

Recent increase of mental disease : an address to the North of Scotland Medical Association at its annual meeting, at Aberdeen, on 26th June, 1875 / by Robert Jamieson.

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RECENT INCREASE OF
MENTAL DISEASE:

An Address

TO THE

NORTH OF SCOTLAND MEDICAL ASSOCIATION,

AT ITS

ANNUAL MEETING, AT ABERDEEN,

On 26th June, 1875:


BY

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PHYSICIAN TO THE ROYAL ASYLUM, ABERDEEN, AND
PRESIDENT OF THE ASSOCIATION.

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RECENT INCREASE OF MENTAL DISEASE.

GENTLEMEN,—You will, I believe, all coincide with me when I estimate it as one of the first duties I should discharge as President of this meeting, in the name of the Northern Medical Association, to thank the members of the Aberdeen Medical Society for their kindness in giving us, as on former occasions, the use of their Hall for our annual meeting. They, besides, by incorporation of so many of themselves in this younger Society, contribute not a little towards that success and stability in which we hope to imitate their older Association, which has now little short of a century been the chief, if not the only, established representative body of the profession in the north, and probably will continue to be so.

It has been the custom of my predecessors annually, when they took possession of this chair, in return for their appointment, to contribute to the proceedings of the Society an address on some matter of medical interest, and it has been my lot to listen on all such occasions to discourses well qualified deeply to engage professional attention. Though your presidents have hitherto seemed to consider the discharge of this function of the office as a necessary and important piece of duty, I am not inclined to look upon it so seriously as some of them have done, or to devote to it either so much of my own labour or of your time as there may be precedent for.

When nominated by you last year to preside on this occasion, this matter of an expected address was certainly one of the things which disposed me to urge a plea of *nolo episcopari*, had I not recognised that it was, after all, although

having high authority, but a voluntary labour, which did not need to cumber myself much, nor detain my constituents long. On such occasion, while it behoves to be something less brief and more profitable, even if not so effective as the "Here we are again" of the pantomime clown, yet it need not be so lengthy a grace as to tend to shorten the time of the banquet. A society like this meets for many better reasons than to be lectured to. It professes to advance science, to give some guidance in difficult ethical paths, to assist in promoting medical organisation, and to afford additional means of cultivating professional acquaintance. The long drawn-out address of an eloquent president may be in harmony with wide-spread associations of philosophers that make session of several days when they meet, but it is not so much in keeping with our brief assembly of some hours, when it might not be an unwise thing sometimes to turn our customary prologue into what the players call an "occasional epilogue," so as not to stand in the way of more appropriate business.

You have had brought before you on former occasions retrospects of the progress made during late years in the science, practice, professional education, and social position of the medical man in the kingdom generally, but more particularly in this part of the country, and probably I cannot do better than follow the march of my brethren, and bring up the division of the host which has fallen to my lot, to let it, like the others, salute and file past for inspection.

At the beginning of the century, such of the insane as were poor and required medical treatment in Aberdeen were lodged in the back of the basement of the Old Infirmary, in a part of the building partaking in many respects of the character of a cellar, save that it was not underground; and surely it was a great improvement on this mode of care when it was changed to the form of a separate hospital, even although constructed under the asylum ideas of that day. The house so built is not now in existence, but it was in partial use until about 1850, and was in full operation when I first became

connected with the psychological department of medicine in 1840, forming, indeed, the larger part of the then working asylum. The floors were of stone, the cubic space of the separate rooms was under half of what would now be insisted upon as sanitary essential. Some of them were entirely dark when the door was shut, and none of the rooms, though thought to be adapted for maniacal cases, had windows above half a foot square, placed out of reach in a high corner, and guarded outside by a strongly-bolted shutter. The *cell*—so was the room nominated—may be said to have contained nothing in the way of furniture, often not even a bedstead; for the straw on which the patient lay was spread upon a built platform in the further corner, or behind the door, which was of plank, strongly fastened with a ponderous lock, and pierced with a slit, iron barred, for inspection. I am, of course, describing what were the worst points in our local Asylum, as a contrast to what exists now. The patients were neither medically neglected, ill fed, ill clothed, nor cruelly used, unless it might be in the way of personal physical restraint, and all the surroundings were but the reflection of the social and medical ideas of the time. Some of the customs and remedies in vogue would now make the inquirer stare—such as the bath of surprise, the rotatory chair, the application of jolting in cases of obstructed discharges, the idea of compulsion which ruled the moral treatment of the disorder, and the very general application of bodily restraint in difficulties of management of the individual. The suicidal were restrained; the destructive had their hands fastened or covered; the violent were locked up or chained up, or both together; and runaways had their legs fastened or impeded. If you would not eat, you had to swallow perforce; if you ate what was not food, you had to wear a mask; and if you would not lie in your bed at night, a considerate kindness ingeniously tied you into it. The gradual amelioration and ultimate disappearance of all this have occurred in our own time. In no department of physic has the change been so progressive, so great, and so satisfactory. There

