39	40	79	158	122	28	150	299	299	598				

No. 2.

AVERAGE NUMBER OF PATIENTS in the HOSPITAL, attending Chapel, and under restraint, during the last thirteen years.

During the Year.	Number of Patients.	Sunday Chapel Attendance.	Weekly average of Patients under restraint.
1841	341	80½, or 23.60 per cent.	9, or 2.64 per cent.
1842	369	139, or 37.66 per cent.	3, or 0.81 per cent.
1843	367	181, or 49.31 per cent.	3, or 0.81 per cent.
1844	359	164*, or 46.45 per cent.	1½, or 0.33 per cent.
1845	403	†	⅔, or 0.17 per cent.
1846	395		1⅓, or .06 per cent.
1847	392	147, or 37½ per cent.	¼, or .05 per cent.
1848	399	138, or 34.58 per cent.	$\frac{73}{368}$, or .05 per cent.
1849	406	138, or 33.9 per cent.	$\frac{63}{365}$, or .04 per cent.
1850	391	147, or 37.59 per cent.	$\frac{37}{385}$, or .025 per cent.
1851	388	133, or 34.28 per cent.	
1852	374	132, or 35.56 per cent.	
1853	343	141, or 41.1 per cent.	

AVERAGE DAILY NUMBER OF PERSONS EMPLOYED.

Males	111
Females.....	84
	195

* To 30th June, when the enlargement of the Chapel was begun,

† Partially suspended during the enlargement of the Chapel.

No. 3.

TOTAL NUMBER OF CURABLE PATIENTS admitted into BETHLEM HOSPITAL during One Hundred Years, ending the 31st December, 1853, with the amount of Cures and Deaths.

Total Patients admitted	19,265.
Discharged cured.....	8,162, or 42.36 per cent.
Died	1,650, or 8.56 per cent.

No. 4.

ANNUAL ADMISSIONS, CURES, and DEATHS of CURABLE PATIENTS,
during the last Thirty-three Years.

Year.	Admitted.			Cured.			Died.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1821	58	77	135	22	21	43	1	5	6
1822	55	110	165	22	44	66	5	6	11
1823	57	88	145	21	51	72	4	1	5
1824	65	90	155	23	36	59	1	5	6
1825	72	98	170	30	40	70	6	6	12
1826	67	95	162	24	46	70	1	5	6
1827	64	85	149	26	38	64	6	3	9
1828	87	117	204	43	68	111	5	1	6
1829	78	117	195	56	70	126	6	4	10
1830	83	118	201	36	74	110	2	4	6
1831	81	131	212	35	63	98	5	1	6
1832	62	101	163	23	69	92	2	3	5
1833	61	123	184	25	55	80	1	4	5
1834	102	116	218	49	65	114	8	2	10
1835	111	145	256	36	74	110	5	8	13
1836	109	144	253	50	85	135	9	11	20
1837	119	177	296	61	94	155	9	8	17
1838	107	163	270	58	120	178	6	9	15
1839	104	181	285	54	83	137	9	8	17
1840	127	181	308	72	108	180	4	8	12
1841	101	165	266	58	99	157	13	11	24
1842	127	195	322	57	105	162	8	7	15
1843	109	175	284	56	103	159	8	11	9
1844	118	168	286	58	70	128	6	13	19
1845	110	205	315	62	118	180	8	7	15
1846	125	168	293	66	95	161	2	4	6
1847	124	190	314	68	107	175	3	9	12
1848	118	188	306	74	82	156	2	9	11
1849	124	192	316	66	106	172	6	12	18
1850	135	209	344	74	123	197	20	11	31
1851	112	174	286	52	69	121	9	17	26
1852	101	167	268	49	94	143	15	12	27
1853	72	128	200	38	75	113	9	7	16
	3145	4781	7926	1544	2550	4094	204	232	436

No. 5.

ADMISSION and DISCHARGE of CURABLE PATIENTS
during the year 1853.

Month.	Admitted.			Discharged								
				Cured.			Uncured.			Died.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
January	1	13	14	2	9	11	2	2	4	..	1	1
February	5	9	14	5	8	13	2	3	5	1	..	1
March	9	9	18	3	4	7	3	1	4	2	1	3
April	4	9	13	2	12	14	5	2	7	..	2	2
May	7	10	17	1	5	6	..	9	9	3	..	3
June.....	9	15	24	1	4	5	4	4	8	1	..	1
July.....	14	13	27	4	7	11	1	5	6	..	..	..
August.....	11	12	23	4	8	12	4	7	11	..	..	..
September ..	4	13	17	2	3	5	7	4	11	2	..	2
October	3	7	10	7	2	9	5	2	7	..	..	..
November ..	2	7	9	2	7	9	1	3	4	..	..	..
December ..	3	11	14	5	6	11	1	6	7	..	3	3
	72	128	200	38	75	113	35	48	83	9	7	16

No. 6.

AGES of CURABLE PATIENTS admitted during 1853.

	Males.	Females.	Total.
Under 15.....	1	1	2
From 15 to 20	5	5	10
— 20 to 25	8	16	24
— 25 to 30	6	23	29
— 30 to 35	8	16	24
— 35 to 40	17	12	29
— 40 to 45	9	13	22
— 45 to 50	4	15	19
— 50 to 55	5	12	17
— 55 to 60	2	10	12
— 60 to 65	4	2	6
— 65 to 70	3	3	6
	72	128	200

No. 7.

DURATION of DISEASE in the CURABLE PATIENTS at the time of their Admission during 1853.

	Males.	Females.	Total.
Under 1 week	3	10	13
— 2 —	10	12	22
— 3 —	3	10	13
— 1 month	4	13	17
— 2 —	21	15	36
— 3 —	14	22	36
— 4 —	4	12	16
— 5 —	4	12	16
— 6 —	2	1	3
— 7 —	4	6	10
— 8 — .....	..	5	5
— 9 —	1	2	3
— 10 —	1	1	2
— 11 —	1	1	2
Not ascertained .....	..	6	6
	72	128	200

No. 8.

NUMBER of ATTACKS in the CURABLE PATIENTS on Admission in 1853.

	Males.	Females.	Total.
First attack	45	80	125
Several.....	27	45	72
Not ascertained .....	..	3	3
	72	128	200

No. 9.

DEGREE of EDUCATION of the CURABLE PATIENTS
admitted during 1853.

	Males.	Females.	Total.
Superior	7	7	14
Good	20	22	42
Moderate	37	79	116
Indifferent	7	17	24
None	1	3	4
	72	128	200

No. 10.

DOMESTIC CONDITION of the CURABLE PATIENTS
admitted during 1853.

	Males.	Females.	Total.
Married	41	68	109
Single	28	46	74
Widowed	3	14	17
	72	128	200

No. 11.

NATIVITY of the CURABLE PATIENTS admitted during 1853.

	Males.	Females.	Total.
Metropolis	29	44	73
Provinces.....	37	72	109
Ireland.....	2	3	5
Wales	2	..	2
France .....	..	1	1
Not ascertained	2	8	10
	72	128	200

No. 12.

RELIGIOUS PERSUASION of the CURABLE PATIENTS admitted during 1853.

	Males.	Females.	Total.
Church of England	53	96	149
Independent.....	3	9	12
Roman Catholic	1	2	3
Wesleyan.....	5	11	16
Baptist.....	3	2	5
Hebrew	3	3	6
Presbyterian .....	..	1	1
Countess of Huntingdon...	..	1	1
No religion	2	..	2
Plymouth Brother	1	..	1
Quaker.....	1	..	1
Not ascertained .....	..	3	3
	72	128	200

No. 13.

OCCUPATION of CURABLE PATIENTS admitted during 1853.

MALES.

Tutors.....	3	Earthenware-maker	1
Artist	1	Wheelwright	1
Clerks	8	Lighterman	1
Florist.....	1	Tailor	1
Commercial Traveller.....	1	House-decorator.....	1
House Agent	1	Farmer	1
Contractor	1	Cooper	1
Broker	1	Coachman	1
Warehouseman	1	Cook	1
Custom-House Clerk.....	1	Carpenters	2
Music Master.....	1	Gardener	1
Booksellers.....	2	Weavers	3
Cabinet-maker	1	Last-maker.....	1
Draper	1	Servant	1
Bakers	2	Labourers	5
Hair-dresser	1	Bricklayers.....	2
Licensed Victualler	1	Hawker	1
Cheesemonger	1	Factory-boy	1
Grocers	3	Sawyers	2
Green-grocer	1	Railway-porter	1
Plumber	1	Old Clothes-dealer.....	1
Cigar-maker	1	No occupation	2
Fishmongers	4		
Brazier	1		

No. 13—*continued.*

FEMALES.

Wives, Widows, and daughters, of professional men } 1	Staymaker	1
Wives, widows, and daughters, of clerks, and tradesmen } 30	Milkwoman	1
Wives, widows, and daughters of servants, mechanics and labourers } 30	Shopkeeper	1
Governesses	Silk-winder	1
Schoolmistresses	Servants	20
Upholstress	Waistcoat-maker	1
Lodging-house-keepers	Charwoman	1
Laundress	Flower-maker	1
Milliners	No occupation, or occupation not specified } 19	
Straw-Plaiter		128

No. 14.