has been a harmonious improvement in the character and arrangement of asylums, accompanying the gradual abolition of coercion, as also a corresponding alteration in the description of applied therapeutics. The beneficial changes have been entirely of medical origin, carried forward under professional auspices, and been in no degree due to the outside pressure of lay philanthropy, or to the philosophical enlightenment of critical observation. In fact, they have sprung forth from the exertions of the small section of the profession employed in the business of caring for the insane; and more from the whole of them individually—working at various parts of the work and in various places—than at any particular place from any specially inspired leader of the movement.

During this period of advancement the local hospital has not stood still. Old parts have been swept away with the old ideas that they represented, or remodelled so as to look newer times in the face. Harsh measures have faded out of its routine. Bolts, bars, and chains have disappeared. Airing grounds have been added and extended; walls have been lowered, or even removed; occupations have been introduced and amusements encouraged; and probationary liberations and extensions of liberty in various ways permitted. Although an old institution, it has developed several creditable features peculiar to itself, which have been adopted in newer establishments elsewhere, and in its medical results it has kept on a line with the most advanced.

The changes in the medical treatment of insanity, although they have doubtless mainly, have not by any means been entirely, in the better mode of encountering the difficulties of management by which it is encumbered. There has been a therapeutical improvement also, or, at all events, a change of weapons, whether occasioned by a better knowledge of fighting, or some change in the mode of attacking the enemy. I have heard it remarked that the insane are not so insane as they were; and, certainly, many heroic remedies, so called, have been discarded. The old antiphlogistic manœuvre, that was supposed most likely to prove triumphant in the encounter,

has for half a century lost favour. Purgatives and depressants have been found less needful; the use of narcotics has grown less frequent, while newer pathological ideas have led to a faith in a more extended employment of wine, iron, codliver oil, bromide of potassium, chloral and the regulated use of baths; though experience has still upheld the value of certain old remedies such as opium, iodine, sulphur, digitalis, and hydrocyanic acid.

Certain other changes have characterised the period within present medical experience. Asylums have passed into the class of institutions subservient to medical education, although not yet so fully as must be the case, when reformed professional tuition suppresses some of the present unnecessary prelections, and enlarges clinical instruction. They have also, while still continuing to be retreats for those requiring seclusion from affairs, become less prison like, and more open to inspection and external influences. Half-a-dozen Acts of Parliament, within less than twenty years, have assured the public of Scotland that their lunatics were not overlooked or forgotten — but overlooked in a less metaphorical sense — by as many Inspectors as there are Acts. In fact, there has been a tendency to over-doing on the subject and, in consequence, a loose, cumbersome, vexatious, and expensive kind of legislation, which seems to me to have gone beyond requirements, and which will have to be amended in efficiency by simplification in less jealous and wiser times.

I believe that the most remarkable medical phenomenon in our time has been the alarming increase of insanity. Crime has been diminishing; prisons, here and there, have been shut up; but who hears of an asylum being shut up anywhere, or even of its numerous inmates decreasing? Are we but changing lawlessness for incapacity, cunning for weakness, and are we better because fools accumulate and thieves decay? The fact has been denied, as most facts have, but I have heard no proof of its contrary, beyond what has been based either on narrowness of view and latitude of assertion, or that sociolo-

gical optimism that insists that no evil can possibly increase in this wonderfully enlightened age. But how stands the case as exhibited in the light of local experience? In 1844, or thirty-one years ago, there was one asylum in Aberdeen, doing all for the district that the present existing Institution does, or more fully, and it contained 150 persons; now it contains 480. It has more than trebled the number of its inmates in thirty years. Has the population in this part of Scotland trebled itself? Has it doubled itself, or even become a third more numerous in the same time? But this is not all; there are in the neighbourhood three other asylums in the shape of poorhouses, none of which existed then, and a hundred additional lunatics may be credited to them. The last report of the Commissioners to Parliament shows that there has been a continuously growing ratio of lunatics in the population of Scotland since their appointment; that it increases faster than the population, and also faster than the pauperism of the nation, and that the increase is even yet greater in England. In 1840 (I take this date because it is the date of my own acquaintance with this special department of the profession) there were just seven asylums in Scotland, now there are twenty-four, exclusive of eight private establishments and the lunatic wards of more than a dozen poorhouses. Last census made one patient in every 430 of the population; whereas the census before, it was but 530; and lately, I have heard the proportion surmised to be one in 300.