PROPORTION of CURABLE PATIENTS admitted during 1853, classified as dangerous or violent.

	Males.	Females	Total.
Dangerous or violent Patients..	24	35	59
No indications of being dangerous or violent } 48	48	93	141
	72	128	200

No. 15.

TABLE of SUICIDAL TENDENCY exhibited in the CURABLE PATIENTS
admitted during 1853.

	Males.	Females.	Total.
Have meditated or attempted suicide }	14	43	57
Intentions not manifested, or unknown }	58	85	143
	72	128	200

No. 16.

*Apparent and Assigned Causes of Disease in the Curable Patients
admitted during 1853.*

MALES.		FEMALES.	
(MORAL.)		(MORAL.)	
Anxiety	8	Anxiety	10
Disappointment in love ..	2	Jealousy	1
Excitement	1	Excessive study	2
Loss of employment	1	Reduced circumstances ..	3
Reduced circumstances ..	8	Loss of situation	1
Excessive study	9	Domestic distress	3
Domestic distress	3	Death of relatives	7
Death of relatives	2	Disappointment in love ..	6
Jealousy	1	False reports relative to themselves	2
A quarrel.....	1	Religious excitement	6
		Alarm from fire	1
		Seduction.....	3
		Mental distress	2
		Ill-treatment of husband..	4
		Fright	1
(PHYSICAL.)		(PHYSICAL.)	
Fever	3	Fever	1
Inflammation of liver	1	Intemperance	6
Intemperance	8	Influenza	1
Coup de soleil	1	Lactation	6
Rheumatic gout	1	Puerperal.....	11
Concussion of the brain ..	1	Brain fever	1
Onanism	1	Fatigue.....	1
		Cessation of catamenia ..	2
		Amenorrhœa	1
		Menorrhagia	1
Hereditary tendency to in- sanity was traced in 23 cases, of which 5 ap- peared to be without any other obvious cause....	5	Hereditary tendency to in- sanity was traced in 42 cases, of which 20 ap- peared to be without any other obvious cause....	20
Previous attacks	9	Previous attacks	8
Not ascertained	6	Not ascertained	17
	<hr/> 72		<hr/> 128

No. 18.

RETURN of WORK done by FEMALE PATIENTS during 1853.

Men's Shirts made	483	Set of Bed-furniture	1
Flannel Waistcoats	207	Pairs of Stockings marked ..	18
Flannel Drawers	64	Yards of Lace made	31
Women's Shifts	143	Yards of Crochet	73
Night Gowns	89	Crochet Articles made	43
Aprons	37	Dolls dressed	3
Pinafores	173	Pincushions	7
Flannel Petticoats	39	Baby's Cap	1
Gowns	97	Gentlemen's Fancy ditto ..	3
Caps	139	Knitted Anti-maccassars ..	23
Neckerchiefs	519	Patchwork Quilts	2
Pairs of Sheets	319	Purses	5
Pairs of Pillow-cases	122	Mats worked	21
Table Cloths	37		
Towels	107		
Window Curtains	8		
		Total Pieces of Work..	2714

No. 19.

PARTICULARS of CURABLE PATIENTS discharged CURED in 1853.

Ages.	Males.	Females.	Total.
Under 15 . . . . .	..	1	1
From 15 to 20	3	3	6
— 20 to 25	5	5	10
— 25 to 30	4	17	21
— 30 to 35	6	5	11
— 35 to 40	6	8	14
— 40 to 45	5	9	14
— 45 to 50	1	8	9
— 50 to 55	3	6	9
— 55 to 60	1	10	11
— 60 to 70	4	3	7
	38	75	113

No. 19—*continued.**State of Bodily Health prior to Attack.*

	Males.	Females.	Total.
Good	29	57	86
Bad	9	18	27
	38	75	113

Disposition and Temper.

	Males.	Females.	Total.
Good	26	57	83
Irritable	5	12	17
Hasty	2	2	4
Excitable	1	1	2
Morose	1	..	1
Sullen	1	1	2
Tyrannical	1	2	3
Not known	1	..	1
	38	75	113

No. 19—*continued.**Number of Attacks.*

	Males.	Females.	Total.
First	21	39	60
Second	8	16	24
Third	1	9	10
Fourth	2	4	6
Fifth.....	1	4	5
Several.....	5	1	6
Not specified .....	..	2	2
	38	75	113

Domestic Condition.

	Males.	Females.	Total.
Married	18	41	59
Single	20	29	49
Widowed .....	..	5	5
	38	75	113

No. 19—*continued.**Notions.*

	Males.	Females.	Total.
Depressed	15	31	46
Exalted	13	18	31
Incoherent	4	17	21
Confused	6	9	15
	38	75	113

Conduct.

	Males.	Females.	Total.
Violent or dangerous to themselves or others .. }	11	31	42
Restless	10	20	30
Mischievous	2	6	8
Noisy	4	1	5
Excited	1	2	3
Flighty	1	..	1
Inert	2	7	9
Quiet	7	8	15
	38	75	113

No. 20.

Apparent and Assigned Causes of Disease in Patients Discharged Cured during 1853.

MALES.		FEMALES.	
(MORAL.)		(MORAL.)	
Anxiety	5	Anxiety	3
Excessive study	2	Disappointment	1
Reduced circumstances ..	5	Disappointment in love ..	4
Domestic troubles	1	Reduced circumstances ..	2
Quarrels	2	Domestic trouble.....	4
Jealousy	1	Loss of situation.....	1
		Death of relatives	5
		Fright	3
		Mental distress	2
		Religious excitement	1
		Marriage of daughter	1
		Seduction	1
		Fatigue.....	1
		Ill-treatment of husband..	3
(PHYSICAL.)		(PHYSICAL.)	
Intemperance	8	Intemperance	4
Blow on head	1	Rheumatic fever	2
Rheumatic fever	2	Menorrhagia	2
		Amenorrhœa	2
		Puerperal	6
		Lactation.....	2
		Hysteria	1
		Influenza	1
		Brain fever	1
Previous attacks	5	Previous attacks	9
Hereditary tendency to in- sanity was traced in 10 cases, of which 3 ap- peared to be without any other obvious cause....	3	Hereditary tendency to in- sanity was traced in 21 cases, of which 9 ap- peared to be without any other obvious cause....	9
Not ascertained	3	Not ascertained	4
	<hr/> 38		<hr/> 75

No. 21.

PARTICULARS of PATIENTS admitted as CURABLE but discharged
UNCURED admitted during 1853.

Ages.	Males.	Females.	Total.
Under 20.....	2	1	3
From 20 to 25.....	6	7	13
— 25 to 30.....	5	5	10
— 30 to 35.....	5	9	14
— 35 to 40.....	7	4	11
— 40 to 45.....	5	6	11
— 45 to 50.....	2	5	7
— 50 to 55.....	2	6	8
— 55 to 60.....	1	3	4
— 60 to 65.....	..	1	1
— 65 to 70.....	..	1	1
	35	48	83

State of Bodily Health on admission.

	Males.	Females.	Total.
Good	27	30	57
Bad	8	18	26
	35	48	83

Disposition and Temper.

	Males.	Females.	Total.
Good	20	25	45
Irritable	5	7	12
Hasty	6	5	11
Violent.....	1	6	7
Morose.....	1	4	5
Obstinate.....	1	..	1
Not ascertained	1	1	2
	35	48	83

No. 21—*continued.**Domestic Condition.*

	Males.	Females.	Total.
Married	15	23	38
Single	20	25	45
	35	48	83

Number of Attacks.

	Males.	Females.	Total.
First.....	27	34	61
Second.....	5	9	14
Third	2	2	4
Fourth .....	..	1	1
Fifth.....	..	1	1
Several.....	1	..	1
Not ascertained .....	..	1	1
	35	48	83

Conduct.

	Males.	Females.	Total.
Dangerous	7	20	27
Restless	8	14	22
Noisy	4	6	10
Violent.....	4	4	8
Mischievous.....	7	1	8
Quiet	4	2	6
Not ascertained	1	1	2
	35	48	83

Notions.

	Males.	Females.	Total.
Depressed	15	23	38
Exalted	6	7	13
Incoherent	6	11	17
Confused	8	7	15
	35	48	83

No. 23.

INSANE PRIOR TO ADMISSION.

DISCHARGED	MONTHS.																								TOTAL.				
	1.		2.		3.		4.		5.		6.		7.		8.		9.		10.		11.		12.		M.	F.	T.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.	M.	F.	T.	
Cured	19	38	57	13	15	28	3	9	12	8	3	3	1	1	1	1	2	2	2	1	1	1	1	1	1	38	75	113	
By request of friends . . .	1	1	2	..	3	3	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Disqualified . . .	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Died	5	3	8	2	1	3	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	9	7	16		
Uncured	11	17	28	5	14	19	7	6	13	7	5	2	7	4	2	6	2	3	5	1	1	2	1	1	1	1	35	48	83
	36	60	96	20	33	53	12	16	28	6	11	17	17	4	5	9	2	4	6	1	1	2	1	2	1	1	84	136	220

No. 26.
PATIENTS CURED.