Mental disturbance may arise in various ways by any shock temporarily affecting the nutrition of the brain; but mental disease, properly so called, occurs but in two ways—either directly through alterations in the quality of the blood sent to the brain (a form of disorder which is termed delirium), or by weakening or exhausting of the vitality of the cerebrum, rendering it specially liable to be disturbed in its function by any of the ordinary exciting causes of disease. It is this mode of mental disorder that is meant by insanity, and is the condition whose increase we are bewailing. It is

increasing in all its forms; and if the silence of old observers were not to be attributed to their less developed pathology, it might be thought to be presenting itself in new shapes, and that by a process of evolution we are but moving on an onward course from a simple capacity of rabidities, deliriums, and idiotisms, to that higher position in which sanity and insanity shall scarcely be to be discriminated, both being but different phases of the same unsatisfactory condition. Such is not the case yet; but the disease increases in the population, growing like a malignant fungus living on the decaying vitality of the trunk from which it has parasitically sprung. In every degree it seems to assert itself, from slighter crotchets, crazes, excitements, depressions, and inabilities, to the extremest maniacal paroxysm of fury or the lowest depression of imbecility.

“Membrorum damno major dementia, quæ nec
Nomina servorum, nec vultum agnoscit amici.”*

Why are there so many patients in our asylums? The answer is not ready, nor the cause individually to be pointed at. The history, in almost every sufferer's instance, will tend to the recognition of more than one exciting cause—the fortress giving way before a series of assaults and an array of besiegers; moral disorder enfeebling its defence within; vices of engineering underlying its bases; and physical agencies storming it from without. When a disorder of the mind is attributed to any exciting cause, whether turbulent emotion or noxious influence, that cause is but the last grain that turns the scale, and mayhap but an agency compelling recognition less by innate importance than by accident of time and place. As insanity has many causes operating even in individual cases, its present increase will not probably be found traceable to any single influence which by withdrawal can much lessen the evil.

* Juv. Sat. x. 234.

Insanity is based on a defective vitality of the organ of volition, and though the circumstances or causes are many which set the disorder in movement, its increase—which we are now considering—is due, not to any multiplication or intensification of these, but to a previous deterioration of the cerebrum itself by malign influences, which have affected the individual himself, or his forebears, more frequently the latter; for I do not think that the mischief is due to the error or misfortune of but one generation. The causes which devitalise the nervous system of the individual ultimately, have first injured the race generally, and become apparent in the advancing degeneration of the community. Is there such a degeneration? I am aware that to say so raises a clamour of dissent. Are we not bigger, braver, better, wiser, more long-lived, more everything that is admirable than our ancestors? Does not every authority declare so, except your mere narrow-headed *laudator temporis acti*? Decay of vital force indeed! Do not censuses show increasing rates of population? Do not statisticians and insurance tables declare a longer average life? Are not old pests, plagues, and poxes less fatal? Are not old armour and accoutrements found small for our better fed and more powerful limbs? And, in short, instead of falling away, are we not in a state of evolution and progression? But I for one do not see it. I believe that there is a great increase in diseased and half-invalided conditions; an increase in all diseases of the nervous system, or an increase of the nervous factor in all diseases; that there is an anæmic physiognomy prevalent in all town inhabitants; a readiness to break down under trial; a tendency to be unduly influenced by slight causes; and a degeneration of physical character, as seems to be well recognised by those who enlist for military and naval services, or who require to replace vacancies in the police, or amongst watchmen, warders, and such like. The physical deterioration is thought to be more observable in the male than in the female section of the community, and may be remarked on all occasions which lead to those of similar station being

brought together at kirk, market, or assembly. There is, one might say, a harmonious moral retrogression also, in the ruling selfishness and loss of manliness that can find no pleasure in art, or effort, or sacrifice, but only strives, with any fervour, at such aims as exacting more and more money for worse and worse work, with shorter hours of exertion, and shows less and less respect for all idea of duty. The very movement of women for what is called their rights, so far as it means a wish to be independent of men, is but a deflection of the balance showing loss of weight in the opposite scale.

It is not proposed to discuss, however, at any length, this subject of decay of vitality in the nervous system, but merely to suggest for consideration some of the causes concerned in it. It seems to me that the natural power of the nervous centre in resisting malignant influences is in these days impaired by mistakes in education and training, unsuitable marriages, defective nutrition of the nerve-tissue through poverty, over-indulgence in stimulants—tobacco and narcotics—over-reading, moping and unhealthy habits, unseasonable hours, defective or disordered religious impressions, &c.