Insane before Admission.	Months.		1.		2.		3.		4.		5.		6.		7.		8.		9.		10.		11.		12.								
	M.	F.	M.	T.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.						
19	23	57	..	..	3	13	6	7	2	5	7	2	4	6	3	4	7	1	1	1	1	1	..	..	..	..	..	
13	15	28	..	..	..	3	3	4	2	4	6	2	1	3	..	1	1	1	1	1	1	2	3	..	..	..	..		
3	9	12	..	..	..	2	2	1	1	1	3	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..
1	7	8	..	..	1	2	3	..	..	2	2	..	1	1	..	..	..	..	..	..	..	..	..	..	..	1	..
..	3	3	..	..	..	2	2	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..
..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..
..						
..	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
1	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..
..						
..						
38	75	113	4	22	26	9	3	12	5	13	16	4	9	13	4	6	10	1	2	3	2	1	3	2	3	5	1	1	3	9	12

No. 27,

DAILY AVERAGE NUMBER OF PATIENTS in the Hospital during the last Thirty-two years.

Years.	Curables.	Incurables.	Criminals.	Total.
1822	83	69	54	206
1823	88	66	55	209
1824	88	61	57	206
1825	93	65	60	218
1826	94	64	60	218
1827	79	64	57	200
1828	95	66	56	217
1829	102	65	58	225
1830	110	64	54	228
1831	114	64	54	232
1832	98	65	52	215
1833	102	65	51	218
1834	125	63	52	240
1835	137	63	53	253
1836	142	64	52	258
1837	140	65	53	258
1838	153	62	64	279
1839	160	63	76	299
1840	176	78	78	332
1841	157	85	81	323
1842	184	84	87	355
1843	195	84	87	366
1844	182	86	91	352
1845	222	87	94	403
1846	207	85	103	395
1847	203	80	109	392
1848	206	82	111	399
1849	219	76	110	405
1850	215	75	100	390
1851	207	74	106	387
1852	193	75	106	374
1853	156	75	112	343
32	4725	2284	2393	9402
	147 $\frac{21}{32}$	71 $\frac{12}{32}$	74 $\frac{25}{32}$	293 $\frac{36}{32}$
Number of Daily Rations during 1853.				
Curables.		Incurables.		Criminals.
56,940		27,375		40,880
		125,195		

No. 28.

PARTICULARS of PATIENTS who have DIED during the year 1853,
as reported to the Bethlem Sub-Committee.

	Sex.	Age.	Condition.	Admitted.	Died.	Cause of Death.
1	Male ..	35	Criminal .	8th Oct. 1852 ..	3rd Jan. 1853	Dysentery.
2	Female	22	Curable..	21st Dec. 1852..	11th Jan.....	Exhaustion following excessive excitement.
3	Male ..	52	Curable..	25th Nov. 1852 .	1st Feb.	Phthisis with pneumonia advanced to gangrene of the lungs.
4	Female	38	Curable..	2nd July, 1852 .	3rd Mar.	Extreme cerebral excite- ment.
5	Male ..	58	Curable..	21st Sept. 1852 .	10th Mar.....	Dysentery and general paralysis.
6	Male ..	48	Curable..	21st May, 1852 .	20th Mar.....	Dysentery.
7	Female	64	Curable..	12th Nov. 1852 .	3rd April	Disease of the heart.
8	Female	75	Criminal .	10th Dec. 1816 .	15th April....	Old age and infirmity.
9	Male ..	..	Incurable	5th Jan. 1842 ..	24th April....	Phthisis.
10	Female	35	Curable..	13th Oct. 1852..	25th April ..	General paralysis.
11	Male ..	46	Curable..	19th Nov., 1852	13th May....	Dysentery.
12	Male ..	34	Curable..	19th May, 1853.	24th May....	Pleuro-pneumonia.
13	Male ..	55	Curable..	9th March, 1853	31st May	General paralysis.
14	Male ..	37	Curable..	7th May, 1853..	27th June....	Serous apoplexy.
15	Female	53	Incurable	26th March, 1852	3rd July	Paralysis.
16	Male ..	29	Curable..	29th Aug. 1853 .	4th Sept.	Acute mania, and ex- treme excitement
17	Male ..	39	Curable..	12th July, 1853 .	17th Sept. ..	Phthisis.
18	Female	45	Incurable	5th June, 1840 .	6th Nov.	Chronic bronchitis and emphysema of the lungs.
19	Male ..	57	Criminal .	10th Oct. 1853..	20th Nov.....	Dysentery.
20	Female	70	Curable..	7th Oct. 1853 ..	8th Dec.	Phthisis.
21	Male ..	45	Criminal .	3rd June, 1850 .	9th Dec.	Dysentery.
22	Female	47	Curable..	2nd Dec. 1853..	18th Dec.....	Suffocation from burning
23	Female	19	Curable..	2nd Sept. 1853 .	24th Dec.....	Phthisis.
24	Female	67	Incurable	2nd Aug. 1827..	26th Dec.....	Chronic bronchitis.
25	Male	33	Criminal .	20th July, 1850 .	26th Dec.....	Erysipelas and disease of the heart.

No. 29.

SYNOPSIS of DEATHS during 1853.

	Males.	Females.	Total.
Curables	9	7	16
Incurables	1	3	4
Criminals	4	1	5
	14	11	25

No. 30.

PARTICULARS of the CURABLE PATIENTS whose DISEASE TERMINATED
FATALLY during 1853.

Duration of the Disease at the time of Admission.

	Males.	Females.	Total.
Under 2 weeks	1	..	1
— 3 —	2	..	2
— 4 — .....	..	1	1
— 2 months	4	3	7
— 3 —	1	1	2
— 4 — .....	..	1	1
— 8 — .....	..	1	1
— 11 —	1	..	1
	9	7	16

No. 30--*continued.**Domestic Condition*

	Males.	Females.	Total.
Married	7	3	10
Single	1	4	5
Widowe	1	..	1
	9	7	16

Conduct.

	Males.	Females.	Total.
Dangerous	3	..	3
Restless	3	4	7
Noisy	1	..	1
Inert	2	2	4
Suicidal .....	..	1	1
	9	7	16

State of Bodily Health prior to Attack.

	Males.	Females.	Total.
Good	3	1	4
Bad	6	6	12
	9	7	16

No. 30—*continued.**Number of Attacks.*

	Males.	Females.	Total.
First.....	8	6	14
Second.....	1	1	2
	9	7	16

Notions.

	Males.	Females.	Total.
Exalted	3	..	3
Depressed	3	6	9
Incoherent	3	..	3
Confused .....	..	1	1
	9	7	16

Disposition and Temper.

	Males.	Females.	Total.
Good	2	6	8
Irritable	3	1	4
Hasty	2	..	2
Sullen	1	..	1
Violent.....	1	..	1
	9	7	16

No. 31.

RETURN of the INCURABLE PATIENTS now in BETHLEM HOSPITAL.

No.	Sex.	Age when Admitted.	Date of Admission.
1	Male	24	13th July, 1805.
2	Female	33	30th May, 1807.
3	Male	32	10th June, 1820.
4	Female	19	20th July, 1820.
5	Female	37	16th August, 1821.
6	Female	31	10th March, 1825.
7	Female	29	3rd August, 1826.
8	Male	48	26th January, 1827.
9	Female	32	29th July, 1831.
10	Male	20	16th September, 1831.
11	Male	45	21st March, 1834.
12	Female	25	28th March, 1834.
13	Female	28	20th November, 1835.
14	Male	26	5th February, 1836.
15	Female	20	4th March, 1836.
16	Female	48	29th July, 1836.
17	Male	18	18th November, 1836.
18	Male	40	25th November, 1836.
19	Female	30	13th January, 1837.
20	Male	34	20th July, 1838.
21	Male	26	21st September, 1838.
22	Female	42	2nd August, 1839.
23	Female	39	15th November, 1839.
24	Female	28	17th January, 1840.

RETURN OF INCURABLE PATIENTS—*continued.*

No.	Sex.	Age when Admitted.	Date of Admission.
25	Male	37	29th February, 1840.
26	Male	26	20th March, 1840.
27	Male	26	27th March, 1840.
28	Female	41	15th May, 1840.
29	Female	26	22nd May, 1840.
30	Male	40	12th June, 1840.
31	Male	27	24th June, 1840.
32	Female	40	20th November, 1840.
33	Male	28	15th January, 1841.
34	Male	31	30th April, 1841.
35	Female	34	25th June, 1841.
36	Female	69	29th October, 1841.
37	Female	35	22nd June, 1842.
38	Male	30	9th September, 1842.
39	Male	27	14th October, 1842.
40	Female	38	3rd March, 1843.
41	Female	31	22nd March, 1844.
42	Female	36	21st June, 1844.
43	Male	28	19th July, 1844.
44	Male	21	20th September, 1844.
45	Female	34	13th December, 1844.
46	Male	29	20th December, 1844.
47	Female	38	28th February, 1845.
48	Male	46	7th March, 1845.
49	Female	29	13th June, 1845.