There are, according to a late census, more than 10,000 children under the age of five undergoing education in school in Scotland, which means that this small army is daily shut up for hours—the best hours of the day—having the least developed organ in their frame unduly drilled, not in the way in which nature meant it to be developed at such an age—by healthy reception of various natural sensorial impressions—but exhausted in violent efforts of remembering, and premature intellectual endeavourings. The brains most impressible are those which will soonest reach maturity, manifest the least power of resistance to exciting causes of disease, have the most distinct marks of degeneration imprinted on them, and be the quickest to decay. If we wish to have a smaller number of lunatics in future generations, it would be well that at such an age children were as much

as possible brought up in the country, under natural influences and have little taught to them but a recognition of right and wrong, and the habits of obedience and control.

It is not out of place to remark that later in life in certain individuals, under educational stress, the brain acquires a condition of development which seems to indicate high mental power, and which is only an erythism or morbid excitation foreboding premature extinction of activity—the wonderful scholar or University prizeman ending his career in the lunatic asylum. The brain is to be allowed to grow by natural exercise of function, and, until early youth has passed, is not to be stressed by trials of its powers. “How many actual deaths,” says Mr. Ruskin, “are now annually caused by the strain and anxiety of competitive examination it would startle us all if we could but know, but the mischief done to the best faculties of the brain in all cases, and the miserable confusion and absurdity involved in the system itself (which offers every place, not to the man who is indeed fittest for it, but to the one who on a given day chances to have bodily strength enough to stand the cruellest strain), are evils in their consequences and more lamentable than many deaths.” *

Education ought to prevent insanity, and not predispose to it. It is not the cultivation of memory nor the mere acquisition of knowledge that will do so, but readiness, judgment, and control. What, amongst other things, has the increased dissemination of that ability to read and write (which occasionally used to be non-existent, and in very good specimens of humanity too)—what, amongst many other things, has it produced? Frequently, only moping habits, weak-mindedness in practical affairs, and a blameable ignorance of the natural phenomena surrounding animal life. With many, the mind is seriously injured by being fed merely at second hand on books; the efflorescence of cerebral action in the way of individual observation, reflection, and determination of conduct being beaten down by the brain having become but a pathway for other people's ideas to tread.

* *Pors Clavegera*—Letter IX.

Cerebral disease may have its cause in such starvation of the general system as sometimes results out of poverty and neglect, or in the opposite condition of over-indulgence and repletion, the type in the former case being intellectual, in the latter emotional. There would be a population less inclined to insanity if wealth were not possible to be so great, want so extreme, and their social relationship not at the poles of so long a staff.

There are a number of surrounding influences at work conducing to an increase of nervous disorders, into which I have no intention of entering. Customs may be unhealthy, habits bad, and political conditions unfavourable. The habitual use of narcotics, such as opium and chloral, surely brings on degeneration, and ultimately destroys nervous power. Tobacco even, especially when used by those of indoor and sedentary habits and in the excess which idleness encourages, is more important to be noticed as being so much more generally injurious; and here again the same living philosopher might be quoted, in saying that there is no wider spread demoralising agency than this in our day, enabling the young to be self-indulgent of idleness without feeling of its weariness and unhappiness. Vinous stimulants, if they do not always occasion immediate insanity, develop a poisoned state of consciousness in lower degrees of mental confusion and moral obliquity, or in higher grades of delirium, and evolve the tendency to insanity in the future; the drunkard, if not going mad himself, yet causing, it may be, by an evil inheritance, his son or daughter to become so.

A growing tendency to turn night into day is slowly producing a degeneration of vitality in several classes. This subversion of a natural instinct is a modern danger, and did not exist until science so increased our means of conquering darkness by the wide and general employment of gas lighting. For furtherance of transit, for police and other objects, a very large number of the population make night their day, of necessity, to their vital injury. Those who live by amusing others, and those who live to be amused, and who might

choose better, follow the same unsalutary course. At the present time, in London, the Opera does not commence till half-past eight, and fashionable society in mid-summer does not go to bed till long after the sun has risen.

But I must conclude. There are many mistakes in civilised life tending to deterioration of the human being. I have already dwelt long enough on the subject, and shall try your patience no further. However wise we may become, we shall not eradicate the tendency to mental disturbance and the development of insanity. When sin has disappeared, we shall be pure; when ignorance is unknown, we shall be wise; and

“When life is lived, there's no more madness then.”