RETURN OF INCURABLE PATIENTS—*continued.*

No.	Sex.	Age when Admitted.	Date of Admission.
50	Male	26	10th October, 1845.
51	Male	50	7th November, 1845.
52	Male	23	21st November, 1845.
53	Male	47	23rd January, 1846.
54	Male	38	13th March, 1846.
55	Male	32	2nd July, 1847.
56	Male	28	14th February, 1848.
57	Male	28	14th February, 1848.
58	Male	21	14th February, 1848.
59	Female	24	14th February, 1848.
60	Female	26	3rd May, 1850.
61	Male	30	3rd January, 1851.
62	Female	26	3rd January, 1851.
63	Male	32	21st February, 1851.
64	Female	40	4th July, 1851.
65	Female	41	18th July, 1851.
66	Male	23	10th October, 1851.
67	Male .....	..	23rd April, 1852.
68	Female	52	20th May, 1852.
69	Female	48	16th July, 1852.
70	Male	30	6th August, 1852.
71	Female	35	13th August, 1852.
72	Male	56	29th April, 1853.
73	Female	25	4th November, 1853.
74	Female	59	11th November, 1853.
75	Female	30	30th December, 1853.

No. 32.

TIME the INCURABLE PATIENTS have been in the Hospital.

	Males.	Females.	Total.
Upwards of 45 years	1	..	1
— 40 — .....	..	1	1
— 35 — .....	..	..	..
— 30 —	1	2	3
— 25 — .....	..	1	1
— 20 —	2	2	4
— 15 —	4	3	7
— 10 —	9	9	18
— 5 —	11	8	19
— 3 —	4	1	5
— 1 —	5	7	12
Admitted during 1853	1	3	4
	38	37	75

No. 33.

DEGREE of EDUCATION of INCURABLE PATIENTS in the Hospital.

	Males.	Females.	Total.
Good	14	14	28
Moderate.....	16	16	32
Imperfect.....	4	5	9
None	2	..	2
Not ascertained	2	2	4
	38	37	75

No. 34.

SYNOPSIS of OFFENCES of the CRIMINAL LUNATICS confined in Bethlem Hospital 31st of December, 1853.

Nature of Offences.	Males.	Females.	Total.
1. Against the State.			
(1.) High Treason..... 1			
(2.) Sedition..... 1	2	..	2
2. Against the Person.....	64	18	82
3. Against Property.....	10	4	14
4. Other offences.....	8	..	8
	84	22	106

No. 35.

TIME the CRIMINAL PATIENTS have been in Bethlem Hospital.

	Males.	Females.	Total.
35 years.....	5	..	5
30 ".....	1	3	4
25 ".....	2	..	2
20 ".....	2	..	2
15 ".....	9	1	10
10 ".....	11	2	13
5 ".....	11	3	14
3 ".....	17	5	22
2 ".....	3	..	3
1 ".....	8	3	11
Admitted during the year 1853	15	5	20
	84	22	106

DIETARY TABLE.

BREAKFAST.

Every Day... Males .. Tea, with 7 oz. of Bread and Butter
 Females.. ,, 6 ditto

DINNER.

Sunday	Males	{ 6 oz. Boiled Beef free fm. bone, }	4 oz. Bread, $\frac{3}{4}$ lb. Vegetables, 1 pt. Beer.
	Females .. 5	,, ,, 4	,, $\frac{1}{2}$,, $\frac{1}{2}$,,
Monday	Males 6	,, Roast Mutton, 4	,, $\frac{3}{4}$,, 1 ,,
	Females .. 5	,, ,, 4	,, $\frac{1}{2}$,, $\frac{1}{2}$,,
Tuesday	Males 6	,, Boiled Mutton, 4	,, $\frac{3}{4}$,, 1 ,,
	Females .. 5	,, ,, 4	,, $\frac{1}{2}$,, $\frac{1}{2}$,,
Wednesday..	Males 6	,, Roast Beef, 4	,, $\frac{3}{4}$,, 1 ,,
	Females .. 5	,, ,, 4	,, $\frac{1}{2}$,, $\frac{1}{2}$,,
Thursday	Same as Monday.		
Friday	Same as Tuesday.		
Saturday ..	Males 16	oz. Meat Pie, 4 oz. Bread, 1 oz. Cheese, 1 pt. Beer	
	Females .. 14	,, ,, 4 ,,	$\frac{1}{2}$,,

SUPPER.

Sunday, Monday, Tuesday, }
 Thursday, and Friday } Males .. Same as at Breakfast.

Wednesday and Saturday, Males .. 7 oz. Bread, 2 oz. Cheese, 1 pt. Beer.

Every Day Females.. Same as at Breakfast.

Patients in employment in the Grounds, Workshops, or Laundry, to be allowed 4 oz. of Bread, 1 oz. of Cheese or $\frac{1}{2}$ oz. of Butter, and $\frac{1}{2}$ a pint of Beer for Luncheon, and $\frac{1}{2}$ a pint of Beer in the Afternoon.

Every Patient to be allowed $1\frac{3}{4}$ oz. of Tea, 8 oz. of Sugar, 8 oz. of Butter, and $1\frac{1}{2}$ pints Milk weekly.

On Christmas Day the Dinner to be Roast Beef and Plum Pudding.

On New Year's Day, a Mince Pie to be added to the usual fare.

On Good Friday, a Bun.

On Easter and Whit Monday, 6 oz. of Roast Veal to be allowed instead of the usual Meat for the day.

The Dinners to be further varied by the occasional substitution of Pork and Bacon, when Peas and Beans are in season, and also by the occasional substitution of Fish and Fruit Pies, when Fish and Fruit are plentiful and good.

The Sick to be dieted at the discretion of the Resident Physician.

The Attendants to have at all times the means of obtaining Gruel for such Patients as may require it.

The above to be considered maximum allowances, and all quantities unconsumed are to be taken in diminution of the next supply from the Stores of the Hospital.

BETHLEM HOSPITAL.

LIST OF OFFICERS, ATTENDANTS, AND SERVANTS.

PRINCIPAL OFFICERS.

	£	s.	d.
*1 Resident Physician	700	0	0
†1 Surgeon	80	0	0
†1 Chaplain	100	0	0
*1 Apothecary	300	0	0
†1 Surveyor	125	0	0
*1 Receiver and Accountant.....	262	10	0
†1 Clerk.....	250	0	0
*1 Steward	250	0	0
*1 Matron.....	150	0	0
	<hr/>		
	£2217	10	0

* Lodged only.

† Neither boarded nor lodged.

Of the total amount of these salaries £200 is repaid by Government on account of criminal lunatics.

OTHER OFFICERS, ATTENDANTS, AND SERVANTS.

MALES.

	£	s.	d.
*1 Clerk of the Works	54	12	0
*1 Steward's clerk.....	37	10	0
*1 Clerk's assistant	15	0	0
*1 Organist	15	0	0
1 Chapel clerk.....	5	0	0
1 House porter	52	0	0
1 Assistant do.....	20	0	0
||1 Gate-keeper	47	0	0
†1 Cutter of provisions	28	0	0
†1 Head attendant	60	0	0
†1 Attendant.....	60	0	0
†1 Do.....	55	0	0
†1 Do.....	35	0	0
†1 Do.....	40	0	0
†1 Do.....	38	0	0
†1 Do.....	27	0	0
1 Do.....	33	0	0
1 Do.....	26	0	0
†||1 Attendants..... at £25 per annum each	275	0	0
*†1 Plumber..... 30s. per week	78	0	0
‡1 Bricklayer	78	0	0
†‡1 Gardener	78	0	0
†‡1 Engineer	104	0	0
*2 Carpenters..... 30s. per week each	156	0	0
*†1 Smith..... 30s. per week	78	0	0
*†1 Gardener and out-door attendant..... 18s. per week	46	16	0
	£1,541 18 0		

* Neither boarded nor lodged.

† In addition to board and lodging, have each a suit of clothes and a hat

‡ Occasionally employed at the House of Occupations.

|| Lodged only, with a suit of cloths and hat.

FEMALES.

	£	s.	d.
1 Cook	25	0	0
1 Kitchen-maid	12	0	0
1 House-maid	16	0	0
1 Laundry-maid	25	0	0
3 Do. at £17 per annum each	51	0	0
1 Head attendant	50	0	0
3 Attendants	75	0	0
1 Do.	21	0	0
1 Do.	19	0	0
14 Do. at £18 per annum each	252	0	0
	<hr/>		
	£546	0	0
	<hr/>		

The Hospital is repaid by Government, on account of Criminal Lunatics the wages of seven male and two female attendants, with an allowance of £35 per annum each for maintenance and clothing.

The wages of male attendants commence at £25 per annum, and they increase, if their conduct be satisfactory, £1 yearly afterwards, until they become £35 per annum, after which no further increase is allowed. Attendants in charge of a Ward are allowed £5 per annum extra. Female attendants commence at any amount not exceeding £18 per annum, and after, they increase with like restriction £1 yearly until they become £25 per annum, after which no further increase is allowed. The wages of male attendants were permitted, previous to the year 1841, to increase to £60 per annum.